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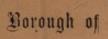
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Wolvenhampton.

REPORT

ON THE

HEALTH OF THE BOROUGH

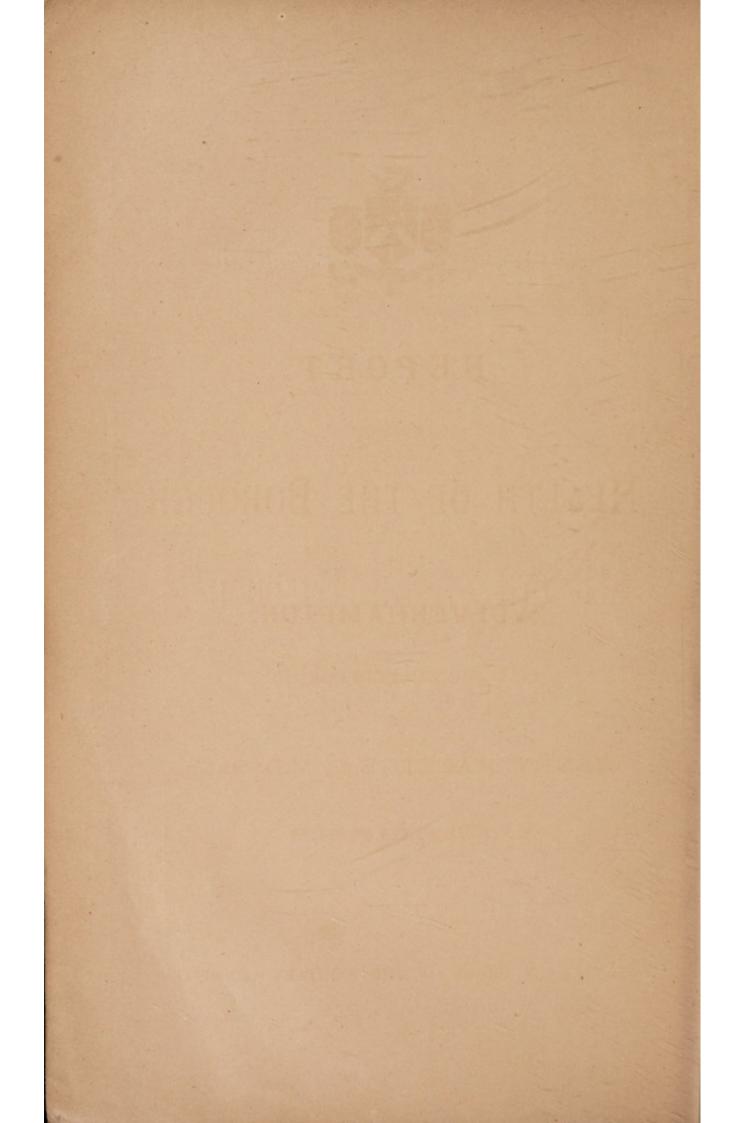
OF

WOLVERHAMPTON.

FOR THE YEAR 1885.

WOLVERHAMPTON:

CULLWICK BROTHERS, PRINTERS, MARKET STREET.







REPORT

ON THE

HEALTH OF THE BOROUGH

OF

WOLVERHAMPTON,

FOR THE YEAR 1885,

BY

HENRY MALET, B.A., M.D., B.Ch.,

MEDICAL OFFICER OF HEALTH.

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MEDICAL OFFICER'S REPORT, 1885.

Prevalence and Prevention of Infectious Disease.

AS is usual I commence my report with an account of the prevalence of infectious diseases during the year and the measures adopted for their prevention. Although Small-pox has been almost constantly present in our neighbourhood, and gave rise to occasional anxiety, the Borough has most happily remained free from it; this remission has been a double benefit, inasmuch as it has enabled us to make most valuable use of the Borough Hospital. It will be remembered that the present partial buildings were erected in 1884 under the pressure of a continual recurrence of Small-pox, and that they were utilized for the isolation of the last cases we had; the last annual report in its account of the previous laborious and defective isolation shows what a valuable acquisition this Hospital is. In consequence however of a continued immunity from Small-pox and consequent disuse of the Borough Hospital, it was suggested early last year that the buildings should be utilized for the isolation of Scarlet Fever, and at the request of your Committee I made a report on the probable expenditure that would be required to effect this. In that report I made the following comparison between Small-pox and Scarlet Fever, the number of cases of the former even in times of epidemic is always limited by vaccination, and for the same reason most of them are exceedingly mild, hence the amount of provision needed for their treatment is comparatively small and the attendance trifling; but against Scarlet Fever there is no vaccination and the number of cases and the proportion of severe ones are therefore far greater; hence although we might depend on the sufficiency of our partially-erected Borough Hospital to prevent an epidemic of Small-pox we could not equally rely on it against Scarlet Fever, and I showed in my report that to deal with the latter disease we would need increased staff, and further buildings to accommodate them; but I also showed that, without any such expenditure, the present buildings might be used to supply a want which I had long felt to be very urgent, and to which I drew attention in my 3rd quarterly report for 1883:-"Scarlet Fever also gives cause for apprehension, many cases arising in "different parts of the town which from their mildness are very difficult to deal "with as they seldom come under medical treatment except for subsequent "complications, and are therefore either unreported, or only heard of when convalescent. These last cases have made me feel very strongly the great need of an
Infectious Hospital, as I am reluctant to incur the expense (£5) necessary for
damission to the Staffordshire General Hospital for the mere isolation of a
case practically well and needing no medical treatment. When our own
Hospital is completed such cases can be isolated at a very trifling cost and a
very dangerous state of affairs avoided; there can be no doubt but that these
mild cases of Scarlet Fever so continually occurring and keeping up the
infection render the town liable to a terrible outbreak of the disease when
any circumstance gives rise to a more virulent type."

Many cases of Scarlet fever although sufficiently isolated at home when confined to bed by actual illness, are quite neglected during the long and highly infectious convalescence, and many others are not heard of by us until the stage of actual illness is past; partly because of the number of these cases, and partly because of the cost of an admission to the General Hospital, I only sent there such as had especially bad surroundings; hence our isolation was grieviously imperfect, for in the above cases either there is no medical attendance or it has ceased, and the parents have neither discretion nor power to prevent the children carrying infection about. For the isolation of these mild and convalescent cases the Borough Hospital appeared eminently suitable, and it was opened for their reception early in July; the first case was admitted on the 6th of August, since which period it has been in constant use.

Measles. After the severe epidemic of last year we have naturally had a minimum of this disease, only 23 cases were heard of, one being a death, the latter had been taken ill the previous November, and died I presume of some late complication; two of the other cases also occurred last year but were not then heard of. Most of the others were separate cases, but in one instance there was a slight spread through negligence. No case has been isolated by removal to Hospital, this measure I would rarely resort to, for the infection of Measles is so early and so soon over that removal would be too late to be of any practical use by the time we heard of the illness. Rooms and clothing have been disinfected when it appeared necessary, frequently the lateness of our information rendered even this useless.

Scarlet Fever. We have been severely threatened by this disease during the year, although, as I hope to show, it has on the whole been very successfully contended with. We have had 9 more deaths and 32 more cases than during 1884; the gravity of Scarlet Fever, its ready and prolonged infectiousness, and usually easy recognition combine to make its prompt isolation possible and of the greatest benefit; and hence it yields the best return for such preventitive care, and I feel confident that we have been well repaid the attention bestowed upon it. The prevalences of the disease in the East subdistrict and in the West have been so apparently distinct, and present so many points of contrast, that they are best considered separately; the following arrangement shows the leading features.

Summary of all the cases of Scarlet Fever reported in the sub-districts, and the amount of Hospital Isolation attained in each:—

		QUARTERS			1st.	2nd.	3rd.	4th.	Year.
STRICT.		GENERAL	By us By frien Deaths	nds	22 3 6	8 5 3	10	4	44 8 11
East Sub-District.	Cases Removed to Hospital.	Borough	By us Deaths		::	::	11 2	5	16
East		Total Removals	3		25 6	13 3	21 4	9	68 13
	Total number of cas	es reported	::		44 16	62 13	30 8	10	146 37
or.	Total number of cas	es reported	::	::	15	12	19	52 6	98 9
DISTRI		Total Removals	3		4	3	3	18	28 2
West Sub-District.	Cases Removed to Hospital.	GENERAL	By us By frien Deaths	ds	3 1 1	3	2 1 	5 1 1	13 3 2
W		Borough	By us Deaths		::	::	::	12	12

The greater number of cases in the East is natural, considering the facilities for extension afforded by its poverty, crowding, and larger child population; but it is peculiar that the type of disease there has been so much worse than in the West, the proportion of deaths to cases being much greater in the former sub-district, even among those treated in Hospital; the same fact appears from our reports of the individual cases. The table does not quite correctly represent the progress of the disease, for cases are recorded as they are discovered and not as they occur; of the 62 cases credited to the second quarter in the East, 13 belonged to the first quarter, but were not found out until after its close; taking account of this, it appears that there has been a steady and rapid decline from quarter to quarter in the East, in spite of its disadvantages and the bad type of disease; and on the other hand the milder outbreak in the West has, especially at the close, rapidly increased. Another point of comparison between the sub-districts is the proportion of Hospital removals and total cases, this being much greater in the East, especially in the last two quarters, when the utilization of the Borough Hospital gave more complete facilities, although in the last quarter the isolations in the West have also much increased. The explanation of this is sufficiently obvious; (1) on account of the mildness of the outbreak in the West, but few of the cases came under the head of those requiring removal to the General Hospital, (2) on account of the better houses in the West, it is rarely possible to state that home isolation is unpracticable, and therefore we can exer-

cise no compulsion in removals, and the parents are too well off to desire, and too self-sufficient to consider necessary, the removal of their children; in the East, home isolation is rarely possible, and the poverty of the parents makes them more readily acquiesce in their children being taken to Hospital. It is impossible not to connect the rapid diminution of the East cases with its more perfect isolation, insomuch as in all other respects (severity of disease, poverty, crowding, more children) it is under great disadvantages as compared with the West, where the disease was at the same time steadily on the increase; in the last quarter the isolation in the East was practically complete, 9 out of 10 cases being removed, and the other case not needing it, and at the close of the year not a single case of Scarlet Fever was known of in this sub-district; so that we may fairly claim a large share in extinguishing the outbreak there. The lesson thus learned is a very important one, and I wish it could be brought home to those whom it chiefly concerns; it is forcibly confirmed by the observation of the individual cases, the instances of carelessness and ignorance with regard to infection being painfully numerous, and showing the impossibility of keeping the disease in check apart from Hospital isolation. As I am especially desirous of drawing attention to this point, and wish to confirm what I allege about the public carelessness, I give briefly a few cases from our record of Infectious Diseases, the numbers are those in the general record, and re-commence each quarter.

First Quarter-

- Case 8; this child was found still desquamating, in a down-stairs room with two other children, one of these took the fever later; subsequently three children next door took the infection and two of them died.
- Case 12; had the Fever from a case on the opposite side of the street (only heard of by us after its death, its brother also took the Fever), 12 was found in a down-stairs room freely peeling, and with three other children, one of these was an errand boy at a shop where he came in contact with his employer's son, this lad, and eventually his brother and sister all took the Fever.
- Case 26; having Scarlet Fever, was visited by three children, all of whom (cases 24, 25, and 30) took the disease and one died.
- Case 40; mother refused to allow this child to be removed and I had to obtain a magistrate's order to do so; afterwards I found a girl had gone from this house as servant to a distant part of the town, and here case 41 occurred in consequence, this case 41 was in a dwelling house attached to a shop (much frequented by children) and having no back yard the washing was sent out. Hearing of the case I visited and found the child very ill, in a carpeted bedroom with a quantity of clothing hanging round the walls, the entrance being through a small room nearly full of clothing; I had the greatest difficulty in persuading the parents to allow of this child's removal; we disinfected the premises as thoroughly as possible and stoved all the clothing we could get; as there were three other children here and the circumstances rendered the effect of the disinfection doubtful we made regular inquiries as to their health, and were always informed they were quite well; at length I insisted on seeing the children and found cases 56 and 57, who had been three weeks ill and were now up and freely peeling in the room mentioned above, their mother going to the room and attending in the shop; subsequently the remaining child (case 58) took the Fever.

Case 75; had the Fever without our knowledge, her cousins 53, 54, 59 took it, and 53 and 54 died; 52, another child in the same court, took it and died; 55 went to see the dead body of 52 and took the Fever severely (this child 55 was in a lodging house; in a room crowded with clothing and next to a room used as a clothes store, we could scarcely persuade them to allow of her removal to Hospital); 60, 61, 63, 67, and 4, (second quarter), relations of 53 and 55, all took the Fever, and 61 and 63 died.

Besides the above we had in one street, in three neighbouring houses, 6, 5, and 6 cases respectively.

Second Quarter-

- Case 2; when discovered was dropsical and peeling, had been taken ill a month previously, and had been attending school since.
- Cases 73 and 74; both took the Fever by visiting the dead body of case 62, and both died.

Third Quarter-

- Case 24; being reported inquiries were made and cases 25 and 26 were found in a neighbouring house, 25 had the Fever first, she visited 24 who took it from her and died; 26 a brother of 25 also died, and 27 a brother of 24 also took the Fever.
- Case 47; was taken to the General Hospital dropsical and peeling freely, parents did not know it had Scarlet Fever, and two brothers were then attending school.

Fourth Quarter-

- Case 10; had no doctor, medicine obtained from a chemist, after a month sent to school while still peeling; 8 and 9 children in same yard taken ill later, medicine obtained from a chemist, doctor finally called in when 9 was dying; 16 and 17, children next door, had the Fever a few weeks later.
- Case 18; only heard of when peeling, parents and nine children here, a good house with three bedrooms, vainly tried to persuade parents to allow child's removal, child took cold and died of Dropsy; family refused to allow us to do any disinfection; case 40, another of the children had the Fever and again we vainly tried to remove; 59, 60, and 61, children across the street who played with the above children, took the Fever, and their mother refused to allow of their removal; 59 died of Dropsy.
- Case 33; when our Inspector called he found five neighbours, four of them children, in the room with the sick child.
- Case 46; a child aged six was found out walking when peeling although the mother had been cautioned about her.
- Case 62; when reported was too ill to remove to Hospital and as it was in a bad locality minute directions were given about the care needed in isolation, three days after I found a neighbour's child playing with it.
- Case 66; a little girl was brought to me as an out-patient at the General Hospital, and the mother told me the child "had a touch of Scarlet Fever three weeks ago," I found the child peeling freely, and on making inquiries found (case 67) her brother had been ill at the same time but "was now well and at school"; I saw this boy the next day and found him also freely peeling.

Some of the above cases appear almost incredible, showing as they do such ignorance, such all but criminal negligence, and such a selfish disregard, not only for the rights but even for the lives of others; we even find many parents rather than deny themselves to the extent of a short parting from one child, or rather than submit it to the fancied ill of a short stay in Hospital, will

risk the lives of their other children as well as those of their neighbours. Education in this matter is urgently needed, for no external pressure will bring about the required state of affairs, those concerned must themselves be brought to feel the necessity for isolating such diseases, the impossibility of doing it at home, and the great advantages both to the sick themselves, and to all around them of a removal to Hospital; then only can we hope for their cordial co-operation and for the full benefit of preventive treatment. Much good work is being done by the Ladies' Sanitary Association in imparting practical knowledge to women, and I would indicate to them the above as a most important part of their programme. I would also urge on all Teachers, and especially on the district visitors and others in connection with religious work in the town, that they might make a most practical addition to their functions by impressing the duty of self-denial and consideration for others in connection with infectious disease. I would also respectfully express my conviction that (at any rate in times of epidemic) the pulpit might be well employed to teach the duty of practically caring for the health and welfare of others. We officials are powerless in this matter, our assertions are looked on with distrust or simply disregarded; only those in whom people have personal confidence can produce any effect. It must be remembered that the ignorance and negligence complained of is by no means confined to the poorest classes, numerous cases and some of the most flagrant ones have occurred amongst the comparatively well off. I am glad to be able to add that increased experience of the Borough Hospital has helped to break down a good deal of prejudice, and the improved proportion of removals to cases in the West sub-district during the last quarter is partly I believe in consequence of this; all the children have been very happy and contented in the Hospital, and many of them regret having to leave.

The 244 cases were reported to us as follows:—By our own Inspectors, 75; Parish Medical Officers, 59; Registrars of Deaths, 15; Medical Men, 24; court sweepers, 5; from the various Schools, 10; School Board Inspectors, 12; from the General Hospital, 11; Police, 4; by relatives, 7; various other sources, 22. It will be found of interest to read the paragraph on Scarlet Fever in last year's report in connection with this year's.

Diphtheria. With perfect drainage, ventilation, and cleanliness, I believe Diphtheria ought to be non-existent, and therefore every improvement in these particulars is a step towards its prevention; but as regards the cases occurring amongst us, our work is only thus indirectly protective. In fact cases are rarely reported to us except by the Registrars of Deaths, then inquiry sometimes shows unsuspected drainage or other defects, and occasionally elicits the fact that there had been for some time previously cases of ill-defined illness in the house, not suspected of being Diphtheritic, or at any rate not reported to us as such. The large proportion of deaths to cases shows that we hear of only a very few of the latter, and I regret to say that even of those reported in the majority of instances no definite causation was made out, this was often due to the lateness of our information. Of the 5 deaths in the first quarter, 2 occurred

in the General Hospital long after the disease was contracted, 2 others were quite unaccounted for; all these 4 were separate cases; on inquiring about the fifth death we found his mother was also ill, at this house there was a wet ashpit. In the second quarter only one case (a death) was reported, illness had been contracted at Oldbury a fortnight previously. Of the two cases in the third quarter, one (a death) was unaccounted for; the other was at a house where there was an offensive midden, and a foul underground soft water cistern; notice had been served for the abatement of these nuisances just before the illness occurred. In the fourth quarter there was a very general prevalence of severe sore throats, but only 6 cases were reported as Diphtheria, 4 being deaths and all separate cases, 1 of these may have been due to an untrapped drain in the yard, the other 3 were unexplained; the other 2 cases were in one house where there was defective sink drainage.

Typhoid Fever. We have had no prevalence of this fever, almost all the cases being quite independent, and in consequence hardly any of the cases were accounted for (see remarks in last year's Report). In the first quarter we had six cases in the East; the first was quite unexplained; the next was a death reported by the Registrar, had been ill six weeks, was unexplained; the next three cases were in one house, nothing local was found at fault; at the farm to which their milk supply was traced, the water was from a well which was condemned by the Borough Analyst as being contaminated, but no other cases of the Fever were found in connection with this milk; the next case, at the opposite side of the same street as the previous, was unexplained; the one case reported from the West this quarter was at a house where the drinking water (a well) was condemned by the Borough Analyst. The only case in the second quarter was in the East; it was unexplained, the patient had been about a great deal in neighbouring towns. The third quarter there were three cases, all East, two were unexplained; the third was a lad who had been freely drinking of some dirty brook water. We had thirteen cases in the fourth quarter: eight of these were East; one was a labourer in the Corporation night-soil department and may have so contracted the infection; three were unexplained, they were all quite independent cases; the remaining four cases were associated as follows when reported to us we found two children in one house, and one, a cousin,, in a house opposite; on inquiry we found that the mother of the first two children had been taken ill with Typhoid Fever nine weeks previously, and when just recovered her two children and their cousin (who was very much about the house) were attacked; I think there can be little doubt that in this case the latter three cases were taken from the mother, her illness we could not account for: of the five cases in the West, one was quite unexplained; another was in a house where some fowl were kept in the cellar, which was very filthy, but no definite explanation of the illness could be obtained; when the other three cases were reported we found one, a boy, had been ill eight weeks ago; the next his sister two weeks ago, the last, their mother was a week ill; in this case I believe the second and third cases were taken from the first, this one we could not account for; the mother died.

Diarrhæa. We have been practically free from any epidemic of Diarrhæa this year, and it is very instructive to notice that this remission has concurred with an almost total absence of any real summer heat; see tables 3, 4, 9 and 10, and compare with same of last year.

SANITARY CONDITION OF THE BOROUGH.

A fair account of the above is given in last year's Report. our work is in keeping things from getting worse (e.g. enforcing repairs and cleanliness), the amount of change effected in a year in so large a District is not sufficiently evident to be recorded; instead of this I will therefore take this opportunity of mentioning the object and grounds of Sanitary efforts, for I find both are greatly misconceived. When we give a notice to do away with a bad midden or cesspit, or to provide wholesome water, or to close some crowded-up building, we are frequently met with the protest "that there hasn't been a death on the premises for years," and our demands are considered unreasonable and Now the primary object of Sanitation is not to prevent death, nor vexatious. even merely to prevent actual cases of illness, but something farther than this, and that is to prevent defective health and its consequent misery and crime; of course by keeping people in better health it will render them less liable to disease and death, but if the primary object is kept first in view much cavilling against Sanitation will be avoided. A man habitually breathing foul air, or subject to any similar evil, may live as long as another, but he won't be so healthy, and therefore will be less beneficial to himself and the community. In this matter of defective health arising from insanitary influence two points need to be known; those subject to such influence don't usually die from its direct effects, nor even so readily as one in perfect health would, the constant slight dosing with the poison exerts a protective influence against its own more virulent effects; but such a protection is very dearly purchased, for not only is the defective health itself a deplorable evil, but (and this is the second point), it renders its subjects easy victims to other diseases. The consequence of the above is that sanitary defects may exist for years, causing imperfect health and even death, and yet, because the death does not seem directly connected with them, they may not only escape notice, but when pointed out may be considered as of no consequence. To illustrate this-a family may live in a house having a bad cesspit or some defective drainage, in consequence of which they all are in un-noticed imperfect health, and yet none of them may have the most direct result of such poison, diphtheria; one of the family may receive an injury which to one in perfect health would be trivial, and may die of erysipelas or pyæmia as a result of his low vitality; another may catch cold and die of a pneumonia which he would have escaped or successfully passed through if in perfect health; at length some visitor may come to the house and not being 'seasoned' may be at once attacked with Diphtheria and attention then for the first time is drawn to the sanitary defect. The condition of people living in a crowded town if not so serious as the above is analogous, and it is only by attention to many details that they have a chance of being even fairly healthy; our knowledge of these details is derived from the experience of careful observers which is now formulated as Sanitary Science, and it is to this we must usually appeal in support of our notices; it is impossible to adduce special cases of ill-health in every case of insanitation, and it would be wrong to wait for disease and death to prove what a larger experience has already affirmed.

Most of sanitation aims at obtaining pure air; the air of towns is impure from two causes, first, accumulations of refuse, (cess-pits, manure, &c.,) and uncleanliness; second, diminished effect of winds in renovation. To speak first of the latter, the average daily wind in the Park this year was 211 miles, in the Brickkiln Street Observatory (not very crowded) it was 52.4 miles, not one-fourth as much, in many of our crowded courts it would be as much less again; this shows the necessity for, as far as possible, opening up the more crowded districts, and condemning houses which cannot obtain some windage, even though habitable in themselves, (and yet this appears unreasonable to the uninitiated); indeed the main factor which renders the country death rate so much lower than the town is this one of free perflation, for in the matter of dirt it is often worse. Inasmuch however, as it is impossible to obtain free perflation in existing towns, and as there is special need for fresh air where so many live, our efforts must be mainly directed to reducing all avoidable causes of impurity to a minimum; hence the war against insanitary details which appears so vexatious and trifling to those unacquainted with the foregoing facts.

Statistics of deaths are only very indirectly and when carefully considered an index of health, for they are not exactly proportionate to the amount of disease or ill-health; as far as they go, however, ours of this year are very gratifying; in comparing actual numbers, the 14 weeks in the last quarter and 53 in the year should be remembered; and as our estimated population (calculated on the rate of increase between 1871 and 1881) is probably too high, our rates are a shade too low. The death rate is far the lowest on record, being ·5 below even the exceptional rates of 1880 and 1883, (table 9); the deaths of children under one, and under five years of age, are very much the lowest recorded; the deaths of old persons are about up to the average, (remembering the exclusion of Non-Borough cases in this item for 1884 and 1885); the deaths from Chest Affections are very high; from Zymotics low, those from Scarlet Fever are rather high, but much below epidemic years; Whooping Cough is rather high; Diarrrhœa remarkably low. All the credit we can directly claim has been mentioned in reference to our isolation of Scarlet Fever, the other returns are mainly due to the weather, and to Measles having so exhausted itself last year. The early spring was very severe, hence high returns of Chest Affections and old people in the first quarter, especially in the East where the aspect and poverty make the cold more felt, (tables 4, 3, 9, and 5); then followed a long space of moderately fine weather, regular rain, and no excessive heat, hence the 2nd and 3rd Quarters have very low chest and aged returns,

and there is very little summer Diarrhoea; the closing weeks are again very cold and harsh, and the 4th Quarter has the resulting high chest and aged returns; the prevalent bad trade and great distress in the spring and winter would increase the rates in the 1st and 4th Quarters, and may partly account for our bad comparison with the urban districts (table 10) in these quarters; this is confined to the East returns where the distress was chiefly felt. Our general and Zymotic rates compare favourably with those of the large towns; note the steady diminution in our Scarlet Fever deaths, and their continued high number in the towns, (table 10).

There is little in the comparative returns of the two sub-districts that is not attributable to their circumstances as pointed out in last year's Report, except the strange limitation of Whooping Cough to the West.

The routine work of inspection has gone on well during the year, 2,091 notices were served for the abatement of various nuisances, 206 were on hand from last year, 2,103 were complied with.

The Bakehouses having been put under the Sanitary authorities this year, the Sub-Inspectors made out lists of all those in their districts, and they inspect them regularly every fortnight.

One house was closed being unfit for habitation.

As instances of what may still be found in the town I may mention the following: in one good street two cess-pits were discovered which had been unemptied for over thirty years, indeed their existence was forgotten, one contained 6, the other 4 loads; in another main street the pollution of a soft water cistern and stoppage of a drain led to the discovery of a cess-pit forty-one feet deep, and containing 12 loads.

Unwholesome Food. 2 calves, 5 sheep, 37 pigs, 713 lbs. of mutton, 241 lbs. of pork, and 2 barrels of oysters, have been condemned as unfit for food, and destroyed.

Disinfection. 102 houses and 61 vehicles have been disinfected with sulphur fumes; 1,180 articles of clothing have been disinfected at the Borough Stove, 29 with sulphur fumes, and 6 have been burnt.

REMARKS ON THE TABLES.

The returns made by the Registrar for the East Sub-District include all deaths occurring in the General Hospital and Workhouse; many of these are from outside the Borough, others from the West Sub-District, and others are returned as "no home"; the particulars of these cases are all entered in table 7. In all the tables for the Sub-Districts the deaths are referred to where they

belong, and in all the tables only cases belonging to the Borough are entered for the years 1884 and 1885, except, in table 9 where the Borough totals include "no homes" in order to compare with former years; and so also do the corrected Borough deaths for 1884 and 1885 in table 8; in this table 8 the comparison between the Sub-Districts in all years before 1884 is misleading, as the East deaths include many really belonging to the West.

The populations of the Borough and of each Sub-District being estimated separately, the former is not the sum of the latter.

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Area of the Borough 3,440 acres.

Population 1881 (census April) 75,766.

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TABLE No. 1.

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	000 oF	Borough	9.6	4	9.0.6	000	ă.	0 1	0.8	
	RATE PER 10,000 POPULATION.	West Sub-district	6.9	0	0.4.0	0 1.7	1.0	0 1	1.4	1 1
	RATE 1 Po	East Sub-district	5.0	9	07.4	+ 10	1.1	-	4.6	4 0
	oj.	Borough	00	24	270	117	**	21	9.4	+ -
	Totals.	West Sub-district	0	01	00	00	. 0	0	~	0
38.		East Sub-district	91	2	140	01.1	1	•	. 01	01
1888.	185.	Хеаг	7	16	83	162	9	6	1	23
during	Вокоибн Роригатіом 79,185.	4th Quarter	4	13	21	41	5	-	:	13
lur	Borough Lation 75	and Quarter	:	•	18	31	:	67	;	00
of o	Popul	and Quarter	-	-	23	51	:	-	:	-
	1	1st Quarter	C1	C1	20	39	-	5	-	9
heard	nor, 301.	Year	ಣ	10	34	64	9	90	:	9
	DISTR 40,	4th Quarter	C1	10	20	32	5	1	:	5
sease	West Sub-District, Population 40,301	3rd Quarter	:	:	00	11	:	C1	:	:
dise	VEST	2nd Quarter	-	:	4	00	:	:	:	:
S	PA	1st Quarter	:	:	22	13	:	:	:	1
of Infectious di	STRICT, 38,943.	Year	4	9	48	86	1	9	1	11
nfe	1 1	4th Quarter	C1	00	-	6	:	:	:	20
f I	EAST SUB-DISTRICT, POPULATION 38,943	3rd Quarter	:	:	10	20	:	:	:	00
	EAST OPUL	2nd Quarter	:	-	19	43	:	1	:	1
Cases		1st Quarter	C7	Ç1	18	26	-	9	-	5
Ca			Under 5 years	5 yrs. & upwards	Under 5 years	5 yrs. & upwards	Under 5 years	5 yrs. & upwards	Under 5 years	5 yrs. & upwards
	7-5		5	:	-	:	5	:	5	:
			Mosslos	measies	Joseph Forest	Scarlet rever	Dinhthomio	Dipumena	Temboid Foron	ry puota rever
			Moo	BOTH	0	Scar	Divi	dia	E	+ 3 F



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Week o	ending.	Males.	Females.	Total. Rate per 1,000 per annum.	Males.	Females.	Total.	Rate per 1,000 per annum.	Males.	Females.	Total. Rate per 1,000	per annum.	Foundas	The same of	Rateper 1,000	Over 60 Years	Under 1 Year	Under 5 Years	Uncertified.	Inquests.	Males.	Females.	Total.	Over 60 Years	Under 1 Year	Under 5 Years	Uncertified.	Inquests.	Males.	Feminles.	Total.	per annum.	Uver 50 rears	Under 5 Years	Uncertified.	Inquests.	Not belonging to the Borough.	No Home.	Belonging to the W. Sub-district,	Total in Hospital.	house.
Januar	10 17 24 31 4ry 7 14 21 28	14 18 19 17 12 16 17 5 15 16 12 18 7	15 19 19 13 16 14 18 14 10 17 16	31 41.5 33 44.2 38 50.9 36 48.2 25 33.4 32 42.8 31 41.5 23 30.8 29 38.8 29 38.8 29 38.8 29 38.8 20 38.8 20 38.8 20 38.8 21 30.8	2 16 9 13 2 15 4 11 8 9 5 16 8 9 8 12 8 19 8 10	22 20 14 14 18 16 13 15 12 8	38 33 29 25 27 32 22 27 31	32·3 34·9 41·4	30 34 32 32 23 25 33 14 27 35 22 32 20	37 39 33 27 34 30 31 29 22 25 27	61 40- 71 46- 71 46- 65 42- 50 32- 59 38- 63 41- 45 29- 56 36- 57 37- 47 30- 59 38- 44 28-	7 1 7 7 1 8 1 9 1 8 1 8 1 8 1 8 1 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1	3 1 5 2 1 1 1 1 0 9 1 6 10 7 7	4 2 9 9 0 4 3 5 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18 24-1 23 30-8 24 32-1 26 34-8 23 30-8 19 25-1 10 13-1 112 16 19 25-2 20 26-1 19 25-1	8 8 8 6 8 8 6 8 8 8 8 8 8 8 8 8 8 8 8 8	7 6 6 6 6 1 2 1 1 1 1 1 4 4 3 4 3 1 4 3 1 4 3 1 4 3 1 4 3 1 4 3 1 4 3 1 4 3 1 4 3 1 4 3 3 3 3	6 10 9 9 6 11 8 2 5 3 7 6 7	 1 1 1 	1 2 1 2 2 1 1 2 1	6 9 10 8 6 8 5 3 7 4 8 10 7	12 13 9 16 6 6 7 8 5 4 8 11	19 24 31 12 14 18 11 14 15 15 15 15 15 12 16	3·4 4·5 1 5·5 3·1 4·2 2·9 4 1·6 5·5 3·3	2 5 6 4 2 3 2 4 2 3 3 4 1 1 3 3 4 3 3	8 7 3 8 5 4 5 9 1 6 7	1	1	17 22 25 20 17 18 14 9 17 11 20 23 15	19 23 18 30 18 15 16 11 11 11 10 11 15 22	45 2: 43 2: 50 3: 35 2: 33 2: 30 1: 20 1: 28 1: 31 2: 38 2:	9.6 1 8.3 1 2.9 1 3 1.7 9.7 3.1 8.4 8.8 9.4	11 17 14 1 1 9 8 8 7 3 7 7 7	9 14 5 17 7 12 3 17 6 11 6 12 4 12 4 7 4 14 2 4 8 13 3 13 6 14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 2 1 4 2 1 1 2 3 1	2 1 3 4 2 1 5 5 1 1 2 5 3	2 2 2 3 4 1 2 1 2	 5 3 1 2 2 1 2 2 2 2	2 3 6 2 4 5 4 6 2 4 6 2 4 6 2 1	3 1 7 8 9 5 3 6 4 2 3 8 6
1st Qu	arter	186	196	82 39-3	3 173	193	366	36.6	359	389	748 37	9 13	37 10	8 2	45 25.	2 60	45	89	4	13	91	111	202 20	0.1 5	7 40	75	7	6	228	219	47 2	2.6 12	22 8	164	11	19	35	19	24	50	65
April "" May "" June ""	4. 11. 18. 25. 2. 9. 16. 23. 30. 6, 13. 20.	19 19 10 14 12 13 12 17 9 12 21 15	8 14 9 18 8 12 11 11 11	28 37:0 33 44:1 20 26:1 22 29:2 26 34:2 22 29:3 30 40:2 25 33:2 21 28:2 32 42:1 26 34:1 27 32:4 28 32:4 29 32:4 20 32:4 21 28:4 22 33:4 23 30:4 24 32:4	2 11 7 16 4 19 8 12 4 14 1 12 4 14 1 19 8 9 8 4 18 14	9 8 16 19 22 13 10 11 17 9 16	20 24 35 31 36 25 24 20 26 13 30 25	40·3 40·1 46·6 32·3 31 25·8 33·6 16·8 38·8 32·3	24 27 24 31 18 21 25 29 25	33 31 31 18 23 28 20 27 24	60 30 53 34 44 28 57 37 57 37 58 38 55 36 49 32 41 27 49 32 45 29 56 36 49 32	9 1 5 5 5 2 1 1 2 2 1 1 2 2 1 1 2 2 1 1 2 2 1 1 2 2 1 1 2 2 1 2 2 1 2	13 1 8 8 7 7 16 10 11 5 8 7 3 5	6 3 4 7 5 7 9 4 3 6	14 18 23 30 14 18 21 28 21 28 21 28 23 30 15 20 15 20 15 20 15 20 16 10 13 9 12 10 13 10 10 10 10 13 10 10 10 10 10 10 10 10 10 10 10 10 10	8 3 7 3 1 6 7 1 8 6 8 6 1 2 7 3 1 3	6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	10 9 13 5 4 3	::		6 5 9 5 13 9 4 5 9 5 7 5 7	9 8 10 8 5 5 8 9 4 3 4 6 2	14 12 14 12 14 12 13 16 8 16 11 14	5-8 4-5 5-8 3-3 8-1 5-5 8-1 5-8 0-3 4-2	2 9 3 2 1 3 2 2 4 1	3 6 4 3 5 5 3	1 1 1 1 	1 1 2 3 1 1 	15 18 17 13 20 25 14 16 14 13 14 8 12	14 18 16 21 9 12 13 16 13 7 7 7	36 2: 33 2: 34 2: 29 1: 37 2: 27 1: 32 2: 27 1: 20 1: 21 1:	3·7 1·7 2·4 9·1 4·3 7·7 1 1 7·7 3·1 3·8 3·1	9 4 1 4 1 9 1 3 1 8 4 1 4 1 7 3 5 5	14 3 16 3 13 1 15 1 17 4 8	1 1 2	1 1 2 4 4 1 1 1 1 3 3 3	2 1 1 2 3 1 3 1 5 2 4	 1 1 1 2 	2 1 1 2 3 2 1 1 1 1 	2 5 2 3 3 5 5 3 5	5 2 2 4 2 4 8 3 4 1 7 1 4
2nd Q	uarter .	. 183	149	332 34-	2 165	176			348	325	673 34	1 11	10 8	34 1	94 19	9 36	61	85	1	10	89	81	170 1	6-9 3	4 45	69	5	12	199	165	364 18	8.4 7	0 10	154	6	22	25	5	15	33	47
July "Augus" Septen "" "" "" "" "" "" "" "" ""	8. 15. 22. 29. nber 5. 12. 19.	. 16 8 . 17 . 15 . 14 . 11 . 20 . 14 . 12 . 11 . 5 . 17 . 19	11 8 14 20 14 19 16 6 18	29 38:1 21 28:2 26 34:3 27 36:2 25 33:4 19 25:3 34 45:4 26 34:4 26 34:2 27 28:2 28:3 37 49:4	1 11 8 10 1 15 4 10 4 7 5 17 5 16 8 7 1 22 1 9 8 12 5 11	14 15 10 11 4 16 7 8 13 12 12 12	25 25 25 21 11 33 23 15 35 21 24 30	14·2 42·7 29·7 19·4 45·3 27·1 31 38·8	27 30 24 18 37 30 19 33 14 29 30	22 12 30 27 22 32 28 18 37	54 35 46 30 51 33 52 34 46 30 30 19 67 44 57 37 41 32 65 42 42 27 47 30 67 44	3 6 1 2 3 7 1 5 1 1 9 1 1	5 13 2 7 4 7 11 13 8 2 11 15	3 7 6 4 6 4 6 4 6 4 6 4 6 4 6 4 6 4 6 4 6	10 13: 8 10: 20 26: 8 10: 11 14: 10 13: 11 14: 15 20 19 25: 13 17: 6 8 21 28: 9 12	7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8	5 5 5 3 3 3 4 4 3 3 1 3 3 4 4 7 6 1 3 1 4 1 4	3 3 8 3 7 3 4 6 9 4 7 5	:: :: :: :: ::	2 1 4 2 1 1 1 1 1 1 1 1 1	9 8 3 7 2 4 6 9 6 7 13 6 4	5 6 2 2 6 4 6 4 7 5 5 5 8	5 9 11 8 16 8 16 12 13 13 16 12 14 13 16 12 14 18 23 11 14 12 14	5·5 3·3 4·2 5·5	2 4 4 2 4	4 5 4 6 2 8 6 5	1 1 1	1	14 13 16 9 9 8 13 20 19 15 15 17 9	-	22 14 25 16 17 17 19 12 18 17 23 18 22 18 32 21 25 16 24 18 32 21 21 13	4·4 6·4 1·2 2·5 1·8 5·1 8·4 1 6·4 5·8 1 3·8	7 7 2 3 6 9 1 5 7 9 3	0 15 6 6 7 8 8 13 7 10	1 1 1 1 1	2 2 4 2 1 2 1 2 1 2	4 4 1 1 2 3 3 4 3 1	1	1 1 1 2 3 2 1	3 4 3 2 1 1 5 3 1 1 2 1	4 1 2 1 5 2 4 5 5 1 2
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4th Qu	arter	207	178 3	85 36.8	-	20000	335			343 7		8 11		-	13 20-3	-		87	6	10	107			3.4 5			6	-	224		12 1					20	23	5	11	1	42
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		B	3	10	17	24	31	7 1	4 2	1 2	8	1 14	21	28	4	11	18	25	2	1	10	6 2	23 3	10	6	13	20	17	4	11	18	25	1	8	15	22	29	5	12	19	26	3	10	17	24	3	1	7 1	14	21	28	5	12	2 11	9 5	26	2	T
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	ALEXANDE	5 yrs. & upwards																																																								ı
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	DIARRIDEA	5 yrs. & upwards		0						9 4					1												1		-							1			100	1				1											1			ı
	PHTHISES -	Under 5 years		1	1											1		1						2							1	1					1			2	1	100		3	1		2 .			1	2					1	1	ı
	PHTHISES	5 yrs. & upwards		1	4	2	3			1 .		1	2		2	3		5		1 :	2	1		1	2			2		1					1	3	2	1	1	1	2		2	1	3		4	1	1	2	1	1				1	1	ı
	RESPIRATORY DUSTASES	Under 5 years	2	3	1	2.		4	4		4	1	1	1	1	4	1	1	1		3	3	1	2		1			1				3		1			1		1		1	2					3	1	2	3	5	3	1	3	1	5	ı
	Restrict Diseases	5 yrs, & upwards	5	3	6	7	4	2	2	5	5	1	2	2 1	5 2	2	1	1		2	1	2		4	1	1	1	1	2	1	3	3	1	1		2	4	1	-	2	1	3					1	1	2	3	1	. 2	3		3	15	2	ı
1	MEASTES -	Under 5 years															1															**	14																					1				ı
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	COLUMN T WITH	5 yrs. & upwards						**							1:	-		13	1												**					i			**	1:5		1:			1					**								ı
	DIPHTHERIA -	Under 5 years			**	**										1	1	1							**					**						**						1		100		0				1	1		1			**		
		5 yrs. & upwards															-													1							**	"				4.1								**						**	**	
	WHOOPENG COTOR	Under 5 years	1	4	2	1	1	2	1	1	4			1	2 2		10	1		1 .		1		2	1			•		**	**			-	1			1				1"												1	-			
		5 yrs. & upwards		**	**	**												1								**		**					**		1	**		1.				1.								**								
	Tyrnom Faver	Under 5 years		**				**	-						1		100								**	**	**	**		***		**				**						111						,								**		
		5 yrs. & upwards		**												-		1										"			**	**	**				*		1:	1	1	1																
	Diametera	Under 5 years			**	**	**	**							1			1			1				-	**	1	-	**			**	**	**		2	1	1	2		1	1														**		
		5 yrs & upwards			**	**			**			1	1		1													**	**	**			**					1				1"														1		
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	(1)	5 yes. & upwards			1			2	1	2	1	3		2				1			-							**		-	-	**		1		1	2			1		1				4	5	2	6	1	1	15		,	1	2	-	
	RESPUBLICATION DISEASES	Under 5 years .	. 3	2		.2	2	1	1	2	2			2	-			10		9 .			1	**		-						**		-			1 .			1		1.	1															



TABLE No. 4.

WEEKLY METEOROLOGICAL REPORT.

From observations taken at the Park Meteorological Station at 9 a.m. daily.

(Height above Sea-Level, 430 feet. Receiving surface of rain guage 1 ft. above ground.)

		Baromet	er, uncorre	ected.	Average		Te	emperatur				Wind.	
Week en	ding	Highest.	Lowest.	Att.Ther.	Humidity.	Max.	Min.	Mean.	Ea	rth.	Rain.	Prevailing Direction.	Total in Week.
		In.	In.	0	0-100	37°.5	27°·0	31°·2	37.5	44.0	In.	E. SE.	Miles. 1210
Jan.	3rd	29.900	29.400	40	91				37.5	43.0	-63	S. W. SW.	1920
"	10th	29.700	28.850	40	96 91	49·0 45·5	29·0 25·0	36 9 32·6	36.0	43.0	13	N. NE.	2920
"	17th 24th	29·700 29·800	28·468 29·520	40	93	40.0	24.0	31.0	36.0	42.0	.05	E. SE.	1195
"	31st	29.620	28.000	40	92	48.5	31.0	42.6	38.5	41.2	1.09	SW.	2500
Feb.	7th	29 115	28.600	40	90	51.0	30.0	41.5	41.0	41.5	.89	SW.	2475
	14th	29.700	29.158	40	86	53.0	34.5	44.2	41.5	42.0	.57	SW.	2075
"	21st	29.700	28.950	40	89	42.8	30.0	35.8	42 0	43.0	.96	SE. SW.	1305
,,	28th	.29.500	29.228	40	91	58.0	30.0	45.2	40.0	42.0	.15	SW.	2220
March	7th	29.750	28.950	40	83	47.7	26.0	36.8	40.0	42.0	.21	E SW. N.	1361
,,	14th	30.150	29.450	40 -	89	48.3	27.0	37.4	41.2	42.5	_	NE.	1059
59	21st	30.050	29.184	40	83	51.7	25.0	39.5	41.0	43.0	-21	W. NW. N.	1735
,,,	28th	29.920	29.450	40	80	51.0	24.0	37.8	41.6	43.0	.16	NE. S. NW.	1525
April	4th	29.900	29 350	40	89	51.0	26.0	38.8	43·0 43·0	43·0 43·0	1.02	SW. NW. N. E. N.	1325 1730
,,	11th	29.360	28.760	40	87	50.0	29.0	38·3 49·7	44.3	43.5	-50	NE.	1135
"	18th	29.770	- 29·400 29·150	40	81 74	63·5 68·0	32·0 33·7	40.2	41 5	43.9	-31	E. SW.	2265
35"	25th	29.950	29.000	40	77	60.5	33.0	46.9	49.9	45.0	.51	SW. NW.	. 1140
May	2nd	29·450 29·450	29.000	. 45	75	55.8	30.3	40.9	48.7	46.6	.51	E. NE. NW.	1365
,,	9th 16th	29.770	29.400	50	70	55.5	31.0	43.3	49.2	47.0	.35	W. N.	1700
"	23rd	29.600	- 28-900	50	79	54.7	33.0	44.4	49.5	47.0	.74	N. S. SW.	1495
"	30th	29.580	29 424	50	79	65 5	40.0	50.6	52.2	52 2	-22	SW. S.	1640
June	6th	29.870	29:400	55	66	79.2	40.0	56.5	56.0	49.3	.86	N. S.W.	1388
	13th	30.000	29.420	- 60	74	73.5	45.0	55.8	58.0	51.2	-92	NE. S.W.	835
"	20th	29.770	29.100	60	78	73.0	49.0	55.2	59.8	52.5	.21	NE. NW. SW.	1600
"	27th	29.950	29.570	60	80	64.0	37.0	51.9	56.3	53.8	1.03	SW. NW. NE.	1385
July	4th	29.875	29.650	60	71	75.5	39.0	56.8	59.0	54.5	.01	N. NW.	710
- ,,	11th	29.900	29.650	60	75	75.0	43.0	57.8	62.3	54.6	.20	NW. W. SW.	1115
,,	18th	29.850	29.525	60	70	69.5	40.0	55.1	62.0	56.0	15	W. SW. NW.	1160
,,	25th	30 050	29.450	60	76	85.0	50.5	62.6	62.0	56.0	.37	SW. N. NW.	730
August	lst	30.050	29.820	60	77	86.5	47.0	52.7	63.0	56·5 57·0	1.00	N. NE. NE.	1200
,,	8th	29.750	29.420	60	90	64.2	45.5	53.2	60·7 58·9	57.0	1.22	SW. W.	910 1925
,,	15th	29.950	29.200	60	77 79	69·0 74·0	39·0 42·0	54·0 55·5	57.8	57.0	·26 ·29	NE. N. NW.	735
,,	22nd	29.900	29·500 29·520	60	83	70.0	41.5	52.0	58.3	57.0	-36	E NE.	1435
~ ".	29th	29.700	29.130	55	84	67.0	37.5	52.6	56.0	57.0	-79	NE. E. SW.	1410
Sept.	5th	29.750	29 200	60	83	65.0	45:0	53.6	57.0	56 5	1.84	S. W. NW.	1615
"	12th 19th	29·450 29·700	29 450	60	87	71.0	40.2	55.7	56.5	55.9	.61	SW. S. N.	1375
"	26th	29.950	29.500	60	80	67.0	40.8	49.2	56.0	55.2	-31	W. N.	1220
October	3rd	29.600	29.175	50	82	62.0	33.0	46.0	51.0	54.5	•42	W. SW.	1645
	10th	29.500	28.700	50	84	55.0	36.5	44.9	49.4	53.0	1.43	SW. NW.	1730
"	17th	29.800	29.250	45	90	56.0	28.3	49.5	47.2	52.0	.50	N. NE.	1580
"	24th	29.750	28.870	45	91	53.5	33.0	41.0	46.5	51.3	1.03	NE. E.	1265
"	31st	29.550	28.675	45	84	54.5	30.0	40.6	44.7	49.0	1.68	W. E.	1975
Nov.	7th	29.800	29.170	40	92	57.0	30.0	41.8	44.5	48.0	.87	SW.	1430
"	14th	29.900	29.300	40	94	48.5	37.0	41.4	45.4	48.0	.21	E. SW.	830
,,	21st	29.950	29.270	40	88	43.0	22.0	33.3	40.0	47.4	.04	E.	1475
,,	28th	29.150	28.750	40	92	54.0	34.8	41.3	41.4	46.4	1.63	E.	2000
Dec.	5th	29.850	29.150	40	90	56.0	34.0	42.1	43.3	45.0	.65	W. SW. NE. N. W.	1645
"	12th	30.000	29.150	35	91	42.5	12.0	29.1	39.1	43.3	.08	W. SW.	1080 1140
,,	19th	30.050	29.700	40	95	56.0	31.2	37.7	40.3	43.0	·02	SW. N. NW.	590
- "	26th	30.150	29.650	40	92 92	46·0 50·0	24.5	39.1	40.0	43.0	-57	SW. W.	1855
Jan.	2nd	30.000	29.420	40	92	90.0	22.0	99 1	40.0	40.0	01	511.11.	1000

Quarterly Returns of Deaths in the East Sub-District, during the Year 1885, classified

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TABLE No. 6.

Quarterly Returns of Deaths in the Woost Sub-District, during the Year 1888 classified

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TABLE No. 7.

TABLE OF DEATHS during the Year 1885, in the Sanitary District of WOLVERHAMPTON; classified according to DISEASES, AGES, and LOCALITIES, showing also the Population of such Localities, and the Births therein during the Year, and the proportion of the deaths which occurred in Public Institutions.

	Populati Ag	ion at all	po.	мо	RTAL	SUBJ	ROM .	ALL C	AUSE	s,	MORTALIT	Y FRO	M SUB	JOINE	D CAU	SES, I	DISTIN	GUISI	HING I	EATH	IS OF	CHILD	REN U	NDEB	FIVE	YEAR	s of	AGE.
NAMES OF LOCALITIES adopted for the purpose of these Statistics.	Census 1881.	Estimated to middle of 1885,	* Registered Births.	At all Ages.	Under 1 year,	and under 5	5 and under 15	15 and under 25	25 and under 60	and up- wards.	12	Measles.	Scarlatina.	9 Diphtheria.	Croup (not	whooping congh.	5 Enterie or O Typhoid.	Doubtful.	Diarrhosa be and Dysentery.	Rheumatic	S. Eryspelus.	5 Pysemia.	Duerperal Ferer.	6 Phthisis.	Bronchitis, S Pneumonia, and Pleurisy	g Heart Disease.	g Injuries.	co All other
East Sub-District	38,610	38,943	1451	813	210	113	47	36	215	192	Under 5	1	24	1	12	8	3	1	28	3	1 2			22 66	70	38		149
West Sub-District	37,156	40,301	1355	720	178	97	42	32	188	183	Under 5		7 2	4	11	31	1	1	15	3	2			3 54	41	40		161
TOTAL IN BOROUGH	75,766	79,185	2806	1533	388	210	89	68	403	375	Under 5	1	31	5	23	39	4	. 2	43		3		2		111	78		310
General Hospital				136	7	15	26	19	50	19	Under 5		8	2	1					1				1 3	9		5 25	7 51
Workhouse		.,		186	13	3	2	4	49	115	Under 5 5 upwds								2					20	18			16
Deaths occurring in public institu- tions in the East Sub-District and not belonging to the Borough				106	5	4	7	15	34	41	Under 5						3			1				3	8		3	6 59
Deaths occurring in public institu- tions in the East Sub-District and entered as 'no home')				31	2	1			7	21	Under 5														2	6	1	3 19
Deaths occurring in public institu- tions in the East Sub-District and belonging to the West Sub-District				62	3	2	9	2	16	30	Under 5		1								-							4 34

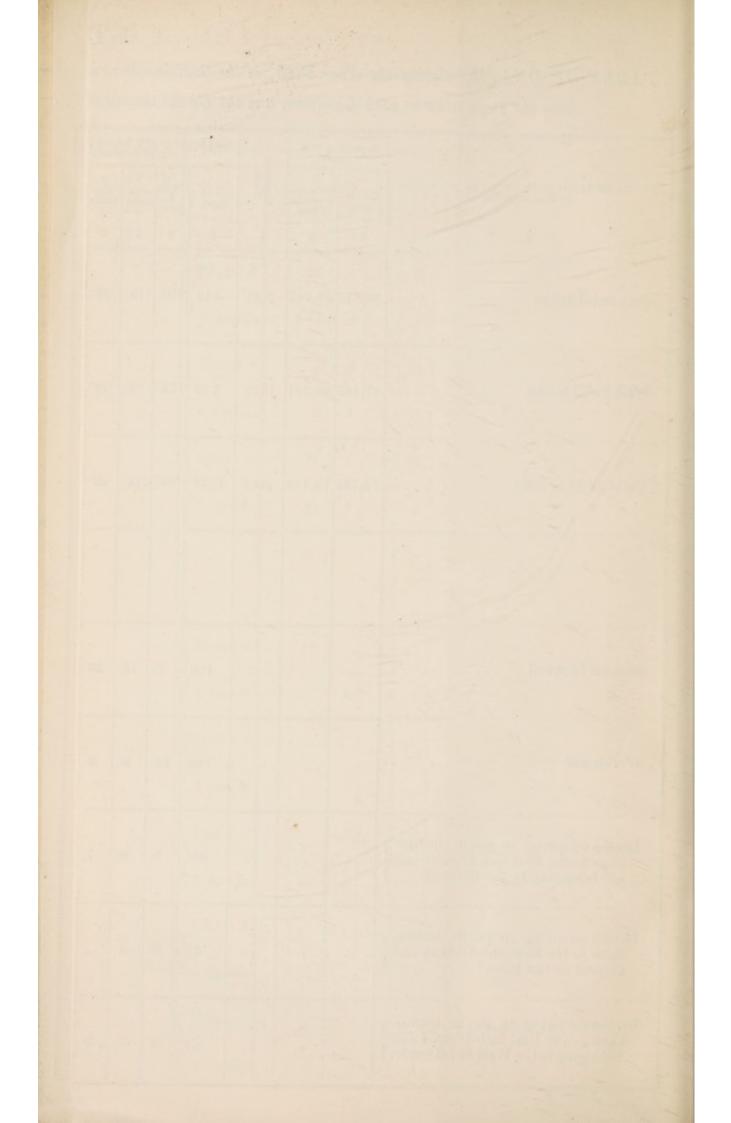


Table No. 8.

COMPARATIVE DEATHS and DEATH RATES of the East and
West Sub-districts for the past Thirteen Years.

	***	est Du	ib-uisiii	CLS TOI	те ра	50 1111	recen 1	cars.	
		DISTRICT	WEST SUB	-DISTRICT	Boro	UGH.	Estimat	ed Populati idle of the y	on at the year.
Year.	Number of Deaths.	Rate per 1000.	Number of Deaths.	Rate per 1000.	Number of Deaths.	Rate per 1000.	East.	West.	Borough.
1873	1,125	29.7	631	19.8	1,756	25.1	38,010	31,831	69,906
1874	1,048	27.6	627	19.3	1,675	23.6	38,087	32,463	70,636
1875	1,155	30.3	640	19:3	1,795	25.2	38,163	33,108	71,373
* 1876	1,099	28.2	655	19	1,754	23.9	38,241	33,766	72,118
1877	1,157	30.2	611	17.8	1,768	24.3	38,318	34,436	72,871
1878	1,081	28.2	644	18.4	1,725	23.4	38,396	35,119	73,632
1879	1,093	28.5	608	17	1,701	22.9	38,474	35,817	74,402
1880	960	24.9	629	17.2	1,589	21.1	38,552	36,528	75,178
* 1881	998	25 9	650	17:5	1,648	21.3	38,629	37,253	75,963
1882	1,056	27:3	657	17:3	1,713	22.3	38,708	37,993	76,756
1883	1,042	26.9	601	15.5	1,643	21.2	38,786	38,748	77,557
1884	1,158 954	29·8 24·6	699 753	17·7 19·1	1,857 1,734	23·7 22·2	38,864	89,516	78,367
* 1885	1,012 813	25·5 20·5	658 720	16 17·5	1,670 1,564	20·7 19·4	38,943	40,301	79,185
			* These	years o	contained	53 wee	eks.		

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TABLE No. 9.

	Qua	rters e	nding		1000	Quarter	rs endi	ng		Quan	ters es	nding		Qui	arters	ending	7		Quarte	es end	ing.			tiers en			-	etces on				artera e	nding			akteen er	sling			arters e	nding			narters o	oding	
	27/8	16/6/2	1/9/25/1	1875	23,	(3 24)6	20/9	10/12	1876.	31/3 3	0,6 29	929/15	1877.	30/3	29,40	18,928	/12 18	28. 2	0/2 28/	0 27/0	27/12	1879.			9/25/12	1880.	26/0 2	5/6/24		1881.	1/4	1/7 30	/9/20/1	2 1492	31/3	30/6 29	9 29/1:	2 1883,1		18/6 27	7/9/27/11	1884.		27/6 2	6/9 2/1	1* 1885.
Small Pox																					,,												1	4		2	1 3	7	3	1.	. 1	5				
Measles				2 3	2	2 28	5	2	37	1	2	6	9	2			7	9	21 2	2 3	1	52		2	1 0	6	1			1	18	41	2	63	14				11	66	20 1	98	1	44 9		1
Scarlet Fover	8	7	3	9 20	6	4 3	10	41	58	25	34	88 75	226	20	11	4	5	40	1 4	5 4	7	17	4	12	7 15	39	16	20 1	10	0 .64	9	9	5	27	4	11	2 0	24	0	2 1	20 4	37	17	14	9	6 45
Whooping Cough	26	2	8	1 30	5	9 10	11	6	36	2	0	3 2	22	32	39	14	11	96	3 4	5 4	- 5	17	10	21	8 6	45	8	6 1	14 11	6 43	-36	18	1 1	58	15	£		21	1	1	3 10	15	97	2	4 /	3 41
Diphtheria	2	3			5	4 3	1	3	10			. 1	1	2			2	5	2 4	2 1		6	1 .		1 2	4		1	1 1	4	1	1 .		1	4			4	3		2 1	6	4		3	4 10
Typhoid Ferer	4	2	4	5 1	5	2 4		3	15	5	4 .	. 1	10	2	5		6	19	1 1	2 2	1	6		1	7	16	3	2	0 1	12	1	2	2 1	2	2	4	2 2	10	2		1 5	9	2	3 ,		1 4
Diarrhosa	1	12	68	5 9	6	8 18	71	13	105	5	18	28 12	59	6	9	68	10	93	11 6	6 18	13	-48	10	3 7	5 23	111	3	8 2	7 11	46	10	7	56 1	1 17	3	4 3	29 16	56	14	8, 17	10 15	140	4	4	26 1	4 50
Phthisis and chest affections	224	116	94 17	574	0 1:	29 186	84	139	488	146	14	61 129	453	117	96	58 1	162 4	133	186 161	3 64	185	598	123	15 8	1 104	433	156	119 7	114	063	147	119	83 10	457	168	114 4	0 115	475	120	142 1	89 146	497	157	113	75 14	19 404
Total Deaths belonging to Borough!	543	167	77 8	160	9 4	10 423	412	402	1648	441 3	100 3	74 466	2644	428	381	357	124 16	000	60 40	0 271	415	1565	335	153: 41	8 367	1493	440	100 34	371	1552	464	422 2	85 060	1634	468	ST2 34	1 361	1142	349	417 6	97 431	1734	466	269 2	12 41	7 1564
	1000			4 23					1000	2422	0-3-26	0 25-2	22-6	20.6	20-7	19-6 2	3-1 2	18 2	5-0 22	14 6	22-3	21:1	18-9-1	89 22	3 19 5	19-9	23-2 2	1-1 18	18:2	20-1	24.2	22 20	1 181	210	242 1	9-2 17	6 18-6	199	17-8-7	3-4 25	4 22	22-2	23-6	18/7 1/	8 19	6 19-4
Total Deaths registered	584	296	197 4	18 179	5 4	59 453	439	623	1754	480 3	191 4	10 487	1768	470	607	380 1	168 17	725	20 63	6 299	446	1701	382 3	176 43	0 395	1589	478	119 30	2 581	1648	485	433 4	(2, 3)	1713	498	410 33	8 377	1648	385	466 20	22 462	1857	501	204 3	35 44	0 1670
	22.8	22-2 2	2-3 23	5 25	2 24	14 25 2	22-6	23-5	23-9	26-4 2	1-0 22	20 8	24-3	25-6	22-1	20-7 2	5-5 2	3.5	28 23	5 16-1	24	229	20 8	10 23	2 21	21 2	20-2-2	1-1 19-	1 19	21-3	25-3	22 6 2	1 20-3	123	25-7 1	1-2 18	5 19-5	21:2	19-7 2	4-9-26	7 23-6	23-7	25-2 1	19-9 10	9 20	7 20-7
Sixty years of age and upwards	164	85	61 1	13 28	3	89 90	68	88	344	130	96	68 100	394	100	92	61 1	114 2	167	58 11	5 65	103	441	67	85 8	5 94	351	100	05 N	0 92	407	110	89	96 96	394	148	100 6	11 19	403	87	89 2	77 89	342	122	70	78 101	0 375
	100	100	122 1	10 43	7 1	18 111	1 169	112	510	111	89 1	03 119	422	128	97	134	129 4	155	10 9	9 82	133	426	91	01 16	4 103	459	100	83 10	7 110	410	120	115 1	27 71	433	109	93 11	1 99	419	91	112 11	84 118	506	83	106	42 110	388
	212	162	177 1	71 72	2 1	83 200	231	200	819	174	155 2	07 226	762	211	178	202 7	203 2	194	74 17	124	197	673	144	57 22	8 171	700	163	64 15	0 176	653	220	207 1	100	740	168	145 11	147	616	131	227 28	190	817	164	154 1	15 160	5 598
Deaths in Workhouse	68	42	32	17 18	9	44 41	42	33	165	55	51	37 36	179	49	41	21	54 1	167	96 5	6 31	33	215	29	39 3	3 37	108	43	40 3	13 45	171	41	28	10 50	173	78	65 3	17 45	228	36	29 2	12 45	152	65	47	12 45	2 186
Deaths in Hospital	35	26	18 3	13 11:	2	26 33	21	28	107	31	22	30 24	109	38	21	14	35 1	108	35 2	1 24	40	120	22	22 1	8 26	91	52	24 2	18	101	27	19	19 28	93	34	29 1	17	191	41	29 2	23 30	135	50	23	26 27	136
Inquests	30	17	18 :	15 10	0	38 25	24	25	112	32	21	22 15	90	20	17	18	18	73	26 2	9 22	20	88	23	24 2	24	55	20	15 2	19 19	81	33	19	18 30	17	25	21 2	19	85	16	21 1	13 12	-64	19	22	19 20	80
Births	761	702	35h 6	12 276	2 7	73 681	755	699	2911	744	746 6	71 691	2852	139	724	681 6	172 29	816	188 711	9 650	688	2845	729	27 68	8 723	2817	T80	140 65	7 662	2769	699	711 6	86 666	2762	728	719 60	666	2604	700	100 61	52 631	2691	748	673 6	15 720	0 2806
Rate per 1000 per annum				281	8 .				39-8				39-2				. 3	8-3			**	35-3	"			87.5				36-5			0	36-1	**			36-2				34-4				34-8
Population of Borough estimated at middle of year.		71,8				-	,118				72,87	1			73,6					4,402				75,178				75,963	1			76,75				77,657				78,367	7			79,180		
	4.75	Scoon !	relade	returns	s mad	le as "	no ho	mie."								These	Quart	ters on	ataisel	14 W	ooks, a	nd the	lours.	13.							After	this y	our oul	y death	a belong	ging to	the Bo	wough a	are incl	aded.						

No. 10. TABLE

		ULATIO	POPULATION 4,822,518	POPULATION 4,822,518.		POPULATION	OPULATION 79,185.	-10
	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Total Number of Deaths	. 28,350	26,143	23,281	24,565	481	379	330	405
1000 per annum of Total Deaths	23.6	21.8	19.4	20.4	24.4	19.5	16.7	20.4
Deaths from Zymotics	3,026	3,154	4,239	2,402	5.8	25	48	25
, Measles		1,183	559	620	- :			:
Scarlet Fever	394	285	315	396	17		10	11
Rate per cent. of uncertified deaths		3.1	3.5	3.00	2.5	5.6	2.1	: 00
0 Births		154	184	155	107	157	142	157
	EA	EAST SUB-DIS POPULATION	SUB-DISTRICT LATION 38,943.)T 13.	W) P(WEST SUF POPULAT	VEST SUB-DISTRICT POPULATION 40,301	OT.
mber of Deaths	. 245	194	161	213	202	170	149	199
Rate per 1000 per annum of Total Deaths	. 25.2	19.9	16.5	20.3	20.1	16.9	14.8	18.4
,, of Zymotic Deaths	8.00	1.9	5.0	1.6	2.6	1:1	1.5	1.1
		19	53	17	27	12	91	.19
: : : : : :	- ;	::	: 0	: 0	: *		:-	
" Scarlet Fever		13	20	24	-	1	-	0
,, Diarrhœa		4	17	10	-	5	6	4
Death rate per 1000 per annum England and Wales	:	:	:	:	21.8	19-3	16.5	18.5
", " Urban Districts	:	:		: .	22.3	20.5	17.8	19.7
". Rural Districts	:	:	:	:	21	17.9	14.4	16.7

The above returns for Wolverhampton are taken from the Registrar General's and do not accurately tally with ours because the quarters slightly differ, they are a little unjust to Wolverhampton as including deaths not belonging to it; our rates for the quarters are at most 23.6, 18.7, 15.8, and 19.6; these include deaths returned as no home.

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