Reports for the year 1895 of the statistical committee and the medical superintendents of the infectious hospitals and imbecile asylums, also of the ambulance and training ship "Exmouth" committees (10th year of issue) / Metropolitan Asylums Board.

Metropolitan Asylums Board.

REPORTS FOR THE YEAR 1895

OF THE

STATISTICAL COMMITTEE

AND THE

MEDICAL SUPERINTENDENTS OF THE INFECTIOUS HOSPITALS AND IMBECILE ASYLUMS,

ALSO OF THE

AMBULANCE AND TRAINING SHIP "EXMOUTH" COMMITTEES.

(10TH YEAR OF ISSUE.)

LONDON:
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1896.

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Metropolitan Asylums Board.

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OF

STATISTICAL COMMITTEE, &c.,

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STATISTICAL COMMITTEE.

1896.

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Metropolitan Asylums Board.

REPORT OF THE STATISTICAL COMMITTEE FOR THE YEAR 1895.

The Managers of the
Metropolitan Asylum District.

20*th May*, 1896.

We have the honour to submit our report upon the work of the year 1895.

i. GENERAL OBSERVATIONS.

(1.) Increased Prevalence of Infectious Diseases.—The infectious diseases which the Managers are authorised to treat in their hospitals were slightly more prevalent during the past year than during 1894, but less prevalent than in 1893 and 1892. Indeed, as regards scarlet fever, the total number of cases notified was but little more than half the number notified in 1893, and about a third less than in 1892. Owing, however, to the increased and increasing desire of the inhabitants of London to obtain isolation and hospital treatment for persons suffering from infectious diseases, a larger percentage of the notified cases applied for admission. Further, the outbreak of smallpox in July, 1895, prevented the Managers from utilising the Gore Farm Hospital for fever purposes. Consequently, the Managers, in the middle of the year, found their available accommodation exhausted, and were compelled to restrict the admissions of scarlet fever and diphtheria to the most urgent cases. While regretting the necessity for the course pursued, we fear that its repetition will be inevitable until such time as the Managers' whole scheme of hospital accommodation shall have been completed.

(2.) Hospital Accommodation.—*For Fever.*—By a return which was prepared for the information of the Managers during the past year, it is shown that when all additions to and works of reconstruction in con-

nection with the existing fever hospitals shall have been completed, the accommodation at these hospitals will be as follows:—

	Beds.	
Eastern Hospital	356	
North-Eastern Hospital	584	
North-Western Hospital	440	
Western Hospital	498	
Fountain Hospital...	402	
South-Western Hospital	368	
South-Eastern Hospital	438	
Northern Hospital...	680	
	——	3,766

To these will be added the following new hospitals:—

Brook Hospital	488	
Park Hospital	548	
Grove Hospital	520	
	——	1,556
		5,322

It is anticipated that most, if not all, the works in connection with the existing hospitals, with the exception of the North-Eastern and Western Hospitals, will be completed in 1896; that the Brook Hospital will be ready for occupation about the middle of the same year, the Park Hospital towards the end of 1897, and the Grove Hospital somewhat later. To complete the scheme there will still remain the provision of a southern convalescent fever hospital for, say, 700 patients, but for this the Managers have not, up to the present, been able to secure a site.

For Smallpox.—The Managers have approved of plans for the erection on the recently-acquired Joyce Green Farm estate at Dartford of a two-storey brick hospital for the accommodation of 880 cases in ordinary wards, and of 72 cases in special isolation buildings.

(3.) Cases of Fever occurring in Houses after Return Home of Discharged Patients.—In our last report we drew attention to the complaints which from time to time are received as to the outbreak of fever in houses after the return thereto of patients discharged from the Managers' hospitals, and the Managers on April 27th, 1895, referred the whole question to the General Purposes Committee for consideration.

On November 9th last the General Purposes Committee submitted to the Managers a report which they had received from a Sub-

Committee, in which it was stated that, with the view of making their inquiries as exhaustive as possible, they :—

(1.) Applied to each of the medical officers of health in the metropolitan district for any evidence bearing on the subject which they might have to offer, and had before them the report issued by the Public Health Department of the London County Council in December, 1894, on the provisions which had been made in the several districts of the Metropolis for the disinfection and destruction of infected articles; (2.) directed a circular letter to be addressed to the authorities of all the more important fever hospitals in the provinces and in Scotland, inquiring the average stay in hospital of scarlet fever and diphtheria patients, excluding cases which terminated fatally, during the year 1893; and (3.) ascertained from the medical superintendents of the Board's hospitals what precautions were taken with the patients previous to their discharge.

After commenting upon the information which they had thus obtained, the Sub-Committee stated that, as the result of their consideration of the whole question, they had arrived at the following conclusions :—

(*a*) That there was no evidence to show that any appreciable number of patients admitted to the Board's hospitals during the past two years had contracted infection from patients previously discharged therefrom. That there was reason to believe that of the so-called "return" cases some had been due to the re-introduction of infection into households owing to the disturbance of insufficiently disinfected clothes, &c., left at home and stored away during the patients' stay in hospital; and (*b*) that it was desirable that those sanitary authorities in the metropolitan district who had not then provided themselves with steam disinfectors should be urged to do so with the least possible delay; and, further, that the authorities who still entrusted the work of disinfection to contractors should be advised to discontinue the practice, and to have the work carried out by responsible officials.

This report was adopted by the Managers, and copies were forwarded to the Local Government Board, to the several boards of guardians, sanitary authorities, and medical officers of health in the Metropolis, and to the medical press.

(4.) Diphtheria—*Bacteriological Examinations.*—The Managers continued throughout the year the arrangement made with the Royal Colleges of Physicians and Surgeons for the bacteriological investigation of diphtheria cases.

From a report* by Dr. G. Sims Woodhead, it appears that during the eight months ended on August 31st, 1895, 6,408 cultivations from throats of patients in the Managers' hospitals were sent to the laboratories for bacteriological examination. Excluding from this

* The figures in Dr. Woodhead's report were given subject to revision when all the cases dealt with should have been traced and verified.

number 2,628 examinations not reported upon because they related to cases still in the Managers' London hospitals or which had been transferred to the Northern Hospital, there remain 3,780 examinations, and in that number diphtheria bacilli were found in 2,906 instances, and were not found in 874 instances.

This question is dealt with from another point of view by Dr. Birdwood (North-Eastern Hospital), who submits a report (p. 50) as to the results of the bacteriological examinations of specimens from the throats of 156 patients, 140 of whom were scarlet fever patients and the remainder had other diseases.

Antitoxic Serum Treatment.—The serum required for the treatment of patients was obtained up to September last from the British Institute of Preventive Medicine, and afterwards through the agency of the Laboratory Committee of the Royal Colleges of Physicians and Surgeons. A joint report by the medical superintendents of the Managers' hospitals upon the application of this treatment to patients under their care is annexed (pp. 113–145.)

The improved results in the diphtheria cases treated during the year 1895 are summarised by the medical superintendents as follows (p. 145):—

(i.) A great reduction in the mortality of cases brought under treatment on the first and second day of illness;

(ii.) The lowering of the combined general mortality to a point below that of any former year;

(iii.) The still more remarkable reduction in the mortality of the laryngeal cases;

(iv.) The uniform improvement in the results of tracheotomy at each separate hospital;

(v.) The beneficial effect produced on the clinical course of the disease.

The medical superintendents conclude by expressing the opinion

> "that in antitoxic serum we possess a remedy of distinctly greater value in the treatment of diphtheria than any other with which we are acquainted."

We also annex on p. 146 a supplemental report by the Medical Superintendent of the Northern Convalescent Hospital on 119 cases of post-scarlatinal diphtheria completed at that hospital during the past year.

Rate of Mortality.—In this connection the following statistics of the percentage of mortality from diphtheria in the Managers' hospitals since 1888, when the disease was first admitted, are interesting:—

1888	(Incomplete year)	59·35	
1889	... ...	40·74	
1890	... ...	33·55	
1891	... ...	30·63	
1892	... ...	29·35	
1893	... ...	30·42	
1894	... ...	29·29	
1895	... ...	22·85	

(5.) Cases of Mistaken Diagnosis.—*Fever.*—In the course of the year no fewer than 1,277 patients, or a percentage on the total admissions of 7·6, were, after admission at the fever hospitals, found not to be suffering from the diseases mentioned in the medical certificates upon which they were removed to hospital. The largest number of cases of mistaken diagnosis admitted at any one hospital was, as in previous years, at the Eastern Hospital, where the proportion was 288 mistakes out of 2,624 admissions, or 11·0 per cent. of the total.

We feel bound to call the special attention, not only of the Managers, but of the sanitary authorities, medical officers of health, and the medical profession generally to these figures. It is at any time a serious matter for the ratepayers that so large a number of beds provided at great cost for fever patients should be occupied by patients not suffering from fever; it is even more serious when, as happened last year, the result of the admission of non-fever cases is the exclusion of patients really suffering from fever. And this is only one side of the question. It is a very serious matter for a patient suffering from nothing worse than measles or tonsillitis to be placed in a scarlet fever or diphtheria ward, and so exposed to the infection of these more dangerous diseases. Our medical superintendents, we are persuaded, do their best to exclude all patients obviously not suffering from the disease stated on the certificate. But evidently there must be many cases where they are not able to contradict the certificate, however much they may distrust it. In this connection we would further refer to Summary Table XIV., on p. 106, and our comments on it on p. 34.

Smallpox.—Of the patients admitted to the smallpox hospital ships, 10 were not suffering from smallpox at the time of admission. Of this number five were infants admitted with their mothers; and five suffered from other diseases, a list of which is given in the report of the Medical Superintendent, on p. 150.

From these figures it appears that the number of patients admitted to the smallpox ships through mistaken diagnosis was five, or only 0·5 per cent.

It must be remembered, however, that in the case of smallpox the original medical certificate is checked by the examination of a medical officer of the Board at the wharves. If therefore we take the total number of cases originally certified as smallpox and removed to the wharves, we find that the mistaken diagnoses numbered 118 out of 1,045,* or 11·3 per cent.; and these are the figures properly to be compared with those given above in the case of fever.

* The 18 cases referred to in the footnote to p. 150 are not included in these figures.

(6.) Staff Illness in the Fever and Smallpox Hospitals.—On pp. 17–20 is a summary of the returns submitted by the medical superintendents of the several hospitals, showing the total number of members of the staff who were off duty during the year on account of illness.

There were 2,834 persons employed at the fever hospitals during the course of the year (including those employed at the Gore Farm Hospital, where both scarlet fever and smallpox convalescent patients were admitted), of whom 117, or 4·1 per cent., fell ill with fever or diphtheria, and one died; while 697, or 24·6 per cent., suffered from other forms of illness.

The table also shows that 274 persons were employed on the hospital ships during the year, none of whom suffered from smallpox, fever, or diphtheria, but 48, or 17·5 per cent., suffered from other diseases.

(7.) Ambulance Work.—The Ambulance Committee in their report on p. 223 refer to the increased prevalence of infectious diseases during the year, to the outbreak of smallpox in July which prevented the Managers from utilising the Gore Farm Hospital for fever cases, and to the method adopted for securing the selection of the most urgent cases for admission into the Managers' hospitals during the time when the accommodation provided was insufficient to meet all requirements.

During the year 17,770 fever, diphtheria, and smallpox patients were removed from their homes to the various hospitals of the Managers; 5,037 convalescent patients were transferred to the Northern and Gore Farm Hospitals; and 4,464 recovered patients were brought back to London from the Northern Hospital. Further, 326 private persons were removed on payment to other places than the Managers' hospitals; 724 were taken from the out-patient departments of general hospitals to their homes, owing to there being no vacant beds in the Managers' hospitals; and 241 enteric patients were removed from their homes to the general hospitals, where the Managers had made arrangements for the reception of this class of patients.

Altogether, 29,041 removals were effected by the land ambulance service during 1895, and the various vehicles made 19,963 journeys, and ran 212,364 miles.

The steamboats of the river ambulance service conveyed 4,951 passengers to and from the hospital ships at Long Reach; of that number 925 were patients taken to the hospital ships, 792 were

NATURE OF DISEASE.	OFFICERS.	Eastern Hospital.		North-Eastern Hospital.		North-Western Hospital.		Western Hospital.		South-Western Hospital.		Fountain Hospital.		South-Eastern Hospital.		Northern Hospital.		Gore Farm Hospital.†		Summary (Fever Hospitals).		Hospital Ships (Smallpox).		RESULTS.
		Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	
Scarlet Fever	Chaplain	...	...	...	...	...	...	...	...	...	...	...	...	1	53	...	...	...	...	1	53	...	...	Recovered.
	Assist. Medical Officer	...	...	...	...	...	...	1	84	...	...	...	...	...	...	...	...	...	...	1	84	...	...	Recovered.
	Charge Nurses	...	...	...	...	...	...	...	...	...	...	3	157	...	...	...	...	...	...	3	157	...	...	Recovered.
	Nurse	...	...	...	...	1	44	...	...	...	...	...	...	...	...	...	...	...	...	1	44	...	...	Recovered.
	Assistant Nurses	4	138	4	203	1	48	2	149	...	...	5	284	5	241	2	113	...	...	23	1,176	...	...	Recovered.
	Ward Servants	1	62	4	223	...	...	...	...	3	132	1	70	2	150	1	74	...	...	12	711	...	...	Recovered.
	Porters	...	...	1	41	...	...	...	...	...	...	...	...	1	2	...	...	...	...	2	43	...	...	S.E.H., one remained warded at end of year; other recovered
Diphtheria	Night Superintendent	...	...	...	...	1	73	...	...	...	...	...	...	...	...	...	...	...	...	1	73	...	...	Recovered.
	Charge Nurses	3	117	...	...	...	...	...	...	2	34	3	90	1	28	1	31	...	...	10	300	...	...	Recovered.
	Nurses	...	...	...	...	2	113	...	...	...	...	...	...	...	...	...	...	...	...	2	113	...	...	Recovered.
	Assistant Nurses	4	152	1	171	5	144	5	178	4	144	2	80	1	72	2	91	...	...	25	1,032	...	...	Recovered.
	Housemaids	1	37	...	...	...	...	...	...	...	...	...	...	1	81	...	...	...	...	2	118	...	...	Recovered.
	Ward Servants	2	84	1	51	3	81	...	...	...	...	4	157	2	113	6	128	...	...	18	614	...	...	Recovered.
	Needlewoman	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	40	...	...	1	40	...	...	
	Laundrymaids	...	...	...	...	1	22	...	...	...	...	...	...	1	53	1	45	...	...	3	120	...	...	
Diphtheria and Scarlet Fever	Wardmaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	57	1	57	...	...	Recovered.
Enteric Fever	Nurse	...	...	...	...	...	...	1	197	...	...	...	...	...	...	...	...	...	...	1	197	...	...	Recovered.
	Assistant Nurses	1	31	...	...	...	...	...	...	4	304	...	...	2	121	...	...	...	...	7	456	...	...	E.H., one died; others recovered.
	Wardmaid	1	69	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	69	...	...	Recovered.
	Messroom-man	1	52	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	52	...	...	Recovered.
	Stableman	1	70	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	70	...	...	Recovered.
		19	812	11	689	14	525	9	608	13	614	19	838	17	914	14	522	1	57	117	5,579	...	...	
Other Diseases	Medical Superintendent	...	...	...	...	...	...	...	...	...	...	1	4	...	...	...	...	...	...	1	4	...	...	Recovered.
	Assist. Medical Officers	1	5	6	117	...	...	...	...	...	...	1	4	...	...	...	...	...	...	8	126	...	...	Recovered.
	Matrons & Asst. Matrons	...	...	1	10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	10	1	14	Recovered.
	Housekeeper	...	...	...	...	...	...	...	...	...	...	1	11	...	...	...	...	...	...	1	11	...	...	
	Superintendent Nurses	...	...	...	...	...	...	...	...	...	...	1	13	...	...	...	...	...	...	...	...	2	43	
	Charge Nurses	15	79	11	218	...	...	...	...	4	26	12	80	9	117	1	47	...	...	52	567	3	19	N.E.H., two improved; S.W.H., one died.
	Nurses	...	...	...	...	4	60	6	97	...	...	...	...	...	...	...	...	...	...	10	157	...	...	Recovered.
	Assistant Nurses	62	443	59	833	6	82	15	216	18	303	33	230	32	524	25	422	...	...	250	3,053	16	125	E.H., one died; N.E.H., 15 improved, one died; F.H., one died; others recovered.
	Housemaids	8	86	4	41	...	...	1	38	...	...	1	6	9	107	...	...	23	278	...	...	...	...	N.E.H., two improved; others recovered.
	Ward Servants	15	88	41	422	4	39	13	142	8	302	16	89	19	311	23	316	2	43	141	1,732	10	115	N.E.H., seven improved; S.W.H., one died; others recovered.
	Laundry Superintend'ent	...	...	1	7	2	44	...	...	...	...	...	...	1	34	...	...	...	...	4	85	...	...	Recovered.
	Laundrymaids	2	16	9	81	...	...	4	27	...	...	3	24	2	19	4	32	...	...	24	199	6	60	N.E.H., two improved; others recovered.
	Needlewomen	...	...	1	10	...	..	...	...	1	24	...	...	1	15	3	19	...	...	6	68	2	10	N.E.H., one improved; others recovered.
	Cooks	1	16	1	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	20	...	...	Recovered.
	Kitchenmaids	1	8	5	38	...	...	...	...	...	...	2	10	2	10	...	...	1	8	11	74	1	9	N.E.H., one improved; others recovered.
	Steward's Clerks	...	...	1	4	...	...	...	...	...	...	1	19	...	...	...	...	...	...	2	23	1	20	Recovered.
	Porters and Shipkeepers	6	97	4	43	1	12	7	44	6	55	2	13	2	34	...	...	3	37	31	335	5	50	N.E.H., one improved; S.E.H., one remained warded; G.F.H., one died; H.S., one improved, and one died while on sick leave; others recovered.
	Stokers	1	7	6	164	...	...	...	...	2	39	1	8	...	...	...	...	...	...	10	218	...	...	N.E.H., one improved; others recovered.
	Engineers	...	...	1	9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	9	1	13	N.E.H., improved.
	Gardener	...	...	1	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	6	...	...	Recovered.
		131	1,657	163	2,696	31	762	54	1,134	53	1,401	93	1,243	86	1,984	79	1,465	7	145	697	12,587	48	478	
Number employed*	Males		51		53		39		38		54		35		34		104			447		70		
	Females		285		296		228		275		214		347		274		252		216		2,387		204	
	Totals		336		349		267		314		252		401		309		286		320		2,834		274	
Number engaged during the year	Males		13		19		13		12		10		13		6		10		68		164		21	
	Females		130		121		101		117		61		99		87		122		152		990		100	
	Totals		143		140		114		129		71		112		93		132		220		1,154		121	
Number that left during the year	Males		11		19		10		9		8		10		5		8		47		127		69	
	Females		119		117		96		104		56		90		100		71		134		887		23	
	Totals		130		136		106		113		64		100		105		79		181		1,014		83	

* This gives the total number of individuals who have been on the books of the Hospitals in the course of the year, and must not be taken as giving either the average staff or the number employed at any one time.
† The Gore Farm Hospital staff includes the staff employed in the Smallpox wards of that Hospital as well as those employed in the Fever wards.

recovered patients brought back to London, and 3,234 were visitors, staff, workmen, &c.

The vessels were under steam for 843 days, travelled 14,813 miles, and carried, besides the passengers before mentioned, 2,968 packages of stores, &c., weighing 94 tons 8 cwt.

(8.) Training Ship "Exmouth."—The reports of the Committee and Captain-Superintendent of this vessel for the year 1895 will be found on pp. 236–254.

The number of boys admitted during the year was 279 (including 15 who were admitted from extra metropolitan parishes and unions), while the number discharged was 337.

Of the latter number, 163 entered the royal navy, 96 the mercantile marine, 37 the army as musicians, and 41 were returned to their respective parishes and unions. There was only one death.

At the end of the year there remained 526 boys under training, as compared with 585 at the end of 1894.

The Training Ship Committee call attention to the fact that the number of boys entered into the royal navy from the "Exmouth" during the year was 163, whilst the aggregate number of similar entries from all the other training ships in the United Kingdom was 137.

ii. NOTIFICATION STATISTICS.

The table on pp. 23–24 shows the number of notifications of, and deaths from, those notifiable diseases which are eligible for admission to the Managers' hospitals, the ratio of such notifications and deaths to the population, the number of notifications of other notifiable diseases, and the grand total of cases notified during 1895.

In the districts of Fulham, Camberwell, and Greenwich, the number of notifications of diphtheria exceeded those of scarlet fever.

The chart shows the rise and fall in the numbers of cases of scarlet and enteric fevers, diphtheria, and smallpox notified during each week of the past year.

Maps spotted to show the distribution of the principal fevers throughout the Metropolis during 1895 will be found in the pocket at the end of this volume.

In all, there are seven maps, dealing with five diseases.

Scarlet Fever cases are spotted on four maps—one for each quarter of the year.

In the *Diphtheria* map, the prevalence of the disease in certain localities is well defined, particularly in the eastern districts and parts of Islington, St. Pancras, St. Marylebone, Kensington, Fulham, Chelsea, Battersea, Lambeth, Newington, Camberwell, and Greenwich.

On the *Enteric Fever* map, a few considerable aggregations of cases are apparent, notably at Poplar, St. Marylebone, Greenwich, and Plumstead.

Smallpox and *Typhus Fever* cases are shown on one map, the former being represented by spots and the latter by crosses. The most considerable outbreaks of smallpox occurred in Whitechapel and St. Marylebone.

Typhus fever has, for some years past, almost disappeared, and very few cases now occur.

In addition to the before-mentioned maps for 1895, we have issued with this volume a reprint of the maps for the year 1894, in substitution for those previously issued, which have been found imperfect.

The following tables exhibit the ages of the cases notified as scarlet fever and diphtheria respectively during the year:—

SCARLET FEVER.—TABLE A[1].—*Showing the ages of the cases notified as Scarlet Fever during* 1895.

AGES.	Males.	Females.	Total.
Under 1	170	164	334
1 to 2	385	368	753
2 ,, 3	668	629	1,297
3 ,, 4	857	888	1,745
4 ,, 5	956	977	1,933
Total under 5	3,036	3,026	6,062
5 to 10	3,669	4,062	7,731
10 ,, 15	1,693	1,807	3,500
15 ,, 20	535	586	1,121
20 ,, 25	231	304	535
25 ,, 30	123	169	292
30 ,, 35	67	107	174
35 ,, 40	41	57	98
40 ,, 45	11	34	45
45 ,, 50	3	12	15
50 ,, 55	6	7	13
55 ,, 60	4	3	7
Upwards	2	3	5
Unrecorded	82	70	152
Age and Sex unrecorded	...	...	7
Total	9,503	10,247	19,757

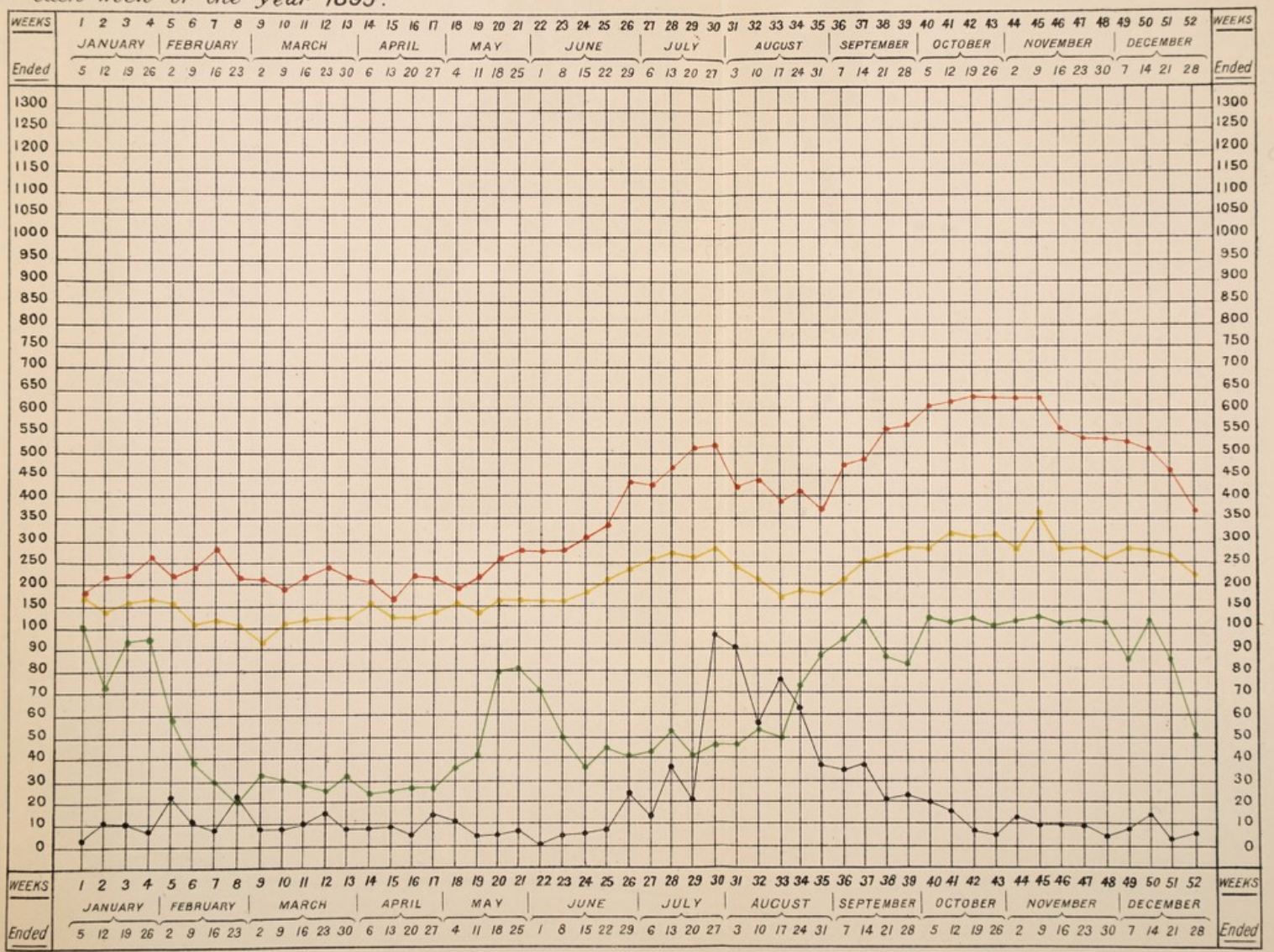
TABLE A.

Local Authorities in whose Districts the cases were resident.	Estimated Population. 1895.	Notifications of, and Deaths from, those Notifiable Diseases which are eligible for Admission to the Managers' Hospitals.														Notifications of other Notifiable Diseases.						Grand Total of Notifications.
		Notifications.								Deaths												
		Smallpox.	Scarlet Fever.	Diphtheria.	Membranous Croup.*	Enteric or Typhoid Fever.	Typhus Fever.	Total Notifications.	Annual Rate per 1,000 persons living.	Smallpox.	Scarlet Fever.	Diphtheria (including Membranous Croup).	Enteric or Typhoid Fever.	Typhus Fever.	Total Deaths.	Annual Rate per 1,000 persons living.	Relapsing Fever.	Continued Fever.	Cholera.	Erysipelas.	Puerperal Fever.	Totals.	
West Districts.																						
Kensington	167,671	9	532	367	13	99	—	1,020	6·1	—	28	90	15	—	133	0·80	—	4	—	259	7	270	1,290
Fulham	117,745	2	344	378	15	58	—	797	6·8	—	21	77	12	—	110	0·94	—	3	—	98	6	107	904
Hammersmith	108,429	8	379	199	6	57	—	649	6·0	1	17	44	12	—	74	0·68	—	5	—	88	2	95	744
Paddington	122,756	10	417	229	9	71	—	736	6·0	—	14	47	13	—	74	0·60	1	—	1	103	8	113	849
Chelsea	99,930	4	575	305	2	73	—	959	9·6	1	25	57	13	—	96	0·96	—	2	—	107	8	117	1,076
St. George, Hanover Square	74,037	4	303	91	5	39	—	442	6·0	1	10	24	9	—	44	0·60	—	3	—	68	1	72	514
Westminster	54,003	6	179	103	2	27	—	317	5·9	—	6	21	3	—	30	0·56	—	—	—	30	2	32	349
St. James', Westminster	23,149	1	82	42	1	11	—	137	5·9	—	3	4	6	—	13	0·56	—	1	—	16	1	18	155
North Districts.																						
Marylebone	137,392	106	498	231	1	135	—	971	7·1	9	14	35	23	—	81	0·59	—	4	1	234	7	246	1,217
Hampstead	77,592	2	306	114	3	63	—	488	6·3	—	8	14	9	1	32	0·41	—	3	—	51	4	58	546
St. Pancras	233,543	15	1,082	537	18	153	—	1,805	7·7	1	52	131	30	—	214	0·92	—	4	—	413	18	435	2,240
Islington	335,929	25	1,725	577	18	197	4	2,546	7·6	1	67	146	30	1	245	0·73	2	9	—	334	22	367	2,913
Stoke Newington	35,234	—	131	57	3	30	—	221	6·3	—	1	5	4	—	10	0·28	—	—	—	28	1	29	250
Hackney	215,623	14	1,037	486	15	257	1	1,810	8·4	1	41	83	45	1	171	0·80	—	6	1	288	13	308	2,118
Central Districts.																						
St. Giles	37,654	13	149	57	6	26	—	251	6·7	2	6	13	2	—	23	0·61	—	—	—	59	1	60	311
St. Martin-in-the-Fields	13,536	3	40	18	—	14	—	75	5·6	1	2	7	1	—	11	0·82	—	—	—	7	—	7	82
Strand	22,586	5	111	39	2	23	—	180	8·0	2	9	13	5	—	29	1·29	—	—	—	17	—	17	197
Holborn	32,188	31	145	53	5	21	—	255	7·9	—	6	7	—	—	13	0·40	—	—	—	60	1	61	316
Clerkenwell	65,036	11	326	128	15	56	1	537	8·3	—	17	34	11	1	63	0·97	—	5	—	93	4	102	639
St. Luke's, Middlesex	40,763	3	149	90	5	33	—	280	6·9	—	5	20	6	—	31	0·76	—	1	—	82	2	85	365
London, City of	33,824	6	142	43	—	35	—	226	6·7	—	4	8	13	—	25	0·74	—	1	—	24	2	27	253
East Districts.																						
Shoreditch	122,932	16	584	233	18	105	—	956	7·8	2	30	58	22	—	112	0·91	—	4	1	184	2	191	1,147
Bethnal Green	130,061	94	752	436	38	122	—	1,442	11·1	4	30	101	17	—	152	1·17	—	2	—	310	7	319	1,761
Whitechapel	75,820	102	508	275	14	31	1	931	12·3	4	23	58	10	—	95	1·26	—	—	—	114	1	115	1,046
St. George-in-the-East	45,227	21	300	215	4	38	—	578	12·8	—	20	50	7	—	77	1·71	—	2	—	69	1	72	650
Limehouse	56,885	21	401	185	5	54	—	666	11·7	1	20	45	10	—	76	1·34	—	1	—	74	2	77	743
Mile End Old Town	108,443	54	671	470	13	78	—	1,286	11·9	1	26	111	17	—	155	1·43	—	—	—	205	3	208	1,494
Poplar	171,230	28	991	732	45	177	1	1,974	11·6	1	48	152	33	—	234	1·37	—	11	—	278	8	297	2,271
South Districts.																						
St. Saviour, Southwark	26,570	4	104	65	2	11	—	186	7·0	—	6	13	1	—	20	0·75	—	—	—	25	1	26	212
St. George, Southwark	60,168	48	185	101	4	45	—	383	6·4	—	14	17	7	—	38	0·63	—	—	1	62	2	65	448
Newington	119,358	20	423	262	17	84	—	806	6·8	4	16	52	15	—	87	0·73	—	1	—	142	9	152	958
St. Olave, Southwark	13,065	1	31	22	—	2	—	56	4·3	—	—	4	2	—	6	0·46	—	—	—	7	1	8	64
Bermondsey	83,861	8	304	109	6	58	1	486	5·8	—	16	29	11	—	56	0·67	—	—	—	74	4	78	564
Rotherhithe	40,713	38	257	135	9	32	1	472	11·6	1	8	31	9	—	49	1·21	—	—	3	87	—	90	562
Lambeth	284,883	54	1,416	631	26	215	1	2,343	8·3	2	53	112	26	—	193	0·68	—	20	17	372	16	425	2,768
Battersea	165,130	22	830	363	41	133	1	1,390	8·4	1	30	92	22	1	146	0·89	—	5	—	249	10	264	1,654
Wandsworth	185,956	15	654	265	21	134	—	1,089	5·9	2	16	46	26	—	90	0·49	—	3	2	220	7	232	1,321
Camberwell	252,737	86	874	889	14	237	—	2,100	8·3	7	46	179	33	—	265	1·05	—	2	2	313	16	333	2,433
Greenwich	175,183	42	860	864	18	150	2	1,936	11·1	3	36	184	17	—	240	1·37	—	—	—	211	17	228	2,164
Lewisham (excluding Penge)	82,410	1	283	125	3	39	—	451	5·5	—	9	14	3	—	26	0·32	—	1	—	77	8	86	537
Woolwich	42,768	1	188	67	—	50	—	306	7·2	—	11	14	7	—	32	0·75	—	—	—	31	2	33	339
Plumstead	61,494	18	325	134	9	215	—	701	11·4	2	10	36	9	—	57	0·93	—	2	—	55	6	63	764
Lee	38,832	5	164	46	—	14	—	229	5·9	—	5	11	30	—	46	1·19	—	—	—	41	3	44	273
Port of London	—	2	—	4	—	4	—	10	—	—	—	—	—	—	—	—	—	—	—	1	—	1	11
Totals	4,392,346	979	19,757	10,772	451	3,506	14	35,479	8·1	55	829	2,289	596	5	3,774	0·86	3	105	29	5,660	236	6,033	41,512

* It has been decided by the Local Government Board that cases of Membranous Croup which are "stated to be Diphtheritic in nature" may properly be admitted into the Managers' Hospitals.

METROPOLITAN ASYLUMS BOARD.

CHART showing the cases of Scarlet fever (red line), Enteric fever (green line), Diphtheria (yellow line), and Smallpox (black line) notified in the Metropolis during each week of the year 1895.



DIPHTHERIA.—TABLE A[2].—*Showing the ages of the cases notified as Diphtheria during* 1895.

AGES.	Males.	Females.	Total.
Under 1	152	103	255
1 to 2	377	317	694
2 ,, 3	445	382	827
3 ,, 4	533	563	1,096
4 ,, 5	510	533	1,043
Total under 5	2,017	1,898	3,915
5 to 10	1,527	1,682	3,209
10 ,, 15	559	727	1,286
15 ,, 20	279	476	755
20 ,, 25	156	335	491
25 ,, 30	136	262	398
30 ,, 35	91	184	275
35 ,, 40	49	104	153
40 ,, 45	15	55	70
45 ,, 50	22	37	59
50 ,, 55	9	22	31
55 ,, 60	4	17	21
Upwards	6	11	17
Unrecorded	39	47	86
Age and Sex unrecorded ...	...	...	6
Total	4,909	5,857	10,772

iii. FEVER STATISTICS, 1895.

Summary Table I. (*p.* 83).—On the last day of 1894 there were 2,513 fever, diphtheria, and other patients in the fever hospitals then open.

During the first four months of the year 1895 the number under treatment declined until the minimum, 1,897, was reached on May 4th. After that date a steady rise was maintained until November 19th when the maximum, 3,568, for the year was attained. The number then slowly declined until the end of the year, when 3,500 patients remained under treatment.

The following was the distribution of patients amongst the various hospitals on November 19th:—

HOSPITAL.	BEDS OCCUPIED.					
	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	TOTAL.
Eastern Hospital	271	72	2	15	28	388
North-Eastern Hospital...	484	...	...	...	4	488
North-Western ,, ...	251	88	...	22	1	362
Western ,, ...	256	84	...	19	1	360
South-Western ,, ...	242	52	...	24	...	318
Fountain ,, ...	310	104	...	...	...	414
South-Eastern ,, ...	263	96	...	43	...	402
Northern ,, ...	765	71	...	...	...	836
Gore Farm ,, ...	...	...	...	...	...	...
TOTALS	2,842	567	2	123	34	3,568

The total number of patients under treatment during the year was 19,360, as compared with 19,937 in the preceding year.

The total admissions were 16,847, as compared with 16,667 in 1894, 18,674 in 1893, 16,276 in 1892, 7,809 in 1891, 8,334 in 1890, 5,772 in 1889, 5,152 in 1888, and 6,537 in 1887. Up to the latter year the largest number admitted in any year had been 2,867 in 1882.

The total discharges during the year were 14,188, and the deaths were 1,672, or a total mortality of 10·22, as compared with 11·73 in the preceding year.

Summary Table II. (*p.* 86).—The total monthly admissions of all cases were lowest in February, and highest in September.

The accompanying chart shows the monthly admissions of each kind of fever from and including the year 1887.

During the twenty-four years which have elapsed since the first of the Managers' fever hospitals was opened, the scarlet fever admissions fell to the minimum eight times in February, four times in March, six times in April, four times in June, once in September, and once in December (1888); while the maximum number was reached once in January (1888), twice in July, four times in September, ten times in October, five times in November, and twice in December. The enteric fever admissions fell to the minimum three times in March, seven times in April, six times in May, seven times in June, and once in July; and rose to the maximum once in May, twice in September, twelve times in October, eight times in November, and once in December.

Typhus fever has only occurred in the Metropolis in small local outbreaks.

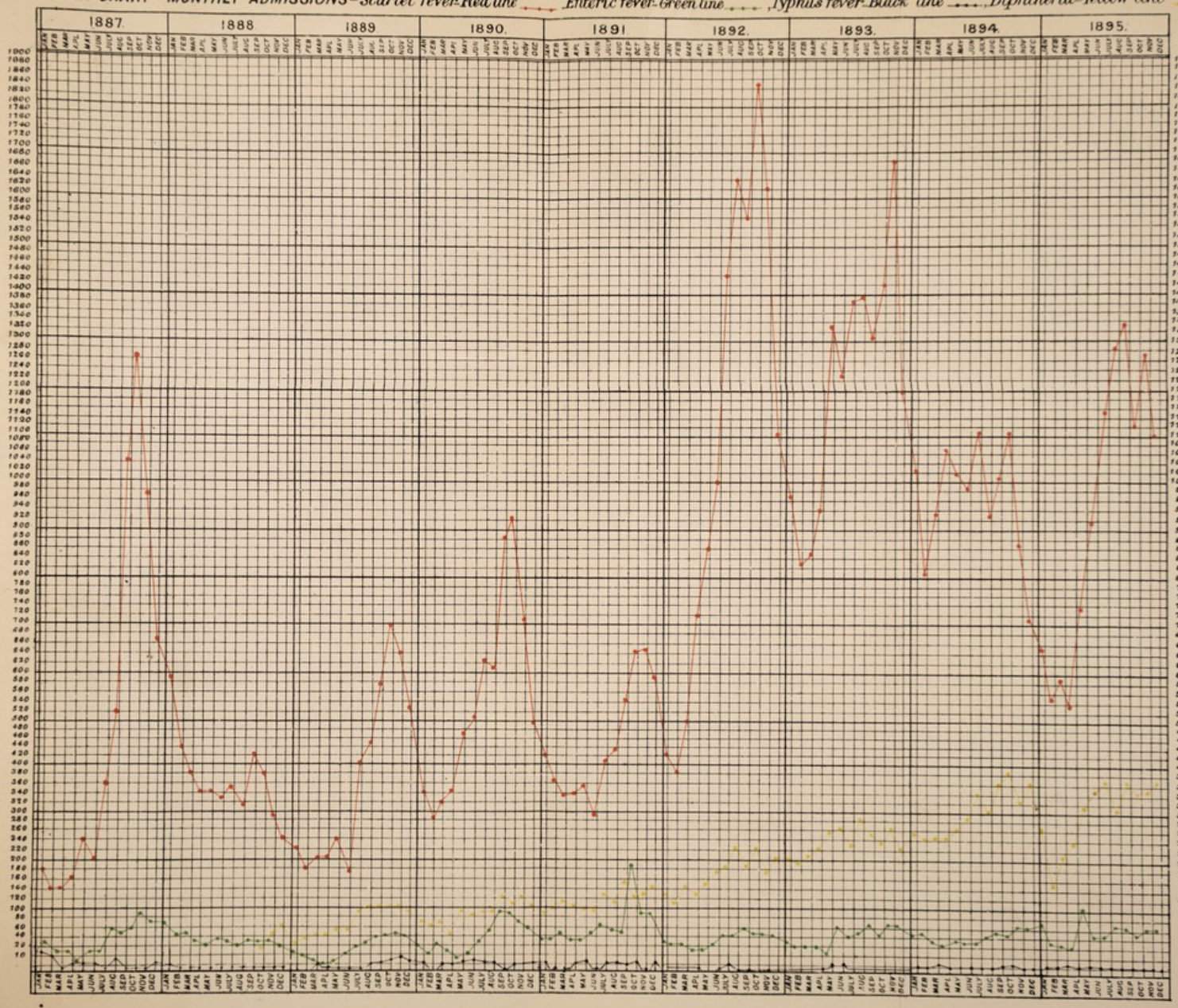
Diphtheria cases were not admitted to the Managers' hospitals until October 23rd, 1888. During the years 1889 and 1891 the minimum admissions took place in January, in 1890 in April, and in February in 1892, 1893, 1894, and 1895; and the maximum admissions of 1889 and 1893 in November, of 1890 and 1891 in September, of 1892 in August, of 1894 in October, and of 1895 in July.

The maxima curves relating to scarlet fever, diphtheria, and enteric fever must not be regarded as indicating with absolute accuracy the greatest seasonal prevalence of these diseases in recent years, for the reason that on several occasions the accommodation in the Managers' hospitals became completely exhausted, and consequently any further rise in the number of admissions became impossible.

Summary Table III. (*p.* 90).—Scarlet fever, diphtheria, and enteric cases were admitted from every parish and union in the district.

METROPOLITAN ASYLUMS BOARD.

FEVER CHART – MONTHLY ADMISSIONS – Scarlet fever-Red line ____ Enteric fever-Green line . . . Typhus fever-Black line ____ Diphtheria-Yellow line



NOTE. ____ Diphtheria cases were not admitted into the Board's Hospitals until the 23rd October, 1888.

STATISTICS OF SCARLET FEVER.—SUMMARY TABLES IV., V., VI.

Summary Table IV. (*p.* 92) shows the scarlet fever admissions and deaths at various ages. Up to the year 1888 it had been the custom to give the aggregate admissions and deaths of patients in the first five years of life, but the Committee being of opinion that the table would be more valuable, if the figures were given for each of such years separately, it has since been arranged accordingly.

The total admissions of scarlet fever cases in 1895 were 11,271: the female were 281 in excess of the male admissions. The total mortality, calculated on the admissions, was 5·2 per cent.

The following table is compiled from the Summary Tables in this and previous Annual Reports:—

SCARLET FEVER.—TABLE B—*Showing Mortality at various ages of* 92,615 *cases admitted into the Board's Hospitals in the years* 1871 *to* 1895.

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5 ...	13,236	2,306	17·4	13,301	2,178	16·4	26,537	4,484	16·9
5 to 10 ...	18,152	954	5·3	20,088	962	4·8	38,240	1,916	5·0
10 to 15 ...	7,775	170	2·2	8,703	198	2·3	16,478	368	2·2
15 to 20 ...	2,796	77	2·8	3,131	67	2·1	5,927	144	2·4
20 to 25 ...	1,159	24	2·1	1,608	44	2·7	2,767	68	2·5
25 to 30 ...	509	17	3·3	843	21	2·5	1,352	38	2·8
30 to 35 ...	291	14	4·8	437	17	3·9	728	31	4·3
35 to 40 ...	117	8	6·8	202	8	4·0	319	16	5·0
40 to 45 ...	66	6		83	4		149	10	
45 to 50 ...	24	2		36	1		60	3	
50 to 55 ...	22	1	8·3	18	—	4·1	40	1	6·0
55 to 60 ...	6	1		4	—		10	1	
And upwards	2	—		6	1		8	1	
Totals	44,155	3,580	8·1	48,460	3,501	7·2	92,615	7,081	7·6
Cases under 5 years of age admitted during the years 1888 *to* 1895.									
Under 1 ...	359	100	27·9	302	95	31·4	661	195	29·5
1 to 2 ...	1,235	313	25·3	1,136	287	25·3	2,371	600	25·3
2 to 3 ...	2,217	438	19·7	2,198	440	20·0	4,415	878	19·9
3 to 4 ...	3,134	454	14·5	3,170	425	13·4	6,304	879	13·9
4 to 5 ...	3,411	347	10·2	3,613	341	9·4	7,024	688	9·8
Totals	10,356	1,652	15·9	10,419	1,588	15·2	20,775	3,240	15·6

N.B.—(1) The above tables include deaths within 48 hours after admission, as well as deaths from intercurrent maladies.

(2) 2,178 cases are excluded from the first table as they were patients admitted into hospitals which also received convalescent patients from other hospitals, and in taking the ages of patients for the purposes of this return it was impossible from the returns in the possession of the Committee to identify the two classes. This accounts for the difference between the total in this table and that in Table F, p. 36.

The relation of age and sex to mortality is clearly indicated by the above table. The disease is most fatal to children under five years of age, and notably so to infants in the first and second years of life. More

males than females have been admitted, and the mortality amongst the former is greater than amongst the latter by 0·9 per cent.

The foregoing table covers a series of years during which various modifications of the regulations governing the admission of patients into the Managers' hospitals have been introduced:—

(1) From the first opening of the hospitals for the reception of scarlet and other fever patients in 1871 up to the beginning of July, 1887, patients could only legally be admitted upon the order of a relieving officer or a master of a workhouse, accompanied by a certificate signed by the medical officer of the district or workhouse, as the case might be, of the union or parish to which the patient (or pauper, as he was called in the regulations) was chargeable, although by the Diseases Prevention (Metropolis) Act, 1883, the disabilities of pauperism were removed.

This limited the admissions to a class of persons amongst whom, owing to their impoverished physical condition, a somewhat higher mortality might have been expected to prevail than amongst the general population, as is in fact shown in Table B[1].

(2) From July 8th, 1887, up to the end of 1891, under an Order issued by the Local Government Board, patients were allowed to be admitted into hospital upon the order of a relieving officer or a master of a workhouse, accompanied by a certificate signed by *any* duly qualified medical practitioner.

This resulted in a number of persons coming in who were in no ordinary sense paupers, as they never had been chargeable on the poor rates, and probably never would have become so, except for the disease.

(3) Compulsory notification was introduced into the Metropolis at the end of 1889.

This not only gave the sanitary authorities for the first time authentic information as to the extent and precise locality of disease, but also had a tendency to induce the sanitary officials to persuade a larger proportion of those attacked with infectious disease to seek isolation in the Managers' hospitals.

(4) The Public Health (London) Act, 1891, came into operation on January 1st, 1892, and permitted, the admission, free of charge, of any patient reasonably believed to be suffering from fever, smallpox, or diphtheria.

This finally swept away the last relic of restriction, and left the Managers' hospitals open, free of charge and without disability, to all who chose to use them.

We have therefore thought it desirable to have the following four tables prepared to correspond with these four periods:—

SCARLET FEVER.—TABLE B[1].—*Showing the Mortality at various ages of* 15,480 *cases admitted into the Board's Hospitals in the years* 1871 *(part of) to* 1886 (i.e., *during the period when it was requisite that patients should be provided with the Order of a Relieving Officer or a Master of a Workhouse, accompanied by a Certificate signed by the Medical Officer of the District or Workhouse*).

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5... ...	2,045	510	24·9	2,067	440	21·3	4,112	950	23·1
5 to 10... ...	2,883	290	10·1	3,168	292	9·2	6,051	582	9·6
10 to 15... ...	1,253	63	5·0	1,428	75	5·2	2,681	138	5·1
15 to 20... ...	523	26	5·0	777	28	3·6	1,300	54	4·1
20 to 25... ...	242	14	5·8	434	19	4·4	676	33	4·9
25 to 30... ...	107	9	8·4	229	12	5·2	336	21	6·2
30 to 35... ...	72	5	6·9	107	9	8·4	179	14	7·8
35 to 40... ...	28	5	18·0	58	5	8·6	86	10	11·6
40 to 45... ...	17	3		18	1		35	4	
45 to 50	1	—		9	1		10	1	
50 to 55... ...	6	1	20·0	4	—	8·8	10	1	13·6
55 to 60... ...	1	1		1	—		2	1	
And upwards	—	—		2	1		2	1	
Totals...	7,178	927	12·9	8,302	883	10·6	15,480	1,810	11·7

SCARLET FEVER.—TABLE B[2].—*Showing the Mortality at various ages of* 14,826 *cases admitted into the Board's Hospitals in the years* 1887 *to* 1889 *inclusive* (i.e., *the period during which patients were admitted upon the Order of a Relieving Officer or a Master of a Workhouse, accompanied by a Certificate signed by any duly qualified Medical Practitioner*).

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5... ...	2,263	427	18·9	2·152	413	19·2	4,415	840	19·0
5 to 10... ...	2,999	196	6·5	3·295	192	5·8	6,294	388	6·2
10 to 15... ...	1,070	35	3·3	1,290	37	2·9	2,360	72	3·1
15 to 20... ...	443	25	5·6	461	10	2·2	904	35	3·9
20 to 25... ...	188	3	1·6	240	4	1·7	428	7	1·6
25 to 30... ...	90	3	3·3	112	1	0·9	202	4	2·0
30 to 35... ..	49	4	8·2	71	3	4·2	120	7	5·8
35 to 40... ...	19	1	5·3	35	—	—	54	1	1·9
40 to 45... ...	13	2		13	—		26	2	
45 to 50... ...	4	—		9	—		13	—	
50 to 55... ...	4	—	9·5	6	—	—	10	—	4·1
55 to 60... ...	—	—		—	—		—	—	
And upwards	—	—		—	—		—	—	
Totals...	7,142	696	9·7	7,684	660	8·6	14,826	1,356	9·1

SCARLET FEVER.—TABLE B[3].—*Showing the Mortality at various ages of* 11,799 *cases admitted into the Board's Hospitals in the years* 1890 *to* 1891 *inclusive* (i.e., *during the period when compulsory Notification was being enforced, but it was still requisite that patients should be provided with the Order of a Relieving Officer or a Master of a Workhouse, in addition to the Certificate of a duly qualified Medical Practitioner*).

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 1... ...	51	10	19·6	50	19	38·0	101	29	28·7
1 to 2... ...	201	55	27·4	169	44	26·0	370	99	26·8
2 to 3... ...	348	81	23·3	433	100	23·1	781	181	23·2
3 to 4... ...	542	96	17·7	541	72	13·3	1,083	168	15·5
4 to 5... ...	606	67	11·1	607	74	12·2	1,213	141	11·6
Totals ...	1,748	309	17·7	1,800	309	17·2	3,548	618	17·4
5 to 10... ...	2,400	102	4·2	2,678	104	3·9	5,078	206	4·1
10 to 15... ...	863	12	1·4	1,088	14	1·3	1,951	26	1·3
15 to 20... ...	307	2	0·7	346	4	1·2	653	6	0·9
20 to 25... ...	143	2	1·4	181	7	3·9	324	9	2·8
25 to 30... ...	45	1	2·2	78	1	1·3	123	2	1·6
30 to 35... ...	30	—	—	42	—	—	72	—	—
35 to 40... ...	14	—	—	14	—	—	28	—	—
40 to 45... ...	6	—		4	—		10	—	
45 to 50	4	—		4	—		8	—	
50 to 55... ...	1	—	—	—	—	—	1	—	—
55 to 60... ...	—	—		—	—		—	—	
And upwards	1	—		2	—		3	—	
Totals ...	5,562	428	7·7	6,237	439	7·0	11,799	867	7·3

SCARLET FEVER.—TABLE B[4].—*Showing the Mortality at various ages of* 50,510 *cases admitted into the Board's Hospitals in the years* 1892 *to* 1895 *inclusive* (i.e., *since all legislative restrictions have been removed.*)

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 1... ...	269	79	29·4	216	63	29·2	485	142	29·3
1 to 2... ...	896	207	23·1	817	194	23·7	1,713	401	23·4
2 to 3... ...	1,572	283	17·9	1,464	266	18·2	3,036	549	18·1
3 to 4... ...	2,113	269	12·7	2,238	285	12·7	4,351	554	12·7
4 to 5... ...	2,330	223	9·6	2,547	208	8·1	4,877	431	8·8
Totals ...	7,180	1,061	14·8	7,282	1,016	13·9	14,462	2,077	14·3
5 to 10... ...	9,870	367	3·7	10,947	374	3·4	20,817	741	3·6
10 to 15... ...	4,589	58	1·3	4,897	72	1·5	9,486	130	1·4
15 to 20... ...	1,523	24	1·6	1,547	25	1·6	3,070	49	1·6
20 to 25... ...	586	5	0·9	753	14	1·9	1,339	19	1·4
25 to 30... ...	267	4	1·5	424	7	1·7	691	11	1·6
30 to 35... ...	140	5	3·6	217	5	2·3	357	10	2·8
35 to 40... ...	56	2	3·6	95	3	3·2	151	5	3·3
40 to 45... ...	30	1		48	3		78	4	
45 to 50... ...	15	2		14	—		29	2	
50 to 55... ...	11	—	4·8	8	—	4·0	19	—	4·4
55 to 60... ...	5	—		3	—		8	—	
And upwards	1	—		2	—		3	—	
Totals ...	24,273	1,529	6·3	26,237	1,519	5·8	50,510	3,048	6·0

The rates of mortality amongst the patients dealt with in the first table are seen to be much higher than in either of the succeeding tables, the lowest rates being amongst those dealt with in the last table, which represent the average mortality from scarlet fever in the Managers' hospitals during the past four years.

As bearing on the question of the amount of accommodation for patients provided by the Managers, we draw attention to the fact that during the period dealt with in the first of the foregoing four tables the average yearly admissions of scarlet fever cases were only a trifle over 1,000; during the second period they rose to nearly 5,000; in the third period to nearly 6,000, and in the fourth period, *i.e.*, after the passing of the Public Health (London) Act, 1891, to upwards of 12,600 per annum. Further, cases of diphtheria, which were for the first time admitted towards the end of 1888, rose from 722 in the complete year 1889, to 3,635 in the complete year 1895. In view of these remarkable increases, it cannot be a matter of surprise that there have been times when the accommodation at the Managers' disposal has been completely exhausted.

Summary Table V. (*p.* 93) shows certain of the complications observed amongst the scarlet fever cases under treatment during the past year.

Summary Table VI. (*p.* 94) is a table which has been prepared by the medical superintendents of diseases co-existent with the attack of scarlet fever, and more or less prejudicial to recovery.

STATISTICS OF DIPHTHERIA.—SUMMARY TABLES VII. VIII., IX.

Summary Table VII. (*p.* 96) shows the admissions and deaths at various ages of diphtheria cases during the past year.

The following table is compiled from the Summary Tables in this and the previous Annual Reports since 1888, in which year diphtheria cases were first admitted to the Managers' hospitals:—

DIPHTHERIA.—TABLE C—*Showing Mortality at various ages of* 15,233 *cases admitted into the Board's Hospitals in the years* 1888 *to* 1895.

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 1 ...	140	79	56·4	121	68	56·2	261	147	56·3
1 to 2 ..	492	288	58·5	445	262	58·9	937	550	58·7
2 to 3 ...	636	324	50·9	632	308	48·7	1,268	632	49·8
3 to 4 ..	840	388	46·2	875	358	40·9	1,715	746	43·5
4 to 5 ...	829	291	35·1	957	361	37·7	1,786	652	36·5
Total under 5	2,937	1,370	46·6	3,030	1,357	44·8	5,967	2,727	45·7
5 to 10 ...	2,328	563	24·2	2,690	736	27·4	5,018	1,299	25·9
10 to 15 ...	750	71	9·5	1,012	107	10·6	1,762	178	10·1
15 to 20 ...	353	20	5·4	579	26	4·5	932	46	4·8
20 to 25 ...	213	10	4·7	403	16	4·0	616	26	4·2
25 to 30 ...	140	9	6·4	277	12	4·3	417	21	5·0
30 to 35 ...	85	2	2·4	147	7	4·8	232	9	3·9
35 to 40 ...	50	3	6·0	79	2	2·5	129	5	3·9
40 to 45 ...	29	3	16·9	39	4	15·8	68	7	16·2
45 to 50 ...	14	1		27	4		41	5	
50 to 55 ...	13	4		10	2		23	6	
55 to 60 ...	6	2		11	1		17	3	
And upwards	3	1		8	4		11	5	
Totals ..	6,921	2,059	30·0	8,312	2,278	27·4	15,233	4,337	28·5

Diphtheria, like scarlet fever, is most fatal to infant children. The maximum mortality occurs in the first year of life, when it reaches the high percentage of 56·3, subsequently falling with every additional year of life to the minimum of 3·9 per cent. amongst persons between 30 and 40 years of age.

The death rate of females is less than that of males by 2·6 per cent., although, unlike scarlet fever, more of the former were admitted than of the latter sex.

Summary Table VIII. (*p.* 97) shows certain of the complications observed in the diphtheria cases under treatment during the past year.

Summary Table IX. (*p.* 98) is a table which has been prepared by the medical superintendents of diseases co-existent with the attack of diphtheria, and more or less prejudicial to recovery.

STATISTICS OF ENTERIC FEVER.—SUMMARY TABLES X., XI., XII.

Summary Table X. (*p.* 100) shows the admissions and deaths at various ages of enteric cases during the year.

The following table is compiled from the Summary Tables in this and previous Annual Reports :—

ENTERIC FEVER.—TABLE D—*Showing Mortality at various ages of* 9,884 *cases admitted into the Board's Hospitals in the years* 1871 *to* 1895.

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5 ...	171	22	12·9	144	21	14·6	315	43	13·7
5 to 10 ...	662	60	9·1	637	55	8·6	1,299	115	8·9
10 to 15 ...	1,227	127	10·4	1,037	171	16·5	2,264	298	13·2
15 to 20 ...	1,148	167	14·5	1,041	214	20·6	2,189	381	17·4
20 to 25 ...	761	163	21·4	718	136	18·9	1,479	299	20·2
25 to 30 ...	553	136	24·6	458	95	20·7	1,011	231	22·8
30 to 35 ...	318	96	30·2	286	56	19·6	604	152	25·2
35 to 40 ...	167	49	29·3	184	46	25·0	351	95	27·1
40 to 45 ...	98	28		89	21		187	49	
45 to 50 ...	47	22		62	15		109	37	
50 to 55 ...	23	9	36·6	22	5	24·7	45	14	30·6
55 to 60 ...	10	6		8	4		18	10	
And upwards	8	3		5	1		13	4	
Totals ...	5,193	888	17·1	4,691	840	17·9	9,884	1,728	17·5

N.B.—(1) The above table includes deaths within 48 hours after admission, as well as deaths from intercurrent maladies.

(2) The total number does not correspond with Table F, p. 36, for reasons similar to those given in note 2 to Table B, p. 27.

The number of cases of enteric fever under five years of age is comparatively small.

The lowest death rate is amongst patients between 5 and 10 years of age; it then increases with each quinquennium, until it attains a percentage of 27·1 amongst patients between 35 and 40 years of age and of 30·6 amongst the patients of ages from 40 to 60 and upwards.

The male sex is evidently more liable to attack by this disease; but its fatality is greater amongst females by 0·8 per cent. There are striking variations in the relative mortality in the sexes at different age-periods. Between the ages of 10 and 20 the death rate is much greater amongst females, but the case is entirely reversed in all later age-periods.

Summary Table XI. (*pp.* 102) shows the complications observed in the enteric fever cases under treatment during the past year.

Summary Table XII. (*p.* 103) is a table which has been prepared by the medical superintendents of diseases co-existent with the attack of enteric fever, and more or less prejudicial to recovery.

STATISTICS OF TYPHUS FEVER.—TABLE XIII.

Table XIII. (*p.* 104) shows the admissions and deaths at various ages of typhus fever cases at the Eastern Hospital, the only institution at which this disease was treated during the past year.

The following table is compiled from the Summary Tables in this and former Annual Reports:—

TYPHUS FEVER.—TABLE E—*Showing Mortality at various ages of* 2,169 *cases admitted into the Board's Hospitals in the years* 1871 *to* 1895.

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5 ...	40	1	2·5	48	1	2·1	88	2	2·3
5 to 10 ...	106	1	0·9	139	—	—	245	1	0·4
10 ,, 15 ...	170	4	2·4	207	11	5·3	377	15	4·0
15 ,, 20 ...	163	10	6·1	197	18	9·1	360	28	7·8
20 ,, 25 ...	124	28	22·6	124	22	17·7	248	50	20·2
25 ,, 30 ...	77	21	27·3	83	15	18·1	160	36	22·5
30 ,, 35 ..	76	25	32·9	85	22	25·9	161	47	29·2
35 ,, 40 ...	57	26	45·6	76	21	27·6	133	47	35·3
40 ,, 45 ...	75	46	61·3	95	35	36·8	170	81	47·7
45 ,, 50 ...	42	21	50·0	54	21	38·9	96	42	43·8
50 ,, 55 ...	23	16	69·6	38	21	55·3	61	37	60·7
55 ,, 60 ...	14	9	64·3	18	15	83·3	32	24	75·0
And upwards	16	12	75·0	22	15	68·2	38	27	71·1
Totals ...	983	220	22·4	1,186	217	18·3	2,169	437	20·1

N.B.—(1) The above table includes deaths within 48 hours after admission, as well as deaths from intercurrent maladies.

(2) The total number does not correspond with Table F, p. 36, for similar reasons to those given in note 2 to Table B, p. 27.

Young children appear to be less liable to attack by typhus fever than adolescents or adults. At all ages more females than males have been admitted. The death rate of females is less by 4·1 per cent. than that of males. The mortality in both sexes is greatly influenced by age. Up to the twentieth year the rate does not exceed 7·8 per cent.; but in the quinquennium 20 to 25 it suddenly rises to 20·2 per cent., and increases during every later age-period.

STATISTICS OF MISTAKES IN DIAGNOSIS.—TABLE XIV.

Summary Table XIV. (*pp.* 106-112) shows the total admissions during the year of patients having other diseases than those set forth on the medical admission certificates. The form of the table is so arranged as to show not only the diseases from which the patients actually suffered, but also the diseases from which they were stated to be suffering by the certificate under which they were removed to hospital.

The percentage of these cases of mistaken diagnosis was, as regards scarlet fever cases, 3·5; diphtheria cases, 2.8; and enteric cases, 23·2.

Amongst the 413 cases certified as scarlet fever, there were 114 of measles, 69 of tonsillitis, and 95 had no obvious disease. Amongst the 651 cases certified as diphtheria, were 24 of measles, and 533 of tonsillitis.

Amongst the 200 cases certified as enteric fever, were 20 of febricula and 37 of pneumonia.

iv. SMALLPOX STATISTICS, 1895.

Table I. on pp. 160–2 shows the number of smallpox patients admitted from each parish or union during each month of the year 1895, and the total admissions for the year. It also shows the total deaths and discharges, and the number remaining under treatment at the beginning and end of the year.

The total number of smallpox cases admitted was 941, of whom 63 died, 824 were discharged, and 70 remained under treatment at the end of the year. But, in addition to these numbers, there were 10 non-smallpox cases admitted to the hospital ships, and 69 who were detained at the observation shelters at South Wharf, besides 43 who were returned direct to their homes.

Full information as to the cases admitted to the hospital ships will be found in the report of the Medical Superintendent, Dr. Ricketts, on pp. 150–5; as to the cases detained at the South Wharf Shelters in the report of the Medical Officer of the River Service, Dr. Brooke, on pp. 156–9; and as to the cases transferred to the Gore Farm Hospital in the report of the Medical Superintendent, Dr. Thomson, on pp. 80–1.

Amongst the admissions at the hospital ships were five infants not suffering from smallpox at the time of admission who were admitted with their mothers; and of these one subsequently developed the disease and died. This patient was probably in the incubation stage of the disease when admitted.

Table II.—On pp. 163–174 are tables which supply detailed particulars concerning the vaccination of the smallpox patients admitted.

In Table IIc. (which is a continuation of Tables IIa. and IIb.) it will be seen that vaccination cicatrices were present in 609 cases, of whom 15 died. In 75 cases there was "no evidence" as to cicatrices—(these were cases said to have been vaccinated, but bearing no visible evidence of the operation, and cases in which no statement was made, but the nature of the eruption or other cause prevented any observations of the marks if any existed)—of whom 13 died; and in 257 cases vaccination cicatrices were absent, 35 of whom died.

v. FEVER AND SMALLPOX STATISTICS OF PAST YEARS.

On the two succeeding pages are returns which show the annual admissions and deaths of patients at the Managers' fever and smallpox hospitals, with the mortality per cent. since the establishment of the first hospital in 1870, together with extracts from the Registrar-General's Annual Summaries, showing the annual mortality per 1,000 persons living of the population of the Metropolis from scarlet, typhus, and enteric fevers, and smallpox.

The decreasing percentage of the mortality amongst scarlet fever patients treated in the Managers' hospitals continues to be a noticeable feature in the fever table.

Table F—Showing the Admissions and Deaths of Patients and Mortality per cent. at the Managers' FEVER HOSPITALS during each Year since the opening of the first Hospital on January 25th, 1870, together with the Annual Mortality per 1,000 persons living of the Population of the Metropolis from Scarlet, Typhus, and Enteric Fevers and Diphtheria, extracted from the Registrar-General's Annual Summaries.

YEAR.	ADMISSIONS.						DEATHS.						Mortality per cent. of Patients treated in Managers' Hospitals.				Annual Mortality per 1,000 of estimated Population.			
	Scarlet.	Diphtheria	Typhus.	Enteric.	Other Diseases.	Total.	Scarlet.	Diphtheria	Typhus.	Enteric.	Other Diseases.	Total.	Scarlet Fever.	Diphtheria	Typhus.	Enteric.	Scarlet.	Diphtheria	Typhus.	Enteric.
1871)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	0·58	0·11	0·12	0·27
1872) (15 months to Dec. 31st, 1872)...	108	...	134	279	343	864	11	...	30	57	70	168	10·78	...	23·62	21·96	0·28	0·08	0·05	0·24
1873...	92	...	401	381	271	1,145	6	...	91	56	58	211	6·55	...	23·15	15·13	0·19	0·09	0·08	0·27
1874...	804	...	536	435	359	2,134	89	...	106	63	84	342	12·15	...	19·62	14·87	0·77	0·12	0·09	0·26
1875...	1,182	...	65	299	269	1,815	160	...	16	78	54	308	13·69	...	23·35	24·68	1·06	0·17	0·04	0·23
1876...	671	...	139	288	294	1,392	90	...	28	59	71	248	12·13	...	19·31	20·34	0·65	0·11	0·04	0·22
1877...	479	...	170	372	186	1,207	54	...	36	79	33	202	12·10	...	23·07	22·93	0·44	0·09	0·04	0·25
1878...	679	...	168	484	233	1,564	91	...	47	100	40	278	14·34	...	26·25	20·26	0·49	0·15	0·04	0·28
1879...	1,469	...	48	385	196	2,098	211	...	11	74	39	335	15·27	...	21·56	19·73	0·72	0·15	0·02	0·23
1880...	1,949	..	28	248	239	2,464	242	...	6	43	37	328	12·30	...	20·68	15·63	0·82	0·14	0·02	0·19
1881...	1,477	...	219	415	211	2,322	168	...	34	86	46	334	11·10	...	16·95	21·47	0·55	0·17	0·02	0·25
1882..	1,850	...	148	515	354	2,867	189	...	27	104	60	380	10·37	...	16·92	20·71	0·52	0·22	0·01	0·25
1883...	1,920	...	45	486	269	2,720	234	...	11	74	66	385	12·38	...	21·15	15·64	0·51	0·24	0·01	0·25
1884..	1,845	...	29	493	180	2,547	234	...	5	98	55	392	12·27	...	20·00	18·82	0·36	0·24	0·01	0·23
1885...	1,353	...	53	220	229	1,855	130	...	7	36	46	219	9·47	...	12·17	15·82	0·18	0·23	0·01	0·15
1886...	1,780	...	10	333	74	2,197	151	...	4	47	22	224	9·04	...	42·10	14·85	0·17	0·21	0·00	0·15
1887...	5,900	...	35	441	161	6,537	489	...	4	61	59	613	9·54	...	11·59	14·59	0·36	0·23	0·00	0·15
1888...	4,408	99	1	450	194	5,152	501	46	...	72	60	679	9·89	59·35	...	14·64	0·30	0·32	0·00	0·17
1889...	4,518	722	23	290	219	5,772	366	275	6	41	48	736	8·85	40·74	31·57	15·15	0·19	0·39	0·00	0·13
1890...	6,537	942	16	498	341	8,334	510	316	5	93	81	1,005	7·86	33·55	25·66	19·68	0·21	0·33	0·00	0·15
1891...	5,262	1,312	18	755	462	7,809	357	397	1	106	102	963	6·67	30·63	5·88	14·52	0·14	0·34	0·00	0·13
1892...	13,093	2,009	19	430	725	16,276	839	583	2	65	140	1,629	7·28	29·35	9·76	13·20	0·27	0·46	0·00	0·10
1893...	14,548	2,848	2	544	732	18,674	901	865	1	110	105	1,982	6·11	30·42	50·00	20·54	0·37	0·76	0·00	0·16
1894...	11,598	3,666	6	534	863	16,667	717	1,035	1	96	150	1,999	5·92	29·29	16·67	18·13	0·22	0·61	0·00	0·15
1895...	11,271	3,635	3	661	1,277	16,847	591	820	...	119	142	1,672	5·45	22 85	...	18·17	0·19	0·53	0·00	0·14
Totals	94,793	15,233	2,316	10,236	8,681	131,259	7,331	4,337	479	1,817	1,668	15,632	7·73	28·50	20·68	17·75	...	...	...	...

NOTE.—1. From December 1st, 1870, to the end of September, 1871, Smallpox cases only were admitted to the Board's Hospitals.
2. The deaths of Fever patients include all cases dying within 48 hours after admission, and also those deaths due to intercurrent maladies.
3. Diphtheria cases have only been admitted into the Managers' Hospitals since October 23rd, 1888.
4. The Mortality rates of patients in the Managers' Hospitals are calculated according to the Registrar-General's formula.

Table G—Showing the Admissions and Deaths of Patients and Mortality per cent. at the Managers' SMALLPOX HOSPITALS during each year since the opening of the first Hospital on December 1st, 1870, together with the Annual Mortality per 1,000 persons living of the Population of the Metropolis from Smallpox, extracted from the Registrar-General's Annual Summaries.

YEAR.	ADMISSIONS.			DEATHS.			Mortality per cent. of Patients treated in Managers' Hospitals.	Annual Mortality per 1,000 of estimated Population.
	Smallpox.	Other Diseases.	Total.	Smallpox.	Other Diseases.	Total.	Smallpox.	Smallpox.
Dec. 1st, 1870, to Feb. 3rd, 1871	582	...	582	97	...	97	20·81	...
1871–2 (Feb. 4th, 1871, to Jan. 31st, 1872)	13,139	6	13,145	2,460	...	2,460	18·95	2·42
1872–3 (year ended Jan. 31st, 1873)	2,359	3	2,362	467	1	468	17·84	0·54
1873–4 (year ended Jan. 31st, 1874)	174	17	191	35	..	35	17·02	0·03
1874 (11 months ended Dec. 31st)	112	8	120	10	...	10		0·02
1875	89	22	111	22	...	22		0·01
1876	2,134	16	2,150	372	1	373	21·64	0·21
1877	6,516	104	6,620	1,214	4	1,218	17·92	0·71
1878	4,558	96	4,654	824	9	833	17·99	0·39
1879	1,628	60	1,688	273	5	278	15·69	0·12
1880	1,982	50	2,032	286	2	288	15·95	0·12
1881	8,551	120	8,671	1,417	14	1,431	16·61	0·62
1882	1,799	55	1,854	260	3	263	12·96	0·11
1883	598	28	626	93	...	93	16·06	0·03
1884	6,363	204	6,567	940	3	943	15·98	0·31
1885	6,146	198	6,344	1,052	3	1,055	15·80	0·35
1886	99	33	132	22	2	24		0·01
1887	56	3	59	3	...	3		0·00
1888	62	5	67	8	...	8	14·28	0·00
1889	5	...	5	..	...	...		...
1890	22	5	27	3	...	3		0·00
1891	63	1	64	8	...	8		0·00
1892	325	23	348	35	...	35	11·29	0·01
1893	2,376	118	2,494	180	2	182	7·64	0·05
1894	1,117	120	1,237	102	7	109	8·87	0·02
1895	941	81	1,022	64	1	65	6.36	0·01
Totals	61,796	1,376	63,172	10,247	57	10,304	16·31	...

The following table is founded on the returns of the Registrar-General, and will be of interest to the Managers in relation to the history of smallpox in the Metropolis:—

YEARS.	Estimated Population in the Middle of each Year.	Deaths from Smallpox.		
		Annual Total.	Annual Rate per Million of Population.	Rate per Million on Averages of Five Years.
1838	1,766,169	3,817	2,161	—
1839	1,802,751	634	352	—
1840	1,840,091	1,235	671	—
1841	1,878,205	1,053	561	—
1842	1,917,108	360	188	787
1843	1,954,041	438	224	399
1844	2,033,816	1,804	887	506
1845	2,073,298	909	438	460
1846	2,113,535	257	122	372
1847	2,202,673	955	434	421
1848	2,244,837	1,620	722	521
1849	2,287,302	521	228	389
1850	2,330,054	499	214	344
1851	2,373,081	1,062	448	409
1852	2,416,367	1,159	480	418
1853	2,459,899	211	86	291
1854	2,503,662	694	277	301
1855	2,547,639	1,039	408	340
1856	2,591,815	531	205	291
1857	2,636,174	156	59	207
1858	2,680,700	242	90	208
1859	2,725,374	1,158	425	237
1860	2,770,181	898	324	221
1861	2,815,101	217	77	195
1862	2,860,117	366	128	209
1863	2,905,210	1,996	687	328
1864	2,950,361	547	185	280
1865	2,995,551	640	214	258
1866	3,040,761	1,391	457	334
1867	3,085,971	1,345	436	396
1868	3,131,160	597	191	297
1869	3,176,308	275	87	277
1870	3,221,394	973	302	295
1871	3,267,251	7,912	2,421	688
1872	3,319,736	1,786	537	708
1873	3,373,065	113	33	676
1874	3,427,250	57	16	661
1875	3,482,306	46	12	602
1876	3,538,246	736	207	161
1877	3,595,085	2,551	709	194
1878	3,652,837	1,417	387	266
1879	3,711,517	450	120	287
1880	3,771,139	471	124	309
1881	3,824,964	2,367	617	391
1882	3,862,876	430	110	271
1883	3,901,164	136	34	201
1884	3,939,832	1,236	307	228
1885	3,978,883	1,419	347	283
1886	4,018,321	24	5	160
1887	4,058,150	9	2	139
1888	4,098,374	9	2	132
1889	4,138,996	—	—	71
1890	4,180,021	4	1	2
1891	4,221,452	8	2	1·4
1892	4,263,294	41	10	3
1893	4,306,411	206	48	12
1894	4,349,166	89	22	16
1895	4,392,346	55	13	19

vi. IMBECILITY STATISTICS, 1895.

The Reports of the Medical Superintendents of the asylums for adult imbeciles and of the schools for imbecile children will be found on pp. 175–183 and 210–213.

The numerical results of the year's work at the several imbecile establishments are as under:—

	Asylums.			Schools.			Grand Totals.		
	Males.	Females	Total.	Males.	Females	Total.	Males.	Females	Total.
On January 1st, 1895, the several Asylums and Schools contained	2,272	2,769	5,041	595	368	963	2,867	3,137	6,004
There were admitted during the year from the several Parishes and Unions (including re-admissions)	211	223	434	96	56	152	307	279	586
Transfers	25	45	70	1	1	2	26	46	72
The total number under treatment being	2,508	3,037	5,545	692	425	1,117	3,200	3,462	6,662
Of that number there were discharged	47	39	86	25	8	33	72	47	119
Transferred	1	1	2	25	45	70	26	46	72
And there died	183	233	416	12	12	24	195	245	440
Leaving under treatment on December 31st, 1895 ...	2,277	2,764	5,041	630	360	990	2,907	3,124	6,031

The total number remaining under treatment in the asylums and schools at the end of 1895 showed an increase of 27 as compared with the number at the end of 1894.

Adult Imbeciles.—Statistics—Summary Table I. (*p.* 185) shows the total admissions, re-admissions, discharges, and deaths for the year at the three asylums for adults.

Of the total number of patients discharged, 15 had recovered, 18 had improved, and 53 had not improved. There were also two patients transferred to other asylums of the Board.

The total number of patients who died was 416, as compared with 482 in 1894.

The average number daily resident in the three asylums was 5,031; the highest number resident on any one day was 5,057; and the lowest number was 4,981.

Summary Table II. (*p.* 185) shows the admissions, re-admissions, discharges, transfers, and deaths which have taken place at the three asylums since the opening of the first in September, 1870, up to the end of 1895.

The total admissions during this period of over 25 years were 18,425, of whom 16,724 were admitted for the first time, 136 were re-admissions, and 1,565 were transfers from one asylum to another. This latter number does not balance with the transfers shown amongst the discharges, as it includes a number of patients received from Hampstead Asylum when it was closed in 1876, as well as a number of children over 16 years of age received from the imbecile schools.

Of the discharges, 22 were not certified, 15 were not insane, 783 had recovered, 1,003 had improved, 1,046 had not improved, and 369 were transfers from one asylum to another.

The deaths numbered 10,146.

Summary Table III. (*pp.* 186–7) shows the admissions, discharges, transfers, and deaths, with the mean annual mortality and proportion of recoveries per cent. of the admissions, for the year 1886, and for each subsequent year.

The total percentage of recoveries during the past year was 3·0, and the percentage of deaths on the average number daily resident was 8·3.

Summary Tables IV. (*p.* 188) *and V.* (*p.* 189) give the classification, under the usual denominations of mental disease, of the mental condition of the patients admitted during the year 1895, and also of the patients resident in the several asylums on the last day of that year.

Of the total number of 5,041 then resident, 1,493 are classified as suffering from imbecility, 1,311 from dementia, 457 from dementia and epilepsy, 377 from imbecility and epilepsy, 284 from chronic mania, 298 from idiocy, 217 from senile dementia, and 172 from melancholia.

Summary Table VI. (*pp.* 192–3) shows the history of the annual admissions since the opening of the asylums, with the discharges and deaths, and the numbers of each year's admissions remaining on December 31st, 1895.

Of the 504 patients admitted during the year 1895, five had at the close of the year been discharged as recovered, nine as improved, seven as not improved, two had been transferred to other asylums of the Board, and 28 had died.

Of the 5,041 patients remaining under treatment, 2,138 had been resident in the asylums over ten years.

Summary Table VII. (*pp.* 198–201) shows the causes of death during the year 1895, together with the ages of the decedents, calculated from the ages stated in the orders of admission.

There were 416 deaths during the year, 27 having been caused by senile

decay, 33 by phthisis, 38 by heart diseases, 28 by exhaustion of dementia, and 33 by epilepsy.

Summary Table VIII. (*p.* 203) shows the length of residence of those discharged as recovered and of those who have died during the year 1895.

Of the 416 deaths, no fewer than 81 were of patients who had been resident upwards of 18 years.

Summary Table IX. (*pp.* 202–3) shows the age of patients resident in the several asylums on December 31st, 1886, and on the same day in each subsequent year, calculated from the ages stated on the orders of admission.

Of the 5,041 patients remaining in the several asylums on December 31st, 1895, 1,833 were over 50 years of age, four being over 90 years.

Summary Table X. (*p.* 205) shows the ages of the patients admitted, discharged, and dead during the year 1895, calculated from the ages stated on the orders of admission.

The total discharges numbered 88.

The total deaths numbered 416, of whom 297 were upwards of 40 years of age, and 102 upwards of 70 years.

Summary Table XI. (*pp.* 206–7) shows the departments where patients were employed on December 31st, 1895. Out of a total of 2,277 males, 866, and out of 2,764 females 862, were usefully employed in and about the asylums.

Summary Table XII. (*pp.* 208–9) shows the occupations previous to admission, and condition as to marriage, of the patients admitted during the year 1895.

Of the 236 males admitted, 61 were described as labourers, 10 as painters, 63 had no settled occupation, and of 32 the occupation was unknown; 136 were stated to be single, 39 married, 18 widowers, and as regards 43 the condition as to marriage was unknown.

Of the 268 females, 32 were servants, 14 needlewomen, 27 charwomen, 121 were without settled occupations, and of 39 the occupation was unknown; 127 were stated to be single, 28 to be married, 68 widows, and in 45 cases the condition as to marriage was unknown.

Imbecile Children.—The statistics relating to the children and older patients under treatment at the Darenth Schools and Pavilions will be found attached to the Report of the Medical Superintendent, Dr. Walmesley, pp. 214 to 222.

vii. GENERAL SUMMARY.

In conclusion, the Committee submit the following brief summary of the number who have been under the care of the Managers in their several institutions since the opening of the first hospital in 1870:—

Number of Persons.	Admitted direct from Homes or Parishes and Unions.	Remaining in the various Institutions, Dec. 31st, 1895.
Fever Patients (including 218 cases of relapsing fever treated in 1870) ...	131,477	3,500
Smallpox Patients...	63,172	69
Imbeciles	*19,292	6,031
Boys on Training Ship "Exmouth"	5,857	526
Totals	219,798	10,126

* Re-admissions are not included.

(Signed) W. M. ACWORTH,
Chairman, Statistical Committee.
(1896–7).

Metropolitan Asylums Board,
Chief Offices: Norfolk House, Norfolk Street,
Strand, W.C.

PART II.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF THE SEVERAL INFECTIOUS HOSPITALS FOR THE YEAR 1895.

No. 1.

REPORT OF DR. E. W. GOODALL, MEDICAL SUPERINTENDENT OF THE EASTERN HOSPITAL.

(For Statistics, see pp. 82 to 112.)

THE EASTERN HOSPITAL,
HOMERTON, N.E.,
February 29th, 1896.

To the Committee of Management.

LADIES AND GENTLEMEN,

I beg to present to you my Annual Report and statistical tables for 1895.

During the year 2,920 patients have been under treatment. Of these 1,359 have been discharged recovered, 810 have been transferred to the Northern Hospital, and 374 have died, leaving 377 under treatment. The percentage mortality is 14·47, the same as last year.

The number of scarlet fever cases under treatment has been 1,781. Of these, 716 were discharged, 669 were transferred, 132 died, and 264 remained at the end of the year. The percentage mortality is 8·62. Included amongst the fatal cases are 22 in which death was due to causes in no way connected with the attack of scarlet fever for which the patients were admitted. These cases are as follows:—Measles 9, acute gastro-enteritis (zymotic diarrhœa) 7, tuberculosis 2, scalds 1, gangrene of the lung 1, empyema 1, and epilepsy 1. If allowance is made for these cases, the scarlet fever mortality is 7·08.

There have been 68 cases of post-scarlatinal diphtheria, with 17 deaths. In nine of these death was due, not so much to the attack of diphtheria, as to some complication caused by the antecedent scarlet fever; but even if we include these nine, the mortality, 25 per cent., is low for this form of diphtheria, as will appear from the table given below. I attribute this result partly to the fact that the type of the disease for this particular class of case has been milder than in previous years and partly to the timely use of antitoxic serum in many of the instances. The large majority of the cases were clinically, as well as bacteriologically, diphtheria. There were 44 cases of other forms of secondary sore throat amongst the scarlet fever patients.

The following table shows the facts with respect to post-scarlatinal diphtheria at this hospital for the past five years. The incidence is calculated upon the number of scarlet fever cases under treatment during each year, subtracting those remaining in hospital at its close :—

Year.	Number of Cases of Scarlet Fever.	Number of Cases of Diphtheria.	Deaths from Diphtheria.	Percentage incidence of Diphtheria.	Case Mortality of the Diphtheria Cases.
1891	1,413	28	18	1·9	64·2
1892	2,902	17	9	0·5	52·9
1893	2,018	10	6	0·4	60·0
1894	1,647	14	6	0·8	42·8
1895	1,517	68	17	4·4	25·0

The question of post-scarlatinal diphtheria has been discussed in many of the Annual Reports issued by the Managers. It is one of some importance, because the suggestion has been made that its occurrence is due to the admission into the same hospital of patients suffering from scarlet fever and diphtheria. If this be the true explanation, then it follows that hospitals for the isolation of scarlet fever and of diphtheria should be kept quite separate in every way, both with respect to the disposition of the buildings and to the administration. Let us inquire into the facts of the question.

The following table exhibits the incidence of post-scarlatinal diphtheria in all the hospitals of the Managers, convalescent included, from 1886 to 1894. The incidence is calculated as in the table given above for the Eastern Hospital. The information is derived chiefly from the Managers' Annual Reports, but partly from a paper read by Mr. Sweeting, formerly Medical Superintendent of the Western Hospital, before the Epidemiological Society in February, 1893 :—

Year.	Number of Cases of Scarlet Fever.	Number of Cases of Post-Scarlatinal Diphtheria.	Incidence per cent.	Number of Diphtheria Admissions.
1886	1,559	7	0·4	—
1887	4,342	18	0·4	—
1888	5,717	67	1·1	99
1889	3,739	102	2·7	722
1890	6,439	158	2·4	942
1891	5,442	97	1·7	1,312
1892	11,333	211	1·8	2,009
1893	14,832	207	1·3	2,848
1894	12,636	210	1·6	3,666

It will be observed that diphtheria was first admitted into the hospitals in 1888, and that in that year there was a notable rise in the incidence of post-scarlatinal diphtheria. This fact may be taken to support the suggestion mentioned above, but it bears another explanation.

In the year 1888 diphtheria, as far as can be judged from the number of registered deaths, became much more prevalent in London than it had been before. In his Annual Summary for 1888, the Registrar-General wrote as follows :—"The mortality from this disease has apparently been increasing in London since 1877, having risen from 0·09 per 1,000 in that year to 0·30 in 1888. The rise up to 1887 was gradual, but in 1888 there was a sudden bound, the deaths increasing from 953 to 1,301, and the rate from 0·23 to 0·30, a rise of 30 per cent. in a single year." We have no

record of the number of cases of diphtheria occurring in London in 1888, but from the increase in its mortality, and from the fact that in that year the Managers were induced to set aside beds in certain of their hospitals for the reception of diphtheria patients, it may be safely concluded that there was a marked increase in 1888 in the prevalence of the disease in London, and since that year the prevalence has not only continued, but has increased. For the years 1891, 1892, 1893, and 1894, the attack-rate per 1,000 was 1·5, 2·0, 3·2, and 2·5; that is to say, taking 1893 as an example, out of every 1,000 persons of all ages living in London, three were attacked with diphtheria. The attack-rate was higher in the case of children; the following table shows it, expressed per cent., for those under 10 in 1893:—

AGE.	Males.	Females.
Under 1 year	0·27	0·25
1 to 2 years	0·91	0·70
2 ,, 3 ,, ...	1·01	0·97
3 ,, 4 ,, ...	1·21	1·18
4 ,, 5 ,, ...	1·18	1·22
5 ,, 10 ,, ...	0·70	0·82

For 1893 the attack-rate of post-scarlatinal diphtheria in the Managers' hospitals was 1·3 per cent., not very much higher, that is to say, than the incidence of diphtheria on all the children in London between the ages of one and 10. A very large proportion of the scarlet fever patients admitted to the Managers' hospitals are under 10 years of age; in fact, in 1893 the percentage of such patients was 67.

I mentioned in my Annual Report for 1893 that diphtheria might easily be introduced into a scarlet fever ward, firstly, by means of doubtful cases—cases which, though certified to have scarlet fever, present no sign of that disease beyond a sore throat on their arrival at the hospital; and secondly, by mixed cases—cases in which scarlet fever and diphtheria were co-existent. It is well known that of recent years the proportion of scarlet fever cases admitted to hospital has much increased. The percentage of deaths from scarlet fever in hospitals to the total deaths from the same disease in London rose, but gradually rose, from 7 in 1878 to 22·7 in 1886. But in 1887 the percentage rose very suddenly to 36·6, and the rise, with slight checks in 1891 and 1893, has been advancing since that year, that is to say, during the very years that diphtheria has been so very prevalent in London. The causes of this rise have been, in 1887 probably a certain alteration made by the Local Government Board with respect to the admission of patients to the Managers' hospitals, and in 1890 and 1892 the Notification of Infectious Diseases and the Public Health (London) Acts. These measures have certainly rendered it more easy to effect the removal of a patient to hospital, and I think it may fairly be argued that not only have they succeeded in increasing the proportion of hospital-treated cases, but that they have also helped to introduce in larger numbers than before the doubtful and mixed cases to which I alluded above. Thus, with the increase of diphtheria in London, conditions have arisen with respect to the scarlet fever patients that have been favourable to the introduction of diphtheria amongst them; and when we consider that a large proportion of these patients are children under 10 years of age, that they are suffering from an affection of the throat, and that they are aggregated in large numbers, the wonder is, not that

diphtheria has made its appearance, but that it has not prevailed to a very much larger extent.

Further argument against the idea that diphtheria is introduced from the diphtheria to the scarlet fever wards is to be found in a consideration of the case of the North-Eastern Hospital. There are no diphtheria wards at that institution, yet post-scarlatinal diphtheria made its appearance there within a year of its opening in October 1892. For 1893 the incidence of secondary diphtheria amongst the scarlet fever convalescents was 0·4 per cent.; for 1894, 0·8; and for 1895, 1·6 (for the last figures I am indebted to my friend, Dr. Birdwood). In other words, during last year (1895) the incidence was as high at this particular hospital as for all the hospitals in 1894, and higher than for some years at the Eastern Hospital, into which diphtheria patients are admitted.

I think, therefore, it may justly be said that the question of the occurrence of diphtheria amongst the scarlet fever patients is part of the much wider question of the prevalence of diphtheria in London, though doubtless the variation of its incidence at the different hospitals from time to time is due to a variation in local conditions.

The number of cases of diphtheria under treatment was 722; of these 338 were discharged, 140 were transferred, 168 died, and 76 remained at the end of the year. The mortality per cent. is 25·94; for 1894 it was 30·29. It is worthy of remark that diphtheria is the only disease which shows any improvement upon the 1894 mortality; the scarlet fever mortality is slightly, while the enteric fever mortality is very much higher.

Of the antitoxin treatment of this disease I will say but little, for a special report upon the subject is very shortly to be presented to the Managers by those of the Medical Superintendents who have had experience of it. After having carried out the treatment in a considerable number of cases, after having compared clinically as well as statistically the cases so treated with those treated on the usual principles, and after having weighed the subject carefully, I am strengthened in the opinion I expressed last year, that the method is of decided value. Accordingly, it is established amongst the therapeutic measures employed in the hospital. But though I have not entered into details, I may, perhaps, be permitted to mention one result which I believe to be due to the antitoxin treatment, especially as the facts I am about to give will not appear, at any rate in the same form, in the special report on the subject. I refer to the improvement in the recovery-rate of the tracheotomies. Of primary diphtheria cases 50 per cent. have recovered during the past year. For 1891, 1892, 1893, and 1894, the recovery-rates in such cases were 26·4, 27·3, 14·9, and 28·3 per cent. Further, during the four years 1892 to 1895 there have been 253 cases of tracheotomy in primary diphtheria, and of these 75 have recovered, a recovery-rate of 29·6 per cent. Of these primary cases 209 were not treated with antitoxin; 53 recovered, a rate of 25·3 per cent.; 44 were treated with antitoxin, and 22 recovered, a rate of 50 per cent. Of cases of diphtheria combined with or secondary to some other disease (measles, scarlet fever, &c.), there have been during the same period 46 cases tracheotomised, with 10 recoveries, a rate of 21·7 per cent. Of these 46 cases 35 were not treated with antitoxin, with six recoveries, a rate of 17·6 per cent.; while 11 were treated, with four recoveries, a rate of 36·3 per cent.

Of enteric fever 117 cases have been under treatment; of these 72 were discharged, 28 died, and 17 remained at the end of the year. The mortality per cent. is very high, 28·42. The cases have been of a severe type, and in most of the fatal cases death has ensued from the severity of the attack and not from any complication.

Three cases of typhus fever were admitted, and were discharged recovered.

The combined mortality of the scarlet fever, diphtheria, enteric, and typhus fever cases is 14·24, nearly the same as last year.

Of the 2,624 cases admitted, 288, or 10·9 per cent., were found to be suffering from diseases other than those which they were certified to have. The percentage of error was, in the case of scarlet fever, 5·4, of diphtheria 17·2, and of enteric fever 37·7. This latter figure is very high, even when all allowance is made for difficulties in diagnosis and the necessity for early removal, points to which I alluded in my last annual report. I have not included amongst the 288 cases those in which the patient, certified to have one of the diseases admissible to the Managers' hospitals, is found on arrival at or after sojourn in the hospital to have another such disease, *e.g.*, cases of diphtheria which are really scarlet fever. Moreover, included amongst the scarlet fever, diphtheria, and enteric fever cases tabulated in the statistical tables are not a few doubtful ones; consequently, the number, 288 (10·9 per cent.), is not exaggerated.

Attempts have been made to compare the fatality of cases treated inside the Managers' hospitals with that of those treated without. A consideration, however, of the figures given above shows that, at any rate as regards diphtheria and enteric fever, the two groups of cases are not strictly comparable. There must, too, be considerable doubt concerning the value of any statement made with respect to the prevalence of enteric fever in the East End that is based upon the notification returns.

I append a return showing the illness amongst members of the staff. Every case is included in which absence from duty for upwards of two days has been necessitated. I regret to say that two deaths occurred: Assistant-Nurse R. Hawkins died of bronchitis complicating a severe attack of enteric fever; and Assistant-Nurse Tomlinson of acute gastro-enteritis. Diarrhœa of a fatal form was very prevalent in London at the time of her death, and there were several cases in the hospital, especially amongst the scarlet fever patients. Nurse Tomlinson was engaged in nursing a case of this kind when she fell ill, and I think it very probable that she caught the infection from the patient.

During the year the buildings I mentioned in my last Annual Report have been completed and are now in use. They are three in number; one contains two scarlet fever wards of 20 beds each, the second consists of bedrooms, a mess-room, and a sitting-room for nurses, and the third is a dormitory for ward-servants.

I am indebted to my colleagues, Dr. Richards, Dr. Potts, and Mr. Armit for assistance in the preparation of the statistical tables.

I have the honour to remain,

Ladies and Gentlemen,

Your obedient Servant,

(Signed) E. W. GOODALL,

Medical Superintendent.

No. 2.

REPORT OF DR. R. A. BIRDWOOD, MEDICAL SUPERINTENDENT OF THE NORTH-EASTERN HOSPITAL.

(For Statistics, see pp. 82 to 112.)

NORTH-EASTERN FEVER HOSPITAL,
ST. ANN'S ROAD, SOUTH TOTTENHAM,
21*st January*, 1896.

To the Committee of Management.

The daily number of patients in hospital at midnight varied during 1895 from 157 on the 2nd May to 492 on the 9th October and on the 20th November.

The most admitted on one day was 49 on the 8th July.

I am indebted to Dr. Turner for the preparation of the statistical tables for the year 1895 and also for Appendix D.

237 remained in hospital at the beginning of the year.

2,554 were admitted.

1,831 were discharged.

481 were transferred.

115 died.

364 remained at the end of the year.

The hospital mortality was 4·61 in 100.

There has been much illness amongst the staff compared with 1894. If we exclude those ill less than three days, the average daily number absent from duty owing to ill health was, in 1894, 4·5; in 1895, 7·38.

The average duration of each illness was 16·5 days.

Improved accommodation is required for the whole of the staff. The temporary dormitories provided are not suitable for continuous occupation. The other factors are the increased physical and mental strain during the time the wards were overcrowded, and, as usually happens, so many of those laid up were newcomers.

Mr. Beggs has prepared the return of post-scarlatinal diphtheria (Appendix A). The most striking fact about it is that only three out of the 37 patients came from wards on the north half of the hospital. I have also desired him to draw up a summary of the results of the bacteriological examinations (Appendix B). Both reports deserve careful consideration. If a bacteriological definition of diphtheria is adopted, then we have (see Appendix B) a high incidence of post-scarlatinal diphtheria (51 patients during a part of the year) with a low rate of mortality (10 deaths). If, on the other hand (see Appendix A), we retain the clinical definition, then the incidence is lower (37 patients during the whole year), but the rate of mortality is higher (20 deaths and 10 patients remaining in hospital at the end of

the year). It was unexpected that so many scarlet fever convalescents, apparently well, should have diphtheria bacilli found in their throats. The most important experience, however, was that patients having diphtheria bacilli without other evidence of diphtheria ran great risk if allowed to associate with those suffering from clinical diphtheria.

Last year your attention was directed to outbreaks of scarlet fever at home after the discharge of patients from hospital. I requested Mr. Ford to report on similar instances during the first half of this year. I submit his instructive and interesting review (Appendix C). It is desirable that these outbreaks should be prevented. I trust that the action of the Board in instituting an investigation may be the means of directing such attention to the matter as to result in the prevention of much disease.

In again pointing out the need for more isolation accommodation within the hospital for diseases other than scarlet fever, I would refer you to the following figures:—

24	patients	were	infected	with	Scarlet Fever	in hospital; of these	5 died.
33	,,	,,		Measles	,,	,,	9 ,,
25	,,	,,		Chickenpox	,,	,,	1 ,,
12	,,	,,		Whooping Cough	,,	,,	1 ,,

I have the honour to be,

Your obedient Servant,

R. A. BIRDWOOD,
Medical Superintendent.

APPENDIX A. By Mr. J. E. Beggs, M.B.

Post-Scarlatinal Diphtheria, 1895.

Initials.	Sex.	Age.	Ward.	Date of Admission.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Result.
E. B.	F.	3	3	December 24/94	December 23/94	January 15	Died January 20
M. W.	F.	2	3	,, 19/94	,, 16/94	,, 21	,, ,, 30
E. C.	F.	1 6/12	9	February 5	February 3	March 17	,, March 20
A. G.	F.	3	11	,, 21	,, 20	,, 15	,, ,, 22
L. G.	F.	2	3	January 5	January 3	January 23	Discharged Mar. 25
A. H.	F.	3	2	February 6	February 5	March 24	Died March 27
E. G.	F.	2	11	,, 20	,, 18	,, 17	,, April 2
F. B.	F.	2	2	,, 26	,, 20	,, 10	,, ,, 11
B. G.	M.	10	19	,, 11	,, 11	February 21	Discharged April 30
H. H.	M.	5	3	March 19	March 15	May 20	Died May 24
W. B.	M.	2	3	July 12	July 11	July 30	,, August 8
E. S.	F.	6	5	August 5	,, 23	August 18	,, ,, 23
A. H.	F.	3	3	June 27	June 24	July 25	Discharged Aug. 29
H. N.	M.	1 6/12	3	,, 24	,, 23	August 29	Died September 7
L. S.	F.	3	5	August 3	July 29	September 5	,, ,, 8
D. B.	F.	3½	2	July 22	,, 19	August 19	Discharged Sept. 16
L. D.	F.	3	3	June 26	June 16	July 23	,, ,, 16
F. G.	F.	6	3	August 8	August 4	September 17	Died September 21
A. H. L.	M.	2/12	2	,, 23	,, 22	,, 21	,, ,, 24
E. S.	M.	2	2	September 4	September 2	,, 23	,, ,, 28
L. S.	M.	1	2	August 19	August 13	,, 18	,, October 1
L. C.	F.	3	2	,, 29	,, 28	October 6	,, ,, 12
W. L.	F.	4	5	September 19	September 15	,, 10	,, ,, 15
A. M.	F.	1	1	November 4	October 27	November 16	,, December 2
M. A. D.	F.	5	5	September 23	September 20	,, 1	Discharged Dec. 9
L. H.	F.	2	11	October 5	,, 30	December 6	Died December 13
F. B.	F.	4	5	,, 14	October 10	November 17	Discharged Dec 24
S. B.	M.	2	13	November 29	November 18	December 29	Still in Hospital.
A. P.	F.	8	5	September 5	September 5	November 3	,, ,,
N. K.	F.	6	5	October 26	October 19	,, 15	,, ,,
T. T.	M.	7	21	November 6	,, 31	December 2	,, ,,
T. L.	M.	5	21	,, 13	November 8	,, 22	,, ,,
R. H.	F.	3	11	,, 15	,, 3	,, 22	,, ,,
H. F.	M.	2	11	December 9	December 3	,, 23	,, ,,
W. C.	M.	4	11	September 19	September 13	,, 24	,, ,,
F. G.	F.	3	11	October 7	October 4	,, 27	,, ,,
D. P.	M.	1	12	,, 17	,, 14	,, 27	,, ,,

APPENDIX B. By Mr. J. E. Beggs, M.B.

SUMMARY OF THE RESULT OF THE BACTERIOLOGICAL EXAMINATIONS.

In the following report I have collected particulars of 156 patients, specimens from whose throats were examined for diphtheria bacilli at the laboratories of the Royal College of Physicians and Surgeons, under the direction of Dr. Sims Woodhead.

Two patients, from whom specimens were taken, have not been included: one of these had a cultivation taken from the eyelids, with a negative result. Two specimens were sent from the fauces of the other, with no definite result. The first specimens were obtained on the 15th January, 1895, and since they have been taken during the year.

140 of these cases were scarlet fever patients, and the remainder had other diseases; two of the latter contracted scarlet fever during their stay in the hospital.

Two wards (3 and 12) were set apart for the reception of patients, in specimens from whom diphtheria bacilli had been found, and they were transferred to these wards as soon as the result of the examination was known.

In those cases where diphtheria bacilli were found the examination was repeated on one or more occasions during the patient's stay in hospital.

The total number of cases examined is shown in Table I., which gives the number

and percentage of cases in which diphtheria bacilli were found, with the number of deaths that occurred among them.

These particulars are given for the total number of cases examined, and also separately for those cases which had scarlet fever when admitted to the hospital.

TABLE I.

Scarlet Fever and other Diseases.

Total number of specimens taken	231	
Total number of patients examined	156	Of these 21 died.
Number of cases in which diphtheria bacilli were found...	58	„ 12 „
Percentage „ „ „ ...	37·17	

Other Diseases.

Number of cases examined	16	Of these 3 died.
Number of cases in which diphtheria bacilli were found...	7	„ 2 „

Scarlet Fever.

Number of cases examined	140	Of these 18 died.
Number of cases in which diphtheria bacilli were found...	51	„ 10 „
Percentage „ „ „	36·42	

In Table II., the cases which had clinically recognisable diphtheria have been separated from those which had no definite clinical evidence of diphtheria, and the mortality for these different groups is shown.

TABLE II.

Scarlet Fever Cases.

Number of cases examined, 140.	Cases in which diphtheria bacilli were found, 51.	Cases which had clinical diphtheria	14—of these ten died; mortality, 71·42 per cent.	Combined mortality, 21·56 per cent.
		Cases with no definite clinical evidence of diphtheria	37—of these one died; mortality, 2·70 per cent.	
	Cases in which no diphtheria bacilli were found, 89.	Cases which had clinical diphtheria	2—of these one died; mortality, 50 per cent.	Combined mortality, 7·86 per cent.
		Cases with no definite clinical evidence of diphtheria	87—of these six died; mortality, 6·89 per cent.	

The total number of cases which had clinical evidence of diphtheria was 16, and in 14 of these diphtheria bacilli were found. They can be divided into six groups :—

Group 1 (6 *Patients*).—Three patients—5837, 5872, and 6050—all developed diphtheria in the same ward and within a few days of each other, rendering it probable that they arose from one common cause.

Three cases—6089, 6106, 6146—were transferred to ward 12, which had been set apart for those cases in which diphtheria bacilli had been found. None of the three had any clinical evidence of diphtheria when moved to this ward. They there came in contact with 6050, who had had an attack of clinical diphtheria and whose throat was free from membrane on February 9th. One of these cases—6106—was moved to ward 12 on the

27th February, and remained well until March 17th, when she had an attack of laryngeal diphtheria.

6089 was moved to ward 12 on the 9th March, and remained there until March 24th, when she contracted measles, and was transferred to an isolation ward. She developed laryngeal diphtheria on the following day.

6146 was transferred to ward 12 on March 10th, and progressed favourably until April 4th, when there was an ulcer on one tonsil, which was covered with diphtheritic membrane on the following day.

Group 2 (1 *Patient*).—5908 had diphtheria as well as scarlet fever on admission. The drainage of the house from which she had been removed was said to be very defective.

Group 3 (2 *Patients*).—6189 probably had diphtheria as well as scarlet fever when admitted on February 13th. 6256 was in the next bed to this patient, and he had some diphtheritic membrane on his fauces on February 21st.

Group 4 (1 *Patient*).—6342 was transferred to ward 3 on March 23rd, and continued well until May 20th. His throat then became sore, and there was membrane on the fauces. He died on May 24th.

Group 5 (3 *Patients*).—6693, 6966, 7185 all developed diphtheria in the same ward within a few days of each other, the source of the infection being unknown. In specimens from two of them diphtheria bacilli were present; the third was examined on only one occasion, and none were found.

Group 6 (3 *Patients*).—The source of infection in 6039, 6047, and 7249 is unknown. Each of them was an isolated case, and they occurred in different wards. 7249 contracted diphtheria on September 17th; no diphtheria bacilli were found in a specimen taken from the throat on September 19th, and she died on September 21st.

I have considered together the cases which are included in Group 1, for if the same sequence of events had been observed in these cases, and no examination of their throats made, they would probably have been thought to have contracted the disease from each other.

The mortality among the cases who had clinical diphtheria appears to be very high until the cause of death in the several cases is considered.

Six patients had laryngeal diphtheria, and one of them had measles in addition; one had nephritis, with suppression of urine; one had measles and broncho-pneumonia; one had general tuberculosis; and two had faucial diphtheria. The other cases in which diphtheria bacilli were found amount to 37. None of these had definite clinical evidence of diphtheria during their stay in hospital.

The shortest time which any of these patients was kept under observation in hospital after diphtheria bacilli had been found was 17 days. This patient was heard of five weeks after leaving the hospital. She had had an attack of measles, but no throat illness of any kind, and was then quite well.

There was some difference of opinion about the diagnosis in one of the cases in Table II. This patient had specimens from his throat examined on two occasions, and no diphtheria bacilli were found. He had an attack of laryngitis during life, and some membrane of doubtful nature was found at the autopsy in the larynx and trachea. He has, in the table, been included with the other cases of scarlet fever which had no clinical signs of diphtheria.

The cases included as other diseases in Table I. in which diphtheria bacilli were found were seven. Four of these had clinical diphtheria, and one died. Of the remaining three one was in the hospital 41 days, and during this period had, with the exception of the presence of diphtheria bacilli in her throat, apparently nothing the matter with her. Another was in the hospital 27 days, and had, besides the diphtheria bacilli, slight swelling of the face, due to some carious teeth, during his stay. He was re-admitted nine days

after discharge with scarlet fever. The third was admitted on February 22nd certified to be suffering from scarlet fever, but subsequently diagnosed in hospital to have only cellulitis of the thigh, following a wound upon the heel. Diphtheria bacilli were found in specimens from her throat on February 25th, and again on March 1st. She died on April 4th.

The specimens for examination were taken from the fauces at varying intervals after the patient's admission to hospital. Of the whole number, 69 were taken within the first week after admission, four being taken on the first day. Twenty of these patients had diphtheria bacilli in their throats, or 28·98 per cent., as compared with 37·17 per cent. on the total number of cases examined.

No fair conclusion can, however, be drawn as to whether the bacilli were present on admission, or were acquired during the patient's stay in hospital, for many of the cases in which they were not found were not examined until they had been some weeks in hospital, and there was time for them to have disappeared, even if they had been present on admission, before the examination was made.

No particular connection between their presence and any of the complications of scarlet fever can be deduced, for in some the complication had been present for a long time when the throat was examined, and in others, where negative results were obtained, the complication did not develop until after the examination had been made, and the patients were not subsequently re-examined.

One case of diphtheritic paralysis occurred in a patient who was admitted with diphtheria.

Conclusions.

1. That diphtheria bacilli are very widely spread, being present in 36·42 per cent. of the cases of scarlet fever that were examined.

2. That in a large number of cases they give rise to no illness whatever, and disappear after a varying interval of time.

3. That in a little over a quarter of the cases clinical evidence of diphtheria was present at the time or subsequently developed; but it was possible for some of them to have been infected from other patients who were suffering from clinical diphtheria.

APPENDIX C. By Mr. F. C. Ford, M.B.

A REPORT ON THE RETURN AND ADDITIONAL CASES OF SCARLET FEVER ADMITTED TO THE NORTH-EASTERN HOSPITAL FROM JANUARY 1st TO JUNE 30th, 1895.

An endeavour has been made in drawing up this report to ascertain such facts as might throw some light on the causation of the large proportion of return cases of scarlet fever which were received into this hospital during the earlier six months of the past year. Although the main work of investigation must lie with the various sanitary authorities from whose districts the patients came, yet it is felt to be possible to furnish from our records certain facts, without which the work of the sanitary authorities would be incomplete.

By "return" cases is meant those which are due to the outbreak of scarlet fever in households after the return home of recovered patients from the Board's fever hospitals; and to the latter cases it is convenient to give the name "original."

The total number of patients admitted from January to June was 813; 53, or 6·5 per cent., being recorded as return cases. Of these, four were associated with original cases discharged from other of the Board's hospitals, the remaining 49 corresponding with 51 original cases discharged from this hospital. Of course, return and original cases do not correspond case for case, as in many instances it is found that one original is associated with

more than one return case, and *vice versa*. This gives rise to difficulties; for instance, when two or more original cases are discharged at intervals of a few days or weeks, it is impossible to know with which patient to associate the subsequent return case: or again, when two return cases correspond with a certain original case, it is difficult to say whether the second return case should be regarded as a true return case, or whether it should not rather come under another category: thus—

A—discharged January 20th;
B—taken ill January 26th;
C—taken ill January 30th;

the question being, is C to be regarded as a true return case, or was he infected from B?

In this connection it may be stated that there is a large number of patients admitted to this hospital before the discharge of patients previously received from the same household. These may be called "additional" cases, and it is to these that C in the above example might belong. They numbered 73 of the total admissions from January to June, 1895; and it is found that in a considerable proportion (18 out of the 73) a longer interval than three weeks elapsed between the individual outbreaks, pointing either to some fresh source of infection in the second and subsequent cases, or to inefficient disinfection after the removal of the first patient, or to some established sanitary defect in the home; and attention is here drawn to such additional cases in order that they may be noted in connection with what is shown in the following table, namely, that in 20·7 per cent. of the return cases under consideration an interval of over three weeks occurred between the return home of the original and the onset of illness in the subsequent cases, so long an interval suggesting that these are perhaps more of the nature of additional than of true return cases, and due to some sanitary defect at home rather than to infection from a recently-discharged patient.

TABLE I.—*Showing time elapsing between the arrival home of original and onset of initial symptoms in the return cases.*

Interval.	Number of Cases.
On the 2nd day	2
From 3rd to 7th day	15
,, 8th to 14th ,, ...	19
,, 15th to 21st ,, ...	6
Over 21 days	11

In dealing with the 53 return cases, I have taken them as being all true return cases, and I have made investigations upon them and upon the 51 original cases under the following headings:—

A—The parishes from which the return cases came.
B—The condition on discharge of the original cases.
C—Certain complications from which the original cases suffered.
D—Length of stay in hospital of original cases.

A—*Parishes from which Cases came.*

In the following table are shown the number of patients admitted from the several parishes, together with the percentage of return cases from each parish. It will be noticed that there are wide divergencies from the percentage on the total number of patients admitted during the half-year.

TABLE II.—*Showing the percentage of return cases upon the total admissions from the several parishes.*

Parish.	Number of Admissions.	Number of Return Cases.	Percentage.
Islington	366	35	9·5
Holborn	135	5	3·7
Shoreditch	117	9	7·6
Hackney	86	2	2·3
Tottenham	30	1	3·3
All others	79	—	—
Doubtful	—	1	—
Total	813	53	6·5

With one exception all the original cases were discharged to the parishes from which their associated return cases were brought. The one exception, included as a doubtful case in the above table, was a patient admitted from Islington, but whose associated original case was discharged to Nunhead from another hospital.

B—*Condition on Discharge of Original Cases.*

It is the rule at this hospital for each Medical Officer to examine his patients on the morning of their discharge, special attention being paid to the existence of any of the following lesions:—

1. Desquamation, including pin-hole peeling, scurfy head, roughness of skin due to recent eczematous conditions or exposure to cold winds or hot sun, &c.
2. Serous or purulent discharge from any mucous membrane or sore place.
3. Glandular enlargement, including enlargement of the tonsils.
4. Albuminuria.

I find that of the 51 original cases under consideration a note on discharge was made in 45. The following table shows in what percentage the above lesions existed in these cases:—

TABLE III.—*Showing percentage of various lesions existing on discharge in 45 original cases.*

Lesion.	Percentage.
None	33
Desquamation	33
*Serous or purulent discharge	22
Glandular enlargement	33
Albuminuria	4

* Otorrhœa principally.

If a similar table could be drawn up respecting other patients discharged who we know for certain did not furnish any return cases much might be gained by comparing the two results. As it is, we do not know concerning other patients whether they may not have been associated with return cases nursed at home or admitted to some other hospital. A comparison of Tables III. and IV. is of some interest, however, showing as it does a close correspondence in the results in all but one particular, namely, in regard to serous or purulent discharge, the difference in this respect between the two groups of cases being very marked.

TABLE IV.—*Showing percentage of various lesions existing on discharge in over 200 consecutive cases, not associated with return cases to this hospital.*

Lesion.	Percentage.
None	33
Desquamation	41
Serous or purulent discharge	8
Glandular enlargement	35
Albuminuria	3

C—*Complications in Original Cases.*

Apart from the lesions which are recorded in section B as existing in a certain proportion of the patients, there were in some cases also a number of lesions giving rise to "complications" during the patients' stay in hospital, but which had been recovered from at the time of discharge.

Thus of the 51 original cases—

17·6 per cent. suffered and recovered from albuminuria.

11·7 per cent. suffered and recovered from purulent discharge from the ears or nose.

The recovery, however, from either of these complications may have been merely temporary, and a recurrence after some days or weeks of such a lesion, for example, as otorrhœa in an original case, may have given it a renewed infectiveness. The long interval (sometimes many weeks, *vide* Table I.) often elapsing between the return home of an original case and the subsequent outbreak of scarlet fever may in this way be accounted for.

D—*Length of Stay in Hospital of Original Cases.*

On comparing the average length of stay in hospital of the 51 original cases with that of the 656 patients discharged from January 1st to June 30th, it is found that they closely approximate, the average being just over eight weeks for the original cases and a little under nine weeks for the total number discharged; the difference amounting to only a few days.

As regards the original cases, the length of stay in hospital corresponds very nearly to the duration of illness, only five having been ill for more than six days before admission.

In the above estimation patients discharged under six weeks or over twelve weeks have been left out of account.

Of the 51 original cases, three were discharged under six weeks and three remained in hospital for longer than twelve weeks.

It may be mentioned that the age-periods for the return and original cases under consideration in this report correspond closely with the age-periods for the total number of patients admitted to this hospital in the year 1894.

APPENDIX D. By Dr. F. M. Turner.

ADDENDUM TO STATISTICAL TABLES, 1895.

Measles.—Eight cases were sent back home from the admission room.

Twenty-nine cases were admitted; of these six had scarlet fever (cp. Table VI.), and 23 had not (cp. Table XIV.). Of the latter four died; the former all recovered.

The following table distinguishes those cases that came in during the incubation period from the others, and also shows how many cases were taken into the general wards :—

29	Symptoms of measles on admission ...	23	Admitted to isolation wards ...	19
			Admitted to general wards ...	4
	Symptoms of measles after admission...	6	Admitted to isolation wards ...	1
			Admitted to general wards ...	5

Thirty-three cases were infected in hospital; of these 32 had scarlet fever (cp. Table VI.), and one had not. Of the former nine died; the latter recovered.

Four measles cases were complicated by the co-existence of other infectious diseases (not including scarlet fever). Of these two had diphtheria, one whooping cough, and one chickenpox.

Three cases caught both scarlet fever and measles within the hospital.

Cases remaining in hospital at the end of the year are not included in the above figures.

Chickenpox.—Twelve cases were admitted. All had scarlet fever. All recovered.

Two had symptoms of the disease on admission, and were taken into isolation wards; 10 developed symptoms after admission, all of whom were admitted into general wards.

Twenty-five cases were infected in hospital. All of these had scarlet fever. One died.

Six cases were complicated by the co-existence of other infectious diseases (not including scarlet fever). Of these one had measles, three whooping cough, one German measles, and one both whooping cough and German measles.

One case caught both scarlet fever and chickenpox in the hospital.

German measles.—Three cases were sent back home from the admission room.

Five cases were admitted, four of whom had scarlet fever, the other had not. All recovered. No cases were isolated.

Eighteen cases were infected in hospital. Five cases were complicated by the co-existence of other infectious diseases (not including scarlet fever). Of these one had diphtheria, two whooping cough, one chickenpox, and one both whooping cough and chickenpox.

Whooping Cough.—Twelve cases were admitted, of whom one only had not scarlet fever. One died.

Twelve cases were infected in hospital. All had scarlet fever. One died.

Both the fatal cases were complicated by diphtheria. Besides these, seven cases were complicated by the co-existence of other infectious diseases (not including scarlet fever). Of these three had chickenpox, two German measles, one both chickenpox and German measles, and one measles.

No. 3.

REPORT OF Dr. WILLIAM GAYTON, MEDICAL SUPERINTENDENT OF THE NORTH-WESTERN HOSPITAL.

(For Statistics, see pp. 82 to 112.)

North-Western Hospital,
Haverstock Hill, N.W.,
January 9th, 1896.

To the Committee of Management.

Madam and Gentlemen,

In accordance with the custom of the Board, I have again the honour of presenting my report for the past year.

In scanning the events that have occurred during the 12 months just ended, one cannot but be struck at the outset by the diminished number of patients that have come under treatment as compared with the numbers in 1893 and 1894. Whereas in those two periods 3,557 and 3,158 patients respectively were admitted, in the past year only 2,352 were received. This difference is, however, to be explained by curtailment of the hospital accommodation on account of the erection of new buildings, and also by the protracted residence of diphtheria patients. It is, unhappily, in no sense due to any falling-off in the applicants for remedial attention.

The total number of admissions for the year 1895 amounts to 2,352, of whom 1,356 were suffering from scarlet fever, 728 from diphtheria (clinically so considered), 122 from enteric fever, and 146 from other diseases. In the course of the same time 71 died from scarlet fever, 179 from diphtheria, 15 from enteric fever, and 23 from other diseases; 449 were transferred to the Northern Hospital, and 1,593 discharged; leaving 298 under treatment on the night of the last day in the old year.

Excluding diphtheria, concerning which more is detailed elsewhere, the death rates were as under:—

Scarlet Fever...	...	...	...	5·29 per cent.
Enteric Fever	...	...	...	12·24 ,,
Other Diseases	...	...	...	15·43 ,,

Post-scarlatinal diphtheria cases have been observed in several wards, occurring at long and short intervals and without any definite cause of origin. Tabulated, they were as under:—

Cases of Diphtheria occurring in 1895 amongst Patients convalescent from Scarlet Fever.

No.	Date of attack.	Initials.	Age.	Time after Admission.	Nature.	Result.	Ward.
1	March 23	B. S.	5	26 days ...	Faucial	Recovered ...	C
2	,, 23	A. C.	3	23 ,, ...	,, ...	,, ...	E
3	,, 28	F. C.	4	20 ,, ...	Nasal	,, ...	C
4	April 6	W. E. B.	4	11 ,, ...	Faucial	Died	E
5	July 4	M. H.	10	34 ,, ...	,, ...	Recovered ...	B
6	August 24	R. A.	1½	57 ,, ...	,, ...	,, ...	F
7	,, 24	R. C.	7	14 ,, ...	Faucial and Nasal ...	,, ...	F
8	September 6	W. S.	4	20 ,, ...	Faucial	,, ...	D
9	,, 12	G. C.	10	23 ,, ...	,, ...	Died	D
10	,, 12	F. C.	4	21 ,, ...	,, ...	,, ...	B
11	October 31	M. A.	11	14 ,, ...	Faucial and Laryngeal	,, ...	F
12	November 6	W. C.	7	19 ,, ...	Faucial	Recovered ...	F
13	,, 6	S. O.	8	23 ,, ...	,, ...	Remains under treatment	E
14	,, 16	A. S.	8	46 ,, ...	,, ...	Recovered ...	E
15	,, 20	A. T.	14	11 ,, ...	,, ...	,, ...	C
16	,, 22	T. M.	5	13 ,, ...	,, ...	Died	K
17	,, 23	L. C.	2	47 ,, ...	Laryngeal	Remains under treatment	E
18	December 3	G. F.	1 5/12	13 ,, ...	Faucial and Nasal ...	Died	F

Recovered	10
Died	6
Remaining under treatment ...	2
Total	18

Scarlet fever has unquestionably been very prevalent during the past year, and thus fully justified the conclusion arrived at, viz., that a much-increased accommodation is needed to meet the requirements of the Metropolis, which is extending so rapidly in all directions. The incidence of this disease is always a source of considerable anxiety; yet, when the records of past times are studied, and the alarming total death rate of certain periods is noted, the results attained since the creation of the Metropolitan Asylums Board in 1867 are found to be very interesting and encouraging. The statistics show that during the 12 years commencing in 1859 (when diphtheria and scarlet fever ceased to be classified under one heading) and ending in 1870, a total of 39,889 deaths occurred, with a population of 3,221,394; in the next 12 years the returns were 25,367, the population having increased to 3,852,956; while from 1883 to 1894 the mortality was 13,465, with a population increased to 4,349,166. This diminished mortality implies an immense saving of life, and when we consider that each fatal illness may be held to correspond to some 16 attacks or thereabouts not terminating fatally, it must be clear that a great economy of the wealth of the community has been effected by the causes that have brought about this happy result. Since it was decreed that persons attacked by certain infectious diseases should be duly reported by medical officers in every case; that when such an outbreak occurs in well-to-do abodes all precautions shall be guaranteed on the responsibility of the attending medical man; that when, say, the father of a family residing in some humble tenement, or, perchance, lodging, is afflicted, hospital refuge can as a rule be immediately

provided, and means so taken that the epidemic shall then die of inanition;—since these steps were taken, I say, there has been the remarkable improvement shown in the official returns. Scarlet fever is certainly easier to confine than to cure, but we must not be so utopian as to imagine that the days of national epidemics are over. On the contrary, there has been a constant succession of greater and lesser ones since the beginning of history, and the immunity of any generation from a greater disorder may be merely an interruption of the course, liable to terminate any year by a fresh outbreak of some old or perhaps a greater new plague.

Enteric Fever.—The sparse accommodation for enteric fever in this hospital will, I venture to think, at an early date be remedied. The 24 beds at disposal have, almost without intermission, been occupied during the past 12 months, with the result already given. It is, no doubt, of the greatest advantage to remove all cases of this disease, lacking proper accommodation and nursing, and only imperfectly isolated. The excretions in this form of fever contain the agent of infection perhaps in the most concentrated degree, and if by carelessness any particle of filth gets mixed with water, or milk, or food, and thereby finds its way into the system, the disease is again produced, and perhaps in a more virulent form. As, therefore, the true cause of enteric is undoubtedly pythogenic, transmissible by food and by drink, but chiefly the latter, it is so far capable of removal and can be guarded against. That nurses and others may spend years in attendance on this class of fever with perfect immunity is proved in my own experience, only one nurse and one assistant having come under observation who contracted the disease.

Sixty-six yards from the present entrance gates stands the new administrative block, and beyond, the recent double-storied pavilions, each to accommodate 21 patients. This administrative building has ample and roomy provision, when calculated upon the requirements of former years. The main door gives access to a spacious vestibule, on the right side of which is the board room, and on the left the Medical Superintendent's office. Entering the main corridor, to the right are found the Assistant Medical Officers' dining, sitting, and bed rooms and other accommodation, while to the left are the Chaplain's room, the Matron's sitting and bed rooms and office, and further on, the Night Superintendent's room and dispensary. Passing at right angles from the former apartments, the sitting rooms of the nurses and assistant nurses and dining hall are placed, also the domestic staff and other day rooms; and reaching still further eastward, the work room and general domestic mess and sitting rooms are located. In the centre of the whole block is the kitchen of the hospital, which has been fully equipped with all the latest appliances.

The upper part of the block is devoted entirely to bedroom accommodation, and in the basement an elaborate heating apparatus is placed, consisting of two low-pressure Cornish boilers, each 8 feet long by 3 feet 6 inches in diameter. The building is amply provided with store rooms, the steward's, engineer's, clerk's, and porter's apartments being found in the west wing. The whole building is provided throughout with telephonic communication, lighted by electricity, and furnished in a way leaving nothing to be desired. These provisions for comfort and relaxation warrant the anticipation that for the future a class of nurses will be always obtainable equal to any now in the general hospitals. That they will continue in the service for any long period is scarcely to be expected, as, from my experience, I have found the fully-trained nurse looks upon a few months' residence in a fever hospital

as the completion, as it were, of her education. In every respect the new buildings strongly contrast with the patchwork institution that did duty for so many years, and which, but for the stimulus to action afforded by some members of the Committee of Management, would apparently have continued for an indefinite time.

The benefit and great advantage to be derived from a residence in a convalescent home by those recovering from an attack of scarlet fever have been demonstrated in numerous instances within the last eight years; and the creation of such an institution must have been often recognised as a great boon by those treating patients in the over-crowded districts in which some of the hospitals under the Board now find themselves situated. There is, however, another class that claims more attention and consideration, after passing a keen stage of illness, than perhaps any other. I refer to the recovering, but not completely cured, diphtheria patient. For three, four, or five weeks the patient perhaps progresses satisfactorily; then his voice is noticed to have altered, or he fails to see as perfectly as usual, or perhaps a pronounced squint is observed. To those accustomed to these and other objective symptoms, they presage a further long, anxious, and perhaps fatal termination. The longer the experience the greater becomes the conviction that by removal to the seaside such sequelæ are, if not completely averted, at all events and unquestionably more easily, expeditiously, and completely cured. Examples of profound paralysis have come under my notice during the past year, occurring in the more affluent class of patient, and the markedly rapid change effected by removal to the seaside has been, particularly in two instances, almost miraculous. For all such I contend this real necessity exists, and if, as we do in the case of our staff recovering from diphtheria, we urge the advantages of such a change, a like responsibility rests upon us for our ordinary patients, but who unhappily cannot, in a large majority of instances, obtain it from lack of the necessary means. Poverty, very often extreme, is the natural condition of the bulk of those coming under treatment in the Metropolitan Asylums Board's hospitals, and such, undermined by an exhausting disease like diphtheria, and often with seriously damaged nervous centres, have again to fight the battle of life. That no sanitary necessity can be more real than the common animal need of proper food, that no morbific influence can be of more importance to life than mere privation of nourishment,—these are propositions which everyone feels to be true, but which many of those discharged from the hospitals have to meet. The homes too will often be where shelter can be cheapest bought—in quarters where, commonly, there is least fruit of sanitary supervision, least drainage, least scavenging, least suppression of public nuisances, least or worst water supply, and least light and air. Such are the added impediments which our patients have to face on their return home, and for whose benefit I venture to suggest that plans, not by any means difficult to formulate or extravagant in solution, should be put on foot.

The usual list is appended, showing the numbers of those members of the staff attacked and warded on account of illness contracted in the discharge of their duties. From this it will be observed that two were incapacitated by scarlet fever and 12 by diphtheria. There were also 17 illnesses of a non-infectious character. It is with profound satisfaction that I am again able to report that no death has occurred in the nursing staff either in the past or previous years. Considerable difficulty in obtaining first-class assistant nurses has been experienced. By the order recently in force, it was imperative that a certificate of training for 12 months should be

produced from a general hospital or recognised infirmary. In the abstract this was a satisfactory rule, but, generally, it will be found that young women who have commenced their work for the now recognised three years either continue to the prescribed period, or, if relinquished, it is due to one of three causes—ill-health, dislike to the calling, or to their being found unsuited by habits and behaviour for the responsible duties which are comprised in the vocation. If, therefore, my conjectures are sound, the class will always form a minority. It has ever been my opinion that if probationers were permitted, the vacancies in the ranks of first and second assistants would ever be readily and satisfactorily filled up.

To my colleagues I am indebted for much valuable assistance, and to Dr. J. Taylor Grant for the careful compilation of the appended statistical tables, and also for the numerous bacteriological cultivations made by him during the last six months.

During the quarter of a century that I have now been associated with the Metropolitan Asylums Board, many and great changes have occurred; the work from being almost a pastime is now a stern reality, and an ever-increasing one in detail and anxiety. Some duties, it is true, I have been relieved of, while others have been added; still, the courtesy, kindness, and support I have invariably received from this and former Committees have always been so genuine as to render my routine of duty of great interest, and demand my grateful thanks, which I cordially and respectfully tender.

I am,

Madam and Gentlemen,

Your obedient Servant,

WM. GAYTON,
Medical Superintendent.

No. 4.

REPORT OF Dr. R. M. BRUCE, MEDICAL SUPERINTENDENT OF THE WESTERN HOSPITAL.

(For Statistics, see pp. 82 to 112.)

Western Hospital,
Fulham, S.W.,
February, 1896.

To the Committee of Management.

Ladies and Gentlemen,

I beg to submit my Annual Report for the year 1895.

The total number of cases treated during the year was 2,762, of which 1,296 were transferred to other hospitals of the Board, 888 were discharged to their homes, and 218 died, leaving 360 under treatment on December 31st.

The gross mortality was 8·91 per cent.

Of scarlet fever 1,719 cases were treated, 1,074 were transferred to convalescent hospitals, 340 were discharged, and 68 died.

The mortality was 4·47 per cent., which compares favourably with that of 1894, when it was 6·6, and with that of 1893, when it was 7·16 per cent.

The decrease in the scarlet fever death rate is partly attributable to the comparatively few deaths in which associated infectious maladies, especially diphtheria, had a share. These were seven in number, and include four from diphtheria, two from measles, and one from whooping cough.

Seventeen cases of scarlet fever were found when admitted or during the acute stage of the attack to have diphtheria, in two of which death was accelerated by the superadded disease. During scarlatinal convalescence diphtheria supervened in 24, or 1·6 per cent., of the completed cases, of which two died. Particulars of these cases are tabulated below :—

No.	Initials.	Age.	Sex.	Ward.	Admitted.	Onset of Diphtheria.	Days after admission.	Nature of Attack	Result.
1	*S. K.	4	F	14	Dec. 6, 1894...	Jan. 10, 1895...	35	Faucial and Laryngeal ...	R
2	*A. C.	2	M	9	Nov. 23, ,, ...	,, 11, ,, ...	49	,, ,, ...	R
3	*H. M.	2	M	9	,, 21, ,, ...	,, 12, ,, ...	52	Faucial	R
4	*J. F.	2	M	9	,, 28, ,, ...	,, 12, ,, ...	45	,, ...	R
5	*R. K.	2	F	14	Dec. 11, ,, ...	,, 16, ,, ...	37	Laryngeal Pertussis	R
6	*F. B.	7	F	2	,, 24, ,, ...	,, 16, ,, ...	23	Faucial	R
7	F. F.	9	F	16	Oct. 26, ,, ...	,, 17, ,, ...	83	,, ...	R
8	M. B.	3	F	8	Dec. 24, ,, ...	,, 24, ,, ...	31	,, ...	R
9	F. B.	2	M	8	,, 24, ,, ...	,, 26, ,, ...	33	,, ...	R
10	F. M.	4	M	14	Jan. 14, 1895...	,, 29, ,, ...	15	,, ...	R
11	*N. F.	4	F	8	,, 8, ,, ..	Feb. 1, ,, ...	24	Nasopharyngeal	R
12	*F. C.	4	F	14	Dec. 14, 1894...	,, 13, ,, ...	61	Faucial	R
13	*J. D.	3	M	3	Feb. 12, 1895...	,, 28, ,, ...	16	,, ...	R
14	*L. B.	5	F	3	Jan. 21, ,, ...	Mar. 1, ,, ...	39	,, ...	R
15	*J. B.	6	M	4	Feb. 10, ,, ...	,, 5, ,, ...	23	,, ...	R
16	*H. S.	3	M	3	,, 23, ,, ...	,, 10, ,, ...	15	,, ...	R
17	*G. H.	3	M	14	Mar. 14, ,, ...	April 10, ,, ..	27	Faucial and Laryngeal ...	R
18	*E. E.	3	F	14	,, 30, ,, ...	,, 28, ,, ...	29	,, ,, ...	D
19	*H. Y.	3	M	9	July 12, ,, ...	Aug. 25, ,, ...	44	,, ,, ...	R
20	*W. C.	3	M	10	Aug. 1, ,, ...	Sept. 16, ,, ...	47	,, ,, ...	R
21	*A. D.	5	F	3	,, 17, ,, ...	,, 17, ,, ...	31	Faucial, Nasal, & Laryngeal, Scarlatinal Nephritis ...	D
22	M. H.	24	F	8	July 25, ,, ...	,, 25, ,, ...	62	Faucial	R
23	*E. T.	2	M	3	Sept. 4, ,, ...	Oct. 4, ,, ...	30	,, ...	R
24	*N. E.	1	F	3	,, 24, ,, ..	Nov. 10, ,, ...	48	Faucial and Laryngeal ...	R

* Treated with antitoxic serum.

The percentage incidence of post-scarlatinal diphtheria and the proportion of young children to the total number attacked have varied but little during the past four years, but the proportion of cases in which the disease assumed the larygneal form, to which the high mortality attending this affection is chiefly due, showed a marked decrease in 1895, as is indicated in the following table :—

Year.	Total cases of Post-Scarlatinal Diphtheria.	Percentage incidence.	Total Deaths.	Cases of five years and under.	Laryngeal cases.	Deaths in Laryngeal cases.
1892	18	1·03	12	12	9	9
1893	0	1·2	25	26	22	21
1894	28	1·6	15	23	20	14
1895	24	1·6	2	0	9	2

The antitoxic serum treatment was employed in 18 cases as soon as the nature of the disease was recognised.

Of diphtheria, admitted as such, 694 cases were treated, 222 were transferred 263 were discharged, and 121 died.

The mortality was 19·95 per cent., as compared with 24·03 per cent. in 1894.

The diphtheria deaths include nine from co-existent scarlet fever.

Thirty-three, or 5·4 per cent., of the completed cases were of the hæmorrhagic type.

Tracheotomy was necessitated in 37 cases, of which 22, or 59 per cent., recovered. In no previous year since diphtheria was first treated at this hospital has the percentage of recoveries after this operation exceeded 25.

Paralytic sequelæ were observed in 16·1 per cent., whilst relapse of the disease was noted in seven instances.

The treatment of diphtheria by antitoxic serum was employed systematically

throughout the year, at first in all cases, and afterwards in all moderately severe and severe cases. Inasmuch as a conjoint report on this subject is being prepared by the several Medical Superintendents for submission to the Managers, the matter does not call for further comment in this report.

Of enteric fever 95 cases were treated, 66 were discharged, and 13 died.

The mortality per cent. was 16·81.

The chief complications incidental to this disease were present in higher proportion than usual.

The miscellaneous diseases constituted 9·5 per cent. of the total admissions. 254 came under treatment, of which 219 were discharged, and 16 died.

The mortality was 6·76 per cent.

During the year 54 officers were warded for illness, the majority of whom suffered from mild ailments. Eleven contracted infectious disease, of whom three took scarlet fever, five diphtheria, and three rötheln. A charge nurse contracted enteric fever, for which she remained under treatment 197 days. All recovered.

The works in connection with the three new scarlet fever pavilions have been in active progress throughout the year. Two two-storey blocks, constructed to accommodate 40 patients each, were completed and occupied in September, and the remaining block was nearly finished at the end of the year.

Other much-needed additions and alterations effected during the year include (1) the supplementary warming of the old wards and their appurtenances by a system of hot water pipes and radiators connected with steam heaters adjoining the wards; (2) the erection of a new mortuary with an adequately equipped *post-mortem* room, and an inspection room for the relatives of deceased patients attached thereto; (3) the extension of the scarlet fever discharge rooms; and (4) the provision of a commodious needle-room in the laundry block, and the conversion of the old one into a nurses' sitting-room.

I am, Ladies and Gentlemen,

Your obedient Servant,

(Signed) R. M. BRUCE,
Medical Superintendent.

No. 5.

REPORT OF Dr. F. F. CAIGER, MEDICAL SUPERINTENDENT OF THE SOUTH-WESTERN HOSPITAL.

(For Statistics, see pp. 82 to 112.)

South-Western Hospital,
Landor Road, Stockwell, S.W.,
January 29th, 1896.

To the Committee of Management.

Madam and Gentlemen,

I beg to present my Annual Report with statistics for the year 1895.

The number of patients admitted during the year was 2,081, which, with 277 remaining in hospital on December 31st, 1894, brings the total number of cases treated up to 2,358.

Of these, 1,431 were discharged to their homes, 410 were transferred, 210 died, and 307 remained under treatment at the end of the year.

The general mortality was therefore 10·16 per cent.

The type of scarlet fever admitted during the year was of about the average severity; of 1,294 admissions and the 201 cases remaining from the previous year, 834 were discharged, 374 transferred, 71 died, and 216 remained in hospital.

The case mortality, therefore, calculated upon the accepted formula, was 5·51 per cent.

The number of scarlet fever patients who developed diphtheria during their stay in hospital appears at a somewhat higher figure than in previous years. It must be remembered, however, that it is only since January 1st, 1895, that all cases of secondary throat illness, like those admitted and certified as suffering from diphtheria, have been systematically subjected to a bacteriological examination, and, consequently, a certain number of cases are now returned as diphtheritic which would formerly, from the clinical appearance alone, have been regarded as simple tonsillitis. It is most satisfactory to note that of those amongst them who showed laryngeal affection, in a much smaller proportion the symptons developed to such an extent as to call for operative interference. Thus, out of 12 scarlet fever patients who subsequently developed croup, only two required tracheotomy, and one died; whereas, in 1894, of eight cases of post-scarlatinal croup, tracheotomy had to be performed in seven, and all of them died. The case mortality of post-scarlatinal diphtheria in 1894 was 53·3 per cent., whereas in 1895 it was only 18·5 per cent. Even if we admit that the reduction of mortality in these cases to about one-third of what it had been previously may have been partially dependent upon the prevalence of the disease in a

milder form, it can hardly apply to the laryngeal cases, which are always grave, yet in this group a death rate of seven out of eight has shown a reduction to one in four. The only variation in treatment consisted in the fact that the latter series were treated with antitoxin, whereas the former were not.

The following table shows the incidence of secondary diphtheria amongst the 1,279 cases of scarlet fever completed during the year, the fatal cases accounting for ·31 of a scarlatinal mortality of 5·51:—

Post-Scarlatinal Diphtheria, 1895.

Date of Admission.	Initials.	Age.	Days after Scarlatinal Rash.	Nature of Attack.	Result.	Ward.
Nov. 13, 1894	E. W.	17	24	Faucial	Recovered	Bostock.
,, 2, ,,	A. F.	7	73	,,	,,	Wilkins.
Jan. 28, 1895	E. S.	1	17	Laryngeal	Died	Soper.
Mar. 11, ,,	M. M.	5	40	Faucial	Recovered	Harvey.
June 23, ,,	W. P.	1/2	19	Laryngeal	,,	Soper.
,, 17, ,,	W. M.	1	38	,,	Died	,,
,, 12, ,,	F. S.	7	28	,,	Recovered	South.
May 27, ,,	J. D.	1	82	,,	Died	Soper.
June 11, ,,	M. F.	4	14	Faucio-laryngeal	Recovered	Harvey.
July 9, ,,	M. B.	1	46	Faucial	,,	,,
June 11, ,,	G. S.	14	42	,,	Died	Bostock.
Aug. 3, ,,	M. R.	3	30	,,	Recovered	Harvey.
July 30, ,,	S. L.	1	54	,,	,,	Soper.
June 28, ,,	T. S.	3	38	Faucio-laryngeal	,,	Bostock.
Mar. 21, ,,	E. P.	2	23	,, ,,	,,	Haygarth.
,, 4, ,,	A. C.	4	12	,, ,,	,,	Lockyer.
,, 15, ,,	R. F.	9	19	Faucial	,,	Harvey.
Nov. 29, ,,	M. W.	11	49	,,	,,	,,
Jan. 14, ,,	W. J.	12	40	,,	,,	Bostock.
June 22, ,,	W. R.	5	53	Laryngeal	,,	Harvey.
Jan. 22, ,,	E. W.	6	42	,,	,,	Devon.
Feb. 2, ,,	W. P.	2	47	Faucio-laryngeal	,,	Soper.
,, 28, ,,	A. S.	5	24	Faucial	,,	Harvey.
July 12, ,,	E. H.	4	96	,,	,,	Lockyer.
Sept. 26, ,,	W. G.	11	40	,,	,,	South.
,, 28, ,,	W. A.	9	28	,,	,,	,,
,, 16, ,,	A. W.	3	47	,,	,,	,,
Aug. 21, ,,	W. R.	8	25	,,	,,	,,

The diphtheria admissions numbered 478. Of these, together with the 49 cases remaining in hospital at the end of 1894, 336 were discharged, 36 were transferred, 106 died, and 49 remained under treatment. The percentage mortality of the disease, calculated on the accepted formula, comes out at 22·17. Although this is the lowest mortality which has been recorded in any year since diphtheria was first received into this hospital, no corresponding diminution in the average severity of the cases on admission was to be observed.

Of these, 316, or about two-thirds, were considered of sufficient severity to warrant the use of antitoxic serum. The beneficial results which have been observed to follow its employment in this hospital are, in my opinion, a sufficient justification of its claim to be considered the most valuable means of treating diphtheria with which we are at present acquainted.

Further detailed information of a statistical character will be found in a report on antitoxin, founded on a year's experience of its employment, which is being jointly compiled by the Medical Superintendents for the information of the Managers.

Considerable assistance in the diagnosis of doubtful cases has been derived from the systematic bacteriological examination by Dr. Sims Woodhead and his assistants at the laboratories of the Royal Colleges of all cases which on admission were

certified as diphtheria. As a result, a considerable number of cases (13·7 per cent.) are this year returned as tonsillitis, in view of positive evidence of diphtheria not having been forthcoming. The exclusion of these cases cannot but have the effect of lessening that reduction of mortality which has followed the use of antitoxin, as compared with the records of former years.

It should be remembered that the bacteriological test can never be relied on as an *absolute* criterion of the presence or absence of diphtheria, because, on the one hand, it is a proven fact that the bacillus is occasionally present in the throat of persons who are not in any way affected by the disease, and, on the other hand, in a small proportion of undoubted and even fatal attacks of diphtheria, repeated bacteriological examination has failed to reveal the presence of the specific bacillus.

Whatever arrangement may be entered into for the systematic examination of cases certified as diphtheria by an outside expert of recognised authority, it can never do away with the desirability of maintaining a limited laboratory equipment at each of the hospitals.

The aggregate type of the enteric fever admissions was, I am inclined to believe, less severe than usual, although the proportion of cases which underwent a relapse was somewhat high. Of the 129 admissions, together with the 26 who remained from the previous year, 107 were discharged, 15 died, and 33 remained on December 31st.

The enteric fever mortality was therefore 11·95.

No case of typhus was admitted during the year.

Of 180 admissions wrongly certified as suffering from either scarlet fever, diphtheria, or enteric fever, the wrong certifications in respect to diphtheria amounted to no less than 100, the disproportion, in comparison with former years, being almost entirely due to the employment of the bacteriological test.

Of the various administrative improvements which had been commenced before the end of 1894 several have been completed :—

(*a*) The central block, comprising the nurses' home, dining rooms for the female staff, the Matron's quarters, and certain administrative offices. This is now finished, and its occupation is only deferred until suitable furniture can be obtained.

(*b*) The covered ways connecting the central block with the two hospitals.

(*c*) The central coal store

(*d*) The re-modelling of the lower laundry. This will eventually be used for the staff washing alone, and no doubt is well adapted for this purpose. At the present time, however, in consequence of the upper laundry having been given over to the builders, all the washing of the hospital has to be effected in the one laundry, and it is only with great difficulty that the work can be got through. Until the re-construction of the upper laundry is completed, it is to be feared that the present inconvenience must necessarily continue.

(*e*) The new wall bounding the property on the Landor Road frontage. The pointing of the wall, however, is being kept back until the danger of frost may be regarded as over. Afterwards the old wooden fence will be removed, and a proper foot pavement laid down by the Lambeth Vestry. This will effect a great improvement in the outside appearance of the hospital.

(*f*) The Medical Superintendent's house. Owing to the consideration which the Committee showed in forwarding the progress of this work, I was enabled to move in on September 12th, and find it a great improvement on my old quarters.

Under the present contract, the following works yet remain to be carried out: —

(*a*) The construction of an upper storey over the back part of the upper administration block.

(*b*) The re-modelling of the upper laundry for patients' washing.

(*c*) The enlargement and re-fitting of the upper kitchen.

It having been decided to build an ambulance station on the strip of land recently acquired at the back of the property, provision will have to be made for the extra nurses who will be required for ambulance duty. It has been resolved to house them in the building on the main road fronting the new central block, which is now occupied by the porters. This will provide cubicles for 12 nurses, the number which the Ambulance Committee estimated would be required.

For the reception of the men who will be displaced by the nurses a two-storey building is to be constructed over the new coal store at the rear of the central block. This building will accommodate 18 men, and will face the entrance from Hubert Grove, which goes with the land newly acquired by the Managers. As this entrance will only be required by the ambulance station in case of emergency, it has been decided to hand over its control to the Hospital Committee, to whom it will prove valuable for the passage of coal and ash carts to and from the hospital premises.

Certain minor improvements are also projected, comprising an alteration to the old mortuary, the extension of the engineer's shop and disinfecting chamber, the construction of a new destructor, and the tar-paving of the lower laundry yard.

The plans for these works have been passed by the Board, and are now awaiting the Local Government Board's official sanction.

There is only one item of any importance yet remaining to complete the scheme of improvement which the Committee decided to be indicated in the interests of the hospital. It is the replacement by a small two-storey pavilion of the remaining wooden hut which was built in 1887 as a temporary means of relieving the epidemic pressure of that autumn.

During the year, six members of the staff contracted diphtheria, four enteric fever, three scarlet fever, and 12, some other form of throat affection for which they had to be warded. It is satisfactory to report that all recovered.

No change, I am glad to say, has taken place in the medical staff since October, 1894. I am greatly indebted to Drs. Stewart, Cuff, and Pershouse for the careful preparation of the statistical tables, and for the ready assistance which they have constantly afforded me.

I am,

Madam and Gentlemen,

Your obedient Servant,

(Signed) FRED. FOORD CAIGER,
Medical Superintendent.

No. 6.

REPORT OF Dr. C. E. MATTHEWS, MEDICAL SUPERINTENDENT OF THE FOUNTAIN HOSPITAL.

(For Statistics, see pp. 82 to 112.)

Fountain Hospital,
Tooting Grove,
12*th February*, 1896.

To the Committee of Management.

Madam and Gentlemen,

In reviewing the work of the past twelve months, it is at once apparent that you have had to deal with a year in which fever and diphtheria were widely prevalent. The admissions at this hospital were exactly 600 more in 1895 than in 1894.

The actual numbers for 1895 are as follow:—

Remaining in hospital 31st December, 1894	320
Admitted during 1895	2,142
Total treated during 1895	2,462

In regard to these cases, the event was as follows:—

Discharged recovered	1,454
Transferred to convalescent hospitals of the Board ...	413
Died	187
Remaining in hospital 31st December, 1895	408
Total	2,462

The gross mortality, calculated on the Registrar-General's formula, is 8·91 per cent.

In regard to this prevalence of fever and diphtheria, the prolongation of the curves of the monthly admissions without any marked fall into the first month of the current year will probably be found a unique experience in the history of the Board. The returns of this hospital serve to show that the increase for scarlet fever began in May and for diphtheria began in June. Thenceforth up to the close of the year the hospital was continuously filled to its utmost limit: beds were occupied by new patients practically on the day they were vacated by discharged patients.

Scarlet Fever.—247 patients suffering from this disease remained in hospital on December 31st, 1894, and 1,387 new cases were admitted during the year, bringing the total treated up to 1,634. Of these, 940 were discharged recovered, 332 were

transferred to other hospitals of the Board, and 66 died, leaving 296 under treatment at the end of the year.

The fever mortality, according to formula, is 4·84. Six of these fatal cases were due to the supervention, during convalescence, of some complaint not directly attributable to scarlet fever, viz., five from post-scarlatinal diphtheria and one from erysipelas. Excluding these accidental cases, scarlet fever mortality is 4·41 per cent.

The type of disease does not appear to have varied in any marked degree from that of the previous year, when the mortality was 4·36, or, excluding cases not directly attributable to scarlet fever, 3·15 per cent.

It will be a satisfaction to the Committee to know that these rates are well below the average mortality of cases treated in the Board's hospitals in previous years.

The incidence of diphtheria during the convalescent stage of scarlet fever remains one of the apparently inseparable accidents of fever wards. Bacteriological examination, however, throws a new light upon the ætiology of these cases, and by its means we have been able to diagnose a number of patients suffering on admission from the co-existence of both diseases. Many of these cases are unwittingly sent to the general fever wards, and there communicate diphtheria to other patients before the disease has been suspected, or, if suspected, before there is time to corroborate one's suspicions by bacteriological examination. In my opinion, this is the explanation of most cases of post-scarlatinal diphtheria. In reference to this subject, Dr. Thornton has obtained for me the following particulars:—

Fifty-eight cases, all proved by bacteriological examination, developed post-scarlatinal diphtheria after admission. Of these, 14 were injected with serum, with one death, upon which tracheotomy had been performed. Two other tracheotomy cases recovered, and two with laryngeal symptoms recovered without tracheotomy; the rest, 44 in number, were not injected, and of these three died—two with broncho-pneumonia, and one with empyema, developed long after the original attack.

Six cases, certified scarlet fever, had post-scarlatinal diphtheria present on admission; none of these were injected, and all recovered.

Seven cases, certified scarlet fever, had co-existing scarlet fever and diphtheria on admission, both in the acute stage; none of these were injected, and one died.

One unusual feature about these cases is the large number of comparatively mild attacks. Antitoxin was only given to severe cases, and the loss of only one in 14 is an extremely satisfactory result.

Diphtheria.—72 diphtheria patients remained in hospital on December 31st, 1894, and 609 new cases were admitted during the year, bringing the total under treatment up to 681. Of this number, 379 were discharged recovered, 78 were transferred to the Northern Hospital, 115 died, and 109 remained in hospital on December 31st, 1895.

The diphtheria mortality according to formula is 19·47 per cent.

Tracheotomy was performed in 36 cases, of which 19, or 52·8 per cent., recovered. All but two of the number were treated with antitoxin. As you are well aware, a new method of treatment of overwhelming interest to the public and the medical profession, viz., the serum antitoxin treatment, has been administered during the past year to patients suffering from this disease.

The results are being embodied by the Medical Superintendents of the Board's Hospitals in a collective report, which in due course will be presented to the Managers. It would consequently be superfluous to go into details of the treatment

in this report, but I may briefly draw your attention to a few matters of general interest. On several occasions during the early part of the year we were unable to secure an adequate supply of serum, but so far as was possible the treatment was administered to all severe cases, and for the most part only to severe cases. All the patients were submitted to bacteriological examination on admission, and none but those who satisfied this test, or the clinical test, or both tests combined, have been reckoned as diphtheria. The number of patients actually certified diphtheria was 751; but 150 of these, after admission, showed no evidence of the disease—either clinical or bacteriological—and have therefore been excluded from the diphtheria statistics. 11 out of the 150 cases of mistaken diagnosis died—a mortality of 7·33 per cent. If the mortality had been calculated upon all cases, as notified, the death rate for diphtheria would be 16·64 per cent.

In 1894 the average diphtheria mortality in the Board's hospitals was 29·29 per cent. In this hospital, diphtheria was only admitted for the last three months of that year, and the mortality amongst the cases, 182 in number, was 31·81 per cent. In 1895 the mortality, instead of being increased (as one would expect from the greater care taken in eliminating doubtful cases whose rate of mortality was comparatively low), fell to 19·47 per cent. This mortality is lower than has ever been known in ante-serum years in any of the Board's hospitals.

The external conditions affecting the general treatment and nursing of the patients have probably not altered during the past two years in any of the Board's hospitals. In this hospital they have remained precisely the same. Moreover, the type of disease was not less severe in 1895 than in 1894, or previous years of which I have had experience of diphtheria. There is no influence, seasonal, climatic, age of patient, type of disease, or other uncontrollable influence, in my opinion, which will explain the marked diminution in the mortality for 1895. But, at the bedside, one has rarely failed to witness some amelioration of symptoms, even in cases that ultimately die, while in those who come early under the treatment and recover, the improvement is rapid and striking. I am, therefore, led to conclude that the influence which has brought about this beneficent result is the serum treatment. There is every reason to believe that if the patients had arrived at the hospital earlier in their disease, and not, as was often the case, in a moribund condition, the results would have been even more striking than they are. The arrival of patients late in their disease was due in some cases to the Board's inability, from want of sufficient accommodation, to remove the cases as soon as they were notified, and in others to causes over which the Board had no control.

Other Diseases.—The number of cases of mistaken diagnosis was 203.* Of these, 53, or 3·81 per cent., were cases certified scarlet fever, and 150, or 19·9 per cent., were cases certified diphtheria. The details of these diseases are given in Table XIV. The consideration of these cases shows how important it is to reserve intact the accommodation which has been provided for isolation purposes. It must

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* Amongst the patients erroneously certified scarlet fever there were eight cases of diphtheria; and amongst the patients erroneously certified diphtheria there were 43 of scarlet fever and six of post-scarlatinal diphtheria. For statistical purposes, these cases have been classed with the disease from which they were suffering, and have not been included in the table of miscellaneous diseases.

also not be forgotten that other cases besides the above are constantly occurring in the wards, which require prompt isolation. The Committee would therefore be wise never to cut down the number of isolation beds under any circumstances.

The following additional matters of importance have occurred during the year:—

1. In the month of August, acting upon a reference of the Board, you decided "to increase temporarily during the existing pressure" the accommodation for patients. It is to be hoped that the Board will be able to dispense with this temporary addition to our accommodation as soon as possible, as the strain has told upon the health of the staff.

2. The roofs of all the pavilions and staff quarters have been painted in order to protect the corrugated iron from rust.

3. Your attention has also been directed to the amount of gas and water consumed in the hospital, with the result that by judicious management you have been able to effect an economy in both respects, without impairment to the efficient working of the hospital.

Staff Illness.—During the year three charge nurses, five assistant nurses, and one wardmaid contracted scarlet fever; three charge nurses, three assistant nurses, and four wardmaids contracted diphtheria. I am glad to say all these recovered. Seventy-four members of the staff were warded with miscellaneous complaints, one of which terminated fatally. It is with much regret that I have to report this occurrence, which resulted in the death of Grace Rawlins, a young and promising assistant nurse. Her premature death from pneumonia, after a short illness, was deplored by us all, and especially by her fellow-nurses, with whom she was very popular.

I take this opportunity of thanking my colleagues for the assistance they have given me in carrying on the work of the hospital, and record with much pleasure the care and pains which the assistant medical officers have bestowed upon the anti-toxin treatment of the diphtheria patients. The tabulation of records relating thereto and the compilation of the statistical tables are the joint work of Dr. Thornton and Dr. Johns. In conclusion, I am pleased to acknowledge the consideration that you have invariably shown to every well-considered plan for promoting the interests and comfort of the staff.

I am, Madam and Gentlemen,

Your obedient Servant,

(Signed) C. E. MATTHEWS,
Medical Superintendent.

No. 7.

REPORT OF Dr. JOHN MacCOMBIE, MEDICAL SUPERINTENDENT OF THE SOUTH-EASTERN HOSPITAL

(For Statistics, see pp. 82 to 112.)

South-Eastern Hospital,
February 26th, 1896.

To the Committee of Management.

Madam and Gentlemen,

I beg to submit my Annual Report and statistical tables for the year 1895. The total number of cases treated was 2,946—1,131 were discharged recovered, 1,152 were transferred to other hospitals of the Board, and 269 died.

The mortality was 10·44 per cent. on the total cases. The number of patients remaining under treatment on December 31st was 394.

The work was continuously heavy during the 12 months, and the seasonal variation usually noted in the prevalence of the various diseases did not affect to any great extent the number of admissions here.

The number of patients suffering from scarlet fever admitted was, as in former years, largely in excess of the numbers suffering from diphtheria and enteric fever. Of 2,592 patients admitted direct from their homes, 1,660 were found to be suffering from scarlet fever, 550 from diphtheria, 233 from enteric fever, and 149 from miscellaneous diseases.

The percentage mortality of the scarlet fever cases was 4·36 per cent., and the severity of the attacks was perhaps rather under the average of the past five years. Of the complications arising during the course of the disease, rheumatism was more frequent than usual, but the other complications were in the normal proportion to the numbers treated. Of diseases co-existing with scarlet fever, diphtheria and measles were the most frequent. Forty-eight cases had developed diphtheria before and 55 developed it after admission. Measles attacked 26 patients during convalescence.

The diphtheria admissions numbered 550, and the mortality was at the rate of 22·78 per cent., compared to a mortality of 27·60 in 1894. The severity of the disease was very similar to that of the previous year, except that the proportion of laryngeal cases was higher.

The following table shows the incidence of laryngeal cases during 1894 and 1895, and the deaths in these cases:—

Cases in which laryngeal symptoms appeared after admission.	1894.	1895.
	Number.	Number.
Cases tracheotomised	7	2
Deaths in such cases...	4	—
Cases not tracheotomised	15	11
Deaths in such cases...	11	4
Total occurring after admission	22	13
„ deaths in such cases	15	4
Total laryngeal cases	74	120
„ deaths in such cases	44	45

It will be noted that in 1894, while the number of laryngeal cases was 74 (507 cases of diphtheria admitted), with 44 deaths, in 1895 the number of laryngeal cases was 120 (550 cases of diphtheria admitted), with 45 deaths, and that in 1894, 22 cases became laryngeal after admission, compared with only 13 in 1895.

Tracheotomy was performed in 64 cases, and 33 of these, *i.e.*, 50·5 per cent., recovered, a better average than hitherto obtained here.

Forty-three cases of hæmorrhagic diphtheria were admitted, and formed 7·78 of the total admissions.

In view of the report on the antitoxin treatment of diphtheria which is in preparation by the Medical Superintendents of the Board's hospitals, it is unnecessary for me more than briefly to allude to the subject.

Antitoxin serum was used systematically throughout the year, and the severity of the cases afforded a good test of the value of that agent in the treatment of diphtheria. The diminished mortality, the lessened incidence of laryngeal symptoms after admission, and the increased percentage of recoveries after tracheotomy point unmistakably to the remedial value of antitoxin.

If it were possible in future to secure the removal of the diphtheria patients to hospital on the first or second day of illness, my experience warrants me in stating that, with the aid of antitoxin, the hospital mortality in diphtheria cases would be reduced in a very marked degree.

Enteric Fever was of a severe type, more especially in the latter part of the year, the mortality being 20·57. It is noticeable that of 233 cases, 99 came from the Woolwich district—a sudden outbreak occurred there in May, owing to a contaminated milk supply.

The health of the officers has been fairly good. Four contracted scarlet fever (one chaplain, five assistant nurses, two wardmaids, and one general porter); six contracted diphtheria (one charge nurse, one assistant nurse, two wardmaids, one laundry maid, and one housemaid); and one assistant nurse contracted enteric fever All recovered.

The usual number of minor illnesses occurred among the nurses and general staff.

The new nurses' home, opened on January 17th, 1895, has added very greatly to the comfort of the charge nurses, and the enlightened action of the Committee in providing a building so admirably fitted in every way for its purpose has been most cordially appreciated by them.

I have pleasure in thanking my fellow-officers for the co-operation in carrying on the work of the hospital.

I cannot close this, the last Annual Report which I shall have the honour of submitting to you, without recording my appreciation of the uniform courtesy, kindness, and support that I have received at your hands during the past 17 years, and to say how highly I value the privilege of having been Medical Superintendent of your hospital for so lengthened a period.

I am, Madam and Gentlemen,

Your obedient Servant,

(Signed) JOHN MACCOMBIE,

Medical Superintendent.

No. 8.

REPORT OF Dr. F. N. HUME, MEDICAL SUPERINTENDENT OF THE NORTHERN HOSPITAL.

(For Statistics, see pp. 82 to 112)

Northern Hospital
Winchmore Hill, London, N.,
January, 1896.

To the Committee of Management.

Gentlemen,

I beg to present my Annual Report for 1895. During the year 5,378 patients were treated in the hospital: 4,888 were admitted, 4,501 were discharged recovered, four were transferred to other hospitals of the Board, and 11 died.

Of the admissions, 4,315 were scarlet fever and 573 diphtheria patients. Of the former seven and of the latter four died.

The general mortality was 0·23; that of scarlet fever cases, 0·16; and of diphtheria, 0·71.

The accommodation of the hospital has again been varied by circumstances. For the first seven months of the year it had its normal limit of 680; in August the number of beds in each of 12 of the scarlet fever pavilions was raised from 32 to 46, and the total accommodation was thus increased to 848 beds, of which 759 were for scarlet fever and concurrent scarlet fever and diphtheria cases, 64 for diphtheria, and 25 for isolation. Twelve diphtheria beds were subsequently added in September, and in December 50 additional scarlet fever beds were available in the new pavilion recently erected, and the total accommodation thus raised to 910 beds before the close of the year.

The death rate has been so small that little or no inference can be drawn from it as to any effect produced by the increase of numbers; but the incidence of disease in relation to that increase appears to be significant; the percentage of post-scarlatinal diphtheria to scarlet fever admissions during the first seven months of the year having been 1·8, and during the last five months 4·8.

At the end of November a re-arrangement of the beds was made, by which those in the dormitories were reduced to their normal number, and the whole of the extra beds relegated to the day rooms, and this so far has been followed, either as sequence or consequence, by a considerable reduction of diphtheria incidence. In a short time a comparison of the systems employed during the three periods, from January to July, from August to November, and since the latter date respectively, should afford an indication as to the advisability of increasing—and, if so, on what method and to what extent—the accommodation of the hospital beyond its normal limit at any time in the future.

The complications of scarlatinal convalescence have had their usual character. One patient died of relapse of the disease, one of pneumonia, and one of middle ear disease, subsequent to relapse of scarlet fever complicated by diphtheria.

Among the diphtheria convalescents one death was due to pneumonia and two to nephritis.

Forty-four patients contracted scarlet fever, and of these one died. In rather more than one-third of the cases the attack developed within a week after the patients' transfer to this hospital.

Of the more important intercurrent diseases affecting the scarlet fever convalescents, there were two cases of enteric, 28 of measles, and 160 of diphtheria. The cases of measles occurred in two groups: one, consisting of 10 cases, due to a patient admitted on October 1st; the other, which was continuing to extend at the end of the year, comprising 18 cases, arising from five centres of infection imported in December.

The incidence of post-scarlatinal diphtheria was considerably in excess of that of previous years; but this excess must in part be attributed to the introduction of a new method of diagnosis, and the consequent classification as diphtheria of a number of cases which, without the bacteriological test, would have been regarded as simple affections of the throat.

In 153 of the 160 cases which occurred diphtheria bacilli were found to be present, and in the remaining seven the diagnosis was based on the clinical symptoms, confirmed in two instances by subsequent diphtheritic paralysis. On the ground of the addition made by bacteriological examination, I have, for purposes of comparison, reduced the numbers by one-half, that is, from 160 to 80.

A comparison on this basis with the statistics of the preceding five years presents the following points:—

I.—Percentage Incidence on Scarlet Fever Admissions.

1890.	1891.	1892.	1893.	1894.	1895.
1·4	0·57	1	0·7	0·8	1·6

II.—Percentage Mortality.

(*a*) *On Scarlet Fever Admissions.*

1890.	1891.	1892.	1893.	1894.	1895.
0·91	0·26	0·66	0·52	0·38	0·09

(*b*) *On Diphtheria Attacks.*

1890.	1891.	1892.	1893.	1894.	1895.
63·1	45·4	65·1	73·1	45·1	5·0
Cases 38	11	47	41	31	80

Or, taking the aggregate of the five years 1890–1894, 168 cases occurred, with 104 deaths, a mortality of 61·9, as compared with a mortality of 5 per cent. on 80 cases in 1895.

III.—Percentage Age Mortality.

	1890.	1891.	1892.	1893.	1894.	1
1 to 5 years	100·0	55·5	Under 5 yrs. 93·7	77·7	76·9	10·
Cases ...	18	9	16	13	13	30
6 to 10 years	30·7	0	5 to 9 years. 66·6	70·5	21·4	2·7
Cases ...	13	1	21	17	14	36
Over 10	28·5	0	Over 9. 20·0	66·6	25·0	0
Cases ..	7	1	10	6	4	14

The comparison may be extended to the post-scarlatinal diphtheria statistics of the acute hospitals of the Board. In these the mortality has varied from 34 to 67 per cent.; and an aggregate of 482 cases collected from the Annual Reports of the past five years shows a mortality of slightly over 50 per cent.

At this hospital during 1895 diphtheria has occurred in every pavilion and hut occupied by scarlet fever patients, and the large number of attacks, with the occurrence in some instances of several almost simultaneously, makes it more difficult than has hitherto been the case to gauge the influence of ward-infection. Its prevention, as far as possible, has been attempted, and the larger system of isolation now in contemplation will eliminate still further this possible source of extension of disease.

The age-incidence of the cases of 1895, the circumstances in which they occurred, and the surroundings in which they were treated were similar to those of the diphtheria cases of previous years. The point of difference is in the event; the reduction of mortality from 61 to 5 per cent., or, on the bacteriological diagnosis, to 2·6 per cent.

The only fresh factor is the treatment of the cases by antitoxin. The statistics of this treatment will be published elsewhere, and I need only say here that it has been employed in every case of initial severity or in which symptoms of gravity arose. To its early application the absence, in the large majority of cases, of those fatal conditions which have hitherto so often supervened may, I think, reasonably be ascribed. A conclusion may be premature, but the facts appear to offer the strongest presumptive evidence that where diphtheria, as is the case here, can be detected and treated in the earlier stage of the disease, a large saving of life has been, and may be expected to be, effected by the use of antitoxin.

During the year 79 members of the staff have been warded for illness, for periods varying from one to 74 days. Three officers contracted scarlet fever, and 11 diphtheria; all recovered.

I regret to say that one death occurred, that of Assistant-Nurse Walker, who,

after a long period of service under the Board, died of heart disease consequent upon rheumatism.

The structural additions and improvements commenced in 1894 have been completed. A new pavilion for the accommodation of 100 patients has been added to the hospital; and the extension of the laundry, with important additions to its machinery, and the construction of a new needle-room have largely increased the administrative resources of the institution.

The work of the year, especially from the point of view of the small mortality, may be regarded as satisfactory. During the last five months every department of the hospital has been very fully occupied, and I have much pleasure in testifying to the willingness and efficiency with which the work falling upon each one of them has been performed by the officials of every section of the staff, and at the same time in thanking the Committee for the unfailing interest shown by them in the welfare and improvement of the institution.

The usual statistical tables, which have been prepared by Dr. Hague, are appended.

I remain,

Gentlemen,

Your obedient Servant,

(Signed) F. N. HUME,
Medical Superintendent.

No. 9.

REPORT OF Dr. FREDERIC THOMSON, TEMPORARY MEDICAL SUPERINTENDENT OF THE GORE FARM HOSPITAL.

(For Statistics, see pp. 82 to 112.)

Gore Farm Hospital,
Darenth, near Dartford, Kent.
January 28th, 1896.

To the Committee of Management.

Ladies and Gentlemen,

I beg to present to you my Annual Report and statistical tables for the year 1895.

On July 25th the Upper Hospital was first opened for patients convalescing from scarlet fever. After July 26th the transference of scarlet fever patients was discontinued, and those that already had been transferred to this hospital were re-transferred to other hospitals of the Board on July 30th, 31st, and August 1st. On July 31st the Lower Hospital was opened for patients convalescing from smallpox, and while patients were being admitted into it, the Upper Hospital was being disinfected. After the completion of the aforesaid disinfection, the smallpox patients were transferred to the Upper Hospital.

On October 24th and 25th those of the smallpox patients who then remained were re-transferred to the Hospital Ships, the hospital remaining without patients until December 24th, when patients convalescing from scarlet fever were again admitted into the Upper Hospital.

From July 25th to December 31st inclusive, the total number of patients treated was 542; of these, 308 were discharged recovered, and 104 were re-transferred to other hospitals of the Board. No deaths occurred. There remained in the hospital on December 31st 130 patients.

With regard to smallpox, the number of patients treated was 352; of these, 308 were discharged recovered, and 43 were re-transferred to the Hospital Ships. One case having contracted scarlet fever at the Hospital Ships was transferred here for the purpose of isolation; on recovery from smallpox, this case was transferred to the South-Eastern Hospital. Five cases contracted diphtheria during convalescence. They all recovered.

With regard to scarlet fever, the number of patients treated was 190; of these, 60 were re-transferred to other hospitals of the Board, and on December 31st, 130 remained in the hospital.

With regard to the health of the staff, coincident scarlet fever and diphtheria were contracted by one wardmaid; tonsillitis was contracted by two wardmaids and

one general porter—these recovered; pneumonia was contracted by one general porter, and resulted in death.

At the Upper Hospital bath-rooms have been provided in four blocks, and it has been decided that the remaining 16 blocks shall be provided with similar bath-rooms. This much-needed improvement will, to a considerable extent, render the hospital more suitable for the treatment of patients convalescing from scarlet fever.

Additions and improvements have been effected on the staff bathing accommodation and in the telephone system, and are now being effected on the fire-extinction system.

The various changes, from one disease to another, which have been found necessary since the opening of the hospital on July 25th have entailed a great deal of additional work, and I have to thank my fellow-officers for the self-sacrificing and untiring manner in which they have met all demands made upon them.

I have to thank you, Ladies and Gentlemen, for the valuable advice and support which you have given to me during my period of office.

I am,

Your obedient Servant,

FREDERIC THOMSON,
Medical Superintendent.

FEVER STATISTICS.—TABLE I.—*Showing the*

EASTERN HOSPITAL.

DISEASES	Remaining on Dec. 31st, 1894.	Admitted during 1895.		Total under treatment during 1895.	Discharged during 1895.		Died during 1895.	Mortality per cent.	Remaining on Dec. 31st, 1895.
		Direct from homes.	From other Hospitals of Board.		Recovered.	To other Hospitals of Board.			
Scarlet	192	1,587	2	1,781	716	669	132	8·62	264
Diphtheria	73	649	...	722	338	140	168	25·94	76
Enteric	20	97	...	117	72	...	28	28·42	17
Typhus	...	3	...	3	3	...	...	...	...
Other diseases	9	288	...	297	230	1	46	16·28	20
Totals	294	2,624	2	2,920	1,359	810	374	14·47	377

NORTH-EASTERN HOSPITAL.

Scarlet	235	2,418	...	2,653	1,709	480	104	4·41	360
Diphtheria	...	4	...	4	3	...	1	25·0	...
Enteric	...	2	...	2	1	...	1	50·0	...
Other diseases	2	130	...	132	118	1	9	6·97	4
Totals	237	2,554	...	2,791	1,831	481	115	4·61	364

NORTH-WESTERN HOSPITAL.

Scarlet	173	1,356	...	1,529	805	449	71	5·29	204
Diphtheria	76	728	...	804	551	...	179	24·55	74
Enteric	19	122	...	141	108	...	15	12·24	18
Typhus	...	...	...	...	...	...	...	...	...
Other diseases	8	146	...	154	129	...	23	15·43	2
Totals	276	2,352	...	2,628	1,593	449	288	12·3	298

WESTERN HOSPITAL.

Scarlet	162	1,557	...	1,719	340	1,074	68	4·47	237
Diphtheria	77	617	...	694	263	222	121	19·95	88
Enteric	17	78	...	95	66	...	13	16·81	16
Typhus	...	...	...	...	...	...	...	...	...
Other diseases	16	238	...	254	219	...	16	6·76	19
Totals	272	2,490	...	2,762	888	1,296	218	8·91	360

SOUTH-WESTERN HOSPITAL.

Scarlet	*201	1,294	...	1,495	834	374	71	5·51	216
Diphtheria	49	478	...	527	336	36	106	22·17	49
Enteric	26	129	...	155	107	...	15	11·95	33
Typhus	...	...	...	...	...	...	...	...	...
Other diseases	1	180	...	181	154	...	18	10·22	9
Totals	277	2,081	...	2,358	1,431	410	210	10·16	307

* In last year's statistics returned by mistake as 200.

Admissions, Discharges, and Deaths during 1895.

FOUNTAIN HOSPITAL.

DISEASES.	Remaining on Dec. 31st, 1894.	Admitted during 1895.		Total under treatment during 1895.	Discharged during 1895.		Died during 1895.	Mortality per cent.	Remaining on Dec. 31st, 1895.
		Direct from homes.	From other Hospitals of Board.		Recovered.	To other Hospitals of Board.			
Scarlet	247	1,387	...	1,634	940	332	66	4·84	296
Diphtheria	72	609	...	681	379	78	115	19·47	109
Enteric	...	...	...	...	...	...	...	...	...
Typhus	...	...	...	...	...	...	...	...	...
Other diseases	1	146	...	147	135	3	6	4·13	3
Totals	320	2,142	...	2,462	1,454	413	187	8·91	408

SOUTH-EASTERN HOSPITAL.

Scarlet	220	1,660	7	1,887	521	1,039	72	4·36	255
Diphtheria	96	550	...	646	318	113	126	22·78	89
Enteric	27	233	...	260	177	...	47	20·57	36
Typhus	...	...	...	...	...	...	...	...	...
Other diseases	4	149	...	153	115	...	24	16·66	14
Totals	347	2,592	7	2,946	1,131	1,152	269	10·44	394

NORTHERN HOSPITAL.

Scarlet	458	...	4,315	4,773	3,966	4	7	0·168	796
Diphtheria	32	...	573	605	535	...	4	0·719	66
Enteric	...	...	...	...	...	...	...	...	...
Other diseases	...	...	...	...	...	...	...	...	...
Totals	490	...	4,888	5,378	4,501	4	11	0·233	862

GORE FARM HOSPITAL.

Scarlet	...	12	178	190	...	60	...	...	130
Other diseases	...	...	..	...	...	...	...	...	...
Totals	...	12	178	190	...	60	...	...	130

SUMMARY.

Scarlet	1,888	11,271	4,502	13,159	9,831	4,481	591	5·45	2,758
Diphtheria	475	3,635	573	4,110	2,723	589	820	22·85	551
Enteric	109	661	...	770	531	...	119	18·17	120
Typhus	...	3	...	3	3	...	...	...	...
Totals	2,472	15,570	5,075	18,042	13,088	5,070	1,530	10·01	3,429
Other diseases	41	1,277	...	1,318	1,100	5	142	11·27	71
Grand Totals ...	2,513	16,847	5,075	19,360	14,188	5,075	1,672	10·22	3,500

NOTES.—The Scarlet Fever mortality includes all deaths occurring from intercurrent diseases, particulars of which will be found in the Annual Reports of the Medical Superintendents.

The mortality rates are calculated according to the Registrar-General's Formula—*i.e.*, by dividing the Deaths, multiplied by 100, by half the sum of the Admissions, Discharges, and Deaths for the year.

FEVER STATISTICS.—TABLE II.—*Showing the Monthly Admissions*

EASTERN HOSPITAL.

MONTH.	ADMISSIONS.										DEATHS.	DISCHARGES.	
	Scarlet.		Diphtheria.		Enteric.		Typhus.	Other Diseases.		Total.		Recovered.	To other Hospitals of Board.
	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.		Direct from Homes.	From other Hospitals of Board.				
Jan.	134	1	62	...	11	...	...	30	...	238	32	131	69
Feb.	88	...	37	...	4	...	...	22	...	151	15	100	61
Mar.	96	...	44	...	3	...	2	21	...	166	12	118	58
April	106	...	41	...	1	...	1	17	...	165	19	96	51
May	118	...	55	...	3	...	...	29	...	206	45	80	51
June	121	...	60	...	2	...	...	33	...	216	43	99	51
July	112	...	62	...	14	...	...	26	...	214	35	106	68
Aug.	153	1	60	...	19	...	...	20	...	253	46	107	92
Sept.	115	...	59	...	11	...	...	16	...	201	31	81	62
Oct.	201	...	63	...	5	...	...	30	...	299	42	136	84
Nov.	150	...	47	...	10	..	...	24	...	231	22	150	79
Dec.	193	...	59	...	14	...	...	20	...	286	32	155	84
Totals	1,587	2	649	...	97	...	3	288	...	2,626	374	1,359	810

NORTH-EASTERN HOSPITAL.

Jan.	110	...	...	...	...	...	...	1	...	111	4	163	...
Feb.	137	...	...	...	...	...	...	14	...	151	7	63	...
Mar.	104	...	...	...	...	...	...	6	...	110	9	134	...
April	89	...	1	...	...	...	...	11	...	101	10	132	24
May	110	...	1	...	...	...	...	4	...	115	8	89	...
June	209	...	...	...	...	...	...	16	...	225	4	74	30
July	299	...	...	...	...	...	...	16	...	315	18	115	43
Aug.	298	...	1	...	...	...	...	23	...	322	12	244	86
Sept.	392	...	...	...	1	...	...	12	...	405	22	172	139
Oct.	230	...	...	...	1	...	...	5	...	236	8	164	73
Nov.	310	...	...	...	...	...	...	13	...	323	4	270	42
Dec.	130	...	1	...	...	...	...	9	..	140	9	211	44
Totals	2,418	..	4	...	2	...	...	130	...	2,554	115	1,831	481

NORTH-WESTERN HOSPITAL.

Jan.	86	...	53	...	14	...	...	3	...	156	18	138	42
Feb.	76	...	26	...	5	...	...	9	...	116	18	85	29
Mar.	79	...	30	...	2	...	...	5	...	116	12	92	16
April	59	...	64	...	10	...	...	15	...	148	25	74	60
May	69	...	79	...	6	...	...	13	...	167	17	104	18
June	112	...	71	...	11	...	...	13	...	207	21	109	44
July	117	...	76	...	10	...	...	23	...	226	25	117	32
Aug.	193	...	65	...	11	...	...	7	...	276	32	150	61
Sept.	140	...	71	...	13	...	...	13	...	237	26	153	40
Oct.	142	...	49	...	12	...	...	22	...	225	22	193	16
Nov.	156	...	73	...	13	...	...	17	...	259	30	200	29
Dec.	127	...	71	...	15	...	...	6	...	219	42	178	62
Totals	1,356	...	728	...	122	...	...	146	...	2,352	288	1,593	449

WESTERN HOSPITAL.

Jan.	83	...	52	...	10	...	...	9	...	154	22	72	79
Feb.	72	...	23	...	4	...	...	10	...	109	11	68	48
Mar.	88	...	45	...	3	...	...	24	...	160	11	97	51
April	79	...	43	...	3	...	..	24	...	149	10	65	54
May	96	...	43	...	7	...	...	30	...	176	15	82	94
June	138	...	53	...	10	...	...	37	...	238	23	56	117
July	170	...	70	...	3	...	...	16	...	259	24	62	154
Aug.	172	...	35	...	9	...	...	10	...	226	15	65	166
Sept.	189	...	59	...	8	...	...	15	...	271	12	67	113
Oct.	136	...	58	...	5	...	...	23	...	222	22	71	127
Nov.	155	...	53	...	8	...	...	19	...	235	20	105	128
Dec.	179	...	83	...	8	...	..	21	...	291	33	78	165
Totals	1,557	...	617	...	78	...	...	238	...	2,490	218	888	1,296

of various Diseases, with Discharges and Deaths from all causes during 1895.

SOUTH-WESTERN HOSPITAL.

MONTH.	ADMISSIONS.										DEATHS.	DISCHARGES.	
	Scarlet.		Diphtheria.		Enteric.		Typhus.	Other Diseases.		Total.		Recovered.	To other Hospitals of Board.
	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.		Direct from Homes.	From other Hospitals of Board.				
Jan.	80	...	32	...	12	...	...	11	...	135	15	116	18
Feb.	48	...	24	...	10	...	...	16	...	98	16	110	...
Mar.	74	...	36	...	8	...	...	17	...	135	15	140	...
April	54	...	30	...	4	...	...	6	...	94	13	98	11
May	122	...	44	...	15	...	...	23	...	204	22	91	27
June	132	...	31	...	7	...	..	26	...	196	15	89	56
July	139	...	47	...	9	...	...	15	...	210	21	123	43
Aug.	113	...	51	...	13	...	...	15	...	192	18	162	42
Sept.	165	...	56	...	10	...	..	12	...	243	20	133	57
Oct.	118	...	45	...	16	...	...	16	...	195	18	97	76
Nov.	138	...	45	...	14	...	...	14	...	211	20	154	40
Dec.	111	...	37	...	11	...	...	9	...	168	17	118	40
Totals	1,294	...	478	...	129	...	...	180	...	2,081	210	1,431	410

FOUNTAIN HOSPITAL.

Jan.	64	...	29	...	...	...	...	13	...	106	7	109	33
Feb.	37	...	12	...	...	...	...	6	...	55	13	84	18
Mar.	67	...	16	...	...	...	...	19	...	102	6	95	...
April	45	...	18	...	...	...	...	11	...	74	5	90	9
May	104	...	20	...	...	...	...	8	...	132	4	78	15
June	105	...	79	...	...	...	...	13	...	197	23	82	31
July	155	...	74	...	...	...	...	11	...	240	22	91	48
Aug.	144	...	52	...	...	...	...	6	...	202	14	132	40
Sept.	173	...	72	...	...	...	...	16	...	261	26	168	19
Oct.	141	...	87	...	...	...	...	24	...	252	19	199	41
Nov.	157	...	77	...	...	...	...	9	...	243	28	158	63
Dec.	195	...	73	...	...	...	...	10	...	278	20	168	96
Totals	1,387	...	609	...	...	...	...	146	...	2,142	187	1,454	413

SOUTH-EASTERN HOSPITAL.

Jan.	99	...	39	...	26	...	...	5	...	169	18	59	87
Feb.	93	...	32	...	7	...	...	2	...	134	23	66	48
Mar.	86	1	39	...	9	...	...	5	...	140	20	123	30
April	106	...	42	...	3	...	...	10	...	161	21	106	73
May	119	...	76	...	72	...	..	15	...	282	30	85	107
June	100	1	56	...	14	..	..	17	...	188	19	62	76
July	152	...	43	...	9	...	..	18	...	222	16	106	93
Aug.	209	4	36	...	19	...	...	17	..	285	19	91	143
Sept.	162	...	49	...	22	...	...	9	...	242	29	94	112
Oct.	153	1	43	...	17	...	...	15	...	229	22	106	127
Nov.	210	...	54	...	21	...	...	12	...	297	21	137	135
Dec.	171	...	41	...	14	...	...	24	...	250	31	96	121
Totals	1,660	7	550	...	233	...	...	149	...	2,599	269	1,131	1,152

NORTHERN HOSPITAL.

Jan.	..	275	...	53	...	...	...	...	...	328	...	351	1
Feb.	...	178	...	26	...	...	...	...	...	204	1	255	...
Mar.	...	141	...	14	...	...	..	...	...	155	1	248	1
April	...	250	...	30	...	...	...	...	...	280	1	191	...
May	...	269	...	44	...	...	...	...	...	313	1	289	...
June	...	337	...	68	...	...	...	...	...	405	...	295	1
July	...	417	...	71	...	...	...	...	...	488	...	324	...
Aug.	...	606	...	24	...	...	...	...	...	630	1	537	1
Sept.	...	484	...	58	...	...	...	...	...	542	...	502	...
Oct.	...	470	...	74	...	...	...	...	...	544	2	546	...
Nov.	...	476	...	41	...	...	...	...	...	517	1	523	...
Dec.	...	412	...	70	...	...	...	...	...	482	3	440	...
Totals	...	4,315	...	573	...	...	...	...	...	4,888	11	4,501	4

FEVER STATISTICS.—TABLE II. (*continued*)—*Showing the Monthly Admissions of various Diseases, with Discharges and Deaths from all causes during* 1895.

GORE FARM HOSPITAL.

MONTH.	ADMISSIONS.										DEATHS.	DISCHARGES.	
	Scarlet.		Diphtheria.		Enteric.		Typhus.	Other Diseases.		Total.		Recovered.	To other Hospitals of Board.
	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.		Direct from Homes.	From other Hospitals of Board.				
Jan.	...	...	...	...	...	...	...	...	...	...	...	...	...
Feb.	...	...	...	...	...	...	...	...	...	...	...	...	...
March	...	...	...	...	...	...	...	...	...	...	...	...	...
April	...	...	...	...	...	...	...	...	...	...	...	...	...
May	...	...	...	...	...	...	...	...	...	...	...	...	...
June	...	...	...	...	...	...	...	...	...	...	...	...	...
July	12	48	...	...	...	...	...	...	...	60	...	...	56
Aug.	...	...	...	...	...	...	...	...	...	...	...	...	4
Sept.	...	...	...	...	...	...	...	...	...	...	...	...	...
Oct.	...	...	..	...	...	...	...	...	...	...	...	...	...
Nov.	...	...	...	...	...	...	...	...	...	130	...	...	...
Dec.	...	130	...	...	...	...	...	...	...	...	...	...	...
Totals	12	178	...	...	...	...	...	...	...	190	...	...	60

SUMMARY.

Jan.	656	276	267	53	73	...	...	72	...	1,068	116	1,139	329
Feb.	551	178	154	26	30	...	...	79	...	814	104	831	204
March	594	142	210	14	25	...	2	97	...	928	86	1,047	156
April	538	250	239	30	21	...	...	94	...	892	104	852	282
May	738	269	318	44	103	...	1	122	...	1,282	142	898	312
June	917	338	350	68	44	...	...	155	...	1,466	148	866	406
July	1,156	465	372	71	45	...	...	125	...	1,698	161	1,044	537
Aug.	1,282	611	300	24	71	...	...	98	...	1,751	157	1,488	635
Sept.	1,336	484	366	58	65	...	...	93	...	1,860	166	1,370	542
Oct.	1,121	471	345	74	56	...	...	135	..	1,657	155	1,512	544
Nov.	1,276	476	349	41	66	...	...	108	...	1,799	146	1,697	516
Dec.	1,106	542	365	70	62	...	...	99	...	1,632	187	1,444	612
Grand Totals	11,271	4,502	3,635	573	661	...	3	1,277	...	16,847	1,672	14,188	5,075

FEVER STATISTICS—TABLE III.—*Showing the Admissions and Deaths of Patients from the several Parishes and Unions during 1895.*

Parishes and Unions	Eastern Hospital: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.	North-Eastern Hospital: Scarlet.	Diphtheria.	Enteric.	Other Diseases.	Total Admissions.	Total Deaths.
W. District. Kensington	...	...	...	...	...	...	...	1	...	...	...	1	...
Fulham	...	...	...	...	...	...	...	...	...	...	...	...	...
Paddington	...	1	...	...	...	1	...	21	...	...	1	22	...
Chelsea	...	...	...	...	...	...	...	2	...	...	...	2	...
St. George's	3	...	...	...	...	3	1	14	...	...	...	14	...
Westminster	1	...	...	...	...	1	...	...	...	...	1	1	...
N. District. St. Marylebone	4	3	...	...	1	8	...	50	...	...	5	55	1
St. Pancras	10	3	2	...	3	18	6	148	...	...	5	153	7
Hampstead	...	1	...	...	...	1	...	7	...	...	...	7	1
Islington	90	51	13	2	31	187	33	691	1	...	33	725	38
Hackney	252	94	22	...	36	404	59	237	...	...	10	247	10
Central Dist. St. Giles and St. George, Bloomsbury	2	1	...	...	1	4	...	15	...	...	...	15	...
Strand	3	...	...	...	1	4	...	8	...	...	...	8	...
Holborn	57	39	5	...	19	120	13	276	...	...	15	291	15
London, City of	22	6	1	...	5	34	6	29	...	...	...	29	1
E. District. Shoreditch	89	35	8	...	16	148	11	259	1	...	12	272	15
Bethnal Green	190	54	4	...	31	279	29	143	...	1	10	154	6
Whitechapel	164	58	2	1	29	254	39	140	...	...	8	148	7
St. George-in-the-East	99	41	2	...	17	159	24	46	...	...	3	49	2
Stepney	150	48	5	...	20	223	40	58	...	...	3	61	5
Mile End Old Town	149	68	3	...	18	238	28	48	...	1	4	53	2
Poplar	267	115	24	...	51	457	76	111	...	...	14	125	4
S. District. St. Saviour's	2	4	...	...	...	6	1	1	...	...	...	1	...
St. Olave's	1	1	...	...	2	4	1	...	...	...	...	...	...
Lambeth	2	...	...	...	...	2	...	1	...	...	...	1	...
Wandsworth & Clapham	...	...	...	...	...	...	...	...	...	...	...	...	...
Camberwell	...	8	...	...	...	8	...	...	...	...	...	...	...
Greenwich	3	5	...	...	...	8	...	20	...	...	...	20	...
Woolwich	12	...	2	...	...	14	2	2	...	...	...	2	...
Lewisham	2	...	...	...	...	2	2	...	...	...	...	...	...
Tower of London	1	...	...	...	...	1	...	...	...	...	...	...	...
Tottenham	7	15	3	...	6	29	3	86	1	...	6	93	2
Beyond Met. Area	5	...	1	...	1	7	...	4	1	...	...	5	...
Totals	1,587	649	97	3	288	2,624	374	2,418	4	2	130	2,554	115

Parishes and Unions	North-Western Hospital: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.	Western Hospital: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.
Kensington	45	40	7	...	5	97	25	220	102	12	...	51	385	37
Fulham	20	24	2	...	4	50	12	354	223	15	...	50	642	74
Paddington	56	30	5	...	3	94	10	167	46	4	...	23	240	29
Chelsea	29	17	4	...	5	55	3	237	72	4	...	37	350	31
St. George's	30	7	1	...	1	39	4	163	28	4	...	18	213	15
Westminster	17	1	...	...	4	22	1	34	5	2	...	2	43	2
St. Marylebone	204	39	21	...	15	279	20	106	26	4	...	12	148	7
St. Pancras	428	141	10	...	19	598	63	97	51	2	...	17	167	12
Hampstead	116	16	8	...	5	145	11	11	...	...	...	3	14	...
Islington	121	102	15	...	23	261	34	4	3	1	...	3	11	...
Hackney	30	32	11	...	6	79	10	...	1	...	...	...	1	...
St. Giles and St. George, Bloomsbury	50	10	2	...	1	63	6	26	5	1	...	3	35	...
Strand	8	1	...	...	...	9	2	29	1	...	...	4	34	6
Holborn	62	35	12	...	20	129	10	13	11	1	...	3	28	...
London, City of	10	8	3	...	3	24	3	6	...	...	...	1	7	2
Shoreditch	36	35	8	...	11	90	13	...	...	...	...	...	...	...
Bethnal Green	21	46	4	...	5	76	18	...	1	...	...	2	3	1
Whitechapel	32	50	1	...	8	91	16	...	...	...	...	...	...	...
St. George-in-the-East	7	17	...	...	2	26	4	...	...	...	...	...	...	...
Stepney	12	13	3	...	1	29	5	...	...	...	...	...	...	...
Mile End Old Town	14	28	2	...	1	45	12	...	...	...	...	...	...	...
Poplar	5	24	2	...	3	34	5	...	...	...	...	...	...	...
St. Saviour's	1	1	...	...	...	2	...	5	4	...	...	1	10	1
St. Olave's	...	1	...	...	...	1	1	...	1	...	...	...	1	...
Lambeth	...	1	...	...	...	1	1	31	9	7	...	1	48	2
Wandsworth & Clapham	...	1	...	...	...	1	...	53	24	16	...	6	99	5
Camberwell	...	...	...	...	...	...	...	1	3	5	...	1	10	2
Greenwich	...	...	...	...	...	...	...	...	1	...	...	...	1	...
Woolwich	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lewisham	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tower of London	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tottenham	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Beyond Met. Area	2	8	1	...	1	12	1	...	...	...	...	...	...	...
Totals	1,356	728	122	...	146	2,352	288	1,557	617	78	...	238	2,490	218

Parishes and Unions	South-Western Hospital: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.	Fountain Hospital: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.
Kensington	44	10	2	...	8	64	5	17	12	...	...	1	30	1
Fulham	40	12	2	...	7	61	5	25	29	...	...	6	60	12
Paddington	12	2	3	...	2	19	1	8	2	...	...	1	11	...
Chelsea	30	19	1	...	3	53	7	23	26	...	...	1	50	13
St. George's	131	27	3	...	15	176	10	22	2	...	...	2	26	...
Westminster	46	12	...	...	7	65	3	12	1	...	...	...	13	2
St. Marylebone	8	1	1	...	2	12	...	2	4	...	...	1	7	1
St. Pancras	6	2	...	...	...	8	1	...	...	...	...	2	2	1
Hampstead	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Islington	1	1	...	...	1	3	...	...	...	...	...	...	...	...
Hackney	...	1	...	...	1	2	...	1	...	...	...	...	1	...
St. Giles and St. George, Bloomsbury	12	...	1	...	...	13	2	2	...	...	...	1	3	...
Strand	16	2	1	...	1	20	3	6	...	...	...	1	7	1
Holborn	14	2	...	...	1	17	2	1	...	...	...	...	1	...
London, City of	...	...	1	...	...	1	...	...	...	...	...	...	...	...
Shoreditch	...	1	...	...	2	3	1	...	...	...	...	...	...	...
Bethnal Green	...	...	...	...	1	1	...	...	...	...	...	...	...	...
Whitechapel	...	1	...	...	...	1	...	...	...	...	...	...	...	...
St. George-in-the-East	...	1	...	...	1	2	...	...	...	...	...	...	...	...
Stepney	...	...	...	...	...	...	...	1	1	...	...	...	2	...
Mile End Old Town	1	...	...	...	...	1	...	1	1	...	...	...	2	...
Poplar	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. Saviour's	206	48	12	...	38	304	*35	85	54	...	...	16	155	14
St. Olave's	83	32	4	...	8	127	9	42	28	...	...	8	78	12
Lambeth	272	62	26	...	33	393	34	272	75	...	...	23	370	24
Wandsworth & Clapham	107	29	23	...	10	169	12	668	153	...	...	58	879	64
Camberwell	172	120	17	...	26	335	54	80	80	...	...	7	167	17
Greenwich	48	65	8	...	8	129	16	32	130	...	...	14	176	21
Woolwich	19	21	22	...	2	64	6	31	22	...	...	1	54	3
Lewisham	26	7	2	...	3	38	4	36	9	...	...	3	48	1
Tower of London	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tottenham	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Beyond Met. Area	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	1,294	478	129	...	180	2,081	210	1,287	609	...	...	146	2,042	187

Parishes and Unions	South-Eastern Hospital: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.	Northern Hospital: Total Admissions.	Total Deaths.	Gore Farm Hospital: Total Admissions.
Kensington	1	...	1	...	...	2	1	...	1	...
Fulham	1	...	...	...	...	1	...	...	1	...
Paddington	1	...	...	...	...	1	...	...	1	...
Chelsea	2	...	...	...	...	2	...	...	...	...
St. George's	13	1	...	...	1	15	...	...	1	...
Westminster	4	...	...	...	...	4	...	...	...	...
St. Marylebone	1	...	...	...	...	1	...	...	...	...
St. Pancras	3	...	...	...	...	3	1	...	1	...
Hampstead	...	...	...	...	...	...	...	...	...	...
Islington	1	1	...	...	...	2	...	...	...	...
Hackney	8	1	...	...	...	9	...	...	...	...
St. Giles and St. George, Bloomsbury	4	...	...	...	...	4	...	...	...	...
Strand	5	...	...	...	...	5	...	...	...	...
Holborn	19	...	2	...	1	22	1	...	...	...
London, City of	16	...	1	...	...	17	...	...	...	...
Shoreditch	7	1	2	...	...	10	...	...	...	...
Bethnal Green	6	2	...	...	2	10	1	...	...	...
Whitechapel	25	4	1	...	1	31	2	...	...	...
St. George-in-the-East	12	4	1	...	4	21	1	...	...	...
Stepney	22	10	5	...	3	40	2	...	...	...
Mile End Old Town	25	10	2	...	1	38	4	...	...	...
Poplar	22	12	8	...	4	46	8	...	2	...
St. Saviour's	104	31	18	...	18	171	19	...	...	...
St. Olave's	258	50	22	...	21	351	34	...	...	...
Lambeth	105	15	13	...	5	138	7	...	1	...
Wandsworth & Clapham	47	2	13	...	4	66	4	...	...	...
Camberwell	179	127	27	...	25	358	49	...	...	...
Greenwich	327	182	15	...	29	553	76	...	3	12
Woolwich	296	68	99	...	22	485	46	...	...	...
Lewisham	145	29	3	...	8	185	10	...	...	...
Tower of London	...	...	...	...	...	...	...	...	...	...
Tottenham	...	...	...	...	...	...	...	...	...	...
Beyond Met. Area	1	...	...	...	...	1	1	...	...	...
Totals	1,660	550	233	...	149	2,592	269	...	11	12

Parishes and Unions	Summary: Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Grand Total Admissions.	Grand Total Deaths.
Kensington	328	164	22	...	65	579	79
Fulham	440	288	19	...	67	814	104
Paddington	265	81	12	...	30	388	32
Chelsea	323	134	9	...	46	512	54
St. George's	376	65	8	...	37	486	31
Westminster	114	19	2	...	14	149	8
St. Marylebone	375	73	26	...	36	510	29
St. Pancras	692	197	14	...	46	949	92
Hampstead	134	17	8	...	8	167	12
Islington	908	159	29	2	91	1,189	105
Hackney	528	129	33	...	53	743	79
St. Giles and St. George, Bloomsbury	111	16	4	...	6	137	8
Strand	75	4	1	...	7	87	12
Holborn	442	87	20	...	59	608	41
London, City of	83	14	6	...	9	112	13
Shoreditch	391	73	18	...	41	523	40
Bethnal Green	360	103	9	...	51	523	55
Whitechapel	361	113	4	1	46	525	63
St. George-in-the-East	164	63	3	...	27	257	31
Stepney	243	72	13	...	27	355	53
Mile End Old Town	238	107	8	...	24	377	45
Poplar	405	151	34	...	72	662	95
St. Saviour's	404	142	30	...	73	649	70
St. Olave's	384	113	26	...	39	562	57
Lambeth	683	162	46	...	62	953	69
Wandsworth & Clapham	875	209	52	...	78	1,214	85
Camberwell	432	338	49	...	59	878	122
Greenwich	430	383	23	...	51	899	116
Woolwich	360	111	123	...	25	619	57
Lewisham	209	45	5	...	14	273	17
Tower of London	1	...	...	...	...	1	...
Tottenham	93	14	3	...	12	122	5
Beyond Met. Area	12	9	2	...	2	25	2
Totals	11,271	3,635	661	3	1,277	16,847	1,672

EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	16	3	10	8	26	11
1 to 2 ...	61	19	53	13	114	32
2 to 3 ...	70	21	83	13	153	34
3 to 4 ..	87	16	78	5	165	21
4 to 5 ...	59	4	98	8	157	12
5 to 10 ...	302	9	306	5	608	14
10 to 15 ...	136	5	132	1	268	6
15 to 20 ...	24	...	33	1	57	1
20 to 25 ...	7	...	14	1	21	1
25 to 30 ...	3	...	7	...	10	...
30 to 35 ...	...	...	3	...	3	...
35 to 40 ...	...	...	3	...	3	...
40 to 45 ...	...	...	...	...	...	...
45 to 50 ...	...	...	1	...	1	...
50 to 55 ...	...	...	1	...	1	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals...	765	77	822	55	1,587	132

NORTH-WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	8	2	5	1	13	3
1 to 2 ...	22	...	27	8	49	8
2 to 3 ...	51	6	48	8	99	14
3 to 4 ...	53	4	66	7	119	11
4 to 5 ...	68	10	79	5	147	15
5 to 10 ...	246	3	325	12	571	15
10 to 15 ..	82	1	112	1	194	2
15 to 20 ...	34	1	58	1	92	2
20 to 25 ...	20	...	17	1	37	1
25 to 30 ...	1	...	12	...	13	...
30 to 35 ...	4	...	7	...	11	...
35 to 40 ...	4	...	4	...	8	...
40 to 45 ...	1	...	2	...	3	...
45 to 50 ...	...	...	...	...	...	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals...	594	27	762	44	1,356	71

SOUTH-WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	7	5	5	1	12	6
1 to 2 ...	32	6	32	7	64	13
2 to 3 ...	43	9	39	5	82	14
3 to 4 ...	52	5	59	7	111	12
4 to 5 ...	48	3	54	4	102	7
5 to 10 ...	268	7	276	7	544	14
10 to 15 ...	132	2	111	2	243	4
15 to 20 ...	41	...	35	1	76	1
20 to 25 ...	11	...	17	..	28	...
25 to 30 ...	9	...	9	...	18	...
30 to 35 ...	4	...	7	...	11	...
35 to 40 ...	1	...	...	...	1	...
40 to 45 ...	...	...	...	...	...	...
45 to 50 ...	1	...	...	...	1	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	1	...	1	...
And upwards	...	...	...	...	...	...
Totals ...	649	37	645	34	1,294	71

NORTH-EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	8	3	5	...	13	3
1 to 2 ..	39	5	39	6	78	11
2 to 3 ...	90	10	72	13	162	23
3 to 4 ...	113	9	116	9	229	18
4 to 5 ...	126	8	103	9	229	17
5 to 10 ...	476	16	497	13	973	29
10 to 15 ...	266	3	228	...	494	3
15 to 20 ...	72	...	65	...	137	...
20 to 25 ...	17	...	34	...	51	...
25 to 30 ...	13	...	18	...	31	...
30 to 35 ...	3	...	5	...	8	...
35 to 40 ...	5	...	5	...	10	...
40 to 45 ...	...	...	1	...	1	...
45 to 50 ...	...	...	1	...	1	...
50 to 55 ...	1	...	...	...	1	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
[illegible]	[illegible]	51	[illegible]	50	2,110	101

WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	7	1	14	2	21	3
1 to 2 ...	29	5	20	3	49	8
2 to 3 ...	58	8	33	7	91	15
3 to 4 ...	67	5	80	8	147	13
4 to 5 ...	81	5	93	4	174	9
5 to 10 ...	275	6	347	9	622	15
10 to 15 ...	84	...	181	3	265	3
15 to 20 ...	29	...	57	...	86	...
20 to 25 ...	11	...	34	1	45	1
25 to 30 ...	12	...	18	...	30	...
30 to 35 ...	4	...	10	...	14	...
35 to 40 ...	1	...	3	...	4	...
40 to 45 ...	1	...	4	...	5	...
45 to 50 ...	1	1	1	...	2	1
50 to 55 ...	2	...	...	...	2	...
55 to 60 ...	...	...	...	...	..	...
And upwards	...	...	...	...	...	...
Totals	662	31	895	37	1,557	68

FOUNTAIN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	6	2	9	3	15	5
1 to 2 ...	26	4	17	3	43	7
2 to 3 ...	50	7	40	5	90	12
3 to 4 ...	50	5	59	6	109	11
4 to 5 ...	79	6	82	5	161	11
5 to 10 ...	289	11	291	8	580	19
10 to 15 ...	128	...	127	1	255	1
15 to 20 ...	42	...	33	...	75	...
20 to 25 ...	12	...	12	...	24	...
25 to 30 ...	8	...	10	...	18	...
30 to 35 ...	1	...	5	...	6	...
35 to 40 ..	5	...	4	...	9	...
40 to 45 ..	...	...	1	...	1	...
45 to 50 ..	1	...	...	...	1	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals...	697	35	690	51	1,387	66

SOUTH-EASTERN HOSPITAL.

AGES.	Males.		Females		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1	10	4	11	...	21	4
1 to 2	31	4	15	3	46	7
2 to 3	44	4	35	6	79	10
3 to 4	72	6	79	15	151	21
4 to 5	82	5	64	1	146	6
5 to 10	359	11	336	8	695	19
10 to 15	192	1	158	3	350	4
15 to 20	50	1	37	...	87	1
20 to 25	27	...	25	...	52	...
25 to 30	11	...	6	...	17	...
30 to 35	5	...	5	...	10	...
35 to 40	2	...	1	...	3	...
40 to 45	1	...	1	...	2	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	1	...	...	...	1	...
And upwards...	...	...	...	...	...	...
Totals	887	36	773	36	1,660	72

GORE FARM HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1	...	...	...	...	...	...
1 to 2	...	...	...	...	...	...
2 to 3	...	...	...	...	...	...
3 to 4	...	...	...	...	...	...
4 to 5	...	...	...	...	...	...
5 to 10	...	...	...	...	...	...
10 to 15	12	...	...	...	12	...
15 to 20	...	...	...	..	...	...
20 to 25	...	...	...	...	...	...
25 to 30	...	...	...	...	...	...
30 to 35	...	...	...	...	...	...
35 to 40	...	...	..	...	...	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals	12	...	...	...	12	...

NORTHERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1	...	...	...	...	...	...
1 to 2	...	...	...	...	...	...
2 to 3	...	...	...	...	...	...
3 to 4	...	1	...	2	...	3
4 to 5	...	2	...	...	...	2
5 to 10	...	1	...	1	...	2
10 to 15	...	...	...	...	...	...
15 to 20	...	...	...	...	...	...
20 to 25	...	...	...	...	...	...
25 to 30	...	...	...	...	...	...
30 to 35	...	...	...	...	...	...
35 to 40	...	...	...	...	...	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals	...	4	...	3	...	*7

SUMMARY.

AGES.	Males.			Females.			Total.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Combined Mortality per cent.
Under 1	62	20	32·3	59	15	25·4	121	35	28·9
1 to 2	240	43	17·9	203	43	21·2	443	86	19·4
2 to 3	406	65	16·0	350	57	16·3	756	122	16·1
3 to 4	494	51	10·3	537	59	11·0	1,031	110	10·7
4 to 5	543	43	7·9	573	36	6·3	1,116	79	7·0
5 to 10	2,215	64	2·9	2,378	63	2·6	4,593	127	2·8
10 to 15	1,032	12	1·2	1,049	11	1·0	2,081	23	1·1
15 to 20	292	2	0·7	318	3	0·9	610	5	0·8
20 to 25	105	...		153	3		258	3	
25 to 30	57	...		80	...		137	...	
30 to 35	21	...		42	...		63	...	
35 to 40	18	...		20	...		38	...	
40 to 45	3	...	0·5	9	...	1·0	12	...	0·8
45 to 50	3	1		3	..		6	1	
50 to 55	3	...		1	...		4	...	
55 to 60	1	...		1	...		2	...	
And upwards	...	...		...	...		...	...	
Grand Totals	5,495	301	5·5	5,776	290	5·0	11,271	591	5·2

*Transferred cases.

FEVER STATISTICS.—TABLE V.—SCARLET FEVER CASES—*List of Complications*, 1895.

COMPLICATIONS.	NUMBER OF CASES AT EACH HOSPITAL.									SUMMARY.
	Eastern Hospitals.	North-Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospitals.	Fountain Hospital.	South-Eastern Hospital.	Northern Hospital. (Convalescent.)	Gore Farm Hospital.	
Abscess Mastoid ...	3	12	5	11	10	9	4	...	...	54
Abscesses, other ...	57	78	33	31	3	22	22	18	...	264
Adenitis of Convalescence	99	141	108	155	150	40	31	...	...	724
Albuminuria ...	100	320	56	88	63	58	74	29	...	788
Bronchitis	42	18	13	17	25	8	15	8	...	146
Cervical Cellulitis ...	7	3	3	6	2	5	6	...	...	32
Endocarditis ...	4	12	7	5	4	16	38	2	...	88
Empyema	1	6	...	1	4	2	...	...	...	14
Laryngitis	6	13	...	1	7	6	6	...	..	39
Meningitis	3	1	...	3	1	...	...	...	...	8
Nephritis	84	150	42	67	44	68	56	12	...	523
Ophthalmia	38	32	5	4	5	9	4	6	...	103
Pericarditis	2	3	...	6	2	2	2	1	...	18
Otitis	235	304	197	224	187	198	97	71	...	1,513
Pleurisy	7	4	4	16	6	7	2	1	...	47
Pneumonia Lobar ...	13	11	13	18	2	3	4	5	...	69
,, Lobular	30	27	9	16	11	42	27	1	...	163
Pyæmia	5	5	...	...	...	2	2	...	...	14
Relapse of Disease ...	12	11	3	11	9	3	13	18	...	80
Rheumatism... ...	55	81	28	47	67	32	99	9	...	418
Stomatitis	29	2	9	35	28	46	3	66	...	218
Tonsillitis of Convalescence	44	20	7	23	26	35	35	64	...	254

FEVER STATISTICS.—TABLE VI.—*Diseases co-existent with the attack of Scarlet Fever, and more or less prejudicial to recovery during* 1895.

DISEASES.	Eastern Hospital.		North-Eastern Hospital.		North-Western Hospital.		Western Hospital.		South-Western Hospital.		Fountain Hospital.		South-Eastern Hospital.		Northern Hospital. (Convalescent.)		Gore Farm Hospital.		SUMMARY.	
	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.
Chickenpox	9	23	12	25	2	8	5	12	2	10	6	25	4	11	...	36	...	...	40	150
Diphtheria... ...	33	68	4	37	8	18	17	25	10	28	13	58	48	55	...	119	...	...	133	408
Enteric Fever ...	...	...	...	...	...	...	...	...	2	...	...	...	...	1	...	2	...	...	2	3
Erysipelas	...	3	...	...	2	...	2	...	...	...	...	3	...	1	...	1	...	...	4	8
German Measles ...	2	...	4	18	...	...	4	9	3	3	...	11	...	4	...	20	...	...	13	62
Influenza	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Measles	6	22	6	32	3	14	2	8	5	8	...	3	1	26	...	7	...	...	23	120
Mumps	...	...	...	1	...	...	...	1	...	...	...	2	1	1	...	...	...	...	1	5
Tuberculosis	6	2	5	...	1	...	2	1	...	...	1	...	...	...	...	...	...	...	15	3
Whooping Cough... ...	12	1	11	12	6	1	6	1	9	6	3	3	4	1	...	3	...	...	51	28

EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	5	4	6	3	11	7
1 to 2 ...	33	13	19	11	52	24
2 to 3 ...	29	12	38	10	67	22
3 to 4 ...	46	11	37	12	83	23
4 to 5 ...	48	13	49	19	97	32
5 to 10 ...	95	26	93	28	183	54
10 to 15 ...	34	1	46	3	80	4
15 to 20 ...	10	...	23	2	33	2
20 to 25 ...	7	...	10	...	17	...
25 to 30 ...	3	...	6	...	9	...
30 to 35 ...	3	...	6	...	9	...
35 to 40 ...	1	...	1	...	2	...
40 to 45 ...	...	...	...	...	...	...
45 to 50 ...	...	...	...	...	...	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	1	...	1	...
Totals ...	314	80	335	88	649	168

NORTH-WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	9	5	6	2	15	7
1 to 2 ...	38	22	23	12	61	34
2 to 3 ...	32	14	30	9	62	23
3 to 4 ...	49	17	55	16	104	33
4 to 5 ...	31	13	45	12	76	25
5 to 10 ...	107	14	157	31	264	45
10 to 15 ...	17	...	51	9	68	9
15 to 20 ...	8	1	20	1	28	2
20 to 25 ...	7	...	11	...	18	...
25 to 30 ...	3	...	9	...	12	...
30 to 35 ...	2	...	5	...	7	...
35 to 40 ...	3	...	3	...	6	...
40 to 45 ...	1	...	1	...	2	...
45 to 50 ...	2	1	1	...	3	1
50 to 55 ...	1	...	...	...	1	...
55 to 60 ...	...	...	1	...	1	...
And upwards	...	...	...	...	...	...
Totals ...	310	87	418	92	728	179

SOUTH-WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	3	1	3	2	6	3
1 to 2 ...	14	6	16	9	30	15
2 to 3 ...	21	7	14	6	35	13
3 to 4 ...	24	4	27	9	51	13
4 to 5 ...	33	9	25	14	58	23
5 to 10 ...	90	10	111	20	201	30
10 to 15 ...	34	1	25	5	59	6
15 to 20 ...	6	...	9	1	15	1
20 to 25 ...	1	1	4	...	5	1
25 to 30 ...	4	...	6	1	10	1
30 to 35 ...	1	1	5	...	6	...
35 to 40 ...	1	...	1	...	2	...
40 to 45 ...	..	...	...	...	...	...
45 to 50 ...	...	...	...	...	...	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals ...	232	39	246	67	478	106

NORTH-EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	...	...	...	...	...	...
1 to 2 ...	..	...	...	...	...	...
2 to 3 ...	...	...	...	...	...	...
3 to 4 ...	...	...	...	...	...	...
4 to 5 ...	...	...	1	1	1	1
5 to 10 ...	1	...	...	...	1	...
10 to 15 ...	1	...	...	...	1	...
15 to 20 ...	...	...	...	...	...	...
20 to 25 ...	...	...	...	...	...	...
25 to 30 ...	1	...	...	...	1	...
30 to 35 ...	...	...	...	..	...	...
35 to 40 ...	...	...	...	...	...	...
40 to 45 ...	...	...	...	...	...	...
45 to 50 ...	...	...	...	...	...	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals ...	3	...	1	1	4	1

WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	7	2	3	1	10	3
1 to 2 ...	15	5	18	7	33	12
2 to 3 ...	28	6	20	6	48	12
3 to 4 ...	51	15	39	9	90	24
4 to 5 ...	40	7	41	13	81	20
5 to 10 ...	109	17	114	24	223	41
10 to 15 ...	24	3	38	3	62	6
15 to 20 ...	3	1	17	2	20	3
20 to 25 ...	3	...	11	...	14	...
25 to 30 ...	4	...	8	...	12	...
30 to 35 ...	6	...	11	...	17	...
35 to 40 ...	1	...	4	...	5	...
40 to 45 ...	...	...	1	...	1	...
45 to 50 ...	...	...	...	...	...	...
50 to 55 ...	...	...	1	...	1	...
55 to 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals ...	291	56	326	65	617	121

FOUNTAIN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1 ...	10	1	1	1	11	2
1 to 2 ...	14	7	19	6	33	13
2 to 3 ...	21	5	23	9	44	14
3 to 4 ...	34	16	35	12	69	28
4 to 5 ...	50	10	28	4	78	14
5 to 10 ...	96	16	120	21	216	36
10 to 15 ...	39	1	48	2	87	3
15 to 20 ...	13	1	18	2	31	3
20 to 25 ...	2	...	10	...	12	..
25 to 30 ...	6	...	8	1	14	1
30 to 35 ...	2	...	4	...	6	...
35 to 40 ...	...	...	3	...	3	...
40 to 45 ...	...	...	1	...	1	...
45 to 50 ...	1	...	...	...	1	...
50 to 55 ...	...	...	...	...	...	...
55 to 60 ...	...	...	1	...	1	...
And upwards	1	...	1	...	2	...
Totals ...	289	57	320	58	609	115

Admissions and Deaths at various ages during 1895.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1	4	1	5	1	9	2
1 to 2	21	9	19	9	40	18
2 to 3	23	9	23	7	46	16
3 to 4	23	8	36	9	59	17
4 to 5	26	7	46	13	72	20
5 to 10	97	23	105	21	202	44
10 to 15	28	4	47	4	75	8
15 to 20	8	...	15	...	23	...
20 to 25	5	...	2	...	7	...
25 to 30	...	...	5	...	5	...
30 to 35	1	...	3	...	4	...
35 to 40	...	...	1	...	1	...
40 to 45	...	...	2	1	2	1
45 to 50	...	...	3	...	3	...
50 to 55	1	...	...	...	2	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals	237	61	313	65	550	126

Northern Hospital.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1	...	...	...	...	...	...
1 to 2	...	...	...	...	...	...
2 to 3	...	...	...	...	...	...
3 to 4	...	...	...	...	...	...
4 to 5	...	...	...	1	...	1
5 to 10	...	1	...	1	...	2
10 to 15	...	...	...	1	...	1
15 to 20	...	...	...	...	...	...
20 to 25	...	...	...	...	...	...
25 to 30	...	...	...	...	...	...
30 to 35	...	...	...	...	...	...
35 to 40	...	...	...	...	...	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals	...	1	...	3	...	4

SUMMARY.

AGES.	Males.			Females.			Total.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Combined Mortality per cent.
Under 1	38	14	36·8	24	10	41·7	62	24	38·7
1 to 2	135	62	45·9	114	54	47·4	249	116	46·6
2 to 3	154	53	34·4	148	47	31·8	302	100	33·1
3 to 4	227	71	31·3	229	67	29·3	456	138	30·3
4 to 5	228	59	25·9	235	77	32·8	463	136	29·4
5 to 10	595	107	18·0	700	146	20·9	1,295	253	19·5
10 to 15	177	10	5·6	255	27	10·6	432	37	8·6
15 to 20	48	3	6·2	102	8	7·8	150	11	7·3
20 to 25	25	1		48	...		73	1	
25 to 30	21	...		42	2		63	2	
30 to 35	15	...		34	...		49	...	
35 to 40	6	...		13	...		19	...	
40 to 45	1	...	2·7	5	1	2·0	6	1	2·2
45 to 50	3	1		4	...		7	1	
50 to 55	2	...		2	...		4	...	
55 to 60	...	...		2	...		2	...	
And upwards...	1	...		2	...		3	...	
Grand Totals	1,676	381	22·7	1,959	439	22·4	3,635	820	22·6

COMPLICATIONS.	NUMBER OF CASES.								SUMMARY.
	Eastern Hospital.	North-Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospital.	Fountain Hospital.	South-Eastern Hospital.	Northern Hospital (Convalescent.)	
Albuminuria...	243	...	195	277	241	222	289	12	1,479
Nephritis	1	...	28	9	4	11	4	3	60
Paralysis, various	103	...	138	98	103	94	193	14	743
Pneumonia, Lobar	12	...	6	8	1	2	2	1	32
Pneumonia, Lobular	10	...	24	8	11	26	19	1	99
Relapse of Disease	6	...	2	7	7	13	11	3	49

FEVER STATISTICS.—TABLE IX.—*Diseases co-existent with the attack of Diphtheria, and more or less prejudicial to recovery during* 1895.

DISEASES.	Eastern Hospital.		North-Eastern Hospital.		North-Western Hospital.		Western Hospital.		South-Western Hospital.		Fountain Hospital.		South-Eastern Hospital.		Northern Hospital (Convalescent.)		Gore Farm Hospital.		SUMMARY.	
	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.
Chickenpox	4	5	...	...	1	1	...	...	1	...	3	3	1	4	...	7	...	...	10	20
Enteric Fever	...	...	...	...	...	1	...	...	1	...	1	...	...	...	...	...	...	...	2	1
German Measles	...	1	...	...	...	...	2	3	...	...	...	...	...	...	...	...	...	...	2	4
Influenza	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	1
Measles	6	3	...	...	2	6	1	2	4	...	1	...	1	12	...	...	...	...	15	23
Scarlet Fever	*	30	...	...	21	38	*	41	*	24	4	50	*	16	...	44	...	...	25	243
Tuberculosis	3	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	5	..
Whooping Cough... ...	3	...	...	...	1	3	1	...	3	...	1	...	2	...	...	..	...	...	11	3

Tabulated in Table VI.

EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	1	...	...	...	1	...
5 to 10	6	...	7	1	13	1
10 to 15	8	1	8	3	16	4
15 to 20	10	2	10	3	20	5
20 to 25	8	3	5	3	13	6
25 to 30	13	5	9	2	22	7
30 to 35	3	2	5	2	8	4
35 to 40	1	...	2	...	3	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	1	1	...	...	1	1
And upwards	...	...	...	...	...	...
Totals	51	14	46	14	97	28

NORTH-EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	...	...	...	...	...	...
5 to 10	...	...	...	...	...	...
10 to 15	1	1	...	...	1	1
15 to 20	1	...	...	...	1	...
20 to 25	...	...	...	...	...	...
25 to 30	...	...	...	...	...	...
30 to 35	...	...	...	...	...	...
35 to 40	...	...	...	...	...	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals	2	1	...	...	2	1

NORTH-WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	1	...	...	...	1	...
5 to 10	8	...	6	...	14	...
10 to 15	17	1	15	...	32	1
15 to 20	10	3	11	...	21	3
20 to 25	11	3	10	1	21	4
25 to 30	5	2	8	1	13	3
30 to 35	1	...	5	1	6	1
35 to 40	2	1	5	...	7	1
40 to 45	2	1	2	...	4	1
45 to 50	1	...	...	...	1	...
50 to 55	1	...	...	...	1	...
55 to 60	1	1	...	...	1	1
And upwards	...	...	...	...	...	...
Totals	60	12	62	3	122	15

WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	...	...	1	...	1	...
5 to 10	3	...	7	...	10	...
10 to 15	4	...	7	1	11	1
15 to 20	8	1	8	1	16	2
20 to 25	11	1	3	1	14	2
25 to 30	7	2	3	1	10	3
30 to 35	4	1	4	1	8	2
35 to 40	...	...	3	...	3	...
40 to 45	1	...	1	2	2	2
45 to 50	...	...	2	...	2	...
50 to 55	...	...	...	...	...	...
55 to 60	1	1	...	...	1	1
And upwards	...	...	...	...	...	...
Totals	39	6	39	7	78	13

SOUTH-WESTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	3	1	2	...	5	1
5 to 10	11	...	3	...	14	...
10 to 15	14	1	12	1	26	2
15 to 20	15	...	8	...	23	...
20 to 25	9	1	11	2	20	3
25 to 30	12	3	12	1	24	4
30 to 35	5	1	3	...	8	1
35 to 40	2	...	4	3	6	3
40 to 45	2	1	1	...	3	1
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals ...	73	8	56	7	129	15

SOUTH-EASTERN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	10	2	10	3	20	5
5 to 10	22	4	17	3	39	7
10 to 15	25	6	13	2	48	8
15 to 20	23	3	21	3	44	6
20 to 25	15	3	8	2	23	5
25 to 30	9	2	13	3	22	5
30 to 35	9	5	11	2	20	7
35 to 40	3	...	8	2	11	2
40 to 45	3	1	...	...	3	1
45 to 50	...	...	2	1	2	1
50 to 55	1	...	...	...	1	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals ...	130	26	103	21	233	47

FOUNTAIN HOSPITAL.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	...	...	...	...	...	...
5 to 10	...	...	...	...	...	...
10 to 15	...	...	...	...	...	...
15 to 20	...	...	...	...	...	...
20 to 25	...	...	...	...	...	...
25 to 30	...	...	...	...	...	...
30 to 35	...	...	...	...	...	...
35 to 40	...	...	...	...	...	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals ...	...	...	...	...	...	...

SUMMARY.

AGES.	Males.			Females.			Total.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Combined Mortality per cent.
Under 5 ...	15	3	20·0	13	3	23·1	28	6	21·4
5 to 10 ...	50	4	8·0	40	4	10·0	90	8	8·9
10 to 15 ...	79	10	12·7	55	7	12·7	134	17	12·7
15 to 20 ...	67	9	13·4	58	7	12·1	125	16	12·8
20 to 25 ...	54	11	20·4	37	9	24·3	91	20	22·0
25 to 30 ...	46	14	30·4	45	8	17·8	91	22	24·2
30 to 35 ...	22	9	40·9	28	6	21·4	50	15	30·0
35 to 40 ...	8	1	12·5	22	5	22·7	30	6	20·0
40 to 45 ...	8	3		4	2		12	5	
45 to 50 ...	1	...	42·9	4	1	37·5	5	1	40·9
50 to 55 ...	2	...		...	...		2	...	
55 to 60 ...	3	3		...	...		3	3	
And upwards	...	...		...	...		...	...	
Grand Totals	355	67	18·9	306	52	17·0	661	119	18·0

FEVER STATISTICS.—TABLE XI.—*Enteric*

COMPLICATIONS.	NUMBER		
	Eastern Hospital.	North-Eastern Hospital.	North-Western Hospital.
Abscesses, various	4	...	1
Hæmorrhage	7	...	11
Nephritis	3	...	1
Parotitis	1	...	1
Perforation	2	...	5
Periostitis	1	...	1
Peritonitis	2	...	3
Phlebitis	1	...	1
Pleurisy	1	...	1
Pneumonia, Lobar	2	...	8
Pneumonia, Lobular	...	...	4
Postfebrile Insanity	1	...	...
Relapse of Disease	12	...	2

Fever Cases. List of Complications, 1895.

OF CASES.					SUMMARY.
Western Hospital.	South-Western Hospital.	Fountain Hospital.	South-Eastern Hospital.	Northern Hospital.	
1	4	...	5	...	15
13	15	...	12	...	58
...	...	...	...	...	4
1	1	...	4	...	8
6	1	...	6	...	20
3	1	...	...	...	6
7	1	...	6	...	19
3	2	...	1	...	8
2	3	...	11	...	18
3	1	...	14	...	28
3	...	...	7	...	14
...	1	...	1	...	3
12	24	...	14	...	64

FEVER STATISTICS.—TABLE XII.—*Diseases co-existent with the attack of Enteric Fever, and more or less prejudicial to recovery during* 1895.

DISEASES.	Eastern Hospital.		North-Eastern Hospital.		North-Western Hospital.		Western Hospital.		South-Western Hospital.		Fountain Hospital.		South-Eastern Hospital.		Northern Hospital.		Gore Farm Hospital.		SUMMARY.	
	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.	Before Admission.	After Admission.
Diphtheria	1	...	...	...	...	...	1	...	1	...	...	...	3	11	...	...	...	...	6	11
Influenza	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1
Mumps	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	1	...	...	...	3	...	...	...	...	...	4
Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...
Whooping Cough	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...

FEVER STATISTICS.—TABLE XIII.—*Typhus Fever Admissions and Deaths at various ages during* 1895.

AGES.	Males.		Females.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
EASTERN HOSPITAL.						
Under 5	...	...	...	...	...	...
5 to 10	...	...	...	...	...	...
10 to 15	...	...	...	...	...	...
15 to 20	...	...	...	...	...	...
20 to 25	1	...	...	...	1	...
25 to 30	1	...	1	...	2	...
30 to 35	...	...	...	...	...	...
35 to 40	...	...	...	...	...	...
40 to 45	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	..	...	...	...
55 to 60	...	...	...	...	...	...
and upwards	...	...	...	...	...	...
Totals	2	...	1	...	3	...

FEVER STATISTICS.—TABLE XIV.—*Details of*

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Scarlet Fever		GENERAL DISEASES.				
		Specific Febrile.				
		Chickenpox	1	...	...	...
		Erysipelas	...	...	...	...
		Febricula	1	...	4	...
		Influenza	5	...	5	...
		Measles	16	4	23	4
		,, German	12	...	1	...
		Puerperal Fever	...	...	...	...
		Pyæmia	1	1	...	...
		Smallpox	...	...	...	...
		Syphilis	...	...	1	...
		Tuberculosis, Acute	...	...	1	1
		Vaccinia	...	...	...	...
		Whooping-cough	2	...	1	1
		Not classified.				
		Rheumatism	1	...	...	...
		Rickets	1	...	...	...
		LOCAL DISEASES.				
		Nervous System.				
		Cerebral Tumour	1	1	...	...
		Meningitis	3	3	...	...
		Circulatory System.				
		Endocarditis	...	...	...	...
		Varicose Veins	...	...	1	...
		Respiratory System.				
		Bronchitis	1	...	3	2
		Coryza	...	...	...	...
		Laryngitis	...	...	2	...
		Pleurisy	...	...	1	...
		Pneumonia, Lobar	4	3	3	...
		,, Lobular	4	...	...	...
		Digestive System.				
		Acute Peritonitis	...	...	..	...
		Gastro-Enteritis	1	...	...	...
		Intestinal Tuberculosis	...	...	...	...
		Postpharyngeal Abscess and Empyema	...	...	1	1
		Stomatitis	1	...	1	...
		Tonsillitis	5	...	21	...
		Urinary System.				
		Nephritis	5	2	2	...
		Skin Diseases.				
		Drug Rashes	...	...	1	...
		Eczema, various forms	2	...	4	...
		Erythema, various forms ...	7	...	1	...
		Generative System.				
		Balanitis	...	...	...	...
		Vaginitis	..	...	1	...
		Local Injuries.				
		Burns	2	...	1	...
		Not classified.				
		Abscesses	4	...	...	..
		Marasmus	...	...	...	...
		No obvious disease	11	...	48	...
		Otorrhœa	1	...	...	...
	413		92	14	127	9
Carried forward ...	413		92	14	127	9

Miscellaneous Diseases admitted during 1895.

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
...	...	...	...	...	...	...	...	1	...	2	...
...	...	...	...	1	...	...	...	...	...	1	...
...	...	...	...	...	...	7	...	1	...	13	...
...	...	...	...	1	...	1	...	1	...	13	...
3	2	8	...	3	1	6	3	6	...	65	14
1	...	13	...	3	...	14	...	5	...	49	...
1	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	1	...	...	...	...	...	1	...
1	...	...	...	...	...	...	...	...	...	2	...
...	...	1	1	...	...	...	...	...	...	2	2
1	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	1	..	...	...	...	...	4	1
...	...	1	1	...	...	...	...	1	...	3	1
...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	3	3
1	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...
...	...	1	...	1	...	...	...	...	...	6	2
...	...	1	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	1	...
...	...	1	...	1	...	...	...	2	...	11	3
...	...	...	...	...	...	...	...	...	...	4	...
..	...	1	1	...	...	...	...	...	...	1	1
...	...	2	...	...	...	...	...	1	...	4	...
...	...	1	1	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	2	...
3	...	6	...	18	...	3	...	13	...	69	...
...	...	...	...	1	...	1	1	...	...	9	3
...	...	...	...	...	...	2	...	...	...	3	...
1	...	1	...	2	...	1	...	1	...	12	...
3	...	2	...	1	...	...	...	...	...	14	...
...	...	...	...	1	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	3	...
...	...	...	...	1	...	...	...	...	...	5	...
...	...	...	...	1	...	...	...	...	...	1	...
8	...	2	...	12	...	10	...	4	...	95	...
...	...	...	...	...	...	...	...	...	...	1	...
23	2	41	4	49	1	45	4	36	...	413	34
23	2	41	4	49	1	45	4	36	...	413	34

FEVER STATISTICS.—TABLE XIV. (*continued*)—*Details*

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths
Brought forward ..	413	... ...	92	14	127	9
Diphtheria		GENERAL DISEASES.				
		Specific Febrile.				
		Enteric Fever	...	...	...	...
		Erysipelas	...	...	...	...
		Influenza	1	...	...	...
		Measles	6	5	...	...
		,, German	...	...	...	...
		Pyæmia	...	...	...	...
		Septicæmia, Puerperal	...	...	...	...
		Syphilis	2	...	...	...
		Tuberculosis, Acute	...	...	...	...
		Whooping-cough	1	1	...	...
		Not classified.				
		Anæmia	1	...	...	...
		Rheumatism	...	...	...	...
		Rickets	...	...	...	...
		LOCAL DISEASES.				
		Nervous System.				
		Laryngismus Stridulus	...	...	...	...
		Meningitis	...	...	...	...
		Respiratory System.				
		Bronchitis	...	...	...	...
		Coryza	1	...	...	...
		Laryngitis	2	...	...	...
		Pneumonia, Lobar	2	2	...	...
		,, Lobular	4	2	...	...
		Digestive System.				
		Gastro-Enteritis	2	2	...	...
		Intussusception	1	1	...	...
		Post-Pharyngeal Abscess ...	...	...	...	...
		Stomatitis	2	...	...	...
		Tonsillitis, various forms ...	107	...	...	...
		Gangrene of Fauces	...	...	...	...
		Urinary System.				
		Diabetic Coma	...	...	...	...
		Skin Diseases.				
		Dermatitis	1	...	...	...
		Erythema	...	...	...	...
		Local Injuries.				
		Wound of Thumb	1	...	...	...
		Not Classified.				
		Cellulitis	...	...	...	...
		Abscess of Jaw	...	...	...	...
		Marasmus	1	1	...	...
		No obvious disease	...	...	...	...
	651		135	14	...	...
Carried forward ...	1,064	.. ..	227	28	127	9

of Miscellaneous Diseases admitted during 1895.

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
23	2	41	4	49	1	45	4	36	...	413	34
1	...	...	...	...	...	1	...	...	...	2	...
...	...	...	...	...	...	1	...	...	...	1	...
1	...	...	...	...	...	3	...	1	...	6	...
...	...	1	1	5	1	3	...	8	4	23	11
...	...	1	...	...	...	...	...	...	...	1	...
...	...	1	1	...	...	...	...	...	...	1	1
...	...	1	1	...	...	...	...	...	...	1	1
...	...	2	...	...	...	...	...	2	...	6	...
1	1	...	...	...	...	...	...	...	...	1	1
...	...	1	1	...	...	...	...	...	...	2	2
...	...	...	...	...	...	...	...	...	...	1	..
...	...	...	..	...	...	2	...	...	...	2	...
...	...	1	...	...	...	...	...	...	...	1	...
...	...	...	..	...	...	1	...	...	..	1	...
2	2	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	1	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...
...	...	4	...	2	2	...	...	2	1	10	3
4	4	3	2	1	...	...	...	...	...	10	8
...	...	2	1	...	...	2	2	...	...	8	5
...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	...	...	...	...	1	1
1	...	...	...	2	1	...	...	...	...	3	1
3	...	2	...	2	...	1	...	...	...	10	...
55	1	159	1	88	2	77	...	47	...	533	4
...	...	1	...	...	...	...	...	...	...	1	...
...	...	1	1	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	1	...
...	...	1	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...
1	1	...	...	...	...	...	...	...	...	1	1
...	...	1	...	...	...	...	...	1	...	2	...
...	...	...	...	...	...	...	...	...	...	1	1
3	...	...	...	...	...	9	...	...	...	12	...
72	9	182	9	100	6	101	2	61	5	651	45
95	11	223	13	149	7	146	6	97	5	1,064	79

FEVER STATISTICS—TABLE XIV. *(continued)*—*Details*

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward ...	1064	... ...	227	28	127	9
Enteric Fever		GENERAL DISEASES.				
		Specific Febrile.				
		Febricula	7	...	...	...
		Influenza	3	...	...	...
		Measles	1	...	...	...
		Pyæmia	...	...	...	...
		Septicæmia	...	...	...	...
		Smallpox	...	...	...	...
		Syphilis	1	...	...	...
		Tuberculosis	3	3	...	...
		Whooping-cough	...	...	...	...
		Not classified.				
		Chlorosis	1	...	...	...
		Rheumatism	...	...	...	...
		LOCAL DISEASES.				
		Nervous System.				
		Cephalalgia	...	...	...	...
		Delirium Tremens...	...	...	...	...
		Epilepsy	1	...	...	...
		Mania	...	...	...	...
		Cerebral Hæmorrhage	...	...	...	...
		Meningitis, Simple	3	3	...	...
		,, Tuberculous ...	...	...	...	...
		Myelitis	1	...	...	...
		Respiratory System.				
		Bronchitis	2	...	...	...
		Empyema	3	1	...	...
		Phthisis	3	...	...	...
		Pleurisy	2	...	...	...
		Pneumonia, Lobar	10	3	...	...
		,, Lobular	1	...	...	...
		Digestive System.				
		Cirrhosis of Liver	...	...	...	...
		Constipation	3	...	...	...
		Dentition	1	...	...	...
		Dyspepsia	2	...	...	...
		Enteritis	3	2	...	...
		Gastritis	...	...	...	...
		Intestinal Obstruction	...	...	...	...
		Peritoneal Tuberculosis ...	...	...	...	...
		Peritonitis	1	1	...	...
		Perityphlitis	4	1	...	...
		Tonsillitis...	...	...	...	...
		Ulcerative Colitis	...	...	...	...
		Urinary System.				
		Hydro-nephrosis	...	...	...	...
		Nephritis	1	1	...	...
		,, Tuberculous... ...	...	...	...	...
		Retention of Urine...	...	...	...	...
		Urethral Stricture	...	...	...	...
	180	Carried forward	57	15	...	...
Carried forward... ...	1244	... ...	284	43	127	9

of Miscellaneous Diseases admitted during 1895.

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
95	11	223	13	149	7	146	6	97	5	1064	79
7	...	...	...	...	...	...	...	6	...	20	...
...	...	...	...	4	...	...	...	2	...	9	...
...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	1	...	...	...	...	...	1	...
..	...	...	...	...	...	...	...	1	1	1	1
...	...	1	...	1	...	...	...	...	...	2	...
...	...	...	...	1	...	...	...	...	...	2	...
...	...	1	1	1	1	...	...	7	6	12	11
...	...	...	...	...	...	...	...	2	...	2	...
...	...	...	...	...	...	...	...	...	..	1	...
3	3	...	...	...	...	...	...	...		3	3
...	...	...	...	...	...	..	...	1	...	1	...
...	...	1	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...
..	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	1	1	..	...	...	...	1	1
3	1	...	...	1	1	...	...	1	1	8	6
...	...	...	...	...	...	...	...	2	2	2	2
...	...	...	...	...	...	...	...	...	...	1	...
1	1	...	...	2	...	...	...	...	...	5	1
...	...	...	...	...	...	...	...	...	...	3	1
1	1	1	...	...	...	...	...	...	...	5	1
...	...	...	...	...	...	...	...	...	...	2	...
8	4	3	1	8	2	...	...	4	3	33	13
3	2	...	...	...	...	...	...	...	...	4	2
...	...	...	...	...	...	...	...	2	2	2	2
10	...	...	...	...	...	...	...	...	...	13	...
...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	3	...	5	...
2	...	...	...	...	...	...	...	4	1	9	3
...	...	1	...	...	...	...	...	1	...	2	...
...	...	...	...	1	1	...	...	...	...	1	1
...	...	1	1	...	...	...	...	...	...	1	1
...	...	...	...	2	1	...	...	...	...	3	2
...	...	2	...	4	2	...	...	1	1	11	4
1	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	3	2	...	...	...	...	3	2
...	...	1	...	...	...	...	...	...	...	1	...
...	...	1	...	...	...	...	...	...	...	2	1
1	...	...	...	...	...	...	...	...	...	1	..
1	...	...	...	...	...	...	...	...	...	1	...
1	...	...	...	...	...	...	...	...	...	1	...
42	12	13	3	30	11	...	...	38	17	180	58
137	23	236	16	179	18	146	6	135	22	1244	137

FEVER STATISTICS.—TABLE XIV. *(continued)—Details*

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward ...	1244	... ...	284	43	127	9
Brought forward—Enteric Fever	180	... ...	57	15	...	...
Enteric Fever (*contd.*) ...		*Generative System.*				
		Dysmenorrhœa	...	...	...	...
		Pelvic Cellulitis	1	...	...	...
		Disease of Breast.				
		Mastitis	...	...	...	...
		Skin Disease.				
		Eczema	...	...	...	...
		Erythema	...	...	...	...
		Diseases of the Bones.				
		Acute Necrosis	1	1	...	...
		Local Injuries.				
		Contused side	...	...	...	...
		Not Classified.				
		No obvious disease	...	...	...	...
		Otitis	...	...	...	...
	200		59	16	...	...
Typhus Fever		General Diseases.				
		Not classified.				
		Acute Alcoholism	...	...	...	...
		Local Disease.				
		Digestive System.				
		Dyspepsia	...	...	...	...
		Skin Disease.				
		Eczema	...	...	...	...
		Nervous System.				
		Meningitis	1	1	...	...
	6		1	1	...	...
Uncertified		*Respiratory System.*				
		Atelectasis	1	1	...	...
	1		1	1	...	...
Infants with mothers ...	...	... ...	...	...	3	...
	6		...	...	3	...
Grand Totals ...	1,277	... ...	288	46	130	9

of Miscellaneous Diseases admitted during 1895.

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
137	23	236	16	179	18	146	6	135	22	1244	137
42	12	13	3	30	11	...	...	38	17	180	58
...	...	...	..	...	...	...	...	1	...	1	...
1	...	...	...	...	..	...	...	2	...	4	...
...	...	1	...	...	...	...	...	...	...	1	...
...	...	...	...	..	...	...	..	1	...	1	...
2	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	1	...	1	...
2	...	1	...	1	...	...	...	3	...	7	...
1	...	...	...	...	...	...	...	1	1	2	1
48	12	15	3	31	11	...	...	47	18	200	60
...	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	...	...	...	..	2	1	3	2
...	...	...	...	...	...	...	...	5	1	6	2
...	...	...	...	...	...	...	...	...	...	1	1
..	...	...	...	...	...	...	...	...	...	1	1
3	...	...	...	...	...	...	...	...	...	6	...
3	...	...	...	...	...	...	...	...	...	6	...
146	23	238	16	180	18	146	6	149	24	1277	142

REPORT OF THE MEDICAL SUPERINTENDENTS OF THE ASYLUMS BOARD'S HOSPITALS ON THE USE OF ANTITOXIC SERUM IN THE TREATMENT OF DIPHTHERIA IN THE HOSPITALS OF THE BOARD DURING THE YEAR 1895.

To the Managers of the Metropolitan Asylums Board.

We beg to present the following report on the antitoxin treatment of diphtheria which has been jointly drawn up by the Medical Superintendents of those of the Managers' hospitals in which the treatment has been employed.

Scope.

The period covered by the report extends from January 1st, 1895, to December 31st of the same year. During this time—with the exception of an interval of three months at the Eastern Hospital, when its use was suspended; of periods of four months at the Western and North-Western, of three months at the Fountain, and to a considerable extent throughout the year at the South-Eastern Hospital, when all cases were consecutively treated, irrespective of their severity—the serum was administered only to cases which at the time of admission were severe, or which threatened to become so. In a certain number, the patients being moribund at the time of their arrival, and beyond the reach of any treatment, no antitoxin was given. No change has taken place during the year in the local treatment of the cases, nor has there been any new factor in the treatment other than the injection of antitoxin.

I.

Antitoxin Cases.

Tables I. to VII. show the number of cases, deaths, and the percentage mortality of those patients who were treated with antitoxin during the year 1895. They are arranged according to age and the day of disease on which they came under treatment. Nos. I. to VI. deal with each hospital separately, and No. VII. gives the combined number for all the hospitals.

EASTERN HOSPITAL.

Table I.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which the treatment was commenced.)

Day of Disease.	1st.		2nd.		3rd.		4th.		5th & after.		Total.		Mortality per cent.
Ages.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	1	0	1	1	1	1	0	0	2	1	5	3	60·0
1 to 2	3	1	4	4	8	4	2	1	8	5	25	15	60·0
2 to 3	2	0	6	0	4	2	7	2	4	4	23	8	34·7
3 to 4	4	1	2	1	9	2	9	2	23	7	47	13	27·6
4 to 5	2	0	6	0	8	4	11	6	15	7	42	17	40·4
5 to 10	3	0	17	0	27	7	18	4	34	16	99	27	27·2
10 to 15	2	0	8	0	5	0	5	1	9	2	29	3	10·3
15 to 20	0	0	1	0	1	0	0	0	2	0	4	0	0·0
20 and upwards... ...	0	0	0	0	0	0	0	0	2	0	2	0	0·0
Total	17	2	45	6	63	20	52	16	99	42	276	86	31·1
Mortality per cent.	...	11·7	...	13·3	...	31·7	...	30·7	...	42·4	...	31·1	...

NORTH-WESTERN HOSPITAL.

TABLE II.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which the treatment was commenced.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	2	1	3	2	0	0	4	2	9	5	55·5
1 to 2	0	0	9	4	7	2	8	7	22	16	46	29	63·0
2 to 3	0	0	8	2	6	4	5	3	11	5	30	14	46·6
3 to 4	1	0	9	3	8	1	11	5	22	11	51	20	39·2
4 to 5	0	0	5	3	4	1	7	4	17	6	33	14	42·4
5 to 10	2	0	24	6	27	5	22	3	51	13	126	27	21·1
10 to 15	1	0	5	0	3	1	6	0	13	5	28	6	21·4
15 to 20	0	0	2	1	3	0	2	1	3	0	10	2	20·0
20 and upwards... ...	0	0	5	0	8	0	9	0	8	0	30	0	0·0
Total	4	0	69	20	69	16	70	23	151	58	363	117	32·2
Mortality per cent.	...	0·0	...	28·9	...	23·1	...	32·8	...	38·4	...	32·2	...

WESTERN HOSPITAL.

TABLE III.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which the treatment was commenced.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	1	1	1	0	3	0	1	1	6	2	33·3
1 to 2	1	0	7	2	7	3	4	2	8	4	27	11	40·7
2 to 3	1	0	9	1	7	2	13	7	11	2	41	12	29·2
3 to 4	2	0	14	1	14	5	12	4	25	10	67	20	29·8
4 to 5	1	0	12	1	10	3	18	8	28	8	69	20	28·9
5 to 10	8	0	27	3	36	9	36	12	58	13	165	37	22·4
10 to 15	0	0	7	0	11	1	14	1	8	3	40	5	12·5
15 to 20	0	0	0	0	3	1	1	0	3	1	7	2	28·5
20 and upwards... ...	0	0	2	0	4	0	1	0	3	1	10	1	10·0
Total	13	0	79	9	93	24	102	34	145	43	432	110	25·4
Mortality per cent.	...	0·0	...	11·3	...	25·8	...	33·3	...	29·6	...	25·4	...

SOUTH-WESTERN HOSPITAL.

TABLE IV.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which treatment was commenced.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	1	0	2	2	0	0	2	1	5	3	60·0
1 to 2	4	1	5	1	3	1	6	3	8	7	26	13	50·0
2 to 3	2	0	4	0	10	5	3	0	5	4	24	9	37·5
3 to 4	3	1	7	0	4	1	9	3	19	6	42	11	26·1
4 to 5	2	0	6	0	9	2	20	9	15	9	52	20	38·4
5 to 10	7	0	20	1	14	2	27	6	57	21	125	30	24·0
10 to 15	1	0	8	0	2	2	5	0	18	5	34	7	20·5
15 to 20	0	0	1	0	0	0	1	0	2	0	4	0	0·0
20 and upwards... ...	0	0	0	0	1	0	2	0	1	1	4	1	25·0
Total	19	2	52	2	45	15	73	21	127	54	316	94	29·7
Mortality per cent.	...	10·5	...	3·8	...	33·3	...	28·7	...	42·5	...	29·7	...

SOUTH-EASTERN HOSPITAL.

TABLE V.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which treatment was commenced.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	3	1	1	1	1	0	1	1	6	3	50·0
1 to 2	1	0	5	1	8	3	6	4	11	6	31	14	45·1
2 to 3	3	0	8	1	9	3	8	3	16	5	44	12	27·2
3 to 4	5	0	4	2	18	4	10	3	12	4	49	13	26·5
4 to 5	4	0	17	3	8	2	15	7	12	7	56	19	33·9
5 to 10	8	0	43	6	41	9	22	8	64	18	178	41	23·0
10 to 15	5	0	20	2	15	2	6	0	13	3	59	7	11·8
15 to 20	0	0	2	0	3	0	5	0	7	0	17	0	0·0
20 and upwards... ...	0	0	5	0	5	0	5	0	6	0	21	0	0·0
Total	26	0	107	16	108	24	78	25	142	44	461	109	23·6
Mortality per cent.	...	0·0	...	14·9	...	22 2	...	32·0	...	30·9	...	23·6	...

FOUNTAIN HOSPITAL.

TABLE VI.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which the treatment was commenced)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	2	1	0	0	1	0	3	1	6	2	33·3
1 to 2	1	0	7	1	7	4	4	3	8	4	27	12	44·4
2 to 3	1	0	3	1	6	2	3	1	12	6	25	10	40·0
3 to 4	1	0	10	1	11	4	10	8	22	14	54	27	50·0
4 to 5	1	0	8	1	11	1	11	4	14	2	45	8	17·7
5 to 10	2	0	14	2	25	8	34	12	48	12	123	34	27·6
10 to 15	1	0	5	0	8	0	10	2	13	1	37	3	8·1
15 to 20	0	0	1	0	2	0	3	1	2	1	8	2	25·0
20 and upwards	0	0	1	0	1	0	2	0	5	1	9	1	11·1
Total	7	0	51	7	71	19	78	31	127	42	334	99	29·6
Mortality per cent.	...	0·0	...	13·7	...	26·7	...	39·7	...	33·0	...	29·6	...

ALL THE HOSPITALS.

TABLE VII.—*Cases treated with Antitoxin*, 1895.

(Showing day of disease on which the treatment was commenced.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.	
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.		
Under 1	1	0	10	5	8	6	5	0	13	7	37	18	48·6	
1 to 2	10	2	37	13	40	17	30	20	65	42	182	94	51·6	
2 to 3	9	0	38	5	42	18	39	16	59	26	187	65	34·7	37·4
3 to 4	16	2	46	8	64	17	61	25	123	52	310	104	33·6	
4 to 5	10	0	54	8	50	13	82	38	101	39	297	98	32·9	
5 to 10	30	0	145	18	170	40	159	45	312	93	816	196	24·0	
10 to 15	10	0	53	2	44	6	46	4	74	19	227	31	13·6	
15 to 20	0	0	7	1	12	1	12	2	19	2	50	6	12·0	
20 and upwards...	0	0	13	0	19	0	19	0	25	3	76	3	3·9	
Total	86	4	403	60	449	118	453	150	791	283	2,182	615	28·1	
Mortality per cent. ...	...	4·6	...	14·8	...	26·2	...	33·1	...	35·7	...	28·1	...	

In Table VII., comprising 2,182 cases, the percentage mortality will be seen to progressively diminish from 37·4 under five years of age to 3·9 at ages over 20; and to rise from 4·6 in those patients who came under treatment on the first day of illness to 35·7 in those who were admitted on the fifth day and after. The aggregate mortality of the antitoxin cases for all ages, irrespective of the time of coming under treatment, was 28·1 per cent.

It must be clearly understood that, with the exceptions previously stated, it has been the practice at each of the hospitals to administer serum to those cases only in which the symptoms on admission were sufficiently pronounced to give rise to anxiety, the mild cases not receiving any. 61·8 per cent. of the admissions were treated with antitoxin. Evidence of the comparatively greater severity of the antitoxin cases can be obtained by referring to Table XXIII., which shows the relative proportion of young children in each class. It is there seen that no less than 46·4 per cent. of the antitoxin cases were under five years of age, against 32·5 per cent. in the non-antitoxin group, and only 16·1 per cent. in the former class were over 10 years of age, against 33·8 per cent. in the latter. The high fatality of diphtheria in the earlier years of life is notorious.

It is obvious, therefore, that to compare the mortality of those treated with antitoxin with that of those which during the same period were not so treated would be to institute a comparison between the severe cases and those of which a large proportion were mild. This would clearly be misleading.

Comparative Mortalities, 1894 and 1895.

The only method by which an accurate estimate can be obtained as to the merits of any particular form of treatment is by comparing a series of cases in which the remedy has been employed with another series not so treated, but which are similar, as far as can be, in other respects. This, in the present instance, is impossible; but, having regard to the fact that 61·8 per cent. of the 1895 cases were treated with serum, an approximately accurate comparison can be drawn by contrasting all cases of diphtheria completed during 1895, the antitoxin period, with all cases completed during 1894.

The year 1894 has been selected for the purpose of comparison, not only because it is the year immediately preceding the antitoxin period, but because the average severity of the cases has been, in our opinion, about equal. Moreover, the death rate in 1894 was slightly lower than it had been in any previous year.

Owing to the fact that the serum treatment had been tentatively employed in most of the hospitals for a few weeks prior to the end of 1894, all cases which were completed during the short period covered by its use have been excluded from the tables.

The numbers for the two years remain fairly equal, in both instances being over 3,000 cases.

Tables VIII. to XIV.* show the total number of cases of diphtheria completed during 1895, together with the deaths and percentage mortalities, arranged according to age and the day of disease on which the patients came under treatment, whether by antitoxin or not.

Tables VIII. to XIII. deal with individual hospitals, and Table XIV. shows the combined results.

EASTERN HOSPITAL.

TABLE VIII.—*All cases, both those treated with Antitoxin and those not*, 1895.

(In the case of those not treated with antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	2	1	3	3	1	1	2	1	3	1	11	7	63·6
1 to 2	3	1	5	5	8	4	7	5	13	9	36	24	66·6
2 to 3	4	1	13	2	13	8	10	2	12	7	52	20	38·4
3 to 4	9	3	11	4	16	3	14	3	33	10	83	23	27·7
4 to 5	4	0	13	1	14	7	18	7	37	16	86	31	36·0
5 to 10	10	3	43	4	45	15	34	6	75	25	207	53	25·6
10 to 15	5	0	18	0	17	1	17	1	28	2	85	4	4·7
15 to 20	1	0	8	1	11	0	5	0	14	1	39	2	5·1
20 and upwards... ...	2	0	10	0	7	0	7	0	16	0	42	0	0·0
Total	40	9	124	20	132	39	114	25	231	71	641	164	25·5
Mortality per cent.	...	22·5	...	16·1	...	29·5	...	21·9	...	30·7	...	25·5	...

NORTH-WESTERN HOSPITAL.

TABLE IX.—*All cases, both those treated with Antitoxin and those not*, 1895.

(In the case of those not treated with antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	6	2	1	1	0	0	5	2	12	5	41·6
1 to 2	0	0	14	7	10	5	10	6	31	19	65	37	56·9
2 to 3	3	1	9	1	12	5	12	4	29	12	65	23	35·3
3 to 4	4	1	14	3	25	4	25	9	40	19	108	36	33·3
4 to 5	1	1	10	4	13	2	15	6	28	10	67	23	34 3
5 to 10	4	0	45	4	55	13	53	7	107	19	264	43	16·2
10 to 15	1	0	11	0	14	4	15	0	27	5	68	9	13·2
15 to 20	0	0	6	1	10	0	5	1	5	0	26	2	7·6
20 and upwards... ...	0	0	9	0	12	0	15	1	19	0	55	1	1·8
Total	13	3	124	22	152	34	150	34	291	86	730	179	24·5
Mortality per cent.	...	23·0	...	17·7	...	22·3	...	22·6	...	29·5	...	24·5	...

* All cases are included which came under treatment during the year, with the exception of those remaining in hospital on December 31st. As the death rates are calculated on completed cases—*i.e.*, on discharges and deaths—they will be found to vary slightly from those appearing in the annual statistics of the Metropolitan Asylums Board for 1894 and 1895, which are calculated on the usual formula—that is, the number of deaths multiplied by 100, divided by half the sum of admissions, discharges, and deaths.

WESTERN HOSPITAL.

TABLE X.—*All cases, both those treated with Antitoxin and those not*, 1895.

(In the case of those not treated with antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	1	1	2	0	3	0	3	1	9	2	22·2
1 to 2	1	0	7	2	7	3	4	2	11	6	30	13	43·3
2 to 3	1	0	9	1	8	2	13	7	14	2	45	12	26·6
3 to 4	3	1	15	1	18	6	12	4	34	13	82	25	30·4
4 to 5	1	0	13	1	13	3	20	8	35	8	82	20	24·3
5 to 10	8	0	28	3	43	9	40	12	80	14	199	38	19·0
10 to 15	1	0	8	0	15	1	16	1	23	3	63	5	7·9
15 to 20	1	0	1	0	5	1	2	0	10	2	19	3	15·7
20 and upwards... ...	1	0	4	0	10	0	9	0	22	2	46	2	4·3
Total	17	1	86	9	121	25	119	34	232	51	575	120	20·8
Mortality per cent.	...	5·8	...	10·4	...	20·6	...	28·5	...	21·9	...	20·8	...

SOUTH-WESTERN HOSPITAL.

TABLE XI.—*All cases, both those treated with Antitoxin and those not*, 1895.

(In the case of those not treated with antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	2	0	2	2	0	0	3	2	7	4	57·1
1 to 2	3	1	5	1	4	1	6	3	9	8	27	14	51·8
2 to 3	2	0	4	0	11	7	5	0	11	4	33	11	33·3
3 to 4	3	1	7	0	12	1	10	3	19	6	51	11	21·5
4 to 5	2	0	6	0	13	2	20	9	23	9	64	20	31·2
5 to 10	10	0	29	1	25	2	40	6	86	21	190	30	15·7
10 to 15	2	0	11	0	7	2	14	0	26	5	60	7	11·6
15 to 20	0	0	5	0	4	0	1	0	6	1	16	1	6·2
20 and upwards... ...	0	0	3	0	3	0	6	0	7	1	19	1	5·2
Total	22	2	72	2	81	17	102	21	190	57	467	99	21·1
Mortality per cent.	...	9·0	...	2·7	...	20·9	...	20·5	...	30·0	...	21·1	...

SOUTH-EASTERN HOSPITAL.

TABLE XII.—*All cases, both those treated with Antitoxin and those not*, 1895.

(In the case of those not treated with antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	3	1	2	2	1	0	1	1	7	4	57·1
1 to 2	1	0	7	1	9	3	6	4	12	6	35	14	40·0
2 to 3	3	0	9	1	13	5	9	3	17	6	51	15	29·4
3 to 4	6	0	4	2	18	4	11	3	16	4	55	13	23·6
4 to 5	5	0	18	4	11	2	17	7	16	8	67	21	31·3
5 to 10	8	0	47	6	47	11	23	9	76	20	201	46	22·8
10 to 15	5	0	21	2	19	2	7	0	21	3	73	7	9·5
15 to 20	1	0	2	0	4	0	6	0	12	0	25	0	0·0
20 and upwards... ...	0	0	9	0	9	0	9	0	11	0	38	0	0·0
Total	29	0	120	17	132	29	89	26	182	48	552	120	21·7
Mortality per cent.	...	0·0	...	14·1	...	21·9	...	29·2	...	26·3	...	21·7	...

FOUNTAIN HOSPITAL.

TABLE XIII.—*All cases, both those treated with Antitoxin and those not*, 1895.

(In the case of those not treated with antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	3	1	1	0	1	0	5	1	10	2	20·0
1 to 2	1	0	7	1	10	4	5	3	12	4	35	12	34·2
2 to 3	1	0	4	1	8	3	8	3	17	8	38	15	39·4
3 to 4	1	0	12	1	13	4	15	9	27	14	68	28	41·1
4 to 5	1	0	16	2	16	1	16	4	23	5	72	12	16·6
5 to 10	2	0	30	2	48	8	44	12	82	15	206	37	17·9
10 to 15	1	0	14	0	15	0	19	2	26	1	75	3	4·0
15 to 20	0	0	4	0	7	0	5	1	11	2	27	3	11·1
20 and upwards... ...	0	0	6	0	8	0	5	0	14	2	33	2	6·0
Total	7	0	96	8	126	20	118	34	217	52	564	114	20·2
Mortality per cent.	...	0·0	...	8·3	...	15·8	...	28·8	...	23·9	...	20·2	...

ALL THE HOSPITALS.

TABLE XIV.—*All cases, both those treated with Antitoxin and those not*, 1895.

In the case of those not treated with Antitoxin, day of disease = day of disease on which the patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.	
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.		
Under 1	2	1	18	8	9	6	7	1	20	8	56	24	42·8	
1 to 2	9	2	45	17	48	20	38	23	88	52	228	114	50·0	
2 to 3	14	2	48	6	65	30	57	19	100	39	284	96	33·8	34·2
3 to 4	26	6	63	11	102	22	87	31	169	66	447	136	30·4	
4 to 5	14	1	76	12	80	17	106	41	162	56	438	127	28·9	
5 to 10	42	3	222	20	263	58	234	52	506	114	1,267	247	19·4	
10 to 15	15	0	83	2	87	10	88	4	151	19	424	35	8·4	
15 to 20	3	0	26	2	41	1	24	2	58	6	152	11	7·2	
20 and upwards ...	3	0	41	0	49	0	51	1	89	5	233	6	2·5	
Total	128	15	622	78	744	164	692	174	1,343	365	3,529	796	22·5	
Mortality per cent. ...	...	11·7	...	12·5	...	22·0	...	25 1	...	27·1	...	22·5	...	

Tables XV. to XX.* show the cases completed during the year 1894, classified on the same basis.

Tables XV. to XIX. deal with the individual hospitals, and Table XX. gives the combined figures. No table has been given for the Fountain Hospital, because the number of cases completed during the year 1894—viz., 110—was too small to be of any practical value.

EASTERN HOSPITAL,

TABLE XV.—*All cases of Diphtheria from January 1st to October 22nd*, 1894.

(Day of disease = day of disease on which patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	1	1	0	0	2	1	4	3	7	5	71·4
1 to 2	2	1	9	7	8	7	4	3	8	6	31	24	77·4
2 to 3	3	3	8	3	9	4	8	5	12	9	40	24	60·0
3 to 4	1	0	11	3	13	4	9	3	15	6	49	16	32·6
4 to 5	5	0	7	2	14	6	7	3	24	7	57	18	31·5
5 to 10	14	1	41	8	25	13	24	4	45	12	149	38	25·5
10 to 15	2	1	12	0	15	1	10	1	13	4	52	7	13·4
15 to 20	2	0	6	0	8	1	3	0	11	2	30	3	10·0
20 and upwards... ...	0	0	5	0	14	0	6	1	12	0	37	1	2·7
Total	29	6	100	24	106	36	73	21	144	49	452	136	30·0
Mortality per cent.	...	20·6	...	24·0	...	33·9	...	28·7	...	34·0	...	30·0	...

NORTH-WESTERN HOSPITAL.

TABLE XVI.—*All cases of Diphtheria during* 1894.

(Day of disease = day of disease on which patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	5	4	2	0	1	0	4	2	12	6	50·0
1 to 2	3	1	15	8	17	7	14	8	26	13	75	37	49·3
2 to 3	6	1	23	10	26	11	11	3	37	17	103	42	40·7
3 to 4	3	1	25	14	34	23	27	15	47	18	136	71	52·2
4 to 5	5	4	23	7	32	9	21	7	68	23	149	50	33·5
5 to 10	17	2	64	4	100	29	77	18	161	36	419	89	21·2
10 to 15	4	0	26	0	25	1	15	1	41	5	111	7	6·3
15 to 20	3	0	7	0	10	0	9	0	31	2	60	2	3·3
20 and upwards... ...	1	0	14	0	20	0	21	4	26	1	82	5	6·0
Total	42	9	202	47	266	80	196	56	441	117	1,147	309	26·9
Mortality per cent.	...	21·4	...	23·2	...	30·0	...	28·5	...	26·5	...	26·9	...

WESTERN HOSPITAL.

TABLE XVII.—*All cases of Diphtheria, January* 1*st to November* 25*th*, 1894.

(Day of disease = day of disease on which patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	2	1	0	0	1	1	2	1	5	3	60·0
1 to 2	1	1	7	5	10	7	5	4	8	7	31	24	77·4
2 to 3	3	2	7	5	3	1	7	5	8	3	28	16	57·1
3 to 4	6	2	10	5	8	5	12	6	20	11	56	29	51·7
4 to 5	0	0	5	4	8	5	7	0	17	8	37	17	45·9
5 to 10	11	2	24	9	41	14	42	20	59	18	177	63	35·5
10 to 15	1	0	15	3	12	2	13	3	15	5	56	13	23·2
15 to 20	0	0	2	0	5	0	6	0	5	0	18	0	0·0
20 and upwards	0	0	6	0	18	0	8	0	23	7	55	7	12·7
Total	22	7	78	32	105	34	101	39	157	60	463	172	37·1
Mortality per cent.	...	31·8	...	41·0	...	32·3	...	38·6	...	38·2	...	37·1	...

* All cases are included which came under treatment during the year, with the exception of those remaining in hospital on December 31st. As the death rates are calculated on completed cases—*i.e.*, on discharges and deaths—they will be found to vary slightly from those appearing in the annual statistics of the Metropolitan Asylums Board for 1894 and 1895, which are calculated on the usual formula—that is, the number of deaths multiplied by 100, divided by half the sum of admissions, discharges, and deaths.

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TABLE XVIII.—*All cases of Diphtheria, January 1st, 1894, to November 25th, 1894.*

(Day of disease = day of disease on which patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	1	1	1	1	2	2	1	1	5	5	100·0
1 to 2	3	1	6	5	8	4	10	8	14	11	41	29	70·7
2 to 3	1	0	10	4	7	4	9	6	18	11	45	25	55·5
3 to 4	4	2	6	3	7	2	14	8	17	8	48	23	47·9
4 to 5	1	0	10	2	8	3	7	2	24	7	50	14	28·0
5 to 10	4	1	20	6	28	9	40	9	87	19	179	44	24·5
10 to 15	4	1	18	0	17	3	15	0	39	6	93	10	10·7
15 to 20	1	0	3	0	5	0	4	0	14	1	27	1	3·7
20 and upwards... ...	1	0	11	1	14	1	13	1	19	2	58	5	8·6
Total	19	5	85	22	95	27	114	36	233	66	546	156	28·5
Mortality per cent. ...	...	26·3	...	25·8	...	28·4	...	31·5	...	28·3	...	28·5	...

SOUTH-EASTERN HOSPITAL.

TABLE XIX.—*All cases of Diphtheria, January 1st to November 26th, 1894.*

(Day of disease = day of disease on which patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Under 1	0	0	1	0	1	0	3	2	4	4	11	6	54·5
1 to 2	1	1	5	4	4	0	6	2	10	5	26	12	46·1
2 to 3	3	1	7	5	6	2	9	7	16	10	41	25	60·9
3 to 4	3	1	6	1	8	3	9	5	27	12	53	22	41·5
4 to 5	4	0	6	3	9	3	5	2	11	5	35	13	37·1
5 to 10	7	0	30	7	21	6	25	9	68	24	151	46	30·4
10 to 15	1	0	14	1	10	1	6	0	20	2	51	4	7·8
15 to 20	0	0	5	0	5	0	6	0	9	1	25	1	4·0
20 and upwards... ...	2	0	0	0	16	0	11	0	12	0	41	0	0·0
Total	21	3	74	21	80	15	82	27	177	63	434	129	29·7
Mortality per cent. ...	...	14·2	...	28·3	...	18·7	...	32·9	...	35·5	...	29·7	...

ALL THE HOSPITALS.

TABLE XX.—*All cases of Diphtheria, before use of Antitoxin*, 1894.

(Day of disease = day of disease on which patient was admitted to hospital.)

DAY OF DISEASE.	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.	
AGES.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.		
Under 1	0	0	10	7	4	1	11	6	15	11	40	25	62·5	
1 to 2	10	5	42	29	47	25	39	25	66	42	204	126	61·7	
2 to 3	16	7	55	27	51	22	44	26	91	50	257	132	51·3	47·4
3 to 4	17	6	58	26	70	37	71	37	126	55	342	161	47·0	
4 to 5	15	4	51	18	71	26	47	14	144	50	328	112	34·1	
5 to 10	53	6	179	34	215	71	208	60	420	109	1,075	280	26·0	
10 to 15	12	2	85	4	79	8	59	5	128	22	363	41	11·2	
15 to 20	6	0	23	0	33	1	28	0	70	6	160	7	4·3	
20 and upwards...	4	0	36	1	82	1	59	6	92	10	273	18	6·5	
Total	133	30	539	146	652	192	566	179	1,152	355	3,042	902	29·6	
Mortality per cent. ...	...	22·5	...	27·0	...	29·4	...	31·6	...	30·8	...	29·6	...	

The cases tabulated in the foregoing 20 tables are cases of primary diphtheria. Cases in which the patients were found on admission to be suffering from combined scarlet fever and diphtheria or measles and diphtheria have not been included; but deaths from such diseases as scarlet fever, measles, or tuberculosis, contracted or developing during convalescence from diphtheria, have been included amongst the deaths in the antitoxin as well as the non-antitoxin cases.

In recording the cases in the various tables, it has been absolutely necessary to take the clinical, rather than the bacteriological, evidence as the criterion of the diagnosis. Before January 1st, 1895, bacteriological methods were not available in all the Board's hospitals, and only to a limited extent in some; consequently, up to that time the nature of the cases was determined and recorded for the most part by the clinical evidence.

It is clear that in an endeavour to estimate the comparative value of the methods of treatment employed before and after that date, the two series of cases must be classified on a common basis. Experience has shown that the bacteriologist rejects a considerable percentage of cases which the clinical observer claims as diphtheria, and *vice versâ*. But for the most part, in cases of which the nature appeared doubtful, the diagnosis was determined by the bacteriological report. In addition to the bacteriological examination of any doubtful case which was usually made at the individual hospital, all cases were systematically examined and reported on at the Laboratories of the Royal Colleges, under the immediate supervision of Dr. Sims Woodhead.

TABLE XXI.—*Cases of Diphtheria in which one or more Bacteriological Examinations failed to reveal Diphtheria Bacilli*, 1895.

Non-Antitoxin Cases.		Antitoxin Cases.		All Cases.		
Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Percentage Mortality.
105	15	103	34	208	49	23·5

It will be seen from the above table that in 5·8 per cent. of the cases included in the 1895 tables the clinical diagnosis received no bacteriological confirmation, and it is very significant that the death rate in these cases—viz., 23·5 per cent.—is higher than the general diphtheria mortality for the year. (See Table XIV.)

We are now in a position to institute a comparison between the two sets of tables. On referring to Tables XX. and XIV., we find that of 3,042 patients of all ages treated during 1894, 902 died—a mortality of 29·6 per cent.; whereas, of 3,529 cases treated during 1895, 796 died—a mortality of 22·5 per cent.; the difference in percentage between the two rates being, therefore, 7·1. This, assuming that the former rate would otherwise have been maintained, represents a saving of 250 lives during the past year.

Influence of Age.

Now, if we compare the mortalities at the different ages, the contrast will appear more striking. Tables XX. and XIV. further show that for every age group, with the single exception of that comprising the years 15 to 20 (the numbers of which are small), the percentage mortality was less in the 1895 than in the 1894 cases, and, moreover, that the reduction in mortality was greatest in early life. Table XXII. shows the same thing in a somewhat different form.

TABLE XXII.—*Showing Variations in Reduction of Mortality obtained with Antitoxin at different Ages.*

Ages.	Antitoxin Cases, 1895.			All Cases, 1895.			All Cases, 1894.			Difference in Mortalities, 1894 and 1895.
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	
Under 5	1,013	379	37·4	1,453	497	34·2	1,171	556	47·4	13·2
Under 10	1,829	575	31·4	2,720	744	27 3	2,246	836	37·2	9 9
Under 15	2,056	606	29·4	3,144	779	24·7	2,609	877	33·6	8 9
All ages	2,182	615	28·1	3,529	796	22·5	3,042	902	29·6	7·1

The reduction of percentage mortality in 1895 is seen to progressively diminish from 13·2 in the first quinquennium of life to 7·1 at all ages. In patients over

15 years of age the death rates in the years 1894 and 1895 were 5·7 and 4·4 respectively—a difference of only 1·3. The average severity of attack in patients at this age being much less, the number of cases treated with antitoxin was correspondingly small.

That the year 1895, as compared with 1894, has not been favoured with a lesser proportion of young children is shown by Table XXIII., which gives for each year the comparative number of cases falling within the first three quinquennia of life.

TABLE XXIII.—*Showing Proportionate Number of Patients at different Ages, expressed as a Percentage of Total Admissions.*

AGES.	1895.		1895.	1894.
	Antitoxin Cases.	Non-Antitoxin Cases.	All Cases.	All Cases.
Under 5	46·4	32·5	41·1	38·4
5 to 10	37·3	33·4	35·9	35·3
10 to 15	10·4	14·6	12·0	11·9
Over 15	5·7	19·2	10·9	14·2

INFLUENCE OF TIME OF COMING UNDER TREATMENT.

We will now consider whether the period of time which had elapsed before the patient was brought under treatment has had any influence upon the fatality.

Table XXIV. represents a summary of Tables XIV. and XX. from this point of view.

TABLE XXIV.—*Showing Percentage Mortality in relation to Day of Disease on which Cases came under Treatment.*

Day of Disease.	1894.	1895.	Difference.
1st	22·5	11·7	10·8
2nd	27·0	12·5	14·5
3rd	29·4	22·0	7·4
4th	31·6	25·1	6·5
5th and over	30·8	27·1	3·7
Total...	29·6	22·5	7·1

It will be seen that the percentage mortality of cases admitted on the same day of disease is less in every instance in the year 1895. The difference is most marked in the case of those patients who were admitted on the first and second day of illness, viz., 10·8 and 14·5 respectively. It is less evident in those admitted on the third and fourth days, viz., 7·4 and 6·5; and the difference of mortality is least in those who were not brought under treatment until the fifth day or later, viz., 3·7.

Tables XIV. and XX. show incidentally yet another fact, viz., that both in 1894 and 1895 no less than over 37 per cent. of the patients were admitted on, or after, the fifth day of disease. And, moreover, while in 1894 as many as 59·2 per cent. of the fatal cases were not brought under treatment until the fourth day, or later, in 1895, the antitoxin year, the proportion was even higher, viz., 67·7 per cent.

If we revert to Table VII., which deals exclusively with *the cases treated with antitoxin* during 1895, and compare it with Table XX., which deals with all cases in 1894, striking differences are observed in the figures giving the results of treatment commenced upon the first and second days of illness. In the antitoxin cases the mortality per cent. for the first day is only 4·6 per cent., and for the second day 14·8 per cent.; whilst for 1894 the figures are 22·5 per cent. and 27 per cent. respectively.

The aggregate mortality among cases which came under treatment on the first three days of illness was 19·4 per cent. in the antitoxin cases (Table VII.), and 27·7 per cent. in those treated by other methods in 1894 (Table XX.).

It will be noticed that Table VII. shows no preponderance of early cases over Table XX.; the percentage of cases admitted on the first, second, and third day of disease respectively being 3·9, 18·4, and 20·5, against 4·3, 17·7, and 21·4.

That Table VII. includes a larger proportion of children under 10 years of age (and especially under five) than does Table XX. is clearly shown in Table XXIII.

Further, as has already been stated, the usual practice at the different hospitals has been not to administer antitoxin to mild forms of diphtheria.

It is, therefore, clearly indicated that Table VII. must include an undue proportion of severe attacks, yet, notwithstanding, with the exceptions of the age groups 10–15 and 15–20, the mortality is less at all ages amongst the cases included in Table VII.—that is to say, those treated with antitoxin—than in the series which came under treatment immediately before the remedy was introduced.

II.

Laryngeal Cases.

We will now pass to the consideration of those cases in which the larynx was involved.

Tables XXV. to XXXII. deal with the cases during the year 1895 which were treated with antitoxin. Of these tables, XXV. to XXX. show the number of tracheotomies, deaths, and percentage mortalities, arranged according to age, at each separate hospital. Table XXXI. gives the combined results in tracheotomy cases, and Table XXXII. the combined results in all the laryngeal cases, whether tracheotomised or not.

Both Table XXXI. and Table XXXII. serve to indicate the well-known fact that for ages at any rate during the first two quinquennial periods of life the fatality in laryngeal diphtheria varies inversely with the age of the patient, and in this respect the antitoxin cases are no exception to the general rule.

The results shown in both tables are most satisfactory.

It will be seen that 48·8 per cent. of the laryngeal cases treated with antitoxin were tracheotomised, and of these 50·2 per cent. died.

EASTERN HOSPITAL.

TABLE XXV.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	0	0	0·0
1 to 2	9	6	66·6
2 to 3	6	3	50·0
3 to 4	12	6	50·0
4 to 5	8	4	50·0
5 to 10	6	2	33·3
10 to 15	0	0	0·0
15 and upwards ...	0	0	0·0
Total	41	21	51·2

NORTH-WESTERN HOSPITAL.

TABLE XXVI.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	0	0	0·0
1 to 2	11	9	81·8
2 to 3	3	3	100·0
3 to 4	5	2	40·0
4 to 5	5	2	40·0
5 to 10	4	2	50·0
10 to 15	0	0	0·0
15 and upwards ...	0	0	0·0
Total	28	18	64·2

WESTERN HOSPITAL.

TABLE XXVII.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	1	1	100·0
1 to 2	4	1	25·0
2 to 3	6	2	33·3
3 to 4	7	4	57·1
4 to 5	7	2	28·5
5 to 10	12	5	41·6
10 to 15	0	0	0·0
15 and upwards ...	0	0	0·0
Total	37	15	40·5

SOUTH-WESTERN HOSPITAL.

TABLE XXVIII.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	1	1	100·0
1 to 2	3	3	100·0
2 to 3	2	1	50·0
3 to 4	8	3	37·5
4 to 5	5	2	40·0
5 to 10	5	2	40·0
10 to 15	1	1	100·0
15 and upwards ...	0	0	0·0
Total	25	13	52·0

SOUTH-EASTERN HOSPITAL.

TABLE XXIX.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	2	1	50·0
1 to 2	10	8	80·0
2 to 3	9	3	33·3
3 to 4	11	6	54·5
4 to 5	12	5	41·6
5 to 10	15	5	33·3
10 to 15	1	1	100·0
15 and upwards ...	0	0	0·0
Total	60	29	48·3

FOUNTAIN HOSPITAL.

TABLE XXX.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	0	0	0·0
1 to 2	11	7	63·6
2 to 3	7	4	57·1
3 to 4	9	4	44·4
4 to 5	3	2	66·6
5 to 10	4	0	0·0
10 to 15	0	0	0·0
15 and upwards ...	0	0	0·0
Total	34	17	50·0

ALL THE HOSPITALS.

TABLE XXXI.—*Tracheotomy Cases treated with Antitoxin*, 1895.

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	4	3	75·0
1 to 2	48	34	70·8
2 to 3	33	16	48·4
3 to 4	52	25	48·0
4 to 5	40	17	42·5
5 to 10	46	16	34·7
10 to 15	2	2	100·0
15 and upwards ...	0	0	0·0
Total	225	113	50·2

ALL THE HOSPITALS.

TABLE XXXII.—*All Laryngeal Cases treated with Antitoxin.*

AGES.	Cases.	Deaths.	Mortality per cent.
Under 1	9	8	88·8
1 to 2	87	55	63·2
2 to 3	63	30	47·6
3 to 4	93	35	37·6
4 to 5	84	34	40·4
5 to 10	116	28	24·1
10 to 15	7	3	42·8
15 and upwards ...	2	2	100·0
Total	461	195	42·2

COMPARATIVE MORTALITIES IN LARYNGEAL CASES.

With the object of determining whether any advantage is gained over former methods of treatment by the use of antitoxin in cases of laryngeal diphtheria, the results obtained in all such cases during the year 1895 are placed side by side with those obtained in 1894, before the remedy was employed.

The year 1894 has again been taken for comparison, for the reasons previously stated.

Tables XXXIII. to XXXVIII. show the number of cases, deaths, and percentage mortalities, at different ages, of all the tracheotomy cases at each hospital during the years 1894 and 1895, and Table XXXIX. gives the combined figures for all the hospitals.

Table XL. gives the results obtained in all laryngeal cases, however treated, for the same years, and Table XLI. shows the proportion of laryngeal cases which required tracheotomy.

EASTERN HOSPITAL.

TABLE XXXIII.—*All Tracheotomies.*

AGES.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	1	1	100·0	...	...	...
1 to 2...	8	8	100·0	12	8	66·6
2 to 3...	9	9	100·0	10	4	40·0
3 to 4...	9	5	55·5	15	7	46·6
4 to 5...	8	6	75·0	10	5	50·0
5 to 10...	11	6	54·5	14	7	50·0
10 to 15...	1	1	100·0	...	...	...
15 and upwards	1	1	100·0	...	...	...
Total	48	37	77·0	61	31	50·8

NORTH-WESTERN HOSPITAL.

TABLE XXXIV.—*All Tracheotomies.*

Ages.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	...	...	...	...	...	...
1 to 2...	6	4	66·6	11	9	81·8
2 to 3...	14	8	57·1	4	2	50·0
3 to 4...	17	9	52·9	6	3	50·0
4 to 5...	19	4	73·6	5	2	40·0
5 to 10...	23	12	52·1	6	2	33·3
10 to 15...	...	...	...	...	...	...
15 and upwards	...	...	...	...	...	...
Total	79	47	59·4	32	18	56·2

WESTERN HOSPITAL.

TABLE XXXV.—*All Tracheotomies.*

Ages.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	...	...	...	1	1	100·0
1 to 2...	2	2	100·0	4	1	25·0
2 to 3...	6	6	100·0	6	2	33·3
3 to 4...	14	13	92·8	7	4	57·1
4 to 5...	4	3	75·0	7	2	28·5
5 to 10...	13	11	84·6	12	5	41·6
10 to 15...	...	...	...	...	...	...
15 and upwards	1	1	100·0	...	...	...
Total	40	36	90·0	37	15	40·5

SOUTH-WESTERN HOSPITAL.

TABLE XXXVI.—*All Tracheotomies.*

Ages.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	...	...	...	1	1	100·0
1 to 2	12	12	100·0	3	3	100·0
2 to 3	9	7	77·7	2	1	50·0
3 to 4	6	4	66·6	8	3	37·5
4 to 5	9	6	66·6	5	2	40·0
5 to 10	10	6	60·0	5	2	40·0
10 to 15	...	...	...	1	1	100·0
15 and upwards... ...	1	1	100·0	...	...	...
Total	47	36	76·5	25	13	52·0

SOUTH-EASTERN HOSPITAL.

TABLE XXXVII.—*All Tracheotomies.*

AGES.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	4	3	75·0	2	1	50·0
1 to 2	5	3	60·0	11	8	72·7
2 to 3	8	5	62·5	9	3	33·3
3 to 4	7	2	28·5	13	8	61·5
4 to 5	5	3	60·0	12	5	41·6
5 to 10	18	12	66·6	16	5	31·2
10 to 15	...	...	...	1	1	100·0
15 and upwards... ...	...	...	...	...	...	...
Total	47	28	59·5	64	31	48·4

FOUNTAIN HOSPITAL.

TABLE XXXVIII.—*All Tracheotomies.*

AGES.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	...	...	...	...	...	...
1 to 2	...	...	...	12	7	58·3
2 to 3	...	...	...	7	4	57·1
3 to 4	...	...	...	10	4	40·0
4 to 5	...	...	...	3	2	66·6
5 to 10	...	...	...	4	0	0·0
10 to 15	...	...	...	...	...	...
15 and upwards... ...	...		...	...	...	...
Total	...	...	...	36	17	47·2

ALL THE HOSPITALS.

TABLE XXXIX.—*All Tracheotomies.*

AGES.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	5	4	80·0	4	3	75·0
1 to 2	33	29	87·8	53	36	67·9
2 to 3	46	35	76·0	38	16	42·1
3 to 4	53	33	62·2	59	29	49·1
4 to 5	45	32	71·1	42	18	42·8
5 to 10	75	47	62·6	57	21	36·8
10 to 15	1	1	100·0	2	2	100·0
15 and upwards... ...	3	3	100·0	...	...	...
Total	261	184	70·4	255	125	49·4

From these tables it is seen that the tracheotomy results at each hospital are more favourable in the year 1895 than in 1894; the mortality varying in the latter year at the different hospitals between 90 per cent. and 59·4 per cent., whereas in 1895 the range was from 56·2 to 40·5.

Table XXXIX. shows that the combined tracheotomy mortality for all the hospitals, which in 1894 was 70·4 per cent., has fallen to 49·4 per cent. in 1895.

This is a lower death rate than has ever been recorded in any single hospital of the Board for a year's consecutive tracheotomies.

In other words, rather more than 50 per cent. of children on whom the operation has been performed have been saved since the employment of antitoxin. In one of the hospitals no less than a fraction under 60 per cent. survived, although the recoveries in that hospital in any former year did not exceed 25 per cent., and in the preceding year—viz., 1894—were as low as 10 per cent.

TABLE XL.—*All Laryngeal Cases, however treated.*

AGES.	1894.			1895 (Antitoxin Year).		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	9	8	88·8	13	10	76·9
1 to 2	66	52	78·7	106	67	63·2
2 to 3	85	55	64·7	78	37	47·4
3 to 4	79	49	62·0	108	39	36·1
4 to 5	76	43	56·5	98	42	42·8
5 to 10	138	72	52·1	131	30	22·9
10 to 15	3	1	33·3	7	3	42·8
15 and upwards... ...	10	9	90·0	2	2	100·0
Total	466	289	62·0	543	230	42·3

TABLE XLI.—*Percentage of Laryngeal Cases in which Tracheotomy was performed at each Hospital.*

HOSPITAL.	1894.	1895 (Antitoxin Year).
Eastern	55·8	57·5
North-Western	58·9	32·9
Western	38·8	30·1
South-Western	68·1	48·0
South-Eastern	63·5	53·3
Fountain	...	48·0
Totals for all cases	56·0	45·3

On reference to Table XL., it will be seen that the improved results in the tracheotomy cases of 1895 have also been shared by analogous cases in which the operation was not performed. The percentage mortality of all laryngeal cases has fallen from 62 in 1894 to 42·3 in 1895.

Moreover, as will be referred to later, the number of laryngeal cases which required tracheotomy has fallen in 1895 to 45·3 per cent., whereas in 1894 it was 56 per cent. (See Table XLI.)

For convenience of comparison the three following tables—XLII. to XLIV.—have been added. They briefly summarise the foregoing results; and, as no returns for 1894 were furnished by the Fountain Hospital by reason of the smallness of the numbers, the Fountain cases have also been omitted from the 1895 figures, in order that the two series may be rendered strictly comparable.

TABLE XLII.—*Showing Comparative Mortality of Laryngeal Cases at all Hospitals (except the Fountain).*

Year.	Cases.	Deaths.	Percentage Mortality.
1894	466	289	62·0
1895 (Antitoxin Year) ...	468	196	41·8

TABLE XLIII.—*Showing Comparative Results in Tracheotomy Cases at all Hospitals (except the Fountain).*

Year.	Cases.	Deaths.	Percentage Mortality.
1894	261	184	70·4
1895 (Antitoxin Year) ...	219	108	49·3

TABLE XLIV.—*Showing Comparative Number of Laryngeal Cases which required Tracheotomy at all Hospitals (except the Fountain).*

Year.	Cases.	Tracheotomies.	Percentage of Tracheotomies.
1894	466	261	56·0
1895 (Antitoxin Year) ...	468	219	46·8

On these tables further comment seems unnecessary.

III.

COMPLICATIONS.

The following tables—XLV. to LXVI.—show the number and percentage incidence of complications which arose amongst the cases which form the subject of this report.

Tables XLV. to LI. deal with those cases which were treated with antitoxin during 1895.

EASTERN HOSPITAL.

TABLE XLV.—*Complications. Cases treated with Antitoxin during* 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	113	40·9
Nephritis	0	0·0
Paralysis (various)...	51	18·4
Pneumonia, lobar ...	6	2·1
Do. lobular	7	2·5
Relapse of Disease ...	3	1·0

SOUTH-WESTERN HOSPITAL.

TABLE XLVIII.—*Complications. Cases treated with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	201	63·6
Nephritis	4	1·2
Paralysis (various)...	81	25·6
Pneumonia, lobar ...	1	0·3
Do. lobular	11	3·4
Relapse of Disease...	4	1·2

NORTH-WESTERN HOSPITAL.

TABLE XLVI.—*Complications. Cases treated with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	104	28·6
Nephritis	21	5·7
Paralysis (various) ..	58	15·9
Pneumonia, lobar ...	1	0·2
Do. lobular	21	5·7
Relapse of Disease...	2	0·5

SOUTH-EASTERN HOSPITAL.

TABLE XLIX.—*Complications. Cases treated with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	274	59·4
Nephritis	5	1·0
Paralysis (various) ...	154	33·4
Pneumonia, lobar ...	0	0·0
Do. lobular	12	2·6
Relapse of Disease...	8	1·7

WESTERN HOSPITAL.

TABLE XLVII.—*Complications. Cases treated with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	233	53·9
Nephritis	7	1·6
Paralysis (various)...	92	21·2
Pneumonia, lobar ...	9	2·0
Do. lobular	7	1·6
Relapse of Disease ...	8	1·8

FOUNTAIN HOSPITAL.

TABLE L.—*Complications. Cases treated with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	156	46·7
Nephritis	8	2·3
Paralysis (various) ...	71	21·2
Pneumonia, lobar ...	1	0·2
Do. lobular	22	6·5
Relapse of Disease ...	6	1·7

ALL THE HOSPITALS.

TABLE LI.—*Complications. Cases treated with Antitoxin*, 1895.

Complic tions.	Number of Cases.	Percentage on Total Cases.
Albuminuria	1,081	40·9
Nephritis	45	2·0
Paralysis (various)	507	23·2
Pneumonia, lobar	18	0·8
Do. lobular	80	3·6
Relapse of Disease	31	1·4

The affections included in the above tables have been hitherto recorded as normal complications of diphtheria.

It is obvious that no conclusion as to the influence of antitoxin on the incidence of complications can be obtained by comparing the above tables with others dealing with those cases which during the same period were not so treated, because the average severity of the cases comprising the two groups was so widely different, and, consequently, the liability to the development of these very complications.

COMPARATIVE INCIDENCE OF COMPLICATIONS, 1894 AND 1895.

But for the purposes of comparison the following tables may be referred to. They deal with all cases of diphtheria complications in each hospital during the years 1894 and 1895.

EASTERN HOSPITAL.

TABLE LII.—*Complications. All cases*, 1894 *and* 1895.

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria	176	38·9	243	37·8
Nephritis	0	0·0	1	0·1
Paralysis (various)	49	10·0	103	16·0
Pneumonia, lobar	3	0·6	12	1·8
Do. lobular	12	2·6	10	1·5
Relapse of Disease	5	1·1	6	0·9

NORTH-WESTERN HOSPITAL.

TABLE LIII.—*Complications. All Cases.*

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria	166	14·4	195	26·7
Nephritis	32	2·7	28	3·8
Paralysis (various)	128	11·1	138	18·9
Pneumonia, lobar	2	0·1	6	0·8
Do. lobular	19	1·1	24	3·2
Relapse of Disease	3	0·2	2	0·2

WESTERN HOSPITAL.

TABLE LIV.—*Complications. All Cases.*

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria	163	35·2	277	48·2
Nephritis	0	0·0	7	1·2
Paralysis (various)	38	8·2	102	17·7
Pneumonia, lobar	3	0·6	11	1·9
Do. lobular	6	1·2	9	1·5
Relapse of Disease	1	0·2	11	1·9

SOUTH-WESTERN HOSPITAL.

TABLE LV.—*Complications. All Cases.*

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria	Not given.		241	51·6
Nephritis	2	0·3	4	0·8
Paralysis (various)	100	18·3	103	22·0
Pneumonia, lobar	0	0·0	1	0·2
Do. lobular	6	1·0	11	2·3
Relapse of Disease	7	1·2	7	1·4

SOUTH-EASTERN HOSPITAL.

TABLE LVI.—*Complications. All Cases.*

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria	98	22·5	289	52·3
Nephritis	3	0·6	8	1·4
Paralysis (various)	88	20·2	192	34·7
Pneumonia, lobar	3	0·6	1	0·1
Do. lobular	7	1·6	19	3·4
Relapse of Disease	12	2·7	11	1·9

FOUNTAIN HOSPITAL.

TABLE LVII.—*Complications. All Cases.*

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria	...	...	222	39·3
Nephritis	...	...	11	1·9
Paralysis (various)	...	...	94	16·6
Pneumonia, lobar	...	...	2	0·3
Do. lobular	..	...	26	4·6
Relapse of Disease	...	...	13	2·3

ALL HOSPITALS.

TABLE LVIII.—*Complications. All Cases.*

Complications.	1894.		1895 (Antitoxin Year).	
	Number of Cases.	Percentage on Total Cases.	Number of Cases.	Percentage on Total Cases.
Albuminuria*	603	24·1	1,467	41·5
Nephritis	37	1·2	59	1·6
Paralysis (various)	403	13·2	732	20·7
Pneumonia, lobar	11	0·3	33	0·9
Do. lobular	50	1·6	99	2·8
Relapse of Disease	28	0·9	50	1·4

* In calculating the percentage incidence of albuminuria for 1894, the South-Western Hospital is omitted.

Table LVIII.—the combined table—shows an increase in the year 1895 in respect to each of the normal complications of diphtheria. The increase is most noticeable in the case of albuminuria and paralysis. It is impossible to assign this increase to the operation of any one cause. That antitoxin alone cannot be responsible for it is shown by reference to Table LIX., but the following considerations indicate some of the factors which may possibly have contributed to this result :—

(i.) If any method of treatment for diphtheria is more efficacious than another in tiding the patient over the acute stage of the disease, it is only to be expected that the comparative incidence of complications amongst cases so treated would rise. In most fatal attacks death occurs fairly early, and the longer life is prolonged the greater is the likelihood that some complications will arise.

(ii.) It is possible that the average type of disease in 1895 was more conducive to the development of certain complications. This is clearly suggested by the following table, which refers to the non-antitoxin cases of 1894 and 1895 :—

TABLE LIX.—*Showing Comparative Incidence of Complications in the* 1894 *Cases, and in the Non-Antitoxin Cases of* 1895.

Complications.	1894 (Non-Antitoxin Year).	1895 (Non-Antitoxin Cases).
Albuminuria	24·1	28·6
Nephritis	1·2	1·0
Paralysis...	13·2	16·7
Pneumonia, lobar...	0·3	1·1
Do. lobular	1·6	1·2
Relapse	0·9	1·2

It is seen that, with the exception of nephritis and lobular pneumonia, the incidence of all the regular complications of diphtheria was greater amongst the non-antitoxin cases of 1895 (for the most part the mild ones) than amongst those of all degrees of severity in 1894.

(iii.) It is possible that those concerned in taking the notes during 1895 have been more careful in recording the slighter manifestations of the various complications than in previous years; for certainly the introduction of the antitoxic treatment has led to a deepening of the interest attaching to the clinical study of diphtheria.

The incidence of nephritis has increased from 1·2 per cent. in 1894 to 1·6 in 1895. It must be remembered that it is by no means easy to draw the line in some

cases between the symptomatic albuminuria of diphtheria and the presence of actual renal inflammation. Consequently, the same condition will be recorded by one observer as a case of albuminuria, whilst to another the case will be one of nephritis. Such differences of opinion alone would be quite sufficient to account for the small increase in the incidence. In any case, however, the figures show that nephritis is not a common complication of diphtheria, and they certainly do not warrant the statement that has been made in some quarters that antitoxin frequently leads to renal inflammation; nor have we observed any such connection in the post-mortem room.

When we examine and compare the tables of the individual hospitals, we find considerable divergence in respect to the frequency of the different complications. This, again, is doubtless to be explained in part by the variation in definition. Take, for example, albuminuria, which, after all, is rather a symptom than a complication of diphtheria. At the Eastern Hospital, albuminuria has been recorded as a complication "when it has existed for three days or longer, and in cases fatal within three days, when it has been present in a marked degree." At the North-Western, "the term 'albuminuria' implies that perceptible deposit has been found, varying from a slight one to any amount. A transient trace observed on a single occasion is not included." At the Western, "all cases have been included in which albumin was found to be present in definite trace on more than one occasion." At the South-Western, "'albuminuria' means albumin present in the urine in any degree, whether transient or not." At the South-Eastern, "all cases are included in which albumin has been found in the urine at any time during the attack." Lastly, at the Fountain Hospital, "albumin present for at least seven days, in cases that recovered, and, in cases that died with seven days, if present in large amount."

Tables LX. to LXVI. deal with the complications presumably connected with antitoxin.

EASTERN HOSPITAL.

TABLE LX.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	115	41·6
Joint-Pains	10	3·6
Pyrexia, with or without rash or pains...	81	29·3
Abscess at site of injection	7	2·5

NORTH-WESTERN HOSPITAL.

TABLE LXI.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	82	22·5
Joint-Pains	3	0·8
Pyrexia, with or without rash or pains ...	Not given.	
Abscess at site of injection	7	1·9

WESTERN HOSPITAL.

TABLE LXII.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	238	55·0
Joint-Pains	26	6·0
Pyrexia, with or without rash or pains..	86	19·9
Abscess at site of injection	5	1·1

SOUTH-EASTERN HOSPITAL.

TABLE LXIV.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	240	52·0
Joint-Pains	30	6·5
Pyrexia, with or without rash or pains...	124	26·8
Abscess at site of injection	3	0·6

SOUTH-WESTERN HOSPITAL.

TABLE LXIII.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	173	54·7
Joint-Pains	24	7·5
Pyrexia, with or without rash or pains...	186	58·8
Abscess at site of injection	22	6·9

FOUNTAIN HOSPITAL.

TABLE LXV.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	154	46·1
Joint-Pains	10	2·9
Pyrexia, with or without rash or pains...	170	50·8
Abscess at site of injection	8	2·3

ALL THE HOSPITALS.

TABLE LXVI.—*Complications probably connected with Antitoxin*, 1895.

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	1,002	45·9
Joint-Pains	103	4·7
Pyrexia, with or without rash or pains* ...	647	29·6
Abscess at site of injection...	52	2·3

* In calculating the percentage of pyrexia cases, the North-Western Hospital is omitted

From these it will be seen that a rash is the most common sequel. It usually takes the form of an urticaria, or a vivid patchy erythema, more or less covering the trunk and extremities; and is very similar to the eruptions of measles and septicæmia. It is sometimes scarlatiniform. It is often accompanied by pyrexia. This secondary fever in some cases persists for several days, and may be unaccompanied by any other obvious symptom: it has the effect of somewhat retarding convalescence, and no doubt in rare instances, in patients whose vitality has been lowered by a severe attack of diphtheria, may act prejudicially if it arise at a time when symptoms of cardiac failure are present. But the risk associated with this secondary pyrexia is very small compared with the benefit which follows the employment of antitoxin in the early acute stage of the disease. Other drugs of acknowledged usefulness are occasionally observed to give rise to symptoms which are the reverse of pleasant, and in this respect antitoxic serum is no exception.

The joint pains are rarely severe or accompanied by obvious effusion. They almost invariably pass off in the course of a few days, and apparently leave no ill effects.

An abscess will occasionally develop at the seat of injection in spite of the greatest care. Considering the large number of injections (5,086), and the septic element which is present in so large a proportion of the severe attacks, the number of abscesses is not excessive.

IV.

Dosage.

The serum employed during the year 1895 was supplied by the British Institute of Preventive Medicine during the first eight months, and for the last four months by Dr. Sims Woodhead, in accordance with the arrangement between the Metropolitan Asylums Board and the controlling body of the Laboratories of the Royal Colleges of Physicians and Surgeons.

No difference was observed either in the antitoxic value or in the clinical behaviour of the two supplies.

The serum which is now being issued by Dr. Sims Woodhead is, in proportion to its volume, of greater immunisation value than that used during the period comprised in this report. It is now being sent out in separate doses of not less than 1,000 of Behring's immunisation units, irrespective of the actual quantity of serum. This method of regulating the dosage is far more accurate and reliable than the original method, which simply had reference to the volume of serum, without regard to its standard of immunisation.

The proportion of cases treated with antitoxin varied considerably at different hospitals, as did also the average amount of serum given to each case. This is shown in the following table, which is concerned with the dosage at each of the hospitals:—

TABLE LXVII.—*Showing Dosage at each Hospital.*

Hospital.	Recoveries.						Deaths.						All Cases.					
	Amount of Serum.	No. of Patients.	No. of Injections	Average Dose.	Average No. of Injections.	Average Amount per Patient.	Amount of Serum.	No. of Patients.	No. of Injections.	Average Dose.	Average No. of Injections.	Average Amount per Case.	Amount of Serum.	No. of Patients.	No. of Injections.	Average Dose.	Average No. of Injections.	Average Amount per Patient.
	c.c.			c.c.		c.c.	c.c.			c.c.		c.c.	c.c.			c.c.		c.c.
Eastern	4,956	190	346	14·3	1·8	26·0	4,074	86	206	19·7	2·3	47·3	9,030	276	552	16·3	2·0	32·7
North-Western	4,155	246	263	15·7	1·0	18·3	4,325	117	236	18·5	2·0	36·5	8,480	363	499	18·9	1·3	23·3
Western	11,268	322	701	16·0	2·1	32·2	7,926	110	394	20·1	3·5	66·0	19,194	432	1,095	17·5	2·5	44·5
South-Western	13,808	222	883	15·6	3·9	62·1	7,575	94	470	16·1	5·0	80·5	21,383	316	1,353	15·8	4·2	67·6
South-Eastern	15,140	352	627	24·1	1·7	43·0	5,680	109	201	28·2	1·8	52·1	20,820	461	828	25·0	1·7	45·1
Fountain	6,870	235	483	14·2	2·0	29·2	4,320	99	276	15·6	2·7	43·6	11,190	334	759	14·7	2·2	33·5
Totals	56,197	1,567	3,303	17·0	2·1	35·8	33,900	615	1,783	19·1	2·8	55·1	90,097	2,182	5,086	17·7	2·3	41·2

Moreover, the frequency of injection, size of dose, and total amount of serum given to each case have been varied at different times in the same hospital. Our knowledge on the point of dosage is at present mainly empirical, but we think the best results may be obtained by giving a dose of 1,000 Behring's immunisation units every 12 hours for the first 24, 36, or 48 hours, according to the gravity of the case, and, if necessary, a subsequent injection of half the amount daily for such time as the exudation may remain adherent.

It may be stated generally that, with the exceptions noted in the second paragraph of this report, the practice at each hospital has been to regulate the

dosage according to the severity of the case, rather than to be guided by the age or weight of the patient.

Table LXVIII. has been compiled with the object of ascertaining whether any relation exists between the amount of serum given in each hospital and the corresponding death rate.

TABLE LXVIII.—*Showing Reduction of Mortality at each Hospital in relation to Proportion of Patients treated with Antitoxin, and the Dosage.*

Hospital.	Percentage Mortality, 1894.	Percentage Mortality, 1895.	Difference.	Percentage of Cases treated with Antitoxin	Average Amount of Serum given to each Case.
Eastern	30·0	25·5	4·5	43·0	32·7 c.c.
North-Western ...	26·9	24·5	2·4	49·7	23·3 c.c.
Western	37·1	20·8	16·3	75·1	44·5 c.c.
South-Western ...	28·5	21·1	7·4	67·6	67·6 c.c.
South-Eastern ...	29·7	21·7	8·0	83·9	45·1 c.c.
Average ...	29·6	22·5	7·1	61·8	41·2 c.c.

It is seen that the average reduction in the percentage mortality for all the hospitals during 1895 was 7·1; the average number of cases of diphtheria treated with antitoxin was 64·8 per cent.; and the average amount of serum given to each case was 41·2 c.c.

A further examination of Table LXVIII. reveals the following association of facts, which we think noteworthy:—In each of the two hospitals at which the reduction of percentage mortality was less than 7·1, both the proportion of cases treated with antitoxin and the average amount of serum given to each were below the mean; whereas, at the remaining three hospitals, all of which showed an improvement in the death rate of more than 7·1, both the proportion of cases treated with antitoxin and the average amount of serum per case were above the mean.

V.

CLINICAL EFFECTS.

Certain effects have been observed clinically to follow the administration of antitoxin in cases brought under treatment at a reasonably early date: they are—

(i.) A diminution of the faucial swelling and consequent distress.
(ii.) A lessening, if not an entire cessation, of the irritating and offensive discharge from the nose.
(iii.) A limitation of the extension of membrane.
(iv.) An earlier separation of the exudation. This may be recorded as a matter of clinical observation in faucial attacks, and the following table shows that such was the case in two out of the three hospitals from which a record was obtainable:—

TABLE LXIX.—*Average Persistence of Exudation (in Days) after treatment was commenced in those Cases which Recovered during the Years* 1894 *and* 1895.

Hospital.	1894.	1895 (Antitoxin).	Difference.	Average Amount of Antitoxin given to each Case.
North-Western	6·6	6·9	+ 0·3	18·3 c.c.
Western	8·3	4·9	— 3·4	32·2 c.c.
South-Western	4·6	2·8	— 1·8	62·1 c.c.

In the hospital which proved the exception, the difference—viz., 0·3 of a day per case—was slightly in favour of the non-antitoxin year. It is possible that the comparatively small amount of serum given may be sufficient to account for the disparity.

(v.) A limitation and earlier separation of membrane in laryngeal cases.

Evidence of this is afforded by Table XLI., which shows that in 1895 a lesser percentage of laryngeal cases called for tracheotomy. Moreover, the following table shows that in the same year a considerably less percentage of cases developed the symptoms of croup after coming under treatment, the figures for 1894 and 1895 being 3·81 and 0·61 respectively :—

TABLE LXX.—*Showing Comparative Number of Cases in which the Larynx became involved after Admission.*

Year.	Total Diphtheria Admissions.	Cases which developed Croup after Admission.	Percentage of Admissions.
1894	3,042	116	3·81
1895 (Antitoxin Year)	2,965	18	0·60

The cases treated at the Fountain Hospital are omitted from this table.

(vi.) An improvement in the general condition and aspect of the patients.

(vii.) A prolongation of life, in cases which terminate fatally, to an extent not obtained with former methods of treatment. This is shown by the following table :—

TABLE LXXI.—*Average Duration of Life (in Days) after Admission in Fatal Cases during the Years* 1894 *and* 1895.

Hospital.	1894.	1895 (Antitoxin).	Difference.	Average Amount of Antitoxin given in each Case.
Eastern	7·3	9·6	+ 2·3	47·3 c.c.
North-Western	9·4	8·4	— 1·0	36·5 c.c.
Western	7·9	9·8	+ 1·9	66·0 c.c.
South-Western	4·9	8·0	+ 3·1	80·5 c.c.
South-Eastern	5·4	6·6	+ 1·2	52·1 c.c.

It will be seen that in only one of the hospitals was the average duration of life after admission longer in 1894 than in 1895.

We are of opinion that no constant or important effect upon either the temperature or pulse rate is attributable to antitoxin.

VI.

Summary.

The improved results in the diphtheria cases treated during the year 1895, which are indicated by the foregoing statistics and clinical observations, are:—

(i.) A great reduction in the mortality of cases brought under treatment on the first and second day of illness.

(ii.) The lowering of the combined general mortality to a point below that of any former year.

(iii.) The still more remarkable reduction in the mortality of the laryngeal cases.

(iv.) The uniform improvement in the results of tracheotomy at each separate hospital.

(v.) The beneficial effect produced on the clinical course of the disease.

Conclusion.

A consideration of the foregoing statistical tables and clinical observations, covering a period of 12 months and embracing a large number of cases, in our opinion sufficiently demonstrates the value of antitoxin in the treatment of diphtheria.

It must be clearly understood, however, that to obtain the largest measure of success with antitoxin it is essential that the patient be brought under its influence at a comparatively early date—if possible, not later than the second day of disease. From this time onwards the chance of a successful issue will diminish in proportion to the length of time which has elapsed before the treatment is commenced. This, though doubtless true of other methods, is of still greater moment in the case of treatment by antitoxin.

Certain secondary effects not infrequently arise as a direct result of the injection of antitoxin in the form in which it has at present to be administered, and even assuming that the incidence of the normal complications of diphtheria is greater than can be accounted for by the increased number of recoveries, we have no hesitation in expressing the opinion that these drawbacks are insignificant when taken in conjunction with the lessened fatality which has been associated with the use of this remedy.

We are further of the opinion that in antitoxic serum we possess a remedy of distinctly greater value in the treatment of diphtheria than any other with which we are acquainted.

We take the opportunity of expressing our best thanks to the following gentlemen who have rendered us their willing assistance in compiling the statistics shown in the above report, viz. :—Drs. J. S. Richards and W. J. Potts, and Mr. H. W. Armit, of the Eastern Hospital; Dr. J. T. Grant, of the North-Western Hospital; Mr. E. Hill, Drs. C. A. Kent and W. St. C. Symmers, of the Western Hospital; Drs. W. J. Stewart and H. E. Cuff, and Mr. F. Pershouse, of the South-Western Hospital; Drs. A. P. Hodges and A. Miller, of the South-Eastern Hospital; Drs. G. Thornton and J. F. Johns, of the Fountain Hospital.

(Signed) W. GAYTON. F. FOORD CAIGER.
JOHN MacCOMBIE. E. W. GOODALL.
R. M. BRUCE. C. E. MATTHEWS.

March 25th, 1896.

SUPPLEMENTARY REPORT ON 119 CASES OF POST-SCARLATINAL DIPHTHERIA COMPLETED AT THE NORTHERN (CONVALESCENT) HOSPITAL DURING THE YEAR 1895.

These 119 cases may be divided into—

(*a*) 111 cases in which diphtheria bacilli were found.
(*b*) 5 cases in which no diphtheria bacilli were found.
(*c*) 3 cases which were not bacteriologically examined.

But classes (*b*) and (*c*) were, from a clinical point of view, all typical cases of diphtheria.

Antitoxin was given in 58 cases, viz. :—

In 53 cases of class (*a*), with 4 deaths; and
„ 5 „ (*b*), „ no death.

Number of Injections.—In 45 cases one injection was given; 2 deaths.
„ 12 „ two injections were given; 1 death.
„ 1 case three „ „ ; 1 „

Dosage.—In 14 cases the total amount given to each was 10 c.c.
„ 10 „ „ „ „ 15 „
„ 26 „ „ „ „ 20 „ 2 deaths.
„ 4 „ „ „ „ 30 „ 1 death.
„ 4 „ „ „ „ 35 „ 1 „

Thus the average dose for each case was 18·4 c.c., and for each injection was 14·8 c.c.

Little can be said about the general principle underlying the dosage. It has necessarily been empirical. In the earlier days small doses were given—5 or 10 c.c.; but to the later cases the general practice has been to administer an initial dose of 20 c.c. This much may be said—that no obviously mild cases, but only those of moderate or considerable severity, have been treated by antitoxin.

TABLE I.—*Cases of Post-Scarlatinal Diphtheria treated with Antitoxin*, 1895.
(Showing day of disease on which the treatment was commenced.)

Day of Disease ...	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
Ages.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	
3 to 4...	2	0	4	1	1	0	0	0	2	1	9	2	22·2
4 to 5...	0	0	4	0	1	0	0	0	4	0	9	0	0·0
5 to 10...	6*	0	12†	1	6	0	1	0	4	1	29	2	6·9
10 to 15	3	0	6	0	0	0	0	0	0	0	9	0	0·0
15 to 20...	0	0	1	0	0	0	0	0	0	0	1	0	0·0
20 and upwards	1	0	0	0	0	0	0	0	0	0	1	0	0·0
Total	12	0	27	2	8	0	1	0	10	2	58	4	6·9

* Including 1 case in which no bacilli were found } No deaths.
† „ 4 cases „ „ „ }

TABLE II.—*All Cases*, 1895, *both those treated with Antitoxin and those not.*

(In the case of cases not treated with Antitoxin, day of disease = day of disease on which patient was admitted to hospital.)

Day of Disease ...	1st.		2nd.		3rd.		4th.		5th & after.		TOTAL.		Mortality per cent.
Ages.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	Number.	Deaths.	
2 to 3...	1	0	0	0	0	0	0	0	0	0	1	0	0·0
3 to 4...	5	0	4	1	1	0	0	0	2	1	12	2	16·6
4 to 5...	9*	0	4	0	1	0	0	0	4	0	18	0	0·0
5 to 10...	37†	0	12‡	1	6	0	1	0	4	1	60	2	3·3
10 to 15...	16	0	6	0	0	0	0	0	0	0	22	0	0·0
15 to 20...	3	0	1	0	0	0	0	0	0	0	4	0	0·0
20 and upwards	2	0	0	0	0	0	0	0	0	0	2	0	0·0
Total	73	0	27	2	8	0	1	0	10	2	119	4	3·3

* Including 1 case in which no bacilli were found
† „ 3 cases „ „ „ } No deaths.
‡ „ 4 „ „ „ „

TABLE III.—*Laryngeal Cases*, 1895.

Ages.	Cases.	Deaths.	Mortality per cent.
3 to 4	3	1	33·3
4 to 5	3	0	0·0
5 to 10	2*	0	0·0
Total... ...	8	1	12·5

* Including 1 case in which no bacilli were found.

All cases were treated with antitoxin, and in none of them was tracheotomy required.

TABLE IV.—*Complications. Cases treated with Antitoxin*, 1895.

(Number of cases, 58.)

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	30*	51·7
Nephritis	0	0·0
Paralysis (various) ...	8	13·8
Pneumonia, lobar ...	0	0·0
Do. lobular	0	0·0
Relapse of Disease...	0	0·0

* Including 3 cases in which no bacilli were found.

TABLE V.—*Complications. All Cases whether treated with Antitoxin or not*, 1895.

(Number of cases of diphtheria, 119.)

Complications.	Number of Cases.	Percentage on Total Cases.
Albuminuria	45*	37·8
Nephritis	0	0·0
Paralysis (various) ...	13†	10·9
Pneumonia, lobar ...	0	0·0
Do. lobular	0	0·0
Relapse of Disease ...	0	0·0

* Including 3 cases not bacteriologically examined, and 3 in which no bacilli were found.
† Including 2 cases not bacteriologically examined.

TABLE VI.—*Complications probably connected with Antitoxin*, 1895.

(Number of cases treated, 58.)

Complications.	Number of Cases.	Percentage on Total Cases.
Rash	32	55·2
Joint-Pains	7	12·0
Pyrexia, with or without rash or pains...	12	20·6
Abscess at site of injection	0	0·0

These statistics afford some inference, as far as any can be drawn from a small number of cases, as to the importance of the early administration of the serum.

Of 12 cases treated on the first day, none died.

Of 27 „ „ second day, 2 died—a mortality of 7·4 per cent.

Of 8 „ „ third day, none died.

One case treated on the fourth day recovered.

Of 10 cases treated on the fifth day and after, 2 died—a mortality of 20 per cent.

Of the four fatal cases, in two the treatment was commenced on the second day of disease; in one, on the fifth; and in one, on the seventh day.

The average length of time during which the exudation persisted after the commencement of treatment was, for the antitoxin cases, 4·3 days, against 7·5 days for the non-antitoxin cases of 1894 and 1895.

General Conclusions.

The most striking fact elicited by these statistics is the exceedingly low mortality—in 119 cases only four deaths, or 3·3 per cent. It curiously happens that the number of post-scarlatinal diphtheria cases occurring at this hospital during the three previous years is exactly 119; furnishing 75 deaths (instead of four), and a percentage mortality of 63 (instead of 3·3). But before these figures can be fairly contrasted some deductions must be made. In 1895 the bacteriological method of diagnosis was adopted for the first time; and in consequence a considerable number of cases were classed as diphtheria which in former years, and indeed at any time from the unaided clinical point of view, would have been looked upon as trivial cases of tonsillitis or pharyngitis. But even if all cases be rejected which were not treated with antitoxin (*i.e.*, the milder cases), and the antitoxin cases only be considered, and if there be further deducted from these the few in which no bacilli were found, there remain 53 cases of at least average severity, with only four deaths—a percentage mortality of 7·5.

The mortality in 1895, as compared with that of previous years, is shown by the following table, which gives the age incidence and mortality for the past six years:—

Table VII.

Age.	1890.		1891.		1892.		1893.		1894.		Totals.			1895.					
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Mortality per cent.	All Cases.	Deaths.	Mortality per cent.	Antitoxin Cases.	Deaths.	Mortality per cent.
Under 5	14	14	6	4	16	15	12	9	8	6	56	48	85·7	31	2	6·4	18	2	11·1
5 to 10	17	8	4	1	21	14	21	16	18	7	81	46	56·7	60	2	3·3	29	2	6·9
10 to 15	5	2	0	0	9	2	5	2	3	1	22	7	31·8	22	0	0·0	9	0	0·0
Over 15	2	0	1	0	1	0	3	3	2	0	9	3	33·3	6	0	0·0	2	0	0·0
Total ...	38	24	11	5	47	31	41	30	31	14	168	104	61·9	119	4	3·3	58	4	6·8

There is no reason to suppose that there has been any change in the type of disease coincidently with the introduction of the antitoxin treatment. The cases of 1895 were in their earliest symptoms similar to those of previous years, and the fact that the local and constitutional conditions which were formerly so fatal have not supervened may reasonably be ascribed to the new treatment employed.

This opinion is confirmed by the recovery of cases which, both from laryngeal obstruction and severity of constitutional symptoms, would in pre-antitoxin days have been regarded as hopeless.

It may be remarked that the proportion of laryngeal cases was smaller in 1895 than in 1894, the numbers being nine in 31 cases in the latter, and eight in 58 (counting the antitoxin cases only) in the former year; but the percentage of cases in which the larynx was affected early in the disease was similar in the two years, and the diminution in 1895 was owing to the smaller number of cases arising after the first and second day of illness.

In 1894 the larynx was involved in three cases on the first day, in one on the second, and in five later; in 1895 in five cases on the first day, in one on the second, and in two later. The reduction in 1895 in the number of cases arising after the first day was, in my opinion, due to the more favourable course of the disease, consequent upon the administration of antitoxin.

The mortalities of the laryngeal cases in the two years are in striking contrast: in 1895, seven out of eight recovered; in 1894, of nine cases, all died. The only new factor in the treatment of post-scarlatinal diphtheria at this hospital is antitoxin. It is difficult to resist the conclusion that there must be some connection between the new method of treatment and the great reduction of mortality.

I am indebted, and wish to express my thanks, to Mr. Hague, Senior Assistant Medical Officer, for the collection of these statistics, and for his assistance in the preparation of this report.

(Signed) F. N. HUME.

March 25th, 1896.

PART III.

No. 10.

REPORT OF DR. T. F. RICKETTS, MEDICAL SUPERINTENDENT OF THE SMALLPOX HOSPITAL SHIPS.

(For Statistics, see pp. 160 to 174.)

HOSPITAL SHIPS, LONG REACH,
NEAR DARTFORD, KENT,
January 28th, 1896.

To the Committee of Management.

LADIES AND GENTLEMEN,

944* patients were admitted into this hospital during the course of last year. Seventy patients remained under treatment on December 31st, 1895, as against 16 on December 31st, 1894. Ten patients were not suffering from smallpox when admitted. Five of these were infants in arms, who entered the hospital with their mothers. One of these infants developed smallpox subsequently, and had probably contracted the disease shortly before admission. This patient died. Particulars of the case are given below.

The remaining five of the 10 patients mentioned above were suffering on admission from the following diseases:—

Acne	3
Varicella	1
Slight papular eruption of no significance... ...	1

One of these five patients contracted smallpox in this hospital. Particulars are given here.

* 18 of these were cases admitted direct to the ships from places outside the metropolis, and are not included in Table I., p. 158, nor in Appendix A, p. 233.

Cases in which Smallpox, not present on admission, was developed subsequently.

No.	Initials.	Age.	Sex.	Disease with which Admitted.	Dates of				Result.	Statement as to Primary Vaccination.	No. of Scars.	Collective Area.	Fraction foveated.	Re-vaccination.	Type of Disease.	Remarks.
					Admission.	Initial illness.	Eruption.	Discharge or Death.								
1	R. D. P.	22	M	Acne	June 22	July 5	July 7	July 26	R	In infancy	4	sq. in. ·39	½	July 23, unsuccessfully July 27, successfully	Very mild discrete	...
2	G. P.	6 m'ths	M	Nil, admitted with Mother	Aug. 2	...	Aug. 15	Oct. 17	D	Vaccinated Aug. 2 unsuccessfully, and Aug. 4 successfully. Not previously.				..	Very mild discrete	Complicated by Marasmus.

Deducting those patients who were not suffering from smallpox when admitted here, there remain 934 patients who were so suffering. Of these, 58 died during the year. The mortality among such patients, therefore, calculated by the Registrar-General's formula, was 6·39 per cent. Including such patients as were treated at other institutions of the Managers, the total mortality in smallpox cases was 6·89 per cent.

In three of the fatal cases death was due to another disease :—

No.	Initials.	Age.	Sex.	Date of appearance of Smallpox Eruption.	Type of Smallpox.	Independent Disease.	Date of Death.	Statement as to Primary Vaccination.	No. of Scars.	Collective Area.	Fraction foveated.	Re-vaccination.
1	C. H.	74	M	June 29	Severe discrete	Chronic Nephritis and Uræmia	July 2	In infancy	2	sq. in. ·16	none	Not.
2	W. R.	74	M	June 30	Very mild discrete ...	Chronic Bronchitis and Phthisis ...	July 3	In infancy	none	...	...	June 19, successfully.
	G. A.	49	M	Aug. 31	Severe discrete	Mitral Regurgitation	Sept. 13	In infancy	none	...	...	Not.

Only one case of scarlet fever occurred during the year. The patient was isolated at Gore Farm Hospital.

There were two cases of erysipelas.

The incidence of smallpox in the Metropolis in 1895 was in some respects curious and anomalous. As a rule the bulk of the cases occur in the first six months of the year. The number of cases removed from the metropolitan area in the first six months of 1895 was 211, whereas during the last six months 617 cases were removed. Smallpox is usually most prevalent in London in the months of April and May. In 1895 it was most prevalent in July and August.

It will be remembered that at the end of 1894 the disease had almost disappeared in London, and that it only lingered in the union of Marylebone, where it had been prevalent since the summer of that year. In December, 1894, only 10 cases were removed, and these were all from that union.

Early in 1895 there was an increase in the number of cases—45 cases being removed from the metropolitan area in January, 48 in February and 39 in March. But as in the latter part of 1894, so in the early part of 1895, the bulk of the cases came from the union of Marylebone, 35 cases being removed from that union in January, 34 in February and 11 in March. By the end of March, smallpox, which had kept its hold on the union of Marylebone for upwards of nine months, was at length stamped out there.

Putting aside the cases removed from Marylebone during January, February and March, it will be seen that, of the cases admitted from the remainder of the metropolitan area, 10 were removed in January, 14 in February and 28 in March. Thirty cases were removed in April and 14 in May.

Leaving Marylebone out of count, it is thus seen that in the rest of London the occurrence of what little smallpox there was in the early months of the year was governed much as usual by the law of seasonal influence, and was at its maximum in March and April. The cases were scattered over several unions, and no union was exceptionally visited. There was nothing peculiar in the class of patients affected. There seemed, therefore, at the end of May every reason to expect a rapid disappearance of smallpox in London.

In June, however, there was a recrudescence of the disease, 35 cases being removed during that month. The number of attacks shortly assumed serious proportions. In July and August, 221 and 219 cases respectively were removed from the metropolitan area, and every union contributed cases. The unions chiefly affected were Whitechapel, St. Saviours and Bethnal Green—80, 56 and 50 cases being admitted from those unions respectively in July and August.

The causes which produced this sudden spread of the disease were not far to seek. Of the 35 patients admitted during June, only six possessed a fixed home. Of the remaining 29, three were infected in a London infirmary where smallpox had been introduced by some undiscovered means in May, and seven were infected in another infirmary by the agency of a vagrant who developed smallpox shortly after his admission there.

The remaining 19 were vagrants who possessed no lodging or no fixed lodging, or other persons of the lowest class of society, all of them sleeping, when they slept under a roof at all, in common lodging houses, Salvation Army shelters or the like. Of the 221 patients removed in July, almost exactly one half were persons leading the same kind of life; and of the 219 patients removed during August, over 80 were of the same class.

This state of affairs has a close analogy with that which obtained in 1893, when

smallpox was introduced into London amongst the vagrant class, giving rise to a considerable epidemic. How the disease appeared amongst this class last year one can only guess. As I pointed out, until the end of May it was confined to the ordinary settled population. The earliest instance I know of, in which a person of the other class was affected, was in the case of a man who was living in a common lodging house in Westminster when he developed smallpox, and who fell ill on June 1st. He was not isolated until the 10th. The next case was that of a tramp who fell ill on June 10th. Another tramp fell ill with smallpox on June 14th. On the 15th a man fell ill who was living in a Salvation Army shelter, and on the 16th two other men fell ill, one of whom was living in the same Salvation Army shelter and the other in a common lodging house.

After this time the number of attacks became more numerous. At this time the disease amongst the settled population was in abeyance. It is therefore sufficiently obvious that smallpox was introduced by some means amongst the vagrant class, and obtained some hold before its presence was known. From time to time cases occurred in which the disease had clearly been acquired in the provinces; but to what extent importation of smallpox in this way was a factor in its spread in London there is no evidence to show.

The agencies by which the disease was spread, after it had obtained a footing in the Metropolis, were, as far as could be discovered, chiefly the common lodging houses and Salvation Army shelters. In the three months—June, July and August—the source of infection was traced in 50 cases to common lodging houses and in 64 cases to Salvation Army shelters, while in four more cases, where the patients had slept alternately at a common lodging house or a Salvation Army shelter, the disease might have been acquired in either. Casual wards do not appear to have been concerned in the spread of the disease, only one case being traced to such a source. In the case of the common lodging houses, no one of them in particular gave rise to more than a few cases. The lodging house whence most patients derived infection was one situated in Whitechapel; but only eight cases were traced to it.

This state of things was in contrast with that holding in the case of the Salvation Army shelters. Of the 64 cases traced to these shelters, 17 were traced to the shelter in the Blackfriars Road, and 27 to that in the Whitechapel Road.

As a matter of course, accompanying and following this outbreak of smallpox amongst the vagrant class, there was a spread of the disease amongst the settled population. After the end of August, indeed, it was practically confined to the latter, but coincidently the number of admissions began to abate. Thus, while 219 cases were removed from the metropolitan area in August, only 94 cases were removed from that area in September. In the following months there was a further decrease, only 39 being removed from the metropolitan area in October, 22 in November and 22 in December. In the later months of the year, the disease was almost confined to the east and south of London. At the end of the year, smallpox, although in abeyance, had not disappeared in the Metropolis, and one is led to fear that there may be a further spread of the disease in the present year.

The Managers have continued to receive cases of smallpox from the union of West Ham. In the earlier part of the year very few cases were admitted from that union. And although, coincidently with the outbreak of the disease in the Metropolis, a few more cases were admitted from West Ham, it was not until October that the

spread of the disease there caused any anxiety. In that month 18 cases were removed from the union, and in November the number of removals rose to 31. In December, however, the number of cases removed from that union somewhat declined.

The great and unexpected increase in the number of cases admitted in the summer of last year taxed the resources of the hospital. On June 18th there were only 15 cases under treatment, and a further decline was anticipated. The number increased somewhat in the following fortnight, and on July 2nd 34 cases were under treatment. On July 9th this number had risen to 53, on July 16th to 77, and on the 23rd to 110. In a week from the last date, on July 30th, the number was 215. That is to say, within four weeks the number of patients under treatment increased from 34 to 215, and within one week it increased by 95. The great importance of maintaining at all times an adequate staff at the hospital was thus strongly emphasised. Although the staff at the time to which I refer had not been allowed to shrink to any great degree, it must be admitted that a great strain was thrown upon us. At that time the fever hospitals of the Managers were also experiencing a pressure of cases, so that no assistance could be obtained, had it been sought, from those institutions. It was little short of calamitous, moreover, that at the same time the Convalescent Smallpox Hospital at Gore Farm had been prepared for the reception of convalescent scarlet fever patients, a number of whom, indeed, had already been transferred there. The majority of patients who were then being admitted to this hospital were males. Under these circumstances every available bed on the "Castalia" was occupied before the Gore Farm Hospital could be prepared for the reception of smallpox patients, and we were reduced to the undesirable expedient of placing male patients in an empty ward on the "Atlas." This ward was filled with male patients, and all the accommodation we could possibly set apart for such patients was exhausted before it was possible to relieve us by the reception of our convalescent patients at Gore Farm. The first transfer of convalescents took place on the 31st July, and such patients continued to be treated at Gore Farm until the 25th October.

Such an experience as that which I have related clearly demonstrates that if the Gore Farm Hospital is to be used, as occasion may demand, as an overflow hospital for fever patients, the amount of accommodation available at this hospital for smallpox patients is altogether insufficient, and that the continuance of such a state of things constitutes a serious public danger. Moreover, in the year 1893, when less than 2,500 patients passed through this hospital, my experience was that our accommodation here was barely sufficient for such patients as were not in a fit state to be moved to the convalescent hospital, a fact which led at times to more or less overcrowding. It is therefore highly satisfactory to know that as I write the Managers are completing their plans for a hospital, the erection of which, in the immediate neighbourhood, they propose to commence as soon as is practicable, a hospital designed to supplement or supersede the accommodation at present existing here for acute cases of smallpox.

There have been no cases of smallpox or of any other infectious disease amongst the staff during the year.

In accordance with my usual practice, I present a return of the number of

persons employed at the hospital in the course of the year, and a return of those employed at the hospital during the year for the first time.

Staff employed at the Hospital.

Year.	Class.	Number employed.	Number who contracted Smallpox.
1895	I.	93	Nil.
	II.	107	
	III.	74	
	IV.*	80	
Total		354	—

Staff newly employed at the Hospital.

Year.	Class.	Number entering Service.	Number who contracted Smallpox.
1895	I.	54	Nil.
	II.	46	
	III.	18	
	IV.*	41	
Total		159	—

For an explanation of the different "classes" in these returns, I may refer to my previous Report for the year 1892.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

T. F. RICKETTS,
Medical Superintendent.

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* Class IV. in these tables consists of men employed on the premises by contractors and others who are not included in the table on p. 17

No. 11.

REPORT OF DR. T. B. BROOKE, MEDICAL OFFICER OF THE RIVER AMBULANCE SERVICE.

SOUTH WHARF,
ROTHERHITHE,
March, 1896.

To the Committee of Management.

LADIES AND GENTLEMEN,

During the year 1895, 1,045 cases were sent to the wharves. Of these there were—

Sent direct to the hospital ships	905	
Sent after detention	21	
		926
Died in shelters from smallpox	2	
,, on steamers ,, ,, ...	3	
Discharged from shelters	1	
Total smallpox cases		932
Of the remaining 113 cases, there were—		
Sent direct home not suffering from smallpox	43	
Sent home or transferred after detention	69	
		112
Died in shelter from typhoid fever	1	
Total non-smallpox cases		113

I append tables of deaths occurring at the wharf, and of cases sent home or transferred.

From February 8th to February 22nd inclusive, the ambulance steamers were unable to proceed to the hospital ships owing to the great accumulation of ice in the river. During this period the patients were received and detained on board the "Geneva Cross," and, taking into consideration the various difficulties with which we

had to contend, the patients, I may venture to say, were fairly comfortable and did remarkably well. One death occurred, an unvaccinated infant three months old. Owing to the lack of accommodation at the wharf the extra staff of nurses, which was required owing to the number (34) of patients, had to be accommodated at the South-Eastern Ambulance Station, an ambulance bringing two nurses for duty at night and taking back the two nurses who had been on duty during the day. These extra nurses, four in number, were kindly lent by Dr. Birdwood, of the North-Eastern Hospital, to whom my thanks are due for his timely aid and assistance.

The new quarters for the female staff were begun in June.

The covering in of the piers at North and South Wharves was also commenced, and was completed in August. That they should be covered in was, I think, very necessary, for in winter and frosty or even wet weather they were very dangerous, particularly at low water. Several of the staff had on various occasions had heavy and dangerous falls, frequently when carrying patients.

Owing to the defective light emitted by the Wenham lamps in the shelters, it was found necessary to remove and replace them by ordinary gas brackets.

On June 19th Professor Smith and 13 members of the Public Health Class at King's College visited the wharf and subsequently proceeded to the hospital ships by ambulance steamer.

On July 15th Dr. James Priestley, Assistant Medical Officer to this service, was transferred to the North-Eastern Fever Hospital.

On July 30th Dr. D. N. Cooper was appointed Assistant Medical Officer.

Owing to the increase in the number of cases, it became necessary from July 25th to October 26th to run the ambulance steamer twice each day to the hospital ships.

I would urge the advisability of having some accommodation on shore for patients who arrive at night, and so obviate the necessity of using one of the steamers for their reception. I do not think that the steamers (with the exception of the "Geneva Cross") afford the necessary or suitable accommodation for their detention for so many hours. The motion of the steamer is felt very much in rough weather, and frequently causes the patients great discomfort, particularly in the case of females; and there is, I understand, no small risk of accident by collision, &c., from craft breaking away from their moorings, or steamers or other vessels running into the ambulance steamers in foggy weather, and both nurse and patients are too far away from the main staff quarters should either require assistance, medical or otherwise. The steamers should, in my opinion, be used for transport and transport only.

In conclusion, I have to thank my colleague and assistant, Dr. D. N. Cooper, for his kindly and capable co-operation and the assistance he has afforded me since his appointment in July last, and to the other members of the staff, whose work has been most satisfactory.

I am, Ladies and Gentlemen,

Yours faithfully,

(Signed) T. B. BROOKE,
Medical Officer, River Service.

TABLE I.—*Showing the Admissions of Smallpox cases to the Wharves during each month of the year* 1895.

	1895.		
	Males.	Females.	Total.
January	24	21	45
February	26	30	56
March	19	23	42
April	14	16	30
May	6	9	15
June	34	3	37
July	170	51	221
August	138	94	232
September	38	62	100
October...	28	29	57
November	26	26	52
December	25	20	45
Totals	548	384	932*

TABLE II.—*Showing the Smallpox cases treated in the Shelters at South Wharf during the year* 1895.

Date of Admission.	Initials of Patient.	Age.	Sex.	Parish.	Vaccination.	Date of Discharge.	Remarks.
1895. Feb. 5	S. G.	24	F	Marylebone...	Infancy (4) ...	1895. Feb. 13	
July 11	A. B.	51	F	Soho	,, (5) ...	Died July 11...	From hæmorrhagic smallpox.
Dec. 13	M. M	36	F	St. Saviour's	,, (2) ...	,, Dec. 13...	,, ,,
,, 15	G. W.	23	M	West Ham ...	,, ...	Dec. 24	Admitted at a late stage of disease.

TABLE III.—*Showing the Deaths which occurred on the Steamers and in the Shelters at South Wharf during* 1895.

STEAMERS.

Date of Admission.	Initials of Patient.	Age.	Sex.	Parish.	Date of Death.	Cause of Death.
Feb. 17	W. Q.	$\frac{3}{12}$	M	Marylebone ...	Feb. 20	Confluent Smallpox.
Oct. 29	M. P.	28	F	West Ham ...	Oct. 30	Hæmorrhagic Smallpox.
Nov. 26	J. K.	13	M	,, ,, ...	Nov. 27	Confluent Smallpox.
	SHELTERS.					
July 11	A. B.	51	F	Soho	July 11	Hæmorrhagic Smallpox
Sept. 9	E. W.	23	F	Paddington ...	Sept. 11	Typhoid Fever.
Dec. 13	M. M.	36	F	St. Saviour's	Dec. 13	Hæmorrhagic Smallpox.

* Includes five infants with mothers and five cases found after admission to the Hospital Ships not to have smallpox.—*Vide* p. 150.

TABLE IV.—*Showing the Non-Smallpox cases sent home or transferred during the year* 1895.

	Cases sent direct home.	Cases sent home or transferred after detention.	Total.
January	...	2	2
February	...	6	6
March	...	2	2
April	2	3	5
May	3	5	8
June	6	4	10
July	3	8	11
August	11	12	23
September	5	6	11
October	6	5	11
November	5	9	14
December	2	7	9
Totals	43	69	112

TABLE V.—*Giving particulars of the Non-Smallpox Cases transferred to other of the Board's Hospitals during the year* 1895.

Date of Admission.	Initials of Patient.	Age.	Sex.	Parish.	Disease.	Date of Transfer.	Hospital.
Jan. 5	J. P.	42	M	Battersea	Enteric Fever	Jan. 7	South-Eastern.
July 17	A. S.	33	M	Lambeth	Acute Eczema	July 18	" "
Nov. 12	T. McG.	4	M	West Ham	Scarlet Fever	Nov. 13	" "

TABLE VI.—*Giving particulars of the Diseases from which the Non-Smallpox cases suffered.*

(1.) NON-SMALLPOX CASES SENT DIRECT HOME.

Varicella	37
Mosquito Bites	1
Impetigo	1
Molluscum Contagiosum	1
Pemphigus	1
Pustular Eczema	1
Ulcerated Leg	1
Total	43

(2.) NON-SMALLPOX CASES RETURNED HOME OR TRANSFERRED AFTER DETENTION.

Varicella	26
Eczema	2
Measles	4
Enteric Fever (died at wharf)	1
Tonsillitis	1
Influenza	1
Urticaria	3
Pap. Erythema	6
Syphilis	8
Pus. Dermatitis	1
Furunculus	1
Purpura	1
Herpes	1
Acute Eczema	1
Vaccinia	1
Pneumonia	1
Impetigo	1
Scarlet Fever	1
Nil	9
Total	70

SMALLPOX STATISTICS.—TABLE I.—*Return showing the Numbers of Smallpox Patients Admitted from each Parish or Union during each Month of the Year 1895; the Total Admissions, Discharges, and Deaths during the Year, and the condition of the Patients as to Vaccination.*

	PARISH OR UNION.	Remaining in Hospital, on 1st January.	January.			February.			March.			April.			May.			June.			July.			August.			September.			October.			November.			December.			Total Admissions.			Deaths.			Discharges.			Remaining in Hospital, on 31st December		
		VACCINATION CICATRIX OR CICATRICES.																																															
		Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.
W. District.	Kensington	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	1	...	...	1	...	..	...	...	...	...	...	...	...	...	...	5	...	..	...	...	...	5	...	...
	Fulham	...	...	...	..	...	...	...	...	...	1	...	...	1	...	...	...	...	...	1	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	1	...	...	2	...	...
	Paddington	...	...	1	...	...	...	1	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	5	...	1	...	...	...	4	...	...
	Chelsea	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	2	...	...
	St. George's	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	1	...	...	...	...	5	1	...
	Westminster	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	1	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	2	...	...
N. District.	St. Marylebone	8	1	3	18	3	14	15	5	14	8	...	3	1	...	...	...	...	...	...	...	...	12	...	.	3	1	...	...	...	...	...	...	...	...	...	...	...	...	57	9	31	...	...	7	65	10	27
	St. Pancras	...	1	...	...	...	...	1	...	...	1	...	...	...	...	1	...	...	...	...	...	...	1	1	2	1	...	...	1	...	1	...	...	2	...	...	...	...	...	7	1	4	...	1	...	6	1	4
	Hampstead	1	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	2	...	...
	Islington	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	12	1	3	1	...	...	11	1	3
	Hackney	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	...	...	...	5	...	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	9	2	2	...	..	1	9	2	1
	St. Giles & St. George, Bloomsbury	...	...	..	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	2	7	1	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	11	1	2	1	1	1	10	...	1
Cent. Dist.	Strand	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	1	...	1	1	...	3	...	...
	Holborn	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	2	...	1	2	1	..	6	1	...	9	...	3	...	...	...	...	...	...	...	...	...	...	...	34	3	7	...	...	...	34	3	7
	London, City of	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	...	3	1	1	...	...	...	...	1	2	...	...	...	...	...	...	...	...	...	...	5	1	2	...	...	...	5	1	2
E. District.	Shoreditch	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	1	6	...	...	1	1	1	..	...	...	...	...	...	...	...	...	...	1	9	1	3	1	1	...	8	...	2
	Bethnal Green	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7	1	2	22	3	15	9	1	11	...	...	7	...	...	...	...	...	...	...	...	38	5	35	1	...	4	37	5	29
	Whitechapel	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	45	3	4	25	1	2	7	...	1	1	...	...	...	...	...	...	...	...	...	...	78	4	7	2	...	1	76	4	6
	St George-in-the-East	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	2	2	1	9	...	1	2	...	...	..	...	...	...	...	...	...	...	...	...	...	14	2	2	...	...	...	14	2	2
	Stepney	...	...	...	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	3	1	2	3	...	...	1	...	2	1	...	1	2	...	1	...	...	1	10	1	7	...	...	1	9	1	4	1	...	2
	Mile End Old Town	...	...	...	...	...	..	2	...	...	...	...	...	...	...	...	...	...	...	11	1	4	14	1	5	2	...	...	...	...	...	...	...	...	...	...	...	...	30	2	10	...	...	1	30	2	9
	Poplar	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	1	5	2	...	2	1	...	1	1	...	1	...	...	3	...	...	16	4	1	1	...	...	14	4	1	1	...	...
S. District.	St. Saviour's	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	6	...	1	15	2	20	13	1	5	...	...	1	...	...	2	...	1	...	3	...	1	37	5	30	1	1	2	34	4	27
	St. Olave's	...	...	...	...	1	...	...	...	...	8	...	3	5	1	2	3	...	...	2	...	...	3	...	1	1	...	...	1	...	...	...	...	...	...	...	...	...	...	29	3	9	1	...	...	28	3	9
	Lambeth	...	...	...	...	...	...	1	...	...	1	...	...	3	...	...	6	...	...	2	...	...	4	1	1	3	...	6	5	...	4	1	...	...	1	...	...	1	...	28	2	12	...	...	2	27	2	8
	Wandsworth & Clapham	...	...	...	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	6	1	...	8	1	2	2	...	2	...	1	...	...	...	21	3	5	...	1	2	21	...	3
	Camberwell	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	8	2	...	...	...	...	8	...	5	6	1	9	9	...	3	5	1	6	3	...	2	...	...	...	40	4	25	3	1	3	37	3	19
	Greenwich	...	...	...	2	...	1	1	1	...	6	1	...	1	...	...	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	16	9	11	...	4	1	15	3	3
	Woolwich	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	6	1	1	3	1	...	1	...	...	...	...	...	...	...	10	2	1	...	...	1	10	2	...
	Lewisham	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	...	...	...	3	...	...
	Port of London	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	1	1	...	...
	West Ham	...	...	1	...	...	...	4	...	2	1	...	1	...	...	...	...	...	...	3	...	...	7	...	1	4	...	1	6	3	9	13	2	16	10	3	9	48	8	39	1	2	6	33	2	14
	Beyond Metro. Area	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	...	4	...	1	3	...	1	2	...	3	13	...	5	...	...	1	12	..	1	1	...	3
	Totals	9	2	5	23	4	18	30	8	16	32	1	9	25	1	4	13	...	1	26	5	4	159	18	47	162	13	54	66	7	29	22	7	31	30	4	23	21	7	21	609	75	257	15	13	25	582	56	186	21	8	40
			16			45			54			42			30			14			35			224			229			102			60			57			49			941			63			824			70		

N.B.—Admissions, &c., from "other diseases" during the year are not included in this Return.

NOTE 1.—The columns headed "no evidence" contain the particulars of cases stated to have been Vaccinated, but bearing no visible evidence of the operation, and also of those in which no statement was made, but the nature of the eruption or other cause prevented any observation of the marks, if any existed.

SMALLPOX STATISTICS—TABLE IIA.—*Showing the condition as regards Vaccination of* **MALE** *Patients admitted during* 1895.

CASES WITH VACCINATION CICATRIX OR CICATRICES PRESENT.

AREA OF CICATRIX OR CICATRICES.

Class A¹ = half and upwards of one-half square inch total area. Number of Scars. Foveation of Scars.

AGES.	Four or more. Half and more than half foveated	Four or more. Less than half foveated	Four or more. Plain scars	Four or more. Not recorded	Three. Half and more than half foveated	Three. Less than half foveated	Three. Plain scars	Three. Not recorded	Two. Half and more than half foveated	Two. Less than half foveated	Two. Plain scars	Two. Not recorded	One. Half and more than half foveated	One. Less than half foveated	One. Plain scars	One. Not recorded	Not recorded. Half and more than half foveated	Not recorded. Less than half foveated	Not recorded. Plain scars	Not recorded. Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,		2																		
,, 8 ,, 9 ,,			1																	
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,											1									
,, 11 ,, 12 ,,																				
,, 12 ,, 13 ,,	1	2																		
,, 13 ,, 14 ,,	1	1	1																	
,, 14 ,, 15 ,,	3					1														
,, 15 ,, 20 ,,	5	14	9		4[1]	7	2		2	1			2	1						
,, 20 ,, 25 ,,	9	24	7		6	6	1		4	8	3									
,, 25 ,, 30 ,,	4	10	2		7	9	5		2	5	5									
,, 30 ,, 35 ,,	2	8	2		1	4			5	1	2		3	1	1					
,, 35 ,, 40 ,,			3		2	2	2		4	1	1									
,, 40 ,, 50 ,,		1	4		2	7	1		3	4	3[1]			2	1					
,, 50 ,, 60 ,,						1[1]				1	1				1					
,, 60 ,, 70 ,,	1[1]																			
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL	26	62	29	...	22	37	11	...	20	21	16	...	5	4	3	...	...	...	...	...

Class A² = one-third, but less than one-half square inch total area. Number of Scars. Foveation of Scars.

AGES.	Four or more. Half and more than half foveated	Four or more. Less than half foveated	Four or more. Plain scars	Four or more. Not recorded	Three. Half and more than half foveated	Three. Less than half foveated	Three. Plain scars	Three. Not recorded	Two. Half and more than half foveated	Two. Less than half foveated	Two. Plain scars	Two. Not recorded	One. Half and more than half foveated	One. Less than half foveated	One. Plain scars	One. Not recorded	Not recorded. Half and more than half foveated	Not recorded. Less than half foveated	Not recorded. Plain scars	Not recorded. Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,		1																		
,, 10 ,, 11 ,,																				
,, 11 ,, 12 ,,																				
,, 12 ,, 13 ,,																				
,, 13 ,, 14 ,,						1	1													
,, 14 ,, 15 ,,																				
,, 15 ,, 20 ,,			1			1	1			1			1		1					
,, 20 ,, 25 ,,					1	2	2				2		3	1	1					
,, 25 ,, 30 ,,							1		1	2				3						
,, 30 ,, 35 ,,			3		1					3					1					
,, 35 ,, 40 ,,							1[1]				5				1					
,, 40 ,, 50 ,,		2	1			1	2			2	1				1					
,, 50 ,, 60 ,,						1	1													
,, 60 ,, 70 ,,							1				1									
,, 70 ,, 80 ,,											2									
,, 80 years and upwards																				
TOTAL	...	3	5	...	2	6	10	...	1	8	11	...	4	4	5	...	...	...	...	...

Class A³ = less than one-third square inch total area. Number of Scars. Foveation of Scars.

AGES.	Four or more. Half and more than half foveated	Four or more. Less than half foveated	Four or more. Plain scars	Four or more. Not recorded	Three. Half and more than half foveated	Three. Less than half foveated	Three. Plain scars	Three. Not recorded	Two. Half and more than half foveated	Two. Less than half foveated	Two. Plain scars	Two. Not recorded	One. Half and more than half foveated	One. Less than half foveated	One. Plain scars	One. Not recorded	Not recorded. Half and more than half foveated	Not recorded. Less than half foveated	Not recorded. Plain scars	Not recorded. Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,			1																	
,, 10 ,, 11 ,,															1					
,, 11 ,, 12 ,,																				
,, 12 ,, 13 ,,											1				1					
,, 13 ,, 14 ,,																				
,, 14 ,, 15 ,,																				
,, 15 ,, 20 ,,									1		1				2					
,, 20 ,, 25 ,,											2			1	3[1]					
,, 25 ,, 30 ,,										1	4			2	3					
,, 30 ,, 35 ,,										1	4		1		1					
,, 35 ,, 40 ,,											1				3					
,, 40 ,, 50 ,,							1				8		2	2	7					
,, 50 ,, 60 ,,											3				1					
,, 60 ,, 70 ,,			1[1]								1			1	2					
,, 70 ,, 80 ,,											1[1]				2[1]					
,, 80 years and upwards																				
TOTAL	...	...	2	...	...	...	1	...	1	2	26	...	3	6	26	...	...	...	...	...

Class A⁴ = Areas not recorded. Number of Scars. Foveation of Scars.

AGES.	Four or more. Half and more than half foveated	Four or more. Less than half foveated	Four or more. Plain scars	Four or more. Not recorded	Three. Half and more than half foveated	Three. Less than half foveated	Three. Plain scars	Three. Not recorded	Two. Half and more than half foveated	Two. Less than half foveated	Two. Plain scars	Two. Not recorded	One. Half and more than half foveated	One. Less than half foveated	One. Plain scars	One. Not recorded	Not recorded. Half and more than half foveated	Not recorded. Less than half foveated	Not recorded. Plain scars	Not recorded. Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,																				
,, 11 ,, 12 ,,																				
,, 12 ,, 13 ,,																				
,, 13 ,, 14 ,,																				
,, 14 ,, 15 ,,																				
,, 15 ,, 20 ,,																				
,, 20 ,, 25 ,,																				
,, 25 ,, 30 ,,																				
,, 30 ,, 35 ,,																				
,, 35 ,, 40 ,,																				
,, 40 ,, 50 ,,																				
,, 50 ,, 60 ,,																				
,, 60 ,, 70 ,,																				
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

AGES.	Total Vaccinated Cases Admitted.	Deaths amongst Vaccinated Cases: Class A¹.	Class A².	Class A³.	Class A⁴.	Total Deaths amongst Vaccinated Cases.	Cases in which there was "No evidence" as to Cicatrices. (See Note*): Total Admissions.	Total Deaths.	Cases in which Vaccination Cicatrix was "absent.": Total Admissions.	Total Deaths.
Under 1 year	...	...	...	...	...	...	...	...	8	6
From 1 to 2 years	...	...	...	...	...	...	...	...	3	...
,, 2 ,, 3 ,,	...	...	...	...	...	...	...	...	7	3
,, 3 ,, 4 ,,	...	...	...	...	...	...	...	...	13	...
,, 4 ,, 5 ,,	...	...	...	...	...	...	...	...	3	...
,, 5 ,, 6 ,,	...	...	...	...	...	...	1	1	7	1
,, 6 ,, 7 ,,	...	...	...	...	...	...	1	...	7	1
,, 7 ,, 8 ,,	2	...	...	...	...	...	1	...	6	1
,, 8 ,, 9 ,,	1	...	...	...	...	...	1	...	7	...
,, 9 ,, 10 ,,	2	...	...	...	...	...	1	...	10	...
,, 10 ,, 11 ,,	2	...	...	...	...	...	...	...	3	...
,, 11 ,, 12 ,,	...	...	...	...	...	...	1	...	6	...
,, 12 ,, 13 ,,	5	...	...	...	...	...	...	...	4	...
,, 13 ,, 14 ,,	5	...	...	...	...	...	...	...	6	1
,, 14 ,, 15 ,,	4	...	...	...	...	...	...	...	5	...
,, 15 ,, 20 ,,	57	1	...	...	...	1	3	...	15	...
,, 20 ,, 25 ,,	86	...	...	1	...	1	4	1	8	...
,, 25 ,, 30 ,,	66	...	...	...	...	...	6	1	5	3
,, 30 ,, 35 ,,	45	...	...	...	...	...	4	1	4	...
,, 35 ,, 40 ,,	26	...	1	...	...	1	4	2	1	...
,, 40 ,, 50 ,,	58	1	...	...	...	1	9	2	1	...
,, 50 ,, 60 ,,	10	1	...	...	...	1	3	1	1	...
,, 60 ,, 70 ,,	8	1	...	1	...	2	2	...	...	...
,, 70 ,, 80 ,,	5	...	...	2	...	2	1	...	...	...
,, 80 years and upwards	...	...	...	...	...	...	...	...	...	...
TOTAL	382	4	1	4	...	9	42	9	130	16

N.B.—([1]) The small figures indicate the number of Deaths in each sub-division of the Classes.
This Table includes cases which were vaccinated or re-vaccinated after having been infected with Smallpox.

* In this column are included cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also cases in which no statement was made, but the nature of the eruption, or other cause prevented any observation of the marks, if any existed.

SMALLPOX STATISTICS.—TABLE IIB (*continued*)—*Showing the condition as regards Vaccination of* FEMALE *Patients admitted during* 1895.

CASES WITH VACCINATION CICATRIX OR CICATRICES PRESENT.

AREA OF CICATRIX OR CICATRICES.

Class A¹ = half and upwards of one-half square inch total area. — Number of Scars. — Foveation of Scars.

AGES.	Four or more: Half and more than half foveated	Four or more: Less than half foveated	Four or more: Plain scars	Four or more: Not recorded	Three: Half and more than half foveated	Three: Less than half foveated	Three: Plain scars	Three: Not recorded	Two: Half and more than half foveated	Two: Less than half foveated	Two: Plain scars	Two: Not recorded	One: Half and more than half foveated	One: Less than half foveated	One: Plain scars	One: Not recorded	Not recorded: Half and more than half foveated	Not recorded: Less than half foveated	Not recorded: Plain scars	Not recorded: Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,		1							1											
,, 11 ,, 12 ,,									1											
,, 12 ,, 13 ,,																				
,, 13 ,, 14 ,,	1	1				1														
,, 14 ,, 15 ,,	1	2	1				1		1											
,, 15 ,, 20 ,,	10	9	5		4	2	4		1		1									
,, 20 ,, 25 ,,	10	7	5		1	5	4		5	2	1									
,, 25 ,, 30 ,,	4	6			2	4	2		3	2	1		1							
,, 30 ,, 35 ,,	1	7[1]	2		1				2	1	3			1						
,, 35 ,, 40 ,,	1	1			1	1				2[1]										
,, 40 ,, 50 ,,		2	1		1					1	1									
,, 50 ,, 60 ,,		2	1				1													
,, 60 ,, 70 ,,																				
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL	28	28	15	...	10	13	12	...	11	8	7	...	1	1						

Class A² = one-third, but less than one-half square inch total area. — Number of Scars. — Foveation of Scars.

AGES.	Four or more: Half and more than half foveated	Four or more: Less than half foveated	Four or more: Plain scars	Four or more: Not recorded	Three: Half and more than half foveated	Three: Less than half foveated	Three: Plain scars	Three: Not recorded	Two: Half and more than half foveated	Two: Less than half foveated	Two: Plain scars	Two: Not recorded	One: Half and more than half foveated	One: Less than half foveated	One: Plain scars	One: Not recorded	Not recorded: Half and more than half foveated	Not recorded: Less than half foveated	Not recorded: Plain scars	Not recorded: Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,							1													
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,						1														
,, 11 ,, 12 ,,										1										
,, 12 ,, 13 ,,											1									
,, 13 ,, 14 ,,			1																	
,, 14 ,, 15 ,,						1														
,, 15 ,, 20 ,,					2	2	1			1	2									
,, 20 ,, 25 ,,						2					2			1						
,, 25 ,, 30 ,,		1					1				2				1					
,, 30 ,, 35 ,,							1				2									
,, 35 ,, 40 ,,			1							1	1									
,, 40 ,, 50 ,,			2							2										
,, 50 ,, 60 ,,			1				1						1							
,, 60 ,, 70 ,,											1									
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL		1	5	...	2	6	5	...		5	11	...	1	1	1					

Class A³ = less than one-third square inch total area. — Number of Scars. — Foveation of Scars.

AGES.	Four or more: Half and more than half foveated	Four or more: Less than half foveated	Four or more: Plain scars	Four or more: Not recorded	Three: Half and more than half foveated	Three: Less than half foveated	Three: Plain scars	Three: Not recorded	Two: Half and more than half foveated	Two: Less than half foveated	Two: Plain scars	Two: Not recorded	One: Half and more than half foveated	One: Less than half foveated	One: Plain scars	One: Not recorded	Not recorded: Half and more than half foveated	Not recorded: Less than half foveated	Not recorded: Plain scars	Not recorded: Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,																				
,, 11 ,, 12 ,,					1															
,, 12 ,, 13 ,,							1								1[1]					
,, 13 ,, 14 ,,											1									
,, 14 ,, 15 ,,																				
,, 15 ,, 20 ,,						1	1			2	1			1						
,, 20 ,, 25 ,,													1	1	1					
,, 25 ,, 30 ,,									1		3				1					
,, 30 ,, 35 ,,			1												2					
,, 35 ,, 40 ,,											1[1]			1	1					
,, 40 ,, 50 ,,							2			1	4			2	1					
,, 50 ,, 60 ,,											2			1	1					
,, 60 ,, 70 ,,											1									
,, 70 ,, 80 ,,															1					
,, 80 years and upwards																				
TOTAL			1	...	1	1	4	...	1	3	13	...	1	6	10	...				

Class A⁴ = Areas not recorded. — Number of Scars. — Foveation of Scars.

AGES.	Four or more: Half and more than half foveated	Four or more: Less than half foveated	Four or more: Plain scars	Four or more: Not recorded	Three: Half and more than half foveated	Three: Less than half foveated	Three: Plain scars	Three: Not recorded	Two: Half and more than half foveated	Two: Less than half foveated	Two: Plain scars	Two: Not recorded	One: Half and more than half foveated	One: Less than half foveated	One: Plain scars	One: Not recorded	Not recorded: Half and more than half foveated	Not recorded: Less than half foveated	Not recorded: Plain scars	Not recorded: Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,																				
,, 11 ,, 12 ,,																				
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,, 20 ,, 25 ,,																				
,, 25 ,, 30 ,,																				
,, 30 ,, 35 ,,																				
,, 35 ,, 40 ,,																				
,, 40 ,, 50 ,,																				
,, 50 ,, 60 ,,				1[1]																
,, 60 ,, 70 ,,																				
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL				1																

AGES.	Total Vaccinated Cases Admitted.	Deaths amongst Vaccinated Cases: Class A¹.	Class A².	Class A³.	Class A⁴.	Total Deaths amongst Vaccinated Cases.	Cases in which there was "No evidence" as to Cicatrices. (See Note*): Total Admissions.	Total Deaths.	Cases in which Vaccination Cicatrix was "absent.": Total Admissions.	Total Deaths.
Under 1 year	...					...	...	...	7	5
From 1 to 2 years	...					...	...	...	9	3
,, 2 ,, 3 ,,	...					...	...	...	13	3
,, 3 ,, 4 ,,	...					...	...	...	13	2
,, 4 ,, 5 ,,	...					...	...	...	9	1
,, 5 ,, 6 ,,	...					...	1	...	6	...
,, 6 ,, 7 ,,	...					...	1	...	4	...
,, 7 ,, 8 ,,	...					...	...	...	3	...
,, 8 ,, 9 ,,	1					...	...	...	7	1
,, 9 ,, 10 ,,	...					...	...	...	6	...
,, 10 ,, 11 ,,	3					...	2	...	5	...
,, 11 ,, 12 ,,	3					...	2	..	4	...
,, 12 ,, 13 ,,	3			1		1	...	...	6	...
,, 13 ,, 14 ,,	5					...	...	...	3	...
,, 14 ,, 15 ,,	7					...	1	...	3	...
,, 15 ,, 20 ,,	50					...	5	...	9	1
,, 20 ,, 25 ,,	48					...	1	...	8	2
,, 25 ,, 30 ,,	35		1			1	2	...	5	1
,, 30 ,, 35 ,,	25	1				1	5	1	2	...
,, 35 ,, 40 ,,	12	1		1		2	3	1	...	...
,, 40 ,, 50 ,,	20					...	6	2	1	...
,, 50 ,, 60 ,,	12				1	1	3	...	2	...
,, 60 ,, 70 ,,	2					...	1	...	2	...
,, 70 ,, 80 ,,	1					...	...	...	...	...
,, 80 years and upwards	...					...	...	...	...	...
TOTAL	227	2	1	2	1	6	33	4	127	19

N.B.—(1) The small figures indicate the number of Deaths in each sub-division of the Classes.

This Table includes cases which were vaccinated or re-vaccinated after having been infected with Smallpox.

* In this column are included cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also cases in which no statement was made, but the nature of the eruption, or other cause, prevented any observation of the marks, if any existed.

SMALLPOX STATISTICS—TABLE IIc. *(continued)*—*Showing the condition as regards Vaccination of the Patients admitted during* 1895 (MALES AND FEMALES COMBINED).

CASES WITH VACCINATION CICATRIX OR CICATRICES PRESENT. AREA OF CICATRIX OR CICATRICES.

Class A¹ = half and upwards of one-half square inch total area. Number of Scars. Foveation of Scars.

AGES.	Four or more.				Three.				Two.				One.				Not recorded.			
	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,		2																		
,, 8 ,, 9 ,,			1																	
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,		1							1		1									
,, 11 ,, 12 ,,									1											
,, 12 ,, 13 ,,	1	2																		
,, 13 ,, 14 ,,	2	2	1			1														
,, 14 ,, 15 ,,	4	2	1			1	1		1											
,, 15 ,, 20 ,,	15	23	14		8[1]	9	6		3	1	1		2	1						
,, 20 ,, 25 ,,	19	31	12		7	11	5		9	10	4									
,, 25 ,, 30 ,,	8	16	2		9	13	7		5	7	6		1							
,, 30 ,, 35 ,,	3	15[1]	4		2	4			7	2	5		3	2	1					
,, 35 ,, 40 ,,	1	1	3		3	3	2		4	3[1]	1									
,, 40 ,, 50 ,,		3	5		3	7	1		3	5	4[1]			2	1					
,, 50 ,, 60 ,,		2	1			1[1]	1			1	1				1					
,, 60 ,, 70 ,,	1[1]																			
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL	54	100	44	...	32	50	23	...	34	29	23	...	6	5	3	...	...	...	...	...

Class A² = one-third, but less than one-half square inch total area. Number of Scars. Foveation of Scars.

AGES.	Four or more.				Three.				Two.				One.				Not recorded.			
	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,							1													
,, 9 ,, 10 ,,		1																		
,, 10 ,, 11 ,,						1														
,, 11 ,, 12 ,,										1										
,, 12 ,, 13 ,,											1									
,, 13 ,, 14 ,,			1			1	1													
,, 14 ,, 15 ,,						1														
,, 15 ,, 20 ,,			1		2	3	2			2	2		1		1					
,, 20 ,, 25 ,,					1	4	2				4		3	2	1					
,, 25 ,, 30 ,,		1					2		1	2	2			3	1[1]					
,, 30 ,, 35 ,,			3		1		1			3	2				1					
,, 35 ,, 40 ,,			1				1[1]			1	6				1					
,, 40 ,, 50 ,,		2	3			1	2			4	1				1					
,, 50 ,, 60 ,,			1			1	2						1							
,, 60 ,, 70 ,,							1				2									
,, 70 ,, 80 ,,											2									
,, 80 years and upwards																				
TOTAL	...	4	10	...	4	12	15	...	1	13	22	...	5	5	6	...	...	...	...	...

Class A³ = less than one-third square inch total area. Number of Scars. Foveation of Scars.

AGES.	Four or more.				Three.				Two.				One.				Not recorded.			
	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,			1																	
,, 10 ,, 11 ,,															1					
,, 11 ,, 12 ,,					1															
,, 12 ,, 13 ,,							1				1				2[1]					
,, 13 ,, 14 ,,											1									
,, 14 ,, 15 ,,																				
,, 15 ,, 20 ,,						1	1		1	2	2			1	2					
,, 20 ,, 25 ,,											2		1	2	4[1]					
,, 25 ,, 30 ,,									1	1	7			2	4					
,, 30 ,, 35 ,,			1							1	4		1		4					
,, 35 ,, 40 ,,											2[1]			1	4					
,, 40 ,, 50 ,,							3			1	12		2	4	8					
,, 50 ,, 60 ,,											5			1	2					
,, 60 ,, 70 ,,			1[1]								2			1	2					
,, 70 ,, 80 ,,											1[1]				3[1]					
,, 80 years and upwards																				
TOTAL	...	...	3	...	1	1	5	...	2	5	39	...	4	12	36	...	...	...	...	...

Class A⁴ = Areas not recorded. Number of Scars. Foveation of Scars.

AGES.	Four or more.				Three.				Two.				One.				Not recorded.			
	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded	Half and more than half foveated	Less than half foveated	Plain scars	Not recorded
Under 1 year																				
From 1 to 2 years																				
,, 2 ,, 3 ,,																				
,, 3 ,, 4 ,,																				
,, 4 ,, 5 ,,																				
,, 5 ,, 6 ,,																				
,, 6 ,, 7 ,,																				
,, 7 ,, 8 ,,																				
,, 8 ,, 9 ,,																				
,, 9 ,, 10 ,,																				
,, 10 ,, 11 ,,																				
,, 11 ,, 12 ,,																				
,, 12 ,, 13 ,,																				
,, 13 ,, 14 ,,																				
,, 14 ,, 15 ,,																				
,, 15 ,, 20 ,,																				
,, 20 ,, 25 ,,																				
,, 25 ,, 30 ,,																				
,, 30 ,, 35 ,,																				
,, 35 ,, 40 ,,																				
,, 40 ,, 50 ,,																				
,, 50 ,, 60 ,,				1[1]																
,, 60 ,, 70 ,,																				
,, 70 ,, 80 ,,																				
,, 80 years and upwards																				
TOTAL	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

AGES.	Total Vaccinated Cases Admitted.	Deaths amongst Vaccinated Cases.					Cases in which there was "No evidence" as to Cicatrices. See Note*.		Cases in which Vaccination Cicatrix was "absent."	
		Class A¹.	Class A².	Class A³.	Class A⁴.	Total Deaths amongst Vaccinated cases.	Total Admissions.	Total Deaths.	Total Admissions.	Total Deaths.
Under 1 year	...	...	...	...	...	...	...	...	15	11
From 1 to 2 years	...	...	...	...	...	...	...	...	12	3
,, 2 ,, 3 ,,	...	...	...	...	...	...	...	...	20	6
,, 3 ,, 4 ,,	...	...	...	...	...	...	...	...	26	2
,, 4 ,, 5 ,,	...	...	...	...	...	...	...	...	12	1
,, 5 ,, 6 ,,	...	...	...	...	...	...	2	1	13	1
,, 6 ,, 7 ,,	...	...	...	...	...	...	2	...	11	1
,, 7 ,, 8 ,,	2	...	...	...	...	...	1	...	9	1
,, 8 ,, 9 ,,	2	...	...	...	...	...	1	...	14	1
,, 9 ,, 10 ,,	2	...	...	...	...	...	1	...	16	...
,, 10 ,, 11 ,,	5	...	...	...	...	...	2	...	8	...
,, 11 ,, 12 ,,	3	...	...	...	...	...	3	...	10	...
,, 12 ,, 13 ,,	8	...	...	1	...	1	...	...	10	...
,, 13 ,, 14 ,,	10	...	...	...	...	...	...	...	9	1
,, 14 ,, 15 ,,	11	...	...	...	...	...	1	...	8	...
,, 15 ,, 20 ,,	107	1	...	...	...	1	8	...	24	1
,, 20 ,, 25 ,,	134	...	...	1	...	1	5	1	16	2
,, 25 ,, 30 ,,	101	...	1	...	...	1	8	1	10	4
,, 30 ,, 35 ,,	70	1	...	...	...	1	9	2	6	...
,, 35 ,, 40 ,,	38	1	1	1	...	3	7	3	1	...
,, 40 ,, 50 ,,	78	1	...	...	...	1	15	4	2	...
,, 50 ,, 60 ,,	22	1	...	...	1	2	6	1	3	...
,, 60 ,, 70 ,,	10	1	...	1	...	2	3	...	2	...
,, 70 ,, 80 ,,	6	...	...	2	...	2	1	...	...	...
,, 80 years and upwards	...	...	...	...	...	...	...	...	...	...
TOTAL	609	6	2	6	1	15	75	13	257	35

N.B.—(1) The small figures indicate the number of Deaths in each sub-division of the Classes.
This table includes cases which were vaccinated or re-vaccinated after having been infected with Smallpox.

* In this column are included cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also cases in which no statement was made, but the nature of the eruption, or other cause, prevented any observation of the marks, if any existed.

PART IV.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF THE SEVERAL ASYLUMS FOR IMBECILES FOR 1895.

No. 12.

REPORT OF DR. H. CASE, MEDICAL SUPERINTENDENT OF THE LEAVESDEN ASYLUM.

(For Statistics, see pp. 184 to 209.)

LEAVESDEN ASYLUM,
January, 1896.

To the Committee of Management.

GENTLEMEN,

Annexed to this, my Report for the year 1895, please find statistical tables.

On the 1st January, 1895, we had under treatment 895 males and 1,096 females.

During the year the following changes have occurred:—

	Males.	Females.	Tota.
Admitted	125	125	250
Re-admitted	1	2	3
Discharged	21	3	34
Died	103	116	219
Remaining in the Asylum 31st December, 1895	897	1,094	1,991

The total number under treatment during the year was 1,021 males and 1,223 females.

The highest number resident on any one day was 1,998; the lowest, 1,969.

The average number resident was 1,991.

The number of admissions has been quite up to the average, but the quality far below. This is a statement which I feel sure the Committee will endorse, because they see each and every patient for themselves at their fortnightly meetings, and

marvel, no doubt, with myself, that such poor specimens of humanity could possibly survive the fatigue of the journey here.

We are indebted to the Claybury Asylum for a large number of decrepit—and I may say moribund—transfers, a considerable percentage of which are chargeable to parishes or unions allocated to Caterham Asylum. I find we have received from such parishes and unions during the past year no fewer than 35 males and 33 females.

My Committee must pardon me for calling their attention so frequently to this deplorable condition of those admitted, but it is serious to a degree. It is now a rare occurrence to admit a man or woman who can do any useful work, and therefore paid labour, as has been the case of late, must increase year by year.

The institution is simply deteriorating into a workhouse infirmary, which state of things, I take it, was not originally intended.

I again venture to hope that the asylum for these poor helpless creatures to be erected near London will soon be completed, and thus give us a chance of doing more good in our specialty.

One male and two females were re-admitted.

W. J. D., the male, was handed over to care of friends, at the request of the guardians of his parish. He is a troublesome epileptic imbecile. His friends had previously obtained his discharge from Claybury, with the result that on both occasions they found themselves unable to manage him.

H. D. was discharged 20th April, 1894, as recovered. She was re-admitted 13th March, 1895. Is subject to epilepsy.

A. N. was discharged to friends at request of guardians, 22nd January, 1890, and re-admitted 6th February, 1895. She is of weak mind.

Six males and one female have been discharged as *recovered*, four males and four females as *improved*—truly a small percentage; but when previous oft-made remarks as to the character of the admissions are taken into consideration, will cease to be other than a foregone conclusion.

Those discharged as *unimproved*—ten males and seven females—were transferred to county asylums, and one male and one female to Darenth Schools, as being under age for treatment here.

The number of deaths—219—exceeds by four last year's record. The causes of death will be found on reference to Table VII., where it will also be noted that 35 of the decedents were between the ages of 60 and 69; 53 between 70 and 79; 12 between 80 and 89; one between 90 and 99; and one at the ripe age of 104. This last I gave a brief description of in my last year's report.

A glance at Table VIII. will show how brief was the residence here of the greater portion, 40 having passed away before completing the year, and 40 before completing a two-years stay.

The general health of patients and staff throughout the year has been fairly good, save at the end of February. When the long severe frost ended, an epidemic of a catarrhal nature set in, which soon passed off.

Miss Biggin, one of our head attendants, who has been in the service nearly 24 years, was granted leave of absence for three months, on December 4th, at my request, suffering from a chronic ailment. I am glad to be able to report that she is progressing most favourably, and trust that at the expiration of the time granted for absolute rest and change she will be able to resume her duties.

The amusements for the patients have not been lost sight of, and have been much appreciated. I always look upon this form of treatment as a grand curative agent.

Beer as an article of diet ceased to be given to the patients on October 5th, since which time nothing has been given in lieu.

I have suggested that the working patients should certainly be supplied at lunch time with half a pint of good coffee during the winter months, and that in the summer lemonade or ginger-beer be substituted. Those patients who work richly deserve some reward.

Amongst the alterations and improvements made during the year, I would mention that additional w.c. accommodation has been given to No. 12 block, and that an extra store-room has been built on the north-east side.

A shelter has been built in the yard adjoining the vegetable store, a great protection to those engaged in cleaning the potatoes.

Two of Blackman's fans have been put up in the laundry. The comfort from the absence of the steam hanging about cannot be over-estimated.

A machine and plant for the making of mineral waters has been fixed in the cellar of the general stores. This will, we think, soon pay for its original cost.

The Commissioners in Lunacy and the Local Government Board Inspectors have visited. Their Reports *in extenso* are on the Minutes of the Board.

My colleagues, medical and others, continue to render me that valuable and able assistance without which no institution can be satisfactorily worked, and they have, as they know, my warmest appreciation and thanks.

I have to thank you, Gentlemen, for your continued confidence and support in my efforts to carry out your wishes in the management of this asylum, and I also take this opportunity of repeating my thanks for the recommendation which you recently made to the Board, and which resulted in a substantial recognition of my services.

I have the honour to be,

Gentlemen,

Your obedient Servant,

H. CASE,
Medical Superintendent.

No. 13.

REPORT OF Dr. G. STANLEY ELLIOT, MEDICAL SUPERINTENDENT OF THE CATERHAM ASYLUM.

(For Statistics, see pp. 184 to 209.)

Caterham Asylum,
Caterham, Surrey,
December 31st, 1895.

To the Committee of Management.

Madam and Gentlemen,

I have the honour to submit to you my Annual Report upon the general condition of this asylum during the year 1895, to which are appended the usual statistical details.

The statistical results of the year may be thus summarised :—

	Males.	Females.	Total.
On January 1st, 1895, the asylum contained...	930	1,074	2,004
There have been admitted during the year	85	76	161
The total number under treatment has been	1,015	1,150	2,165
Of this number there have been discharged	25	5	30
There have died	57	73	130
Remaining under treatment at the close of the year	933	1,072	2,005

The average number resident during the year was 2,002.

The highest number resident on any one day was 2,009.

The Admissions.

The admissions during the past year have been 161. I regret that I am unable to report any improvement whatever in the bodily condition of those received. One-fourth of the patients admitted were in such an enfeebled, helpless, or paralysed condition as to necessitate their being at once sent to the infirmary wards. It is to be hoped that when the proposed asylum infirmary is erected such cases will be sent there direct, and thus relieve the asylum of this class of patients, for whom it was never contemplated.

The Discharges.

Seven males and one female were discharged as recovered, five males and one female as improved, and 16 were transferred to a county asylum, in consequence of maniacal excitement or suicidal proclivities, rendering them either dangerous to themselves or others.

The Deaths.

The deaths numbered 130, namely, 57 males, 73 females, and the percentage on the average numbers resident was 6·4. This is the lowest death-rate recorded for the past 12 years, and I think it probable that the small number is due, in a great measure, to the comparatively short duration of the east winds in the early spring and the mild, genial weather of the remainder of the year. Only 21 deaths were due to diseases of the respiratory organs, as compared to 33 in the previous year, and it is pleasant to add that there was no fatal casualty.

The Dietary.

A notable alteration was made during the year by the withdrawal of the half-pint of beer at dinner which had been allowed since the opening of the asylum. This beverage was certainly much appreciated by nearly all the inmates, and naturally, therefore, its discontinuance caused at the time some degree of dissatisfaction amongst them; but the recommendation of the Commissioners in Lunacy that, if beer be discontinued, a substantial addition should be made to the general dietary is now under the consideration of the General Purposes Committee.

It is generally recognised by all having the care of the insane that, owing to the lack of bodily vigour and impaired vitality which nearly always accompanies insanity, a more liberal and nutritious dietary is necessary than in the case of ordinary persons, and I think we may claim that our present dietary scale is based on this view. I am of opinion, however, that if fresh, green vegetables and fruit in season could be more frequently given, the result would be beneficial to the health and much appreciated by the patients. I would suggest for the consideration of the Committee that a greater portion of the garden or farm land should be utilised for the production of green foods for this purpose. The increased supply of such, while providing a more varied diet, would, of course, permit of a proportionate reduction in the daily ration of potatoes, and would in no way affect the dietary scale as prescribed by the Board.

General History.

It is gratifying to be able to note that there has been entire freedom during the year from any epidemic or infectious disease, and that the general health of the patients has been good.

The Commissioners in Lunacy, Mr. Frere and Dr. Needham, paid their visit of inspection to the asylum in April, and reported favourably regarding its condition.

It has only been necessary to resort to mechanical restraint in the case of one female patient, for surgical reasons only, and seclusion has been employed on but very few occasions during the year.

The number capable of following any industrial pursuit is yearly becoming less, consequent on the gradual increasing infirmity or loss by death of some of the earliest cases admitted, who were formerly able to usefully occupy themselves, and also the bodily inability of the large majority of those admitted in more recent years to be thus employed. The diminished number capable of employment is more especially experienced in the laundry and sewing room, and it will ere long become a question for considering the necessity of increasing the employment of paid labour in these departments.

Everyone conversant with the enlightened treatment of the insane will recognise the necessity of providing frequent and varied recreations for the patients. It is beyond the question of a doubt that such humane treatment has a markedly beneficial effect on the inmates of an asylum, and even where, as here, owing for the most part to the incurable class received, one cannot claim this form of treatment as curative in its nature, still it most materially ameliorates the mental condition, and otherwise promotes the happiness and contentment of a number of the patients under care here. With this view in mind, it has been my aim to provide a round of varied and suitable recreations, including musical and dramatic entertainments during the winter season, and to promote outdoor amusements, such as cricket,

rounders, and picnic parties in the home wood, &c., during the summer months. Artistic friends from London have very kindly volunteered their services to me on several occasions, and thereby contributed greatly to the happiness of our population.

I must not omit to acknowledge the most valuable aid rendered me by my colleague and Senior Assistant Medical Officer, Dr. Campbell, in this and all other matters appertaining to the welfare of the patients in the asylum.

The investigations regarding the probable cause of the epidemic of enteric fever which occurred in 1894, and to which I referred at length in my report for that year, have been continued by Mr. Baldwin Latham, C.E., and several visits have also been paid to the asylum by Dr. Seaton, the Medical Officer of Health for the county.

The services of Dr. Muter and Mr. Harland, analysts, were engaged also for the purpose of pursuing the lithia water tests.

Mr. Whitaker, F.R.S., the well expert, who was consulted by the Committee as to the possible contamination of the well, after having carried out various experiments, stated, *inter alia*, in his report of July, 1895, that the general result of his investigation was, fortunately, to relieve the well from the stigma cast upon it, and to make one revert to the other view, that the water must have been polluted somewhere above ground after it had been raised from the well.

Mr. Baldwin Latham, in his report of April, 1895, expresses the opinion that, with reference to the outbreak of typhoid fever during the year 1894, there appears to be ample means of tracing a direct communication between the sewage and the water supply otherwise than through the well; that is, a pure water tank was constructed in 1893 which, from the arrangement of the overflows, the proximity of the rain-water drains, and the defective sewers which then existed, was the means of directly passing sewage into the water supply before October of last year. But, he adds, this state of things would not account for the epidemic occurring in the middle of the year 1890. It would therefore appear that there is some means by which the water supply is at times liable to be contaminated.

The water was formerly distributed to the barracks by a separate pipe, and it was stated that the water so supplied was always under pressure. If this was so, Mr. Latham reports that it would be difficult to conceive how the epidemic at the barracks in 1890 could have occurred, unless the water supply from the well became contaminated, as at this period the pure water tank was not in existence, or there may have been some other defect in the system which would account for it.

When the ground was opened for the purpose of the examination of the sewers, rain-water drains, and water pipes, it was found after the sewers were tested by Mr. Latham's assistants under water pressure that they were not watertight, and that there were many serious defects in them.

Mr. Latham further states that the most important defect in the system for distributing water seems to have been a defect in a section of the water-main adjacent to the male bath-room, which was discovered and repaired on October 18th, 1894, but may have been in existence for years, as far as is known.

It is quite possible with the stoppage in the main sewer and the mingling of the rain water in the sewage-sodden soil at these points, at any time when the pipes were empty, sewage matter may have been drawn in through the defect in the mains, and would have thus been distributed either directly to the male wards or to the barracks.

It is Mr. Latham's opinion that the freedom of the asylum from typhoid for long periods together and at the present time shows distinctly that the influence of

irrigation has no material bearing or effect upon the outbreaks which have occurred, as the sewage has been applied to the land for very many years, and if it exercised any baneful effect its influence ought to be more or less continuous from year to year.

The general flow of the current of the underground water on the asylum estate is from south to north, and instructions have therefore been given, as a precautionary measure, that no sewage is for the future to be distributed on the land south of the asylum well.

I understand that Mr. Latham has prepared a scheme for an entire reconstruction of the drainage system and sewage disposal of the asylum which, there is every reason to believe, will place us on a sound sanitary basis.

Amongst the structural additions and alterations which it is proposed to carry out in the ensuing year, the nurses' residential block and the extension of the day rooms of certain blocks by adding bays to them would be very necessary and desirable improvements. The erection of a small isolation hospital for infectious diseases will enable the present building to be permanently used for the accommodation of 50 female patients, for which it is in every respect most suitable.

The nurses have during the past year had the opportunity of availing themselves of a course of special instruction in nursing, &c., by the Matron.

Our thanks are due to Messrs. Mudie, of Oxford Street, who kindly sent me a contribution of a hundred volumes of novels, biographies, &c., for the use of the patients and attendants, and these have been added to the asylum library.

The following changes in the staff have occurred during 1895. Mr. Overend, who had held the position of foreman of works, was obliged to resign his situation in March owing to serious illness, and I regret to have to record his death, due to pulmonary consumption, which occurred in August last. He had gained the respect of all here by his kindly disposition and sound knowledge of and attention to his duties. He was succeeded by Mr. Cathrow, who had previously held the situation of assistant to the engineer and foreman of works at the Essex County Asylum.

Dr. Thomas, the Junior Assistant Medical Officer, resigned his post in October last, to enter upon general practice, and was succeeded by Dr. Reginald St. John Bond, who had previously held the office of resident clinical assistant at the Royal Edinburgh Asylum.

Mr. Pratten resigned his post of clerk to the asylum in December, and the office has since been abolished, and an arrangement made for the duties to be discharged in part by the Steward and in part at the Chief Offices.

I have much pleasure in acknowledging the zealous and able assistance I have received from the Steward (Mr. Schilling), the Matron (Mrs. Warren), and the various other officers in carrying out my duties.

I am glad to be able to report in generally favourable terms of the conduct of the attendants and *employés*.

In closing this report, I desire to express my thanks to the Chairman and Committee of Management for the kind and valued support I have always received from them in the discharge of my responsible duties.

I have the honour to be,

Madam and Gentlemen,

Your obedient servant,

G. STANLEY ELLIOT,

Medical Superintendent.

No. 14.

REPORT OF DR. T. B. DYER, MEDICAL SUPERINTENDENT OF THE DARENTH ASYLUM.

(For Statistics, see pp. 184 to 209.)

DARENTH ADULT ASYLUM,
January, 1896.

To the Committee of Management.

LADIES AND GENTLEMEN,

I have the honour to submit to you the Annual Report for the year 1895. The following table will explain the changes that have occurred during this year, and the various statistical tables are also appended:—

	Males.	Females.	Total.
In the asylum, January 1st, 1895	447	599	1,046
Admitted during the year...	25	65	90
Discharged during the year	2	22	24
Died during the year...	23	44	67
Remaining in the asylum December 31st, 1895	447	598	1,045

This year, with the exception of 20 females admitted direct from the London county asylums as chronic harmless cases, we have filled up our vacancies with patients over 16 years of age direct from the schools, viz., 25 males and 45 females. I am afraid there is little hope of their ultimate recovery.

We have had 24 discharges, of whom two males and 18 females were discharged as not being fit cases for this asylum, and four females were discharged as having improved in their mental condition sufficiently as to be able to live under control with their friends. We cannot, unfortunately, expect many to leave improved, as we are supposed only to receive chronic incurable patients of the harmless imbecile type.

The deaths this year are less than usual, and this may be partly accounted for by the fact that no cases have been received direct from the parishes, many of whom used to be very feeble in their bodily health, and the cases we have received from the county asylums and the schools have had more stamina than the usual cases, they often coming direct from their indifferent homes and insufficiently nourished. The various causes of death are shown in Table VII., and in many cases *post mortems* were able to be made. No inquests were deemed necessary by the coroner to be held this year.

The useful employment of the patients is encouraged as much as possible, and many continue to work in various shops, on the farm, and in the cleaning of the wards and corridors, also in the laundry and at needlework, as will be seen by Table XI. Those employed have formerly had beer as an extra for lunch, but, as that is now not allowed, it is probable that cocoa and lemonade will be substituted for it before long.

The entertainments for the patients are given weekly during the winter, and consist of dances, concerts, theatrical performances, and magic lantern. In the summer the male patients have cricket, and all the inmates who are able take frequent walks in the adjoining country lanes and roads. This autumn we were able to give a few of the old and helpless patients a drive to Cobham and a tea there. It was much appreciated. The summer fête was also much enjoyed and a great success. We have to thank the members of the Dartford Chrysanthemum Society for kindly giving a free invitation for several inmates to see the show in November.

As mentioned above, the beer has been removed from the patients' dietary scale this year, but a few of the older inmates, who greatly missed it, have a little alcohol allowed them, and, of course, it can be given in any case, should it be medically required, as before.

During the year two new shelters have been erected in the airing courts of H and A blocks, which enable patients to leave their wards for an airing at times when they could not do so previously, and they are found to be greatly beneficial to the better ventilation of the wards in bad weather. I am hoping, in the other airing courts where there are at present no shelters, they will be eventually built.

The only important changes in the staff during the year have been, firstly, the appointment (on the marriage of Miss Lewis) of Miss Dowley as female Head Attendant. She had previously been at the schools for some years as Deputy Head Attendant. Secondly, the appointment of Charge Attendant Wallace Colegate to the post of Head Attendant to the Grahamstown Asylum, South Africa. He had worked here very successfully for many years, and had had charge of two blocks for helpless patients. On his leaving, the Committee have appointed a charge to each of these respective wards. Thirdly, it was found expedient to place a fresh Laundry Superintendent in charge of the work there.

We have had the usual statutory visits from the Lunacy Commissioners and the Inspectors of the Local Government Board, whose reports on their visits have been forwarded to the Committee in due course.

In conclusion, I have to thank the Committee for their continued kindness and support, and the officers and staff for their cordial co-operation.

I am,

Ladies and Gentlemen,

Your obedient Servant,

T. B. DYER,
Medical Superintendent.

LUNACY STATISTICS.—TABLE I.—*Showing*

	LEAVESDEN ASYLUM.					
	Males.	Females.	Total.	Males.	Females.	Total.
In the Asylums, January 1st, 1895...	...	...	...	895	1,096	1,991
Admitted for the first time during the year, direct from the several Parishes and Unions	125	125	250	...	...	...
Re-admitted during the year...	1	2	3	...	...	...
Admitted from other Asylums of the Board	...	...	...	...	...	...
				126	127	253
Total under care during the year	...	...	...	1,021	1,223	2,244
Discharged—						
Not insane	...	...	...	...	...	...
Recovered	6	1	7	...	...	...
Improved	4	4	8	...	...	...
Not improved	10	7	17	...	...	...
To other Asylums of Board...	1	1	2	...	...	...
Died	103	116	219	...	...	...
Total discharged (for various reasons) and died during the year	...	...	...	124	129	253
Remaining in the Asylums, December 31st, 1895...	...	...	...	897	1,094	1,991
Average numbers resident during the year	...	...	...	895	1,096	1,991
Highest number resident on any one day	...	...	...	899	1,099	1,998
Lowest number resident on any one day	...	...	...	884	1,085	1,969

TABLE II.—*Showing the Admissions, Re-admissions, and Discharges from*

[N.B.—The following are the dates of the opening of the several Asylums:—

	LEAVESDEN ASYLUM.					
	Males.	Females.	Total.	Males.	Females.	Total.
Admitted during the period of $25\frac{83}{365}$ years, direct from the several Parishes and Unions	3,682	3,641	7,323	...	...	...
Re-admissions	47	17	64	...	...	...
Admitted from other Asylums of Board	182	232	414	...	...	...
Total of cases admitted	...	...	...	3,911	3,890	7,801
Discharged—						
Not certified	...	...	...	...	...	...
Not insane	4	5	9	...	...	...
Recovered	206	118	324	...	...	...
Improved and Escaped...	203	149	352	...	...	...
Not improved	253	253	506	...	...	...
To other Asylums of Board	45	34	79	...	...	...
Died	2,303	2,237	4,540	...	...	...
Total discharged and died during the $25\frac{83}{365}$ years	...	...	...	3,014	2,796	5,810
Remaining December 31st, 1895	...	...	...	897	1,094	1,991
Average numbers resident during the $25\frac{83}{365}$ years	...	...	...	830	1,045	1,875

N.B.—From April 16th, 1873, to November, 1876, the North-Western Hospital (Hampstead) was used as an Asylum fo
the other Asylums of the Board. 222 patients (91 male and 131 female) died and th

the Admissions, Re-admissions, Discharges, and Deaths during the Year 1895.

CATERHAM ASYLUM.						DARENTH ASYLUM.						SUMMARY.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
..	...	...	930	1,074	2,004	...	...	...	447	599	1,046	...	...	...	2,272	2,769	5,041
85	75	160	...	...	...	...	20	20	...	...	...	210	220	430	...	...	...
..	1	1	...	...	...	...	...	...	...	...	...	1	3	4	...	...	...
..	...	...	...	...	...	25	45	70	...	...	...	25	45	70	...	...	...
			85	76	161				25	65	90				236	268	504
..	...	...	1,015	1,150	2,165	...	...	...	472	664	1,136	...	...	...	2,508	3,037	5,545
..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
7	1	8	...	...	...	...	...	...	...	...	...	13	2	15	...	...	...
5	1	6	...	...	...	...	4	4	...	...	...	9	9	18	...	...	...
13	3	16	...	...	...	2	18	20	...	...	...	25	28	53	...	...	...
..	...	...	...	...	...	...	...	...	...	...	...	1	1	2	...	...	...
57	73	130	...	...	...	23	44	67	...	...	...	183	233	416	...	...	...
..	...	...	82	78	160	...	...	...	25	66	91	...	...	...	231	273	504
..	...	...	933	1,072	2,005	...	...	...	447	598	1,045	...	...	...	2,277	2,764	5,041
..	...	...	932	1,070	2,002	...	...	...	448	590	1,038	...	...	...	2,275	2,756	5,031
..	...	...	934	1,075	2,009	...	...	...	450	600	1,050	...	...	...	2,283	2,774	5,057
..	...	...	929	1,065	1,994	...	...	...	446	572	1,018	...	...	...	2,259	2,722	4,981

the Opening of the First Asylum to the present date, December 31*st*, 1895.

[Leavesden, October 9th, 1870; Caterham, September 29th, 1870; and Darenth, May 4th, 1880.]

CATERHAM ASYLUM.						DARENTH ASYLUM.						SUMMARY.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
387	3,517	7,404	...	...	...	775	1,222	1,997	...	...	...	8,344	8,380	16,724	...	...	...
31	30	61	...	...	...	2	9	11	...	...	...	80	56	136	...	...	...
128	204	332	...	...	...	432	387	819	...	...	...	742	823	1,565	...	...	...
..	...	...	4,046	3,751	7,797	...	...	...	1,209	1,618	2,827	...	...	...	9,166	9,259	18,425
..	...	...	...	...	...	8	14	22	...	...	...	8	14	22	...	...	...
4	2	6	...	...	...	...	...	...	...	...	...	8	7	15	...	...	...
235	173	408	...	...	...	30	21	51	...	...	...	471	312	783	...	...	...
265	157	422	...	...	...	112	117	229	...	...	...	580	423	1,003	...	...	...
186	163	349	...	...	...	83	108	191	...	...	...	522	524	1,046	...	...	...
87	48	135	...	...	...	73	82	155	...	...	...	205	164	369	...	...	...
336	2,136	4,472	...	...	...	456	678	1,134	...	...	...	5,095	5,051	10146	...	...	...
.	...	...	3,113	2,679	5,792	...	...	...	762	1,020	1,782	...	...	...	6,889	6,495	13,384
.	...	...	933	1,072	2,005	...	...	...	447	598	1,045	...	...	...	2,277	2,764	5,041
.	...	...	847	1,057	1,904	...	...	...	324	474	798	...	...	...	2,001	2,576	4,577

mbeciles, and during that period 1,201 patients were admitted direct from the several Parishes and Unions, as well as some from emainder were discharged or transferred to the Asylums at Leavesden and Caterham.

LUNACY STATISTICS.—TABLE III.—*Showing the Admissions, Discharges, and Admissions for the year* 1886,

YEAR.	ADMITTED.					DISCHARGED.											
	From Parishes and Unions.		From other Asylums of Board.		Total Admissions.	Recovered.			Improved.			Not Improved.			To other Asylums of Board.		
	Male.	Female.	Male.	Female.		Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
LEAVESDEN ASYLUM.																	
1886	65	86	...	...	151	...	1	1	4	1	5	9	5	14	...	...	...
1887	82	92	...	...	174	2	1	3	6	2	8	7	4	11	...	...	...
1888	73	83	...	...	156	5	4	9	4	1	5	5	5	10	...	...	...
1889	142	122	...	...	264	3	4	7	10	5	15	5	11	16	...	..	...
1890	163	157	...	...	320	12	9	21	7	7	14	5	6	11	...	...	...
1891	179	150	...	...	329	13	8	21	14	12	26	7	†9	16	...	...	...
1892	185	152	...	...	337	17	7	24	7	4	11	13	14	27	...	...	...
1893	160	95	...	...	255	13	5	18	10	...	10	10	7	17	...	...	...
1894	154	112	...	...	266	12	4	16	9	4	13	‡19	7	26	...	...	...
1895	126	127	...	...	253	6	1	7	4	4	8	10	7	17	1	1	2
CATERHAM ASYLUM.																	
1886	118	92	...	...	210	6	5	11	4	4	8	3	2	5	...	...	..
1887	105	91	...	...	196	8	5	13	9	6	15	3	5	8	...	...	..
1888	83	81	...	...	164	6	6	12	4	1	5	8	7	15	...	...	..
1889	92	79	...	...	171	13	4	17	1	2	3	6	7	13	...	...	..
1890	121	123	...	...	244	5	2	7	4	3	7	5	6	11	...	...	..
1891	104	108	...	...	212	*3	4	7	2	5	7	5	7	12	...	...	..
1892	103	115	...	...	218	*5	2	7	5	3	8	6	8	14	...	...	..
1893	86	76	...	...	162	2	2	4	4	5	9	11	10	21	..	...	..
1894	102	113	...	...	215	6	4	10	4	3	7	6	5	11	...	...	..
1895	85	76	...	...	161	7	1	8	5	1	6	13	3	16	...	...	..
DARENTH ASYLUM.																	
1886	46	63	20	8	137	...	...	...	27	21	48	3	10	13	...	...	..
1887	41	39	12	69	161	...	...	...	19	20	39	4	7	11	...	...	..
1888	49	70	124	46	289	...	...	...	18	14	32	2	6	8	21	40	6
1889	128	113	26	9	276	...	...	...	26	10	36	8	6	14	...	...	..
1890	74	86	...	...	160	...	...	...	3	23	26	11	8	19	52	42	9
1891	59	92	...	...	151	7	12	†19	4	8	12	8	4	12	...	...	..
1892	24	20	11	31	86	...	...	...	3	2	5	10	4	14	...	...	..
1893	...	23	45	44	112	...	2	†2	...	2	2	9	3	12	...	...	..
1894	...	66	38	13	117	1	...	†1	2	...	2	4	1	5	...	...	..
1895	...	20	25	45	90	...	...	...	...	4	4	2	18	20	...	...	..
SUMMARY.																	
1886	229	241	20	8	498	6	6	12	35	26	61	15	17	32	...	...	..
1887	228	222	12	69	531	10	6	16	34	28	62	14	16	30	...	...	..
1888	205	234	124	46	609	11	10	21	26	16	42	15	18	33	21	40	6
1889	362	314	26	9	711	16	8	24	37	17	54	19	24	43	...	...	..
1890	358	366	...	...	724	17	11	28	14	33	47	21	20	41	52	42	9
1891	342	350	...	...	692	23	24	47	20	25	45	20	20	40	...	...	..
1892	312	287	11	31	641	22	9	31	15	9	24	29	26	55	...	...	..
1893	246	194	45	44	529	15	9	24	14	7	21	29	20	49	...	...	..
1894	256	291	38	13	598	19	8	27	15	7	22	29	13	42	...	...	..
1895	211	223	25	45	504	13	2	15	9	9	18	25	28	53	1	1	

* 1 Not insane. ‡ 2 Not insane. † Not certified.

Deaths, with the mean Annual Mortality and proportion of Recoveries per cent. of the and for each subsequent year.

DIED.			Remaining December 31st.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers Resident.		
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
58	58	116	885	1,100	1,985	893	1,095	1,988	0·0	1·1	0·6	6·5	5·3	5·8
52	93	145	900	1,092	1,992	895	1,092	1,987	2·4	1·1	1·7	5·8	8·5	7·3
76	76	152	883	1,089	1,972	890	1,090	1,980	6·8	4·8	5·7	8·5	7·0	7·7
124	109	233	883	1,082	1,965	887	1,085	1,972	2·1	3·2	2·6	13·9	10·0	11·8
181	124	305	841	1,093	1,934	853	1,081	1,934	7·3	5·7	6·5	21·2	11·4	15·7
114	132	246	872	1,082	1,954	851	1,089	1,940	7·2	5·3	6·3	13·4	12·1	12·7
131	111	242	889	1,098	1,987	857	1,068	1,925	9·2	4·6	7·1	15·3	10·4	12·6
117	85	202	899	1,096	1,995	894	1,097	1,991	8·1	5·3	7·0	13·1	7·7	10·1
118	97	215	895	1,096	1,991	894	1,095	1,989	7·7	3·5	6·0	13·0	8·9	10·1
103	116	219	897	1,094	1,991	895	1,096	1,991	4·7	0·8	2·8	11·5	10·5	11·0
78	69	147	933	1,069	2,002	915	1,061	1,976	5·0	5·4	5·2	8·5	6·5	7·4
75	74	149	943	1,070	2,013	928	1,072	2,000	7·6	5·4	6·6	8·0	6·9	7·4
78	85	163	930	1,052	1,982	936	1,068	2,004	7·2	7·4	7·3	8·3	7·9	8·1
83	72	155	919	1,046	1,965	930	1,048	1,978	14·1	5·0	9·9	8·9	6·8	7·8
107	100	207	919	1,058	1,977	918	1,062	1,980	4·1	0·8	2·4	11·6	9·4	10·4
76	86	162	937	1,064	2,001	922	1,060	1,982	2·8	3·7	3·3	8·2	8·1	8·1
83	95	178	941	1,071	2,012	919	1,045	1,964	3·8	1·7	2·7	9·0	9·0	9·0
72	66	138	938	1,064	2,002	940	1,070	2,010	2·3	2·6	2·4	7·6	6·1	6·8
94	91	185	930	1,074	2,004	931	1,071	2,002	5·8	3·5	4·6	10·0	8·5	9·2
57	73	130	933	1,072	2,005	932	1,070	2,002	8·2	1·3	4·9	6·1	6·8	6·4
26	37	63	312	484	796	310	481	791	...	...	...	8·3	7·6	8·0
25	34	59	317	531	848	307	483	790	...	...	...	8·1	7·0	7·4
31	40	71	418	547	965	330	530	860	...	...	...	9·3	7·5	8·2
54	53	107	484	600	1,084	467	588	1,055	...	...	...	11·5	9·0	10·1
51	62	113	441	551	992	449	563	1,012	...	...	...	11·3	11·0	11·1
35	39	74	446	580	1,026	443	553	996	...	...	...	7·9	7·0	7·4
32	43	75	436	582	1,018	446	580	1,026	...	...	...	7·1	7·4	7·3
28	67	95	444	575	1,019	445	574	1,019	...	...	...	6·3	11·7	9·4
28	54	82	447	599	1,046	446	578	1,024	...	...	...	6·3	9·3	8·0
23	44	67	447	598	1,045	448	590	1,038	...	...	...	5·1	7·4	6·4
162	164	326	2,130	2,653	4,783	2,118	2,637	4,755	2·0	2·4	2·4	7·6	6·2	6·9
152	201	353	2,160	2,693	4,853	2,130	2,647	4,777	4·1	2·0	3·0	7·1	7·6	7·3
185	201	386	2,231	2,688	4,919	2,156	2,688	4,844	3·3	3·5	3·4	8·5	7·4	7·9
261	234	495	2,286	2,728	5,014	2,284	2,721	5,005	4·1	2·5	3·5	11·4	8·5	9·8
339	286	625	2,201	2,702	4,903	2,220	2,706	4,926	4·7	3·0	3·8	15·2	10·5	12·7
225	257	482	2,255	2,726	4,981	2,216	2,702	4,918	4·4	3·4	3·9	10·1	9·5	9·8
246	249	495	2,266	2,751	5,017	2,222	2,693	4,915	6·8	2·8	4·8	11·0	9·2	10·0
217	218	435	2,281	2,735	5,016	2,279	2,741	5,020	5·2	3·8	4·5	9·5	7·9	8·7
240	242	482	2,272	2,769	5,041	2,271	2,744	5,015	6·5	2·6	4·5	10·6	8·8	9·6
183	233	416	2,277	2,764	5,041	2,275	2,756	5,031	5·5	0·74	3·0	8·0	8·4	8·3

LUNACY STATISTICS.—TABLE IV.—*Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients admitted during the year* 1895.

MENTAL DISEASES.	LEAVESDEN ASYLUM.			CATERHAM ASYLUM.			DARENTH ASYLUM.			SUMMARY.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Mania	...	...	...	...	...	...	...	...	...	...	...	...
Mania, Chronic	7	4	11	5	11	16	...	3	3	12	18	30
Mania and Epilepsy ...	...	...	...	1	...	1	...	...	...	1	...	1
Melancholia	...	1	1	4	9	13	...	...	..	4	10	14
General Paresis	3	2	5	6	1	7	...	...	..	9	3	12
Dementia	36	63	99	19	15	34	...	8	8	55	86	141
Dementia and Paralysis	2	4	6	...	2	2	...	2	2	2	8	10
Dementia and Epilepsy	20	8	28	6	5	11	...	1	1	26	14	40
Senile Dementia... ...	11	11	22	7	8	15	...	2	2	18	21	39
Idiocy	10	11	21	1	2	3	...	...	...	11	13	24
Idiocy and Epilepsy ...	1	1	2	1	...	1	...	...	...	2	1	3
Imbecility	18	13	31	25	18	43	..	3	3	43	34	77
Imbecility and Epilepsy	6	4	10	10	5	15	...	1	1	16	10	26
Of Weak Mind	4	2	6	...	...	...	...	...	...	4	2	6
Mental Stupor	2	3	5	...	...	...	...	...	...	2	3	5
Alcoholic Derangement	1	...	1	...	...	...	...	...	...	1	...	1
Delusional Insanity ...	5	...	5	...	...	...	...	...	...	5	...	5
Totals	126	127	253	85	76	161	...	20	20	211	223	434

LUNACY STATISTICS.—TABLE V.—*Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients resident in the Asylum on December 31st, 1895.*

MENTAL DISEASES.	LEAVESDEN ASYLUM.			CATERHAM ASYLUM.			DARENTH ASYLUM.			SUMMARY.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Mania	25	...	25	...	13	13	...	...	...	25	13	38
Mania, Chronic	69	82	151	14	87	101	7	25	32	90	194	284
Mania and Epilepsy ...	3	8	11	...	4	4	...	...	...	3	12	15
Melancholia...	13	54	67	48	51	99	...	6	6	61	111	172
General Paresis	5	3	8	11	...	11	...	1	1	16	4	20
Dementia	174	251	425	367	387	754	44	88	132	585	726	1,311
Dementia and Paralysis	11	56	67	35	27	62	3	22	25	49	105	154
Dementia and Epilepsy	70	135	205	75	113	188	29	35	64	174	283	457
Senile Dementia ...	70	75	145	15	20	35	8	29	37	93	124	217
Idiocy	59	68	127	26	21	47	54	70	124	139	159	298
Idiocy and Epilepsy ...	1	1	2	...	...	...	10	32	42	11	33	44
Imbecility	271	158	429	337	339	676	190	198	388	798	695	1,493
Imbecility and Epilepsy	78	138	216	5	10	15	87	59	146	170	207	377
Of Weak Mind	27	29	56	...	...	...	15	33	48	42	62	104
Mental Stupor	7	23	30	...	...	...	...	...	...	7	23	30
Alcoholic Derangement	5	2	7	...	...	...	...	...	...	5	2	7
Delusional Insanity ...	9	11	20	...	...	...	...	...	...	9	11	20
Totals	897	1,094	1,991	933	1,072	2,005	447	598	1,045	2,277	2,764	5,041

LUNACY STATISTICS.—TABLE VI.—*Showing the History of the Annual numbers of each year's admissions*

YEAR.	ADMITTED.							OF EACH YEAR'S ADMISSIONS, DISCHARGED AND DIED IN 1895.														
	New Cases.		Relapsed Cases.		From other Asylums of Board.			Recovered.			Improved.			Not Improved.			To other Asylums of Board.			Died.		
	Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	...
LEAVESDEN ASYLUM.																						
1870 (part of)...	468	556	...	...	...	..	1,024	...	...	...	...	.	...	...	...	...	...	...	..	5	8	
1871	520	545	...	...	...	...	1,065	...	...	...	...	...	...	...	...	...	...	...	...	...	5	
1872	163	256	...	...	...	...	419	...	...	...	...	...	...	...	...	...	...	...	...	...	5	
1873	141	165	...	...	41	30	377	...	...	...	...	...	...	1	...	1	...	...	...	2	3	
1874	115	149	1	...	1	13	279	...	...	...	...	...	...	...	...	...	...	...	...	1	3	
1875	111	108	1	1	...	...	221	...	...	...	...	...	...	...	...	...	...	...	...	2	3	
1876	158	79	...	...	126	184	547	...	...	...	...	...	...	...	...	...	...	...	...	5	3	
1877	95	...	...	...	1	4	100	...	...	...	...	...	...	...	...	...	...	...	...	1	...	
1878	69	1	1	...	13	...	84	...	...	...	...	...	...	...	...	...	...	...	...	1	...	
1879	80	89	...	...	...	...	169	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1880	92	75	...	...	...	...	167	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1881	85	71	4	1	...	...	161	...	...	...	...	...	...	1	...	1	...	...	...	...	...	
1882	82	85	3	2	...	...	172	...	...	...	...	...	...	...	...	...	...	...	...	2	...	
1883	75	106	5	1	...	...	187	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1884	56	96	2	...	...	...	154	...	...	...	...	...	...	...	...	...	...	...	...	...	2	
1885	71	97	2	...	...	...	170	..	...	...	...	...	...	...	...	...	...	...	...	2	1	
1886	62	83	3	3	...	...	151	...	...	...	...	...	...	...	...	...	...	...	...	...	2	
1887	80	92	2	...	...	...	174	...	...	...	...	...	...	...	...	...	...	...	...	...	2	
1888	71	83	2	...	...	...	156	1	...	1	...	...	...	...	...	...	...	...	...	...	3	
1889	140	121	2	1	...	...	264	...	...	...	...	1	1	1	1	2	...	...	...	2	5	
1890	162	155	1	2	...	...	320	...	...	...	...	...	...	1	...	1	...	...	...	8	2	
1891	176	148	3	2	...	...	329	...	...	...	...	...	...	...	...	...	...	...	...	6	12	
1892	181	149	4	2	...	1	337	...	...	...	...	...	...	...	1	1	...	...	...	14	15	
1893	156	95	4	...	...	...	255	...	...	...	...	...	...	2	1	3	...	...	...	22	13	
1894	148	112	6	...	...	...	266	2	...	2	2	1	3	3	2	5	...	...	...	26	16	
1895	125	125	1	2	...	...	253	3	1	4	2	2	4	1	2	3	1	1	2	4	12	
Totals ...	3,682	3,641	47	17	182	232	7,801	6	1	7	4	4	8	10	7	17	1	1	2	103	116	
CATERHAM ASYLUM.																						
1870 (part of) ...	156	202	...	...	...	...	358	...	...	...	...	...	...	...	...	...	...	...	...	2	1	
1871	664	870	...	...	...	...	1,534	...	...	...	...	...	...	...	...	...	...	...	...	2	10	
1872	259	161	...	...	...	...	420	...	...	...	...	...	...	...	...	...	...	...	...	..	3	
1873	183	167	1	...	...	...	351	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
1874	240	169	2	3	72	36	522	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1875	158	180	...	...	...	...	338	...	...	...	...	...	...	...	...	...	...	...	...	1	3	
1876	173	170	5	5	33	167	553	...	...	...	...	...	...	...	...	...	...	...	...	3	7	
1877	178	56	2	...	...	1	237	...	...	...	...	...	...	...	...	...	...	...	...	1	...	
1878	157	47	...	...	17	...	221	...	...	...	...	...	...	...	...	...	...	...	...	1	...	
1879	176	84	...	...	6	...	266	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
1880	122	87	2	6	...	...	217	...	...	...	...	...	...	...	...	...	...	...	...	2	1	
1881	122	105	...	...	...	...	227	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1882	81	85	...	2	...	...	168	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
1883	73	37	3	3	...	...	116	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1884	98	102	2	1	...	...	203	...	...	...	...	...	...	1	...	1	...	...	...	3	2	
1885	59	48	3	3	...	...	113	...	...	...	...	...	...	1	...	1	...	...	...	...	1	
1886	115	91	3	1	...	...	210	...	...	...	...	...	...	...	...	...	...	...	...	1	2	
1887	103	90	2	1	...	...	196	...	...	...	...	...	...	...	...	...	...	...	..	1	3	
1888	83	81	...	...	...	...	164	...	...	...	...	...	...	1	1	2	...	...	...	1	...	
1889	92	78	...	1	...	...	171	...	...	...	...	...	...	...	...	...	...	...	...	2	2	
1890	119	122	2	1	..	...	244	...	...	...	...	...	...	3	...	3	...	...	...	1	6	
1891	104	108	...	...	...	...	212	...	...	...	...	...	..	...	...	...	...	...	...	1	5	
1892	101	114	2	1	...	...	218	...	...	...	1	...	1	2	...	2	...	...	...	9	7	
1893	86	76	...	...	...	...	162	2	...	2	...	...	...	2	...	2	...	...	...	4	3	
1894	100	112	2	1	...	...	215	4	1	5	2	...	2	1	1	2	...	...	...	13	5	
1895	85	75	...	1	...	...	161	1	...	1	2	1	3	2	1	3	...	...	...	6	7	
Totals ...	3,887	3,517	31	30	128	204	7,797	7	1	8	5	1	6	13	3	16	...	...	...	57	73	

Admissions since the opening of the Asylums, with the Discharges and Deaths and the remaining on December 31st, 1895.

Total Discharged and Died of each Year's Admissions to December 31st, 1895.															Remaining of each Year's Admissions, December 31st, 1895.		
Recovered.			Improved.			Not Improved.			To other Asylums of Board.			Died.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
15	8	23	25	19	44	24	44	68	12	4	16	324	412	736	68	69	137
20	15	35	29	23	52	49	48	97	15	10	25	340	370	710	67	79	146
12	6	18	12	11	23	14	14	28	5	14	19	116	172	288	4	39	43
9	4	13	8	6	14	17	21	38	10	5	15	124	131	255	14	28	42
7	2	9	2	7	9	12	16	28	2	...	2	90	110	200	4	27	31
5	3	8	3	5	8	17	13	30	...	...	...	72	65	137	15	23	38
12	3	15	18	7	25	11	12	23	...	...	...	192	175	367	51	66	117
7	...	7	5	...	5	3	...	3	...	...	...	61	1	62	20	3	23
5	...	5	4	...	4	3	...	3	...	...	...	54	1	55	17	...	17
3	3	6	3	5	8	3	6	9	...	...	...	56	51	107	15	24	39
8	4	12	9	8	17	8	2	10	...	...	...	56	34	90	11	27	38
10	7	17	6	5	11	6	3	9	...	...	...	55	43	98	12	14	26
3	6	9	3	5	8	3	3	6	...	...	...	58	55	113	18	18	36
3	2	5	5	8	13	4	7	11	...	...	...	55	61	116	13	29	42
1	8	9	3	3	6	5	7	12	...	...	...	35	61	96	14	17	31
4	9	13	5	3	8	5	6	11	...	...	...	49	51	100	10	28	38
2	...	2	3	1	4	7	3	10	...	...	...	32	48	80	21	34	55
4	3	7	5	2	7	5	4	9	...	...	...	51	55	106	17	28	45
5	3	8	4	2	6	5	3	8	...	...	...	44	37	81	15	38	53
9	4	13	9	5	14	6	9	15	...	...	...	85	57	142	33	47	80
14	11	25	10	8	18	8	6	14	...	...	...	84	71	155	47	61	108
14	5	19	7	9	16	7	10	17	...	...	...	84	61	145	67	65	132
14	6	20	9	2	11	13	9	22	..	...	...	78	52	130	71	83	154
10	3	13	7	2	9	9	4	13	...	...	...	64	28	92	70	58	128
7	2	9	7	1	8	12	6	18	...	...	...	40	23	63	88	80	168
3	1	4	2	2	4	1	2	3	1	1	2	4	12	16	115	109	224
06	118	324	203	149	352	257	258	515	45	34	79	2,303	2,237	4,540	897	1,094	1,991
4	4	8	7	13	20	6	7	13	2	1	3	101	137	238	36	40	76
47	31	78	50	30	80	47	36	83	19	6	25	453	627	1,080	48	140	188
24	12	36	24	10	34	11	9	20	16	11	27	168	105	273	16	14	30
19	10	29	19	6	25	13	19	32	11	8	19	100	110	210	22	14	36
18	24	42	30	13	43	1	...	1	36	18	54	197	122	319	32	31	63
13	11	24	10	8	18	8	8	16	1	3	4	112	123	235	14	27	41
2	11	13	21	13	34	5	9	14	...	...	...	143	220	363	40	89	129
...	...	...	14	4	18	4	3	7	1	...	1	129	35	164	32	15	47
5	3	8	11	1	12	4	5	9	1	...	1	109	26	135	44	12	56
6	4	10	9	4	13	13	1	14	...	...	...	121	42	163	33	33	66
7	4	11	11	7	18	8	7	15	...	...	...	78	54	132	20	21	41
3	2	5	6	5	11	10	4	14	...	...	...	69	69	138	34	25	59
9	10	19	5	5	10	2	5	7	...	...	...	44	50	94	21	17	38
11	4	15	4	3	7	3	1	4	...	1	1	39	19	58	19	13	32
7	12	19	8	10	18	5	4	9	...	...	...	55	51	106	25	26	51
2	2	4	...	1	1	4	2	6	...	...	...	36	31	67	20	15	35
12	5	17	7	6	13	7	4	11	...	...	...	62	45	107	30	32	62
7	4	11	6	2	8	6	6	12	...	...	...	47	40	87	39	39	78
4	4	8	6	...	6	5	5	10	...	...	...	43	43	86	25	29	54
8	2	10	4	3	7	5	8	13	...	...	...	49	30	79	26	36	62
6	6	12	3	3	6	8	5	13	...	...	...	54	50	104	50	59	109
5	2	7	1	2	3	2	4	6	...	...	...	36	45	81	60	55	115
2	2	4	1	1	2	3	8	11	...	...	...	33	31	64	64	73	137
7	3	10	2	5	7	7	3	10	...	...	...	32	17	49	38	48	86
6	1	7	4	1	5	1	1	2	...	...	...	20	9	29	71	101	172
1	...	1	2	1	3	2	1	3	...	...	...	6	5	11	74	68	142
235	173	408	265	157	422	190	165	355	87	48	135	2,336	2,136	4,472	933	1,072	2,005

LUNACY STATISTICS.—TABLE VI. (*continued*)—*Showing the History of Deaths, and the numbers of each year's*

YEAR.	ADMITTED.							Of each Year's Admissions, Discharged and Died in 1895.														
	New Cases.		Relapsed Cases.		From other Asylums of Board.			Recovered.			Impr'ved			Not Improved.			To other Asylums of Board.			Died.		
	Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	
DARENTH ASYLUM.																						
1880	...	163	...	...	25	54	242	...	...	...	...	...	...	...	1	1	...	...	...	...	4	
1881	...	15	...	1	...	13	29	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1882	152	185	...	1	78	17	433	...	...	...	...	1	1	...	3	3	...	...	...	2	2	
1883	107	153	...	...	6	8	274	...	...	...	...	...	...	...	2	2	...	...	...	1	4	
1884	57	67	...	...	...	..	124	...	...	...	...	...	...	...	...	...	...	...	...	...	2	
1885	40	54	...	...	22	30	146	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1886	45	62	1	1	20	8	137	...	..	...	...	...	...	...	..	...	...	...	...	1	1	
1887	41	35	...	4	12	69	161	...	...	...	...	...	...	...	2	2	...	...	...	1	...	
1888	49	70	...	...	124	46	289	...	...	...	...	...	...	1	...	1	...	...	...	2	3	
1889	127	112	1	1	26	9	276	...	...	...	...	...	...	...	...	...	...	...	...	6	3	
1890	74	86	...	...	...	...	160	...	...	...	...	...	...	...	1	1	...	...	...	1	4	
1891	59	92	...	...	...	...	151	...	...	...	...	1	1	...	...	...	...	...	...	...	4	
1892	24	19	...	1	11	31	86	...	...	...	...	...	...	...	2	2	...	...	...	5	4	
1893	...	23	...	...	45	44	112	..	...	...	...	...	...	...	2	2	...	...	...	2	3	
1894	...	66	...	...	38	13	117	..	...	...	...	...	...	1	4	5	...	..	...	2	7	
1895	...	20	...	...	25	45	90	...	...	...	...	2	2	...	1	1	...	...	...	...	1	
Totals ...	775	1,222	2	9	432	387	2,827	...	...	...	...	4	4	2	18	20	...	...	...	23	44	
SUMMARY.																						
Part of 1870 ...	624	758	...	...	...	...	1,382	...	...	...	...	...	...	...	...	...	...	...	...	7	9	
1871	1,184	1,415	...	...	...	...	2,599	...	...	...	...	...	...	...	...	...	...	...	...	2	15	
1872	422	417	...	...	...	...	839	...	...	...	...	...	...	...	...	...	...	...	...	...	8	
1873	324	332	1	...	41	30	728	...	...	...	...	...	...	1	...	1	...	...	...	3	4	
1874	355	318	3	3	73	49	801	...	...	...	...	...	...	...	...	...	...	...	...	1	3	
1875	269	288	1	1	...	...	559	...	...	...	...	...	...	...	...	...	...	...	...	3	6	
1876	331	249	5	5	159	351	1,100	...	...	...	...	...	...	...	...	...	...	...	...	8	10	
1877	273	56	2	...	1	5	337	...	...	...	...	...	...	...	...	...	...	...	...	2	...	
1878	226	48	1	...	30	...	305	...	...	...	...	...	...	...	...	...	...	...	...	2	...	
1879	256	173	...	...	6	...	435	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
1880	214	325	2	6	25	54	626	...	...	...	...	...	...	...	1	1	...	...	...	2	5	
1881	207	191	4	2	...	13	417	...	...	...	...	...	...	1	...	1	...	...	...	...	2	
1882	315	355	3	5	78	17	773	...	...	...	...	1	1	...	3	3	...	...	...	5	3	
1883	255	296	8	4	6	8	577	...	...	...	...	...	...	...	2	2	...	...	...	1	6	
1884	211	265	4	1	...	...	481	...	...	...	...	...	...	1	...	1	...	..	...	3	6	
1885	170	199	5	3	22	30	429	...	...	...	...	...	...	...	...	...	...	...	...	2	3	
1886	222	236	7	5	20	8	498	...	...	...	...	...	...	1	...	1	...	...	...	2	5	
1887	224	217	4	5	12	69	531	...	...	...	...	...	...	...	2	2	...	...	...	2	5	
1888	203	234	2	...	124	46	609	1	...	1	...	...	...	2	1	3	...	...	...	3	6	
1889	359	311	3	3	26	9	711	...	...	...	...	1	1	1	1	2	...	...	...	10	10	
1890	355	363	3	3	...	...	724	...	...	...	...	...	...	4	1	1	...	...	...	10	12	
1891	339	348	3	2	...	...	692	...	...	...	...	1	1	...	...	...	...	...	...	7	21	
1892	306	282	6	4	11	82	641	...	...	...	1	...	1	2	3	5	...	...	...	28	26	
1893	242	194	4	...	45	44	529	2	...	2	...	...	...	4	3	7	..	...	...	28	21	
1894	248	290	8	1	38	13	598	6	1	7	4	1	5	5	7	12	...	...	...	41	28	
1895	210	220	1	3	25	45	504	4	1	5	4	5	9	3	4	7	1	1	2	10	18	
Grand Totals...	8,344	8,380	80	56	742	823	18425	13	2	15	9	9	18	25	28	53	1	1	2	183	233	

the Annual Admissions since the opening of the Asylum, with the Discharges and admissions remaining on December 31st, 1895.

Total Discharged and Died of each Year's Admissions, December 31st, 1895.															Remaining of each Year's Admissions, December 31st, 1895.		
Recovered.			Improved.			Not Improved.			To other Asylums of Board.			Died.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
2	3	5	6	12	18	1	21	22	...	3	3	3	127	130	13	51	64
...	2	2	...	5	5	...	1	1	...	..	...	...	14	14	...	7	7
8	4	12	22	15	37	8	19	27	2	1	3	128	113	241	62	51	113
7	6	13	12	13	25	13	7	20	...	1	1	61	91	152	20	43	63
7	3	10	7	8	15	7	6	13	...	...	...	28	38	66	8	12	20
6	3	9	11	9	20	3	5	8	2	2	4	24	42	66	16	23	39
...	...	...	11	12	23	1	10	11	2	1	3	25	29	54	27	19	46
...	...	...	13	4	17	3	8	11	...	45	45	20	28	48	17	23	40
...	...	...	13	12	25	11	9	20	56	26	82	33	41	74	60	28	88
...	...	...	13	14	27	15	7	22	11	3	14	63	48	111	52	50	102
...	...	...	2	7	9	10	5	15	...	...	...	31	45	76	31	29	60
7	12	19	2	1	3	7	1	8	...	...	...	22	34	56	21	44	65
...	...	...	...	3	3	2	2	4	...	...	...	12	10	22	21	36	57
...	2	2	...	...	...	1	2	3	...	...	..	4	7	11	40	56	96
1	...	1	...	...	...	1	4	5	...	...	...	2	10	12	34	65	99
...	...	...	...	2	2	...	1	1	...	...	...	...	1	1	25	61	86
38	35	73	112	117	229	83	108	191	73	82	155	456	678	1,134	447	598	1,045
19	12	31	32	32	64	30	51	81	14	5	19	425	549	974	104	109	213
67	46	113	79	53	132	96	84	180	34	16	50	793	997	1,790	115	219	334
36	18	54	36	21	57	25	23	48	21	25	46	284	277	561	20	53	73
28	14	42	27	12	39	30	40	70	21	13	34	224	241	465	36	42	78
25	26	51	32	20	52	13	16	29	38	18	56	287	232	519	36	58	94
18	14	32	13	13	26	25	21	46	1	3	4	184	188	372	29	50	79
14	14	28	39	20	59	16	21	37	...	...	...	335	395	730	91	155	246
7	...	7	19	4	23	7	3	10	1	...	1	190	36	226	52	18	70
10	3	13	15	1	16	7	5	12	1	...	1	163	27	190	61	12	73
9	7	16	12	9	21	16	7	23	...	...	...	177	93	270	48	57	105
17	11	28	26	27	53	17	30	47	...	3	3	137	215	352	44	99	143
13	11	24	12	15	27	16	8	24	...	...	...	124	126	250	46	46	92
20	20	40	30	25	55	13	27	40	2	1	3	230	218	448	101	86	187
21	12	33	21	24	45	20	15	35	...	2	2	155	171	326	52	85	137
15	23	38	18	21	39	17	17	34	...	...	...	118	150	268	47	55	102
12	14	26	16	13	29	12	13	25	2	2	4	109	124	233	46	66	112
14	5	19	21	19	40	15	17	32	2	1	3	119	122	241	78	85	163
11	7	18	24	8	32	14	18	32	...	45	45	118	123	241	73	90	163
9	7	16	23	14	37	21	17	38	56	26	82	120	121	241	100	95	195
17	6	23	26	22	48	26	24	50	11	3	14	197	135	332	111	133	244
20	17	37	15	18	33	26	16	42	...	...	...	169	166	335	128	149	277
26	19	45	10	12	22	16	15	31	...	...	...	142	140	282	148	164	312
16	8	24	10	6	16	18	19	37	...	...	...	123	93	216	156	192	348
17	8	25	9	7	16	17	9	26	...	...	...	100	52	152	148	162	310
14	3	17	11	2	13	14	11	25	...	...	...	62	42	104	193	246	439
4	1	5	4	5	9	3	4	7	1	1	2	10	18	28	214	238	452
479	326	805*	580	423	1003	530	531	1061†	205	164	369	5,095	5,051	10,146	2,277	2,764	5,041

* Includes the "not certified cases."—*Vide* Table II., p. 185.

† Includes the "not insane" cases in same table.

LUNACY STATISTICS.—TABLE VII.—*Showing the causes of*
calculated from the ages stated

LEAVESDEN

CAUSES OF DEATH.	16		17		18		19		20 to 29		30 to 3	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females
CEREBRAL OR SPINAL DISEASES—												
Apoplexy	...	...	...	...	...	...	...	...	..	...	...	..
Epilepsy	...	1	...	...	...	...	1	...	...	1	3	
Brain Wasting	...	...	...	...	...	...	...	...	...	...	...	..
Imbecility and Exhaustion	...	...	...	...	...	...	...	...	...	...	...	
General Paralysis	...	...	...	...	1	...	...	...	...	...	1	
THORACIC DISEASE—												
Pulmonary Tuberculosis	...	...	...	...	1	...	...	...	5	5	3	
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	..
Pneumonia	...	...	...	...	...	1	1	...	...	...	1	
Morbus Cordis	...	...	...	...	...	...	...	...	...	...	...	..
Morbus Cordis and Bronchitis	...	...	...	...	...	...	...	...	...	...	...	..
Morbus Cordis and Mammary Carcinoma	...	...	...	...	...	...	...	...	...	...	...	..
ABDOMINAL DISEASE—												
Malignant Disease of Rectum	...	...	...	...	...	...	...	...	...	...	...	..
Malignant Disease of Stomach	...	...	..	...	...	...	...	...	...	...	...	..
Malignant Disease of Colon	...	...	...	...	...	...	...	...	...	...	...	..
Malignant Disease of Pancreas	...	...	...	...	...	...	...	...	...	...	...	..
Hepatic Cirrhosis	...	...	...	...	...	...	...	...	...	...	...	..
Parovarian Cyst and Exhaustion	...	...	...	...	...	...	...	...	...	...	...	..
Chronic Intestinal Obstruction	...	...	...	...	...	...	...	...	...	...	...	..
Diarrhœa	...	...	...	...	...	...	...	...	...	...	...	..
Uterine Carcinoma	...	...	...	...	...	...	...	...	...	...	...	..
Renal Disease and Cardiac Failure	...	...	...	...	...	...	...	...	...	...	...	..
Diabetes Mellitus	...	...	...	...	...	...	...	...	...	...	...	..
Senile Decay	...	...	...	...	...	...	...	...	...	...	...	..
Gradual Exhaustion	...	...	1	...	...	...	...	...	...	...	...	..
General Tuberculosis	...	...	1	...	...	...	...	...	4	1	6	
Epilepsy and Pulmonary Tuberculosis	...	...	...	...	...	...	...	...	...	...	1	
Epilepsy and General Tuberculosis	...	...	...	...	...	...	...	...	1	...	...	
Cardiac Disease and Gangrene	...	...	...	...	...	...	...	...	...	...	...	..
Epilepsy and Renal Disease	...	...	...	...	...	...	...	...	...	...	...	..
Tertiary Syphilis and Cardiac Degeneration	...	...	...	...	...	...	...	...	...	...	...	..
Totals	...	1	2	...	2	1	2	...	10	7	15	1

Death during the year 1895, *together with the Ages of the Decedents.*
on the Orders of Admission.

ASYLUM.

40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Age 104.		Ages Unknown.		Total.		
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
...	1	1	...	1	1	...	1	...	...	...	...	...	...	...	...	2	3	5
1	1	1	1	...	...	1	4	...	...	...	...	...	...	...	...	7	9	16
1	1	...	5	1	6	2	7	...	...	...	...	...	...	...	...	4	19	23
...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
2	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	6	2	8
1	4	3	3	...	1	...	...	...	...	...	...	...	...	...	...	13	18	31
...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	2	...	2
1	1	1	1	...	...	1	...	...	...	...	...	...	...	...	...	5	4	9
1	2	1	3	3	7	1	11	1	1	...	...	...	...	...	...	7	24	31
...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	..	1	...	...	..	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	4	...	6	...	1	...	1	...	...	...	12	12
2	...	2	...	5	2	16	...	4	...	...	...	...	...	...	...	30	2	32
8	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	19	4	23
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	3
...	...	1	...	...	...	...	...	...	..	...	...	...	...	...	...	2	1	3
...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
20	11	13	19	13	22	21	32	5	7	...	1	...	1	...	...	103	116	219

LUNACY STATISTICS.—TABLE VII. *(continued)*—*Showing the causes of from the ages stated on*

CATERHAM

CAUSES OF DEATH.	16		17		18		19		20 to 29		30 to 3	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females
CEREBRAL OR SPINAL DISEASES—												
Apoplexy and Paralysis	...	...	...	...	...	...	...	...	...	...	1	..
Epilepsy	...	...	...	...	...	...	...	...	...	...	...	
General Paresis	...	...	...	...	...	...	...	...	...	...	4	
Maniacal Exhaustion	...	...	...	...	...	...	...	...	...	1	...	..
Melancholic Exhaustion	...	...	...	...	...	...	...	...	...	...	...	..
Exhaustion of Dementia	...	...	...	...	...	...	...	...	...	...	1	..
Exhaustion of Imbecility	...	...	...	...	...	...	...	...	...	..	1	..
THORACIC DISEASE—												
Pneumonia	...	...	...	...	...	...	...	...	...	...	1	
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	..
Phthisis	...	...	...	...	...	1	...	1	...	...	...	
Cardiac Disease	...	...	...	...	...	...	...	...	...	...	...	..
ABDOMINAL DISEASE—												
Hepatic Disease	...	...	...	...	...	...	...	...	...	...	...	..
Intestinal Obstruction	...	...	...	...	...	...	...	...	...	...	...	..
Cancer of Liver	...	...	...	...	...	...	...	...	...	...	...	..
Bright's Disease	...	...	...	...	...	...	...	...	...	...	...	..
Carcinoma of Stomach and Pancreas	...	...	...	...	...	...	...	...	...	...	...	..
Caries of Tarsus	...	...	...	...	...	...	...	...	...	...	...	..
Cancer of Mouth and Cheek	...	...	...	...	...	...	...	...	...	...	...	..
General Debility and Decay of Old Age	...	...	...	..	...	...	...	...	...	...	...	..
Totals	...	...	1	1	...	1	...	...	...	...	1	8	12

Death during the year 1895, *together with the Ages of the Decedents calculated the Orders of Admission.*

ASYLUM.

40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Age 104.		Ages Unknown.		Total.		
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
...	...	3	1	3	1	...	...	...	...	...	...	...	...	...	1	7	3	10
...	3	1	...	...	1	...	...	...	...	...	...	...	...	...	...	2	8	10
3	3	1	...	...	...	...	...	...	...	...	...	...	...	...	...	8	6	14
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	1	2	5	7	7	2	2	...	...	...	...	...	...	...	...	13	15	28
...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	2
...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	2	3	5
...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	2	2
2	3	...	3	1	...	...	...	...	...	...	...	...	...	...	...	3	11	14
...	1	...	1	6	3	4	1	...	2	...	...	...	...	...	...	10	8	18
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	1	1	2
...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1	2
...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	..	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	..	...	1	1
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	...	...	...	4	7	...	3	...	1	...	..	...	...	4	11	15
8	11	9	11	19	14	12	14	...	6	...	1	...	...	...	1	57	73	130

LUNACY STATISTICS.—TABLE VII. *(continued)—Showing the*
calculated from the ages stated

DARENTE

CAUSES OF DEATH.	16		17		18		19		20 to 29		30 to
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.
CEREBRAL OR SPINAL DISEASES—											
Apoplexy	...	...	...	...	...	...	...	...	...	...	...
Epilepsy	...	...	...	...	1	...	...	...	2	3	...
General Paralysis	...	...	...	1	...	...	...	...	1	1	1
Meningitis	...	...	...	...	...	...	...	...	1	1	...
THORACIC DISEASE—											
Phthisis	...	...	...	1	...	...	1	...	5	6	2
Chronic Bronchitis	...	...	...	...	...	...	...	...	...	...	...
Heart Disease	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	1	...	...	...	...	...	...	...	3	...
ABDOMINAL DISEASE—											
Peritonitis	...	...	...	...	...	...	...	...	1	...	...
Diarrhœa	...	...	...	...	...	...	...	...	...	1	...
Diseases of Kidney	...	...	...	...	...	...	...	...	...	...	...
Purpura	...	...	...	...	...	...	...	...	1	...	...
Cancer of Uterus of Rectum	...	...	...	...	...	...	...	...	...	...	...
Cancer of Bladder	...	...	...	...	...	...	...	...	...	...	...
Cancer of Kidney	...	...	...	...	...	1	...	...	...	...	...
Senile Gangrene	...	...	...	...	...	...	...	...	...	...	...
Totals	...	1	...	2	1	1	1	...	11	15	3

SUM

CEREBRAL OR SPINAL DISEASES—											
Apoplexy and Paralysis	...	...	...	...	...	...	...	...	...	...	1
Epilepsy	1	1	...	...	1	...	1	...	2	4	3
General Paresis	...	...	...	1	1	...	...	...	1	1	6
Exhaustion of Imbecility	...	...	...	...	...	...	...	...	...	..	1
Brain Wasting	...	...	...	...	...	...	...	...	...	...	...
Maniacal Exhaustion	...	...	...	...	...	...	...	...	...	1	...
Melancholic Exhaustion	...	...	...	...	...	...	...	...	...	...	...
Exhaustion of Dementia	...	...	..	...	...	...	...	...	...	...	1
Meningitis	...	...	...	...	...	...	...	...	1	1	...
Carried forward	...	...	1	1	...	1	2	...	1	...	4	7	12

causes of Death during the year 1895, *together with the Ages of the Decedents, on the orders of Admission.*

ASYLUM.

40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Age 104.		Ages not known.		Total.		
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
...	...	...	...	...	1	...	2	...	1	...	...	...	...	...	...	...	4	4
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	4	7
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	3	5
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	10	9	19
...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	1	...	1	1	...	...	1	1	2	...	...	...	...	...	...	2	5	7
...	1	...	1	1	2	...	...	...	1	...	...	...	...	...	...	1	10	11
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	2	...	2
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	1
1	4	1	3	3	6	1	4	1	4	...	...	...	...	...	...	23	44	67

MARY.

...	1	4	1	4	3	...	3	...	1	...	...	...	...	...	1	9	10	19
1	5	2	1	...	1	1	4	...	...	...	...	...	...	...	...	12	21	33
5	4	2	...	1	...	...	...	...	...	...	...	...	...	...	...	16	11	27
...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	3	1	4
1	1	...	5	1	6	2	7	...	...	...	...	...	...	...	...	4	19	23
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	1	2	5	7	7	2	2	...	...	...	...	...	...	...	...	13	15	28
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
9	12	12	12	14	17	5	16	...	1	...	...	...	...	...	1	60	79	139

LUNACY STATISTICS.—TABLE VII. (*continued*)—*Showing the*
calculated from the ages stated

SUMMARY

CAUSES OF DEATH.	16		17		18		19		20 to 29		30 to	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	
Brought forward	1	1	...	1	2	...	1	...	4	7	12	
THORACIC DISEASE—												
Pulmonary Tuberculosis...	...	...	...	...	1	...	...	...	5	5	3	
Phthisis	...	1	...	2	...	...	1	...	5	6	2	
Pneumonia	...	1	...	...	...	1	1	...	...	3	2	
Bronchitis	...	...	...	...	...	...	...	...	...	...	...	
Disease of the Heart	...	...	...	...	...	...	...	...	...	...	...	
Cardiac Disease	...	...	...	...	...	...	...	...	...	...	...	
Morbus Cordis and Bronchitis	...	...	...	...	...	...	...	...	...	...	...	
Morbus Cordis and Mammary Carcinoma ...	...	...	...	...	...	...	...	...	...	...	...	
ABDOMINAL DISEASE—												
Hepatic Disease	...	...	...	...	...	...	...	...	...	...	...	
Renal Disease and Cardiac Failure	...	...	...	...	...	...	...	...	...	...	...	
Peritonitis	...	...	...	...	...	...	...	...	1	...	...	
Diarrhœa	...	...	...	...	...	...	...	...	...	1	...	
Bright's Disease	...	...	...	...	...	...	...	...	...	...	...	
Cancer of Bladder	...	...	...	...	...	...	...	...	...	...	...	
Cancer of Kidney	...	...	...	...	...	1	...	...	...	...	...	
Cancer of Liver	...	...	...	...	...	...	...	...	...	...	...	
Cancer of Uterus of Rectum	...	...	...	...	...	...	...	...	...	...	...	
Diabetes Mellitus...	...	...	...	...	...	...	...	...	...	...	...	
Carcinoma of Stomach and Pancreas	...	...	...	...	...	...	...	...	...	...	...	
Diseases of Kidney	...	...	...	...	...	...	...		...	...	...	
Uterine Carcinoma	...	...	...	...	...	...	...	...	...	...	...	
Intestinal Obstruction	...	...	...	...	...	...	...	...	...	...	...	
Malignant Disease of Rectum	...	...	...	...	...	...	...	...	...	...	...	
Malignant Disease of Stomach	...	...	...	...	...	...	...	...	...	...	...	
Malignant Disease of Colon	...	..	...	...	...	...	...	...	...	...	...	
Malignant Disease of Pancreas...	...	...	...	...	...	...	...	...	...	...	...	
Gradual Exhaustion	..	...	1	...	...	...	...	...	...	...	...	
General Debility and Decay of Old Age	...	...	...	...	...	...	...	...	...	...	...	
Purpura	...	...	...	...	...	...	...	...	1	...	...	
General Tuberculosis	...	...	1	...	...	...	...	...	4	1	6	
Parovarian Cyst and Exhaustion	...	...	...	...	...	...	...	...	...	...	...	
Caries of Tarsus	...	...	...	...	...	...	...	...	...	...	...	
Epilepsy and Pulmonary Tuberculosis	...	...	...	...	...	...	...	...	...	..	1	
Epilepsy and General Tuberculosis	...	...	...	...	...	...	...	...	1	...	...	
Cardiac Disease and Gangrene	...	...	...	...	...	...	...	...	...	...	...	
Cancer of Mouth and Cheek	...	...	...	...	...	...	...	...	...	...	...	
Senile Gangrene	...	...	...	...	...	...	...	...	...	...	...	
Epilepsy and Renal Disease...	...	...	...	...	...	...	...	...	...	...	...	
Tertiary Syphilis and Cardiac Degeneration ...	...	...	...	...	...	...	...	...	...	...	...	
Grand Totals	1	3	2	3	3	2	3	...	21	23	26	

causes of Death during the year 1895, *together with the Ages of the Decedents, on the orders of Admission.*

-Continued.

0 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Age 104.		Ages not known.		Total.		
I.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tl.
9	12	12	12	14	17	5	16	...	1	...	...	...	...	...	1	60	79	139
1	4	3	3	...	1	...	...	...	...	...	...	...	...	...	...	13	18	31
3	3	1	3	1	...	...	...	...	...	...	...	...	...	...	...	13	20	33
1	2	2	2	1	2	1	1	...	1	...	...	...	..	...	...	8	17	25
...	...	1	...	1	1	...	2	...	1	...	...	...	...	...	...	2	4	6
1	3	1	4	4	7	1	12	2	3	...	...	...	...	...	...	9	29	38
...	1	...	1	6	3	4	1	...	2	...	...	...	...	...	...	10	8	18
...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	...	...	1	...	...	...	...	...	...	...	...	...	..	...	...	...	1	1
2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	2
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	2	...	2
...	...	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	3	3
...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	...	1	1
...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1	2
...	...	...	...	...	1	...	...	...	...	..	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...	...	..	...	...	1	...	...	...	...	...	...	..	...	...	...	...	1	1
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	2	...	...	1	...	...	...	...	...	...	...	...	...	1	2	3
...	...	...	..	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	...	...	...	...	..	...	...	...	...	...	...	...	...	...	...	1	...	1
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
2	...	2	...	5	2	16	...	4	...	...	...	...	...	...	...	30	2	32
...	...	...	...	...	...	4	11	...	9	...	2	..	1	...	...	4	23	27
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
8	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	19	4	23
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	3
...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	3
...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
29	26	23	33	35	42	34	50	6	17	...	2	...	1	..	1	183	233	416

LUNACY STATISTICS.—TABLE VIII.—*Showing the length of residence of*

LENGTH OF RESIDENCE.	LEAVESDEN ASYLUM.					
	Recovered.			Died.		
	M.	F.	Total.	M.	F.	Tota
Under 1 Month	...	...	...	1	1	
From 1 to 3 Months	4	...	4	2	10	1
,, 3 to 6 ,,	...	1	1	4	3	
,, 6 to 9 ,,	1	...	1	4	1	
,, 9 to 12 ,,	...	...	...	10	4	1
,, 1 to 2 Years	...	...	...	22	18	4
,, 2 to 3 ,,	...	...	...	20	16	3
,, 3 to 5 ,,	...	...	...	11	18	2
,, 5 to 7 ,,	1	...	1	8	7	1
,, 7 to 10 ,,	...	...	...	1	6	
,, 10 to 12 ,,	...	...	...	1	3	
,, 12 to 14 ,,	...	...	...	2	...	
,, 14 to 16 ,,	...	...	...	...	...	
,, 16 to 18 ,,	...	...	...	1	...	
,, 18 to 20 ,,	...	...	...	7	3	1
,, 20 and upwards	...	...	...	9	26	3
Totals	6	1	7	103	116	21

LUNACY STATISTICS.—TABLE IX.—*Showing the Ages of Patients resident in the several Asylums on the Ord*

Years ending December 31st.	Under 16		16		17		18		19		20		20 to
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.
LEAVESDEN ASYLUM.													
1886 ...	...	...	19	13	25	19	24	3	37	12	26	16	176
1887 ...	...	...	20	13	24	22	26	2	38	14	28	17	185
1888 ...	...	...	23	17	27	25	28	2	41	14	29	16	184
1889 ...	...	...	26	20	28	28	31	6	44	15	30	16	191
1890 ...	...	...	1	2	5	2	7	8	7	6	4	7	126
1891 ...	...	...	4	1	4	4	11	5	10	8	9	8	123
1892 ...	...	...	6	2	16	2	9	9	10	5	9	11	120
1893 ...	...	...	5	3	9	4	18	3	11	14	14	8	132
1894 ...	...	...	6	5	11	10	22	6	11	17	14	12	139
1895 ...	...	...	8	6	15	13	25	6	14	18	13	14	148
CATERHAM ASYLUM.													
1886 ...	...	...	...	3	5	4	8	6	12	13	20	16	174
1887 ...	...	...	2	2	1	8	7	7	10	12	24	18	178
1888 ...	...	...	2	3	2	8	8	7	12	14	25	19	170
1889 ...	...	...	3	4	4	9	9	9	13	15	26	21	165
1890 ...	1	...	...	4	2	2	3	4	5	2	8	5	148
1891 ...	...	1	1	3	3	3	4	5	6	4	7	6	145
1892 ...	...	...	5	2	4	6	5	8	8	12	9	11	147
1893 ...	...	...	1	3	6	8	7	9	10	13	12	14	140
1894 ...	...	...	4	3	10	12	10	13	16	18	14	16	142
1895 ...	...	...	10	4	15	13	14	14	15	21	17	18	150
DARENTH ASYLUM.													
1886 ...	1	1	10	6	5	5	4	11	2	1	...	...	166
1887 ...	3	1	9	18	9	24	23	18	16	17	21	20	116
1888 ...	...	...	32	28	35	23	33	23	29	14	32	22	133
1889 ...	...	...	27	8	42	32	33	29	30	25	27	14	153
1890 ...	...	...	6	3	16	8	25	21	26	17	25	20	158
1891 ...	...	...	3	6	8	6	16	9	27	22	26	19	178
1892 ...	...	...	7	9	9	18	15	11	15	14	26	24	189
1893 ...	1	...	13	16	13	13	15	22	19	14	17	17	208
1894 ...	...	1	8	8	20	17	18	13	17	21	26	17	199
1895 ...	...	1	4	16	14	18	22	20	20	12	19	22	201
SUMMARY.													
1886 ...	1	1	29	22	35	28	36	20	51	26	46	32	516
1887 ...	3	1	31	33	34	54	56	27	64	43	73	55	479
1888 ...	...	...	57	48	64	56	69	32	82	42	86	57	487
1889 ...	...	...	56	32	74	69	73	44	87	55	83	51	509
1890 ...	1	...	7	9	24	2	35	33	38	25	37	29	432
1891 ...	...	1	8	10	15	13	31	19	43	34	42	33	446
1892 ...	...	...	18	13	29	26	29	28	33	31	44	46	456
1893 ...	1	...	19	22	28	25	40	34	40	41	43	39	480
1894 ...	...	1	18	16	41	39	50	32	44	56	54	45	480
1885 ...	...	1	22	26	44	44	61	40	49	51	49	54	499

those discharged recovered, and of those who have died during the year 1895.

CATERHAM ASYLUM.						DARENTH ASYLUM.						SUMMARY.					
Recovered.			Died.			Recovered.			Died.			Recovered.			Died.		
l.	F.	Total	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total	M.	F.	Total
..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
2	...	2	...	...	...	...	...	...	...	...	...	6	...	6	2	10	12
..	...	...	1	4	5	...	...	...	...	2	2	...	1	1	5	9	14
..	...	...	3	1	4	...	...	...	...	1	1	1	...	1	7	3	10
1	...	1	4	2	6	...	...	...	...	3	3	1	...	1	14	9	23
4	1	5	11	5	16	...	...	...	...	1	1	4	1	5	33	24	57
..	...	...	8	5	13	...	...	...	2	2	4	...	...	...	30	23	53
..	...	...	6	13	19	...	...	...	4	10	14	...	...	...	21	41	62
..	...	...	3	5	8	...	...	...	7	5	12	1	...	1	18	17	35
..	..	...	3	4	7	...	...	...	2	3	5	...	...	...	6	13	19
..	...	...	1	4	5	...	...	...	1	7	8	...	...	...	3	14	17
..	...	...	2	3	5	...	...	...	3	6	9	...	...	...	7	9	16
..	..	...	3	2	5	...	...	...	...	3	3	...	...	...	3	5	8
..	...	...	2	1	3	...	...	...	3	...	3	...	...	...	6	1	7
..	...	...	5	6	11	...	...	...	1	1	2	..	...	...	13	10	23
..	...	...	5	18	23	...	...	...	...	...	...	...	...	...	14	44	58
7	1	8	57	73	130	...	..	...	23	44	67	13	2	15	183	233	416

ecember 31*st in* 1886, *and on the same day in each subsequent year, calculated from the ages stated Admission.*

to 39		40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Above 100.		Ages not known.		Totals.		
.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total.
2	237	194	259	103	216	66	158	5	6	...	...	...	...	...	...	8	10	885	1,100	1,985
6	250	198	259	102	197	76	142	...	...	...	...	...	...	...	...	7	14	900	1,092	1,992
0	247	195	260	104	202	55	131	...	...	...	...	...	...	...	...	7	13	883	1,089	1,972
0	256	198	259	94	192	56	122	...	...	...	...	...	...	...	...	5	...	883	1,082	1,965
8	195	175	240	174	212	102	178	46	114	7	32	1	5	...	...	8	16	841	1,093	1,934
8	188	180	222	166	224	116	177	47	128	8	29	1	3	...	...	5	10	872	1,082	1,954
4	197	194	212	156	207	124	207	50	120	6	23	1	2	...	...	4	12	889	1,098	1,987
5	208	187	209	166	212	113	198	49	111	4	11	1	2	...	1	5	12	899	1,096	1,995
7	206	183	211	162	212	114	187	50	104	1	5	...	2	...	1	5	12	895	1,096	1,991
9	216	178	214	167	214	109	184	37	86	...	1	...	1	...	.	4	12	897	1,094	1,991
0	184	165	190	151	216	139	181	60	70	9	17	...	...	...	...	...	...	933	1,069	2,002
6	180	170	192	155	204	142	180	58	73	8	29	2	1	...	...	...	6	943	1,070	2,013
0	182	165	189	150	190	149	184	60	74	7	28	...	..	...	...	...	...	930	1,052	1,982
4	190	151	178	149	180	142	177	63	72	9	33	1	...	...	...	...	...	919	1,046	1,965
0	220	187	201	152	191	138	183	51	89	11	36	...	1	1	...	2	7	919	1,058	1,977
5	226	196	196	160	186	142	182	54	91	14	40	...	...	...	...	...	6	937	1,064	2,001
0	230	192	198	162	184	140	185	56	88	13	37	...	...	...	...	...	...	941	1,071	2,012
2	232	190	192	163	180	138	181	55	85	14	33	...	...	...	...	...	...	938	1,064	2,002
0	226	193	195	160	175	130	180	50	90	10	28	1	...	...	...	...	...	930	1,074	2,004
5	218	190	190	157	174	122	178	47	84	10	23	1	...	...	...	...	...	933	1,072	2,005
5	67	23	72	17	45	36	56	11	42	2	20	...	2	...	...	...	...	312	484	796
7	56	20	70	23	42	36	58	11	43	3	14	...	1	...	...	...	...	317	531	848
9	65	28	67	21	39	31	68	13	33	2	18	...	1	...	...	...	...	418	547	965
6	86	37	75	25	55	43	66	19	42	2	17	...	...	...	...	...	...	484	600	1,084
2	97	39	65	26	67	42	63	22	46	4	11	...	1	...	...	...	2	441	551	992
6	105	39	81	25	62	42	64	22	49	4	14	...	1	...	...	...	2	446	580	1,026
4	108	39	77	23	62	36	59	19	38	4	12	...	3	...	...	...	2	436	582	1,018
9	102	42	69	18	71	30	51	14	37	5	11	...	3	...	...	...	3	444	575	1,019
8	113	37	76	16	70	30	58	13	40	5	9	...	2	...	...	...	2	447	599	1,046
0	110	36	71	16	74	27	56	14	37	4	8	...	2	...	...	...	1	447	598	1,045
7	488	382	521	271	477	241	395	76	118	11	37	...	2	...	...	8	10	2,130	2,653	4,783
9	486	388	521	280	443	318	312	69	116	11	43	2	1	...	...	7	14	2,160	2,693	4,853
9	494	388	516	275	431	235	383	73	107	9	46	...	1	...	..	7	13	2,231	2,688	4,919
0	432	386	512	268	427	241	365	82	114	11	50	1	...	...	...	5	...	2,286	2,728	5,014
0	512	365	506	392	470	282	424	119	249	22	79	1	7	1	...	10	25	2,201	2,702	4,903
9	519	415	503	391	472	300	423	123	268	26	83	1	4	...	...	5	18	2,255	2,726	4,981
8	535	425	487	341	461	300	451	125	256	23	72	1	5	...	...	4	14	2,266	2,751	5,017
6	542	419	470	347	463	281	430	118	133	23	55	1	5	...	1	5	15	2,281	2,735	5,016
5	545	413	482	338	457	274	425	113	234	16	42	1	4	...	1	5	14	2,272	2,769	5,041
4	544	404	475	340	462	258	418	98	207	14	32	1	3	...	...	4	13	2,277	2,764	5,041

LUNACY STATISTICS.—TABLE X.—*Showing the Ag*
calculated from the ages state

LEAVESDEN ASYLUM.

AGES.	The Admissions.						The Discharges.						The Deat	
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.				
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.
From 5 to 10 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	1	1	2	...	...	...	...	...	...	1	1	2	...	...
„ 15 to 20 „ ...	22	10	32	...	...	...	...	...	...	1	2	3	8	3
„ 20 to 30 „ ...	23	18	41	...	...	...	1	...	1	4	1	5	9	7
„ 30 to 40 „ ...	23	25	48	...	...	...	2	...	2	4	3	7	15	14
„ 40 to 50 „ ...	18	18	36	...	...	...	...	1	1	2	4	6	21	12
„ 50 to 60 „ ...	19	21	40	...	...	...	...	...	...	2	1	3	12	18
„ 60 to 70 „ ...	14	18	32	...	...	...	2	...	2	...	...	...	17	22
„ 70 to 80 „ ..	5	13	18	...	...	...	1	...	1	1	...	1	18	31
„ 80 to 90 „ ...	1	3	4	...	...	...	...	...	...	...	...	...	3	7
„ 90 and upwards...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
Ages unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	126	127	253	...	...	...	6	1	7	15	12	27	103	116

DARENTH ASYLUM.

AGES.	The Admissions.						The Discharges.						The De	
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.				
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.
From 5 to 10 years ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 15 to 20 „ ...	...	2	2	20	35	55	...	...	...	1	7	8	4	5
„ 20 to 30 „ ...	...	6	6	5	9	14	...	...	...	1	8	9	10	16
„ 30 to 40 „ ...	...	...	...	...	1	1	...	...	...	...	3	3	2	3
„ 40 to 50 „ ..	...	5	5	...	...	...	...	...	...	...	1	1	1	4
„ 50 to 60 „ ...	...	3	3	...	...	...	...	...	...	...	2	2	1	4
„ 60 to 70 „ ...	...	2	2	...	...	...	...	...	...	...	...	...	4	5
„ 70 to 80 „ ...	...	2	2	...	...	...	...	..	...	...	1	1	1	4
„ 80 to 90 „ ...	...	...	...	...	...	...	..	...	...	...	...	...	...	3
„ 90 and upwards...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ages unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	...	20	20	25	45	70	...	...	...	2	22	24	23	44

of the Admissions, Discharges, and Deaths during the year 1895, *on the orders of Admission.*

CATERHAM ASYLUM.

AGES.	The Admissions.						The Discharges.						The Deaths.		
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	...	...	...	...	...	...	...	...	...	...	...	..	...	...	..
„ 15 to 20 „ ...	19	8	27	...	...	...	...	...	...	3	...	3	1	2	3
„ 20 to 30 „ ...	22	20	42	...	...	...	2	1	3	9	...	9	...	1	1
„ 30 to 40 „ ...	7	4	11	...	...	...	2	...	2	3	1	4	9	10	19
„ 40 to 50 „ ...	7	9	16	...	...	...	2	...	2	...	2	2	8	12	20
„ 50 to 60 „ ...	9	10	19	...	...	...	1	...	1	1	1	2	9	14	23
„ 60 to 70 „ ...	12	13	25	...	...	...	...	...	...	1	...	1	20	11	31
„ 70 to 80 „ ...	9	9	18	...	...	...	...	...	...	...	...	...	10	15	25
„ 80 to 90 „ ...	...	3	3	...	...	...	...	...	...	...	...	...	...	7	7
„ 90 and upwards...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Ages unknown	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...
Totals ...	85	76	161	...	...	...	7	1	8	18	4	22	57	73	130

SUMMARY.

AGES.	The Admissions.						The Discharges.						The Deaths.		
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	1	1	2	...	...	...	...	...	...	1	1	2	...	...	...
„ 15 to 20 „ ...	41	20	61	20	35	55	...	...	...	5	9	14	13	10	23
„ 20 to 30 „ ..	45	44	89	5	9	14	3	1	4	14	9	23	19	24	43
„ 30 to 40 „ ...	30	29	59	...	1	1	4	...	4	7	7	14	26	27	53
„ 40 to 50 „ ...	25	32	57	...	...	...	2	1	3	2	7	9	30	28	58
„ 50 to 60 „ ...	28	34	62	...	...	...	1	...	1	3	4	7	22	36	58
„ 60 to 70 „ ...	26	33	59	...	...	...	2	...	2	1	...	1	41	38	79
„ 70 to 80 „ ...	14	24	38	...	...	...	1	...	1	1	1	2	29	50	79
„ 80 to 90 „ ...	1	6	7	...	...	...	...	...	...	...	...	...	3	17	20
„ 90 and upwards...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3
Ages unknown	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...
Grand Totals...	211	223	434	25	45	70	13	2	15	35	38	73	183	233	416

LUNACY STATISTICS.—TABLE XI.—*Showing the Departmen*

DEPARTMENTS.	LEAVESDEN ASYLUM.	CATERHAM ASYLUM.	DARENTH ASYLUM.	SUMMAR MALES.
MALES.				
Blocks	119	180	40	339
Centre and Hall	15	9	10	34
Coaling	10	8	1	19
Stores	2	3	2	7
Kitchen	29	13	...	42
Bakehouse	10	1	4	15
Mess Room	3	7	1	11
Tailor's Shop	9	7	18	34
Shoemaker's Shop	6	8	16	30
Upholsterer's Shop	35	20	14	69
Painter's Shop	...	2	...	2
Grounds	77	43	40	160
Laundry	35	19	...	54
Farm	...	...	24	24
Garden	...	...	9	9
Gas House	3	4	...	7
Engine House	2	2	...	4
Attending to Earth Closet and Drains	...	3	1	4
Carpenters	2	...	...	2
Total	357	329	180	866
Total number of Patients in Asylum	897	933	447	2,277

where Patients were employed on December 31st, 1895.

DEPARTMENTS.	LEAVESDEN ASYLUM.	CATERHAM ASYLUM.	DARENTH ASYLUM.	SUMMARY. Females.
Females.				
Laundry	39	32	29	100
Work Room	14	26	18	58
Helpers in Blocks	112	196	108	416
Needlework in Blocks	90	101	45	236
Centre	7	9	9	25
Mess Room	4	5	3	12
Kitchen	...	2	5	7
Medical Superintendent's Residence	...	2	1	3
Steward's Residence	..	1	1	2
Matron's Residence	1	1	1	3
Total	267	375	220	862
Total number of Patients in Asylum	1,094	1,072	598	2,764

LUNACY STATISTICS.—TABLE XII.—*Showing the Occupations previous to*

OCCUPATIONS.	LEAVESDEN ASYLUM. Numbers.					CATERHAM ASYLUM. Numbers.					DARENTH ASYLUM. Numbers.					SUMMARY. Males. Numbers.				
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unkrown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total
MALES.																				
Actor...	...	...	...	...	...	...	1	..	...	1	...	...	...	...	...	...	1	...	...	
Bakers	...	...	2	...	2	...	...	...	...	...	...	..	..	...	...	..	...	2	...	
Bootmakers	...	...	...	...	...	1	...	...	1	2	...	...	..	...	...	1	...	...	1	
Bricklayer	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	
Butcher	...	...	...	...	...	1	...	..	...	1	...	...	...	...	...	1	...	...	...	
Cabinet Maker ...	...	...	...	1	1	...	...	...	..	...	...	...	..	...	...	...	...	...	1	
Carpenters	1	...	...	...	1	...	...	...	1	1	...	...	...	...	...	1	...	...	1	
Chair Maker	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	1	...	
Clerks	3	...	...	2	5	...	...	...	1	1	...	...	...	...	...	3	...	...	3	
Coachmen...	...	...	..	1	1	...	1	...	..	1	...	...	...	...	...	...	1	..	1	
Cooks	...	...	...	2	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	
Crossing-sweeper ..	...	1	...	...	1	...	...	...	...	...	...	...	...	..	...	..	1	...	...	
Engineer	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	1	...	
Errand Boy	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	
French Polishers ..	...	2	1	...	3	...	...	...	...	...	...	..	..	...	...	...	2	1	...	
Gardener	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	
Gasfitters	...	...	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
Hawker	...	1	...	..	1	..	...	...	...	...	...	...	...	...	...	...	1	...	...	
Horsekeeper	...	...	...	...	...	1	...	...	..	1	...	...	...	...	...	1	...	...	...	
Jeweller	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	1	...	
Labourers...	20	12	4	9	45	9	2	2	3	16	...	...	...	...	...	29	14	6	12	6
Moulding Maker ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	
No occupation... ...	32	...	1	5	38	...	...	...	...	...	25	...	...	...	25	57	...	1	5	6
Occupation unknown	...	1	...	1	2	28	...	...	2	30	...	...	...	...	...	28	1	...	3	3
Ostlers	...	...	...	...	...	1	...	1	...	2	...	...	...	...	...	1	...	1	...	
Painters	...	2	...	3	5	...	2	2	1	5	...	...	...	...	...	...	4	2	4	1
Paperhanger	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	
Porters	...	...	...	1	1	3	1	1	...	5	...	...	...	..	...	3	1	1	1	
Poulterer...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	..	...	
Printers	1	1	..	1	3	...	...	...	...	...	...	...	...	...	...	1	1	...	1	
Rope Maker	...	1	...	..	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	
Sailor	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	
Schoolmaster	...	...	...	1	1	1	...	...	...	1	...	...	...	...	...	1	...	...	1	
Servants	...	...	...	...	...	2	...	...	...	2	...	...	...	...	...	2	...	...	...	
Shipwrights	...	...	...	1	1	...	1	...	...	1	...	...	...	...	...	...	1	...	1	
Shoemakers	3	1	...	1	5	...	...	...	...	...	...	...	...	...	...	3	1	...	1	
Solicitor	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	
Spectacle Repairer...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	
Tailors	...	...	...	...	...	1	2	...	...	3	...	...	...	...	...	1	2	...	...	
Waiters	1	...	...	1	2	...	1	...	...	1	...	...	...	...	...	1	1	...	1	
Watchman	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	
Wheelwright	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	
Total ...	63	23	9	31	126	48	16	9	12	85	25	...	...	...	25	136	39	18	43	23

admission, and condition as to Marriage of the Patients admitted during the year 1895.

OCCUPATIONS.	LEAVESDEN ASYLUM. Numbers.					CATERHAM ASYLUM. Numbers.					DARENTH ASYLUM. Numbers.					SUMMARY. Females. Numbers.				
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.
FEMALES.																				
Actress	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Artificial Flower Maker	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Baby Shoemaker	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Bookfolder	...	..	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Brushmaker	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Brush Drawer	1	..	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Charwomen	3	2	9	2	16	1	...	6	3	10	...	...	1	...	1	4	2	16	5	27
Cooks	1	...	...	...	1	..	...	...	...	...	1	...	...	...	1	2	...	...	...	2
Dressmakers	1	...	1	...	2	...	...	...	1	1	...	...	...	...	...	1	...	1	1	3
Florist	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	..	1	1
Governess	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Hawkers	1	...	...	...	1	...	...	1	...	1	...	...	...	...	...	1	..	1	...	2
Housekeepers	...	4	2	...	6	1	..	...	...	1	...	...	...	...	...	1	4	2	...	7
Housewife	...	...	...	...	...	1	..	...	...	1	...	...	...	...	...	1	...	...	...	1
Ironer	...	...	...	..	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	1
Laundresses	...	...	...	...	...	...	...	...	1	1	...	...	1	...	1	...	...	1	1	2
Machinist	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Mangler	1	..	...	...	1	...	..	...	..	...	...	...	...	...	...	1	...	...	...	1
Mantle-maker	...	...	...	...	...	...	...	1	..	1	...	...	...	...	...	...	...	1	...	1
Needlewomen	...	..	4	4	8	...	...	4	1	5	1	...	...	..	1	1	...	8	5	14
No occupation	19	10	23	11	63	...	...	...	...	...	50	5	3	...	58	69	15	26	11	121
Nurse	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...	...	...	1
Occupation unknown	...	...	1	...	1	15	4	9	10	38	...	...	...	..	...	15	4	10	10	39
Saleswoman	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...	...	...	1
Servants	11	1	1	5	18	9	...	...	2	11	3	...	...	...	3	23	1	1	7	32
Shoe-finisher	...	1	.	...	1	...	..	...	...	...	...	...	...	...	...	...	1	...	...	1
Tailoress	...	...	...	...	...	...	..	...	1	1	...	...	...	...	...	...	...	...	1	1
Teacher of Music	1	...	...	...	1	...	..	...	..	...	...	...	...	...	...	1	...	...	...	1
Waitress	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...	...	...	1
Total	42	18	42	25	127	30	5	21	20	76	55	5	5	...	65	127	28	68	45	268

No. 15.

REPORT OF Dr. F. H. WALMSLEY, MEDICAL SUPERINTENDENT OF DARENTH SCHOOLS AND PAVILIONS.

(For Statistics, see pp. 214 to 222.)

Darenth Schools and Pavilions,
Near Dartford, Kent,
January, 1896.

To the Committee of Management.

Madam and Gentlemen,

I have the honour to present to you the following Report upon the condition and progress of the institution during the year 1895.

On January 1st, 1895, there were in the schools and pavilions 963 patients, viz., 595 males and 368 females.

	Males.	Females.	Total.
Admitted during the year...	97	57	154
Discharged	50	53	103
Died	12	12	24
Remaining December 31st, 1895	630	360	990
Highest number resident on any one day	630	360	990
Lowest ,, ,, ,, ...	589	358	947
Average during year	607·7	365·4	973·1

It cannot be too often repeated that the main factors in the production of insanity are hereditary transmission and alcoholic intemperance of parents. Including idiocy and imbecility, 75 per cent. of occurring cases of insanity are due to these two causes, and therefore ought not to exist at all. Happily, this fact is persistently dawning upon the public mind.

Asylum physicians are frequently asked, "Are you not in your work aiding in the survival and propagation of 'incapables' and 'degenerates'? Is not the cardinal feature, viz., prevention, in danger of being subordinated to the problem of how to relieve existing conditions? Are not your efforts palliative rather than preventive?"

Truly, until preventive measures be enforced either by the Legislature or by an enlightened public opinion, it is vain to hope for any diminution of insanity or of the burden which its existence imposes upon the community.

Medical science points out with absolute and demonstrated certainty the causes of insanity; it remains to clear the ground for the universal application of that science in daily life.

A closer acquaintance with physiological and psychological laws will tend in the direction of prevention, familiarising the student with the normal activities of the physical and mental forces, and teaching how best to develop and preserve them; this will ensure more perfect beings, and will invite a progeny more free from the neuroses and congenital deficiencies. Children of inferior parents, reared in inferior ways, will tend to be replaced by children of better parents, reared in better ways.

Not only do the insane crowd our institutions, but there remains unsequestered a large class of "deficients" and "incapables," the products of ill-fed, ill-educated, neurotic families—degenerates—who are yet not quite imbecile;—dangerous to society by reason of their ability to entail, by heredity, intensified deficiencies in their progeny.

The difficulties encountered in dealing with this class are familiar to those engaged in the administration of the poor law.

They may become self-supporting with proper guardianship, but not self-controlling and self-directing. Unable to cope successfully with the realities of life, they are left behind in the race, and eventually drift into vice and depravity. More especially is this applicable to the unguarded female "deficient," who returns again and again to the lying-in wards of our workhouses to become the mother of idiots and imbeciles.

Here, clearly, is a case for segregation: all are obviously unfit to perpetuate themselves, and, in the interest of society, should be prevented from doing so.

The solution of the problem will doubtless be found in the establishment at no distant date of industrial colonies where these "incapables" and "degenerates" may be compulsorily detained.

The Admissions.

It is satisfactory to be able to state that, in physical condition and capacity for mental development, the patients admitted during the year compare favourably with those admitted in previous years.

It is matter for regret that this institution—specially designed and furnished with appliances for the education and training in industrial pursuits of those who, by reason of their infirmities or defects, are debarred from the ordinary schools—should be in danger of being converted into a huge custodial institution for helpless, crippled, and incurable adult or semi-adult patients.

As time passes, this helpless adult population increases, due to the very obvious fact that, as the years go by, the children add to their age, and for want of accommodation elsewhere accumulate here.

It is to be hoped that, with the completion of the arrangements which the Managers have in view for providing further accommodation for adult imbeciles, this congestion will be relieved.

The Deaths.

The mortality for the year has been low—the lowest recorded in the history of the institution, viz., $2\frac{1}{2}$ per cent. on the average number resident. This is remarkable,

having regard to the severity of the early months of the year, coupled with the fact that in the majority of the patients the vital processes are reduced to the lowest ebb. During the cold winter of 1894–5, the frost was more severe than any since 1814—a period of 80 years—the mean temperature being from 14 to 20 degrees below the average.

Experience demonstrated that by maintaining large fires in the various blocks it was possible to keep up the temperature. This, however, could only be done by a continuous and large consumption of coal. Owing to the elevated, unsheltered position of the pavilion blocks, exposed as they are to rapidly-circulating currents of cold air, heat is no sooner generated than it is radiated and lost: thus the heating of these blocks must always remain a costly process.

The Schools.

The schools have been maintained in a high state of efficiency throughout the year.

Much encouraging and good work has been accomplished. The improvable cases derive evident benefit from the special methods of training. It will be observed that the percentage of those discharged recovered is greater than in any previous year.

The principle underlying the system of education is to secure the best conditions for mental effort by promoting the best physical conditions, and embraces such methods of instruction as tend to uniform and harmonious development of the whole body of the individual child, with due regard to any accidental or abnormal characteristics that may differentiate him from the normal child.

Amusements.

Due attention is given to the amusements of the patients—regular weekly dances, concerts, theatricals, the summer fête, the Christmas festivities, visits to the local flower shows, magic lantern entertainments. Some 250 of the more intelligent patients are taken out for walks beyond the asylum grounds, and 400 are taken daily beyond the airing courts. During the summer the majority of the children spend several hours daily in the extensive recreation ground attached to the schools; they romp about freely or engage in the various outdoor sports—cricket, football, &c.—and thus obtain abundant physical exercise.

The Commissioners in Lunacy, after their annual inspection, recorded as follows:—

"We found the different blocks and pavilions very clean, and generally—as also the beds and bedding—in very good order. The state of the dress and personal cleanliness of the patients—due allowance being made for the wretched bodily condition and uncleanly habits of so many—testified to care on the part of the attendants and zealous discharge of very unpleasant duties."

The Staff.

The late Matron—Miss Griffiths—after nearly three years of service, faithfully and cheerfully rendered, resigned to take up the position of Matron at the St. George's Union Infirmary. The best wishes of all accompany her to her new field of labour.

Miss Penney, late Assistant Matron at the Dulwich Infirmary, St. Saviour's Union, was on December 3rd last appointed to the office of Matron.

The sympathetic ministrations of the Chaplain are valued alike by patients and staff.

Thanks are due to the Roman Catholic Instructor, who personally organises concerts and lantern entertainments for the children.

The professional skill and devotion to duty displayed by Dr. Sawell constitute him a valuable member of the medical staff.

Generally the subordinate staff has shown an appreciation of the responsibility connected with the right performance of their duties.

I beg leave, with respect, to tender to the Committee of Management the expression of my gratitude for counsel and consideration extended to me.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

FRANCIS H. WALMSLEY, M.D.,
Medical Superintendent.

IMBECILITY STATISTICS—DARENTH SCHOOLS AND PAVILIONS.

TABLE I.—*Showing the Admissions, Re-admissions, Discharges, and Deaths during the Year* 1895.

	Males.	Females.	Total.	Males.	Females.	Total.
In the Asylum, January 1st, 1895				595	368	963
	Males.	Females.	Total.			
Admitted for the first time during the year (direct from the several Parishes & Unions)	95	55	150			
Re-admitted during the year	1	1	2			
Admitted from other Asylums of Board ...	1	1	2			
				97	57	154
Total under care during the year				692	425	1,117
	Males.	Females.	Total.			
Discharged—						
Recovered	10	3	13			
Improved	10	2	12			
Not improved	5	3	8			
To other Asylums of Board	5	45	70			
Died...	12	12	24			
Total discharged (for various reasons) and died during the year ...				62	65	127
Remaining in the Asylum, December 31st, 1895				630	360	990
Average numbers resident during the year				607·7	365·4	973·1
Highest number resident on any one day				630	360	990
Lowest number resident on any one day				589	358	947

TABLE II.—*Showing the Admissions, Re-admissions, and Discharges from the opening of the Asylum to the present date, December* 31*st*, 1895.

	Males.	Females.	Total.	Males.	Females.	Total.
Admitted during the period of 21 years (direct from the several Parishes & Unions)	1,546	1,020	2,566			
Re-admissions	53	41	94			
Admitted from other Asylums of Board ..	230	211	441			
Total of Cases Admitted				1,829	1,272	3,101
	Males.	Females.	Total.			
Discharged—						
Recovered	44	43	87			
Improved	123	94	217			
Not improved	151	75	226			
To other Asylums of Board	477	398	875			
Died	404	302	706			
Total discharged and died during the 21 years				1,199	912	2,111
Remaining December 31st, 1895				630	360	990
Average numbers resident during the 21 years				366·7	243	609·7

TABLE III.—*Showing the Admissions, Discharges, and Deaths, with the Mean Annual Mortality and proportion of Recoveries per cent. of the Admissions for the year* 1885, *and for each subsequent year.*

Year.	Admitted.									Discharged.												Died.			Remaining December 31st in each year.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers Resident.		
	From Parishes and Unions.			From other Asylums of Board.			Total.			Recovered.			Improved.			Not Improved.			To other Asylums of Board.																	
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
1885 ...	49	28	77	...	...	...	49	28	77	3	1	4	7	5	12	2	1	3	22	32	54	28	10	38	357	233	590	356·6	248·8	605·4	6·12	3·57	5·19	7·85	4·01	6·27
1886 ..	66	34	100	...	...	...	66	34	100	1	2	3	3	5	8	2	..	2	20	8	28	15	7	22	381	246	627	358·0	243·2	601·2	1·51	5·88	3·00	4·19	2·87	3·65
1887 ...	84	62	146	...	...	...	84	62	146	...	8	8	11	5	16	3	...	3	12	69	81	17	14	31	422	212	634	404·1	245·3	649·4	...	12·90	5·47	4·20	5·70	4·70
1888 ..	74	40	114	21	40	61	95	80	175	2	...	2	7	5	12	14	8	22	124	46	170	29	12	41	341	221	562	417·3	217·6	635·4	2·10	...	1·14	6·94	5·51	6·45
1889 ...	94	62	156	...	...	...	94	62	156	1	1	2	3	4	7	5	3	8	26	9	35	9	10	19	391	256	647	365·5	249·3	614·8	1·06	1·62	1·30	2·46	4·04	3·07
1890 ...	96	62	158	52	42	94	148	104	252	2	1	3	8	3	11	13	9	22	...	...	...	12	10	22	504	337	841	466·4	311·6	777·8	1·35	0·95	1·15	2·57	3·24	2·82
1891 ...	108	64	172	...	...	...	108	64	172	...	1	1	10	6	16	11	7	18	...	...	...	17	24	41	574	363	937	534·0	351·0	885·0	...	0·01	0·01	3·18	6·83	4·63
1892 ...	77	58	135	..	...	...	77	58	135	7	3	10	3	...	3	5	3	8	11	31	42	21	15	36	604	369	973	590·4	369·4	959·8	9·99	5·17	7·40	3·55	4·06	3·75
1893 ...	88	72	160	...	...	...	88	72	160	4	7	11	6	11	17	11	6	17	45	44	89	40	23	63	590	357	947	592·5	354·9	946·1	4·54	9·72	6·87	6·70	6·40	6·60
1894 ...	75	51	126	2	...	2	77	51	128	1	3	4	1	2	3	7	2	9	38	13	51	25	20	45	595	368	963	590·9	356·2	947·1	1·20	6·00	3·12	4·20	5·75	4·70
1895 ...	96	56	152	1	1	2	97	57	154	10	3	13	10	2	12	5	3	8	25	45	70	12	12	24	630	360	990	607·7	365·4	973·1	10·52	5·26	8·44	1·90	3·33	2·42

TABLE IV.—*Showing the probable causes of the Mental Condition of the Patients admitted during the Year* 1895.

CAUSES.	Males.	Females.	Total.
I. CONGENITAL—			
Fright of mother during pregnancy	10	5	15
Anxiety and worry of mother during pregnancy	4	2	6
Fright of mother during pregnancy, and difficult labour ...	4	5	9
Fright and anxiety of mother during pregnancy, and tedious labour	3	4	7
Tedious or difficult labour	3	2	5
Injury to mother during pregnancy	2	1	3
Excessive intemperance of parents	14	18	32
Unknown	1	–	1
Premature labour	1	–	1
II. ACQUIRED—			
Epilepsy	15	3	18
Convulsions	3	2	5
Measles	2	1	3
Severe injury to patient	6	5	11
Fright of patient	2	2	4
Illness of patient	5	2	7
Unknown	12	5	17
Not ascertained	10	–	10
Totals	97	57	154

In 32 cases there was a history of Intemperance in the parents.
In 31 cases there was a history of Insanity in the parents or near relatives.
In 10 cases there was a history of Imbecility in the parents.
In 36 cases there was a history of Consumption in the family.
In 11 cases there was a history of Epilepsy in the parents.
In 6 cases the parents were first cousins.
In 3 cases the parents were second cousins.

TABLE V.—*Showing the History of the Annual Admissions since the opening of the Asylum, with the Discharges and Deaths, and the numbers of each year's admissions remaining on December 31st, 1895.*

Year.	Admitted. From Parishes and Unions. New Cases. Males.	New Cases. Females.	Relapsed cases. Males.	Relapsed cases. Females.	From other Asylums of the Board. Males.	From other Asylums of the Board. Females.	Total.	Of each Year's Admissions, Discharged, and Died, in 1895. Recovered. Males.	Recovered. Females.	Recovered. Total.	Improved. Males.	Improved. Females.	Improved. Total.	Not Improved. Males.	Not Improved. Females.	Not Improved. Total.	To other Asylums of Board. Males.	To other Asylums of Board. Females.	To other Asylums of Board. Total.	Died. Males.	Died. Females.	Died. Total.	Total Discharged and Died of each Year's Admissions to December 31st, 1895. Recovered. Males.	Recovered. Females.	Recovered. Total.	Improved. Males.	Improved. Females.	Improved. Total.	Not Improved. Males.	Not Improved. Females.	Not Improved. Total.	To other Asylums of Board. Males.	To other Asylums of Board. Females.	To other Asylums of Board. Total.	Died. Males.	Died. Females.	Died. Total.	Remaining of each Year's Admissions, December 31st 1895. Males.	Females.	Total.
1875 ...	47	34	11	6	155	124	377	...	...	...	...	...	...	...	...	...	...	..	..	...	...	...	...	1	1	7	19	26	41	17	58	105	84	189	60	44	104	...	...	...
1876 ...	69	36	7	4	...	4	120	...	...	...	...	...	...	...	...	...	...	..	..	...	...	...	5	2	7	11	...	11	4	10	14	38	85	123	21	15	36	...	...	...
1877 ...	32	23	.	1	...	...	56	...	...	...	...	...	...	1	...	1	1	...	1	1	...	1	3	2	5	4	4	8	3	1	4	16	9	25	12	9	21	...	...	...
1878 ...	50	16	2	4	1	..	73	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	3	3	9	2	11	3	2	5	29	15	44	12	3	15	...	...	...
1879 ...	89	64	1	1	...	...	155	...	...	...	...	...	...	...	...	...	...	1	1	...	1	1	1	...	1	7	6	13	7	2	9	43	36	79	30	27	57	...	...	...
1880 ...	77	65	...	1	..	..	143	...	...	...	...	...	...	...	...	...	3	3	6	1	...	1	4	5	9	4	9	13	5	...	5	34	36	70	32	23	55	2	2	4
1881 ...	66	48	1	1	...	...	116	...	...	...	...	...	...	...	...	...	2	1	3	...	...	...	5	1	6	9	7	16	4	1	5	28	18	46	26	19	45	1	...	1
1882 ...	88	56	...	1	..	...	145	1	...	1	...	...	...	...	...	...	3	1	4	...	...	...	4	8	12	13	10	23	14	5	19	37	15	52	36	16	52	2	1	3
1883 ...	87	81	1	2	...	...	171	...	...	...	...	...	...	...	...	...	2	4	6	...	...	...	2	4	6	8	1	9	1	4	5	37	19	56	25	25	50	14	1	15
1884 ...	58	26	4	2	...	...	90	...	...	...	...	...	...	...	...	...	1	2	3	1	...	1	1	1	2	5	2	7	...	...	...	15	5	20	16	10	26	12	1	13
1885 ...	46	27	3	1	...	...	77	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	1	1	9	5	14	10	2	12	20	4	24	14	11	25	26	2	28
1886 ...	62	32	4	2	...	..	100	...	...	...	...	...	...	...	...	...	4	5	9	...	...	...	...	...	...	4	2	6	8	6	14	16	13	29	20	15	35	21	12	33
1887 ...	83	61	1	1	...	...	146	...	...	...	1	...	1	...	...	...	...	5	5	1	2	3	1	..	1	3	1	4	13	6	19	13	15	28	25	17	42	28	21	49
1888 ...	72	38	2	2	21	40	175	1	...	1	1	...	1	...	...	...	1	1	2	2	1	3	2	1	3	5	5	10	11	8	19	9	10	19	16	11	27	53	27	80
1889 ...	92	59	2	3	..	...	156	3	...	3	3	...	3	...	...	...	1	4	5	...	...	...	6	2	8	8	2	10	6	...	6	14	4	18	6	6	12	42	26	68
1890 ...	93	58	3	4	52	42	252	3	...	3	...	...	...	...	...	...	...	4	4	...	1	1	5	...	5	7	6	13	8	3	11	4	8	12	12	11	23	73	61	134
1891 ...	104	64	4	...	...	...	172	...	1	1	...	...	...	...	...	...	2	6	8	3	...	3	1	2	3	2	6	8	7	...	7	9	13	22	23	18	41	61	27	88
1892 ..	75	57	2	1	...	...	135	...	...	...	2	1	3	...	...	...	2	3	5	...	3	3	1	7	8	5	1	6	2	4	6	3	5	8	9	12	21	54	26	80
1893 ...	86	69	2	3	...	...	160	1	...	1	1	...	1	1	2	3	1	3	4	1	1	2	1	1	2	1	4	5	3	3	6	5	3	8	5	6	11	77	53	130
1894 ...	75	51	2	..	...	...	128	1	...	1	2	...	2	1	...	1	...	1	1	1	2	3	1	...	1	2	1	3	1	...	1	1	1	2	3	3	6	69	48	117
1895 ...	95	56	1	1	1	1	154	...	2	2	...	1	1	...	1	1	1	...	1	1	1	2	...	2	2	...	1	1	...	1	1	1	...	1	1	1	2	95	52	147
Totals ...	1546	1020	53	41	230	211	3101	10	3	13	10	2	12	5	3	8	25	45	70	12	12	24	44	43	87	123	94	217	151	75	226	477	398	875	494	302	706	630	360	990

TABLE VI.—*Showing the Causes of Death during the year* 1895, *together with the Ages of the Decedents, calculated from the Ages stated on the Orders of Admission.*

CAUSES OF DEATH.	Under 16		16.		17.		18.		20 to 29.		30 to 39.		TOTAL.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
CEREBRAL OR SPINAL DISEASES—															
Meningitis	...	1	...	...	..	...	...	...	..	...	...	...	...	1	1
Epilepsy	2	6	...	...	1	1	1	...	3	2	...	...	7	9	16
THORACIC DISEASE—															
Tuberculosis ...	...	...	...	...	...	...	...	...	1	...	...	...	1	...	1
Pneumonia	2	...	...	...	...	...	...	...	...	...	...	...	2	...	2
Bronchitis	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
Cardiac Disease ...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
ABDOMINAL DISEASE—															
Typhlitis	1	...	...	...	...	..	...	...	...	...	...	...	1	...	1
Volvulus	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Totals	6	8	...	1	1	1	1	...	4	2	...	...	12	12	24

TABLE VII.—*Showing the length of Residence in those Discharged Recovered, and in those who have Died during the year* 1895.

LENGTH OF RESIDENCE.	RECOVERED.			DIED.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under 1 Month... ...	...	...	...	...	1	1
From 1 to 3 Months ...	...	1	1	2	1	3
,, 3 ,, 6 ,, ..	...	...	...	1	1	2
,, 6 ,, 9 ,, ...	...	1	1	...	...	...
,, 9 ,, 12 ,, ...	...	...	...	...	1	1
,, 1 ,, 2 Years ...	1	...	1	...	...	...
,, 2 ,, 3 ,, ...	1	...	1	...	2	2
,, 3 ,, 5 ,, ...	1	1	2	3	3	6
,, 5 ,, 7 ,, ...	5	...	5	...	...	...
,, 7 ,, 10 ,, ...	1	...	1	3	2	5
,, 10 ,, 12 ,, ...	...	...	...	1	...	1
,, 12 ,, 14 ,, ...	1	...	1	...	...	.
,, 14 ,, 16 ,, ..	...	...	...	1	...	1
,, 16 ,, 18 ,, ...	...	...	...	1	1	2
,, 18 ,, 20 ,, ...	...	...	...	...	...	...
Totals ...	10	3	13	12	12	24

TABLE VIII.—*Showing the Ages of Patients resident in the Asylum on December 31st, 1893. 1894, and 1895; calculated from the Ages stated on the Orders of Admission.*

Years ending December 31st.	Under 16.		16.		17.		18.		19.		20.		20 to 30.		30 to 40.		40 to 50.		50 to 60.		60 to 70.		70 to 80.		Totals.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
1893	365	217	47	39	46	17	27	13	35	7	30	20	40	25	...	15	...	2	...	1	...	1	...	...	590	357	947
1894	403	214	25	39	42	21	26	12	20	9	28	13	51	40	...	17	...	1	...	1	...	1	...	...	595	368	963
1895	415	238	27	24	23	17	47	16	31	14	28	12	56	18	3	17	...	2	...	...	...	...	...	...	630	360	990

TABLE IX.—*Showing the Ages of the Admissions, Discharges, and Deaths during the Year* 1895, *calculated from the Ages stated on the Orders of Admission.*

AGES.	THE ADMISSIONS.						THE DISCHARGES.						THE DEATHS.		
	From Parishes and Unions.			From other Asylums of the Board.			Recovered.			Removed, Improved, or Otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years	48	23	71	...	...	...	...	...	...	1	1	2	2	3	5
,, 10 ,, 15 ,,	48	33	81	1	1	2	2	1	3	6	2	8	3	4	7
,, 15 ,, 20 ,,	...	...	...	...	...	...	7	2	9	20	35	55	3	3	6
,, 20 ,, 30 ,,	...	...	...	...	...	...	1	...	1	13	11	24	4	2	6
,, 30 ,, 40 ,,	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...
,, 40 ,, 50 ,,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
,, 50 ,, 60 ,,	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total ...	96	56	152	1	1	2	10	3	13	40	50	90	12	12	24

TABLE X.—*Showing the Departments where Patients were employed on December* 31*st*, 1895.

MALES.		FEMALES.	
Departments.	Numbers Employed.	Departments.	Numbers Employed.
Blocks (B, C, D, E, F, G)	23	Laundry	12
Tailors' Shop	35	Work Room	4
Shoemakers' Shop	27	Helpers in Blocks—	
Mat Making	2	(A, I, K, L, M, N, O, J)	35
Dispensary	1	Needlework in Blocks	5
Pavilions (A, B, C, D, E, H) ...	40	Centre	2
Food Cart	1	Kitchen	2
Gardening	2	Corridor	1
Stores	2	Pavilions (J, K)	8
Total No. of Males employed ...	131	Total No. of Females employed	69
Total No. of Patients in Asylum	630	Total No. of Patients in Asylum	360

TABLE XI.—*Showing the occupations of Patients in the Tailors' and Shoemakers' Shops.*

OCCUPATIONS OF BOYS.	NUMBERS EMPLOYED IN EACH GRADE, WITH THE QUALITY OF THE WORK.			
	Indifferent.	Fair.	Good.	Excellent.
I. TAILORS—				
1. Preliminary Work	3	2	5	...
2. Sewing Seams and Linings	1	3	4	...
3. Felling	1	1	2	2
4. Buttonholing	...	...	2	...
5. Repairing	...	1	3	1
6. Machining...	...	3	1	...
II. SHOEMAKERS—				
1. Preliminary Work	...	2	2	...
2. Closing Uppers	...	1	3	2
3. Repairing	1	4	3	2
4. Finishing	...	1	1	2
5. Riveting	...	...	1	2

35 Tailors and 27 Shoemakers.

TABLE XII.—*Showing the progress of Children in the School during the year* 1895.

		CLASSES.							Total.
		1	2	3	4	5	6	7	
	SPEECH—								
1	Make no attempt	...	...	...	...	2	...	...	2
2	Make a few articulate sounds	...	...	...	4	29	...	10	43
3	Speak indistinctly	4	8	14	28	...	25	30	109
4	Speak fairly	24	29	20	16	...	30	40	159
5	Speak well	12	7	5	2	...	10	10	46
	READING—								
1	Know neither words or letters	...	...	...	10	10	2	30	52
2	Know a few letters	...	...	...	30	12	12	40	94
3	Know a few words at sight	...	...	...	4	...	...	...	4
4	Know all the letters	...	...	17	6	9	30	20	82
5	Know easy words by spelling	...	6	13	...	...	16	...	35
6	Read fairly	26	20	9	...	...	5	...	60
7	Read well	14	18	...	...	2	...	...	34
	SPELLING—								
1	Spell words of two and three letters	...	...	29	30	4	35	20	118
2	Spell words of one syllable	...	21	10	10	10	20	...	71
3	Spell words of one and some of two syllables	6	16	...	2	...	10	...	38
4	All words of one, two, and some of three syllables	30	7	...	..	...	...	...	37
5	Words of one, two, and three syllables	4	...	...	...	...	...	...	4
	WRITING—								
1	Nothing but scribble	...	...	...	20	14	12	40	86
2	Form strokes on a slate	...	...	2	6	...	...	...	8
3	Form letters on a slate	...	2	19	20	12	40	50	143
4	Form letters in copy-books	...	...	6	4	...	...	...	10
5	Write easy words in copy-books	10	20	...	...	...	...	...	30
6	Write fairly	20	17	23	...	5	13	...	78
7	Write well, dictation, transcription, &c.	10	7	...	...	...	...	...	17
	ARITHMETIC—								
1	Recognise neither objects nor number	...	...	...	4	10	8	50	72
2	Objects and numbers to 5	...	...	...	12	10	30	40	92
3	Objects and numbers to 20	...	3	20	30	...	24	...	77
4	Work addition sums	...	22	19	4	4	3	...	52
5	Work easy sums in simple rules	28	19	...	...	...	...	...	47
6	Simple and compound money sums	5	4	...	...	...	...	...	9
7	Beyond the above	7	...	...	...	...	...	...	7
	COLOUR LESSON—								
1	Recognise no colour	...	...	...	10	10	4	30	54
2	Know one or two simple colours	...	3	3	30	7	40	50	133
3	All simple and compound shades	17	25	16	10	10	21	10	109
4	Know and match all shades	20	19	20	...	...	...	...	59
5	Simple, compound, and match them all	3	1	...	...	2	...	...	6

TABLE XII. (*continued*)—*Showing the progress of Children in the School during the year* 1895.

		CLASSES.							Total.
		1	2	3	4	5	6	7	
	KINDERGARTEN DRAWING—								
1	No knowledge of drawing at all...	...	1	...	20	20	20	50	111
2	Can draw straight lines	...	...	10	10	4	9	...	33
3	Can draw outlines...	13	22	21	14	4	30	40	144
4	Can draw objects	20	25	8	6	3	6	...	68
5	Beyond the above...	7	...	...	...	...	...	...	7
	CLOCK LESSON—								
1	Know neither hours nor minutes	...	2	6	30	...	30	...	68
2	Know some of the hours	..	16	19	10	...	29	...	74
3	Know hours and quarters	1	10	5	9	...	6	...	31
4	Know the above and 5 minutes	10	16	9	1	...	...	...	36
5	Can tell time to a minute	29	4	...	...	...	...	...	33
	SHOP LESSON—								
1	Know neither coins nor weights...	...	3	10	17	...	20	...	50
2	Know a few coins...	...	21	20	29	...	40	...	110
3	Know a few coins and weights	20	9	9	4	...	5	...	47
4	Know all coins and some weights	10	8	...	...	...	...	...	18
5	All coins and weights	6	4	...	...	...	...	...	10
6	Coins, weights, and can calculate	4	3	...	...	...	...	...	7
	COUNTING AND TABLES—								
1	Cannot count at all	...	...	...	...	20	...	...	20
2	Count to 10	...	...	4	30	6	30	40	110
3	Count to 50, and repeat to 3 × 12	...	8	14	10	4	29	44	109
4	Count to 100, to 6 × 12 and questions	8	22	19	9	...	6	6	70
5	Count to 1,000, to 12 × 12 and all questions... ...	20	6	2	1	...	...	...	29
6	The above, and money tables	12	4	...	...	...	...	...	16

PART V.

REPORT OF THE AMBULANCE COMMITTEE FOR THE YEAR 1895.

February 10th, 1896.

To the Managers of the
Metropolitan Asylum District.

GENERALLY.

Increased Prevalence of Infectious Disease, and Insufficient Hospital Accommodation.

In submitting our Report for the year 1895, we propose in the first place to refer to the prevalence of scarlet fever and diphtheria as compared with the preceding year. Of the former disease 19,757 cases were notified, as against 18,440 in 1894, showing an increase of 7 per cent.; and of the latter disease 10,772, as against 10,655 in the previous year, or an increase of 1 per cent. These increases are too slight to account for the fact that the Managers' hospitals proved insufficient for the accommodation of patients. The cause is, we think, to be found primarily in the increased and increasing desire of the inhabitants of London to obtain isolation and hospital treatment for persons suffering from infectious diseases. Whereas it is estimated that a few years ago only about 11 per cent. of the total number of sufferers sought admission into the Managers' hospitals, the rate of admissions during some weeks in the first half of the past year rose to 70 per cent.

Limitation of Admission to Hospital to Urgent Cases.

In the early summer, it became apparent that the accommodation in the fever hospitals would fail to meet all requirements, and on July 8th we considered it right to address a letter to all the sanitary authorities and boards of guardians in the Metropolis, in which we warned them that the accommodation for patients suffering from scarlet fever and diphtheria was nearly exhausted, and that new cases could only be admitted as vacancies were occasioned by discharges and deaths; and we expressed the hope that instructions might be given by those authorities to their officers to arrange for preference being given in removal to those patients who, as a consequence of their surroundings and conditions of life, were most in need of hospital treatment. We also asked them to instruct all officers who made applications for the removal of patients to ascertain whether their requests were complied with or not,

and, when they had not been complied with, to repeat their applications day by day so long as their patients continued in a fit condition for removal and until the removal was effected, and to accompany each application with a statement of the circumstances which rendered removal urgent.

The effect of this warning notice was immediate, inasmuch as only the most urgent cases were sent in, and thus the last 200 beds were utilised to the best advantage. Had this notice not been issued, it is possible that many of the beds would have been occupied by patients for whom other provision might have been made.

Gore Farm Hospital Opened.

Previous to the issue of this letter, the Managers had, on July 6th, decided to make use of their smallpox hospital at Gore Farm for the reception of cases convalescing from scarlet fever, and on July 25th and 26th 60 patients were transferred thereto. Then occurred an instance of the risk involved in devoting to other purposes the accommodation which, after much consideration, the Managers had previously determined as the minimum that should be at their disposal for smallpox.

Outbreak of Smallpox.

The Board arrived at their decision to open Gore Farm Hospital for scarlet fever convalescents in view of the fact that 34 smallpox patients only were under treatment in the hospital ships, and that only 29 cases had been admitted in the previous two weeks. The order, however, had hardly been given, when a sudden outbreak of smallpox occurred amongst male vagrants in the Metropolis. Fifty were admitted from common lodging-houses, philanthropic shelters, workhouses, and infirmaries during the week ended July 28th. The following table shows the places from which these patients were admitted:—

Salvation Army Shelters.	Church Army Shelters.	Infirmaries and Workhouses.	Lodging-houses.
24	3	12	11

By July 30th the number of smallpox cases under treatment at the ships had risen to 215; nearly all the beds which could be used for male patients were filled; the ship devoted to female patients was also partly occupied; and it became obvious that the Gore Farm Hospital must be promptly emptied of fever and prepared for smallpox.

Gore Farm Hospital Closed Against Fever and Opened for Smallpox Cases.

The 60 patients already admitted were, therefore, brought back to London, and distributed amongst the several fever hospitals, where, fortunately, there were yet vacant beds, and on July 31st 36 smallpox patients were transferred from the ships into certain wards of the Gore Farm Hospital which had not been infected with fever.

What would have been the position of the Managers if they had not been able to receive smallpox cases at that hospital? In spite of all the lack of accommodation during the past year, the Metropolis, as regards the proportion of fever cases isolated in hospital to those attacked, was infinitely better off than in any previous period of its history; for on the whole year no less than 58·23 per cent. of the scarlet cases notified were admitted into hospital. What might not have happened if even a small percentage of the smallpox cases had been left to spread this disease in the resorts crowded by the homeless and wandering poor?

Proposal to Re-open Gore Farm Hospital for Fever Cases Negatived.

It was the contemplation of such a possible situation, together with the knowledge that the season of the year had arrived when scarlet fever cases usually diminished and smallpox had sometimes increased, which mainly induced the Managers to negative, on October 26th, a proposal to re-open Gore Farm Hospital for scarlet fever convalescents.

Fever Prevalence Still Maintained—Gore Farm Hospital Re-opened for Fever Cases.

Contrary to expectation, however, the number of scarlet fever notifications fell very slowly. In the week ended October 26th they were 639, and in the succeeding six weeks 637, 641, 554, 541, 536, and 527 respectively. Smallpox had, however, shown no tendency to increase, and as delay in the admission of scarlet fever cases still continued, the Managers, on December 21st, ordered Gore Farm Hospital to be again opened. The first batch of patients were admitted on December 24th, and before the close of the year the number had risen to 130. The relief thus afforded was to a great extent neutralised by the closing for a fortnight of the North-Eastern Fever Hospital against the reception of fresh cases. This was mainly due to the simultaneous occurrence of a considerable number of cases of measles and diphtheria in the scarlet fever wards.

Effect of Exhaustion of Hospital Accommodation.

The exhaustion of the accommodation in the Managers' fever hospitals, and the consequent delay in the removal of many very urgent cases of fever and diphtheria, undoubtedly caused many persons much inconvenience, anxiety, and suffering. These consequences were in some districts greatly aggravated by the non-compliance of the local officials with the Managers' request to "repeat their "applications day by day so long as their patients continued in a fit condition for "removal, and until the removal was effected, and add a statement of the circum-"stances which rendered the removal of the cases urgent."

Selection of Cases for Admission to Fever Hospitals.

The method of selecting cases for removal was the same as that adopted in former years, namely:—From the whole of the applications made each day those cases were selected to fill the vacant beds which, from their circumstances (as judged

from the information supplied with the applications), appeared to be most in need of hospital isolation and treatment.

It has been suggested that the officials of the local sanitary authorities should be the sole channel in times of pressure through which applications for the admission of patients to hospital should be received, on the assumption, apparently, that these officials are thoroughly acquainted with the necessities of all infectious cases arising within their districts. As a matter of fact, such is not always the case, and injustice and hardship would have ensued if the Managers had declined to consider applications from other sources. Moreover, it must not be overlooked that the Managers are bound to retain in their power the provision for cases of infectious disease arising amongst persons subject to the poor law.

But, apart from these considerations, it is quite certain that to leave in the hands of 41 or more distinct authorities the allocation of beds to patients and patients to beds, as the various vacancies and demands arise every day, even if possible in practice, could lead to nothing but confusion, delay, and waste of accommodation.

Failure of Sanitary Officials to keep themselves Informed of Condition of Patients waiting Removal.

In connection with this subject, we regret to have to report that during the past year, as in previous years when the hospitals have been full, many instances occurred of sanitary officials failing to keep themselves informed of the condition of the patients for whose removal they were daily repeating their applications. One object which the Managers had in view in requiring applications to be renewed daily was to ensure that the patient continued in a fit condition for removal. Yet it frequently happened that applications were made for the removal of cases in which the disease had already terminated fatally, or had progressed so satisfactorily that the relatives of the patients declined to allow them to enter the ambulance when it was sent to remove them.

On reference to the return on page 227 it will be seen that the causes referred to above were alone responsible for no fewer than 481 lost journeys.

It is, therefore, with the confidence derived from extended and confirmed experience that we assert our conviction that the method of selection adopted is the best under the circumstances, and that it has been applied by the Managers' officials with absolute impartiality.

It may be interesting here to note that, notwithstanding certain statements to the contrary, inmates of general hospitals have always been considered cases of urgency, and even at times of greatest pressure the delay in the removal of such cases has been of brief duration

Lost Journeys.

It is our experience that whenever delay has occurred in the removal of patients owing to the beds in the Managers' hospitals being fully occupied, there has been a large increase in the number of useless journeys. We have, therefore, had the following return prepared, showing, for each quarter of the past year, the number of such journeys:—

Return showing Causes of Lost Journeys of Ambulances during each Quarter of the Year 1895.

Causes.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Total.
1. Incorrect address	3	...	16	12	31
2. No certificate	18	11	60	41	130
3. Relatives refused to permit removal	17	17	120	93	247
4. Recovered or better	...	...	41	33	74
5. Too ill for removal	10	13	42	19	84
6. Dead when ambulance arrived...	4	6	40	26	76
7. Already removed to a Board's hospital	2	3	36	30	71
8. Already removed to other hospitals	3	4	8	10	25
9. Left out-patient department of general hospital ...	1	2	6	8	17
10. Patients not at home	...	2	6	1	9
11. Relatives not at home	1	...	1	3	5
12. Wrong disease or sex in application	...	...	16	7	23
13. Other causes	...	..	8	3	11
Totals	59	58	400	286	803*

Mileage, 6,486.

New Ambulance Stations.

As mentioned in our Report for 1894, the enormous increase in the work of the ambulance service has made the provision of additional ambulance stations imperative. One station adjoining the Brook Hospital at Woolwich will be completed early in 1896. A site adjacent to the North-Western Hospital has been secured for a second; the plans of the proposed station have been approved by the Managers and the Local Government Board, and we shall shortly advertise for tenders for the erection of the buildings. A site for a third new station, adjoining the South-Western Hosptal, has also been purchased, and plans will shortly be submitted for the approval of the Managers and the Local Government Board.

LAND SERVICE.

Removals to the Managers' Hospitals.

On reference to Appendix A it will be seen that the total number of fever patients removed to the Managers' hospitals during the year was 16,725, as compared with 16,573 in 1894, 18,496 in 1893, 16,118 in 1892, and 7,725 in 1891 The removals of smallpox patients numbered 1,045,† as compared with 1,186 in 1894, 2,389 in 1893, 306 in 1892, and 64 in 1891.

The average daily removals of fever patients in the first six months of the year were 36, and the last six months 56, as compared with 44 and 46 respectively in 1894.

The aggregate removals during the year, including the transfer of patients from one hospital to another, numbered 29,041. Of this number, 10,068 were effected by the Eastern Station, 8,811 by the Western Station, and 10,162 by the

* Exclusive of four lost journeys for smallpox cases, which are included in Appendix B, item, "Patients sent for, but for various causes not removed."

† Including cases found, on examination by the Managers' Medical Officer, not to be suffering from smallpox.

South-Eastern Station (including the removals effected by the Fountain Ambulance Shelter).

Appendix B exhibits the number of journeys made and miles run by the horses and vehicles during the year

The following were the greatest numbers of patients removed to hospital in a day by the several stations:—Eastern Station, on August 14th, 52 patients; Western Station, on November 23rd, 43 patients; South-Eastern Station, on July 26th, 43 patients; and Fountain Shelter, on December 24th, 14 patients.

The heaviest week's work was, for the Eastern Station, that ended on August 17th, when 334 removals (including transfers, &c.) were effected, and 2,888 miles were travelled; for the Western Station, that ended on December 14th, when 259 removals were effected, and 1,772 miles were travelled; for the South-Eastern Station, that ended on July 13th, when 228 removals were effected, and 2,041 miles were travelled; and for the Fountain Shelter, that ended on September 28th, when 34 removals were effected, and 269 miles were travelled.

Smallpox Patients Admitted.

Smallpox patients were admitted to the Managers' hospitals from every district in the Metropolis, the total number being 1,022. The monthly admissions were as follow, including cases which, after observation, proved not to be smallpox, and cases which were conveyed to the ships by the ambulances of certain extra-metropolitan authorities:—

January	47	July	231
February	63	August	243
March	45	September	110
April	33	October	67
May	20	November	67
June	40	December	56

Of the above there came from West Ham, 16 in the first quarter of the year, none in the second quarter, and then three in July, eight in August, five in September, 19 in October, 40 in November, and 23 in December; also a few from Erith and Dartford.

The maximum prevalence of smallpox has, as a rule, been attained in May or June, and afterwards there has been usually a steady decline until November or December; but in the past year, as in 1894, an unexpected outbreak occurred in July.

Total Removals.

The total number of patients certified to be suffering from smallpox removed from their homes to the wharves during the year was 1,045. In 926 cases the diagnosis was confirmed by the Medical Officers who inspected the patients at the wharves.

Non-Smallpox Cases.

All of the 119 patients who were, in the opinion of those officers, not suffering from smallpox were returned to their homes, with the exception of four infants who

were permitted to go to the hospital ships with their mothers, of three patients who were admitted into the South-Eastern Fever Hospital, and of one who died at South Wharf.

Smallpox in Fever Hospitals.

In the course of the year, one patient under treatment in a fever hospital was found to be suffering from smallpox, and was transferred to the smallpox hospital.

Fever Patients.

At the commencement of the year there were 2,487* patients in the Managers fever hospitals, distributed as follows :—

Hospital.	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	Total.
Eastern Hospital ...	184	81	—	20	—	285
North-Eastern Hospital	240	—	—	—	—	240
North-Western Hospital	179	67	—	20	7	273
Western Hospital ...	174	75	—	16	1	266
South-Western Hospital	205	48	—	26	1	280
Fountain Hospital ...	252	70	—	—	—	322
South-Eastern Hospital	221	89	2	36	—	348
Northern Hospital ...	443	30	—	—	—	473
Totals	1,898	460	2	118	9	2,487

This was a less number by 823 than at the beginning of the preceding year. The number under treatment fell to the minimum (1,897) for the year by May 4th. After this date the number rose until it attained 3,033 on July 15th, and the normal accommodation at the several fever hospitals was exhausted. But by placing additional beds in wards, by utilising the day rooms at the Northern Convalescent Hospital as dormitories, and by new wards in hospitals undergoing reconstruction being completed and brought into use, further accommodation was provided, and the number of patients under treatment continued increasing until the maximum (3,568) for the year was reached on November 19th. Even this figure would have been largely exceeded if more accommodation had existed, and if admission had not been restricted to the most urgent cases.

Enteric Fever Patients.

240 enteric fever patients were, during the year, removed to general hospitals under the arrangements made with the authorities of those hospitals in 1892. Consequently, the Managers were able to devote to the use of scarlet fever patients a considerable number of beds which they would otherwise have been obliged to reserve for enteric cases.

Diphtheria Patients.

The total number of patients removed to the Managers' hospitals certified at the time of removal to be suffering from diphtheria or from "diphtheritic membranous

* Number at midnight on 1st January, 1895.

croup" was 4,476, as against 4,144 in 1894, 3,194 in 1893, 2,349 in 1892, 1,481 in 1891, 1,049 in 1890, and 770 in 1889. Of that number 43 per cent. were removed during the first half and 57 per cent. during the second half of the year.

PATIENTS CONVEYED TO OTHER PLACES THAN THE MANAGERS' HOSPITALS.

Under the powers conferred by section 79 (3) of the Public Health (London) Act, 1891, 326 persons suffering from dangerous infectious disorders were conveyed in the Managers' ambulances during the year 1895. Of these 25 were stated to have measles, 89 scarlet fever, 125 enteric fever, 47 diphtheria, 34 erysipelas, four smallpox, one puerperal fever, and one chickenpox.

The total sum received by the Managers under this section of the Act during 1895 was £107 13s., of which £27 10s. was in respect of the services of nurses. In five cases payment was remitted on account of the want of means of the patients.

AMBULANCE STATIONS.

The Eastern, Western, and South-Eastern Stations have been maintained in thorough repair.

At the Eastern Station an additional coach-house, capable of accommodating 10 ambulance carriages, has been erected; and a building which will provide sitting-rooms and separate bedrooms for 10 smallpox nurses is nearly completed.

The urgent pressure for accommodation and the short supply of beds have thrown unusual stress on the Ambulance Service generally, and special anxiety on those engaged in directing its operations, both at the Chief Offices and at the several stations. We have the satisfaction of reporting that no hitch of any kind has been experienced, and that no patient or nurse has had cause to complain of injury or even inconvenience sustained while under charge of the service.

STAFF.

The health of the male staff has not been so well maintained as in previous years. At the Eastern Station 18 members have been off duty—two with attacks of typhoid fever, five with influenza, and others with minor disorders—involving in the aggregate a loss of service of 355 days. At the Western Station six men were off duty for an aggregate of 102 days, one remaining warded in the Western Hospital at the close of the year; two suffered from influenza. At the South-Eastern Station seven members of the male stuff and four of the female staff were off duty for an aggregate of 192 days; three suffered from influenza, one from diphtheria, two from rheumatism, and the remainder from various complaints.

There were 30 resignations, seven discharges, and 34 appointments of the staff during the year.

RIVER SERVICE.

STEAMERS.

The four ambulance steamboats—"Red Cross," "Maltese Cross," "Albert Victor," and "Geneva Cross"—have been maintained in working order.

In our last Report we mentioned that the timbers and outside planking of the steam pinnace "Swallow" had been found more or less rotten and defective. In September last this vessel was reported as quite unfit for further use.

In replacing this vessel we thought it would be economical to obtain one not only capable of conveying staff and visitors to and from the hospital ships, but also

affording recumbent accommodation for a limited number of patients, thus obviating the employment of a large steamboat at times when cases of smallpox are few. A proposal to obtain tenders for the construction of a vessel to fulfil these requirements will have been submitted to the Managers before the issue of this report.

The distance run collectively by the steamers was 14,813 miles, and they conveyed 4,951 patients and other passengers, and 94 tons 8 cwt. of stores, &c., to and from the hospital ships at Long Reach (see Appendix C).

Early in February very severe weather set in, and by the 9th of the month the ice floes had increased in number and size to such an extent as to make it extremely difficult, and in some cases quite impossible, for craft to get alongside the wharves. The Managers' steamers were kept running until February 10th, on which day the "Albert Victor" got as far as Bugsby's Reach (just below Blackwall), when it was found impossible for her to force her way through the ice. There was very great danger of the iron plates of the vessel being pierced by the ice floes, and it was considered advisable to take her back to South Wharf, the tide then being in her favour. By the 13th of the month the Thames as far down as Woolwich was, with the exception of a very small portion in the middle, entirely frozen over, and all traffic was stopped.

Fortunately smallpox was not very prevalent at the time, and such cases as occurred were conveniently accommodated on board the ambulance steamboat "Geneva Cross" until February 23rd, when, milder weather having set in and the ice floes begun to disappear, she was able to proceed to the hospital ships.

In order to prevent accident by ice floes, derelict barges, &c., while the patients were on board, an outer bulwark was constructed of large baulks of timber and thick planking on the sides of the vessel; and the following month, when the "Geneva Cross" was placed in a dry dock for examination of her hull, there was not a single indent in the plating of the vessel.

The Managers' steamers caused no damage to any vessel or craft during the year; but, as in former years, several barges and other craft have come into collision with the steamers while lying at their moorings. The damage sustained has been in every instance made thoroughly good, and the total amount recovered in respect thereof during the year was £202 9s. 7d., making a total of £1,925 11s. 1d. recovered since 1885, in which year the present system of insurance against damage of all kinds, without the usual restrictive clauses, was first adopted.

Wharves.

The wharves and piers, and the houses and other buildings in connection therewith, at Fulham, Rotherhithe, and Blackwall, continue to be maintained in a satisfactory state of repair.

The bridges leading to the pontoons of the piers at North and South Wharves have been roofed over, at a cost of £258 10s. This will not only secure greater comfort to patients in wet and stormy weather, but will also prevent the risk of accident to persons traversing the bridges in snow and frost.

A contract has been entered into for the erection at the South Wharf of commodious quarters for the nursing and domestic staff employed in connection with the hospital wards of the steamboats and the shelters on shore; and the buildings are rapidly approaching completion.

STAFF.

There have been two resignations, four discharges, and eight appointments of the staff during the year.

COST OF AMBULANCE SERVICES.

The total payments made during the year ended on December 31st last were as under:—

	£	s.	d.
For the Eastern Station	4,238	7	2
„ South-Eastern Station	4,887	2	8
„ Western Station...	4,244	2	10
	£13,369	12	8
River Service	7,893	1	6
To which must be added—			
Payments for overhauling machinery of and repairs of the steamers	922	0	11
	£8,815	2	5
Expenditure out of Loan Account—			
Eastern Station—Erection of nurses' quarters and coach-house	1,512	4	3
Brook Station—On account of erection of station	9,000	0	0
North-Western Station—On account of purchase of land	4,832	0	0
River Service—On account of erection of staff quarters at South Wharf	1,104	7	0
Ditto —Roofing bridges of piers at South and North Wharves	209	10	0
Ditto —On account of construction of new ambulance steamboat	250	0	0
	£16,908	1	3

With regard to the ambulance nurses, who have, as in previous years, been drawn for fever purposes from the hospitals in proximity to the ambulance stations, it may be mentioned that, for purposes of account and comparison as between the different institutions of the Board, the cost of their services has been assumed to be fairly represented by a fixed charge of 2s. 6d. per journey, and in the aggregate these charges amount to no less a sum than £2,398 12s. 6d. for the past year.

The nurses employed for smallpox purposes have been supplied partly from the staff of the hospital ships and partly from the London hospitals.

(Signed) AUGUSTUS C. SCOVELL,
Chairman of the Committee.

APPENDIX A.—LAND AMBULANCE SERVICE.

Number of Patients removed by the Ambulances of the Board.

	From 1881 to 1890	1891	1892	1893	1894	1895	Totals.
Fever :—							
From homes to Hospitals ...	35,123	7,725	16,118	18,496	16,573	16,725	110,760
Convalescents to Northern and other Hospitals	9,487	2,392	7,682	6,813	5,159	5,037	36,570
Recovered cases from Northern Hospital to Town Hospitals for discharge	8,254	2,206	4,572	5,670	4,090	4,464	29,256
Recovered cases discharged from Northern Hospital conveyed from Eastern and Western Hospitals to South-Eastern Hospital	...	...	100	60	221	82	463
Recovered cases from Gore Farm Hospital to Town Hospitals for discharge ...	309	137	2,205	1,536	1,375	...	5,562
Recovered cases from Gore Farm Hospital conveyed from the South-Eastern Hospital to the Western, South-Western, and Eastern Hospitals	..	...	183	126	112	...	421
Other transfers between Hospitals...	...	...	...	...	7	61	68
From Hospitals to homes ...	*2,678	140	220	279	251	256	3,824
From General Hospitals to homes, owing to want of room in the Managers' Hospitals	...	...	...	468	143	724	1,335
Enteric Fever cases from homes to General Hospitals ...	...	...	...	170	216	241	627
Total Fever Patients ...	55,851	12,600	31,080	33,618	28,147	27,590	188,886
Smallpox :—							
From homes to Hospitals and Wharves	14,006	64	306	2,389	1,186	1,045	18,996
From Hospitals to Wharves...	4,890	63	200	331	8	...	5,492
Other transfers between Hospitals	...	...	5	1	1	3	10
From Hospitals and Wharves to homes	10,358	...	10	44	77	77	10,566
Total Smallpox Patients ...	29,254	127	521	2,765	1,272	1,125	35,064
Conveyance of Patients to other places than the Managers' Hospitals	130	126	432	593	269	326	1,876
Grand Totals	85,235	12,853	32,033	36,976	29,688	29,041	225,826

* Includes some smallpox cases.

N.B.—(1) The Eastern Ambulance Station first commenced work on July 14th, 1881, at London Fields, and was removed to the present premises in Brooksby's Walk in June, 1885; the South-Eastern Station commenced work on October 1st, 1883; and the Western Station on July 9th, 1884.

(2) The use of the Managers' ambulances for the general conveyance of the infectious sick was not authorised until November 30th, 1889.

APPENDIX B.—LAND AMBULANCE SERVICE—(*continued*).

Return of Work for the Twelve Months ended December 31st, 1895.

PARTICULARS OF WORK.	Number of Journeys.	MILES RUN.				
		By Horses.				By Vehicles.
		1	2	3	4	
REMOVALS FROM HOME—						
To the Board's Hospitals—						
Fever Patients	15,308	148,151	882	...	...	149,033
Smallpox Patients... ...	...	...	...	...	...	...
To the Board's Wharves—						
Smallpox Patients... ...	959	14,120	68	...	...	14,188
To General Hospitals—						
Enteric Patients	222	2,513	...	...	...	2,513
OTHER REMOVALS—						
From General Hospitals to homes owing to want of room in the Board's Hospitals	708	5,709	...	...	...	5,709
From Surgeries to homes ditto	2	15	...	...	...	15
Non-Smallpox Patients returned home	41	432	...	...	...	432
Other Patients returned home ...	47	353	...	...	...	353
Patients sent for, but for various causes, not removed	807	6,486	...	...	...	6,486
Patients friend taken from home to Hospital	1	15	...	...	...	15
Patients friends taken from Hospital to home	2	21	...	...	...	21
TRANSFERS BETWEEN HOSPITALS—						
Fever Patients to and from Northern Hospital... ...	868	1,641	20,660	...	...	22,301
Fever Patients to and from Gore Farm Hospital ...	34	...	877	...	...	877
Other transfers between Hospitals	36	448	224	...	...	672
Smallpox Patient from Board's Hospitals to Wharves ...	1	17	...	...	...	17
RECOVERED PATIENTS TAKEN HOME—						
From Fever Hospitals	230	2,230	29	...	...	2,259
From Wharves:—Smallpox ...	69	942	...	...	...	942
Service requirements	298	2,624	40	...	...	2,664
Conveyance of Ambulance Committee	3	...	16	...	...	16
Conveyance of Hospital stores ...	6	...	126	...	...	126
	19,642	185,717	22,922	..	...	208,639
Conveyance of Patients to other places than Managers' Hospitals (private removals)	321	3,643	82	...	...	3,725
Totals for 1895	19,963	189,360	23,004	...	...	212,364
Totals for 1894	19,796	176,602	26,918	72	228	203,820
Totals for 1893	24,017	214,884	30,186	...	241	245,311
Totals for 1892	17,607	147,606	27,497	...	3,535	178,638
Totals for 1891	8,254	66,129	12,958	...	791	79,873
Totals for 1890	8,644	67,443	14,167	415	2,405	84,423
Totals for 1889	5,594	40,957	6,276	232	881	48,346
Totals for 1888	5,550	34,842	12,767	...	1,910	49,519
Totals for 1887	6,507	51,894	5,223	...	1,009	58,126
Totals for 1886	2,073	13,578	1,980	...	...	15,558
Grand Totals ...	118,005	1,003,295	160,976	719	11,000	1,175,978

APPENDIX C.—RIVER SERVICE.

Number of Patients, Visitors, Staff, &c., conveyed to and from the Hospital Ships during the year 1895.

Month.	Patients conveyed to Hospital Ships.	Recovered cases conveyed from Hospital Ships.	Visitors conveyed to and from HospitalShips (including Managers).	Staff, &c., conveyed to and from Hospital Ships.	Totals.
January	44	9	18	133	204
February	56	22	21	52	151
March	42	53	16	132	243
April	30	48	32	144	254
May	15	29	20	143	207
June	36	20	20	161	237
July	221	26	38	198	483
August	230	110	254	348	942
September	99	192	246	405	942
October	57	170	24	292	543
November	53	72	118	185	428
December	42	41	55	179	317
Totals for the year 1895	925	792	862	2,372	4,951
Totals for 1894	1,101	1,009	1,762	3,742	7,614
Totals for 1893	2,364	2,053	2,195	4,040	10,652
Totals for 1892	298	235	121	735	1,389
Totals for 1891	63	53	155	503	774
Totals for 1890	26	25	38	339	428
Totals for 1889	5	4	51	445	505
Totals for 1888	62	63	246	476	847
Totals for 1887	54	45	395	478	972
Totals for 1886	130	145	458	*3,929	4,662
Totals for 1885	5,468	5,809	†	†	11,277
Totals for 1884	5,592	4,267	†	†	9,859
Grand Totals	16,088	14,500	6,283	17,059	53,930

STEAMERS.

Steamer.	Fires alight.		Under Steam.		Under Way.		Coal consumed.		Number of days when under steam.	Distance run.
	Hours.	Mins.	Hours.	Mins.	Hours.	Mins.	Tons.	Cwt.		Miles.
"Albert Victor"	3,361	...	3,035	30	391	18	247	10	213	3,943
"Geneva Cross"	3,975	...	4,344	...	363	48	346	1¾	185	3,407
"Maltese Cross"	2,118	5	1,902	5	418	7	215	9	142	3,906
"Red Cross"	1,722	30	1,587	...	355	21	173	10¼	123	3,161
"Swallow"	1,568	...	1,214	30	54	5	9	...	180	396
Totals	12,744	35	12,083	5	1,582	39	991	11	843	14,813

Quantity of Stores, Parcels, &c., conveyed to and from the Hospital Ships.
Number, 2,968. Weight, 94 tons 8 cwt. 49 lbs.

* Included in this number is the number of contractors' workmen who were engaged on building and other work in connection with the hospital ships, and who were conveyed to and from Long Reach each week.

† No figures were given in the Committee's Report for 1884 and 1885.

PART VI.

REPORT FOR THE YEAR 1895 OF THE COMMITTEE OF MANAGEMENT OF THE TRAINING SHIP "EXMOUTH."

January, 1896.

To the Managers of the
Metropolitan Asylum District.

The "Exmouth" Committee beg to submit the 20th Annual Report (for 1895) of the Captain-Superintendent; and, in accordance with the custom which has obtained for several years, take this opportunity of briefly reviewing the more important matters with which they have had to deal in the course of the last twelve months.

Statistics.

On reference to the statistics in the Captain-Superintendent's Report, it will be seen that during the year 279 boys were admitted and 338 were discharged.

Of those discharged, 163 entered the Royal Navy, as against 133 in the year 1894; 96 entered the Mercantile Marine, as against 87; 37 entered the Army as musicians, as against 26; while 41 were returned to their respective parishes and unions; leaving 526 under training on the 31st December last. There was one death. The number of entries into the Royal Navy exceeded that of any of the previous years.

According to the Mercantile Navy List, compiled and issued by the Registrar-General of Seamen, the number of boys entered into the Royal Navy from the "Exmouth" during the year 1895 was 163, while the aggregate number of similar entries from all the other training ships in the United Kingdom was 137.

The number of admissions to the ship was well maintained throughout the year, so that, notwithstanding the increased number of discharges, the average daily number of boys under training was but little below the full ship's complement.

Expenditure.

The net expenditure incurred during the twelve months ended at Michaelmas last, excluding "works of a special character," was £21,013 7s. 3d., as against £21,347 18s. 10d. for the previous 12 months. The charge made upon the several parishes and unions for the maintenance and clothing of the boys during the half-years ended at Lady-day and Michaelmas, 1895, respectively, was at the rate of $10\frac{3}{4}$d. and 10d. per head per day, as against 11d. and $11\frac{1}{4}$d. for the corresponding periods of 1894.

Maintenance and Clothing.

The total daily cost of the maintenance and clothing, &c., of the boys (exclusive of the repayment, with interest, of the amount raised on loan) is shown in the following statement, viz.:—

HEADS OF EXPENDITURE.	Half-year ended Lady-day, 1895.	Half-year ended Michaelmas, 1895.
	s. d.	s. d.
Provisions, necessaries, and clothing	0 $10\frac{24}{32}$	0 10
Warming, cleansing, lighting, and water	0 $1\frac{15}{32}$	0 $1\frac{29}{32}$
Officers' salaries, rations, and uniforms	0 $6\frac{23}{32}$	0 $6\frac{15}{32}$
Furniture and repairs, rates and taxes, and sundries	0 $4\frac{9}{32}$	0 $3\frac{15}{32}$
Total daily cost per boy	1 $11\frac{11}{32}$	1 $9\frac{27}{32}$

Cost of Outfits.

In addition to the above, a sum of £1,090 3s. 2d. was expended in providing outfits for boys going to sea, including their travelling expenses, the daily cost being about $1\frac{1}{4}$d. per boy, the same as in the year 1894.

Statements by Visitors.

The following copies of entries made by visitors to the ship, in the book kept for the purpose, are of interest as independent testimony to the good management of the ship:—

(i.) Entry made, on behalf of the Association of Superintendents of District and Separate Schools, by the President and the Secretary of the Association.

"1895.

"The Association of Superintendents of District and Separate Schools have to-day, at the invitation of Captain Bourchier, visited this ship, and desire to express in no uncertain way their admiration and satisfaction with all they have seen and heard. Band, physical exercises, big gun drill, field gun, small arms, and gymnastics were all done so heartily and smartly as to reflect the greatest possible credit on Captain Bourchier, his officers, and the boys.

"Many of the members present bore testimony to the eagerness of boys to join the ship, owing to the happy life described by 'Exmouth' boys when revisiting the schools, and we are not surprised at this after what we have seen to-day."

(ii.) Entry made by Mr. H. Lockwood, Local Government Board Inspector.

"July 2nd, 1895.

"I have to-day, with much pleasure, renewed my acquaintance with the 'Exmouth.' The changes that have taken place during the 15 years' interval are all in the direction of perfection."

(iii.) Entry made by the Bishop of Colchester.

"Thursday, October 31st, 1895.

"Visited the ship, and, after holding a confirmation, the boys went through their drill. They proved themselves a remarkably smart set of fellows; the field gun artillery drill was surprisingly well done. I carry away a grateful remembrance of a most interesting day. The devotion of the officers to their duties is beyond all praise. I congratulate Captain W. S. Bourchier, R.N., officers, and boys."

(iv.) Entry made by Archdeacon Stevens.

"October 31st, 1895.

"I feel quite unable to express the feelings of pleasure with which I have witnessed the boys drill; their smartness, order, and discipline seem very nearly perfect, and reflect the highest credit on all concerned."

Annual Inspection.

The annual inspection of the ship by the Managers was held on Saturday, June 29th, and, as usual, passed off in a highly-satisfactory manner. On the same day the prizes awarded to boys for proficiency in the various branches of training, for good conduct, &c., &c., were distributed to the several winners by the Right Hon. G. J. Shaw Lefevre, M.P., at that time President of the Local Government Board.

Prizes.

The Committee gratefully acknowledge the kindness of the undermentioned gentlemen in presenting prizes (consisting of four silver watches and a silver medal) for five of the boys:—Sir E. H. Galsworthy, J.P., D.L., Mr. James Brown, Mr. R. Strong, J.P., Mr. Taylor, and Mr. W. H. Walkley.

Mr. Halsey's Gift of Watches.

Later in the year, Mr. Halsey, one of Captain Bourchier's friends, again sent six silver watches, for distribution in commemoration of his daughter's birthday. This was the tenth gift of a similar nature which Mr. Halsey has made, and the Committee thank him most heartily for his kindness.

Outbreak of Influenza.

Owing to a somewhat serious outbreak of influenza amongst the boys at the latter end of February, the admission of fresh boys to the ship was, on the advice of the Medical Officer, stopped for a time. Fortunately, the epidemic was, owing to the well-directed efforts of the officers of the ship and infirmary, of short duration, and at the end of about a fortnight admissions were resumed as usual.

Dental Surgeon's Appointment Extended.

Shortly before the completion of Mr. Keen's second 12 months' engagement as Dental Surgeon, the Committee had before them a report as to the amount of work accomplished by him during the preceding 12 months, and also an expression of opinion from the Captain-Superintendent as to the effect and value of such work. As the Committee were of opinion, after carefully considering the matter, that it was very desirable, in the interests of the ship, that Mr. Keen's services should be retained, they unanimously recommended the Managers to authorise them to extend his engagement for another year, at a salary of £100. This recommendation was adopted by the Managers, and Mr. Keen has, therefore, continued to act in the capacity of Dental Surgeon.

Shipping Home—Change of Address.

Early in the year the Committee were informed that No. 2, Stainsby Road, Limehouse, the house rented by the Managers for use as a Shipping Home in connection with the "Exmouth," had been sold, and that the new owner intended to occupy it herself, and, therefore, wished the Managers to give up possession of the premises at Midsummer. Steps were at once taken by the Committee with a view to securing some other house in the same neighbourhood, suitable for the purposes of the home, and eventually such a one was found in No. 7, Stainsby Road. The Managers, on the recommendation of the Committee, took this house on a three years agreement from Midsummer, at a rent of £45 per annum, and since that time the work of the home has been carried on there.

Changes in Constitution of Committee.

The following Managers were appointed Members of the Committee for the first time in March last:—

Mr. Barnard.	Mr. Lampard.
„ Borland.	Dr. Power.
„ Etherington.	Brig.-Surg. Lieut.-Col. Pringle.

These gentlemen were appointed in place of Colonel Grubb, who retired from the Committee in January, and Vice-Admiral Adeane, the Rev. A. Chandler, Mr. Dowton, Mr. Francis, and Mr. Hart, who ceased to be Members of the Committee on March 25th.

Thanks to Officers.

In conclusion, the Committee wish to again record their sincere appreciation of the praiseworthy manner in which the Captain-Superintendent and the other officers connected with the ship continue to carry out their various duties.

(Signed) JAMES BROWN,
Chairman.

TRAINING SHIP "EXMOUTH."

REPORT OF THE CAPTAIN-SUPERINTENDENT FOR THE YEAR 1895.

January 1st, 1896.

To the Managers of the
Training Ship "Exmouth."

GENTLEMEN,

I beg to submit my twentieth Annual Report. The following table shows the number of admissions and discharges during 1895, as well as during the previous 19 years. A considerable increase in the number of entries into the Royal Navy will be noticed. This is a very satisfactory achievement; in fact, we have sent more boys into that service than in any other preceding year.

I regret to have to record one death during the year.

BOYS ADMITTED AND DISCHARGED.

	1876	1877	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	Total.
Boys admitted ...	194	194	188	210	289	226	340	358	326	267	374	241	301	329	290	223	322	299	307	279	5,857
Boys discharged to Royal Navy ...	1	6	1	8	72	85	155	141	95	128	114	95	87	104	108	89	83	102	133	163	1,770
,, discharged to Mercantile Marine, of whom 40 were enrolled in the Royal Naval Reserve ...	53	19	126	115	105	107	100	96	106	91	107	93	141	171	134	75	69	90	87	96	1,991
,, discharged to Army as Musicians	9	11	9	31	17	27	46	74	61	43	55	36	18	56	48	42	66	28	26	37	740
,, discharged to situations, 5 of whom subsequently went to sea	1	...	2	...	3	...	...	...	2	...	...	...	...	...	...	1	...	...	1	...	10
,, discharged to their respective Unions, for various reasons, by order of the Boards of Guardians of the Unions and Parishes... ...	21	23	47	30	61	43	27	33	52	39	49	44	45	44	36	18	51	34	54	41	791
,, died...	...	...	2	1	...	4	1	...	2	2	5	1	2	1	1	...	1	3	2	1	29
Boys discharged ...	85	59	187	185	258	266	338	344	318	303	330	269	293	376	327	225	270	257	303	338	5,331

Total number of boys discharged	5,331
Remaining under training, December 31st, 1895	526
Total	5,857

The number of boys discharged during the last 16 years averages 300 per year.

The following table shows the number of boys admitted from each of the metropolitan unions and parishes and country unions during the year 1895, and during the whole time the ship has been established, viz. :—

Year ending December 31st, 1895.	Names of Unions and Parishes.	From March 31st, 1876, to Dec. 31st, 1895.
3	City of London	105
19	Fulham	185
11	Greenwich	337
27	Hackney	177
10	Holborn	156
19	Lewisham	516
2	Mile End	142
15	Poplar	341
4	St. George's-in-the-East	90
20	St. George's Union	238
...	St. Giles, Bloomsbury	28
13	St. Giles, Camberwell	302
...	St. John, Hampstead	25
1	St. Leonard, Shoreditch	131
...	St. Luke, Chelsea	125
11	St. Mary, Islington	188
6	St. Mary, Kensington	160
13	St. Mary, Lambeth	316
12	St. Marylebone	450
...	St. Mary, Paddington	116
2	St. Matthew, Bethnal Green	127
5	St. Olave's	236
17	St. Pancras	307
22	St. Saviour's	307
4	Stepney	85
3	Strand	19
6	Wandsworth and Clapham	139
2	Westminster	38
3	Whitechapel	125
14	Woolwich	270
1	Bromley (Country Unions)	4
2	Bedford (Country Unions)	9
7	Strood (Country Unions)	13
2	Medway (Country Unions)	14
...	Kingston (Country Unions)	2
...	St. Albans (Country Unions)	1
...	Martley (Country Unions)	3
1	Worcester (Country Unions)	6
2	Brentford (Country Unions)	9
...	Richmond (Country Unions)	3
...	Gateshead (Country Unions)	1
Total, 279		
	Chichester	1
	Croydon	2
	Dorking	1
	Ecclesall	1
	Epping	1
	Eton	1
	Horsham	3
	Tonbridge	1
	Wilton	1
	Total	5,857

Admissions from Country Unions commenced only in the latter part of 1892.

These boys were in the Establishment when the Metropolitan Asylums Board took it over from the Managers of the Forest Gate District Schools.

Of the 3,761 boys discharged to sea service from March 31st, 1876, to December 31st, 1895—

1,770 entered the Royal Navy.
1,008 went into ships in the Baltic and coasting trade and other short voyages, such as the Mediterranean, &c.
315 went into ships trading to North and South America.
104 went into ships in the West India trade.
99 went into ships going to the East Indies, China, and Japan
352 went into ships trading to the Australian Colonies.
113 went into ships trading to the Cape, Africa, and Mauritius.

Total 3,761

The positions the above 3,761 boys occupied on board the ships they first went to sea in are as follows, viz.:—

1,770 entered the Royal Navy as boys.
394 shipped as ordinary seamen in the Mercantile Marine.
1,284 shipped as deck and cabin boys do.
110 shipped as apprentices do.
203 shipped as assistant cooks and stewards do.

Total 3,761

Shipping Establishment at Limehouse.

The following table shows the number of boys shipped each year from the home at Limehouse to the mercantile marine. This does not include boys who are assisted to get ships for a second, third, and sometimes a fourth voyage. Thirty-five boys were assisted in this manner during the year. These 35 back boys in many cases were boys who had left the sea for a time to work on shore, and became tired of shore life, or fascinated with the training they had had on board the "Exmouth," applied to me for help to get to sea again, from whom they were sent to Mr. Miller, Shipping Officer, to ship if possible, and I am glad to be able to say he was successful in getting them away to sea again. The Shipping Home is also a place of call for old boys to look up old chums that were on the "Exmouth" with them, and to get general news of merchant ships.

Year	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	Total
Number shipped ..	63	107	78	81	95	93	104	91	87	92	118	148	124	75	69	90	87	96	1,991

Army.

The boys discharged to the Army since March 25th, 1876, joined the undermentioned regiments as band boys, viz.:—

19 to the Royal Artillery.
1 ,, Royal Horse Artillery.
1 ,, Royal Engineers.
3 ,, Dragoon Guards.
1 ,, 3rd Hussars.
1 ,, 4th Hussars.
1 ,, 11th Hussars.
1 ,, 13th Hussars.
1 ,, 19th Hussars.
9 ,, 20th Hussars.

2	to the	21st Hussars.
2	,,	5th Lancers.
8	,,	Grenadier Guards.
4	,,	Coldstream Guards.
1	,,	Scots Guards.
20	,,	Argyll and Sutherland Highlanders.
4	,,	Berkshire Regiment.
6	,,	Border Regiment.
8	,,	Cheshire Regiment.
42	,,	Connaught Rangers.
21	,,	Derbyshire Regiment.
2	,,	Devonshire Regiment.
9	,,	Dorsetshire Regiment.
26	,,	Royal Dublin Fusiliers.
6	,,	Duke of Cornwall's Light Infantry.
13	,,	Durham Light Infantry.
29	,,	Essex Regiment.
3	,,	Gloucester Regiment.
12	,,	Gordon Highlanders.
5	,,	Highland Light Infantry.
7	,,	Royal Inniskilling Fusiliers.
8	,,	Royal Irish Fusiliers.
10	,,	Royal Irish Rifles.
8	,,	East Kent Regiment.
1	,,	Royal West Kent Regiment.
5	,,	King's Own Scottish Borderers.
3	,,	Lancaster Fusiliers.
5	,	East Lancashire Regiment.
5	,,	Loyal North Lancashire Regiment.
5	,,	South Lancashire Regiment.
7	,,	Leicestershire Regiment.
4	,,	Leinster Regiment.
4	,,	Lincolnshire Regiment.
38	,,	Manchester Regiment.
8	,,	Middlesex Regiment.
11	to the	Northamptonshire Regiment.
7	,,	Northumberland Fusiliers.
10	,,	Oxfordshire Light Infantry.
17	,,	Rifle Brigade.
16	,,	Royal Fusiliers.
3	,,	Royal Highlanders.
38	,,	Royal Scots, "Lothian Regiment."
19	,,	Royal Scots Fusiliers.
5	,,	Scottish Rifles.
2	,,	Seaforth Highlanders.
8	,,	Shropshire Light Infantry.
19	,,	Somersetshire Light Infantry.
1	,,	North Staffordshire Regiment.
11	,,	South Staffordshire Regiment.
20	,,	Suffolk Regiment.
5	,,	Royal West Surrey Regiment.
19	,,	Royal Sussex Regiment.
12	,,	South Wales Borderers.
14	,,	Royal Warwickshire Regiment.
8	,,	Royal Welsh Fusiliers.
24	,,	Welsh Regiment.
2	,,	Wiltshire Regiment.
9	,,	Worcestershire Regiment.
16	,,	York and Lancaster Regiment.
15	,,	Yorkshire Light Infantry.
8	,,	Yorkshire Regiment.
12	,,	East Yorkshire Regiment.
3	,,	West Yorkshire Regiment.
1	,,	Royal Marine Light Infantry.
1	,,	Army Hospital Corps.
3	,,	King's Liverpool Regiment.
20	,,	King's Royal Rifles.
740	Total.	

Seamanship.

Good progress has been made in this branch of the boys' education.

Every opportunity was taken advantage of during the past year to give the boys all the outdoor exercise possible; and owing to the continuance of fine weather, boat-sailing and boat-pulling occupied a large portion of the instruction hours, and the summer evenings afforded additional opportunities for extending this healthful exercise.

The sailmakers' class, under the sailmaker's instructions, has worked well, in repairing and keeping in order all the sails, screens, &c., of the ship, and also those of the brigantine, as well as the boat sails. This work has required the expenditure of some 818 yards of new canvas and 105 fathoms of new rope.

The riggers' class has been employed in looking after all running rigging, ratlines, boat-falls, &c.

Signalling, which is recognised as one of the most important subjects of instruction in the Royal Navy, receives every attention, and many of our old boys in the service acknowledge their advance to be due to the instruction in signalling received on board the "Exmouth."

Promotions in seamanship from one class to another are shown in the following table:—

From 5th class to 4th class	420
„ 4th „ 3rd „	308
„ 3rd „ 2nd „	185
„ 2nd „ 1st „	190
„ 1st „ riggers (fit for sea)	162
	1,265

Brigantine "Steadfast."

The rig of the vessel having been altered during the past winter from schooner to brigantine has afforded much more scope for exercising and instructing boys aloft, and so better fitting them for a sea life. It has also been satisfactory to find that the vessel acts well under the change of rig.

In April the cruising was commenced, and a crew of boys was prepared for a cruise to the western ports, where the brigantine was sent early in May. On her return other boys were prepared for a similar cruise, which took place in August.

Both at Portland and at Devonport the vessel and boys were well received by the naval authorities, as is shown by the fact that during the two trips 65 boys were entered in the Royal Navy as bluejackets, although they were nearly all considerably under the ordinary standard of physique.

During the latter cruise bad weather was experienced, but nothing happened to mar the success of the brigantine, which has fulfilled all that was expected of her.

The sailing time closed at the end of September. The practical training under sail continues to be as popular as ever with the boys, which shows that, although ruled with firmness, they are well treated and happy in the performance of the heavy work which devolves upon them.

Gunnery.

Out of the large number of boys discharged during last year, 256 were drawn from the following gunnery classes:—

Leading gunners	81
1st class „	93
2nd „ „	47
3rd „ „	35
Total	256

They all had a good knowledge of rifle, cutlass, and truck gun drill; the leading gunners, in addition to the above, were well up in field gun drill, and having another field gun during the year, it makes the drill much more interesting to the boys and the Gunnery Instructor.

Ambulance Class.

A certain number of the leading boys, and those likely to go away soon, have been formed into an ambulance class to afford "first aid to injured" persons. This class has received six weekly lectures from Dr. Coates, R.N., during April and May.

The examiner appointed by the St. John Ambulance Association was Brigade-Surgeon McNalty, who says in his report that:—

"With reference to my examination of the ambulance class on the training ship 'Exmouth,' under your command, on the 14th inst., I am very glad to be able to inform you that all the boys, 30 in number, who were examined for certificates of the St. John Ambulance Association passed. The bandaging was very neatly done, splints correctly applied, position of main arteries, stretcher drill, and method of resuscitation of the apparently drowned well understood. With regard to awards for merit, I recommend the following:—

"Frederick Reddiford	1st Prize,	10s. 0d.
"Walter Knight	2nd „	7s. 6d.
"James Jelly...	3rd „	5s. 0d.
"James Dempsey	4th „	2s. 6d.
"John Henry Green	5th „	1s. 0d.

"Three boys came up for first re-examination, and one for final. I was well satisfied with the way that they had kept up their knowledge, and recommend awards:—

"Alexander Dixon (final)	1st Prize,	5s. 0d.
"Cyril Godden (1st re-examination) ...	2nd „	2s. 6d.
"Thomas Berry („) ...	2nd „	2s. 6d.

"When I visited the 'Exmouth,' you were good enough to allow me to go over the ship. I was much struck with the bright, healthy appearance of the boys; the excellent physical and mental training they undergo, and the sanitary conditions under which they live seem well calculated to make them efficient and trustworthy lads, and especially good sailors and soldiers.

"The class I had to examine was a comparatively large one, but my work was much lightened by the admirable discipline of the boys. I wish the training ship 'Exmouth' a continuance of the great success it has had in the past.

"I am, dear Captain Bourchier,

"Yours very truly,

(Signed) "G. McNALTY."

Gymnastics.

The results of this important part of the boys' training were considerably above the average this year, and the services of a very competent and independent judge having been engaged to conduct the examination, I received the following report from him:—

To Captain Bourchier, R.N.

Sir,

I have the honour to report that at my visit to judge the gymnastics on board the "Exmouth" on Saturday, June 15th, I found the boys in an excellent state of physical training, and this fine condition was uniform throughout the whole of the competitors. It speaks highly for the physical instruction given on board to find that great attention is paid to style and neatness in the performance of all exercises. It was very satisfactory to note the keen interest shown by the boys in all the exercises, which were such as to test a boy in every way.

I have the honour to remain,

Yours obediently,

(Signed) JAS. HAVIE.

The following is the result of the gymnastic competition, which took place in June, 1895:—

No. on Ship's Book.	NAME.	No. on Watch Bill.	UNION OR PARISH.	No. of Marks obtained.	PRIZES.	DESTINATION.
5073	J. Walsh	429	Camberwell	83	Silver Watch ...	Friends.
5077	J. White	83	Lambeth	80	15s.	Army.
5031	G. Joyce	457	,, ...	78	10s.	M. Marine.
4859	H. Shadwell... ...	55	Lewisham	75	7s.	Still on board
4744	H. Russell	445	,, ...	72	5s.	M. Marine.
4881	G. Lilley	91	Poplar	68	2s. 6d.	,,
5052	W. Stannard... ...	59	St. Saviour's... ...	68	... ...	Still on board.
5321	G. Bartlett	209	Camberwell	64	... ...	,,
5084	M. Thorpe	476	Lambeth	64	... ...	,,
5030	C. Dowse	176	Hackney	64	... ...	Royal Navy.
4740	A. Rossiter	358	St. Marylebone ...	61	... ...	M. Marine.
5043	F. Hales	321	St. Saviour's... ...	59	... ...	Still on board.
5000	A. Chittenden ...	430	Mile End	57	... ...	Army.
5532	A. Winch	269	Poplar	57	... .	Still on board.
5377	R. Walker	163	Camberwell	56	... ...	Royal Navy.
5625	P. Abbott	489	Hackney	54	... ...	,,
5188	M. Stanford	168	St. Saviour's... ...	52	... ...	Still on board.
5415	A. Farrer	383	Mile End	51	... ...	,,
4711	A. Sales	552	Lewisham	51	... ...	M. Marine.
4938	G. Cornell	570	St. Pancras	51	... ...	Still on board.
5489	J. Press	336	St. Saviour's... ...	50	... ...	Friends.
5013	W. Evans	426	Camberwell	50	... ...	Still on board.
5425	F. Ladbrook... ...	512	Lambeth	49	... ...	,,
4821	H. Burnes	63	City of London ...	46	... ...	,,

GYMNASTICS.

The following figures will show the proficiency at January 1st, 1895, and the number trained and remaining at December 31st, 1895:—

	January 1st, 1895.	December 31st, 1895.
Special class	49 ...	39
1st ,, ...	121 ...	126
2nd ,, ...	226 ...	121
3rd ,, ...	116 ..	101
4th ,, ...	73 ...	139
Totals	585 ...	526

Certificates issued during 1895 :—

From 4th class to 3rd class	297
,, 3rd ,, 2nd ,, ...	249
,, 2nd ,, 1st ,, ...	279
,, 1st ,, special ,, ...	236
Total	1,061

SWIMMING.

The following is the result of the swimming competition, which took place in June, 1895 :—

No. on Ship's Books.	NAME.	No. on Watch Bill.	UNION OR PARISH	Lengths.	DISTANCE SWAM IN ONE HOUR.	DESTINATION.
4838	E. West	464	St. Olave's	150	1½ miles and 300 yards ...	M. Marine.
5073	J. Walsh	429	Camberwell	142	1½ ,, 200 ,, ...	Friends.
4859	H. Shadwell	55	Lewisham	136	1½ ,, 80 ,, ...	Still on board.
5388	J. Giles	448	St. George's	136	1½ ,, 80 ,, ..	Army.
5066	J. Gosling	219	Fulham	136	1½ ,, 80 ,, ...	Royal Navy.
5001	R. Chittenden ...	500	Mile End...	136	1½ ,, 80 ,, ...	Still on board.
4743	A. Hawkins	473	Lewisham	134	1½ ,, 40 ,, ...	,,
5013	W. Evans	426	Camberwell	132	1½ ,, — ,, ...	,,
5083	M. Benson	382	Lambeth	132	1½ ,, — ,, ...	Army.
5172	W. Law	44	Woolwich	125	1¼ ,, 300 ,, ...	Royal Navy.
5086	F. Burrell	517	Lambeth	123	1¼ ,, 260 ,, ...	Still on board.
5606	W. Mason	35	Poplar	122	1¼ ,, 240 ,, ...	,,
4925	W. Dean	441	Bethnal Green ...	121	1¼ ,, 220 ,, ...	Royal Navy.
5239	W. Roberts	79	Wandsworth	120	1¼ ,, 200 , ...	Still on board.
5585	H. Bliss	401	Hackney	116	1¼ ,, 120 ,, ...	,,
4787	H. Pearce	185	Lambeth	116	1¼ ,, 120 ,, ...	,

This year the prizes were awarded to the boys who swam the longest distance in one hour, and the following is the list of prize winners :—

E. West ... 1st Prize, Silver Watch, presented by Ship Committee.
J. Walsh ... 2nd ,, Silver Medal, presented by Mr. Taylor, Medallist.
H. Shadwell... 3rd ,, 9s. 4½d. } Tie } Allowed by Committee.
J. Giles ... 4th ,, 9s. 4½d. }
J. Gosling ... 5th ,, 9s. 4½d. }
R. Chittenden 6th ,, 9s. 4½d. }
A. Hawkins... 7th ,, 2s. 6d. ... }

Number of boys who could not swim on January 1st, 1895	39
,, ,, admitted in 1895	279
Total	318
Number of boys remaining on December 31st, 1895, who could not swim	54

Number actually taught to swim ...						...	...	263
,,	passed into 4th class from				5th	...	...	291
,,	,,	3rd	,,		4th	...	...	289
,,	,,	2nd	,,		3rd	...	...	249
,,	,,	1st	,,		2nd	...	...	197
,,	,,	special	,,		1st	...	...	276
					Total	...	...	1,565

The table below shows the number of boys in the swimming classes on December 31st, 1894, and December 31st, 1895:—

	1894.		1895.
In the 5th class	39	...	54
,, 4th ,, ...	108	...	95
,, 3rd ,, ...	104	...	54
,, 2nd ,, ...	106	...	103
,, 1st ,, ...	48	...	80
,, special class	180	...	140
Totals... ...	585	...	526

School.

Wyndham Holgate, Esq., late H.M.I., having resigned his position, to the great regret of all those who have been intimately connected with him and appreciated his thorough knowledge of and sympathy with all educational matters, the Local Government Board instructed J. R. Mozley, Esq., H.M.I., to conduct our annual school examination.

Coming as an entire stranger to the ship, his remarks, taken from the school report, will be found interesting. He says:—"The instruction in elementary subjects is very good." "The boys show intelligence in their answers generally." "The order and discipline are very good indeed."

There has been no change in the school staff during the past year; though sickness has deprived us of the services of some of the schoolmasters for short periods.

You will be gratified to learn that the "excellent" merit grant for drawing has again been awarded us, this being the third time in succession.

The boys generally are anxious to improve themselves in school work; but the prizes which the Committee generously allow are admirable incentives to each one.

The "main deck" reading, writing, and room for quiet games is well patronised by the boys, more especially on wet half-holidays and during the winter evenings. Schoolmasters are in attendance to control and direct the boys.

Our choir has made great strides under the present organist; and we have had some very pleasant musical evenings from the boys. The "Exmouth" song-book still remains a great favourite with the boys, who are very careful on leaving the ship to take their song-book with them.

The Head Schoolmasters' lantern lectures are based on passing events, which practically become lessons in geography and history, and, judging from the manner in which they are received, are well appreciated by all the ship's company.

School Prize List.

Standard or Class.	No. on Ship's Book.	NAME.	No. on Watch Bill.	PRIZES.	UNION OR PARISH.
				s. d.	
VI.	4992	P. Phillips	351	5 0	Woolwich.
,,	4855	J. Cook	102	5 0	Camberwell.
,,	5159	T. Farrell	307	3 6	Fulham.
,,	5370	J. Lepley...	454	3 6	Poplar.
,,	5531	E. Bullock	135	2 3	Worcester.
,,	5305	T. Rounding	236	2 0	St. George's.
V.	5104	J. Green	119	5 0	St. Saviour's.
,,	5001	R. Chittenden	500	5 0	Mile End.
,,	5504	H. Strickland	279	3 6	Wandsworth and Clapham.
,,	5505	G. Swann	288	3 6	Lewisham.
,,	5135	W. Sargent	447	2 0	Bethnal Green.
,,	5571	G. Coker	62	2 0	Brentford.
,,	5100	W. Price	313	1 0	St. Marylebone.
,,	5395	C. Burke...	12	1 0	,,
IV.	4776	T. Cripps...	69	5 0	Camberwell.
,,	5093	E. Raven...	152	5 0	Woolwich.
,,	5043	F. Hales	321	5 0	St. Saviour's.
,,	5345	C. Swift	238	5 0	Whitechapel.
,,	5091	C. Dowse...	515	3 6	Chelsea.
,,	5122	J. Marriott	174	3 6	Lambeth.
,,	5414	T. Beare	125	3 6	Mile End.
,,	5143	T. Barry	80	3 6	Woolwich.
,,	5231	E. Peacock	297	2 0	Bethnal Green.
,,	5223	J. Bird	502	2 0	Paddington.
,,	5545	E. Walsingham	121	2 0	Poplar.
,,	4802	T. E. Deller	126	2 0	Islington.
,,	4493	H. Greig	15	1 0	City of London.
,,	5405	H. Vincent	188	1 0	Lambeth.
,,	5436	F. Andrews	20	1 0	Holborn.
,,	5106	J. Andrews	260	1 0	Woolwich.
Passed out of IV. Standard	4900	C. Godden	78	5 0	St. Marylebone.
,,	4698	T. Berry	112	5 0	Camberwell.
,,	5372	E. Williams	58	5 0	St. Pancras.
,,	5619	C. Page	143	5 0	Poplar.
,,	4937	W. Brewer	557	5 0	St. Pancras.
,,	4975	O. Chittenden	68	3 6	Medway.
,,	4679	T. Knight	106	3 6	St. Saviour's.
,,	4923	G. Pickering	572	3 6	St. Pancras.
,,	5004	C. Tranter	66	3 6	Greenwich.
,,	5073	P. Walsh	429	3 6	Camberwell.
,,	4293	W. Lebe	303	2 0	St. George's.
,,	5238	A. West	540	2 0	Wandsworth.
,,	4922	E. Pickering	534	2 0	St. Pancras.
,,	5285	E. Talmondt	42	2 0	Fulham.
,,	4640	G. White...	237	2 0	Lewisham.
,,	5050	C. Swann...	305	1 0	,,
,,	5311	G. Hollywood	519	1 0	St. George's.
,,	5352	A. Ward	435	1 0	Fulham.
,,	4949	T. Pywell	368	1 0	Lewisham.
,,	5182	P. Groves	215	1 0	Lambeth.
III.	5089	E. Beasley	485	4 6	City of London.
,,	5213	R. Fulker	414	4 6	Fulham.
,,	5377	A. Walker	163	3 0	Camberwell.
,,	5426	C. Meatyard	438	3 0	St. Saviour's.
,,	5118	T. Richardson	535	2 0	,,
,,	5495	G. Hall	526	2 0	Holborn.
,,	5460	E. Huntley	559	1 0	Hackney.
,,	5425	F. Ladbrooke	512	1 0	Lambeth.
II.	5318	W. Leggett	159	4 0	Woolwich.
,,	5212	J. McCarthy	346	4 0	Fulham.
,,	5572	C. Lindsay	525	3 0	Brentford.
,,	5492	W. Harman	406	3 0	Hackney.
,,	5098	W. Lygo	113	1 9	St. Saviour's.
,,	5258	J. Fowler	156	1 9	Poplar.
,,	4764	S. Hamilton	259	1 0	Fulham.
,,	4726	E. Buckley	568	1 0	St. Pancras.
I.	5585	T. Bliss	408	3 0	Hackney.
,,	4985	W. Evans	248	3 0	Chelsea.
,,	5442	W. Dennison	221	2 0	Fulham.
,,	5501	E. Cayzer	432	2 0	Camberwell.
,,	5611	G. White...	111	1 0	Fulham.
,,	5146	C. Collins	142	1 0	Woolwich.

Band.

No fewer than 55 band boys were entered in the Royal Navy and 37 into the Army this year, making the unprecedented number of 92 band boys in one year, and out of this number 50 were drafted from our bands during the last three months.

The various classes in music were put through a pretty stiff examination in the middle of April by the Chief Bandmaster of the Royal Naval Hospital School, Greenwich, Mr. Harding, who, in his report, states that—

"I examined the band of the training ship 'Exmouth' on the above date, and beg to state that I was more than ever pleased with the very favourable result.

"The 1st class band played two pieces of music which I took down to them (and which they had not seen before), and all round did the greatest credit to their bandmaster; one piece was gone through nearly faultless.

"The 2nd class band did their papers so well that I had a little difficulty in deciding who should take the prizes.

"The 3rd class band (some of the boys only a few weeks in the band) did their part of the examination fairly well, but the prize boys were very much above in the answers.

"The bugle band was complete in every sense, and to do justice I had to award the prizes to the senior boys.

"I would not like to close my report without a word of thanks to the bandmaster for his ready and kind assistance, also the boys for their quiet behaviour during the examination."

The following is the result of the examination:—

	No. on Ship's Books.	PARISH.	GONE TO.
For best reading and playing at sight—			
1st Prize—557. J. Brewer...	4937	St. Pancras ...	Army.
2nd ,, 586. J. Moore	4774	Greenwich ...	Royal Navy.
3rd ,, 143. G. Page	5619	Poplar	,, ,,
For best general knowledge of music in playing wind and stringed instruments—			
1st Prize—354. A. Chapman	4574	St. Pancras ...	Royal Navy.
2nd ,, 128. G. Devereux	4914	Bloomsbury ...	,, ,,
3rd ,, 351. P. Phillips	4992	Woolwich	,, ,,
For boys in 1st class band for best performance in playing a solo—			
1st Prize—557. J. Brewer...	4937	St. Pancras ...	Army.
2nd ,, 381. J. Bagshaw	4973	,, ...	Royal Navy.
3rd ,, 102. J. Cook	4855	Camberwell ...	Army.
For boys who make the quickest progress in 2nd class band—			
1st Prize—230. H. Wilson...	5496	Woolwich	Army.
2nd ,, 228. G. Davis	5350	Fulham	Royal Navy.
3rd ,, 560. J. Barrett...	5568	St. George's ...	Still on board.
4th ,, 79. W. Roberts	5239	Wandsworth ...	,, ,,
For boys in bugle band—			
1st Prize— 83. J. White	5077	Lambeth	Army.
2nd ,, 248. J. Evans	4985	Chelsea	,,
3rd ,, 448. J. Giles	5388	St. George's ...	,,
4th ,, 441. W. Dean	4925	Bethnal Green...	Royal Navy.
For boys who make the quickest progress in 3rd class band—			
1st Prize—184. A. Shorter	5626	Hackney	Royal Navy.
2nd ,, 148. H. Ayres	5628	,, ...	,, ,,
3rd ,, 40. C. Hill	5550	Camberwell ...	Still on board.
4th ,, 379. H. Amiel	5491	Lewisham	Friends.
For boys who have taken the greatest care of their instruments—			
1st Prize—125. F. Beare	5414	Mile End	Royal Navy.
2nd ,, 318. W. Tucker	5012	Greenwich ...	,, ,,
3rd ,, 305. C. Swann...	5050	Lewisham	Army.
4th ,, 381. J. Bagshaw	4973	St. Pancras ...	Royal Navy.

Carpentering.

Each year brings increased work in this department.

The upper deck was caulked during the boys' midsummer holidays, and the lower deck during the Christmas holidays, while the majority of them had leave of absence.

The boats are now getting very old, are constantly being repaired, and it is rather more than the small staff of carpenters allowed can keep pace with the wear and tear of ship and boats.

A certain small number of boys who have passed out of school are told off to assist the carpenters by painting ship and boats, and otherwise performing light work.

Tailoring.

Each new boy is sent into the tailor's shop on his arrival on board, and is taught how to sew, in order to be able to mend his own clothes, sew on a button, sew a seam, &c., and receives a certificate of competency in that respect before commencing his instructions in seamanship.

The following is a list of work done in tailor's shop during the year:—

597 Serge frocks looped and buttoned.
545 Gold chevrons made.
12 Masthead pennants made.
105 Flags repaired.
80 Flags made for boys' use when signalling.
10 Boxing gloves repaired.
42 Haversacks repaired.
175 Oilskins repaired.
160 Sou'westers repaired.
9 Pilot jackets repaired.
14 Shoulder belts made for Quartermaster and signal boys.
3 Harmonium covers repaired.
4,320 Soap bags made.
187 Pairs trousers repaired.
113 Pairs trousers altered.
178 Serge frocks striped.
210 Seamanship stripes made.
2,312 Eyelet holes made in towels.
48 Straw hats repaired and ribboned.
2 Harmonium covers made (new).
6 Life belts covered.
1 Church screen repaired.
1 Hatchway cover altered.

Report of Medical Officer, 1895.

During the year the number of boys on board the "Exmouth" was 863.

DISEASES.	No. of Sick admitted into the Infirmary during 1895.	Percentage of Sick.	Deaths.
General Diseases—			
Febrile (95 per cent. Influenza)	180	20·85	...
Constitutional	30	3·47	1
Local—			
Diseases of the Eye	4	0·46	...
,, ,, Ear	2	0·23	...
,, ,, Respiratory System	6	0·69	...
,, ,, Circulatory ,, ...	1	0·11	...
,, ,, Nervous ,, ...	3	0·34	...
,, ,, Digestive ,, ...	120	13·9	...
,, ,, Cutaneous ,, ...	14	1·62	...
Accidental Injuries	140	16·22	...
Total	500	57·89	1

Boys' Teeth.

The Surgeon-Dentist in his report to me for the year 1895 says that he has inspected the teeth of all the boys twice, except those who have recently joined the ship; the advantage of this regular inspection being that he is able to discover the

first onset of decay in a tooth, and by promptly stopping it that tooth is saved for years to come. He has performed 561 operations for stopping teeth, and has extracted 70 permanent and 94 temporary teeth. The permanent teeth have in almost all cases been extracted on account of being the seat of pain, and were in such a condition that they were past being saved by stopping. Five boys have been fitted with artificial front teeth, most of them having been broken by falling or some other means of direct violence. On looking through the discharged boys he is glad to find that at least three have been admitted into the Royal Navy with more than the number (six) of defective or deficient teeth prescribed by the regulations of the Admiralty. In all cases (two had eight and one had ten bad teeth) they had been stopped, and were thus enabled to be admitted into the service. He is sure a general improvement is noticeable in the cleanliness of the boy's teeth, although there are still some that leave something to be desired in this respect.

The following table gives the numbers of the operations :—

	Extractions.	
Stoppings.	Permanent.	Temporary.
561	70	94

Religious Instruction.

Training Ship "Exmouth,"
Grays, Essex,
January, 1896.

To Captain Bourchier, R.N.

Dear Sir,

I am unable to report any new departure in the religious instruction given to the boys during the year just past. The work done is of the same nature and character as in former years, and has maintained such a quiet even tone, that one hardly knows how to write about it.

The Sunday services maintain their high character for reverence, brightness, and attention. The instruction on Tuesdays and Fridays has been regularly carried out in accordance with the syllabus laid down by the Ship Committee, and, being ably assisted by the Head Schoolmaster and his assistants, I have tried to raise the mental, moral, and spiritual tone of each boy.

On October 31st, the Lord Bishop of Colchester, accompanied by the Ven. Archdeacon of Essex, made his annual visit to the ship, when 203 boys who had been carefully prepared by myself, assisted by the masters, were presented for the sacred rite of confirmation. (The numbers in 1894 were 185.) The following day (November 1st) all the boys confirmed made their first Communion at All Saints' Church. Four times during the year all the boys on board who have been confirmed have also attended church for Holy Communion, and on these occasions their conduct is most praiseworthy.

The infirmary has been constantly visited, and I have tried to brighten and cheer the boys there by words of encouragement and sympathy. Perhaps the following extracts, giving the opinion of others on our work, will be more interesting and valuable than anything I may write :—

"Visited the ship, and confirmed 203 boys. Extremely pleased and cheered by the good order and reverent behaviour. The boys are a very great credit to their officers and

their Chaplain. After holding the confirmation, the boys went through their drill. They proved themselves a remarkably smart set of fellows. The field gun drill was surprisingly well done. I carry away a grateful remembrance of a most happy day. The devotion of the officers to their duties is beyond all praise. I congratulate Captain Bourchier, R.N., on the efficiency of both officers and boys.

(Signed) "H. FRANK COLCHESTER."

"Spent some time on the ship, and was very greatly impressed by the smartness, discipline, and good order. I feel quite unable to express the feelings of pleasure with which I have witnessed the boys drill. Their smartness, order, and discipline seem very nearly perfect, and reflect the highest credit on all concerned.

(Signed) "THOMAS STEVENS,
"Archdeacon of Essex."

"I was greatly interested and impressed by my visit to the 'Exmouth.' The boys have the bearing of seamen already, and the moral aspect of your work touches my heart, and almost makes me envy you the opportunity of doing good to the youth of the land. Such work must be of great value to your great country as well as to the boys.

(Signed) "S. D. BOORMAN,
"Chaplain of the U. S. Flag Ship 'San Francisco.'"

I must add, in conclusion, my sincere gratitude to yourself and Miss Bourchier for another year's experience of kindness to myself. And I am also deeply touched by the support, sympathy, and encouragement so kindly rendered by yourself and every officer on board, and to every member of the Committee I cannot but express my warmest and heartfelt thanks.

I am, dear Sir,

Yours very faithfully,

(Signed) FREDERICK HASLOCK,
Chaplain of the Training Ship "Exmouth."

General Remarks.

I am pleased to report that the boys' conduct has been very satisfactory during the past year.

Shortly after the annual examination by the Local Government Board Inspector, the school and band prizes were presented to those who had shown themselves most deserving. The prizes were distributed to the boys in the presence of the Committee by the Chairman, who congratulated the winners upon their success and spoke encouragingly to all who were assembled on the upper deck.

Our efforts to place trained boys in the Royal Navy show increased results, as we were successful in gaining entry for no less than 163 lads, thus beating the previous records for the last 19 years.

Naturally, all the boys look forward to the annual prize day as the most important event of the year, not only on account of the prizes they may gain, but also for the opportunity of renewing friendships made with the Managers at their previous schools. The Right Hon. Shaw Lefevre, M.P., very kindly distributed the prizes, making humorous references to the then peculiar political position; and, as a

shipowner, he spoke of the good openings there always were in a seafaring life for an earnest, hard-working lad. The various drills were carried out in a thoroughly energetic manner, and repeatedly roused the enthusiastic appreciation of all the visitors.

One whom we may consider a most valued friend to the boys—I refer to Mr. Halsey—still continues his generous gift of six silver watches on each anniversary of his daughter's birthday. This gift proves a great stimulus to the lads. The Chairman distributed these watches to the lads who had thoroughly earned them by good behaviour and diligence.

The annual confirmation service took place on board on October 31st. The Bishop of Colchester, accompanied by the Ven. Archdeacon of Essex, admitted to this sacred rite all those who had been attending class instruction under the Chaplain and Head Schoolmaster.

I need hardly refer to the actual necessity for some break in the ceaseless round of instruction and drill, as that is universally acknowledged; and, thanks to the generous subscripton to the recreation fund, and to the assistance of kind friends, I have been able now and then to obtain the services of good performers for the boys' entertainment during the winter months.

Encouragement is given to old boys to pay short visits to the ship, and keep in touch with those interested in their welfare.

In referring to the good results, and, I trust, lasting benefits, obtained by the boys during their course of training on the "Exmouth," I would draw your attention to the fact that nothing less than the devotion of all the officers to their duty could possibly produce the satisfactory results which I feel privileged to lay before you.

In conclusion, gentlemen, I tender you my sincerest thanks for your uniform kindness, sympathy, and good feeling which you have always extended to me in conducting this great and successful work.

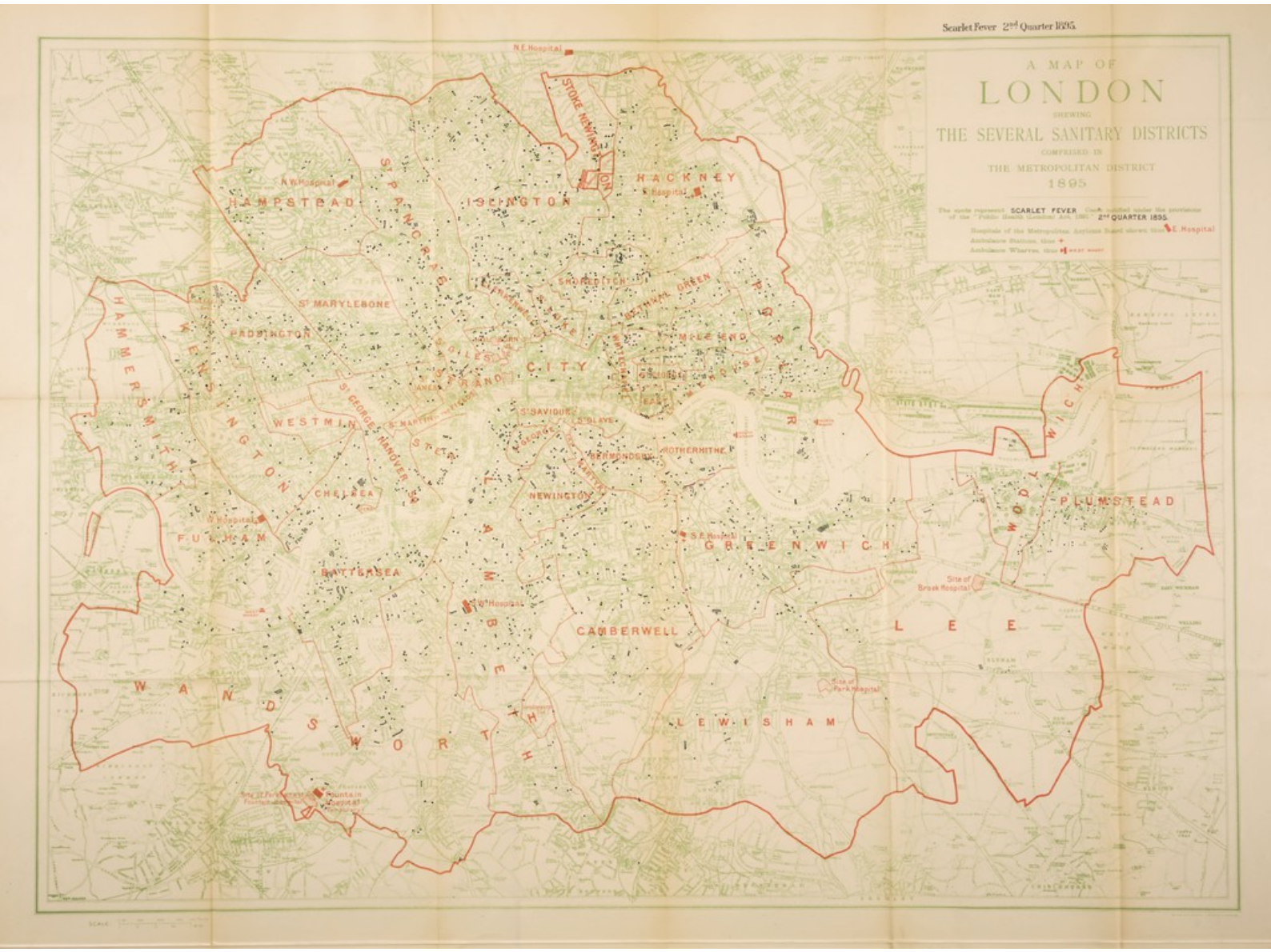
I beg to remain, Gentlemen,

Your obedient Servant,

(Signed) W. S. BOURCHIER,
Captain Superintendent.

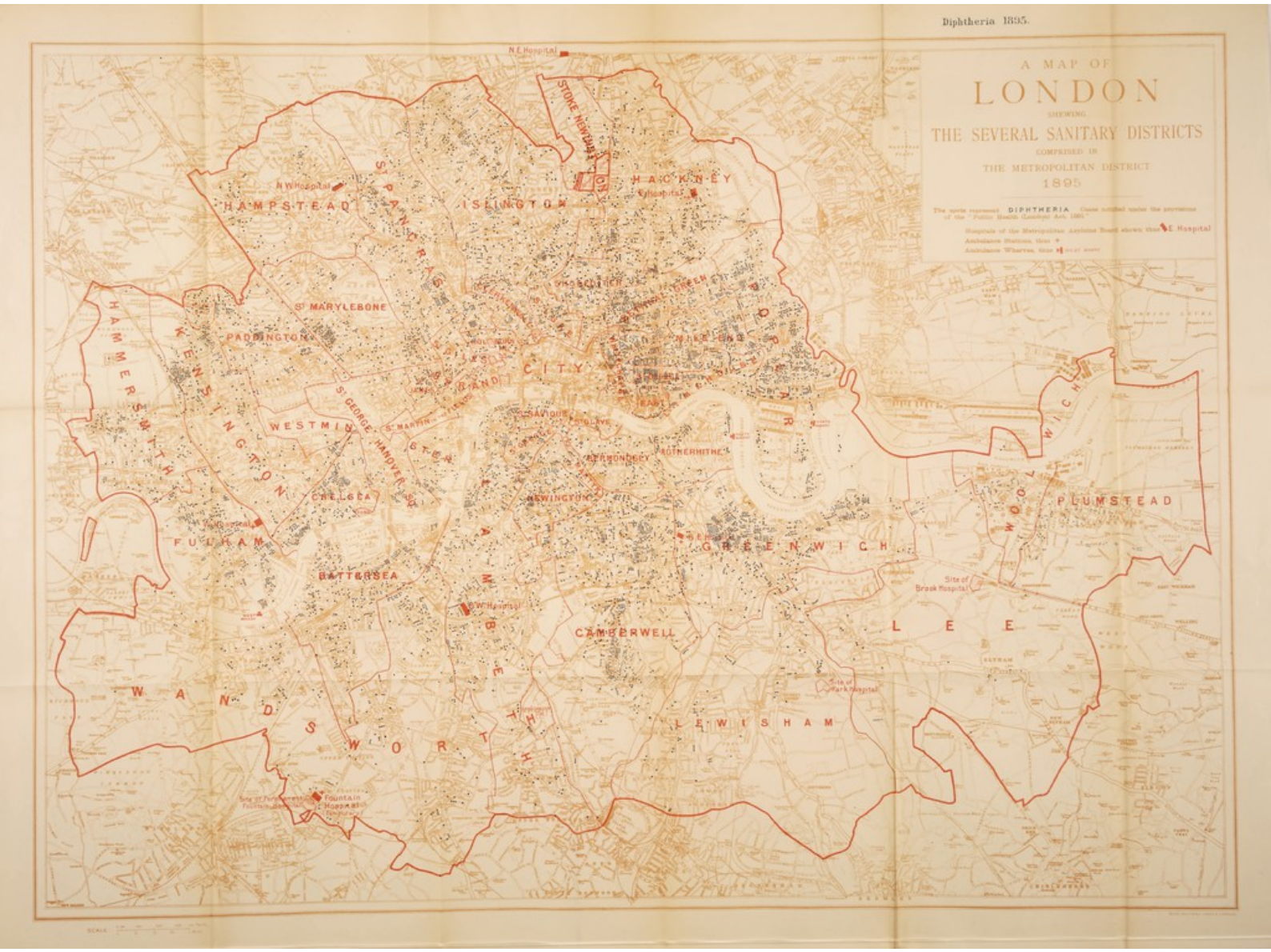

Scarlet Fever-1st Quarter, 1895.
A MAP OF
LONDON
SHEWING
THE SEVERAL SANITARY DISTRICTS
COMPRISED IN
THE METROPOLITAN DISTRICT
1895
SCARLET FEVER
1ST QUARTER 1895
N.E.Hospital
STOKE NEWINGTON
HACKNEY
E. Hospital
N.W.Hospital
HAMPSTEAD
ST PANCRAS
ISLINGTON
St MARYLEBONE
PADDINGTON
CLERKENWELL
SHOREDITCH
BETHNAL GREEN
HAMMERSMITH
KENSINGTON
CITY
EAST
WESTMIN
ST GEORGE HANOVER SQ
ST MARTIN
ST SAVIOUR
ST OLAVE
BERMONDSEY
ROTHERHITHE
CHELSEA
NEWINGTON
FULHAM
S.E.Hospital
GREENWICH
PLUMSTEAD
WOOLWICH
BATTERSEA
Site of Brook Hospital
N.W. Hospital
CAMBERWELL
LEE
WANDSWORTH
LEWISHAM
Site of Park Hospital

Scarlet Fever 2nd Quarter 1895.



Scarlet Fever—3rd Quarter 1895.

Scarlet Fever—4th Quarter.1895.


A MAP OF
LONDON
SHEWING
THE SEVERAL SANITARY DISTRICTS
COMPRISED IN
THE METROPOLITAN DISTRICT
1895
DIPTHERIA
N.E.Hospital
N.W.Hospital
S.W.Hospital
E.Hospital
HAMPSTEAD
ST PANCRAS
ISLINGTON
HACKNEY
STOKE NEWINGTON
St MARYLEBONE
PADDINGTON
HAMMERSMITH
KENSINGTON
CHELSEA
FULHAM
WESTMINSTER
CITY
BATTERSEA
CAMBERWELL
NEWINGTON
BERMONDSEY
ROTHERHITHE
WANDSWORTH
LAMBETH
GREENWICH
PLUMSTEAD
LEE
LEWISHAM
Site of Brook Hospital
Site of Park Hospital
Fountain Hospital

Smallpox 1895.

Enteric Fever 1895.