Annual report of the Medical Officer of Health for the year 1908 / C. F. Stovin.

Contributors

Ilford (London, England). Urban District Council. Stovin, C. F.

Publication/Creation

1908.

Persistent URL

https://wellcomecollection.org/works/hp73uzt6

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



ILFORD URBAN DISTRICT COUNCIL.

ANNUAL REPORT

: : OF THE : :

Medical Officer of Health

FOR THE YEAR 1908.

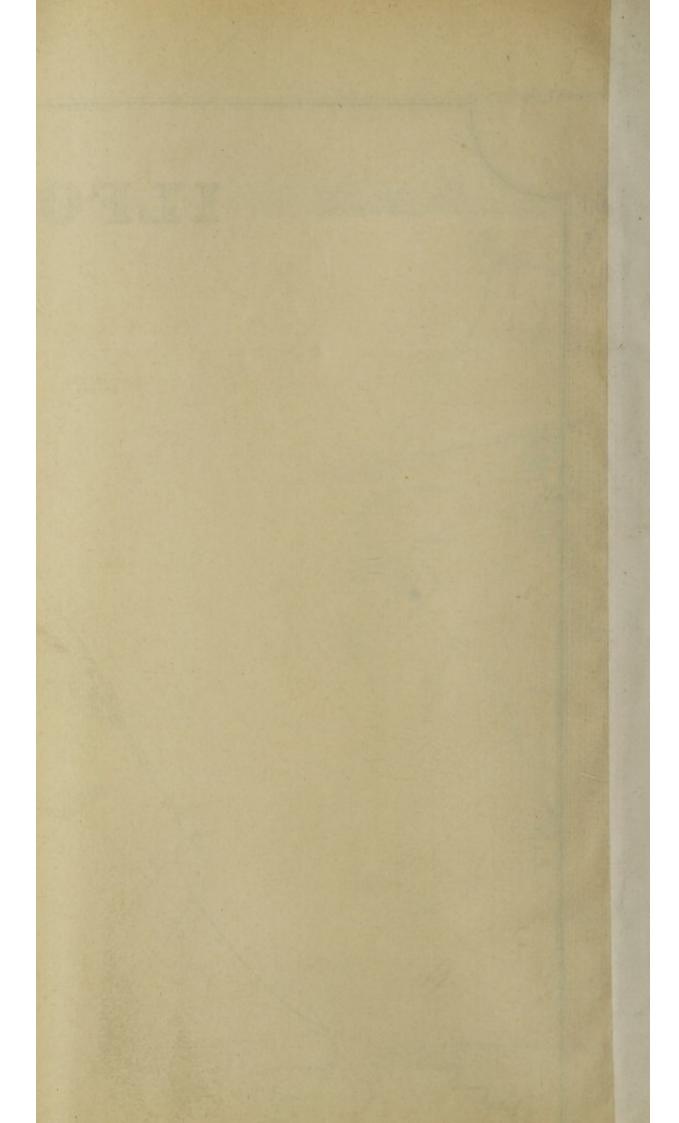
C. F. STOVIN, M.A., D.P.H.,

Medical Officer of Health, and Medical Superintendent of the Isolation Hospital.

> ILFORD: South Essex Recorders, Ltd., Printers.



ILFORD DISTRICT COUNCIL. URBAN MAP SHOWING INCIDENCE OF CERTAIN INFECTIOUS DISEASES DURING THE YEAR 1908.



PUBLIC HEALTH COMMITTEE, 1908-1909.

Chairman:

COUNCILLOR E. REYNOLDS.

Vice-Chairman:

COUNCILLOR W. J. HAMMOND.

COUNCILLOR J. H. SOUSTER, J.P. COUNCILLOR H. M. THORNTON. (Chairman of the Council).

COUNCILLOR P. E. BRAND.

COUNCILLOR GEO. CHURCH. COUNCILLOR W. H. COWL.

(Vice-Chairman of the Council) COUNCILLOR W. J. T. CULLIS.

COUNCILLOR W. EVERETT.

COUNCILLOR W. A. LEE.

COUNCILLOR T. PHILPOT, J.P.

OFFICERS

OF THE

PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health: C. F. STOVIN, M.A., D.P.H.

Chief Inspector of Nuisances: F. W. King, Mem. Royal San. Inst.

Assistant Inspectors of Nuisances:

H. C. Monkcom, Assoc. Royal San. Inst., A.I.S.E.

T. V. Haigh, Mem. Royal San. Inst.

C. W. Fisher, Assoc. Royal San. Inst.

Clerk:

F. J. BULL.

Assistant Clerks:

G. A. Aldous.

F. H. WESTON.

A. A. ROGERS.

INFECTIOUS DISEASES HOSPITAL.

Medical Superintendent:
C. F. STOVIN, M.A., D.P.H.

Matron:
Miss C. A. Barling.

PREFACE.

31st March, 1909.

To the Chairman and Members of the

ILFORD URBAN DISTRICT COUNCIL.

GENTLEMEN,

I herewith beg to present my Eighth Annual Report in accordance with the regulations of the Local Government Board.

I estimate the total population of the district to the mid-year to be 76,295, or, excluding the Public Institutions, 71,221. The death-rate for the year was 8.9, or, corrected for age and sex distribution so as to compare with other districts, 9.6. The deaths include those of Ilford residents dying in London, and in various outside institutions in Essex.

The birth-rate was 23.2, or, corrected for age and sex distribution, so as to compare with other districts, 21.2.

During the year the most important improvements either initiated or carried out in the interests of Public Health, are the following:—

- (1) Medical Inspection of School Children.
- (2) The application to the Local Government Board for a loan for the erection of a dust destructor, and the enquiry subsequently held by one of the Board's Inspectors.
- (3) The erection of an additional block at the Isolation Hospital.

- (4) The provision of means for free bacteriological diagnosis.
- (5) The Fencepiece Road Sewer.
- (6) The Conversion of the Medical Officer from a part time to a whole time Official.
- (7) Improved Water Supply to Padnall Corner and Aldborough Hatch districts.
- (8) Erection of Sanitary Conveniences at Goodmayes and Seven Kings.

So that the Public Health Committee are to be congratulated on their year's record, so far as initiating new improvements are concerned, and the following pages will give some idea of the manifold nature of their duties, together with the way they have been carried out.

The present year should see the adoption of the Notification of Births Act, with the appointment of a capable Health Visitor. Also the provision of a dust destructor.

In conclusion, I wish to express my thanks to the Council for their uniform support; to the officials generally for their assistance; and to the staff of the Health Department I am indebted for steady co-operation and willing help throughout the year.

I am, Gentlemen,

Your obedient Servant,

C. F. STOVIN,

Medical Officer of Health.

CONTENTS.

	PAGE	S.
Physical and Geological Features		12
SECTION I.		
Vital Statistics.		13
Statistical Summary		15
Population		17
Births		19
Deaths		20
Zymotic Death Rate		2 I
Mortality in Age Groups		22
Diagram showing the proportion of the Total	ıl	
Deaths from various Diseases Facing	Page .	22
Inquests		23
Infantile Mortality		23
" " Diagram Facing	Page :	24
Table V. of the Local Government Board		
Facing	Page :	24
Weekly Rainfall for Year	:	25
Table I. of the Local Government Board	. :	26
,, IV. ,, ,, ,, Facing	Page :	26

CONTENTS-continued. SECTION II.

	PA	GES.
Inf	ectious Disease.	29
	Infectious Disease	31
	Scarlet Fever	31
	,, ,, Chart Facing Pag	e 32
	Diphtheria and Membranous Croup	34
	,, ,, ,, Chart Facing Pag	e 34
	Typhoid Fever	36
	Typhoid and Continued Fever Chart Facing Pag	
	Continued Fever	37
	Erysipelas	37
	,, Chart Facing Pag	
	Puerperal Fever	38
	Measles	39
	Chicken Pox	40
	Table III. of the Local Government Board	rip.
	Facing Pag	e 40
	Whooping Cough	40
	German Measles	41
	Mumps	41
	Phthisis	41
	Respiratory Diseases other than Phthisis	48
	Cancer	49
	Table giving Death-Rate from various Infectious	
	Diseases during past 15 years	50
Isol	ation Hospital.	51
	Diseases treated in Hospital	51
3.18	Average stay in Hospital	
	Table of Admissions	53
	Administration	54

CONTENTS. SECTION II .- continued.

PA	GES.
Cost of Maintenance	55
Nursing	55
Disinfection	56
Table of Houses and Articles Disinfected	57
Scarlet Fever	57
Return Cases of Scarlet Fever	58
Diphtheria	60
Typhoid and Continued Fever	60
Erysipelas	60
Woodford Urban Council-Number of Admis-	
sions, etc	61
Table as to Age and Sex of Scarlet Fever patients	
admitted	62
Table as to Age and Sex of Diphtheria patients	
admitted	62
SECTION III.	6-
Schools.	63
Introduction	65
Infectious Disease	66
Scarlet Fever	67
Diphtheria	67
Measles	68
Chicken Pox	71
Mumps	71
Whooping Cough	72
Ringworm	72
German Measles	73
Summary of Infectious Diseases	74
Medical Inspection	75

CONTENTS-continued, SECTION IV.

43100	PAGES.
Sanitary Administration.	81
Food and Drugs Acts	83
Water Const.	84
M:0. C	86
Delahansa	88
Mast C1	89
Vegetable and Fruit Shops	
Offensive Trades	
Festeries	90
W-11 IW 11	90
T-MCII- OF	93
Housing of the Working Classes	37.00
Removal of House Refuse	170
Sewerage and Sewage Disposal	
serverage and servage Disposal III III III	, 90
SECTION V.	
SECTION V.	
Report of Chief Sanitary Inspector.	99
Summary of Journal	. 102
Notices Served	. 103
Nuisances	. 103
Summary of Nuisances	701
Dummary of Truisances	. 104
Drainage	. 104
Drainage	. 104
Drainage	. 104 . 105 . 106
Drainage	. 104 . 105 . 106
Drainage	. 104 . 105 . 106 . 106
Drainage	. 104 . 105 . 106 . 106 . 106

CONTENTS. SECTION V .- continued.

						PAG	GES.
Workshops Ac	ts				 		107
GENERALLY					 		107
Complaints					 		10
Infectious Diseases					 		109
Water Supply					 		109
Housing of the Wo	rking	cla	sses	Act	 		109
Gipsies and Tent D	welle	rs			 		110
Periodical Inspectio	ns				 		110
Cowsheds					 		110
Dairies and M	ilksh	ops			 		III
Bakehouses					 		III
Workshops					 		III
Slaughter-Hous	ses				 		111
Inspection of Food					 		111
Removal of House	Ref	use			 		112
Disposal of House	Refu	se			 		113

PHYSICAL AND GEOLOGICAL FEATURES.

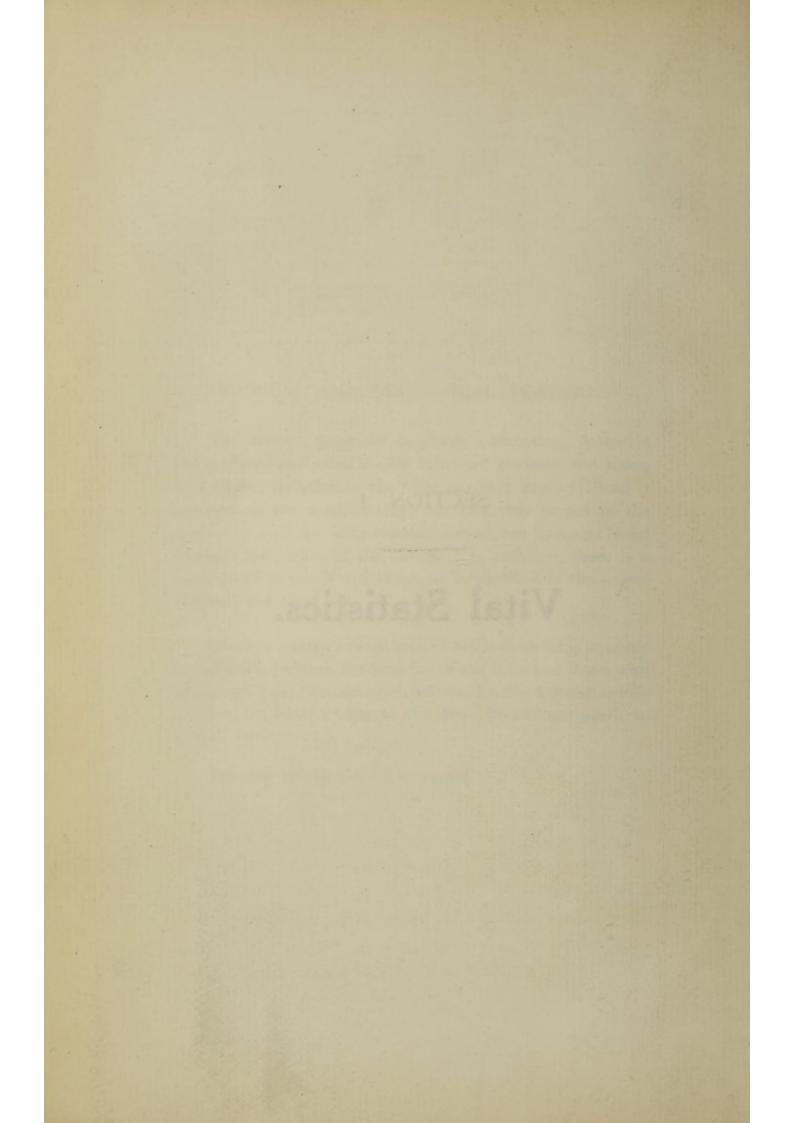
The surface generally is gently undulating, flatter in the southern and more thickly inhabited portions, but rising to a higher elevation in the more northern parts. Ilford is situated on the London clay, but this only comes to the surface as a narrow strip running almost due East and West through the middle of the district. In addition, there is a large patch to the North-West, as exemplified in the names Clayhall and Claybury.

There is a large square area of brick-earth lying roughly in the angle between the junction of the Romford Road with the Ilford Lane, extending down the Romford Road nearly as far as St. Mary's Church, and down Ilford Lane nearly to Uphall Farm.

The rest of the subsoil is gravel.

SECTION I.

Vital Statistics.



STATISTICAL SUMMARY.

Enumerated Population at Census, 1901	41,234
Estimated ,, ,, middle of 1908	76,295
Area of District in Statute Acres-Land	8,470
,, ,, ,, Inland Water	26
,, ,, ,, Tidal Water	7
Density of Population, i.e., No. of Persons per acre	9.0
Average number of persons per acre in great towns	32.4
Total number of births registered for 1908	1,653
Representing a birth-rate of 23.2 per 1,000	
Total number of births registered for 1907	1,711
Representing a birth-rate of 25.4 per 1,000	
Total number of births registered for 1906	1,701
Representing a birth-rate of 26.1 per 1,000	
Total number of births registered for 1905	1,587
Representing a birth-rate of 26.2 per 1,000	
Total number of births registered for 1904	1,548
Representing a birth-rate of 28.6 per 1,000	
Total number of births registered for 1903 Representing a birth-rate of 30.6 per 1,000	1,522
Total number of births registered for 1902 Representing a birth-rate of 29.9 per 1,000	1,334
Total number of deaths registered for 1908	622
Representing a death-rate of 8.9 per 1,000	632
Total number of deaths registered for 1907	619
Representing a death-rate of 9.2 per 1,000	0.9

Total number of deaths registered for 1906 Representing a death-rate of 9.8 per 1,000	645
Total number of deaths registered for 1905 Representing a death-rate of 8.9 per 1,000	549
Total number of deaths registered for 1904 Representing a death-rate of 10.4 per 1,000	563
Total number of deaths registered for 1903 Representing a death-rate of 10.0 per 1,000	498
Total number of deaths registered for 1902 Representing a death-rate of 9.3 per 1,000	415
Total number of deaths from the seven principal Zymotic diseases in 1908	57
Representing a Zymotic death-rate of .8 per	1,000
Total number of deaths from the seven principal	
Zymotic diseases in 1907	55
Total number of deaths from the seven principal Zymotic diseases in 1906	97
Representing a Zymotic death-rate of 1.4 per	
Total number of deaths from the seven principal	
Zymotic diseases in 1905	60
Representing a Zymotic death-rate of 1.0 per	1,000
Total number of deaths from the seven principal	
Zymotic diseases in 1904	
Representing a Zymotic death-rate of 2.2 per	1,000
Total number of deaths from the seven principal	
Zymotic diseases in 1903	
Representing a Zymotic death-rate of 1.3 per	1,000
Total number of deaths from the seven principal Zymotic diseases in 1902	45
Representing a Zymotic death-rate of 1.05 per	2730
representing a Lymotic death-rate of 1.05 per	1,000

Total nur	nber of de	eaths u	nder 1	year				132
Givin	g an infa	antile	mortalit	ty ra	ite	to o	every	
1	,000 birth	is regis	stered o	f 79.8	8.			
Infantile	mortality	rate f	or 1907					78.3
, ,,	,,	,,	1906					109.9
,,	,,	,,	1905		-22			86.9
,,	,,	,,	1904					127.0
"	,,	,,	1903	***				92.6
,,	,,	,,	1902					74.2
Rateable	Value—H	ouses				£38	89,185	10 0
,,	,, La	and ·					7,317	10 0
						£39	96,503	0 0
						£39	96,503	0 0
Inhabited	Houses,	1908				£39	96,503	0 0
Inhabited	Houses,	1908				-	t send	
								14,535
,,	,,	1907						14,535
,,	"	1907 1906						14,535 13,612 13,299
,,	"	1907 1906 1905						14,535 13,612 13,299 12,335
,, ,, ,,	,, ,, ,,	1907 1906 1905 1904						14,535 13,612 13,299 12,335 11,045

POPULATION.

I estimate the total population for 1908 at 76,295. Deducting from this total:—

Dr. Barnardo's Homes	 	 1,370
Claybury Asylum	 ***	 2,709
West Ham Asylum	 	 995
Total	 	 5,074

this leaves a nett population for the district proper of 71,221.

It is arrived at thus:-

Total number of houses in district	15,785
Total number of inhabited houses in district	et 14,535
Total number of uninhabited houses is	n
district	. 1,250

At the Census in 1901 there were :-

Number	of inhabited houses	7,649
Number	of uninhabited houses	721
		-
	Total number of houses	8,370

Since then certificates for new houses have been granted by the Council as follows:—

From March, 1901, to June 30th, 1902	1,545
From July, 1902, to June 30th, 1903	1,226
From July, 1903, to June 30th, 1904	1,270
From July, 1904, to June 30th, 1905	1,174
From July, 1905, to June 30th, 1906	964
From July, 1906, to June 30th, 1907	688
From July, 1907, to June 30th, 1908	548
Making the total for the past year	15,785

The Census gives 4.9 persons per house for Ilford, so that by multiplying the number of inhabited houses by 4.9 gives the population I have taken above.

The calculation of a correct figure for the population of a district of this kind is an exceedingly difficult matter, but I believe the above estimate is fairly accurate, The Registrar General's estimate is 63,705. This, I have little doubt, is decidedly too low, and I think, when the next census is taken, it will probably be so shown; unless, as seems not unlikely, there is a considerable reduction in the number of new houses erected, as in the preceding year, which would tend to approximate the two estimates.

BIRTHS.

The number of births registered during the year was 1,653, giving a birth-rate of 23.2 per 1,000, or a corrected birth-rate of 21.2 per 1,000.

This is the lowest birth-rate for some years.

The increase in the number of births is by no means keeping pace with the increase of population.

						No.	Population.	Rate.
In	1900	the total	No.	of births	was	1,037	34,399	30.0
,,	1901	,,	,,	,,		1,194	39,022	30.5
,,	1902	,,	,,	,,		1,334	44,530	29.9
,,	1903	,,	,,	,,		1,522	49,646	30.6
,,	1904	,,	,,	,,		1,548	54,120	28.6
,,	1905	,,	,,	,,		1,587	60,441	26.2
,,	1906	,,	,,	,,		1,701	65,165	26.1
,,	1907	,,	,,	,,		1,711	66,698	25.4

In face of this exceedingly low birth-rate, it is still more important that every effort should be made to preserve the life of children born, and so neutralise, to a certain extent, this falling rate,

DEATHS.

The total number of deaths registered for 1908 was 836.

The total number of deaths registered for the district, apart from the institutions, was 632.

These include deaths in :--

London Hospital			29
Romford Infirmary			29
Essex County Asylum			7
East London Hospital			3
Middlesex Hospital			3
Guy's Hospital			2
St. Bartholomew's Hospital			2
St. Peter's Hospital			2
Chest Hospital, Victoria Park			2
Bethnal House Asylum			I
Westminster Hospital			1
Metropolitan Hospital ,			1
Peckham House Asylum			1
Children's Hospital, Great Ormond	Str	eet	I
Children's Hospital, Great Ormond Friedenheim Hospital, Hampstead		eet	I
Friedenheim Hospital, Hampstead German Hospital			1
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital			I
Friedenheim Hospital, Hampstead German Hospital			I
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney			I
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney University College Hospital			I I I I
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney University College Hospital South Eastern Hospital			1 1 1
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney University College Hospital South Eastern Hospital Isolation Hospital, Dagenham 22, Old Street, Finsbury			I I I I I I I I I I I I I I I I I I I
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney University College Hospital South Eastern Hospital Isolation Hospital, Dagenham			1 I I I I I I I I I I I I I I I I I I I
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney University College Hospital South Eastern Hospital Isolation Hospital, Dagenham 22, Old Street, Finsbury Liverpool Street Station (G.E. Ry.)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Friedenheim Hospital, Hampstead German Hospital St. George's Hospital Paradise House, Hackney University College Hospital South Eastern Hospital Isolation Hospital, Dagenham 22, Old Street, Finsbury Liverpool Street Station (G.E. Ry.) 86, Gosherton Road, Streatham			I I I I I I I I I I I I I I I I I I I

This gives a death-rate of 8.9 for the year 1908 for the district proper, or a corrected death-rate of 9.6.

The	death-rate	wa	s 9.2 f	or the	e year	1907.
,,	,,	,,	9.8	,,	,,	1906.
,,	,,	,,	9.0	,,	,,	1905.
,,	,,		10.4	,,	,,	1904.
,,	,,	,,	10.0	,,	,,	1903.
,,	,,	,,	9.3	,,	,,	1902.
,,	,,	,,	11.1	,,	,,	1901.

Number of non-residents dying in the district :-

Claybury Asylum	 	 	191
West Ham Asylum	 	 	94
Dr. Barnardo's Homes	 	 ***	14
Total	 	 	299

ZYMOTIC DEATH-RATE.—The number of deaths registered from the seven principal zymotic diseases for the year 1908 was 57, giving a zymotic death-rate of .8 per 1,000.

In previous years it has been as follows:-

1900	 	 70	 	 1.8
1901	 	 110	 	 2.6
1902	 	 47	 	 1.0
1903	 	 66	 	 1.3
1904	 	 120	 	 2.2
1905	 	 60	 	 1.0
1906	 	 97	 	 1.4
1907	 	 55	 	 .8

The seven diseases included in this rate are:-

Diseases.	Deatl 1908		Deaths.
Small Pox	_	 	 -
Measles	6	 	 4
Scarlet Fever	3	 	 5
Whooping Cough	. 8	 	 29
Diphtheria	8	 	 7
Typhoid Fever	-	 	 -
Diarrhœa	32	 	 10
			-
Totals	57	 	 55
	_		

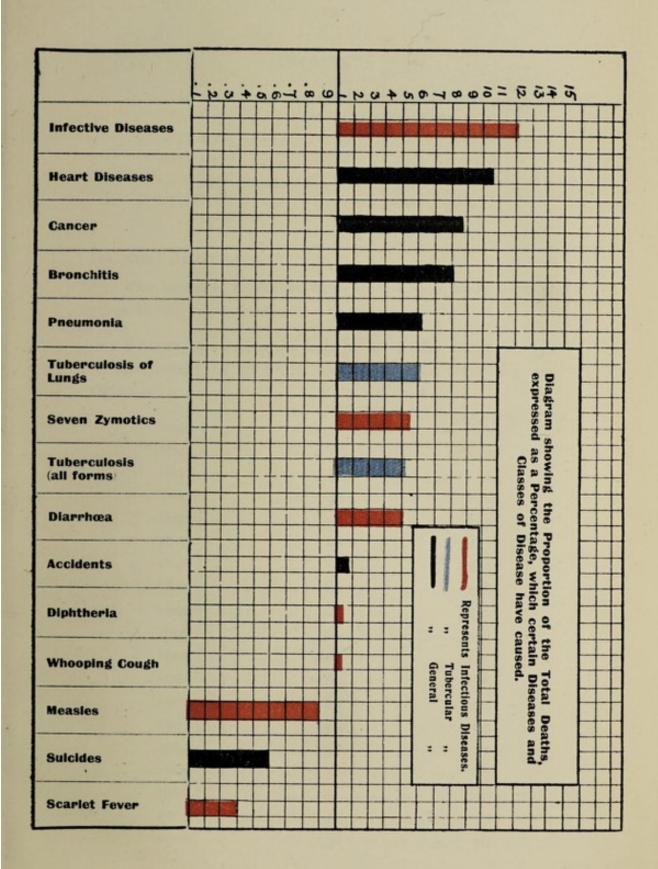
MORTALITY IN AGE GROUPS.

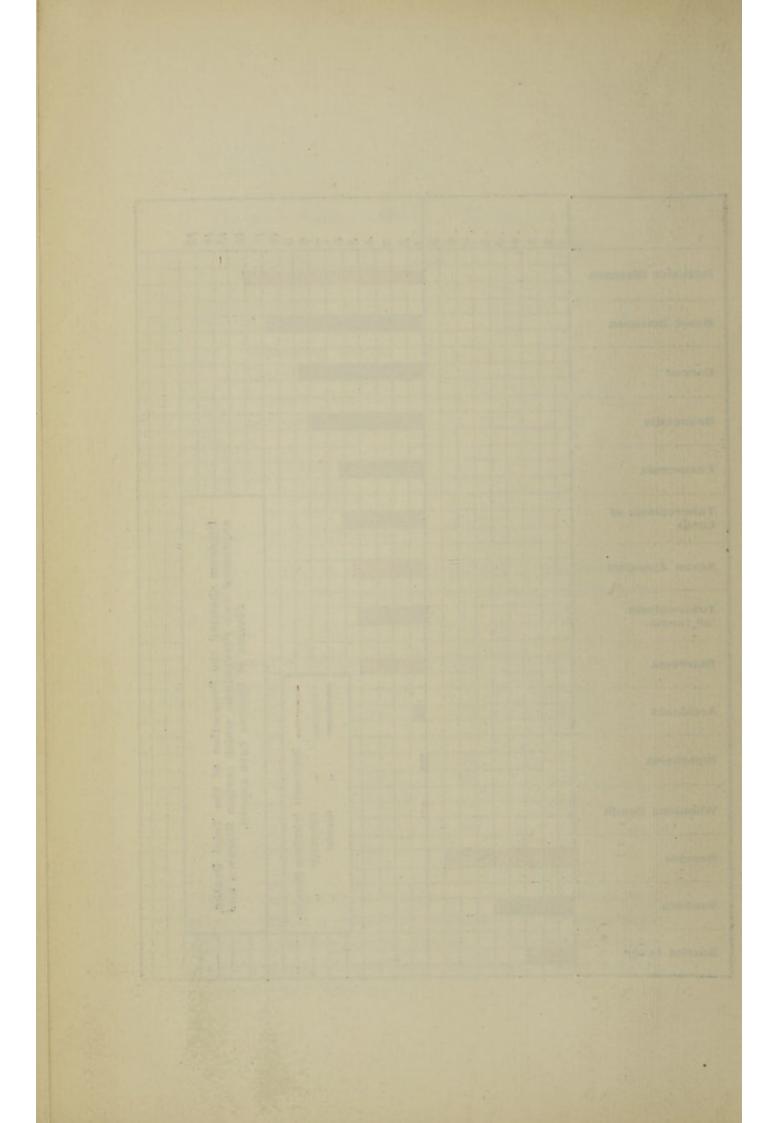
On referring to the table at the end of this section, it will be seen that the greatest number of deaths were between 25 and 65.

Number of deaths occurring at the following ages :-

Year.	Under 1 year.	25 to 65.	Over 65.
1902	99	109	101
1903	141	129	108
1904	198	130	100
1905	138	187	112
1906	187	207	148
1907	134	205	175
1908	132	205	189

This year, for the first time, on the the opposite page, I herewith submit a graphic representation of the percentage of deaths from the principal diseases. The infective diseases include 11 deaths from Epidemic Influenza; in other respects the diagram speaks for itself.





INQUESTS.

In 1902 there were 26 inquests held.

				1.0000000000000000000000000000000000000
,,	1903	,,	46	,,
,,	1904	,,	37	,,
,,	1905	,,	22	,,
,,	1906	,,	41	,,
,,	1907	,,	37	,,
,,	1908	,,	30	,,

INFANTILE MORTALITY.

The infantile mortality rate for the year 1908 is 79 per 1,000 births registered.

I herewith subjoin the number of deaths under one year of age, with the infantile mortality rates since the year 1891:—

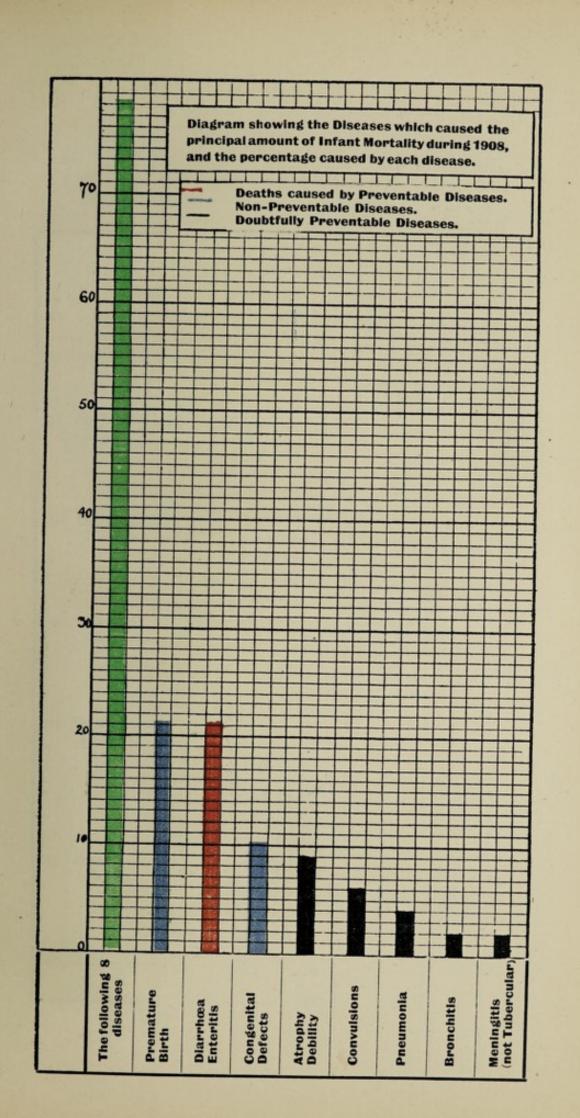
Year.			of Deder 1		per 1,000 Births egistered.
1891	 		38	 	 124
1892	 		49	 	 132
1893	 		43	 	 121
1894	 		49	 	 125
1895	 		58	 	 127
1896	 		61	 	 122
1897	 		88	 	 138
1898	 		107	 	 153
1899	 		120	 	 134
1900	 		147	 	 141
1901	 		187	 	 156
1902	 		99	 	 74
1903	 		141	 	 92
1904	 	,	198	 	 127
1905	 		138	 	 86
1906	 		187	 	 109
1907	 		134	 	 78
1908	 		132	 	 79

It will thus be seen that the past year has been remarkable for the lowness of its infantile mortality rate.

On looking at the rates for these years it will be seen that the first drop below 100 was in 1902, which coincided with the issue of a pamphlet, on Infant Feeding and Care of Infants, to every Mother on the registration of the birth of her infant.

From my own personal experience I am quite sure that a number of deaths amongst infants under 1 year of age is caused by the ignorance of the parent; and in a district like Ilford, where the majority of the parents are not so poor but that they can afford to supply their infants with suitable nourishment, I am convinced that the adoption of the Notification of Births Act, associated with suitable administrative measures, would have a most beneficial effect on the infantile mortality rate of this district, and would probably ensure a normal rate of well below 100.

The accompanying diagram shows at a glance the percentage of deaths, under one year of age, from the various preventable and non-preventable causes.



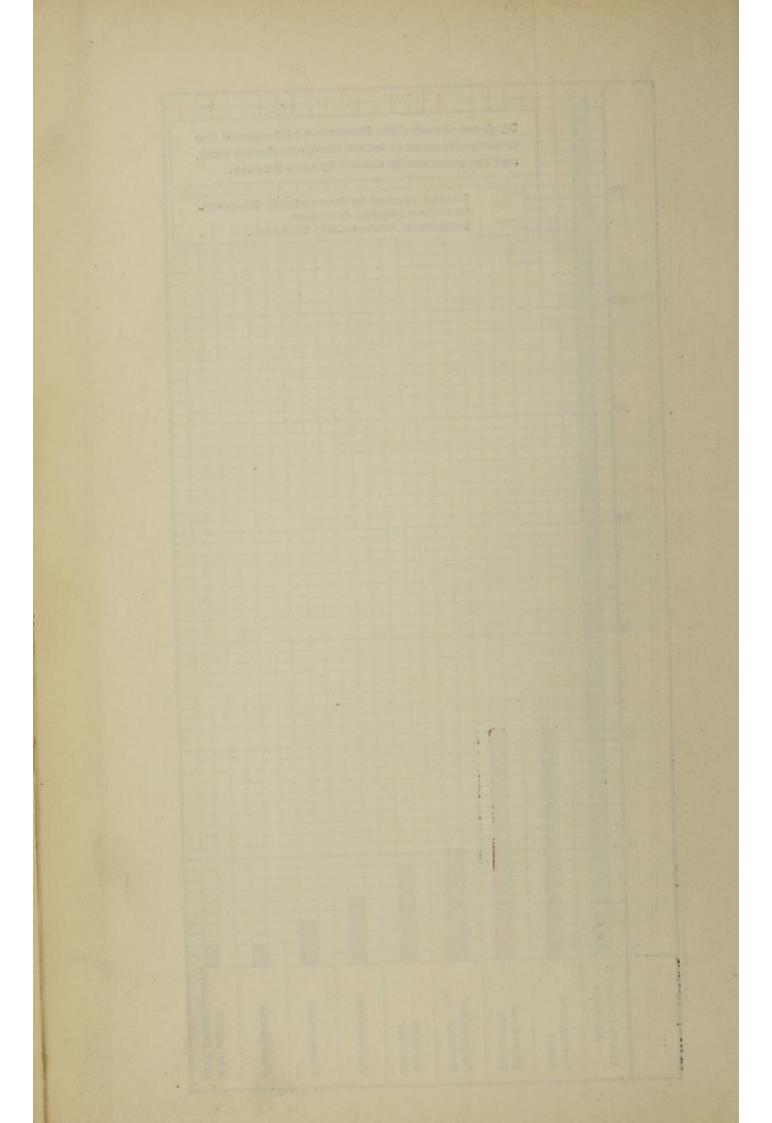


TABLE V.

INFANTILE MORTALITY DURING THE YEAR 1908.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1.2 Weeks.	2-3 Weeks.	3-4 Weeks.	lotal under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Honths.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
i. Common Infectious Diseases. Small-pox Chicken-pox Measles Scarlet Fever Diphtheria (including Membranous Croup) Whooping Cough						1	1111111	<u>-</u> - - 1		- 1 - 1	1111111	111111	11111		111111	- - - 1	1
ii. Diarrhœal Diseases. Diarrhœa, all forms Enteritis, Muco-enteritis, Gastro-enteritis Gastro-intestinal Catarrh			- 1	1 -	1 - 1	1 1 -	1 1 -	1 7 —	3	3 -	1 -	1 1 -	1 - 1	2 - 1	1 -		11 17 3
iii. Wasting Diseases. Premature Birth Congenital Defects Injury at Birth Want of Breast-milk, Starvation Atrophy, Debility,	8 -	2 -		3	28 10 —	3 2 -	2 -	1		<u>1</u>		111	<u>1</u>		1111		29 14 —
iv. Tuberculous Meningitis Tuberculous Meningitis Tuberculous Peritonitis: Tabes Mesenterica Other Tuberculous Diseases	4	1	2 - 1	- - 1	7 - 2	- -	1	1 1		1			1	1 1 1	1		1 2 1 2 4
Frysipelas Syphilis Rickets Meningitis (not Tuberculous)		1111				1 - 1	1	1	1111	1				111			1 2 3
v. Other Causes. Bronchitis Laryngitis Pneumonia Suffocation, overlying Other Causes	1 - 1 5 2	1	_ _ _ _		2 - 2 5 2	1 1	1	1	1 1	1		1 - 1	1	1 1 -	1	- - 2 - 1	9 3 1 6 5 4
Total	39	4	7	5	55	14	7	14	7	9	1	4	6	8	3	4	132

WEEKLY RAINFALL FOR THE YEAR 1908.

W	eek		Rainfall in	W	eek	Daine	-11 -
	ded		inches.			Rainf	
4					ded	ın	ches.
Jan.	4th	 	Nil	July	4th	 	.74
"	11th	 	1.05	,,	11th	 	.22
,,	18th	 	.07	,,	18th	 	3.04
,,	25th	 	.05	,,	25th	 	Nil
Feb.	Ist	 	.21	Aug.	ıst	 	Nil
"	8th	 	.02	,,	8th	 	.06
,,	15th	 	.08	,,	15th	 	.22
"	22nd	 	.74	,,	22nd	 	.65
,,	29th	 	.35	,,	29th	 	1.21
Mar.	7th	 	.48	Sept.	5th	 	.95
,,	14th	 	.II.	,,	12th	 	.16
"	21st	 	.12	,,	19th	 	.17
,,	28th	 	.78	,,	26th	 	.20
Apr.	4th	 	.36	Oct.	3rd	 	.03
"	11th	 	.14	,,	10th	 	.27
,,	18th	 	Nil ·	,,	17th	 	.96
,,	25th	 	.64	,,	24th	 	.12
May	2nd	 	.85	,,	31st	 	.48
,,	9th	 	.46	Nov.		 	Nil
,,	16th	 	.50	,,	14th	 	.30
- ,,	23rd	 	.02	,,	21st	 	.33
,,	30th	 	.43	,,	28th	 	.07
June	6th	 	.92		5th		.10
"	13th	 	.06	,,	12th	 	.61
,,	20th	 	.47	,,	19th	 	.41
"	27th	 	Nil	,,	26th	 	.02
				,,	31st	 	.29
				- 11			

Total rainfall for the year, 20.52 inches.

TABLE I.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1908 AND PREVIOUS YEARS.

ATHS AT	ING TO STRICT.	Rate.	14	10.4	12.6	13.0	11.1	8.6	10.0	10.4	0.6	8.6	85.6		10.3		6.8
NETT DEATHS AT ALL AGES	BELONGING TO THE DISTRICT	Number.	13	276	385	449	434	415	498	563	549	645	619		483		632
blic	n Bu	Deaths of F registered i Institutions the Dist	12	12	13	25	222	30	27	29	75	100	104		43		95
bous	giste	Deaths of residents re and oildud ni id oth ni	11	259	268	231	245	363	357	870	348	375	324		314		299
SUC	ituti	rotal Desiration Total Desiration of the Total Desirat	10	27.1	281	231	245	393	364	383	357	386	335		324		305
RD IN	ages.	Rate.	6	18.8	20.3	17.6	15.4	15.2	16.6	15.6	12.6	18:1	11.6	8	14.8		10.9
EGISTER RICT.	At all ages.	Number.	8	535	650	655	657	748	858	933	822	920	839		758		836
TOTAL DEATHS REGISTERED IN THE DISTRICT.	Under 1 Year of age.	Rate per 1,000 Births registered.	7	153.5	134.0	141.7	156.6	74.2	95.6	127.0	6-98	109-9	78.3		109.6		8.62
TOTAL D	Under 1 N	Number,	9	107	120	147	187	66	141	198	138	187	134		145		132
HS		Rate.	10	26.2	29.6	30.0	30.2	29.9	9.08	28.6	26-2	26.1	25.4	(A)	28.3	Series .	23.2
Rip		Number.	* .	697	895	1,087	1,194	1,334	1,522	1,548	1,587	1,701	1.711		1,322		1,653
Nett Population estimated to Middle of each year.		00	26,468	30,154	34,399	39,022	44,530	49,646	54,120	60,441	65,165	869,99		47,064		71,221	
əlbi	Total Population estimated to Middle of each year,				32,464	87,204	42,622	49,000	54,226	59.700	65,021	69,745	71,278		50,958		76,295
	Увля.			1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	Aver-	for	898	 1908

TABLE IV.

Causes of, and Ages at, Death during Year 1908.

							Danii	and and				100000	-		
Causes of Death,	DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING IN OR BEYOND THE DISTRICT.							Draths at all ages of "Residents" Ward. Loxford Ward. Ward.							DEATHS THER OF BENTS " OR SIDENTS " IN NSTITUTIONS DISTRICT.
	10 All ages.	:- Under 1 year.	+1 and under 5.	er 5 and under	a 15 and under	25 and under	ω 65 and up- wards.	Cranbrook Ward.	0 Park Ward.	E Seven Kings Ward.	North Hain-	Loxford Ward.	Clements-	South Hain- er ault Ward.	TOTAL DEATHS WHETHER OF "RESIDENTS" OR "NON-RESIDENTS" IN PUBLIC INSTITUTIONS IN THE DISTRICT.
0 11	-	-			-		-				-	-		-	
Small-pox	3	$\frac{1}{4}$	4 . 1 4	1 2 -		-		1 1 2	- - 1		- - 1	1 1 1	$-\frac{2}{3}$	- 2 1 -	
Membranous Croup) Croup	1000	_	4	2	2		_		1	2	_	2	_	2	5
Fever Typhus Enteric Other continued	-	_	-	_	-	_	_	_	_	_	_	_	_	-	=
Epidemic Iufluenza Cholera	12.45	1	2	_	=	4	4	3	1	3	_	2	1	1	7
Plague Diarrhœa		11		_	_	_	1	_	5	1	4	2		_	=
Enteritis Puerperal Fever Erysipelas	1	17	-	_	_	1 1	1 -1	$\frac{1}{1}$	3	1	$\frac{2}{2}$	6	2	2	3
Other Septic Diseases Phthisis (Pulmonary Tuber-	5	-	1	1	1	2	_	-	1	-		1	3	-	-
oulosis) Other Tuberculous Diseases Cancer, Malignant Disease	38 33 55	6	15	3	9 3	24 6 27	3 28	6 3 2	11 9 9	4 6	6 1 5	4 5 6	6 5 15	1 2 8	40 9 8
Bronchitis Pneumonia	51 39	3 6	5 9	1 3	3	8 10	34 8	3	12 5	5 7		12 6	11 9	5 4	5 36
Other Diseases of Res- piratory Organs	3	_	_	_	_	2	1	_	_	1	_		1	1	1
Alcoholism Cirrhosis of Liver	8	-	-	-	-	6	2	1		1	2	1	2	1	2
Venereal Diseases Premature Birth Diseases and Accidents of	2 29	2 29		_	_	_	_	6	5	4	_	4	10	_	=
Parturition Heart Diseases	67	3	1	3	4	31	25	9	17	7	-8	9	- 8	3	14
Accidents Suicides	11 4 215	$\frac{5}{42}$	1 7	$\frac{1}{7}$	- 3	2 4 77	79	1 30	1 39	1 28	$\frac{4}{21}$	3 1 26	2 2 50	<u>-</u>	171
All causes	000	132	56	25	25	205	189	73	120	77	58	93	134		
All causes	002	102		20		200	100	10	120	"	90	99	194	47	305

TABLE IV.

This table has been corrected as regards "estimated population" by calculating the ratio of increase of the population year by year from 10,913 in 1891 to 42,622 in 1901; that is, from census to census. Column 8 is thus calculated from the total estimated population in Column 1. All the other columns are calculated from the estimated nett population, that is, not including the populations of the Public Institutions, viz.:—

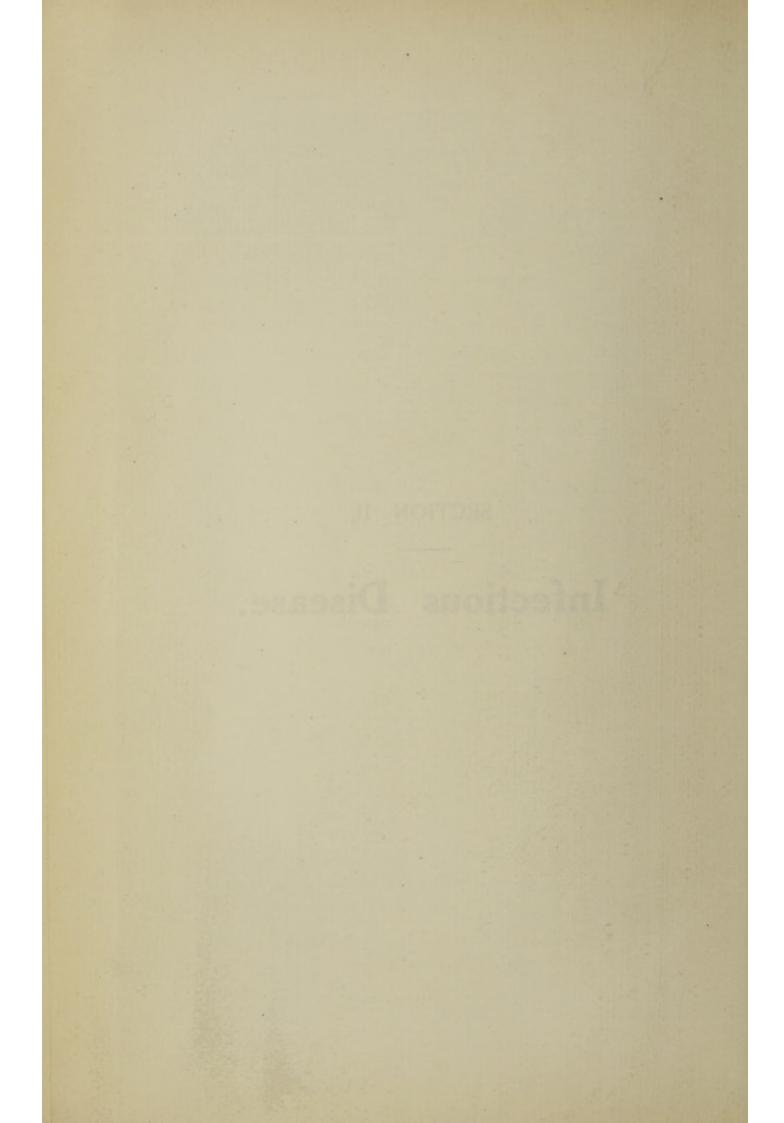
Claybury Asylum, West Ham Asylum, Village Homes, Barkingside.

It will be noticed that for the earlier years the rates are too low; that is due to this method of bringing the populations for the earlier years too high.

This table should be compared with the corresponding table in last year's report.

SECTION II.

Infectious Disease.



INFECTIOUS DISEASE.

During	1908	notifications	were	received of	679	cases.
,,	1907	,,	,,	,,	651	,,
,,	1906	,,	,,	,,	548	,,
"	1905	,,	,,	,,	446	,,
,,	1904	,,	,,	,,	508	3.7
,,	1903	,,	,,	,,	364	,,
,,	1902	,,	,,	,,	738	,,
,,,	1901	,,	,,	,,	437	,,

From institutions in the district the following cases have been notified:-

L.C.C. Asylum, Claybury	. Village Homes, Barkingside.
Scarlet Fever 1	Scarlet Fever 13
Erysipelas 4	Diphtheria 3
	Erysipelas 2

SCARLET FEVER.

		Cases	D	eatl	ıs	Rate pe	er	Per cent. of Cases Notified
1908	 	446		3				.67
1907	 	470		5		.07		1.06
1906	 	326		3		.04		.92
1905	 	288		4		.06		1.38
1904	 	224		5		.09		2.23
1903	 	181	***	2		.04		1.10
1902	 	264		2		.04		.75

Of the cases notified during the year, 13 occurred at the Village Homes and 1 at Claybury Asylum,

It will be seen from these figures that the total number of cases of Scarlet Fever notified in the district is slightly less than last year. The total number of deaths is also less, and it is curious how the death-rate has centred round 0.4 per 1,000 during recent years.

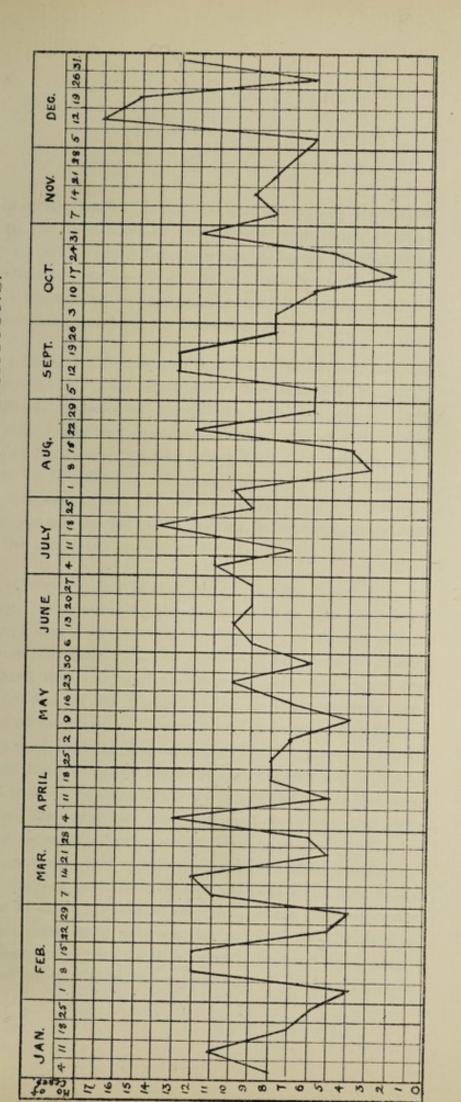
Of the deaths I belonged to the Cranbrook Ward.

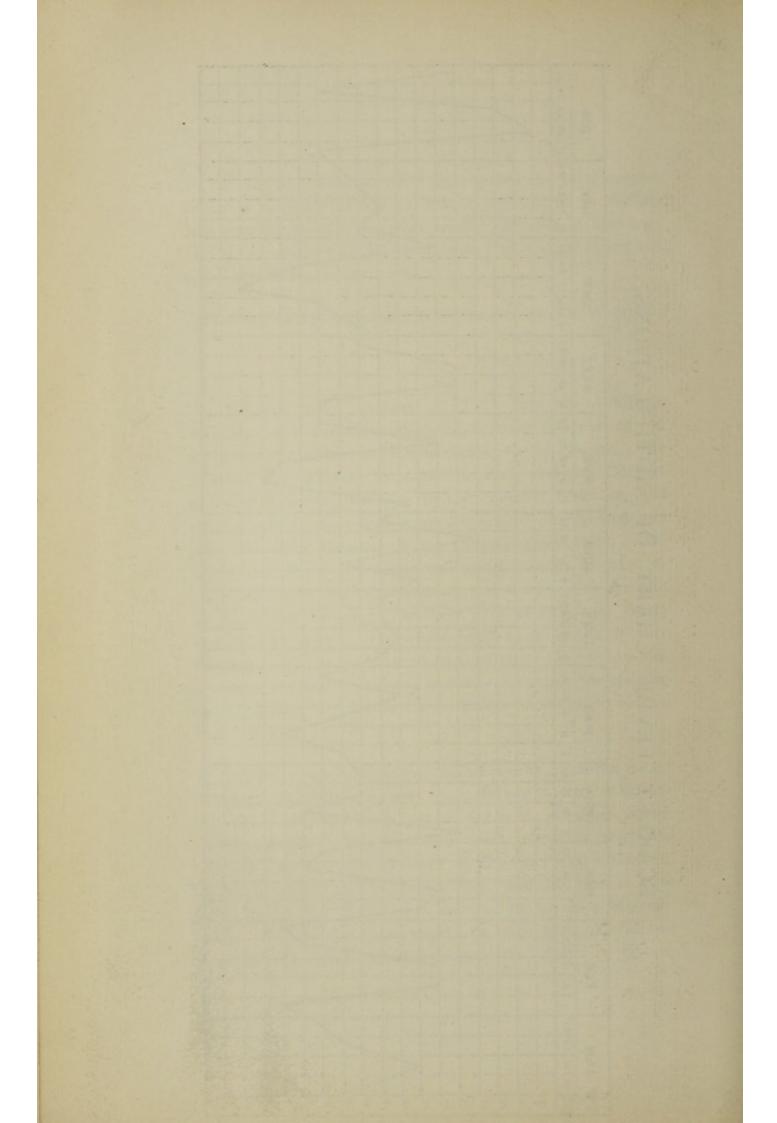
,, ,, , ,, Loxford ,, ,, ,, ,, S. Hainault ,,

Thirteen cases occurred at Dr. Barnardo's Village Homes, and a very interesting experiment was carried out there by Dr. Milne, the Medical Officer to the Homes. The children were allowed to remain in their ordinary Cottage in most instances, sleeping in the common bedroom, and after about 14 days they were allowed to get up and mix with the other inmates of the Cottage downstairs. On several occasions Dr. Milne was good enough to take me round and show me the treatment carried out. For the first 24 hours the throat is swabbed with carbolic oil every two to four hours. The whole body is rubbed with pure Eucalyptus Oil from head to foot twice in the twenty-four hours for the first four days, and once a day for the ensuing ten days, after which time the patient is presumed to be free from infection.

So far as one can judge, the treatment appeared to act satisfactorily; that is to say, there did not appear to be any spread of infection from any of the cases to those subsequently notified. On the other hand, one case that was notified was not detected until peeling was well advanced, probably about the fourteenth day, and no further case appeared in that Cottage, in spite of the absence of treatment. I quote this case merely to show how careful one must be in drawing conclusions about the infectivity, or not,

SCARLET FEVER CHART OF NOTIFICATIONS.





of a case of Scarlet Fever. When everything seems to point to the likelihood of the disease spreading, it does not do so, and another time it seems to infect others in the most wholesale way. Dr. Milne is strongly of the opinion that his method of treatment prevents the development of complications, nose and ear troubles.

Accordingly I carried out this line of inunction, etc., on some dozens of cases admitted to the Isolation Hospital, but without success in preventing complications. This result may have been due to the delay in commencing the treatment incidental to the diagnosis, notification, and removal to Hospital of the cases, though, as a rule, the delay was not great. If, on extended trial, Dr. Milne's contentions are proved to be correct, it would open a new era in the treatment of Scarlet Fever.

It is very curious how persistent Scarlet Fever is in its presence. On examining the chart it will be seen that there was not a single week when the disease was absent, and it is curious how little variation there is from month to month throughout the year until we come to December, when the incidence was at its highest point. The apparent persistence of infection in Scarlet Fever is very extraordinary. One case was notified from a house where a year previously there had been a case of the disease. This second case was notified some three days after handling articles that had been used by the previous case, but had not seen the light between these two occasions. One case that was overlooked gave rise to five others in its immediate neighbourhood. Another case infected four children in its own house and four in another house at the back, where communication had been established between the gardens for the sake of convenience of access to each other's houses. In a neighbourhood of this kind the prevalence of children's parties

about Christmas time, and the close contact of many children in small rooms, has been shown to be a not uncommon cause of the spread of infection. The free intercommunication between the inhabitants of Urban Districts, together with the frequent occurrence of mild cases, make it exceedingly difficult to keep the prevalence of this disease within reasonable bounds.

DIPHTHERIA AND MEMBRANOUS CROUP.

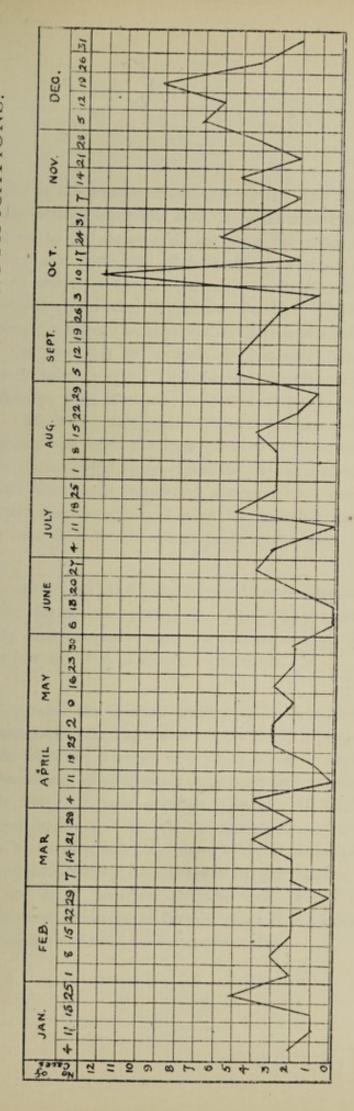
		Cases	Death	s	Rate per	Per cent. of Cases Notified
1908	 	161	 7		.09	 4.3
1907	 	108	 7		.10	 6.5
1906	 	132	 11		.16	 8.3
1905	 	85	 . 4		.06	 4.7
1904	 	181	 10		.18	 5.5
1903	 	95	 14		.28	 14.7
1902	 	86	 8		.17	 9.3

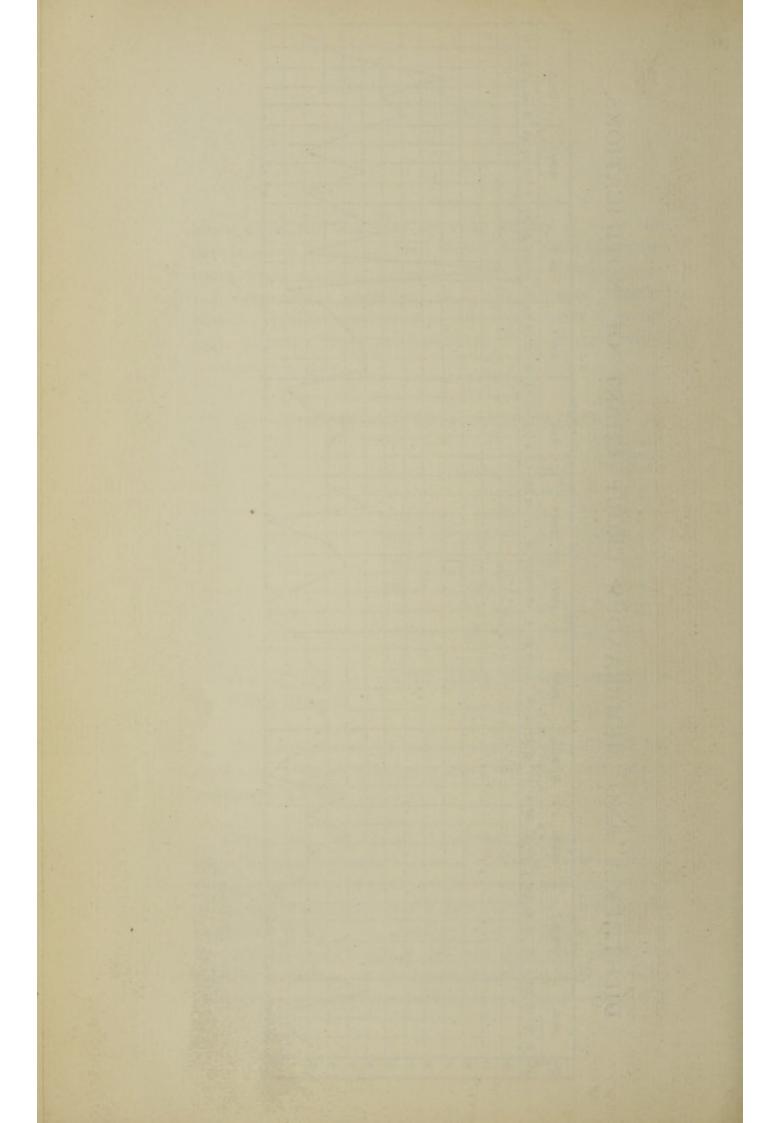
One of the cases notified during the year occurred in the Village Homes.

The total number of cases notified of this disease has shown an increase this past year, but the death-rate is satisfactorily low.

There was, for a time, an undue prevalence of Diphtheria in the Cranbrook Ward, and although one neglected case gave rise to five others in the same house, it is difficult to explain why there should have been so much in this particular Ward. The situation is on a gentle elevation. The houses are of medium size, and none very small; the sanitary conditions, as the houses have only been erected a very few years, are in good order, so that there was nothing

DIPHTHERIA AND MEMBRANOUS CROUP CHART OF NOTIFICATIONS.





in the state of the houses to account for it. The school for the district is comparatively new, is an excellent building, not filled up to its accommodation, and the cases did not come from any particular class-room or division of the school. At one time there were serious complaints of the smells arising from the Wanstead Sewage Works, and several people were of the opinion that there was a connection between the two. It is difficult to conceive how these smells could give rise to Diphtheria, though perhaps in some unknown way they may assist in the growth of the However, now that Wanstead have completed bacillus. their scheme, and have the new portion of their works in operation, there should be no cause for any of the objectionable smells that were certainly prevalent at one time. Doubtlessly the County will give its valuable assistance in seeing that these works are properly managed.

Free use of the Antitoxin supplied by the Council has been made during the year, and the low death-rate is doubtlessly thus accounted for. At the same time, the type of disease has not been of a severe character.

In November the Council decided to provide free facilities for bacteriological diagnosis. Accordingly arrangements were made with Dr. Thresh, and since it was inaugurated, to 31st December, 10 specimens have been sent to him, with the result that six gave positive presence of Diphtheria bacillus, and four negative. At the same time, it cannot be too much borne in mind that, though the positive result is definite and satisfactory, the absence of the bacillus in the swab is not proof positive that the case is not one of Diphtheria, and therefore in certain cases it is desirable to have a second swab sent up for confirmation.

· TYPHOID FEVER.

		Cases	Deaths	Rate per	Per cent. of Cases Notified
1908	 	12	 Nil	 Nil	 Nil
1907	 	10	 Nil	 Nil	 Nil
1906	 	35	 1	 .01	 2.85
1905	 	22	 4	 .06	 18.18
1904	 	32	 4	 .07	 12.5
1903	 	28	 2	 .04	 7.14
1902	 	61	 7	 .15	 11.47

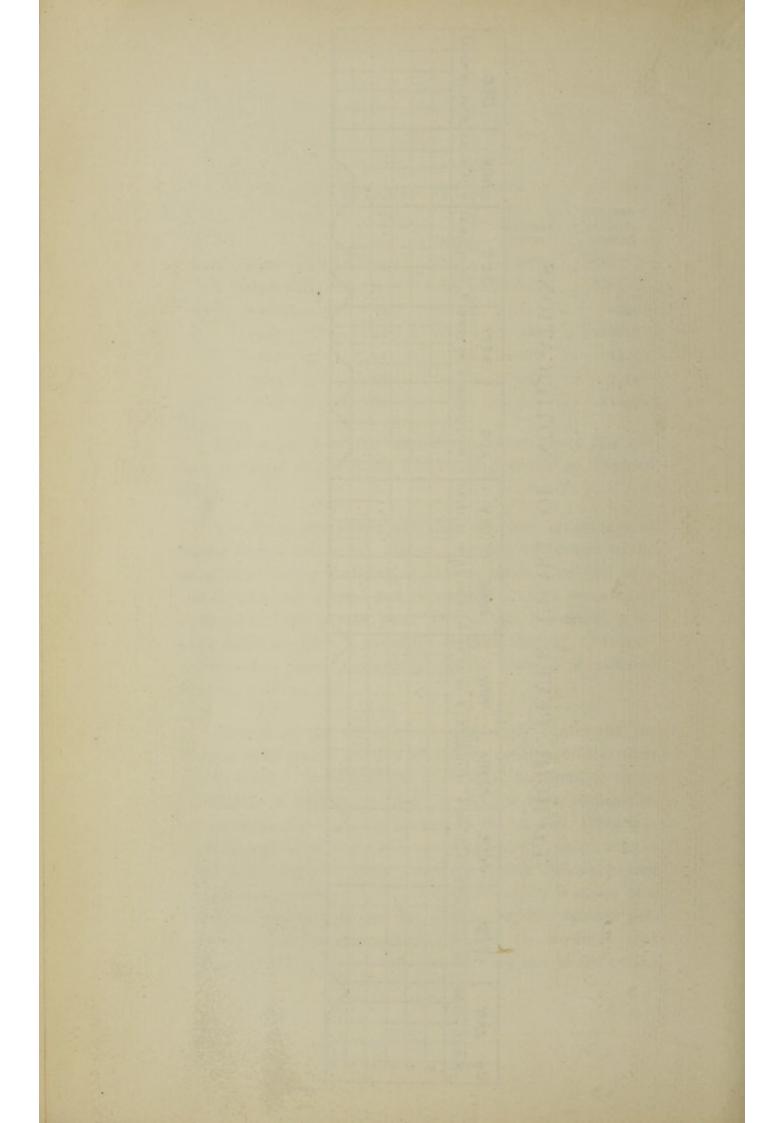
This makes now the second year when there has not been a single death in the district attributable to Typhoid Fever.

This small prevalence well illustrates the advantages of Public Health measures. Before attention was drawn to the dangers of eating shell-fish of various kinds, that had been laid in polluted waters, and before the present precautions were taken, not a year went by but that numerous cases were notified within a fortnight of their visiting "health" resorts, and there succumbing to the charms of polluted oysters, cockles, etc.

Several of the above cases apparently contracted the disease while away, and the symptoms developed after their return home. In three of the cases there appeared to be no possibility of explaining how the disease was contracted. In one house, in the rural portion of the district, there was a case notified during the past year, one in 1905, one in 1901, and the mother some years previously. There appeared to be no accounting for this, unless it was an instance of a "carrier" case, one of the earlier patients having persistence of the specific organisms, and so in some way infecting the later ones; the mother being one of the earlier

TYPHOID FEVER CHART OF NOTIFICATIONS.

	31						
	32027 4 11 18 25 1 8 15 22 29 5 12 19 x6 3 10 17 24 31 7 14 21 28 5 12 19 26 31						
vi	0		177		-		
DEC.	2						
7	-		-				
	S		- 22				
	d						
NOV.	7						1
NO	*						
	7						1
	3						1
	4						
1:	7					-	/
OCT	-						1
0	-					-	/
	2						1
	36						
ld.	6	1		10			
SEPT	12						1
	5						
	50						\
	2						>
17	50						1
AUG	-						
A	a						1
	-						
	25				1		
JULY	18						
101	=						
100	+						
	73						
W	9						
JUNE	3 2						
7							
	0						1
	n						1
	23						
MAY	16					0/8	
Σ	6						
	2			1			
	52	110					
71	00		-				
R	-			-	-	-	
APRIL	-			-	-		
	4						1
	22	-					1
K	N						1
MAR.	8 15 22 29 7 14 21 28 4 11 18 25 2 9 16 23 30 6						
	1						
	29	13					
300	22	17					189
FEB	5		-			-	7
FE	-			-	-	-	-
	a				-		
	-						/
	3			_		-	1
Z	18						1
JAN.	1 18 25 1						
-	4						
\$00	25	-5	4	Y	101	4	0
	40000	-					



cases, and not unlikely acting as infecting agent to the subsequent ones, her children.

On August 29th a case of Typhoid Fever was notified, and on enquiry it was found that the patient had just returned from Littlehampton. The family had been there for a holiday, and, after staying a week, one of the children was removed to the local Isolation Hospital with this disease. After an interval of another week, part of the family returned home, and with them came one of the maids. The case was notified here on August 29th, a day or two after their return.

Another maid was notified on September 1st, and this latter had never been away at all. It was most difficult to suggest a cause. All the ordinary methods and vehicles of infection were excluded, and it seemed to me probably a case of common infection from food; but, unfortunately, nothing definite could be discovered. Both patients were admitted to the Isolation Hospital, and made good recoveries.

CONTINUED FEVER.

Two cases were notified as Continued Fever, and both were removed to the Isolation Hospital. One died from Tubercular Meningitis, which was confirmed by postmortem.

ERYSIPELAS.

During 1908 there were 56 cases of this disease notified, with three deaths. A comparison with the previous six years is here given:—

	C	ases	I	Deaths	Rate pe	r In	Per cent. of Cases Notified
1908	 	56		3	 .04		5.35
1907	 	60		2	 .02		3.33
1906	 	52		1	 .01		1.92
1905	 	48		3	 .04		6.25
1904	 	56		1	 .01		1.78
1903	 	49		Nil	 Nil		Nil-
1902	 	67		4	 .08		5.97

The number of cases notified is seen to be slightly lower during the past year, and the number of deaths slightly higher.

The variation in the severity of the type of the disease varies enormously, and certain people seem very susceptible to it, attacks coming on every year or two, or at intervals.

PUERPERAL FEVER.

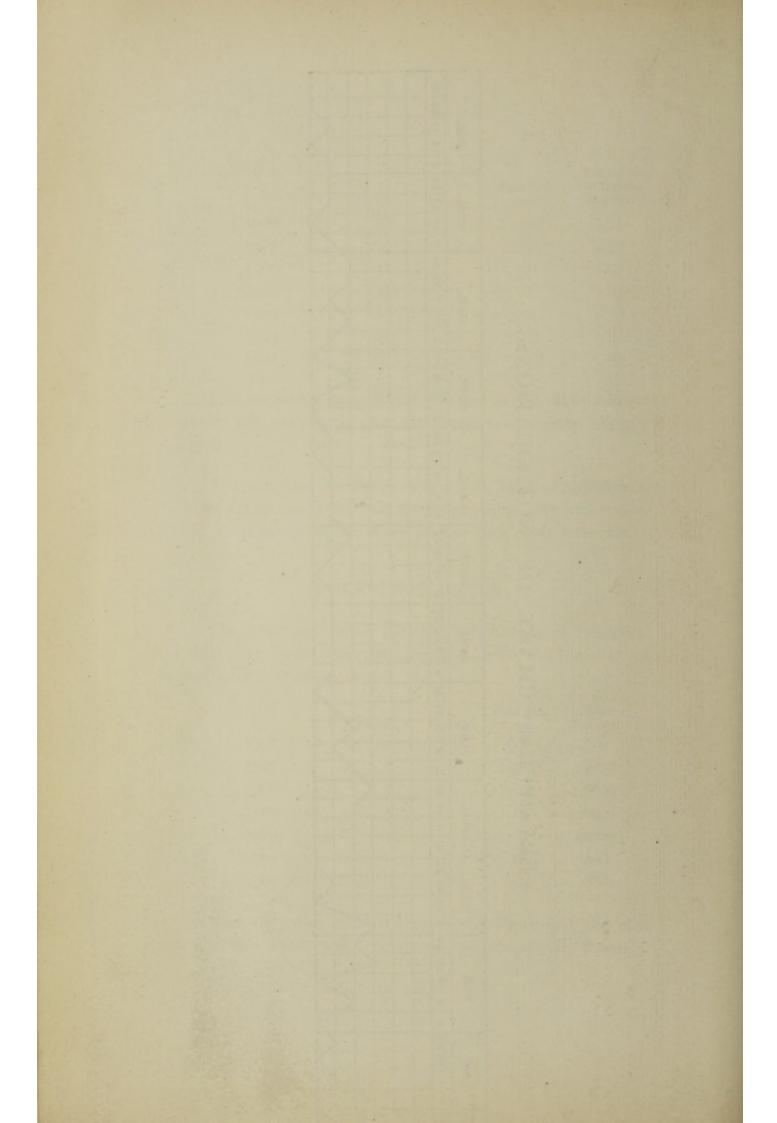
The following shows the number of cases of Puerperal Fever that have occurred, together with the number of deaths, and death-rates:—

	Ca	ises	1	Death	s	Rate pe	r	Per cent. of Cases Notified
1908	 	2		Nil		Nil		Nil
1907	 	2		1	***	.01		50.0
1906	 	3	***	2		.03	***	66.6
1905	 	3		3		.04		100.0
1904	 	4		4		.07		100.0
1903	 	2		I		.02		50.0
1902	 	3		2		.04		66.6

Both the cases notified recovered. There was one case where the death was registered as Puerperal Pyœmia,

ERYSIPELAS CHART OF NOTIFICATIONS.

JAN. FEB. MAY JUNE JULY AUG. SEPT. OCT. MOV. DEC.	-	-		-	_	_	_			
JAN. FEB. MAY JUNE JULY AUG. SEPT. OCT. NOV. DEC.	1	31		-						
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. NOV. DEC.		92		1	1		T	1	1	-
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. NOV. DE 11 1825 1 9 1522 29 5 12 1928 3 10 1724 31 7 1421 28 5 12	0	0	1	1	+		1	1	1	1
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. NOV.	DE	2	1	+	1		+	+	1	1
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. NOV.	1	5	+	+	+		+	+	1	1
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. NOV.	-	100	+	+	+	-	+	+	+	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. NOV.	1	12	+	+	-		1	+	+	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT. 0 4 11 1825 1 9 15 22 29 7 14 21 22 4 11 18 25 2 9 14 23 30 6 13 20 27 4 11 18 25 1 8 15 22 29 5 12 19 28 3 10 17 24 31 7 11	100	12	4	+	-		1	-	1	+
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT.	1 =	1	+	+	-		+	-	-	1
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT.	-	1	1	+	+	-	-	1	4	-
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT.		m	-	+	+		-	1	-	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. OCT	1	2	+	+	-			1	1	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT. 0 4 11 1825 1 9 15 72 4 11 18 25 2 9 16 23 30 6 13 20 27 4 11 18 25 1 8 15 22 23 5 12 19 24 3 10	CT	17	1	+	1		-	1	4	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT.	0	10	1	1				K		
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT.		10	L						X	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEPT.		26							J	>
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG. SEI # 11 1825 9 16 23 30 6 13 20 27 7 11 18 25 1 8 16 22 29 5 12 11 1825 9 15 22 29 5 12	1	6						K		
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG.	35	-17						T	1	1
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG.	٧,	5	T					1		1
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG.		3	T	T	T	I		T	K	
JAN. FEB. MAR. APRIL MAY JUNE JULY AUG.		2	1	T	1	1	-	1	1	>
JAN. FEB. MAR. APRIL MAY JUNE JULY AU \$ 11 1825 1 8 15 22 29 7 14 21 22 4 11 18 25 2 9 14 23 30 6 13 20 27 7 11 18 25 1 8 1	÷	10	-	1	+		-	1	1	
JAN. FEB. MAR. APRIL MAY JUNE JULY 1/1825 1 9 16 23 30 6 132027 7 11 1825 1 1	40	00	-	-	+		-	-	1	-
JAN. FEB. MAR. APRIL MAY JUNE JULY 1/1825 1 8/15/22/27 7 11/1825 1 8/15/22/27 7 11/1825		-	1	+	+		-	-	+	
JAN. FEB. MAR. APRIL MAY JUNE JULY # 11 1825 1 9 16 23 30 6 13 20 27 7 11 18 2		10	-	-	+		-	1	4	
JAN. FEB. MAR. APRIL MAY JUNE JULY # 11 1825 1 9 23 30 6 132027 7 11 11	1	12	-	-	+	1	-	1	-	
JAN. FEB. MAR. APRIL MAY JUNE JU.	7	2	-	-	+		777	-	1	
JAN. FEB. MAR. APRIL MAY JUNE 4 11 1825 1 9 15 22 29 6 23 30 6 13 20 27 4	35	=	-	-	1			-	1	X
JAN. FEB. MAR. APRIL MAY JUNE 4 11 1825 1 9 15 22 29 7 14 21 22 4 11 18 25 2 9 14 23 30 6 13 20 27		+		1	1				1	
JAN. FEB. MAR. APRIL MAY JUNE 4 11 1825 1 9 15 22 30 6 13 20		7			1				L	
JAN. FEB. MAR. APRIL MAY JU. 4 11 18 25 1 9 16 23 30 6 13	2	20							L	
JAN. FEB. MAR. APRIL MAY 4 11 1825 1 9 1522 29 7 19 21 22 4 11 18 25 2 9 16 23 30 6	20	13			1					
JAN. FEB. MAR. APRIL MAY 4 11 18 25 1 9 15 22 30 7 14 21 22 4 11 18 25 2 9 14 23 30		9							1	
JAN. FEB. MAR. APRIL MAY		8								K
JAN. FEB. MAR. APRIL MAY		3						1	1	1
JAN. FEB. MAR. APRIL M.	X				1	1	-			1
JAN. FEB. MAR. APRIL 4 11 1825 1 9 15 22 29 7 14 21 22 4 11 18 25 2	Z	0				1		1	1	1
JAN. FEB. MAR. APRIL 4 11 1825 1 9 15 22 29 7 19 21 22 9 11 18 25		2			1	1	-	1	-	1
JAN. FEB. MAR. APRIL.		5			-	t	1		-	1
JAN. FEB. MAR. APRI 4 11 1825 1 9 15 22 29 7 14 21 22 4 11 1	-1	90			1	f	1		-	+
JAN. FEB. MAR. AI	136	-			-	+			-	1
JAN. FEB. MAR.	The last	10		-		+		-	1	1
JAN. FEB. MAR.		59		-	-	+		-		1
JAN. FEB. MAI		24	-	-	-	+		-	1	7
JAN. FEB. F.	A	7			-	+			1	1
JAN. FEB.	3	-	-		-	+	-	-	-	7
JAN. FEB.		-		-	-	1	-			-
JAN. FEB.		25		-	-	+	2			1
JAN. FEB		85		-		千	-	-		1
JAN. F	63	15				1			2	1
JAN.	TT.	Ca		115		1	1	<		1
JAN.		-				I			>	1
JAN.		25				T		-	1	1
45 = 1	;	00				1	1		>	-
4	A	=		-		+	1	1	1	1
	1	4	-			L	1	-		



Venous Thrombosis, Parturition three days. The Medical Practitioner, however, did not consider it a case of Puerperal Fever, and therefore it is not included in the notifications.

MEASLES.

373 cases of Measles have been reported from the schools and other sources during 1908. Six deaths have occurred from the disease, giving a death-rate of .08 per 1,000 persons living.

A comparison with previous years may be seen from the following:—

In 1898,	425 cases	were	notified, wi	th 5 de	eaths, or	Per rate o	r 1,000
,, 1899,	467	,,	,,	12	,,	"	-39
,, 1900,	326	,,	,,	2	,,	,,	.05
,, 1901,	805	,,	,,	5	,,	,,	.12
,, 1902,		,,	,,	3	,,	,,	.06
,, 1903,	684	,,	. ,,	10	23	,,	.20
,, 1904,	1138	aı	nd reported	17	,,	,,	.30
,, 1905,		,, 1	eported	3	,,	,,	.05
,, 1906,		,,	,,	5	,,	,,	.07
,, 1907,		,,	,,	4	,,	,,	.05
,, 1908,	373	,,	,,	6	,,	,,	.08

During the year, the number of cases reported has been rather more than half the number reported the year before, but the death-rate is slightly higher.

In 1904 Measles was removed from the schedule of the Infectious Diseases (Notification) Act, after being in operation eight years.

From the figures given above, it will be seen that, with the present system of reporting by the Teachers and Attendance Officers, the results are no worse, to say the least, than when this disease was scheduled. The death-rate has not gone up, and the numbers reported show that we get information of most of the cases.

The result of school closure in this district, for two schools, is given in the Schools Sections page 69.

CHICKEN POX.

This is a disease prevalent during school life, and other particulars will be found on page 71.

During 1905, 423 cases were reported.

```
,, 1906, 263 ,, ,, ,,
,, 1907, 82 ,, ,, ,,
,, 1908, 466 ,, ,, ,,
```

WHOOPING COUGH.

During 1908, 183 cases were reported, with eight deaths, giving a death-rate of .11 per 1,000 persons living.

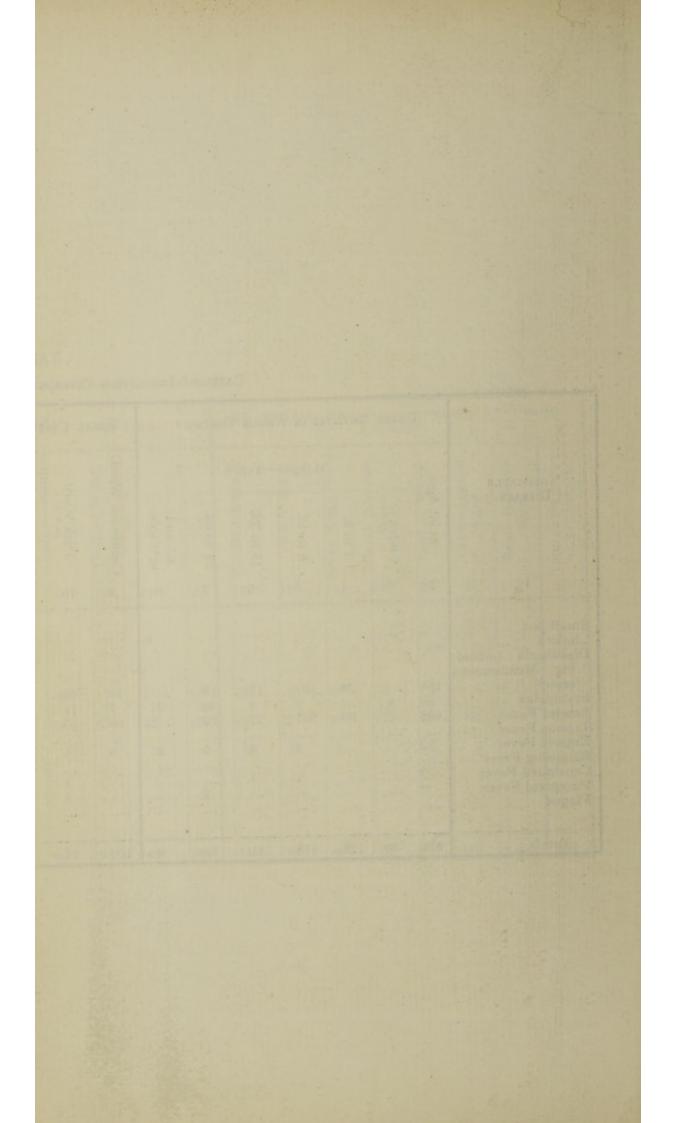
							Per 1	,000
In	1907	there were	29	deaths,	giving a	death-rate	of	.43
,,	1906	,,	11	,,	,,	,,		.16
,,	1905	,,	14	,,	,,	,,		.23
,,	1904	,,	8	,,	,,	,,		.14
,,	1903	,,	19	,,	,,	,,		.30
,,	1902	,,	3	,,	,,	,,		.06
,,	1901	,,	21	,,	,,	,,		.53

The death-rate from this disease has been smaller during the past year than for some time previously. The greatest prevalence was in October and November. In November the weather conditions were not so favourable, and the death-rate went up in that month.

TABLE III.

Cases of Infectious Disease Notified during the Year 1908.

	C	ASES	Notifi	ED IN W	HOLE I	DISTRIC	т.	Тот	AL CAS	es Not	IFIED II	N EACH	LOCAL	ITY.	No. of Cases Removed to Hospital from Each Locality.							
Notifiable	Ages.		1	At Ages	Year	s.		Ward.	rd.	Ward.	nault	ard.	poor	ault	Ward.	rd.	Ward.	ault	ard.	poor	Hainault ard.	ses remov- Hospital.
DISEASE.	At all Ag	Under 1,	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Cranbrook 1	Park Ward.	Seven Kings Ward	North Hainault Ward.	Loxford Ward.	Clementswood Ward.	South Hainault Ward.	Cranbrook V	Park Ward.	Seven Kings Ward	North Hainault Ward.	Loxford Ward	Clementswood Ward.	South Hair Ward.	Total cases r
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Small-pox Cholera Diphtheria (includ- ing Membranous																				***		
croup) Erysipelas Scarlet Fever	161	 4 2	29 90	107 7 301	15 4 27	10 38 26	3 	70 7 80	20 11 37	20 4 47	6 15 26	17 7 67	15 7 122	13 5 67	27 32	9 27	10 30	6	10 1 53	6 92	11 51	75 1 296
Typhus Fever Enteric Fever Relapsing Fever Continued Fever	10			2	4	3	3	3	ï	2	ï	ï	3	ï	2	ï ï	ï	ïi 	ï	2		
Puerperal Fever Plague						2			1	i												
Totals	679	6	119	418	51	79	6	160	71	74	48	92	148	86	61	38	4014	19-18	65	101	62	386



GERMAN MEASLES.

77 cases have been reported from the schools during the year.

MUMPS.

29 cases have been reported from the schools during the year.

PHTHISIS.

T							Per 1,000 Persons
In	1901	there were	19	deaths	giving	a death-rate	of .48
,,	****	,,	32	,,	,,	,,	.71
,,	1903	,,	36	,,	,,	,,	.72
,,	1904	,,	33	,,	,,	,,	.60
,,	1905	,,	38	,,	,,	,,	.62
,,	1906	,,	37	,,	,,	,,	.56
,,	1907	,,	48	,,	,,	,,	.71
,,	1908	,,	38	,,	,,	,,	.53

During the year the question of Tuberculosis has been receiving a good deal of attention.

An important congress was held at Washington, which was attended by Dr. Thresh, and in a memorandum he expresses the following opinions as a result of his visit:—

- (1) "That the infectivity of Phthisis is very slight indeed until the advanced stage when the patient expectorates excessively. As a consequence there is little danger in the earlier stages to other members of the family, friends, workmates, etc., if reasonable precautions are taken."
- (2) "That sanatoria or isolation shelters for advanced cases are highly desirable both in the interest of the patients and of the public."

- (3) "That the earlier cases can very frequently be treated at home, in temporary shelters placed in yards or gardens, or in specially adapted rooms, especially where tuberculosis dispensaries are provided. (Vide Tuberculosis in New York City.")
- (4) "That the Medical Inspection of School children will bring to light many very early cases, which, if properly treated, will have an excellent chance of recovery."
- (5)" That Tuberculosis is not nearly so frequently due to the use of milk from Tubercular Cows as was at one time believed, and that the disease is very rarely due to the consumption of the flesh of tubercular animals."

Professor Koch, who attended the Congress, still holds that the disease is so rarely transmitted from animals to man that the possibility may practically be ignored. The general concensus of opinion, however, was strongly against this view, and the guarding of our milk supply against infection was repeatedly insisted upon.

- (6) "That compulsory notification of Phthisis is desirable and that it should be scheduled as a dangerous infectious disease, when the Sanitary Authority could exercise such supervision as may be necessary and disinfect all apartments which have been occupied by a Consumptive. The Sanitary Authority could also supply suitable receptacles for sputum and assist in providing dispensaries where the patients could receive treatment and advice free of charge."
- (7) "That increased attention should be given to overcrowding of houses on space and of persons in

houses, and over the erection of houses, to ensure that they are on dry foundations and are otherwise well adapted for human habitation."

Also, too, a very exhaustive and interesting report by Dr. Bulstrode on Sanatoria for Consumption, and certain other aspects of the Tuberculosis question to the Local Government Board has been issued during 1908.

Dr. Bulstrode calls attention to the importance of the following conditions:—Poverty with its attendant conditions, under-feeding, overcrowding, deficiency of light, of ventilation, of cleanliness, occupations involving the inhalation of sharp dust-particles, dampness of soil, and alcoholism, as well as an undue incidence of such diseases as Measles and lung-diseases, which predisposes the patients to new infection or to the maturing of an old latent Tuberculosis.

Dr. Niven is quoted as to the direction in which we may hope to reduce Tuberculosis most effectually, viz.:-

- (1) "The improvements in physique of the population, especially of those persons especially exposed to tubercular infection, and by the diminution of those diseases and conditions which predispose to Phthisis."
- (2) "By the removal of dirt from the neighbourhood, and from the interior of habitation:"
- (3) "By the removal of the specific infecting matters of Tuberculosis."
- "Where notification is in force in addition to facilities for the examination of sputum and a general prohibition relative to promiscuous spitting may be included such measures as the repeated and fre-

quent visits of trained inspectors to the house from which the Phthisis case is notified; the giving of the obviously necessary advice as to the importance of fresh air, rest and nutrition, and the supply of spitting-flasks by the Inspector; the use of destructible handkerchiefs or substitutes therefor during expulsive expiratory efforts; the setting aside, where practicable, of one room for the sole use of the patient; and periodical cleansing and disinfection of the premises, together with the routine employment in the invaded house of wet-dusting in place of drydusting."

Dr. Bulstrode considers that notification of the disease will be acceptable, or the reverse, to the public, according as definite assistance is customarily afforded to sufferers by the malady, and he cites the experience of Brighton as indicating that where obvious in a social sense as the result of being found phthisical, a system of voluntary notification will probably yield useful results.

Dr. Newsholme, Chief Medical Officer to the Local Government Board, has recently published an extremely able book on the prevention of Tuberculosis. In dealing with the notification of Phthisis, he says:—

"The success of notification, whether voluntary or compulsory, depends in the main on the extent to which a Local Authority and its Officers can be helpful to the notified patients, and herein lies the success of voluntary notification. Notification is the necessary channel through which the available help comes. The character of the help may be thus summarised:—

- (1) "Paper handkerchiefs and pocket spit-bottles are provided whenever indicated."
- (2) "When the visits are made at the patient's home, every possible assistance is given in securing for the patient any help needed. The Parochial Authority, the Charity Organisation Society, and other voluntary agencies are used as far as practicable. Where the patients are poor, out-patient letters for the local hospital or dispensary are given, in order that the patient may not be stinted of cod liver oil and other remedies. Furthermore, if any other member of the same family appears to be failing in health and a doctor's fees cannot be offered, similar letters for the hospital or dispensary are given. The importance of early treatment of illness and of the maintenance of health being emphasised in every possible way."
- (3) "Sanatorium or Isolation Hospital treatment is offered in all cases suitable for it, and in actual fact, more than half of the total cases at present under observation in Brighton have spent at least four weeks in the Borough Sanatorium, and have there been taught the precautionary measures needed to prevent infection and personal regime indicated by their illness; while at the same time their families have had a temporary holiday from the charge of the patient, the house has been disinfected, and the patient has returned with a knowledge of the means to avoid re-infecting it.
- "The chief reason for the success of voluntary notification of Phthisis in Brighton has been the pro-

vision for the Sanatorium treatment of notified cases. A certain number of beds at the Sanatorium or Isolation Hospital has been set apart for these cases. At first the patients were admitted for only a month, the principle adopted being that of training the patients in personal hygiene, and in the general management of their illness, rather than of attempt at cure. wisdom of the plan has been justified by experi-The majority of the patients have been found to have extensive lung-disease, often with cavitation, when admitted to the Sanatorium. Such patients commonly have several years of life before them, but the experience of other Sanatoria shows that prolonged treatment of many months, or even over a vear, is necessary to ensure anything approaching a cure, even in cases in earlier stages of the disease. It is much more to the public interest to pass a large number of patients through the Sanatorium and train them thoroughly in the hygienic requirements of their disease than to treat a smaller number for a more protracted period. furthermore, much more convenient for the patients, who often find it difficult or impossible to leave their families and work for longer than a month. Our experience is that advice as to the deposit and disposal of sputum given at home is commonly neglected; and that it is very rarely neglected by patients who have been in the Sanatorium. By this and other means, and by quarterly visits at the home of the patient, we keep in sympathetic relationship with the patients, and ensure the maintenance of precautionary measures against infection."

I have quoted at length this particular portion of Dr. Newsholme's book because it is the result of his own experience while Medical Officer of Health at Brighton; also, too, because the plan is so eminently sane and founded on common-sense. Voluntary notification of Phthisis has so far been comparatively a failure; and I think largely for the reason there has been no tangible result as far as the patient is concerned. It is for this reason I have hesitated to suggest voluntary notification for this town. However, now that notification of Phthisis has been made compulsory under the Poor-Law, I think the time has arrived when a system of voluntary notification should be adopted. Moreover, as the new extension of the Hospital will shortly be opened to provide accommodation for the acute cases of Scarlet Fever, the present block of six beds will be set free, and will not be required for the present. I should recommend that these beds be used for the training and accommodation of cases of Phthisis, in a similar manner to the plan as sketched out above and successfully carried out in Brighton for the last six years. The cost would be very slight, as all the requisites are at hand. From the figures for the past eight years of the deaths from Phthisis, given at the commencement of this report, it is evident that the gross number of cases of Phthisis must be increasing in the district, and, therefore, there are many more centres of infection. Also, too, there is no evidence of the death-rate diminishing for this district. That being so, it seems to me eminently desirable to make further efforts to assist in stamping out this "White man's scourge." It is the universal expert opinion that it can be exterminated. So that it now seems to me the time to make an effort to do so as far as this district is concerned.

To summarise as to procedure:-

 I recommend that Voluntary Notification of Phthisis be added to the Poor-Law Compulsory Notification.

- (2) That on receipt of notification a visit be paid to the house, particulars obtained, advice given, printed instructions left, and any help given that is possible.
- (3) That, when not required for other purposes, six beds be utilised at the Isolation Hospital for suitable cases, chiefly for education purposes.
- (4) That disinfection, as at present, be offered free of cost on the death of a case of Phthisis.
- (5) That, also as at present, free bacteriological diagnosis be offered to any Medical Practitioner who cares to send the sputum of a suspected consumptive patient.

This portion of the report was presented at a meeting of the Public Health Committee and confirmed by the Council in January of 1909. The recommendations above were adopted with the exception of Number 3.

RESPIRATORY DISEASES OTHER THAN PHTHISIS.

						1	Per 1,000
In	1908	there wer	e 93	deaths,	giving	a death-rate	of 1.3
,,	1907	,,	105	,,	,,	,,	1.5
,,	1906	,,	88	,,	,,	,,	1.3
,,	1905	,,	88	,,	,,	,,	1.4
,,	1904	. ,,	69	,,	,,	,,	1.2
,,	1903	,,	73	,,	,,	.,,	1.4
,,	1902	,,	67	,,	,,	,,	1.5
,,	1901	,,	44	,,	. ,,	,,	1.1

CANCER.

The increase in this disease for the past three years is partly due to greater accuracy of our records, as they now include cases dying in London Institutions, Brentwood and Romford Infirmary.

							I	Per l	,000
In	1908	there	were 5	55	deaths,	giving a	death-rate	of	.77
,,	1907	,,	2	12	,,	,,	,,		.62
,,	1906	- ,,		54	. ,,	,,	,,		.82
,,	1905	,,	3	33	,,	,,	,,		.54
,,	1904	,,	2	28	,,	,,	,,		.51
,,	1903	,,	2	2 1	,,	,,	,,		.42
,,	1902	,,	1	19	,,	,,	,,		.41
,,	1901	,,	1	19	,,	,,	,,		.48

50

	Estimat Populati	15,974	18,022	20,570	23,319	26,468	30,154	34,394	39,022	44,530	49,646	54,120	60,441	65,165	869'99	71,221
96 63	Rate per	18,	.05	60-	.12	.18	-39	-05	112	90.	.20	.30	-04	-07	.05	80.
Measles	Deaths.	10	1	e1	60	10	12	2	10	00	10	17	60	10	4	9
W	Cases.			38	325	425	467	326	805	564	684	1138				
ral .	Rate per 1,000.			60.	80.			.03		.04	.03	10.	.04	-03	10.	
Puerperal Fever.	Deaths.		-	o1	01			-		e1	1	4	00	67	1	
Pu	Cases,	-		6.1	71		-	-		00	61	4	60	00	67	÷1
and ued r.	Rate per 1,000.	90.	Ŧ.	-94	.25	11.	-19	11.	01.	15	.04	20.	90.	.01		10.
Enteric and Continued Fever.	Deaths.	-	61	10	9	00	9	+	4	1-	01	4	4	-		-
Sent	Cases.	10	Ξ	34	34	33	26	233	33	19	38	35	57	355	10	14
Fever	Rate per 1,000.	90.		-14			.03			-04	FO.	60.	90.	.04	-07	Ŧ0.
et F	Deaths.	-		50			-	-		61	e1	10	4	00	10	00
Scarlet	Cases.	96	35	157	132	74	128	190	285	564	181	224	288	326	470	446
	Rate per 1,000.	-55	Į.	-34	-04	-07	-36	Į.	.15	-17	.58	.18	90.	-16	.10	60.
Diphtheria & Membranous Croup.	Deaths.	7	61	7	-	61	11	4	9	00	14	10	4	=	1	7
Diph Mem C	Cases.	29	24	46	35	99	7.4	11	92	98	95	181	85	132	801	191
las.	Rate per 1,000.	90.	.05	.18			60.	.05	.03	80.		-01	.04	.01	-0.5	-04
Erysipelas	Deaths.	-	1	4			00	-	-	4		1	60	-	21	80
Ery	Cases.	27	36	47	355	36	09	59	37	67	49	99	48	55	09	56
Эх.	Rate per 1,000.	90.	:							-17	-0.5	-				
Small Pox.	Deaths.	-	-	-	-	-		-		œ	1		-		-	
Sms	Cases.	21	1		-			13	9	4	6	11	9			-
	Years	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908

TABLE GIVING DEATH RATE FROM VARIOUS INFECTIOUS DISEASES DURING THE PAST 15 YEARS.

ISOLATION HOSPITAL.

Number of patients in Hospital at beginning of year:-

Scarlet Fever	 	***	 	49
D' Lat .				,,,
Diphtheria	 		 	3

Number of patients admitted during the year:-

Scarlet Fever	 	 	303
Diphtheria	 	 	
Typhoid Fever	 	 	10
Continued Fever	 	 	2
Erysipelas	 	 	- 1

Number of patients remaining in Hospital on 1st January, 1909:—

Scarlet Fever	 	 	 37
Diphtheria	 	 	 5

Number of deaths in Hispital during the year, showing comparison with 1907:—

		ber of aths. 1907	Death rate per cent. 1908 1907			
Scarlet Fever				1907		
	. I	0	.28	1.45		
Diphtheria	. 5	5	6.02	6.84		
Typhoid Fever		I	-	12.75		
Erysipelas		1	-	33-33		

The following shows the average length of stay of patients in the Hospital:-

SCARLET FEVER.

SCARLET FEVER.			
49 cases of Scarlet Fever in Hospital on	Days.	(Average lays in lospital
1st January, 1908	1,234		25.18
265 recovered cases of Scarlet Fever	12,826		-
ı fatal case of Scarlet Fever	21		21.0
37 cases of Scarlet Fever in Hospital			
on 1st January, 1909	793		21.43
Average stay in Hospital of Scarlet			
Fever patients			42.25
DIPHTHERIA.			
3 cases of Diphtheria in Hospital on			
1st January, 1908	61		20.3
67 recovered cases of Diphtheria	1,995		29.77
5 fatal cases of Diphtheria	22		4.4
5 cases of Diphtheria in Hospital on			
1st January, 1909	96		19.2
Average stay in Hospital of Diph-			
theria patients			27.17
Enteric Fever.			
9 recovered cases of Enteric Fever	325		36.1
1 case of Enteric Fever in Hospital on			
1st January, 1909	25		25.0
Average stay in Hospital of Enteric			
Fever patients			35.0
CONTINUED FEVER PATIENTS.			
1 recovered case of Continued Fever	35		35.0
ı fatal case of Continued Fever	6		6.0
Average stay in Hospital of Con-			
tinued Fever patients			20.5
recovered case of Erysipelas			100000000000000000000000000000000000000
Average stay in Hospital of all pati			
Average daily number of patients in	Hospital		47.67

TABLE OF ADMISSIONS
IN THE RESPECTIVE MONTHS DURING THE LAST SEVEN YEARS.

VIENSLES.	190319051906190719081905190819061908		11
	1900	1111111111111	1
FEVER.	1908		1
РОЕВРЕВА	1905		-
The state of	1908	-111711111111	-
LAS.	1907	1711117117	00
ERYSIPELAS.	1906	11111111111	-
ERN	1905	1117111111	-
	1903	1111111111	-
9	1908	11-1-1-01-00-	12
AND CONTINUED FEVERS.	1902 1903 1904 1905 1906 1907	01 11 11 11 11 11 1	00
Cont.	1906	1 1 1 4 21 21 21 21 21 21 21 21 21 21 21 21 21	19
AND CC FEVERS.	1905		133
RIC /	1904	1 1 21 21 21 - 1	6
ENTERIC	1903		#
	1902	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	65
	806	SHRRRRGQQQQQ	7.9
	=		
	1 2061	≈∞∞c4≈4™≈±≈≈	70
SIA.	1906 1907 18	2122 E 21 C 2 + 21 - 2 22	
ITHERIA.	1905 1906 1907 18	-	70
Дренти вета.	1904 1905 1906 1907 19	110 H 2 H 2 H 2 H 2 H 2 H 2 H 2 H 2 H 2 H	88 70
Вірнти е віл.	1903 1904 1905 1906 1907 19		55 88 70
Бірнтн е кіл.	19021903190419051906190718	20244772272 20244772272 202212284244	80 55 88 70
. Diрнтн ж віл.	190819021903190419051906190718	20 24 4 11 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	37 80 55 88 70
	1907 1908 1902 1903 1904 1905 1906 1907 19	8 2 1 2 2 4 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2	81 87 80 55 88 70
	1906 1907 1908 1902 1903 1904 1905 1906 1907 19	20 22 23 24 25 27 27 20 27 20 20 21 20 21 20 21 20 21 20 21 20 20 20 20 20 20 20 20 20 20	301 31 37 80 55 88 70
Fever.	1905 1906 1907 1908 1902 1903 1904 1905 1906 1907 19	26 26 2 26 2 2 2 2 2 2 2 2 2 2 2 2 2 2	156 268 369 301 31 37 80 55 88 70
Fever.	1904 1905 1906 1907 1908 1902 1903 1904 1905 1906 1907 19	17 10 21 40 29 8 7 3 11 31 26 15 15 16 17 36 16 17 36 17 36 17 36 17 36 17 36 17 36 17 37	268 369 301 31 37 80 55 88 70
	1903 1904 1905 1906 1907 1908 1902 1903 1904 1905 1906 1907 19	16 17 10 21 40 29 8 7 3 11 11 18 11 11 18 11 11 20 29 8 7 3 13 10 10 11 12 26 26 15 10<	156 268 369 301 31 37 80 55 88 70
Fever.	1902 1903 1904 1905 1906 1907 1908 1902 1903 1904 1905 1906 1907 1908	17 10 21 40 29 8 7 3 11 31 26 15 15 16 17 36 16 17 36 17 36 17 36 17 36 17 36 17 36 17 37	140 156 268 369 301 31 37 80 55 88 70

The present Isolation Hospital was built in 1898, and added to in 1902. The original Hospital consisted of three blocks, containing respectively 10, 4, and 6 beds, together with an administrative block, laundry, ambulance shed, stable and coach-house, with a small mortuary.

In 1902 another block of 26 beds was added, the administrative block enlarged, another mortuary provided, and a discharge block built.

In 1905 a house was built just outside the Hospital, which provides accommodation for 8 convalescent Scarlet Fever patients. That is, the patients, or the number of them that we can accommodate, are disinfected through the discharge block, have fresh disinfected clothes provided, and then they are transferred to this house for a fortnight or so before going home. It thus makes a half-way house between the Hospital and the home. The hope was to limit the number of return cases, as several patients caught cold on leaving the discharge block straight for home, developed a discharge from nose or ears, and infected other children.

During the year good progress has been made with the new block, which will be ready for occupation early in 1909. This new block will consist of 2 wards of 12 beds each, with 2 side wards of one bed each, bath-room, lavatory accommodation, etc. A ward kitchen will be in the middle, with store-room accommodation on each side of the entrance door. On the upper floor will be a series of bedrooms, with kitchen and sitting-room for the use of the staff, lavatories, etc. This floor will be reached by an outside staircase at each end, so that there is no direct communication between the wards and the staff quarters.

COST.

During the year the cost of maintenance from 1st April, 1907, to 31st March, 1908, was worked out in detail, including a sum of £101 5s. contributed to the maintenance of the Small Pox Hospital at Dagenham, and also the cost of disinfecting all the town bedding, etc. These are all items charged to Hospital Account, and the latter portion, especially, is almost impossible to separate out. With these items the cost works out at 4s. 6d. per patient, per day; that is, maintenance without loan charges. Inclusive of loan charges it amounts to 6s. per day, as against 5s. 2d. and 6s. 11¼d. for the previous year.

It is most difficult to compare the cost of one hospital with another, as the method of accounts varies so much. It is hoped that the Local Government Board will lay down a system of keeping these accounts that will bring them all into line. Then it will be able to easily obtain comparable results, and effect improvement where necessary.

In the form sent out by the Essex County Council, for the expenses of hospitals obtaining a grant, I see a fresh classification has been made, which will simplify matters very much, and should give trustworthy data for some of the Essex Isolation Hospitals.

NURSING.

During the year the Matron has continued her lectures for the education of the Nursing Staff. At the last examination of the Probationers there was a marked improvement in the composition and matter of the answers to the various questions, all of which tends to prove the efforts made by the teacher, and the increasing willingness to learn on the part of the taught. Personally, I should like to repeat what I said last year:—

"In this connection I should like to express my appreciation of, and thanks to, the Nursing Staff for their help and assistance during the past year. Nobody but one who is in close contact with an isolation hospital knows the sudden emergencies that arise, with the consequent anxiety and worry entailed. In a hospital where there is no resident Medical Officer, the brunt of this is bound to fall on the Matron; and, therefore, more credit is due to her if she copes with the trials successfully. The numerous letters of thanks and appreciation from people who have been either inmates or relatives of inmates prove the success of the management, and are an encouragement for the future."

DISINFECTION.

The disinfection of bedding, etc., is carried out at the Hospital. Two vans are kept, the bodies of which were formerly fixed on two wheels, but they were altered and put on four wheels, with a greatly improved result as far as wear and tear of horseflesh is concerned. One of the vans is used for infected and the other for disinfected bedding, clothing, etc. The houses, or the rooms occupied by the patient, are sprayed out with a "Cyllin" solution, and the bedding, etc., removed to the Hospital.

The disinfector is an improved "Washington Lyon," which, since its installation, has proved satisfactory. Most mattresses are supplied with leather tabs, which, owing to the baking, are rendered useless, so that all mattresses have to be re-tabbed, thus appreciably adding to the time employed in disinfection.

TABLE OF HOUSES, &c., DISINFECTED

IN RESPECTIVE MONTHS DURING THE LAST SIX YEARS.

Монтн.			Hou	SES.					ART	ICLES		
	1903	1904	1905	1906	1907	1908	1903	1904	1905	1906	1907	1908
January February March April May June July August Sept October Nov Dec	29 26 18 15 22 14 9 21 20 18 29 31	35	71 48 40 40 31 16 13 20 16 34 33 20	26 31 40 32 39 35 39 33 30 63 66 42	52 51 45 53 39 26 43 43 65 51 61	56 38 42 53 34 44 55 52 62 44 48 68	307 270 239	544 487 209 479 447 96 301	727 707 579 757 196 187 220 205	555 597 446 566	612 512 648 595 312 484 345 339	432 455 584 368 299 439
Totals	252	372	382	476	572	596	3250	4257	5415	6601	5849	5365

SCARLET FEVER.

The following is the average stay in days of patients sent to the Isolation Hospital suffering from Scarlet Fever:—

1902.	1903.	1904.	1905.	1906.	1907.	1908.
56	58	54.7	48.9	42.8		42.25
3	20	24.1	40.9	42.0	36.8	4

It will be seen that the average has been longer again during the past year. Of course, if there are a few bad cases which are kept in a long time, the average soon goes up. The total number of cases admitted has been rather less than last year, but the daily average has been higher.

The following is a list of the "return" cases of Scarlet Fever for the year, in connection with patients discharged from the Hospital:—

							Die	.h.u.u.d		
	111 11	********		00/1	D	10.00		charged	100 F.1	100
1.	W. M.	1st case r	iotified					Hospital,	12th Feb.,	
		2nd "	**	18th	Feb.,	'08,	99	33	14th Apr.,	'08.
2.	J. M.	1st "	33	10th	Jan.,	'08,	. 31	**	11th Feb.,	'08.
		2nd "	,,,		Mar.,		**	**	14th Apr.,	'08.
			- 100			1000		77		
3.	F. L.	*1st		3rd	Mar.,	'08.	***	,,	16th Apr.,	'08.
			,,			00,	**	"		4.60
	WI	2nd ,,		25th	Apr.,	'08			15th June,	'08
	*Dan	tified 97t	h Ane	'08	Nurce	ad a	t hon	no and no	t disinfecte	a
	Ite-In	otined 21	in April	, 00,	.vuis	ou a			t disiniecte	u.
		Ond once		1941.	Man	200		charged	and Lune	'no
		ard case 1	iotined	Toth	May,	uo,	nom	Hospital,	22nd June,	00.
	C 111	4		104	17.1	100			dat Mari	100
4.	C. W.	1st "	"		Feb.,		39	22	1st May	
		2nd "	. 33		May,		33	,,	2nd July	, 08.
		3rd "	**	28th	July,	'08,	,,	>>	24th Sept.	, 08.
5.	A. C.	1st "	**	22nd	May,	'08,	,,	,,	6th July	'08.
		2nd "	**	16th	July,	'08,	77	,,	3rd Sept	.,'08.
		3rd "	***	9th	Sept.,	'08.	**	,,	29th Oct.	
		4th ,,		11th	Sept.,	'08.	11		2nd Nov	
		74h	"	14th	Sept.,	'08		,,	29th Nov.	
		otn "	"			00,	"	"	201111011	, 00.
8	H.S.	1st ,,		9.4+h	June,	'08			13th Aug.	'08
U.	11. 0.	and ,,	33				22	**	22nd Oct	'00.
		2nd "	27		Aug.,		31	"	22nd Oct.	, 00.
		3rd "	**	17th	Aug.,	08,	22	"	1st Oct.,	08.
_	*** **					200			0	100
1.	W. F.	1st ,,			July,		11	22	7th Sept.	
		2nd ,,	35		Sept.,		**	**	2nd Nov.	
		3rd ,,	**	17th	Sept.,	'08,	**	,,	15th Oct.,	'08.
8.	H. R.	1st ,.	,,	14th .	July,	'08,	,,		7th Sept.	, '08.
		2nd "	,,	17th S	Sept.,	'08,	11	**	2nd Nov.	
		3rd ,,	.,,	18th 5	Sept.,	'08,	33	,,	2nd Nov.	
		4th ,,			Sept.,					1000
			"							
9.	H.W.	1st ,,	100	3rd 1	uly, '	08.	.,		7th Sept.,	'08.
		2nd "	53		Sept.,		.,	"	· the cpt.,	00.
		Ziid ,,	"	I I LIII	sept.,	00,				
10.	M.M.	1st "		8th	July,	08.	Name of Street		3rd Sept.	'08.
		2nd ,,	"		Sept.,		*	"	ora capa	,
		- iid ,,	33	Titi	ocpr.,	00,				
11.	W. B.	1st ,,		24th	June,	'08.	25	22520 75 70	10th Sept.	. '08.
		2nd ,,			Oct.,		**	"	7th Dec.,	
		3rd ,,	"		Dec.,		**	",		-
		J. C. 15	23	20111	Dec.,	00,			Carlotte State	
12.	E. B.	1st ,,	-	20th	Sept.,	'08.	17	-	3rd Dec.,	'08.
		2nd ,,	"				13	**		11/2/2
		3rd "	**	Oth	Dec.,	'08				
		4th	35	11+1	Dec.,	'00,			1111111111	
		4th "	23	11(11	Dec.,	00,				

In the first two instances there appeared to be nothing to account for the infection, and no discharge from the ears or nose.

In the third instance, during the time the patient was in the Hospital, various members of the family suffered from sore throat, and when the patient was discharged, the father was in bed with sore throat; so that, from enquiries I made at the time, it seemed to me more than likely that the house was full of infection, and that "W. L." was infected from this source, rather than from the discharged patient.

In No. 4, there appeared to be nothing in the condition of the discharged patient, to account for the infection of the others.

In No. 5, the patient had some Rhinitis while in the Hospital. It had apparently quite cleared up before leaving the Hospital, but after being at home a few days, the discharge recurred, and was the cause of infection, presumably.

No. 6 was a very trying case, as the patient went straight to York from the Hospital, and in four days his two brothers were down with Scarlet Fever. There was no obvious cause for his infectiveness.

Nos. 7, 8, and 9 were all discharged from the convalescent home on the same day, and appear to have all been infectious, though why they were so I was not able to say. However, the Home was closed and thoroughly disinfected before admitting any more cases for the time.

The other cases present no point of special interest.

It is very extraordinary how the infection of Scarle'. Fever seems to cling about a house at times. In two

instances where the patient was nursed at home, there were three apparently "return" cases, so that "return" cases are not absolutely confined to Hospital cases.

DIPHTHERIA.

The admissions from Diphtheria, as will be seen from the table, have been fairly uniform throughout the past year.

Five cases ended fatally, giving a death-rate of 6.02 per cent.

Tracheotomy was carried out on two of the patients, one recovering and the other case terminating fatally.

There have been no "return cases" of Diphtheria. In three houses where the patient was nursed at home, there were four other cases notified within a short time of the disinfection after the first case. The provision of free bacteriological diagnosis should help in seeing that the patient is free from obvious presence of Diphtheria Bacilli.

TYPHOID FEVER AND CONTINUED FEVER.

Nine cases of Typhoid Fever were admitted during the year, and they all recovered.

Two cases were admitted as Continued Fever. One died, and, on post mortem examination, was found to have been suffering from Tubercular Meningitis. The other case recovered.

ERYSIPELAS.

One case of this disease was admitted, and made a good recovery.

WOODFORD PATIENTS.

The contract made with the Woodford Urban District Council, to admit a certain number of their infectious cases, terminated on the 31st March. On the 1st January, there were three Scarlet Fever patients in the Hospital, and up to the end of the contract eight more were admitted.

One case of Typhoid Fever was admitted from Romford during the year.

Table Showing Ages and Sex of Patients Admitted Suffering from SCARLET FEVER.

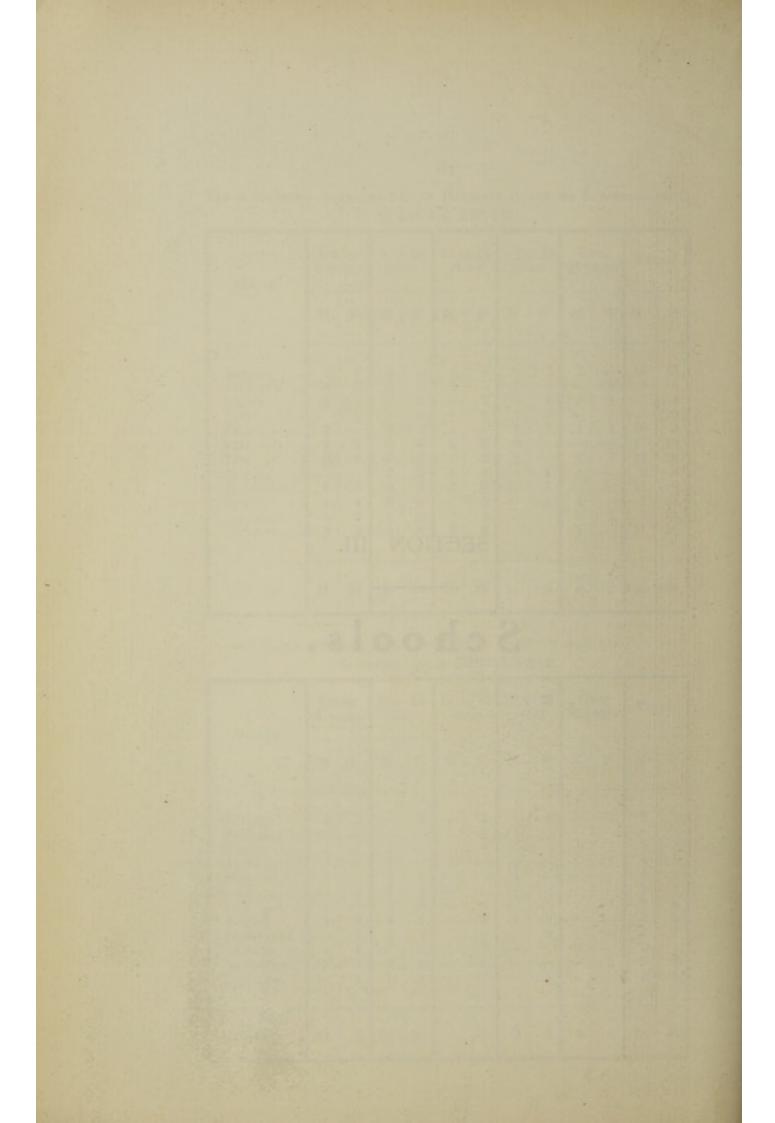
Ī	Month.		der		o 10 ars		to 15 ars		o 25 ars		ver	То	tals
	bost large	М	F	М	F	M	F	М	F	М	F	M	F
	January February March April May June July August September October November December	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	7 2 2 3 -1 3 -5 4 3 4	3 2 6 5 8 9 7 7 6 5 1 6	5 6 7 9 2 6 12 3 7 5 6 8	4 2 3 1 4 4 3 1 4 - 2 2	1 5 2 2 2 3 4 6 3 8	3 1 -2 1 2 2 - -	2 2 1 - 1 - 1 1 1	$ \begin{array}{c} 2 \\ \hline 1 \end{array} $	- 3 1 1 1 - 2 1	15 9 13 8 16 17 16 9 11 7 3	15 18 13 15 4 10 20 8 19 13 13 20
	Тотаь	21	34	65	76	30	40	11	9	8	9	135	168

Table Showing Ages and Sex of Patients Admitted Suffering from DIPHTHERIA.

Монтн.		der		o 10 ars		o 15 ars		o 25 ars		ver	То	tals
	М	F	М	F	М	F	M	F	М	F	М	F
January February March April May June July August September October November December		1 - - 1 - 2 1 1 1	- 1 1 2 1 1 1 2 - 4 1	3 - - 1 3 3 1 4 1 2 2		1 - - 4 2 - 2 - 1	- - 1 - 1 - - 1	1 2 - 1		1 -2 1 -1 - - 1	2 -2 4 4 1 2 3 2 2 5 1	7 3 1 1 4 8 5 7 4 4 4 5
Totals	11	8	14	20		11	2	4	1	6	28	49

SECTION III.

Schools.



INTRODUCTION.

As in the letter on the memorandum issued to the Local Authorities on the preparation of the Annual Reports of the Medical Officers of Health it is specified that:—

"The Board desire to be informed what arrangements have been made for the Medical Inspection of School children under the Education (Administrative Provisions) Act, 1907, and if the Council are the Local Authority for the purpose of this Act, the Board will feel obliged if they will instruct the Medical Officer of Health to include in his Annual Report this information, together with any account he may be able to give of the work done under the Act."

In accordance with the above instructions, I am giving particulars which have been already included in my Annual Report to the Education Authority under that Act.

At the end of July, 1908, I was formally appointed Medical Officer to the Education Authority, and converted from a "part time" to a "whole time" officer. The sum of £100 a year being allocated for the portion of my salary as Medical Officer to the Education Authority.

Towards the end of the year, the Education Committee combined with the Public Health Committee, recommended advertising for applications for the post of Health Visitor to assist in visiting the homes of those children where defects had been found on the medical examination at the schools, and to endeavour to get these defects remedied. Also to visit the homes of all babies newly born, with a view to assist in reducing the Infantile Mortality rate. This recommendation was passed by the Council, and, accordingly, a Health Visitor has been advertised for, on the above lines, at a salary of £85 a year.

The actual expense of the Medical Inspection alone
to the Education Authority of this town need not be great.
That is, if the present wise system of co-partnership between
the Education Committee and the Public Health Committee
in this matter be persevered in.

In the Annual Report (Education) I asked the Council to take into consideration the question of appointing Medical Assistance, as it was obviously impossible for me personally to carry out the work of Medical Inspection and the minimum requirements of the Board of Education.

INFECTIOUS DISEASES.

There are two classes of Infectious Diseases dealt with:-

- Those compulsorily notifiable under the Infectious Disease (Notification) Act; such as Scarlet Fever, Diphtheria, and Typhoid Fever.
- (2) Those usually known as the Minor Infectious Diseases; such as Measles, German Measles, Whooping Cough, Chicken Pox, Mumps, and Ringworm, which for some time past have been reported to the Public Health Department by the Teachers and Attendance Officers; the Senior Officer attending at the Department every morning for the purpose of exchanging information.

SCARLET FEVER. -

On examination of the table it will be seen that Scarlet Fever has been distributed all over the schools during the year.

At the Highlands, in July, there were several cases in one class-room in the Junior Mixed Department. I examined all the children in this particular room, but could find no case that seemed likely to be causing infection. The classroom was sprayed out with a "Cyllin Solution."

At Goodmayes School, in June and July, several cases were spread through an unrecognised case, or cases. Most of these occurred in the Girls' Department, but on my examination of the school I could find no suspicious case on this side. On the Boys' side I found a lad obviously in the peeling stage of Scarlet Fever. However, this boy apparently gave rise to no further case.

The whole school was sprayed out with a "Cyllin Solution," which certainly seemed to have a beneficial effect in destroying the infection.

In Loxford School, too, there were several cases, chiefly in the Girls' Department, and here disinfection by spraying was again carried out, though the benefit was not so marked as at Goodmayes.

One or two unrecognised cases were discovered in the neighbourhood of this school, and were the origin of several other cases in this district.

DIPHTHERIA.

As will be seen from the table, the only school which has been much affected with this disease has been the Highlands. For reasons which are more fully discussed in the Annual Report to the Local Government Board, there has been a greater prevalence in the Cranbrook Ward than in any other portion of the district, and, therefore, more cases have, naturally, occurred in the Highlands School, in the middle of that district, than elsewhere.

There has been nothing in the condition of the school leading to the conclusion that the school was responsible in any way for the spread of the disease. The school is well situated, dry, of modern type, and well drained; also, too, the accommodation being in excess of the number on roll, the school has never been overcrowded in any way.

The large number in October was due to one member of a family having a "bad throat" and being overlooked by the parent, infecting four others in the same house, and another case in the same road. The cases, too, have not been confined to one section or class-room of the school, but have been distributed more or less evenly all over.

The cases, generally, have been of a mild type, and the death-rate has been low.

For the last four years the following cases have been notified in connection with the schools:—

1908	 	 	 	 95
1907	 	 	 	 47
1906	 	 	 	 52
1905	 	 	 	 45

MEASLES.

The total number of cases during 1908 has not been so large as during 1907.

On 7th May I received information of a maid-servant being sent home to New Road, Beehive, suffering from As a result, two children in this house were excluded from the school, and during the month a further case of the disease developed in the house. On 7th July the children next door developed Measles. On 14th July information of several other cases was received. On 17th July I visited the Valentines Schools, and in view of the comparative isolation of the district with the length of time since the last outbreak of Measles in that School, and, too, the holidays being so near, I advised closure of this school. It was accordingly closed until after the holidays. closure appeared to have had little or no effect on the spread of the disease, although, as the school was closed, I have no exact figures to give. From enquiries made in the district a great number of children were found affected with measles, and when the school re-opened after the holidays several children were absent, not having sufficiently recovered to be fit to attend.

In Christchurch Road School, at the same time, there were a considerable number of cases in the Junior Mixed Department, chiefly affecting the younger class in one room. In view of the proportionate numbers, however, beyond the exclusion of particular children and disinfection of the classroom most affected, no further action was taken. After the holidays there was a marked absence of further cases.

On September the 25th I visited Chadwell Infants' School, owing to the report of an outbreak of measles, and found 43 children absent out of about 70 on roll. Of those away there was definite information of 22 having measles.

Owing to the suddenness of the outbreak, the number of children away, and the freedom of this school from measles previously, I advised closure of the Infants' Department for three weeks. The effect of the closure, however, had little or no effect in checking the spread of the disease, and after that I gained information of another 22 children attending the Infants' School who had contracted measles. This number only represented those cases where there were other older children attending school. Obviously there were other cases where the patient was the only child attending school. In the course of enquiries I came across a few instances of this occurring, and no doubt there were others.

In both instances of the Valentines and Chadwell Infants' Schools the closure had no effect in checking the spread of the disease, but in view of the amount of combustible material in each school compared with the total size of the school they were both instances where closure, if ever, was justified. If the schools had not been closed the attendance would have been so poor as to be a compartively serious loss to the Education Authority, without the compensating advantage of much real educational benefit to the other children. The financial consideration is not of very grave importance on either side in determining the closure of a school, but it is impossible to avoid its being an element, though it may be a small one.

During this epidemic, as it was found there was criticism by some of the medical men involved of the action of the Education Authority in allowing other older children from an infected household to attend school, a letter was sent to each medical practitioner in the district describing the course of procedure adopted by this Authority, and quoting the portion of the memorandum of the Local Government Board relating to this question, issued in the early part of the year: "On the Circumstances Under Which the Closing of Public Elementary Schools or the

Exclusion Therefrom of Particular Children May Be Required in Order to Prevent the Spread of Disease "--

"The infection of measles is probably conveyed chiefly by the nasal mucus, but is less persistent than that of small pox, scarlet fever, or diphtheria, and is not commonly conveyed by healthy persons; hence it is unnecessary to exclude from school the children of infected households if they have themselves had measles."

CHICKEN POX.

This disease was very prevalent in the spring months, and affected all the larger schools.

The younger children were the ones chiefly affected, and the prevalence of the disease had little effect on the attendance of children in the upper departments. Last year the amount of chicken pox in the schools was remarkably small; Goodmayes being the only one having many—14 in November and 10 in December, 1907. This year the time of prevalence was from February to May, and after the latter month it rapidly died down.

MUMPS.

There have been 29 cases of this disease during the past year. The figures in previous years have been:—

In 1907 there were 73 cases involving 33 contacts.

,, 1906 ,, 275 ,, ,, 84 , ,, 1905 ,, 96 ,, ,, 42 ,

It is not a disease that affects the school attendance very much, as from the above figures it will be seen that, with the exception of 1906, the total number of cases during the year is not great.

As a rule, contacts are not excluded unless they are young, below 8 years of age, and there is reason to expect the disease spreading.

The parent is apt to call any swelling of the cervical glands mumps, so that, unless some sifting of the information received was made, the total number would soon run up to a large figure.

WHOOPING COUGH.

In all the earlier part of the year the schools were very free from this disease. In the last three months, however, there were a considerable number of cases in some of the schools among the younger children.

In 1908 there were 173 cases.

,, 1907 ,, ,, 314 ,

,, 1906 ,, ,, 157 ,,

,, 1905 ,, ,, 195 ,,

Here again the greater part of the contacts are allowed to attend school, if in the senior departments. The older children are very apt to develop a troublesome cough, spasmodic in character, in infected households; but they do not seem to themselves infect others. If there are young children in the house who have not had whooping cough before, they are usually excluded. Sometimes these contacts are excluded only for a fortnight, depending on the circumstances of the case.

The weather conditions were very unfavourable in the early part of November, rapid changes of temperature having their effect on the mortality, and also, too, apparently on the spread of the disease.

RINGWORM.

In my last annual report as Medical Officer of Health I said that this is one of the first diseases that should be treated, if the Education Authority is to take any in hand.

The loss of grant over these children, from the Authority's point of view, is a serious one. I have seen, at the Town Hall, 195 cases through the year, some of them more than once, and it is quite exceptional for any of these to have received medical treatment in any real sense. The majority go to a chemist and get a box of ointment, which is applied more or less regularly; and, even if the treatment was suitable in the first place, it can rarely be called successful. Others take the child to their medical man at intervals, possibly of a month or so, so that the child is out of school months at a time, neglecting its educational opportunities and possibly getting into a loafing habit. Some cases, of course, do well, but the majority linger on for an indefinite time.

Among the first 50 children I examined at Christchurch Road School I found one with ringworm which had recently been sent to school with a certificate as fit to attend. As it looked doubtful, a bacteriological examination was made, and I was informed ringworm fungus was present. This has occurred more than once, and I am of opinion that no child who has been suffering from ringworm should be admitted until a negative bacteriological result has been obtained, the examination to be made free of cost to the parent, as it is for the benefit of the school as a whole.

GERMAN MEASLES.

There were nearly double as many cases of German Measles connected with the schools in 1908, compared with the previous year. In the earlier part of the year the differential diagnosis between some of these cases and Scarlatina gave rise to some trouble. Many of the cases were quite distinct, but in others the symptoms and rash were so similar as to lead to difficulty. Often, too, when there is an outbreak of one disease there is also an occurrence of the other, which still further adds to the difficulty.

74

22112962174218832999 955 Contacts TOTALS. Summary of Infectious Diseases and Children who have been excluded owing to Contact with Patients 1521 Cases 135 88888447444 | 21-21 Cases Ringworm 14 Contacts Cough. in connection with the Schools during the year ended 31st December, 1908 Whooping CONTACTS. 178 Cases 0 Contacts ·sdumW 29 Cases AND 163 Contacts Pox. Chicken 425 85102817548 Cases DISEASES 30 Contacts Measles. German Cases 75 192 Contacts Measles. 829 855000001-03801-1 157 Contacts Diphtheria 38 Cases 390 Contacts Fever. Searlet 263 525585585585 Cases 457 1261 1261 1261 1261 1261 1261 107 107 No. of Scholars on Roll. Road : SCHOOLS. County High Schools National and Infants, Christchurch Road Aldborough Hatch The Valentines ... Private Schools ... Roman Catholic Cleveland Road Newbury Park Goodmayes Barkingside Highlands South Park Downshall Loxford Uphall

MEDICAL INSPECTION.

I commenced the systematic inspection of school children on the 16th October, and since and including that date I have carried it out on twenty-nine occasions. During these inspections 614 children (462 boys and 152 girls) were examined. In addition, 28 others (19 boys and 9 girls) were brought under my notice for special inspection, the total time occupied by these examinations being 38 hours and 35 minutes, or an average of 3.60 minutes per child; that is, in most instances, exclusive of weighing, measuring, and eye-testing.

The ages of the children inspected were as under :-

5-6 6-7 7-8 8-9 9-10 10-11 11-12 12-13 13-14 14-15 15-16 Boys... 70 24 16 15 13 13 15 144 113 36 3 Girls... 66 23 20 14 5 5 2 1 13 3 — Totals: Boys ... 462 Girls ... 152

Below is enumerated a list, under the various headings, of the defects detected, separated according to sex:—

Di	EFECTS.	1			Boys.	GIRLS.
ClothingFair only					70	14
Bad					-	1
Insufficient					1	1
Footgear-Fair only					69	14
Bad					2	2
Cleanliness. Head-S	omewhat	dirty			8	16
D	irty				-	I
C	ontained	Nits			-	11
R	ingworm	detecte	d		I	-
Body-S	omewhat	dirty			6	5
V	ery dirty				I	1
F	leabitten				1	3
Mental condition-Dull					8	1
Speech defective					9	1
Hearing defective					2	1
Vision defective					102	8
Nutrition-Below norm	al				I	2
Teeth - Somewhat dirty					435	129
Foul					3	2
Decayed (1-6)					285	108
" (over 6					10	11
≟ /Tonsils-Slighty en	larged				19	13
Considera Require R Adenoids—Slight		ged			4	1
F Require R					1	-
Adenoids-Slight 1		truction	, prob	ably		
	to Adeno				3	-
Glands—Slightly en					97	48
External Eye Disease					1	1
Heart disease					4	1
Bronchitis					1	-

The following tables give the average heights and weights of children at various ages:—

BOYS.

Number of Boys.	70	24	91	15	13	13
Ages-Years.	9-9	2-9	7-8	8-9	9.10	11-01
Heights	. 104.4 cm. or 41.4 ins.	111.9 cm. or 44.1 ins	115.2 cm. or	123.7 cm.	130.2 cm.	133.6 cm.
			45.3 ms.	40.0 ms.	51.2 ms.	52.5 ins.
Weights	. 17.4 kilog. or 38.4 lbs.	20.3 kilog. or 44.7 lbs.	21.9 kilog. or 48.3 lbs	23.8 kilog. or	27.6 kilog.	29.8 kilog.
-			to Cont	3***0 103.	00.0 105.	05.7 lbs.

3	91	cm.	cilog.
-	15-16	152.7 cm. or 60.1 ins.	
36	14-15	153.0 cm. or 60.1 ins.	
113	13-14	143.7 cm. or 56.5 ins.	34.7 kilog. or 76.7 lbs.
144	12-13	140.2 cm. or 55.2 ins.	32.9 kilog. or 72.6 lbs.
15	11-12	135.6 cm. or 53.4 ins.	30.5 kilog. or 67.3 lbs.
Number of Boys.	Ages-Years.	Heights	Weights

,	,	
-	/	í
-	2	
7		
١		

Number of Girls.	99	23	20	14	
Ages-Years.	9-9	2-9	7-8	6-8	01-6
Heights	104.0 cm. or 40.9 ins.	110.0 cm. or 43.1 ins.	or 45.8 ins.	or 47.6 ins.	127.6 cm. or 50.23 ins.
Weights	16.1 kilog. or 35.6 lbs.	18.7 kilog. or 41.2 lbs.	22.0 kilog. or 48.4 lbs.	26.1 kilog. or 50.3 lbs.	24.88 kilog. or 54.85 lbs.

Number of Girls.	of Girls		5	2	1	13	3
Ages-	Ages-Years.		10-11	11-12	12-13	13-14	14-15
Heights	:	:	126'3 cm. or 49.7 ins.	143.0 cm. or 56.3 ins.	136.0 cm. or 53.54 ins.	145.4 cm. or 57.2 ins.	148.6 cm. or 58.5 ins.
Weights	!		24.7 kilog. or 54.5 lbs.	34.0 kilog. or 74.9 lbs.	30 kilog. or 66.13 lbs.	36.4 kilog. or 80.3 lbs.	37.6 kilog. or 83.0 lbs.

Notices were sent to parents, who were recommended to have the following defects remedied:—

Defective Visi	ion	 	 	 92
Dirty Heads		 	 	 11
Very defective				
Adenoids		 	 	 2
Tonsils		 	 	 I
Heart Disease		 	 	 1
Hearing		 	 	 1
Total		 	 	 115

Notices were only sent to parents with regard to their children's teeth when the condition was very bad indeed. Some different course of procedure will have to be devised to deal with this very serious condition. It is quite exceptional for a child to use a toothbrush regularly, as also, too, for any other sign of attention to the care of the teeth.

As seen above, most of the notices were sent for defective vision, and it will be interesting to see what proportion of these lead to any beneficial result.

Of the special cases presented by the teachers for examination—

- 5 were mentally deficient.
- I deaf, probably due to adenoids.
- 8 were verminous in head or body.
- 3 defective condition of eyes.
- 6 very backward, of which 2 are quite unfit to be moved to the upper school at the end of the year.
- I for defective speech.
- 1 for congenital deformity.

- 2 for " fits."
- as he stated he had "only one lung." Both lungs were found to be sound.

The above is the summary of the result of the examination of the whole of the children examined at the Christchurch Road, Cleveland Road, and Uphall Schools.

As I mentioned in the preface to my Education Report, "the anticipation of the opposition of the parents to the examination has not been realised. About one per cent., so far, have refused, and I believe several of these have been more from misunderstanding of the scope of the examination than from any other reason. On the other hand, many parents present at the first examination have taken an intelligent interest in their children's condition, and have welcomed advice.

"There has been absolutely no friction, so far as I am aware, and I should here like to express my thanks to the teachers for their willing and efficient co-operation." SECTION IV.

:: Sanitary :: Administration.

FOOD AND DRUGS ACTS.

These Acts are administered by the County, and Mr. McKirdy, Chief Inspector, has kindly given me a return of the number of samples taken, with the results, which I here append:—

During the year 1908, the total number of samples take in the Ilford District was 152.

The results of analysis are shewn by the following tables:-

Article	No. Submitted.	GENUINE.	ADULTERATED
Butter Margarine Milk Coffee Lard Arrowroot	58 2 87 1 3	53 2 83 1 3	5 4
	152	143	9

Proceedings were instituted in 8 cases, resulting as follows:-

BUTTER.

- 3 dealers were fined 40/- and 14/6 costs.
- 2 dealers were ,, 20/- ,, 14/6 ,,

MILK.

One dealer was fined 40/- and 14/6 costs.

One dealer paid costs 15/6.

One case was dismissed on proof of warranty.

In the remaining case the dealer was cautioned, the amount of adulteration being very slight.

WATER SUPPLY.

This district is supplied by the Metropolitan Water Board on all that portion West of the Cranbrook Road, including Fencepiece. The remainder of the district is supplied by the South Essex Water Company.

Some of the outlying cottages are supplied by shallow wells, but, as the Water Companies keep extending their mains, these are becoming less and less.

In May, a sample of water was taken and submitted to Dr. Thresh, for analysis, from the well supplying the cottages belonging to Hainault Farm, situated in the Hainault Road, Chadwell. As the result of the analysis was unfavourable, the attention of the owners was drawn to it, and the matter is receiving attention with a view to connecting up to the South Essex water main.

During October, six samples of water, from six shallow wells, situated at Padnall Corner, were submitted to Dr. Thresh for analysis. I herewith give a typical result of a chemical examination of these waters:—

CHEMICAL EXAMINATION.

	RESU	LTS IN
DETERMINATIONS.	GRAINS PER GALLON.	PARTS PER 100,000.
Total Solid Matter dried at 180		1
deg. C	116.3	166.1
Chlorine	II.I	15.9
Equivalent to Chlorides (60		
°/6 Cl.)	18.5	26.5
Nitric Nitrogen	6.6	9.5
Equivalent to Nitrates (17		
°/° N.)	39.6	57.0
Nitrites	Abs	ent
Hardness: Permanent 36 deg.;		7-00-00-00
Temporary 3 deg.; Total	39 deg.	
Lead, Copper, Zinc, Iron Free Ammonia	Abs	
	0.0006	0.0008
Organic Ammonia Oxygen absorbed at 98 deg. F. in	0.0249	0.0356
	0.446	
3 hours	0.1260	0.1800

In consequence of these reports, the owners were required to connect to the South Essex Water Company's main, which accordingly has now been carried out.

Also at the end of October, samples of water were taken from various shallow wells situated at Aldborough Hatch.

A typical example of the result of these analyses I herewith append:—

CHEMICAL EXAMINATION.

	RESUL	RESULTS IN		
DETERMINATIONS.	GRAINS PER GALLON.			
Total Solid Matter dried at 180				
deg. C	109.2	156.0		
Chlorine	13.3	19.0		
Equivalent to Chlorides (60				
°/ _o Cl.)	22.2	31.7		
Nitric Nitrogen	7.2	10.3		
Equivalent to Nitrates (17		ALTERNATION OF THE PARTY OF THE		
°/ ₈ N.)	43.2	61.8		
Nitrites	Abs	ent		
Hardness: Permanent 42 deg.;		250000		
Temporary 4 deg.; Total				
Lead, Copper, Zinc, Iron				
Free Ammonia		0.2280		
Organic Ammonia		0.0280		
Oxygen absorbed at 98 deg. F. in				
3 hours	0.1820	0.2600		

An agreement having been come to between the Council and the South Essex Water Company to extend their main to this district, notices were served on the Owners to connect up to the Company's supply. As this main also goes past Aldborough Hatch School, a much-needed improvement was carried out at the school by providing a good water supply from the South Essex Water Company.

MILK SUPPLY.

There are at the present time 50 dairies and milk-shops on the register; also 8 cowsheds are registered. Most of the milk-sellers in the district have reasonably good accommodation for storing their milk, and for cleansing their utensils. No new milk-seller is allowed to open premises unless he complies with the Dairies, Cowsheds and Milkshops Orders, in providing satisfactory accommodation, including a good supply of hot and cold water. All the premises are frequently inspected; as, without constant supervision, some of the more careless, even if they have decent accommodation, fail to keep their premises in a cleanly condition.

On the whole, however, the provision and maintenance of these premises is above the average. A few of the leading dairymen have provided a cooling and pasteurising plant on their premises, which is decidedly a gain, both from their point of view, and also from the consumer's. By this means of treating milk at once on receiving it, the keeping qualities of the milk are very much enhanced, without in any way altering the taste or quality of the milk.

The Cowsheds are not in such a satisfactory condition. The Cow-keeper has much to learn in the way of keeping his cattle clean and his milk free from pollution. It must be confessed that his task is rather a herculean one, as a cow has an unfortunate knack of keeping that part of its body, which should be the cleanest, in the foulest condition. It requires more constant labour than the average man is disposed to spend on the grooming, cleansing, etc., of a cow.

During the year a copy of Section 17, sub-section 5, under the Dairies, Cowsheds and Milkshops Orders, has been supplied to all the Cowkeepers in the district, with a request to keep it in a prominent position in their cowshed, and to see that its provisions are carried out. As a result,

I am of opinion that there has been an increased endeavour to carry out these requirements.

In January, a sample of milk was submitted to Dr. Thresh, for analysis, and gave the following result on examination:—

- "This milk contained millions of bacteria per cubic centimetre, and the B. coli was found in 1-10 of a c.c., and the B. enteritidis sporogones in 5. c.c.
- "The grosser dirt amounted to 40 parts per million, and in it were particles of straw, etc., which would not have passed through a gauzed sieve.
- "The dirt was dark brown in colour. Under the microscope it showed the presence of vegetable debris, masses of bacteria, and round granular cells, resembling pus cells, in abundance.
- "In my opinion, this was a dirty milk produced under grossly insanitary conditions."

In consequence of this, the firm supplying the milk were communicated with, and resulted in increased care and improvement being made.

BAKEHOUSES.

There are 32 bakehouses in the district. One of these is an underground bakehouse, but it is comparatively modern, and is kept in decent condition.

Some of them are kept in good and cleanly condition, but a few of the others would soon be in a most undesirable state if they were not constantly under supervision.

Like every other trade, the men engaged in it vary much as to their ideas of cleanliness, and to the trouble they will take in keeping their premises in a sanitary condition, Taken as a whole, they may be considered as kept in a fair state.

MEAT SUPPLY.

There are 3 Slaughter-houses licensed annually in the district. They are all inspected frequently and are kept in decent condition.

Obviously, a very small proportion of the meat consumed in the district is killed on the spot. The bulk of the meat, especially beef, comes from the Central Meat Market at Smithfield.

The following articles were condemned as unfit for consumption:—

8 lbs. of sheep's plucks.

5 sets of ox lungs.

13 lbs of ox liver.

61 lbs. of sheep's liver.

1 set of sheep's lungs.

I rabbit.

VEGETABLE AND FRUIT SHOPS.

These have been frequently inspected during the past year, and any doubtful goods for sale put aside.

17 cwts. of potatoes were condemned during the year.

OFFFNSIVE TRADES.

There are none in the district.

FACTORIES.

The duties of Sanitary Authorities with regard to factories are not extensive, and are practically limited to supervision with regard to provision of means of escape in case of fire, and also of sufficient sanitary convenience.

There are 64 factories in the district.

WORKSHOPS AND WORKPLACES.

Under the Factory and Workshops Act, 1901, each Local Authority is obliged to keep a register of Workshops and Workplaces, and to forward to other Authorities the addresses of outworkers employed by masters in their district, but who reside in other districts.

The Medical Officer of Health is required to report to the Home Office and the Local Government Board on the administration of the Act in their district during the preceding year, with regard to:—

- (a) Cleanliness.
- (b) Air space.
- (c) Ventilation.
- (d) Drainage of floors on which wet processes are carried on.
- (e) Provision of suitable and sufficient sanitary conveniences.

There are 477 workshops in the district. They are:-

Artificial Flowers	 	I
Bead Worker	 	1
Blind and Cover Maker	 	1
Book Binder	 	1
Boot Makers and Repairers	 	74

Brush Makers		
Box Makers		
Cabinet Maker		
Carpenters and Joiners		
Carpet Planning		1.
Corset Making		
Cycle and Motor Making	and	
Repairing	and	
Dentists		10
Dressmakers		2
Electrical Fitter		117
Embroidery Work		I
Engineer's Workshop		4
Feather Dressers		1
Florist	****	3
French Polisher	***	2
Gas Fitter	***	I
Gelatine Cutting and Groo		1
Sundries	ers	
Glass Cuttor	***	I
Glass Cutter		I
Jobmasters	• • • •	3
Jeweller		1
Laundries (Hand)		36
Masons	***	5
Machine Repairs		
Willinery		2
Millinery	****	
Optician		I
Photographer		I
Plumbers		9
Printers	***	5
Printers		4
Purse Maker and Mattress Tufts		1
ag Sorting and Storing addlers and Harness Makers		
addicts and Trarness Makers		6

Scale Maker	1
Shoe Fittings	1
Smiths	9
India Rubber and Surgical Instru-	
ment Makers	3
Tailors	-19
Tin Plate Workers	2
Umbrella Makers and Repairers	5
Upholsterers	5
Undertakers	6
Watch Makers and Repairers	13
Wearing Apparel	61
Wheelwrights and Carriage Builders	4
Total	477

There have been 210 visits paid to workshops and workrooms during the year.

FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES, AND HOMEWORK.

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

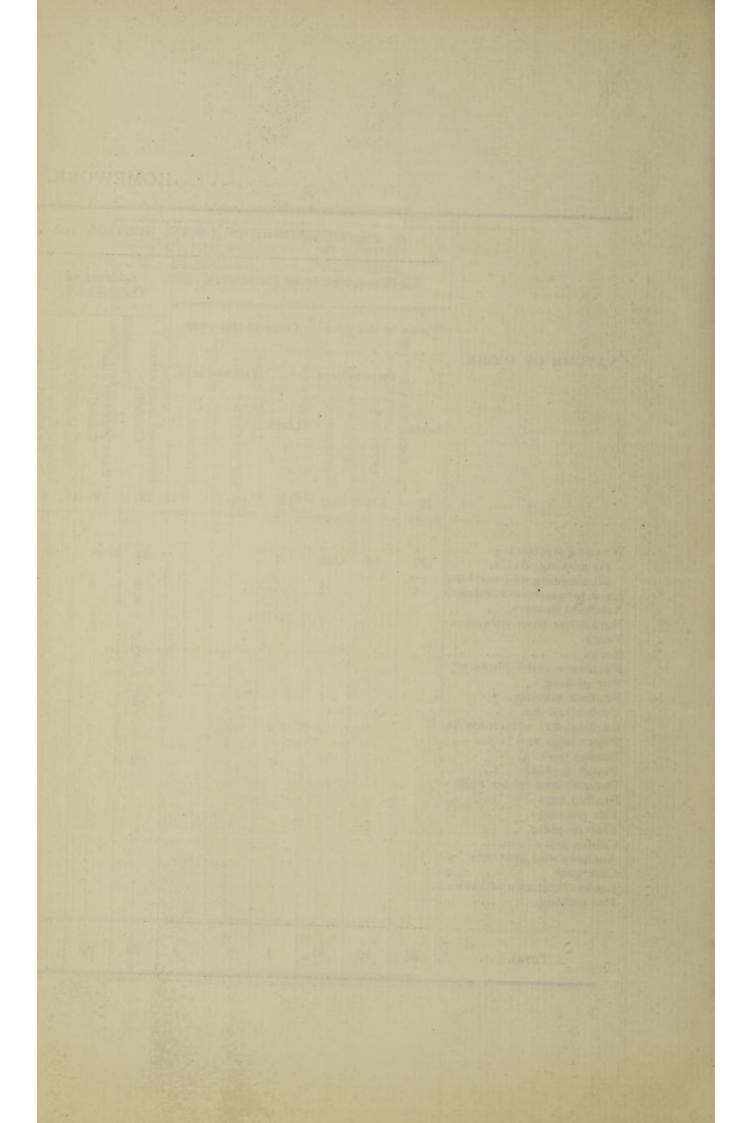
	Number of							
Premises.	Inspections.	Written Notices. (3)	Prosecutions (4)					
Factories (including Factory Laundries)	54							
Workshops (including Workshop Laundries)	210	11						
Workplaces (other than Out- workers' premises included in Part 3 of this report)								
Total	264	11	- · · ·					

2.—DEFECTS FOUND.

		Nun	nber of Def	ects.	r of
Particulars.		Found.	Remedied.	Referred to H.M. Insp'tor (4)	Number of
	D 111 FF 111				-
Nuisances under the Act:-	Public Health		The second	1 mai	
Want of cleanline	cc	20	20	100000	
Want of ventilatio		20	20		
Overcrowding		3	3		
Want of drainage		I	I		
Other nuisances		28	28		
	insufficient				130
Sanitary accom- modation	unsuitable or defective not separate for sexes	9	9		
	of underground				1000
	ences relating to ch are included		44		
Tot	al	. 107	107		

3.—HOMEWORK.

					KERS'							20	UNW	OUTWORK IN INWHOLESOME PREMISES, SECTION 108. OUTWORK IN INFECTED PREMISES, SECTIONS 109, 11			ED ES,			
	Li	ists rec	eived f	rom E	mploye	rs.	Address of Outworkers. Prosecutions.				orke	SEC	TION	108.	SECTIONS 109, 110					
NATURE OF WORK.	Twice	e in the	year.	Once	in the	year.				-		outw.					110).	0).		
				Outwo	orkers.		Outwe	orkers.	other s.	o other	ed on to keep g lists.	cep or	d lists.	ions of out premises.	ces.	served	ations.	nces.		utions 109, 11
	Lists.	Contractors.	Workmen.	Lists.	Contractors,	Workmen.	Received from other Councils.	Forwarded to other Councils. Notices served on Occupiers as to keeping or sending lists. Failing to keep or permit inspection of	Failing to keep or permit inspection of lists. Failing to send lists.	Inspections of outworkers' premises.	Instances.	Notices served.	Prosecutions,	Instances,	Orders made (S.	Prosecutions (Sections 109, 110)				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)		
Wearing Apparel— (1) making, &c	2	16	82	1		3	84 5 2 1 4 1 2	75 5				66 3 2 1 2 1								
TOTAL	34	16	84	1		3	99	80				76								



4.—REGISTERED WORKSHOPS.

	shops on the Register (s. 131) at the end of the year. (1)	Number (2)
mportant classes of workshops, such as workshop bakehouses, may be enumerated here.	Bakehouses (excluding Factory Bakehouses) Total number of workshops on Register	30

5.—OTHER MATTERS.

Class.	Number (2)
Matters notified to H.M. Inspector of Factories: Failure to affix Abstract of the Factory and Workshop Act (s. 133)	3
Underground Bakehouses (s. 101):— Certificates granted during the year In use at the end of the year	

HOUSING OF THE WORKING CLASSES.

During the past year 2 notices have been served under the Housing of the Working Classes Act, 1890.

Two cottages that were closed as a result of notices in the previous year have now been put in a state of habitable repair, water laid on from the South Essex Water Company's new main, and are again occupied.

REMOVAL OF HOUSE REFUSE.

Collection is made once a week throughout the whole district, and is carried out by the Council. Previous to 1901 this work was put out to contractors; but in that year part of the district was scavenged by the Council, and it was found possible to do it more efficiently and cheaply than under the contract system. In 1902 the Council decided to undertake the collection in the whole district. Most of the dustbins are portable ones, and supervision is exercised to see that suitable receptacles are used and kept in order.

The collection is under the direction of the Chief Sanitary Inspector, and is carried out very efficiently.

During the year the tip at the old gravel pit, Aldborough Hatch, has been in continuous use.

An application has been made to the Local Government Board for a loan for the erection of a dust destructor, and an enquiry was held by Inspector A. E. Drury.

SEWERAGE AND SEWAGE DISPOSAL.

During the past year a new sewer was laid down in the district, along Fencepiece Road. This takes the drainage

from several cottages that were formerly drained into cesspools, with overflows into ditches.

In August there was a violent explosion at the Sewage Works, involving the destruction of one septic tank and some drainage to the neighbouring ones. Mr. A. J. Martin, M.Inst.C.E., was called in by the Council to report as to the cause, and gave as his opinion that it was due to the lighting back of the inflammable gases conveyed from the tanks to the boiler. He also made various suggestions to prevent a similar recurrence.

The Wanstead Urban District Council's Sewage Works adjoin the boundary of this district in one portion, and during 1907 there were complaints of a nuisance arising from these works. During 1908 an enlargement of their contact bed system has been carried out, and, if properly managed, one would hope there will be no recurrence of any trouble from these Works.

SECTION V.

Report of Chief Sanitary Inspector.

SECTION V

Chief Sanitary Inspector

ANNUAL REPORT

_ OF __

Chief Sanitary Inspector.

Public Health Department,

Council Offices,

ILFORD.

31st March, 1909.

To the Chairman and Members
of the Ilford Urban District Council.

GENTLEMEN,

I have the honour to submit to you my Sixteenth Annual Report, and, in doing so, desire to express my appreciation of the kindness and support I have received from you, and particularly from the members of the Public Health Committee, whose confidence it has always been my endeavour to merit.

I also wish to record my appreciation of the work done by the Assistant Sanitary Inspectors. They have done good work, and, I believe, have conscientiously endeavoured to carry out their duties so as to maintain the sanitary condition of the district in a high state of efficiency. The Clerks have carried out their duties satisfactorily, and have always been obliging and painstaking. The work of Mr. May, the Dust Foreman, has again been most satisfactory, and the efficiency in the collection of the house refuse is very largely due to his steady working and courteous manner.

I also appreciate, and desire to acknowledge, the kind co-operation of the other officials with whom I have come in contact in carrying out my duties.

I am, Gentlemen,

Your obedient Servant,

F. W. KING, Chief Sanitary Inspector.

SUMMARY OF VISITS AS ENTERED IN JOURNAL DURING THE YEAR 1908.

Houses a	nd premises	inspe	cted				3661
Do.	do.	do		durir	ng w	ork	3677
Visits re	disinfection of	prer	nises				1108
Nuisances	detected						1315
Do.	abated						1317*
Do.	unabated						53
Complaint	ts received						297
Houses d	isinfected						596
Articles	do						5365

^{*} Included in this number are some nuisances which were outstanding previous to 1908.

NOTICES SERVED.

Notices.	Served 1908.	Complied with 1908.	Outstanding 1909.
Statutory	13	22	
Preliminary	235		177
Do. (by letter)	160	436	17
Pave Yard (Ilford Improvement Act)	14	16	54
Provide Dustbin (Ilford Improvement	1 4	10	11
Act)	124	150	2
Cleanse Cistern (Bye-laws)	187	207	3
Cover Do. Do	40	1000000	777
Provide Water to Dwelling-House	7	43	4
Lay on do. do. (Special)	12	4	8
Cleanse Dwelling-House (Infectious	1	4	0
Diseases (Prevention) Act, 1890)	73	72	2
Cleanse Dwelling-House (Sec. 46	13	73	3
Public Health Act, 1875)	2	2	
Factory and Workshop	II	13	
Housing of the Working Classes Act	2	-3	2
0			
Totals	1189	1223*	115

^{*} Included in this number are some notices outstanding previous to 1908.

NUISANCES.

Where a nuisance is found, the procedure is to call the attention of the owner or occupier (as the case may be) to the fact by letter or preliminary notice. If the requirements to abate the nuisance are not carried out, the matter is reported to the Public Health Committee, and they then recommend to the Council that a notice be served in accordance with the Statute. If this notice is not complied with within the time stated, legal proceedings can then be taken if the Council so decide.

As you will see under the heading "Notices Served," only 13 statutory notices had to be issued, and no summonses were taken out as the result thereof. I find most owners of property willing to carry out my requirements, provided I can convince them they are not unreasonable. Nearly the whole of the work mentioned in the following statement was carried out after a letter or preliminary notice had been sent to the responsible person, setting forth the particular defects or breach of bye-laws, together with the remedial measures recommended.

SUMMARY OF NUISANCES.

For the detection and abatement of nuisances, the district has been systematically inspected, especially in the localities where they are likely to exist and recur. As a result, the following work was carried out:—

Drainage.	TOTALS.
Cesspits and privies abolished	1
Do. do. emptied and cleansed	52
Connections made to main sewer	. 5
Ditches cleansed	14
Drains cleansed	403
Do. sealed	20
Do. repaired or re-laid	231
Do. disconnected	10
Flushing cisterns to W.C.'s, urinals, etc.,	
repaired or provided	133
Inspection chambers provided	21
Manhole covers fitted	29
Pail closets provided	3
Rain-water pipes disconnected	5

Drainage—continued.	TOTALS.
Sink waste pipes provided and repaired	56
Do. do. trapped	I
Do. do. disconnected from drains	
Ventilation shafts repaired or provided	43
Water-closets re-built	3
Do. do. ventilated	1
Water laid on to closets	30
W.C. pans and traps provided	98
W.C. fittings repaired	106
W.C. floors cemented	77
Yards drained	47
	""
Defects in Dwelling Houses.	
Houses concreted under floors	29
Do. ventilated do	13
Dilapidated houses repaired	14
Floors repaired	65
House closed	1
Houses cleansed	164
New baths provided	11
Overcrowding abated	7
Rain-water spouts cleansed, repaired, or	,
provided	89
Roofs repaired	53
Walls protected	38
Walls and ceilings repaired	
Water fittings repaired	16
Water laid on	46
Water storage cisterns provided or repaired	
Windows made to open	
Window and door frames repaired	
Yard paving repaired	
Yards cleansed	

Ilford Improvements Acts.	TOTALS.
Galvanised iron dust-bins provided	 200
Lands fenced in	 2
Water laid on	 25
Yards paved	 28
Bye-laws.	
Water storage cisterns cleansed	 205
Do. do. covered	54
20.	37
Infectious Diseases (Prevention) Act.	
Articles removed for disinfection	5365
Houses disinfected	596
Rooms stripped and cleansed	 83
Dairies Regulations.	
Animals groomed	 52
Cowsheds cleansed	 5
Dairy sheds provided	3
Dairies cleansed	30
Dairy utensils cleansed	 6
Dairy floor repaired	 4
Dairy drain removed	 1
Hot water supply provided	 I
Accumulations of Refuse, &c.	
Dead animals removed	 23
Manure receptacles provided	9
Do. and refuse removed	148
Stagnant water removed from basement	23
Trade refuse bins provided	 2

SLAUGHTER HOUSE-BYE-LAWS.	TOTALS					
Offal bins provided	7					
Slaughter houses cleansed	5					
Workshops Acts.						
Accumulation removed	I					
Animals removed	8					
Bakehouses cleansed	44					
Drain cleansed	5					
Do. repaired	2					
Floors cleansed	2					
Flushing cisterns fitted and repaired	8					
Floors drained	I					
Gutters cleansed	I					
Overcrowding abated	3					
Paving repaired	- 1					
Roofs repaired	I					
Troughs improved	I					
Temporary buildings removed	I					
Urinal provided	I					
Unsuitable workshop vacated	I					
Vent shaft repaired	I					
Walls and ceilings cleansed and limewashed						
Water fittings repaired	1					
Workshops ventilated	2					
W.C. floors cemented	2					
W.C. pans cleansed	2					
Yards paved and drained						
Yards cleansed						
Third ciculoca	3					
GENERALLY.						
Animals (improperly kept) removed	339					
Bedding cleansed	9					
Do. destroyed	I					

GENERALLY—continued.	Totals.							
Gipsy Caravans removed	27							
Human remains removed and re-interred	585							
Houses provided with improved water supply	43							
Roadways, courtways, and rearways cleansed	43							
Do. do. do. made up	7							
Smoke nuisances abated	2							
Stables cleansed	6							
Water fittings repaired	1							
Wells closed	5							
COMPLAINTS.								
Accumulation of refuse and manure	60							
Animals improperly kept	21							
Choked drains	41-							
Decomposing bodies of animals	6							
Defective drains	40							
Flooding of premises	9							
Improper water supply	6							
Insanitary condition of rear and sideways	5							
No dustbins	8							
Overcrowding	5							
Smoke nuisances	2							
Smells pervading neighbourhood	24							
Sanitary defects	37							
Streams obstructed	6							
Unsound food exposed	2							
Unfenced land	4							
	-							
Total	276							

All of these were at once investigated, and dealt with accordingly.

INFECTIOUS DISEASES.

Nearly every house in which any infectious disease occurred was visited; the sanitary arrangements and the surroundings were carefully examined for the purpose of ascertaining whether any defects or nuisances existed. Also, too, in a large number of cases the drains were subsequently tested. Directions were given respecting isolation, and the usual rules to be observed to prevent the spread of the disease. Inquiry was also made to ascertain the probable origin and history of each case, the result being reported to the Medical Officer of Health.

The number of cases of infectious disease notified and entered in the Register was 679.

WATER SUPPLY.

Very few complaints were received respecting shortage of water. These, upon investigation, showed the cause to arise principally from defective fittings.

Both the Metropolitan Water Board and the South Essex Waterworks Company notified us when the supply of water was cut off from any house. Where it was found that the house was occupied, a notice was immediately served upon the owner calling upon him to provide a supply forthwith.

During the year the South Essex Waterworks Company extended their mains at Padnall Corner and Aldborough Hatch.

HOUSING OF THE WORKING CLASSES ACT.

No legal action under this Act had to be taken during the year. The two cottages mentioned in my report for last year, and for which notices were served, have been placed in habitable repair, and a supply of water laid on to them from the South Essex Waterworks Company's main.

GIPSIES AND TENT DWELLERS.

Considerable trouble was again given us during the year by gipsies. The inhabitants of the neighbourhood in which the camps were formed frequently complained of the annoyance caused by them, and from the children continually knocking at the doors begging and asking for water. These nomads are generally filthy in their habits, and the surroundings of the camp soon become most insanitary. owners of the land have been called upon time after time to remove these undesirable visitors, and, with the aid of the police, have succeeded in doing so, but unfortunately they were found a few hours later in another part of the district, so that the proceedings had to be repeated. The greatest difficulty is experienced in dealing with these people, as the existing powers seem to me to be quite inoperative, and I consider it is quite time the Legislature adopted some stringent measures to prevent them trespassing upon private lands, living in squalor and under insanitary conditions, besides allowing the children to remain uneducated.

PERIODICAL INSPECTIONS.

1. Cowsheds (8). These are situated as follows:—
Hainault Farm, Chadwell.
Padnall Corner (2), Chadwell.
White Rose Hall, Barkingside.
245, High Road, rear of.
New Road.
Green Lane.

Farnham Road.

These were all visited at various times, and generally were found to be kept in a satisfactory condition. It is very necessary to make frequent visits, as in one or two cases the occupiers are inclined to be rather neglectful in the care of the premises as regards cleanliness.

- 2. Dairies and Milkshops (50). These have been frequently visited, and careful attention given to the arrangements, so as to obtain cleanliness of the vessels and suitable accommodation for storing the milk under favourable conditions.
- 3. Bakehouses (32). These have been systematically inspected, and limewashing and cleansing ordered to be carried out when found necessary.
- 4. Workshops (477). The number of visits made to workshops and factories during the year was 210. Notices were served to abate any nuisances when found to exist. As will be seen from the summary of nuisances, various works were carried out at some of the workshops and factories.
- 5. SLAUGHTER-HOUSES (3). These are situated as follows:—

3, The Pavement, Ilford Lane.

60, High Street.

The Post Office, High Street, Barkingside.

These were all visited periodically, and especially when the slaughtering of animals was going on.

INSPECTION OF FOOD.

Periodical visits were made to the shops in the district for the purpose of inspecting food exposed for sale. Messrs. Monkcom and Haigh, Assistant Sanitary Inspectors, both hold the certificate of The Royal Sanitary Institute for Inspectors of Meat and Other Foods, and they have taken a keen interest in this part of their work. During the year the following articles were examined by your Inspectors, and, after consultation with, and examination by, the Medical Officer of Health, found unfit for human food, and destroyed:—

1 box of skate; 1 box of rock salmon; 1 box of smoked haddocks; 2 large boxes of gurnet; 9½ dozen haddocks; 14lbs. of fish roes; 8lbs. of sheeps' plucks; 5 sets of ox lungs; 13lbs. of ox liver; 6½lbs. of sheeps' liver; 1 set of sheeps' lungs; 1 rabbit; 180 eggs; and 17cwts. of potatoes.

REMOVAL OF HOUSE REFUSE.

The number of loads of house refuse removed and the number of horses and vans engaged in the collection during the twelve months ended the 26th December was as follows:—

ows						Loads o	Horses nd Vans.
Four	weeks	ended	25th	Jan.		890	 303
Do.	do.	do.	22nd	Feb.		884	 300
Five	do.	do.	28th	Mar.		1102	 375
Four	do.	do.	25th	April		893	 300
Do.	do.	do.	23rd	May		918	 305
Five	do.	do.	27th	June		1133	 384
Four	do.	do.	25th	July		897	 306
Do.	do.	do.	22nd	Aug.		868	 307
Five	do.	do.	26th	Sept.		1109	 385
Four	do.	do.	24th	Oct.		901	 308
Do.	do.	do.	21st	Nov.		907	 308
Five	do.	do.	26th	Dec.		1106	 384
					101	11608	 3965

The number of days upon which collection took place was 307.

The average number of horses and vans engaged per day was 12.91.

The average number of loads of refuse removed per horse per day was 2.93.

There are about 14,000 houses in the district from which a weekly collection of house refuse is made. It is also collected from the Village Homes each week.

The capacity of the vans is 3 cubic yards each, and I estimate the total number of loads of refuse collected represents in weight about 15,000 tons.

DISPOSAL OF HOUSE REFUSE.

As last year, the whole of the refuse has been disposed of by tipping it into disused gravel-pits, and for making up low-lying ground. Out of the total number of loads collected, 9,936 were deposited in the gravel-pit at Aldborough Hatch.

Everything which could be reasonably expected was done to prevent any nuisance arising from the refuse whilst being tipped. Each load was at once levelled down, and the refuse treated several times a day with gas lime and earth. At the close of the day it was covered with 3 to 4 inches of earth, and the exposed face liberally treated with gas lime.

The finding of suitable tips has become an extremely difficult matter, and when the present one is no longer available I do not know where to go next. The erection of a destructor is therefore a matter of considerable urgency.

the brighten mary line better the reduction former and

booted as close sales a service to the company of E

the second region to describe an expression