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Contributors

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REPORT FOR THE YEAR 1897

OF THE

STATISTICAL COMMITTEE,

WITH

APPENDICES.

(12th YEAR OF ISSUE.)

PRICE FIVE SHILLINGS.

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LONDON : INTED BY MCCORQUODALE & CO., LIMITED, CARDINGTON STREET, N.W

1898.



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METROPOLITAN ASYLUMS BOARD.

REPORT

OF THE

STATISTICAL COMMITTEE

FOR THE YEAR 1897.



METROPOLITAN ASYLUMS BOARD.

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REPORT FOR THE YEAR 1897

OF THE

STATISTICAL COMMITTEE

WITH

APPENDICES.

(12TH YEAR OF ISSUE.

LONDON MCCORQUODALE & CO., LIMITED, CARDINGTON STREET N.W 1895.



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STATISTICAL COMMITTEE.

1897 - 8.

Chairman-MR. W. M. ACWORTH, 47, St. George's Square, S.W.

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Ex Officio Members.

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CHIEF OFFICE-Norfolk House, Norfolk Street, Strand, London, W.C.



METROPOLITAN ASYLUMS BOARD.

REPORT OF THE STATISTICAL COMMITTEE FOR THE YEAR 1897.

To the Managers of the Metropolitan Asylum District.

15th June, 1898.

i. INTRODUCTORY.

The year 1897 has been marked by an important addition to the work of the Board. By an Order of the Local Government Board, dated April 2nd, 1897, the Asylums Board has been constituted the authority for dealing with children chargeable to some union or parish in the Metropolitan district, who are :--

- (a) "Suffering from ophthalmia or other contagious diseases of the eye;
- (b) Suffering from contagious disease of the skin or scalp;
- (c) Requiring either special treatment during convalescence or the benefit of seaside air;
- (d) Who, by reason of defect of intellect or physical infirmity, cannot properly be trained in association with children in ordinary schools; and
- (e) Who are ordered by two justices or a magistrate to be taken, under the Industrial Schools Act, 1866, to a workhouse or an asylum of the district."

The Managers are not in a position to receive these children until they have provided the necessary institutions for their reception.

The first of these institutions was acquired by the Managers, by transfer from the South Metropolitan School District, on December 26th, 1897. It is known as the S. Anne's Home, Herne Bay, and is used for the reception, medical treatment, and education of children in class (c) requiring convalescent treatment or sea-air. At the end of the year there were 68 children in this home, but as they were only under the Managers' care for five days of the year to which this report relates, we have not included any statistics concerning them in the present volume.

A site for the erection of a school for ophthalmic children was secured at Brentwood in November last. The area is $28\frac{1}{2}$ acres and the cost was $\pounds 2,300$.

ii. INFECTIOUS DISEASES.

(1.) During the year there were notified in the Metropolis Notification Statistics. 45,417 (49,708)* cases of infectious disease. Of these, 39,251 (42,876) were legally eligible for admission to the Managers' hospitals. The remainder-mainly cases of erysipelas, but including also 264 (277) cases of puerperal fever-were not eligible. Out of the 39,251 legally eligible cases, 22,964 (22,457)† cases, or 58.5 (52.37) per cent., were actually admitted.

Since 1890, the first complete year in which compulsory notification was in force, the proportion of admissions to the total number of legally admissible cases has been as follows :- In 1890, 33.59 per cent.; in 1891, 36.69 per cent.; in 1892, 43.17 per cent.; in 1893, 36.91 per cent.; in 1894, 52.23 per cent.; in 1895, 50.31 per cent.; in 1896, 52.37 per cent.; and in 1897, 58.5 per cent.

Table A, pp. 13-14, 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 1897.

Notifications of cases of infectious disease are, under the Public Health (London) Act, 1891, sent to the medical officer of health of the district in which the patient is resident. These districts are those set forth in the table, and are under the control of vestries in the case of single parishes, and of district boards of works in the case of united parishes, and these authorities are known as the sanitary authorities for their respective districts. The admission of patients into the Managers' hospitals, on the contrary, must be assigned to the poor law districts which are responsible for the payment of the cost of the patients' maintenance in hospital. The respective areas of the sanitary districts and the poor law districts are not identical; hence the admissions cannot be shown side by side with the notifications in table A, but are given separately in table III., on p. 23. This is only oneand a comparatively insignificant one-of the many instances known to persons concerned in the local government of London of the inconvenience, confusion, and waste of money which result from the overlapping of the various metropolitan areas.

Facing p. 15 we give a chart showing week by week throughout the year by continuous lines the number of cases of each admissible disease notified, and by dotted lines the number of cases of scarlet fever and diphtheria actually admitted.

The divergence of the notification and admission lines of scarlet fever

* Italic figures in brackets throughout are the corresponding figures for 1896. † Including the cases detained for observation at South Wharf, see p. 92, and Tottenham and other extra Metropolitan cases shown on pp. 23 and 98.

F			TAD.	LE A	-Cases	of Inj	fectious	Dise	ase No.	tified,	and	Deatl	is therej	from,	in I	ondon	in 18	97.						
				NOTIFICAT	IONS OF, A	ND DE	ATHS PRO	N, THOS TO THE	MANAGE	ABLE D	SPITALS	s winci	I ARE ELA	OIBLE 1	or A	DMISSION		N	OT INCAS	1000	OF OTHER	North	ARLE	
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	Sanitary Authorities in whose Districts the cases were resident.	Population. 1897.	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.	Cholem.	Erysipelas.	Puerperal Fever.	TOTAL	GRAND TOTAL OF NOTUPICATIONS
	WEST DISTRICTS. Paddington	$126.161 \\ 171,427 \\ 105,959 \\ 120,040 \\ 96,692 \\ 80,330 \\ 53,027 \\ 22,576 \\$	1 	489 747 396 759 488 177 181 131	314 322 147 378 306 120 109 50	$ \begin{array}{c} 10 \\ 10 \\ 7 \\ 10 \\ 6 \\ \hline 1 \\ 1 \end{array} $	46 116 45 53 52 39 28 13		860 1,195 595 1,200 852 337 819 198	$ \begin{array}{r} 6 \cdot 8 \\ 7 \cdot 0 \\ 5 \cdot 6 \\ 10 \cdot 0 \\ 8 \cdot 8 \\ 4 \cdot 2 \\ 6 \cdot 0 \\ 8 \cdot 8 \end{array} $	1111111	21 30 11 26 17 7 13 8	64 81 30 63 54 17 23 8	$9 \\ 21 \\ 8 \\ 12 \\ 14 \\ 10 \\ 6 \\ 3 \\ 3$	1111111	$94 \\ 132 \\ 49 \\ 101 \\ 85 \\ 34 \\ 42 \\ 14$	0.75 0.77 0.46 0.84 0.88 0.42 0.79 0.62	1111111	5451212		$136 \\ 237 \\ 92 \\ 134 \\ 98 \\ 51 \\ 66 \\ 24$	8 16 8 14 4 1 4 1	$145 \\ 259 \\ 105 \\ 154 \\ 103 \\ 54 \\ 72 \\ 27$	1,005 1,454 700 1,354 955 391 391 225
	NORTH DISTRICTS. Marylebone Hampstead St. Pancras Islington Stoke Newington Hackney	$\begin{array}{c} 140,808\\77,275\\242,255\\341,134\\34,136\\216,698\end{array}$	4 3323	397 224 942 1,577 108 1,373	218 104 532 704 53 751	3 3 10 29 1 29	88 32 223 259 37 209	11111	710 363 1,710 2,572 201 2,365	$5 \cdot 1$ $4 \cdot 7$ $7 \cdot 0$ $7 \cdot 6$ $5 \cdot 9$ $10 \cdot 9$	 	$9 \\ 6 \\ 24 \\ 61 \\ 2 \\ 37$	46 17 114 129 19 134	$ \begin{array}{r} 14 \\ 5 \\ 38 \\ 45 \\ 10 \\ 35 \\ 35 \\ \end{array} $		$69 \\ 28 \\ 177 \\ 236 \\ 31 \\ 206$	0.49 0.36 0.73 0.69 0.91 0.95	111111	1 2 8 1 1 5	2 	254 40 388 313 23 273	$5 \\ 2 \\ 15 \\ 27 \\ 3 \\ 11$	$262 \\ 44 \\ 414 \\ 342 \\ 27 \\ 289$	972 407 2,124 2,914 228 2,654
	CENTRAL DISTRICTS. St. Giles	37,840 12,741 23,552 30,493 66,162 41,279 30,228	3. 1 8 	$209 \\ 44 \\ 125 \\ 120 \\ 366 \\ 238 \\ 95$	54 12 39 159 345 185 60	22222 224 13	$32 \\ 5 \\ 19 \\ 26 \\ 64 \\ 41 \\ 23$		300 64 193 307 779 465 183	$\begin{array}{r} 8 \cdot 0 \\ 5 \cdot 0 \\ 8 \cdot 2 \\ 10 \cdot 1 \\ 11 \cdot 8 \\ 11 \cdot 3 \\ 6 \cdot 1 \end{array}$	$-\frac{1}{2}$ $-\frac{1}{1}$ -1	7 2 3 4 14 13 8	7 3 5 16 48 21 10		111111	$20 \\ 7 \\ 14 \\ 25 \\ 74 \\ 38 \\ 28$	$0.53 \\ 0.55 \\ 0.60 \\ 0.82 \\ 1.12 \\ 0.92 \\ 0.93$	111111	111111	21	94 17 17 47 96 86 26	51 1 51 51 51	96 17 17 47 98 88 30	396 81 210 354 877 553 213
	EAST DISTRICTS. Shoreditch	$121,883 \\ 129,098 \\ 79,724 \\ 47,917 \\ 58,508 \\ 111,883 \\ 169,811 \\$	1 2 1 - 9	625 723 500 242 427 816 1,041	352 508 283 183 190 433 670	$ \begin{array}{r} 19 \\ 41 \\ 18 \\ 8 \\ 3 \\ 12 \\ 34 \\ \end{array} $	$107 \\ 106 \\ 55 \\ 43 \\ 52 \\ 83 \\ 195$		1,104 1,381 857 477 672 1,344 1,949	$\begin{array}{c} 9 \cdot 1 \\ 10 \cdot 7 \\ 10 \cdot 8 \\ 10 \cdot 0 \\ 11 \cdot 5 \\ 12 \cdot 0 \\ 11 \cdot 5 \\ 12 \cdot 0 \\ 11 \cdot 5 \end{array}$	1	29 25 15 14 12 28	78 84 34 29 62 120	$20 \\ 17 \\ 8 \\ 10 \\ 4 \\ 23 \\ 50$	-	$128 \\ 127 \\ 57 \\ 52 \\ 45 \\ 97 \\ 178$	$1.05 \\ 0.99 \\ 0.72 \\ 1.09 \\ 0.77 \\ 0.87 \\ 1.05$	111-111	2 1 3		$226 \\ 383 \\ 119 \\ 85 \\ 87 \\ 145 \\ 261$	$\begin{array}{c}2\\7\\4\\3\\4\\7\\12\end{array}$	231 391 123 90 91 152 277	1,385 1,772 980 567 763 1,496 2,226
	Sourn Districts. St. Saviour, Southwark St. George, Southwark St. George, Southwark St. Olave, Southwark Bermondsey Rotherhithe Lambeth Battersea Wandsworth Greenwich Lewisham (excluding Penge) Woolvich Plumstead Lee Port of London	$\begin{array}{c} 24,919\\ 60,388\\ 122,191\\ 11,480\\ 85,629\\ 40,643\\ 300,^{0}48\\ 168,877\\ 195,612\\ 257,512\\ 257,512\\ 41,409\\ 61,057\\ 39,215\\ \end{array}$	$ \begin{array}{c} 1 \\ 1 \\ 1 \\ 2 \\ 5 \\ 1 \\ 2 \\ 1 \\ 2 \\ 1 \\ 2 \\ 1 \\ 2 \\ 1 \\ 10 \end{array} $	131 381 768 88 1,585 1,024 1,191 817 298 224 373 210 15	$\begin{array}{c} 96\\ 185\\ 317\\ 29\\ 269\\ 81\\ 726\\ 603\\ 503\\ 1,151\\ 217\\ 148\\ 132\\ 110\\ 4\end{array}$	8 6 14 9 5 15 18 10 19 9 2 3 	$\begin{array}{c} 16\\ 40\\ 79\\ 10\\ 61\\ 24\\ 183\\ 98\\ 149\\ 144\\ 46\\ 18\\ 25\\ 17\\ 9\end{array}$		$\begin{array}{c} 251\\ 613\\ 1,178\\ 128\\ 847\\ 398\\ 2,305\\ 1,696\\ 2,542\\ 1,562\\ 563\\ 392\\ 533\\ 338\\ 39\end{array}$	10·1 10·2 9·7 11·2 9·8 7·7 13·7 8·7 9·8 8·8 6·6 9·5 8·8 8·6 —	1-111110011111	7 14 33 21 42 22 22 447 29 22 29 8 6 3 	12 28 65 2 262 21 144 106 111 170 706 333 24 17 	2 10 9 1 3 2 26 19 16 31 29 7 4 3 3 		21 53 107 5 109 45 212 172 156 238 133 52 45 333 52 $-$	0.85 0.88 0.48 1.28 1.11 0.71 1.02 0.80 0.93 0.75 0.61 1.09 0.59 	**************		171 4	288 888 159 10 94 232 211 2397 2399 81 366 51 2	$ \begin{array}{c} 1 \\ 16 \\ 1 \\ 4 \\ 27 \\ 7 \\ 9 \\ 14 \\ 10 \\ 2 \\ 2 \\ 3 \\ 1 \\ - \end{array} $	28 90 175 11 95 77 219 254 313 251 83 39 53 52 2	$\begin{array}{c} 279\\ 703\\ 1,359\\ 942\\ 2,691\\ 2,524\\ 1,950\\ 2,855\\ 1,813\\ 646\\ 431\\ 586\\ 390\\ 41\end{array}$
	Totals	4,463,169	104	22,848	12,803	+389	3,103	4	39,251	8.8	16	778	2,240	557	1	3,592	0.81	1	67	38	5,794	264	6,164	45,415
	admitted to the Managers' Hospitals (un-corrected for mistakes in diagnosis))	-	90•38	66-99	51-6	4	*30-36	50.0	58-26	-	81-25	76.70	44.06	22•26	-	48.14	-	ar a	Ho	age o spital	of death s.	s in	the Ma	nagers'

TABLE A.-Cases of Infectious Disease Notified, and Deaths therefrom, in London in 1897.

* This does not include 186 cases admitted into general hospitals under arrangements made with those hospitals by the Managers, but if such cases be included the number of admissions will be increased to 1,129, and the percentage to 36:35.
 † Only cases of membranous croup which are certified to be of a diphtheritic nature may be admitted into the Board's hospitals.

13-14



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and diphtheria after the middle of July indicates the extent to which the hospital accommodation fell short of the requirements of those diseases.

The figures upon which the chart is based are given in table A¹, below.

		Se	CARLET FE	VER.		DIPHTHERI	А.
WE	EEK ENDED	Notifications.	Admissions.	Percentage of Admissions.	Notifications.	Admissions.	Percentage of Admissions.
	1897.	1.00					
1	January 9	402	281	69.90	238	103	43.28
2	" 16	324	204	62.96	211	108	51.18
3	,, 23	372	245	65.86	236	93	39.41
4	., 30	341	251	73.61	229	115	50.22
4 5 6	February 6	336	238	70.83	205	95	46.34
	,, 13	316	220	69.62	208	104	50.00
7 8	,, 20	313	221	70.61	240	104	43.33
8	27	828	232	71.83	263	102	38.78
9	March 6	271	202	74.54	256	112	43.75
10	, 13	298	215	72.15	209	97	46.41
11	,, 20	302	200	66.22	224	113	50.45
12	, 27 A mil 27	303	217	71.62	212	90	42.45
13	April 3	298	208	69.80	187	92	49.20
14	, 10	288	212	73.61	195	103 82	52.82
15 16	., 17 ., 24	285 334	207 260	72.63	168 180	82 95	48.81
	, 24 Man 1	299		77.84			52.78
17	May 1		220	73.58	172 203	102 107	59.30
18 19	,, 8 ., 15	341 314	225	65.98	195	94	$52.71 \\ 48.21$
20	" 15 " 22	361	234	74.52	206	108	
20 21	00	356	307 265	$85.04 \\ 74.44$	206	108	52.43
21 22		388			218	121 123	55.50
22 23		342	$271 \\ 252$	69.85	220	120	55.91
23 24	$ ", 12 \\ ", 19 $	365	269	73.68 73.70	220	120	53.33
25	., 26	390	269	67.44	202	119	52.59
26	July 3	371	304	81.94	208	141	57.21
20 27	July 5	428	339	79.21	261	162	62.95
28	17	420 512	374	78.05	318	136	62.07 42.77
29	24	572	391	68.36	299	119	39.80
30	91	508	352	69.16	280	139	49.64
31		490	369	75.30	260	145	55.56
32	14	445	331	74.38	269	157	58.36
33	91	439	334	75.91	171	101	59.06
34	28	429	351	81.82	206	121	58.74
35	September 4	514	365	71.01	200	121	56.22
36	- 11	530	366	69.06	255	131	54.51
37	19	608	363	59.70	267	156	58.43
38	95	735	337	45.85	309	162	52.43
89	October 2	767	320	41.72	290	162	56.55
40	9	685	382	55.77	303	153	50.50
41	16	788	421	53.43	351	153	43.59
42	99	797	335	42.03	363	149	41.05
43	90	710	410	57.75	318	145	52.20
44	November 6	657	336	51.14	303	163	53.80
45	12	550	451	82.00	279	148	53.05
46	00	544	385	70.77	301	150	49.83
47	97	536	360	67.16	286	157	54.90
48	December 4	425	319	75.06	251	145	57.77
49	11	440	313	70.81	296	165	56.12
50	19	386	247	63.99	277	164	59.21
51	25	306	218	71.24	212	141	66.51
52	Jan. 1, 1898	414	264	63.53	280	141	50.18
		22,848	15,256	66.77	12,803	6,592	51.49

TABLE A¹.—Cases of Scarlet Fever and Diphtheria notified, Number admitted, and Percentage of Admissions to Notifications for each week during 1897.

From the beginning of the year up to about the middle of July all scarlet fever applicants were being admitted, the average weekly percentage of notified cases admitted being 72.45. From the middle of July to the middle of December it became necessary to refuse admission to a certain proportion of applicants, and the average weekly percentage fell to 62.38.

Towards the end of July the Managers increased the accommodation for diphtheria cases to an extent which, with a few exceptions, met all requirements. In fact, during the first half of the year, when all applicants were being admitted, the average weekly percentage of notified cases admitted was 49.86, as compared with 51.72 during the period when applications were occasionally being refused.

The following table, A², shows the number of cases of infectious disease admissible to the Managers' hospitals which were notified during the years 1890 to 1897 :---

YEARS.	Scarlet Fever.	Diphtheria.	Enteric.	Typhus.	Smallpox.	TOTALS.
1890	15,330	5,870	2,877	35	60	24,172
1891	11,398	5,907	3,372	27	114	20,818
1892	27,095	7,781	2,465	20	423	37,784
1893	\$6,901	13,026	3,663	22	2,813	56,425
1894	18,440	10,655	3,360	21	1,192	33,668
1895	19,757	10,772	3,506	14	979	35,028
1896	25,647	13,362	3,190	6	225	42,430
1897	22,848	12,803	3,103	4	104	38,862

TABLE A².--Number of cases of admissible Diseases* notified during the years from 1890 to 1897.

Typhus fever, which at one time was very prevalent in London, has almost disappeared, and both enteric fever and smallpox appear well under control. The most striking feature of the foregoing table, and the least satisfactory, is the sudden increase in the number of diphtheria cases which occurred in 1893, and its steady maintenance since.

The proportion which the hospital admissions bear to the total number of cases is of great importance to the Managers in considering the question of the amount of accommodation which should be provided to meet the wants of the metropolis. In this connection the following table will be of interest:—

DISEASES.	 1890.	1891.	1892.	1893.	1894.	1895.	1896.	1897.
Scarlet Fever	 42.82	46.84	48.80	39.68	63.94	58.20	62.65	66.99
Diphtheria	 17.87	25.07	30.19	24.52	38.89	41.55	89.92	51.64
Enteric Fever	 22.49	27.34	25.27	20.01	20.24	24.13	27.02	30.36
Typhus Fever	 42.86	70.37	60.00	36.36	61.90	42.86	33.33	50.00

TABLE A³.—Percentage of Admissions to Notifications of each admissible Disease during the years 1890 to 1897.

N.B.--These percentages are not corrected for cases of mistaken diagnosis discovered after admission to hospital, and therefore do not correspond exactly with the percentages obtained by taking the corrected admissions as shown in the Fever Statistical Tables on p. 32.

From the point of view of hospital provision, the diseases of greatest interest to the Managers are scarlet fever and diphtheria. So few typhus fever cases now occur that they may be disregarded; and any cases of enteric fever which the Managers may from time to time be unable to accommodate in their own hospitals can generally be received into one or other of the large general hospitals. Smallpox is not included in the table, as it is not dealt with in the infectious hospitals in London, and the considerations which govern the provision to be made for it are essentially different from those which apply to the other diseases.

If we then confine consideration to the two diseases specified, we find that the proportion of scarlet fever admissions has risen from 42.82 to 66.99, and of diphtheria from 17.87 to 51.64. The scarlet fever percentage would have been considerably higher if all patients who sought admission could have been received, as in some weeks during the past year upwards of 80 per cent. of the notified cases were admitted.

MAPS. Maps spotted to show the distribution of the principal fevers throughout the Metropolis during 1897 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 Clerkenwell and the eastern and southeastern districts.

On the *Enteric Fever* map, a few considerable aggregations of cases are apparent, notably in St. Pancras and Poplar.

Smallpox and Typhus Fever cases are shown on one map, the former being represented by spots and the latter by crosses. The only considerable outbreak of smallpox occurred in Camberwell.

AGE AND SEX DISTRIBU-TION. TON. TON. Tables A⁴ and A⁵ exhibit the age and sex of cases notified as scarlet fever and diphtheria respectively during the year. It will be seen that both diseases are most prevalent amongst children; over two-thirds of the cases being under ten years of age. But whereas scarlet fever is most prevalent amongst children from five to ten years of age, diphtheria is most so amongst those under five years.

AGES.		Males.	Females.	Total.
Under 1	 	 191	190	381
1 to 2	 	 460	426	886
2 ,, 3	 	 772	815	1,587
3 ,, 4	 	 1,065	1,083	2,148
4 ,, 5	 	 1,137	1,216	2,853
Total under 5	 	 3,625	3,730	7,355
5 to 10	 	 4,154	4,840	8,994
10 ,, 15	 	 1,744	2,054	3,798
15 ,, 20	 	 651	594	1,245
20 ,, 25	 	 248	343	591
25 ,, 30	 	 126	212	338
30 ,, 35	 	 69	128	197
35 ,, 40	 	 . 27	55	82
40 ., 45	 	 20	30	50
45 ,, 50	 	 13	10	23
50 ,, 55	 	 6	10	16
55 ,, 60	 	 	5	5
Upwards	 	 4	4	8
Unrecorded	 	 62	74	136
Sex unrecorded	 	 		10
Total	 	 10,749	12,089	22,848

TABLE A⁴.—Ages of cases notified as Scarlet Fever during 1897.

TABLE A ³	·.—Ages of	cases notified	d as Dipht.	heria duri	ng 1897.
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	AGES.	-		Males.	Females.	Total.
Under 1			 	140	140	280
1 to 2			 	378	358	736
2 ,, 3			 	540	515	1,055
3 ,, 4			 	652	644	1,296
4 ,, 5			 	577	668	1,245
Total und	ler 5		 	2,287	2,325	4,612
5 to 10			 	1,844	2,223	4,067
10 ,, 15			 	687	901	1,588
15 ,, 20			 	321	449	770
20 ,, 25			 	181	369	550
25 ,, 30			 	129	313	442
30 ,, 35			 	83	191	274
35 ,, 40			 	54	112	166
40 ,, 45			 	14	72	86
45 ,, 50			 	10	40	50
50 ,, 55			 	10	33	43
55 ,, 60			 	1	13	14
Upwards			 	3	14	17
Unrecord	ed		 	42	77	119
Sex unree			 			5
	Total		 	5,666	7,132	12,803

19

Ambulance (2.) The Ambulance Committee's annual report on p. 45 shows that the smaller number of cases of infectious disease in London was balanced by the larger percentage of those cases admitted into hospital, and that consequently the work done by the ambulances was practically equal to that of the preceding year.

For many years three ambulance stations, namely, the Eastern Station at Homerton, the Western Station at Fulham, and the South-Eastern Station at Deptford, were sufficient for the work of the land ambulance service. But the work has increased so much in recent years—and there is every evidence of a still further increase—that the provision of additional ambulance stations became absolutely necessary. The Managers accordingly decided to erect stations adjoining the Brook Hospital, the North-Western Hospital, and the South-Western Hospital. The first named was opened on August 18th, 1896, the second on September 1st, 1897, and the third will be opened early in 1898.

During the year 22,916 $(22,417)^*$ fever, diphtheria, and smallpox patients were conveyed to the various hospitals of the Managers; 8,941 (9,998) convalescent patients were transferred to the Northern and Gore Farm Hospitals; and 8,917 (9,528) recovered patients were brought back from those hospitals to London. Further, 361 (433) private persons were removed on payment to other places than the Managers' hospitals; 752 (1,287) 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 186 (109) enteric patients were removed from their homes to the general hospitals, where arrangements for their reception had been made by the Managers.

Altogether, 42,758 (44,374) removals were effected by the land ambulance service during 1897, and the various vehicles made 26,055 (26,646) journeys, and ran 271,411 (296,792) miles.

The steamboats of the river ambulance service conveyed 1,283 (2,399) passengers to and from the hospital ships at Long Reach; of that number 69 (188) were patients taken to the hospital ships, 55 (243) were recovered patients brought back to London, and 1,159 (1,968) were visitors, staff, workmen, &c.

(3.) FEVER AND DIPHTHERIA.—The Park Hospital at Hither Green, Lewisham, which was opened by T.R.H. the Prince and Princess of Wales, began to receive patients on November 8th last. This hospital is designed to accommodate 548 patients. During the current year it is hoped that the Grove Hospital at Tooting will be

In

completed, and that the 520 beds which it will provide may be brought into use. There will then only remain, to complete the Managers' scheme of hospital accommodation as at present laid down, the erection of the Southern Convalescent Hospital, and certain works of reconstruction and enlargement at the Western and North-Eastern Hospitals. The works at the Western Hospital will probably be completed this year. When the last of the above-mentioned works are finished, the Managers will have at their disposal for fever and diphtheria cases (including typhoid fever and isolation cases) upwards of 6,000 beds. In addition there is the Gore Farm Hospital, which can furnish 740 beds for convalescent fever cases, but only so long as it is not required for its proper function of a smallpox convalescent hospital. Though, since 1887, the Managers have practically doubled their fever accommodation, which has now reached a magnitude of which no one dreamed only five years ago, our present report records, for the fifth year in succession, the entire failure of that accommodation to meet all the demands made upon it during the season of greatest pressure.

SMALLPOX.—For this disease the Managers possess 300 beds at the hospital ships, and are about to erect further buildings, capable of containing 400 beds, on the Joyce Green estate, adjoining the hospital ships. Gore Farm, if at any time the Managers are compelled to reclaim it for its original purpose, can, for smallpox convalescents, furnish about 1,192 beds more.

Hospital Statistics.

(4.) FEVER.—On the last day of 1896 there were $4,566 (3,500)^*$ patients in the fever hospitals then open.

By May 7th, 1897, the number under treatment had fallen to the minimum, 3,136 (*April 18th*, 1896, 3,217) After that date the number rose until December 9th, when the maximum, 5,023 (*November 2nd*, 1896, 4,996), for the year was attained, and it then declined until the end of the year, when 4,668 (4,566) patients remained under treatment.

The following was the distribution of patients amongst the various hospitals on December 9th :---

HOSPITAL.		BEDS OCCUPIED.								
HOSPITAL.	Scarlet.	Diphtheria,	Typhus.	Enteric.	Other Diseases,	TOTAL.				
Eastern Hospital	103	244		20		367				
North-Eastern Hospital	424					424				
North-Western "	316	110		87		463				
Western "	238	103		18		359				
South-Western "	202	88		20		310				
Fountain "	240	126				366				
South-Eastern "	251	142		40		433				
Park " …	208	19				227				
Brook ,,	342	152		21		515				
Northern "	790	85				875				
Gore Farm "	684					684				
TOTALS	3,798	1,069		156		5,023				

* Italic figures in brackets throughout are the corresponding figures for 1896.

Tables I. to VIII. and the accompanying chart summarise the several fever hospital tables given on pp. 66 to 91.

	Re-	Admitted o	luring 1897.	Total		arged g 1897.		S. Greek	Re-
DISEASES.	maining on Dec. 31, 1896.	Direct from homes.	From other Hospitals of Board.	under treatment during 1897.	Re- covered.	To other Hospitals of Board.	Died during 1897.	Mortality per cent.	mainin; on Dec. 3) 1897.
Scarlet Diphtheria Enteric Typhus	3,685 724 108 1	$15,113 \\ 5,673 \\ 664 \\ 2$	8,072 752 	18,798 6,897 772 3	$14,631 \\ 4 498 \\ 542 \\ 3$	8.072 752 	619 9~7 124 	4.07 17.69 18.64 	3,548 912 106
Totals Other diseases	4,518 48	$21,\!452$ $1,\!417$	8,824 	$25,970 \\ 1,465$	$\substack{19,674\\1\ 223}$	8,824	1,780 140	8.07 10.07	$\begin{smallmatrix}4&566\\&102\end{smallmatrix}$
Grand Totals	4,566	22,869	8,824	27,435	20,897	8,824	1,870	8.19	4,668

TABLE I.-Admissions, Discharges, and Deaths at Fever Hospitals during 1897.

Nores.—The mortalities returned as above include 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. Cases of enteric fever admitted into general hospitals under arrangements made with those hospitals by the Managers are not included in this table. If they were, the number of admissions would be increased by 186.

The total number of patients treated during the year was greater than in any previous year, but the death rate (8.19) is the lowest on record. This is the more satisfactory as the increase in the number treated was mainly of diphtheria cases.

			-	Al	DMISS	SIONS.			1.19.5		DISCH	ARGES.	1
TH.	E Scarlet.		Dipht	heria.	Er	nteric.	teric.		Other Diseases.				CHS.
MONTH.	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.	Typhus.	Direct from Homes.	From other Hospitals of Board.	Total (acute cases).	Recovered	To other Hospitals of Board.	DEATHS.
Jan Feb March April May June July Aug Sept	1,063 897 933 933 1,095 1,142 1,549 1,513 1,499 1,659	532 499 285 438 457 489 871 874 965 1026	$\begin{array}{r} 412\\ 562\\ 426\\ 354\\ 419\\ 438\\ 557\\ 509\\ 518\\ 542\\ \end{array}$	$45 \\ 55 \\ 66 \\ 58 \\ 73 \\ 68 \\ 66 \\ 78 \\ 71 \\ 60$	49 46 38 18 22 31 47 89 97 90	···· ··· ···	···· ··· ···	$71 \\ 90 \\ 79 \\ 87 \\ 115 \\ 146 \\ 134 \\ 126 \\ 126 \\ 166 \\ 166$	···· ··· ···	1,595 1,395 1,476 1,392 1,651 1,758 2,287 2,287 2,237 2,240 9,457	1,743 1,793 1,671 1,520 1,325 1,301 1,726 1,543 1,903 2,999	577 554 851 496 530 557 936 952 1,036 1 097	$164 \\ 124 \\ 124 \\ 110 \\ 138 \\ 106 \\ 178 \\ 169 \\ 166 \\ 170 \\ 166 \\ 170 \\ 170 \\ 100 $
Oct Nov Dec	1,659 1,667 1,163	1,036 935 691	559 577	94 18	90 75 62		1	143 134		2,457 2,445 1,936	2,292 2,050 2,030	1 097 1,029 709	$ \begin{array}{r} 176 \\ 193 \\ 222 \\ \end{array} $
Totals	15,113	8,072	5,673	752	664		2	1,417		22,869	20,897	8,824	1,870

TABLE II.—Monthly Admissions, Discharges, and Deaths at Fever Hospitals during 1897.

The total monthly admissions were lowest in April, and highest in October.

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

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

The only two cases of typhus fever admitted were both notified as enteric fever patients.

Diphtheria cases were not admitted to the Managers' hospitals until October 23rd, 1888. Since then the minimum admissions have occurred twice in January, four times in February, and three times in April; while the maximum admissions took place once in July, once in August, twice in September, once in October, twice in November, and twice in December.

The maxima of scarlet fever, diphtheria, and enteric fever admissions must not, however, be regarded as indicating with accuracy the greatest seasonal prevalence of these diseases, 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 was impossible.





						-		
PARISH OR UNION.		Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.
Kensington	• •••	538	191	27		85	791	75
Fulham	• •••	779	250	14		36	1,079	78
Paddington	• •••	854	186	10		21	571	59
Chelsea		388	183	10		29	610	61
St. George's, Hanover Squa	re	300	113	10		18	441	32
Westminster	• •••	217	44	2		18	281	15
St. Marylebone		821	111	23		32	487	40
St. Paneras		687	232	31		59	1,009	78
Hampstead		110	33			4	147	12
Islington	• •••	978	293	64		72	1,407	112
Hackney		793	284	52		66	1,195	99
St. Giles & St. George, Bloo	msbury	155	19	3		13	190	11
Strand		66	18	6		6	96	6
Holborn		635	369	39		77	1,120	84
London, City of	• •••	68	29	2		11	110	7
Shoreditch	• •••	486	163	28		69	746	77
Bethnal Green		423	170	18		73	684	57
Whitechapel		365	147	12		61	585	32
St. George-in-the-East		161	82	8	1	20	272	23
Stepney		298	, 95	14		37	444	27
Mile End Old Town		374	145	9		50	578	37
Poplar		452	192	31		73	748	63
St. Saviour's		959	343	39		113	1,454	115
St. Olave's		630	199	24	1	56	910	100
Lambeth		893	293	42		72	1,300	103
Wandsworth and Clapham		1,729	487	51		94	2,361	177
Camberwell		603	482	26		69	1,180	144
Greenwich		494	205	48		68	815	74
Woolwich		424	180	14		31	649	42
Lewisham		268	116	4		22	410	23
Port and Tower of London		1					1	
Tottenham		162	16	3		11	192	7
Beyond Metropolitan Area		2	3			1	6	
Totals		15,113	5,673	664	2	1,417	22,869	1,870

TABLE III.—Admissions and Deaths of Patients at Fever Hospitals during 1897, divided according to Parishes or Unions.

AGES.		MALES.		F	EMALES.			TOTAL.			
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortalit, per cent		
Under 1	93	17	18.3	86	22	25.6	179	39	21.8		
1 to 2	282	51	18.1	292	87	12.7	574	88	15.3		
2 ,, 3	555	68	12.3	558	47	8.4	1,113	115	10.3		
3 ,, 4	786	67	91	746	65	. 8.7	1,482	132	8.9		
4 " 5 …	779	41	5.3	813	31	3.8	1,592	72	4.5		
Fotals under) 5 years}	2,445	244	10.0	2,495	202	8.1	4,940	446	9.0		
5 to 10	2,826	53	1.8	3,206	77	2 4	6,032	130	2.2		
10 ,, 15	1,270	17	1.3	1,862	6	0.4	2,632	23	0.9		
15 ,, 20	430	5	1.2	382	3	0.8	812	8	1.0		
20 ,, 25	156	4	5 6	186	1	1 1	342	5	5		
25 ,, 30	71	1		101			172	1			
30 ,. 35	- 33	1		70	1	1 1	103	2			
35 ,, 40	17			21			38				
40 ., 45	7	3	> 3.1	15		5 0.72	22	3	> 1.7		
45 ,, 50	7			6	1		13	1			
50 ,, 55	3			3			6				
55 ,, 60											
And upwards			1	1		1 C	1		P		
Grand Totals	7,265	328	4.5	7,848	291	3.7	15,113	619	4.1		

SCARLET FEVER. -- TABLE IV^A. -- Admissions, Deaths, and Mortality per cent. of Scarlet Fever Patients during 1897, divided according to age and sex.

N.B.—The above table includes deaths within 48 hours after admission, as well as deaths from intercurrent maladics.

The total admissions of scarlet fever cases in 1897 were 15,113, as compared with 15,982 in 1896: the female were 583 in excess of the male admissions. The total mortality, calculated on the admissions, was 4.06 per cent., as compared with 4.2 in 1896.

The following table is compiled from the Summary Tables since 1892, the year when the Public Health (London) Act, 1891, came into operation, permitting the admission, free of charge, of any person reasonably believed to be suffering from fever, diphtheria, or smallpox.

24

AGES.		MALES.		1	FEMALES.		TOTAL.			
AGES	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	
Under 1	443	110	24.8	362	98	27.1	805	208	25.8	
1 to 2	1,456	298	20.5	1,371	280	20.4	2,827	578	20.4	
2 ,, 3	2,631	406	15.4	2,553	383	15.0	5,184	789	15.2	
3 ,, 4	3,599	404	11.2	3,688	417	11.3	7,287	821	11.3	
4 ,, 5	3,862	314	8.1	4,140	281	6.8	8,002	595	7.4	
Totals under) 5 years	11,991	1,532	12.8	12,114	1,459	12.0	24,105	2,991	12.4	
5 to 10	15,791	495	3.1	17,592	523	3.0	33,883	1,018	3.0	
10 ,, 15	7,859	97	1.3	7,862	85	1.1	15,221 -	182	1.2	
15 ,, 20	2,366	36	1.2	2,368	35	1.5	4,734	71	1.5	
20 ,, 25	926	11	1.2	1,149	20	1.7	2,075	31	1.2	
25 ,, 30	420	5	1.2	657	7	1.1	1,077	12	1.1	
30 ,, 35	215	6	2.8	343	6	1.7	558	12	2.2	
35 ,, 40	91	2	2.2	140	3	2.1	231	5	2.2	
40 ,, 45	45	4	2 (80	3	7 5	125	7	7	
45 ,, 50	26	2	1 1	23	1	1 1	49	3	1	
50 ,, 55	17	1	2 7.4	17		> 3.1	34	1	5.0	
55 ,, 60	5		1 1	4		1 1	9			
And upwards	1		1 1	3) (4		P	
Grand Totals	39,253	2,191	5 6	42,352	2,142	5.1	81,605	4,333	5.3	

TABLE IV^B.—Admissions, Deaths, and Mortality per cent. of Scarlet Fever Patients in the years 1892 to 1897, divided according to age and sex.

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

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 females than males have been admitted, but the mortality per cent. amongst the latter is greater than amongst the former by 0.5.

		MALES.		1	Females			TOTAL.	
AGES,	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died,	Mortality per cent.
Under 1	56	15	26.8	43	17	39.5	99	32	32.3
1 to 2 .	206	67	32.5	165	51	30.9	371	118	31.8
2 ,, 3	257	72	28.0	292	76	26.0	549	148	27.0
3 ,, 4	855	84	23.7	354	78	$22 \cdot 0$	709	162	22.9
4 ,, 5	810	70	22.6	378	73	19.3	688	143	20.8
Total under 5 years }	1,184	308	26.0	1,232	295	23.9	2,416	603	25.0
5 to 10	889	154	17.3	1,073	169	15.7	1,962	828	16.5
10 ,, 15	310	19	6.1	378	14	8.7	688	33	4.8
15 ,, 20	100	8	3.0	145	3	2.1	245	6	2.4
20 ,, 25	50	4	8.0	92	2	2.2	142	6	4.2
25 , 30	23	2	2 (69	1	20	92	8	7
30 ,, 35	23	2		38	7		61	9	
35 ,, 40	13	1		22	3		85	4	
40 ,, 45	. 6		7.4	12		7.2	18		73
45 ,, 50	2		()	4		$\left(\right)$	6		(
50 ,, 55	1			3			4		
55 ,, 60		•		4			4		
And upwards)
Grand Totals	2,601	493	19.0	8,072	494	16.1	5,673	987	17.4

DIPHTHERIA.—TABLE V^A.—Admissions, Deaths, and Mortality per cent. of Diphtheria Patients during 1897, divided according to age and sex.

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

The total admissions were greater in number by 1,165 cases than in 1896, and the death rate, 17.4 per cent., was 3.6 below that of the previous year, and was the lowest on record.

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 :---

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		MALES.		1	Females.		TOTAL.			
AGES.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortalit; per cent	
Under 1	239	115	48.1	196	103	52.6	435	218	50.1	
1 to 2	819	411	50.2	729	368	50.5	1,548	779	50.3	
2 ,, 3	1,101	466	42.3	1,120	440	39.3	2,221	906	40.8	
3 ,, 4	1,486	545	36 7	1,485	503	33-9	2,971	1,048	35.3	
4 ,, 5	1,423	432	30.4	1,662	517	31.1	3,085	949	30.8	
Totals under }	5,068	1,969	38.9	5,192	1,981	37.2	10,260	3,900	38.0	
5 to 10	3,978	850	21.4	4,720	1,094	23.2	8,698	1,944	22.3	
10 ,, 15	1,265	110	8.7	1,695	144	8.5	2,960	254	8.6	
15 ,, 20	497	26	5.2	817	34	4.2	1,314	60	4.6	
20 ,, 25	297	14	4.7	562	20	. 3.6	859	34	4.0	
25 ,, 30	182	12	6.6	405	13	3.2	587	25	4.3	
30 ,, 35	119	4	3.4	222	14	6.3	341	18	5.3	
35 ,, 40	67	4	6.0	118	5	4.2	185	9	4.9	
40 ,, 45	87	3	5 6	58	5	0 0	95	8	5	
45 ,, 50	19	1	1 1	34	4	1 1	53	5	1	
50 ,, 55	15	4	15.0	14	2	$\left \left. \left. \right\rangle 12.3 \right\rangle \right $	29	6	13.3	
55 ,, 60	6	2	11 1	15	1	1 1	21	3		
And upwards	8	2	pl	9	4		12	6	J	
Grand Totals	11,553	3,001	26.0	13,861	3,271	23.6	25,414	6,272	24.7	

TABLE V^B.—Admissions, Deaths, and Mortality per cent. of all Diphtheria Patients in the years 1888 to 1897, divided according to age and sex :—

N.B.—The above table includes deaths within 48 hours after admission, as well as deaths from inter-current maladies.

Diphtheria, like scarlet fever, is most fatal to infant children. The maximum mortality occurs in the first two years of life, when it reaches the high percentage of 50.27, subsequently falling with every additional year of life to the minimum of 3.84 per cent. amongst persons between 20 and 25 years of age.

The mortality per cent. of females is less than that of males by 2.39.
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			MALES.		1	*EMALES			TOTAL.	
AGES.		Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent
		7	1	14.3	7			14	1	7.1
		58	5	8.6	46	3	6.2	104	8	7.7
		76	7	9.2	61	6	9.8	137	13	9.5
		50	14	28.0	46	6	13.0	96	20	20.8
		54	13	24.1	47	6	12.8	101	19	18.8
		57	16	28.1	. 40	13	32.5	97	29	29.9
		26	10	38.5	27	8	29.6	53	18	34.0
		15	5	83.3	18	4	22.2		9	27.3
		11	2	18.2	5	2	40.0	16	4	25.0
45 ,, 50		1)	(4)	(5)	
			()	3	1(33.3	5 3 2 3	1(23.1
55 ,, 60		2	((000)	2	(201
And upwar	ds)	(3	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	(3	2)	
Totals		357	78	20.4	307	51	16.6	664	124	18.7

ENTERIC FEVER.—TABLE VI^A.—Admissions, Deaths, and Mortality per cent. of Enteric Fever Patients during 1897, divided according to age and sex :—

N.B.—The above table includes deaths within 48 hours after admission, as well as deaths from inter-current maladies. It does not include Board's cases admitted into general hospitals.

There were 64 more cases of enteric fever admitted than during 1896, and the total death rate was 2.5 per cent. higher than in that year.

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

TABLE VI^B—Admissions, Deaths, and Mortality per cent. of Enteric Fever patients in the years 1871 to 1897. (See note (2) below.)

		MALES.		1	FEMALES.			TOTAL.	
AGES.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 5	185	23	12.4	155	21	13.6	340	44	12.9
5 to 10	762	70	9.2	718	61	8.5	1,480	131	8.9
10 ,, 15	1,369	144	10.2	1,153	183	15.9	2,522	327	18.0
15 ,, 20	1,256	192	15.3	1,139	228	20.0	2,395	420	17.5
20 ,, 25	860	186	21.6	806	152	18.9	1,666	338	20.3
25 ,, 30	656	161	24.5	536	112	20.9	1,192	273	22.9
30 ,, 35	376	108	28.7	334	69	20.7	710	177	24.9
35 ,, 40	191	58	30.4	217	53	24.4	408	111	27.2
40 ,, 45	118	30	25.4	103	25	24.3	221	55	24.9
45 ,, 50	55	24	43 6	69	16	28.2	124	40	32.3
50 ,, 55	24	10)	(30	6)	(54	16)	1 States
55 ,, 60	12	67	48.2 2	8	4 >	28.3 -	20	10 5	35.6
And upwards	8	3)	(8	8)	(16	6)	
Grand Totals	5,872	1,015	17.3	5,276	933	17.7	11,148	1,948	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 VIIL, p. 32, because there are excluded from this table a number of patients who were admitted into hospitals which also received convalescent patients from other hospitals, and in taking the ages of patients for the purposes of this table, it was impossible from the returns in the possession of the Committee to identify the two classes.

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 32.26 amongst patients between 45 and 50 years of age and of 35.56 amongst the patients of ages from 50 to 60 and upwards.

The male sex is evidently more liable to attack by this disease; but the female mortality per cent. is greater by 0.36. 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.

Only two cases of typhus fever were admitted during the year 1897 and they are included in the following table :—

TYPHUS FEVER.—TABLE VII.—Admissions, Deaths, and Mortality per cent. of Typhus Fever patients in the years 1871 to 1897 inclusive, divided according to age and sex. (See note (2) below.)

	1	MALES		F	EMALE	:8.	TOTAL.					
Ages.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.			
Under 5	40	1	2.5	48	1	2.1	88	2	2.3			
5 to 10	108	1	0.9	139	-		247	1	0.4			
10 ,, 15	172	5	2.9	207	11	5.3	879	16	4.2			
15 ,, 20	165	10	6.1	198	18	9.1	363	28	7.7			
20 ,, 25	125	28	22.4	124	22	17.7	249	50	20.1			
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	47.6			
45 ,, 50	43	21	48.8	55	21	38.2	98	42	42 9			
50 ., 55	23	16	69.6	38	21	55.3	61	37	60.7			
55 ,, 60	14	9	64.3	18	15	83-3	82	24	75.0			
And upwards	17	13	76.5	22	15	68.2	89	28	71.8			
Totals	992	222	22.4	1,188	217	18.3	2,180	439	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 VIII., p. 32, for similar reasons to those given in note (2) to Table VIB., on p. 28.

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 per cent. is less by 4.1 than that of males. The mortality in both sexes is greatly influenced by age. Up to the twentieth year the rate does not exceed 7.7 per cent.; but in the quinquennium 20 to 25 it suddenly rises to 20.2 per cent., and thenceforward rapidly increases with advancing age, up to the age of 60 years.

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Table I. on p. 98 shows the number of smallpox patients admitted from each parish or union during each month of the year 1897, 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 70, which, together with one remaining at the beginning of the year, made a total of 71 treated during the year. Of this number 13 died, and the remainder were discharged. But, in addition to these numbers, there were of non-smallpox cases two admitted to the hospital ships, 24 detained at the observation shelters at South Wharf (one of whom died there and another remained under treatment at the end of the year), and 26 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. 94-5, and 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. 92-3.

Tables IIA., IIB., and IIC., on pp. 99-110, supply detailed particulars concerning the vaccination of the smallpox patients admitted.

Table IIc. (which is a combination of Tables IIA. and IIB.) shows that vaccination cicatrices were present in 53 cases, of whom five died. In four cases there was "no evidence" as to cicatrices—(these were either cases said to have been vaccinated, but bearing no visible evidence of the operation, or else cases in which no statement was made and the eruption or other cause prevented the observation of any marks)—three of these died; in 13 cases vaccination cicatrices were absent, four of these died, as did also one case which remained in hospital at the end of 1896.

CASES OF MISTAKEN DIAGNOSIS. Fever.--In the course of the year 1897 no fewer than 1,417 (1,174) patients, or a percentage on the total admissions of $6\cdot02$ ($5\cdot3$),* 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 thus admitted to any one hospital was, as in previous years, at the Eastern Hospital, where the proportion was 329 (253) out of 3,074 (3,174) admissions, or 10.7 ($7\cdot9$) per cent. of the total. As regards scarlet fever cases the percentage was $3\cdot1$ ($2\cdot2$), diphtheria cases $11\cdot3$ ($11\cdot1$), and enteric fever cases $44\cdot1$ ($28\cdot7$).

Amongst the 466 cases wrongly certified as scarlet fever, there were 62 (74) of measles, 113 (58) of tonsillitis, and 66 (81) had no obvious disease. Amongst the 643 cases wrongly certified as diphtheria were 31 (33) of measles and 511 $(447)^*$ of tonsillitis. Amongst the 293 (242) cases wrongly certified as enteric fever were 4 (12) of bronchitis and 61 (47) of lobar pneumonia.

Smallpox.—Of the patients admitted to the smallpox hospital ships, 2 (6) were not suffering from smallpox at the time of admission. Particulars of these cases are given in the report of the Medical Superintendent, on p. 94.

From these figures it appears that the number of patients admitted to the smallpox ships through mistaken diagnosis was only 2.8 (3.1) 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 London wharves, except in the case of local patients from Erith and Dartford. If therefore we take the total number of cases originally certified in London as smallpox and removed to the wharves, we find that the mistaken diagnoses numbered 52 (76) out of 121 (265), or 42.9 (28.7) per cent.; and these are the figures properly to be compared with those given above in the case of fever.

Statistics since Establishment of the Managers' Hospitals. (5.) FEVER.—The return on p. 32 shows the annual admissions and deaths of patients at the Managers' fever 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 diphtheria.

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

Equally noticeable is the decline in the percentage mortality amongst diphtheria patients from 40.74 in 1889 to 29.29 in 1894; to 22.85 in 1895 (when the antitoxic serum treatment was first adopted); to 21.2 in 1896, and 17.69 in 1897.

* Italic figures in brackets throughout are the corresponding figures for 1896.

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								P	N	NU	JA	L	R	EP	0	RI	,											_
	-oirean?	1 10.0	12-0	0-27	0-26	0.23	0-22	0-25	0.28	0.23	61.0	0-95	0-95	0-93	0-15	0-15	0.15	0.17	0.13	0.15	0.13	0.10	0.16	0-15	0.14	0.13	21.0	
ortality 000	snudaj	0-1-0	0.05	0.08	60-0	0.04	0-04	10.0	0.04	0.02	0.05	10-0	10-0	10-0	0-01	00-00	00-0	00-0	0.00	00-0	0.00	0.00	0.00	0.00	0.00	00-00	5	
Annual Mortality per 1,000	airədidqi	alie	80.0	60-0	0-12	11.0	0-11	60-0	0.15	0.10	11-0	66-0	16-0	0.24	0-93	0-21	0.93	0-32	0-39	0-33	12.0	0.46	0.76	0-62	10.04	0.00	Ten	
A		0.58	0-28	61.0	22-0	1.06	29-0	+++-()	0.49	21.0	0.52	0.52	0.51	0.36	81.0	11.0	98.0	0-30	0.19	0.21	0.14	12.0	10.0	0.22	AL-D	12.0		
tients	Enteric.	t :	21-96	15.13	14-87	24-68	20-34	22-93	20-26	01.21	00.01	20-71	15-64	18-82	15.82	14.85	14-59	14.64	01.01	20.61	20.41	07.01	10.07	01.01	11.01	18-61		62-21
Mortality per cent. of Patients treated in Manavers' Hosnitals	snyd (23-62	23-15	19-62	23-35	18-81	23-07	26-25	00.17	20.02	16-92	21.15	20.00	12-17	42.10	11-59		10.18	25.66	00.0	01.6	20.00	10.01		0.02		20.69
ty per cent. o treated in anavers' Hosr	sirədədqi	1 :	:				:	:	:	:	: :	:	::			:		59-35	40.14	00.00	20.00	00.07	71.00	23.06	00.10	69-11		25.13
Mortali	Scarlet Fever.	:	10.78	9.55	12-15	13-69	12.13	12.10	15.07	19.90	11-10	10-37	12.38	12.27	14.6	9.04	19.6	68-6	00.0	00.1	20.5	07 1	2.00	20.00	06-1	4-07		+6.9
	Total.	:	168	211	342	308	248	202	212	202	334	380	385	392	219	224	613	629	100	1,000	1 690	1 020	1 000	1 679	105 1	1.870		13,323
	Other Diseases.	:	01	58	84	10	EL O	22	01	22	46	60	66	55	46	55	59	09	64	10.1	TAD	105	150	611	100	140		116'1
CHS.	Enteric.	:	57	56	63	X L	60	61	100	107	86	104	74	98	36	47	19	21	18	106	23	110	30	011	30	124		2,001
DEATHS	-snud & L	:	30	16	106	16	200	200	14	9	34	27	11	20	-	+ •	4		0 1	c		1	-	-		:	.01	104
	sirədiddiQ	ı :						:	:	:				:		:		40	017	2010	583	865	1.085	890	876	987	0.040	217,0
	Scarlet.	:	11	9 9 9	68	160	81	to 10	116	242	168	189	234	234	130	151	101	001	210	357.	839	106	212	262	666	619	0 010	01000
	Total.	:	864	1,145	2,134	1,815	1,007	1,201	2.098	2,464	2,322	2,867	2,720	2,547	1,855	2,197	0,051	0,102	8 324	7.809	16.976	18.674	16.667	16.847	99.978	22,869	101011	TOLOT 717'TT 000'TT
	Other. Diseases.		343	271	808	269	190	001			211	354	269	180	677	42	101	910	178	462	795	732	863	1.277	1.174	1,417	11 070	11,612
SIONS.	Enteric.		279	381	430	299	007	710	385	248	415	515	486	493	220	333	144	900	498	155	430	544	534	661	600	664	002.11	AL, UNV
ADMISSIONS	.snųdxT	:	134	401	090	001	120	169	48	28	219	148	45	8	20	2.0	00	100	191	18	19	01	9	00	6	61	0.007	100 0
	Diphtheria	:	:	:					: :			:	:	:	:	:		1		-			3,666	3,635			ATA 20	LTIM
	Scarlet.		108	92	1100	1,152	110	679	1.469	1,949	1,477	1,850	1,920	1,845	1,505	1,180 2,000	4,400	4 518	6.537	5.262	13,093	14,548	11,598	11.271	15.982	15,113	195200	
			(15 months to Dec. 31st, 1872)									:					-											
	cé	:	o Dec.		:			: :		:	:	:	:	:	:			: :		:				:		:		
	YEAR		onths t								-		-	-		:										:	Totale	
				:	:	:									:	•												
		1871)	1872)	1874	1978	1876	1877.	1878.	1879	880	1881	1882	1885.	1001	1000	1887	1888	1889.	1890	1891	1892	1893	1894	1895		1897		

Diphtheria cases have only been admitted into the Managers' Hospitals since October 23rd, 1888.
The Mortality rates of patients in the Managers' Hospitals are calculated according to the Registrar-General's formula.

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SMALLPOX. (6.) The following table shows the admissions and deaths of patients in the Managers' smallpox hospitals during each year since the opening of the first hospital at the end of 1870.

TABLE IX.—Admissions, Deaths, and Mortality per cent. of Smallpox Patients since 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.	ADI	MISSIC	ONS.	I	DEATI	18.	Mortality per cent. of Patients treated in Managers' Hospitals.	Total Annual Mortality per 1,000 of estimated Popula- tion.
	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	0.24
1873-4 (year ended Jan.) 31st, 1874)	174	17	191	35		35)	(0.03
1874 (11 months ended) Dec. 31st) 5	112	8	120	10		102	17.02	0.05
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	0.15
1881	8,551	120	8,671	1,417	14	1,431	16.61	0.65
1882	1,799	55	1,854	260	3	263	12.96	0.11
1883	598	28	626	98		93	16.06	0.03
1884	6,363	204	6,567	940	8	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	8		3		0.00
1888 1889	62 5	5	67 5	8		8	14.28	0 00
1000	0 22	 5	27				1	0.00
1001	63	1	64	8		8)	1	0.00
1009	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	i	65	6.36	0.01
1896	190	*41	231	9	î	10	4.01	0.00
1897	70	*26	96	13	1	14	18.44	0.00
Totals	62,056	*1,443	63,499	10,269	59	10,328	16.55	

* Most of these were patients who were detained for observation at South Wharf.

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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:—

	-	1	PEATHS FROM SMALLPO	x.
YEARS.	Estimated Population in the Middle of each Year.	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	40.)
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	5,538,246	736	207	161
1877	3,595,085	2,551	709	194
1878	2,652,837	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	238
1885	3,978,883	1,419	347	283
1886	4,018,321	24		160
1887	4,058,150	9	5 2 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	4 8	1 2	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
1896	4,421,955	- 9	24	19
1897	4,463,169	16	4	18

Staff Illness (7.) On pp. 37-40 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 4,064 $(3,542)^*$ persons employed at the fever hospitals during the course of the year (including those employed at the Gore Farm Hospital), of whom 201 (176), or 4.8 (5.0) per cent., fell ill with fever or diphtheria, and one died; while 989 (697), or 24.1 (19.7) per cent., suffered from other forms of illness.

The table also shows that 154 (220) persons were employed on the hospital ships during the year, none of whom contracted smallpox, but 23 (50), or 14.9 (22.7) per cent., suffered from other diseases.

In our report for the year 1892 we pointed out that nurses and other members of a hospital staff could be brought with almost absolute impunity into contact with smallpox, provided they were properly protected by vaccination; and the evidence of each succeeding year has confirmed us in that opinion.

(8.) We submit a table showing the average daily number of patients under treatment at the several hospitals and the average daily number of staff employed during 1897, and the respective proportions of nursing staff and total staff to patients.

At the hospitals for acute cases the proportion varied from one nurse to $3.0 \ (3.1)$ patients at the Western Hospital to one nurse to $4.0 \ (4.6)$ patients at the North-Western Hospital, and the total staff at the former hospital was as one to $1.4 \ (1.6)$ patients and at the latter hospital as one to $1.9 \ (1.9)$.

At the Northern Convalescent Hospital one nurse sufficed for 7.6 (9.9) patients—the total staff being as one to 2.8 (3.7); whereas, at the Gore Farm Hospital the proportion was one nurse to 5.4 (6.0) patients, and the total staff as one to 1.7 (2.3) patients.

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Table showing the Average Daily Number of Patients under treatment and Average Daily Number of Staff employed at each of the Board's Fever Hospitals during the year 1897, and the respective proportions of Nursing Staff and total Staff to Patients.

	Average	Avera	emp	number loyed.	of Staff	Nursir	rtion of 1g Staff tients,	Total	rtion of Staff tients,
HOSPITAL.	daily number of Patients.	Medical.	Nursing.	Other Staff.	Total Staff.	Staff.	Patients.	Staff.	Patients.
Eastern Hospital	 340	5	105	110	220	1	3.2	1	1.6
North-Eastern Hospital	 354	5	106	125	236	1	3 3	1	1.5
North-Western ,,	 428	4	106	117	227	1	4.0	1	19
Western ,,	 825	4	108	107	219	1	3.0	1	1.4
South-Western ,,	 287	4	83	115	202	1	3.4	1	1.4
Fountain ,,	 359	4	96	97	197	1	3.9	1	1.8
South-Eastern ,,	 374	6	113	116	285				
Park "	 -	Not o	pened	until t	he 8th	Septe	mber,	1897.	
Brook ,,	 480	6	156	161	323	i	8.1	1	1.2
Convalescent Hospitals :-	 24.60								
Northern Hospital	 690	3	90	153	246	1	7.6	1	2.8
Gore Farm ,,	 528	4	98	200	302	1	5.4	1	1.7

iii. IMBECILITY.

Accommodation for Imbeciles,

: (1.) At the present time the Managers possess the following accommodation for imbeeile patients :--

		Males.	Females.	Total.
ADULTS-				
Leavesden Asylum		900	1,100	2,000
Caterham ,,		945	1,100	2,045
Darenth ,,		450	602	1,052
Children-		2,295	2,802	5,097
Darenth Schools Pavilions *	and)			1,000
				6,097

* The pavilions accommodate a number of patients over 16 years of age who have been transferred thereto from the schools.

This accommodation is no longer sufficient for the requirements of the Metropolis, and arrangements are now in progress for the erection on a site at Tooting Bec of an asylum infirmary, with 750 beds, for helpless, feeble, and very aged patients.

Asylum Statistics. (2.) The reports of the medical superintendents of the asylums for adult imbeciles and of the schools for imbecile children will be found on pp. 111-140.

1								Тав						L COMM			1897.							37-40
		Easter Hospin	1	North- Eastern Hospital.	We	orth- ostern spital.	Wester Hospite		South- Western Iospital.	For	intain pital.	South Easte Hospit		Park Hospital.	Be	ok	Northern Hospital.	Gor Ho	re Farm spital.	18	emary Ferer pitals).	Ho S (Sm	sepital hips allpox).	
NATURE OF DISEASE.	OFFICERS.	Number of Officers, Number of	days warded.	Officers. Number of	Number of Officers.	Number of days warded.	Number of Officers, Number of	lays warded. Number of	Number of lays wanted.	Number of Officers,	Number of lays wanded.	Number of Officers.	lays warded	Number of Officers. Number of lars warded.	Number of Officers.	Number of ays warded.	Number of Officers, Number of	Number of Officers,	Number of ays warded.	Number of Officers,	Number of ups warded.	Number of Officers.	Number of ays warded.	RESULTS.
Searles Fever	Assist. Medical Officers Night Supt. Nurse Charge Nurses Assistant Nurses Wardmaids Laundrymaids	2 1	93	2 102 3 94		 120 189 80	···	- 1 	230			ï		 2 20 2 47 1 40	4				73 52 564 545	3 1 9 50 27	110 73 421 2,974 1,415		1111	Recovered. Recovered. F.H., rear remaining washed at each of year; others recovered. F.H., B.R., fire, G.F.H., three remaining washed at and of year; above recovered. F.H., S.K.H., and Phys., one each, and G.F.H. two remaining washed B.H., one remaining washed as and of year; others recovered.
	Housemaid Needlewomen	1 1 1 1	 59 13			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1			1	1 : : : : : : : : : : : : : : : : : : :				3 0.0	143 55 26 26 1122 63	1 53 1 16 1 43 5 289	1 1 1 	1 185 57 1 1 1 10	41531 8195	196 16 134 139 26 69 48 284 1,698			Mccoursel, Mccoursel, Recoursel, Recoursel, Recoursel, Recoursel, P.L., three, S.R.H., one, R.H., one, and G.F.H., one remaining
Scarlet Fever and Diphtheria	Wardmaids Needlewoman Porter Ambulance Driver Stoker Charge Nurse Wardmaid			1 50	1 1 1 1 1 1	1 1 1 1 1 1	1	- 2			123		12 12		1	88 51	4 209 	3	183 82	19 1 1 1 1 1	826 82 47 20 29 51 55		1	warded at end of yoar; others recovered. F.H., one from last year; G.X.H., one remaining warded at end of year; others recovered. Recovered. Recovered. Recovered. Recovered.
Addre Ferrir un un un un	Charge Nurse	16 60		8 277 1 24	11 	84 621 	10 42	. 1 9 12	21 530 14 	111	 1,021 	11 15 1 1	17 56 11 9	3 117 1 3	·	 1,811 12	19 1,038	40	2,092	1 5 1 201 3 2	102 213 26 9,128 47 5		111	Recovered, E.H., cone died ; others recovered. S.E.H., one remaining warded at end of year, Biccovered, B.H., remaining warded at end of year ; other recovered.
	Assistant Matron Honsekeeper Night Superintendents Charge Nurses Assistant Nurses Cook Wardmaids	1 i 15 25		1 55 1 14 12 156 14 437 13 549	al taut la	91 138 65	17 30 41 52 18 24	1 200 1 59	213 575	 48	······································		33	4 51 9 92 11 66	40	169 481 11 312	1 10 18 239 32 316	 14 82 70	1,228	1 1 118 412 1 291	5 25 14 1,475 4,614 11 2,180	al alall	:: 36 166 136	Incovered. Becovered. Becovered. C.C.H., can remaining wanded at end of your, others recovered. E.H., two field r. N.H., can, and G.F.H., one died r.B.H., two, G.F.H., two remaining wanded at end of year; others recovered. Becovered. B.H., two, and G.F.H., four remaining wanded at end of year; others
Other Diseases as as as as	Housemails	4 17	04.8	3 28 7 66 3 58 	1 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	1 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1-11	118	111111		l uui	3 .		3 15 2 1 1 1 1	22 168 11 21 28 18 58	2 86 3 11 3 17 1 10 2 4 1 3	3 1 6 	1 1 2 a 21 1 1 20 1	26 2 0 16 9 2 1 5 37	270 14 580 184 119 58 18 28 448		5 9 52 10 :: 12	recovered. Becovered. Recovered. Recovered. Recovered. Recovered. Recovered. Recovered. Recovered. Recovered.
	Stokers Carpenters Painter Coschnen Ambalance Drivers Night Watchmen	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	6 .							1	1.1.1.				2 1 145 :	21 19	1 12 1 12 83 1,746	1 12 14	13 36 24	4 21 220 1	30 18 12 36 89 24	1 1 25	15 7	T. H., oko med. Becovered. Becovered. Becovered. Becovered. Recovered.
	Males Females	58 277 833		43 287 330	31 31	7	47 303		46 232 278	34 233 245	8	58 312 370		57 209 200	55 476 531		38 290	10 53	17	59 3,47	3		12	
Number engaged during the year ${0 \atop O}$	Torais	15 105		9 90	36 1 15	T	350 16 125	-	12 68	263		3 19	-	200 57 209	231 25 204	-	328 4 89	64 21	20	4,06	3	15 2 3	H H 5	
	Totals	120	_	99	17		141	-	80 10	7:	-	22	-	966 9	222		93	33	-	1,63	-	5	0	
Number that left during the year (3)	Females	116		94	13	1	120		64 74	61		103		28	200 2003 2223		83 87	33	12	15 1,31 1,47	8		15 17 13	



	-	Asylums	3.		Schools.		Gr	and Tot	als.
On January 1st, 1897,	Males.	Females	Total.	Males.	Females	Total.	Males.	Females	Total.
the several Asylums and Schools contained There were admitted during the year from the several	2,266	2,752	5,018	634	354	988	2,900	3,106	6,006
Parishes and Unions (including re-admissions) Transferred	229 24	161 33	390 57	76 	56 	132 	$\begin{array}{c} 305\\ 24\end{array}$	217 33	522 57
The total number under treatment being Of that number there were	2,519	2,946	5,465	710	410	1,120	3,229	3,356	6,585
Discharged	57	28	85	25	20	45	82	48	130
Transferred				24	33	57	24	33	57
And there died	184	174	358	25	16	41	209	190	399
	241	202	443	74	69	143	815	271	586
Leaving under treatment on December 31st, 1897	2,278	2,744	5,022	636	341	977	2,914	3,085	5,999

The annual figures for the combined imbecile establishments are as under:--

The total number remaining under treatment in the asylums and schools at the end of 1897 showed a decrease of seven as compared with the number at the end of 1896.

Tables I. to XIII, are summaries of the separate Tables for the three adult asylums given on pp. 117 to 139.

ADULT IMBECILES.—Table I. (p. 117) show admissions, re-admissions, discharges, and deaths for the year 1897.

Of the admissions, $387 (378)^*$ were admitted for the first time, 3 (6), were re-admissions, and 57 (57) were patients transferred from the imbecile schools.

Of the patients discharged, 18 (17) had recovered, 20 (27) had improved, and 45 (54) had not improved.

The number of patients who died was 358 (362).

The average number resident was 5,025 (5,033); the highest number resident on any one day was 5,059 (5,055); and the lowest number was 4,977 (4,999).

Table II. (p. 117) shows admissions, re-admissions, discharges, transfers, and deaths since the opening of the first asylum in September, 1870, up to the end of 1897. The total admissions during this period of over 27 years were 19,313, of whom 17,489 were admitted for the first time, 145 were readmissions, and 1,679 were transfers from one asylum to another. This latter number does not balance with the transfers shown

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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, 42 were not insane, 818 had recovered, 1,050 had improved, 1,145 had not improved, and 370 were transfers from one asylum to another. The deaths numbered 10,866.

Table III. (p. 118) shows the admissions, discharges, transfers, and deaths, with the mean annual mortality and proportion of recoveries per cent. of the admissions, for the year 1888, and for each subsequent year.

The total percentage of recoveries during the past year was 4.0 (3.8),* and the percentage of deaths on the average number daily resident was 7.1 (7.1).

Table IV. (p. 120) gives the classification, under the usual denominations of mental disease, of the mental condition of the patients admitted during the year 1897, and Table V. that of the patients resident on the last day of that year. Of the total number of 5,022 (5,018), 1,389 (1,363) are classified as suffering from imbecility, 1,232 (1,231) from dementia, 638 (630) from dementia and epilepsy, 458 (443) from imbecility and epilepsy, 275 (282) from chronic mania, 266 (263) from idiocy, 198 (227) from senile dementia, and 160 (164) from melancholia.

Table VI. (p. 123) is intended to show the causation of the insanity of the patients admitted during the year. The information it affords has not been obtained entirely from the formal certificates of admission, but has been supplemented and corrected by information elicited from the relatives or friends when visiting the patients.

Table VII. (pp. 126-7) shows the causes of death during the year 1897, together with the ages of the decedents, calculated from the ages stated in the orders of admission.

There were 358 (362) deaths during the year, 46 (40) having been caused by dementia and exhaustion, 50 (47) by heart disease, 42 (34) by pulmonary tuberculosis, 10 (23) by general tuberculosis, and 53 (32) by senile decay.

Table VIII. (pp. 130-1) 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, 1897.

Of the 447 (441) patients admitted during the year 1897, 6 (5) had at the close of the year been discharged as recovered, 6 (7) as improved, and 9 (10) as not improved, and 36 (35) had died.

^{*} Italic figures in brackets throughout are the corresponding figures for 1896.

Of the 5,022 patients remaining under treatment, 2,218 had been resident over ten years.

Table IX. (p. 133) shows the length of residence of those discharged as recovered and of those who have died during the year 1897.

Of the $358 (362)^*$ deaths, 71 (63) were of patients who had been resident upwards of 18 years.

Table X. (pp. 132-3) shows the age of patients resident on December 31st, 1888, and on the same day in each subsequent year, calculated from the ages stated on the orders of admission.

Of the 5,022 (5,018) patients remaining on December 31st, 1897, 1,838 (1,756) were over 50 years of age, 4 (2) being over 90 years and two over 100.

Table XI. (p. 135) shows the ages of the patients admitted, discharged, and dying during the year 1897, calculated from the ages stated on the orders of admission.

Of the 390 (384) patients admitted direct from the parishes and unions, 112 (142) were between 15 and 30 years of age.

The total discharges numbered 85 (102).

The total deaths numbered 358 (362), of whom 266 (257) were upwards of 40 years of age, and 91 (71) upwards of 70 years.

Table XII. (pp. 136-7) shows the departments where patients were employed on December 31st, 1897. Out of a total of 2,278 (2,266) males, 857 (871), and out of 2,744 (2,752) females, 856 (877) were usefully employed in and about the asylums.

Table XIII. (pp. 138-9) shows the occupations previous to admission, and condition as to marriage, of the patients admitted during the year 1897.

Of the 253 (251) males admitted, 48 (61) were described as labourers, 57 (75) had no settled occupation, and of 41 (33) the occupation was unknown; 146 (152) were stated to be single, 42 (48) married, 34 (28)widowers, and as regards 31 (23) the condition as to marriage was unknown.

Of the 194 (190) females, 23 (31) were servants, 11 (13) charwomen, 80 (87) were without settled occupations, and of 41 (25) the occupation was unknown; 95 (121) were stated to be single, 36 (15) to be married, 39 (39) widows, and in 24 (15) cases the condition as to marriage was unknown.

IMBECILE CHILDREN.—The whole of the patients under treatment at the Darenth Schools and Pavilions being under one administration, there is no occasion for us to summarise the statistics, which will be found attached to the report of the Medical Superintendent, Dr. Walmesley, pp. 143 to 153.

* Italic figures in brackets throughout are the corresponding figures for 1896.

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iv. TRAINING SHIP "EXMOUTH."

Statistics. The number of boys admitted during the year was $325 (346)^*$ (including 34 (20) who were admitted from extra metropolitan parishes and unions), while the number discharged was 298 (347).

Of the latter number, 129 (137) entered the Royal Navy, 112 (109) the mercantile marine, 28 (49) the Army as musicians, and 29 (52) were returned to their respective parishes and unions. There were 2 (3) deaths.

At the end of the year there remained 547 (522) boys under training, of whom 39 were chargeable to extra metropolitan districts.

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 129 (137), whilst the aggregate number of similar entries from all the other training ships in the United Kingdom was 196 (135).

v. GENERAL SUMMARY.

In conclusion, the Committee submit the following brief summary of the number of persons 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. (Re-admissions are not included.)	Admitted direct from Homes or Parishes and Unions.	Remaining in the various Institutions, Dec. 31st, 1897.
Fever Patients (including 218 cases of) relapsing fever treated in 1870) } Smallpox Patients Imbeciles Boys on Training Ship "Exmouth" Children at S. Anne's Home	17,489 6,528 68	4,668 Nil. 5,999 547 68
Totals	264,204	11,282

vi. MEDICAL SUPPLEMENT.

In continuance of the arrangement begun last year, there will be found at the end of this volume a Medical Supplement, edited by two of the Board's medical superintendents (Dr. F. Foord Caiger and Dr. E. W. Goodall), who have been appointed for that purpose by their colleagues. In this supplement there are included, in the first place, reports based on the records of the fever hospitals for 1897, dealing with the following subjects of a medical rather than of a general statistical nature :—

- 1. Complications and co-existent infectious diseases.
- 2. Post-scarlatinal diphtheria.
- 3. Antitoxin treatment of diphtheria.

There are also included papers by members of the Managers' medical staff on various subjects of interest in connection with the treatment of infectious disease. We think that the publication of these papers will not be without value in making generally available to the medical profession the vast stores of experience accumulated in our hospitals, and will, at the same time, tend to keep the hospitals themselves constantly on the watch for further possibilities of improvement. (Signed) W. M. ACWORTH.

APPENDIX I .-- INFECTIOUS DISEASES.

i. REPORT OF THE AMBULANCE COMMITTEE FOR **THE YEAR 1897.**

January 31st, 1898.

To the Managers of the Metropolitan Asylum District.

Prevalence Diseases and limitation of admission to Hospital.

In submitting our annual report we desire to point out that both scarlet ofInfectious fever and diphtheria were less prevalent during the year 1897 than in 1896. Of scarlet fever 22,848 cases were notified, as compared with 25,647 in 1896; and of diphtheria 12,803 cases, as against 13,362 in the previous year; but the proportion of cases admitted to the Managers' hospitals is still increasing. During the month of August

as many as 76.77 per cent. of the scarlet fever cases and 57.77 per cent. of the diphtheria cases were received; and, unfortunately, it again became necessary to limit admission to cases in which, as a consequence of their surroundings and conditions of life, the need of isolation was most urgent. Actuated by a desire to utilise fully their resources for the benefit of the sufferers from diphtheria, which is the more dangerous of the two diseases, the Managers took special steps to increase the number of beds set apart for diphtheria cases by diverting some of the accommodation provided for scarlet fever. It is, therefore, gratifying for the Managers to know that the cases of diphtheria which failed to obtain admission to their hospitals during the past year were comparatively few in number.

Smallpox outbreak.

Owing to an outbreak of smallpox in February, in view of the possibility that the Gore Farm Hospital might be required for the reception of smallpox cases, we stopped the transfer thereto of scarlet fever

patients. In a few weeks, however, the outbreak having been effectually checked, the transfer of scarlet fever convalescents was resumed.

Hospital accommodation.

The newly erected Park Hospital at Hither Green was not brought into use until the 8th November. This was too late in the season to be of much service; the prevalence of both scarlet fever and diphtheria being then on the decline. We anticipate that the Grove Hospital at

Tooting, and the additional wards for diphtheria cases at the Western Hospital, will be completed and brought into use in 1898. In view of this increase of accommodation, we propose to submit suggestions to the General Purposes Committee for a rearrangement of the appropriation of beds to the several diseases admissible to the Managers' hospitals.

APPENDIX I.-INFECTIOUS DISEASES.

Ambulance Stations. The second of the new ambulance stations --namely, the North-Western-commenced operations on the 1st September last. The

third-the South-Western Ambulance Station-is nearing completion, and will, we believe, be opened at an early date.

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 22,795, as compared with 22,152 in 1896. The removals of smallpox patients numbered 121, as compared with 265 in 1896.

The average daily removals of fever patients in the first six months of the year was 51, and during the last six months 74, as compared with 53 and 68 respectively in 1896.

The aggregate removals during the year, including the transfer of patients from one hospital to another, numbered 42,758. Of this number, 12,216 were effected by the Eastern Station, 2,149 by the North-Western Station (opened on September 1st), 11,490 by the Western Station, 11,739 by the South-Eastern Station (including the removals effected by the Fountain Ambulance Shelter), and 5,164 by the Brook Station.

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 July 15th, 32 patients; North-Western Station, on October 6th, 24 patients; Western Station, on November 17th, 40 patients; South-Eastern Station, on November 11th, 39 patients; Fountain Shelter, on September 9th, 12 patients; and Brook Station, on November 11th, 23 patients.

The heaviest week's work was, for the Eastern Station, that ended on July 17th, when 381 removals (including transfers, &c.) were effected, and 2,175 miles were travelled; for the North-Western Station, that ended on October 9th, when 101 removals were effected, and 1,002 miles were travelled; for the Western Station, that ended on July 24th, when 322 removals were effected, and 2,033 miles were travelled; for the South-Eastern Station, that ended on October 30th, when 363 removals were effected, and 2,279 miles were travelled; for the Fountain Shelter, that ended on July 10th, when 48 removals were effected, and 331 miles were travelled; and for the Brook Station, that ended on November 2nd, when 164 removals were effected, and 1,323 miles were travelled.

Smallpox Patients admitted.

Smallpox patients were admitted to the Managers' hospitals from 18 out of the 30 poor law districts in the Metropolis, the total number, including cases which after observation proved not to be smallpox, The monthly admissions were as follow :----

being 95. The monthly admissions were as follow :---

January	 	8	July	 	4
February	 	52	August	 	1
March	 	7	September	 	1
April	 	7	October	 	_
May	 	10	November	 	1
June	 	3	December	 	1

AMBULANCE COMMITTEE, 1897.

Total removals (Smallpox). The total number of patients certified to be suffering from smallpox removed in the Board's ambulances from their homes to the wharves during the year was 121. In 71* cases the diagnosis was confirmed by the medical officers who inspected the patients at the wharves.

Non-Smallpox Cases. All of the 50 patients who were, in the opinion of those officers, not suffering from smallpox were returned to their homes, with the exception of one male, who died, and one female, who remained under treatment in the shelter at South Wharf at the end of the year.

Fever At the commencement of the year there were 4,540 patients in the **Patients.** Managers' fever hospitals, distributed as follows :---

Hospital.	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	Total.
Eastern Hospital	281	72	_	17	_	370
North-Eastern Hospital	395	-	-			895
North-Western Hospital	829	88		14		431
Western Hospital	225	84		14	-	323
South-Western Hospital	220	52	-	16	-	288
Fountain Hospital	280	96	-	-	-	876
South-Eastern Hospital	202	120	-	36	-	358
Brook Hospital	376	102	-	19		497
Northern Hospital	772	76	-	-	-	848
Gore Farm Hospital	654	-	-	-	-	654
Totals	3,734	690	-	116	_	4,540

This was a greater number by 1,011 than at the beginning of the preceding year. The number under treatment fell to the minimum (3,136) for the year by May 7th; after this date the number rose until it attained the maximum (5,023) for the year on December 9th. This figure would undoubtedly have been exceeded if the accommodation at the Park Hospital had been brought into use in the early part of the year.

Enteric Fever Patients. One hundred and eighty-six enteric fever patients were during the year removed to general hospitals under the arrangements made with the authorities of those hospitals in 1892.

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 croup" was 6,561, as against 5,334 in 1896.

The average daily number removed was 15 in the first half of the year and 21 in the latter half.

" Including two cases found on further examination after admission to the Hospital Ships not to be smallpox.

Patients conveyed to other places than the Managers' Hospitals. Under the powers conferred by section 79 (3) of the "Public Health (London) Act, 1891," 361 persons suffering from dangerous infectious disorders were conveyed in the Managers' ambulances during the year 1897. Of these 16 were stated to have measles, 69 scarlet fever, 134 enteric fever, 72 diphtheria, 61 erysipelas, five puerperal fever, two cholera, one relapsing fever, and one smallpox.

The total sum received by the Managers under this section of the Act during 1897 was £108 7s. 6d., of which £24 12s. 6d. was in respect of the services of nurses. In a considerable number of cases payment was remitted on account of the want of means of the patients.

Ambulance Stations. The several ambulance stations have been maintained in thorough repair. The temporary ambulance shelter at Tooting was vacated on October 19th last, and has since been demolished to make room for

part of the Grove Hospital, now in course of erection.

The urgent pressure for accommodation, and the short supply of beds, again occasioned special anxiety to those engaged in directing the operations of the ambulance service, 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 sustained while under charge of the service.

Staff. The health of the staff, both male and female, has on the whole been well maintained. At the Eastern Station 19 members have been off duty, five of whom suffered from influenza, and others with minor disorders, involving in the aggregate a loss of service of 118 days. At the North-Western Station only one man was off duty for six days. At the Western Station nine persons were off duty for an aggregate of 94 days, one of whom suffered from diphtheritic sore throat. At the South-Eastern Station four persons were off duty for a total of 13 days. At the Brook Station 11 persons were off duty for an aggregate of 89 days.

There were 39 resignations, seven discharges, and 55 appointments of the staff during the year.

RIVER SERVICE.

Steamers. The four ambulance steamboats—" Red Cross," " Maltese Cross," "Albert Victor," and "Geneva Cross"—and the ambulance steam launch "White Cross" have been maintained in working order.

The distance run collectively by the steamers was 6,221 miles, and they conveyed 1,233 patients and other passengers, and 69 tons 5 cwt. of stores, &c., to and from the hospital ships at Long Reach (see Appendix C, p. 52).

As in former years, several barges and other craft have come into collision with the Managers' 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 £1,366 10s. 11d, making a total of £3,977 17s. recovered since 1885, in which year the present system of insurance against damage of all kinds, without the usual restrictive clauses, was first adopted.

AMBULANCE COMMITTEE, 1897.

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.

There have been eight discharges, on reduction of the staff, during the year.

COST OF AMBULANCE SERVICES.

The total expenditure during the year ended at Michaelmas last is as under :-

	Ordinary.	Special.	Total.
For the Eastern Station	£. s. d. 4,931 1 2	£ s. d. 30 19 11	£ s. d. 4,962 1 1
,, North - Western Station) (opened Sept. 1st, 1897)	591 2 5	1,500 0 0	2,091 2 5
,, Western Station	4,600 8 6	Nil	4,600 8 6
,, South-Eastern Station	5,647 11 4	Nil	5,647 11 4
,, Brook Station	3,258 12 11	Nil	3,258 12 11
,, South-Western Station	Nil	$102 \ 1 \ 8$	102 1 8
	19,028 16 4	1,633 1 7	20,661 17 11
River Service	6,385 16 0	1,446 6 0	7,832 2 0
", Medical Department	1,911 18 4	Nil	1,911 18 4
	£8,297 14 4	£1,446 6 0	£9,744 0 4

Expenditure out of "Loan Account "	£	s.	d.
Brook Station-On account of erection of station	1,222	3	6
North-Western Station-On account of ,,	7,881	16	0
River Service-On account of erection of staff quarters			
at South Wharf Ditto On account of construction of new ambulance	892	1	6
steam launch	508	1	6
South-Western Station-On account of erection of station	8,541	15	4
	£19,048	17	10

With regard to the ambulance nurses, who have, as in previous years, been drawn 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 $\pounds 3,029$ 12s. 6d. for the past year.

(Signed)

JACKSON HUNT, Chairman of the Committee.

Staff.

APPENDIX A .- LAND AMBULANCE SERVICE.

Number of Patients removed by the Ambulances of the Board.

	From 1881 to 1891	1892	1893	1894	1895	1896	1897	TOTALS.
Fever :								
From homes to Hospitals	42,848	16,118	18,496	16,573	16,725	22,152	22,795	155,707
Convalescents to Northern) and other Hospitals	11,879	7,682	6,813	5,159	5,037	9,998	8,941	55,509
Recovered cases from Northern Hospital to Town Hospitals for discharge	10,460	4,572	5,670	4,090	4,464	5,899	5,259	40,414
Recovered cases discharged from Northern Hospital conveyed from Eastern and Western Hospitals to South- Eastern Hospital		100	60	221	82	154	111	728
Recovered cases from Gore) Farm Hospital to Town Hospitals for discharge) Recovered cases from Gore	446	2,205	1,536	1,375		3,629	3,658	12,849
Farm Hospital conveyed from the South-Eastern Hospital to the Western, South-Western, and Eastern Hospitals		183	126	112		31	18	465
Recovered cases from Gore Farm Hospital conveyed from the South-Western Hospital to the Western Hospital							168	168
Other transfers between Hos-}				7	61	1	10	79
pitals	*2,818	220	279	251	256	877	350	4,551
From General Hospitals to homes, owing to want of room in the Managers' Hospitals			468	143	724	1,287	752	3,374
Hospitals			170	216	241	109	186	922
Total Fever Patients	68,451	31,080	33,618	28,147	27,590	43,637	42,243	274,766
SMALLPOX :								
From homes to Hospitals and)	14,070	306	2,389	1,186	1,045	265	121	19,382
Wharves	4,953	200	331	8				5,492
Other transfers between Hos-) pitals		5	1	1	8			10
From Hospitals and Wharves to homes	10,358	10	44	77	77	89	33	10,638
Total Smallpox Patients	29,381	521	2,765	1,272	1,125	304	154	35,522
Conveyance of Patients to other places than the Mana- gers' Hospitals	256	432	593	269	326	433	361	2,670
Grand Totals	98,088	82,033	36,976	29,688	29,041	44,374	42,758	312,958

* Includes some smallpox cases.

The use of the Managers' ambulances for the general conveyance of the infectious sick was not authorised until the 30th November, 1889.

AMBULANCE COMMITTEE, 1897.

APPENDIX B.-LAND AMBULANCE SERVICE-(continued).

Return of Work for the Twelve Months ended December 31st, 1897.

			м	ILES RUN	Ň.	
PARTICULARS OF WORK.	Number of		By He	orses.		By
	Journeys.	1	2	3	4	Vehicles.
REMOVALS FROM HOME- To the Board's Hospitals-						
Fever Patients	21,034	200,371	1,774			202,145
Smallpox Patients						
To the Board's Wharves- Smallpox Patients	115	1,506	23			1,529
To General Hospitals- Enteric Patients	180	1,879				1,879
OTHER REMOVALS-						
From General Hospitals to						
homes owing to want of	726	5,967				5.007
room in the Board's Hospitals Non-Smallpox Patients returned						5,967
home	25	289	28			312
Other Patients returned home Patients sent for, but for	04	273				273
various causes not removed	1,029	7,770	15			7,785
Patients' friends taken from hote to Hospital	5	42				42
Patients' friends taken from						42
Hespital to home	1	10				10
TRANSFERS BETWEEN HOSPITALS-						
Fever Patients to and from	010	1.1-7	17 107			
Northern Hospital Fever Patients to and from	818	1,457	17,487			18,944
Gore Farm Hospital	982	78	19,745	810	41	20,674
Other transfers between Hospi- tals	101	1,350	106			1,456
Recovered Patients Taken Home-						
From Fever Hospitals		3,162				3,162
From Wharves:-Smallpox Service requirements	074	327 2,926				327
Conveyance of Ambulance Com-		-,0-0	00			2,992
mittee	52	16	5 19			21
Conveyance of other Committee						19
Conveyance of Patients to other	25,694	227,423	39,263	810	41	267,537
places than Managers' Hospitals						
(private removals)	361	3,720	154			3.874
Totals for 1897		231,143	39,417	810	41	271,411
Totals for 1896 Totals for 1895	10.000	249,376 189,360	46,792 23,004	337	301	296,792
Totals for 1895	10 702	176,602	26,918		228	212,364 203,820
Totals for 1893	01.017	214,884	30,186		241	245,811
Totals for 1892	17.007	147,606	27,497		3,535	178,638
Totals for 1891		66,129	12,958		791	79,873
Totals for 1890		67,413	14,167	415	2,405	84,423
Totals for 1889	1	40,957	6,276	232	881	48,346
Totals for 1888	0 207	34,842	12,767		1,910	49,519
Totals for 1887 Totals for 1886	0.070	51,894 13,578	5,223 1.980		1,009	58,126 15,558
Grand Totals	170 500	1,483,814	247,185	1,866	11,342	1,744,181
Grand Lotars in	1 1.0,100	1,100,011		1,000	11,012	1,144,181

APPENDIX I .--- INFECTIOUS DISEASES.

APPENDIX C.-RIVER SERVICE.

Number of Patients, Visitors, Staff, &c., conveyed to and from the Hospital Ships during the year 1897.

Мох	Мохтп.				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					7			74	81
February					44	3	53	99	199
March					4	27	20	124	175
April					4	9	13	98	124
May					9	5	16	133	163
June						10	22	117	149
July					1		4	81	86
August						1		59	60
September							1	69	70
October							3	91	94
November								57	57
December								25	25
Totals for 1897					69	55	132	1,027	1,283
Totals for 1896					188	243	153	1,815	2,399
Totals for 1895					925	792	862	2,372	4,951
Totals for 1894					1,101	1,009	1,762	8,742	7,614
Totals for 1893					2,364	2,053	2,195	4,040	10,652
Totals for 1892					298	285	121	735	1,389
Totals for 1891					63	53	155	503	774
Totals for 1890					26	25	88	889	428
Totals for 1889					5	4	51	445	505
Totals for 1888					62	63	246	476	847
Totals for 1887					54	45	895	478	972
Totals for 1886					130	145	458	*3,929	4,662
Totals for 1885					5,468	5,809	+	t	11,277
Totals for 1884		***			5,592	4,267	+	†	9,859
Grand Totals					16,345	14,798	6,568	19,901	57,612

STEAMERS.

Steamer.	Fires alight.		Under Steam.		Under	Way.	Coal con	sumed.	Number of days when	Distance run,
DIEAMER.	Hours.		Hours.	Mins.	Hours.	Mins.	Tons.	Cwt.	under steam.	Miles.
" Albert Victor " " Geneva Cross " " Maltese Cross " " Red Cross " " White Cross "	${}^{1,893}_{218}\\{}^{218}_{3,125}\\{}^{785}_{426}$	$ \begin{array}{c} 10 \\ 20 \\ 20 \\ $	$1,782 \\ 122 \\ 2,857 \\ 598 \\ 242$	 30 30 15	$189 \\ 26 \\ 208 \\ 130 \\ 84$	3 38 21 33 34	86 12 117 57 16	$1\frac{1}{4} \\ 10 \\ 4\frac{1}{5} \\ \frac{4}{4} \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\$	$130 \\ 26 \\ 176 \\ 79 \\ 55$	1,825 300 1,917 1,266 913
Totals	6,447	50	5,602	15	639	9	289	43	466	6,221

Quantity of Stores, Parcels, &c., conveyed to and from the Hospital Ships. Number, 1,628. Weight, 69 tons 5 cwt. 1 qr. 25 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.
+ Ne figures were given in the Committee's Report for 1884 and 1885

ii. REPORTS OF THE MEDICAL SUPERINTENDENTS OF THE SEVERAL FEVER HOSPITALS FOR THE YEAR 1897.

(For Statistics, see pp. 66 to 91.)

[N.B.—Those portions of the reports relating to alterations to buildings and other matters of no general interest have been omitted.]

No. 1.

EASTERN HOSPITAL.

HOMERTON, N.E.,

January 21st, 1898.

Statistics. During the year 3,445 patients have been under treatment. Of these 1,606 have been discharged recovered, 1,174 have been transferred to other hospitals of the Board, and 321 have died, leaving 344 under treatment. The percentage mortality is 10.39.

The number of scarlet fever cases under treatment has been 1,739. Of these, 629 were discharged, 910 were transferred, 76 died, and 124 remained at the end of the year. The percentage mortality is 4.93. In nine cases death was due to causes other than scarlet fever, viz., whooping cough, one; measles and diphtheria, one; measles, seven. If allowance is made for these cases, the scarlet fever mortality becomes 4.34.

There were 31 cases of secondary or post-scarlatinal diphtheria, with three deaths, a mortality of 9.6 per cent. In every one of these three cases, however, death was due to measles. M. D., a girl aged four years, admitted on December 17th, 1896, developed diphtheria on January 4th, 1897, and measles on March 10th; she died on March 26th. M. II., a girl aged four years, admitted on February 4th, developed diphtheria on February 18th and measles on March 20th, of which she died five days later. F. C., a girl aged two years, admitted on April 5th, developed measles on April 16th and diphtheria on April 20th; she died on April 27th of lung complications, due to measles. Twenty-five of the cases were treated with antitoxia. Cases occurred in all the wards except three (Temperance, Faith, and Charity). There were nine cases of other forms of secondary sore throat.

The number of cases of diphtheria under treatment was 1,244. Of these, 604 were discharged as recovered, 264 were transferred, 192 died, and 184 remained at the end of the year. The mortality per cent. is 17.18, the lowest hitherto recorded for this hospital. The rate is, however, only a trifle lower than last year. Include 1 among the fatal cases are 17 in which death was due to causes other than the attack of diphtheria for which the patients were admitted, viz., measles, seven; scarlet fever, four; pneumonia, two; empyema, one; bronchitis, one; whooping cough, one; and heart disease, one. Making allowance for these, the mortality is 15.66 per cent. Last year the mortality thus corrected was 16.5 per cent. In the Medical Supplement, p. 178, will be found some observations on the results of the antitoxin treatment during the past year. Of enteric fever 121 cases have been under treatment. Of these, 86 were discharged, 17 died, and 18 remained at the end of the year. The mortality per cent. is 16.34, the same as last year. In one case the cause of death was pyæmia, due to long-existing disease of the ear.

One case of typhus fever was admitted.

The combined mortality of the scarlet fever, diphtheria, enteric, and typhus fever cases is 10.31 per cent.

Of the 3,074 cases admitted, 329, or 10.5 per cent., were found to be suffering from diseases other than these which they were certified to have. The percentage of error was in the case of scarlet fever 4.2, of diphtheria 14.9, and of enteric fever 33.5. Last year the figures were 3.5, 15.5, and 27.0, the total percentage error being 7.9.

(Signed) E. W. GOODALL, Medical Superintendent.

No. 2.

NORTH-EASTERN HOSPITAL.

ST. ANN'S ROAD, SOUTH TOTTENHAM,

January, 1898.

Statistics. During last year 2,524 patients were admitted, which, added to 394 left in from the previous year, made a grand total of 2,918 treated during 1897. Of these 81 died, giving a percentage mortality of 3.18; 1,461 were discharged, 1,018 transferred, and 358 left in at the end of the year.

The cases of scarlet fever treated numbered 2,833, with 73 deaths, the percentage mortality being therefore 2.96. This, though not quite so low as in the previous year, is very exceptional for the Board's hospitals.

There was a considerable reduction in the number of patients treated last year as compared with 1896. This was due to the two following causes :---

- (a) Firstly, in the early part of the summer No. 1 ward was required for the purpose of providing increased sitting-room accommodation for the nursing staff.
- (b) Secondly, owing to the serious character of the cases that were being admitted at that time (there were 26 deaths during July and August), I did not feel justified in advising the Committee to put extra beds into the acute wards when the usual rise in the notifications took place towards the end of the summer.

The 73 deaths from scarlet fever included two from tuberculosis and five from post-scarlatinal diphtheria.

Three cases of diphtheria and one of enteric fever were admitted. They recovered.

NORTH-EASTERN HOSPITAL, 1897.

During the year 79 cases, or 3.1 per cent. of the total admissions, were found to be suffering from some disease other than scarlet fever, diphtheria, or enteric; of these eight died, the percentage mortality being 10.74. The cases of postscarlatinal diphtheria numbered 29, with five deaths, giving a percentage mortality of 17.2.

Return Cases. During the last seven months of the year there have been seven cases which, on investigation, I felt were probably "return" cases in connection with this hospital, evidence of infection from another source not being obtainable. Three of the patients who gave rise to these cases had been detained for three months, and the average stay of the seven in hospita! was ten weeks.

> (Signed) HERBERT CUFF, Medical Superintendent,

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No. 3.

NORTH-WESTERN HOSPITAL.

HAVERSTOCK HILL, N.W., February 4th, 1898.

Statistics. The death-rate for the twelve months upon the gross number treated, viz., 3,826 is 8.58. Of the 3,400 admissions, all direct from their homes or public institutions, 2,150 were cases of scarlet fever, 894 cases of diphtheria, 149 cases of enteric fever, and 207 were found at the time of admission, or subsequently, to be suffering from disorders other than the infectious disease notified. Of the total admissions, 63.2 suffered from scarlet fever, and 82 deaths were referable to this disease or its complications, the percentage mortality calculated according to the Registrar-General's formula being 3.79—a lower death-rate than has ever been recorded in this hospital.

The type of this disease was much below the average severity as observed for many years past; serving to support the opinion that scarlet fever is a diminishing disorder, and that with its mitigation there is a proneness to localisation.

In reference to age, 33.9 were under five years, and 40.8 between five and ten years.

The number of diphtheria cases admitted approximated very closely to those of 1896, viz., 894. Of this number, 170 proved fatal, the mortality, calculated by the recognised formula, being 18.81, as against 29.77 of the preceding year.

This disease was unquestionably very much milder—at least, as seen here—and a large number have been included which in years past would not have been so classified —the bacteriological examination outweighing the clinical diagnosis. Of these cases, 45.9 per cent. were under five years of age, and 36.6 per cent. between the years of

five and ten, or a total of 82.6 per cent. under ten years of age. In the number of deaths are included 32 that succumbed within forty-eight hours after admission. The operation of tracheotomy was called for in 43 cases, with a successful result of 67.5 per cent. Suppression of urine, although not appearing among the list of complications, numbered 49, all cases of which necessarily proved fatal.

To students of the subject of diphtheria, it is, of course, well known that there are, broadly speaking, three ways of diagnosing the disease. Firstly, by clinical observation and experience only; secondly, by bacteriological examination of the membrane from the throat or elsewhere; and thirdly, by the combination of the two methods. Each of them, I take it, finds favour, but the clinician of experience is hardly prepared to surrender his practically certain knowledge on account of the absence of a now well-recognised bacillus; but, whereas in all ill-defined cases the bacteriological proof is, from the present standard of knowledge, deemed to be conclusive, such examinations have necessarily been very numerous in the past year, and I am indebted to my colleague, Dr. Starkey, who combines the post of bacteriologist with that of assistant medical officer in this institution, for the report on the subject in the appended medical supplement, p.

Of the 149 enteric cases, 26 died, a percentage of 17.93, or a mortality of 10.9 in females and 23.6 in males.

Other diseases contributed 207, with a death-rate of 7.31.

Of the 34 cases of post-scarlatinal diphtheria, three died. Again, the presence of diphtheria bacilli in cultures made explains the increased number of this complication, as compared with former years; every case demonstrating such being placed in this table, many of which were, however, of the mildest character, and from the onset indicated an almost certain recovery.

Measles was very prevalent in the latter weeks of 1897, no fewer than 62 cases being in evidence. Of these, one only died, lending strength to the opinion that the great mortality (as shown by the Registrar-General's return) in the Metropolis would be greatly reduced by the treatment of such patients in hospitals, and the necessity for such a highly infectious fever being placed among the compulsorily notifiable diseases.

The percentage of errors in diagnosis was 2.6 in scarlet fever, 9.06 in diphtheria, and 45.6 in enteric cases.

(Signed)

WM. GAYTON, Medical Superintendent.

No. 4.

WESTERN HOSPITAL.

FULHAM, S.W., February 3r.l, 1898

Statistics. The total number of cases treated during the year was 3,199, made up of 2,868 admissions and 330 which remained in hospital at the end of 1896. The discharges numbered 2,632, and of these 1,687, or 63 per cent., were transferred to other hospitals of the Board, and 945 were sent home; 236 died; and 331 remained under treatment on December 31st.

The gross mortality was 8.22 per cent.

Of scarlet fever, 2,138 cases were treated, 1,468 transferred, 369 discharged recovered, and 82 died, leaving 219 in hospital at the end of the year.

The percentage mortality was 4.26, as against 4.37 in the previous year.

The 82 fatal cases include 12 in which death was due to intercurrent disorders, viz, diphtheria, nine; measles, one; whooping cough, one; tuberculosis, one.

Post-scarlatinal diphtheria was observed in 48 cases, of which four died, a mortality of 8.33 per cent.

The incidence of the disease was somewhat less than in the previous year, being 2.5 per cent. on the completed cases, as against 2.9.

The death rate attending this form of diphtheria, and especially the death rate in the laryngeal cases, of which there were 14 with two deaths, was again in striking contrast to that which attained at this hospital prior to the introduction of the antitoxin treatment.

The number of cases of diphtheria under treatment was 766, which includes 102 remaining in at the end of 1896; 422 were discharged, 219 were transferred, 135 died, and 92 remained at the end of the year.

The mortality was 17.50 per cent., which is 4.43 per cent. below that of last year. The antitoxin treatment was employed in 65 per cent. of the cases admitted.

The operation of tracheotomy was necessitated in 34 cases, of which 11 died and 23, or 67.6 per cent., recovered. This recovery rate is 8 per cent. higher than has hitherto been recorded in this hospital.

Of enteric fever, 77 cases were under treatment; of these 60 were discharged and seven died, leaving ten in hospital.

The mortality was 10.68, as against 13.17 in the previous year.

Of the 2,868 admissions, 113, or 3.9 per cent., were found not to be suffering from the disease which they were certified to have. The percentage of error was 2.1 in cases certified scarlet fever, 6.7 in cases certified diphtheria, and 29.6 in cases certified enteric fever.

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

No. 5.

SOUTH-WESTERN HOSPITAL.

LANDOR ROAD, STOCKWELL, S.W., January 31st, 1898.

Statistics. During the year 2,134 patients have been admitted, which, with 286 remaining in hospital at the end of the previous year, brings the total number under treatment up to 2,420.

Of these, 1,212 were discharged, 724 were transferred, 182 died, and 302 remained on December 31st.

The general mortality for all classes of disease was therefore 8.56.

The scarlet fever admissions numbered 1,383, and 215 remained over from the previous year. The total number treated was consequently 1,598. Of these, 676 were discharged, 680 (or rather over 50 per cent.) were transferred, 55 died, and 187 remained at the close of the year. The scarlet fever mortality was therefore 3.93 per cent. This is the lowest which has so far been recorded in this hospital.

Sixty-nine patients developed another infectious disease in hospital. Of these 31 were cases of diphtheria, representing an incidence of 2.5 per cent. amongst the scarlet fever convalescents. Two of them only were fatal, yielding a post-scarlatinal mortality of 6.4 per cent. This also is the lowest figure we have so far reached.

The best results hitherto attained were in the two preceding years, when the post-scarlatinal mortality was 18 and 8.3 per cent. successively. These figures compare very favourably with those for the year 1894, which immediately preceded the employment of antitoxin. The death rate was in that year 53.3 per cent.

If further tribute be required as to the value of antitoxin in this class of case, it may be noted that in only one instance during the year did the necessity for tracheotomy arise; in all the rest the serum treatment alone sufficed.

Amongst the 38 other cases of scarlet fever in which some intercurrent infectious disease arose in hospital, only one died, and that from measles.

There were admitted 564 cases of diphtheria, and 45 remained over from the preceding year. Of the total number treated, viz., 609, 376 were discharged, 44 were transferred, 95 died, and 94 remained on December 31st. The diphtheria mortality was therefore 17.6 per cent. If five cases be excluded in which death resulted from an intercurrent attack of scarlet fever, the mortality would then be 14.9 per cent., which is even lower than that of last year, when it was 16.3 per cent.

The average type of the cases admitted during November and December was exceptionally severe.

Antitoxic serum was used consistently throughout the year, 63 per cent. of the cases being of sufficient gravity to call for its employment.

In only five of the fatal cases was the serum not given. Three of them were mild cases of diphtheria, and death resulted from some cause unconnected with the disease, and the other two were obviously past the reach of any treatment, and died within two hours after their arrival.

It is to be feared that unless a larger proportion of patients can be brought into hospital at an earlier stage of the disease, the mortality cannot be expected to fall much below 15 per cent., even with antitoxin. No less than one-third of the diphtheria patients were not received into hospital until the fifth day of the disease, or later.

The number of cases of enteric fever admitted during the year was 94, and 17 remained over from 1896. Of these 111 cases, 73 were discharged, 22 died, and 16 remained at the close of the year. The enteric fever mortality was therefore 23.28.

Of the total admissions, 93, or 4.3 per cent., were found to be suffering from some miscellaneous disease other than scarlet fever, diphtheria, or enteric fever, as certified, and nine remained over from the previous year. Of these, 87 were discharged, ten died, and five remained in hospital on December 31st. The mortality amongst these cases was therefore 10.52.

The largest proportionate number of mistakes occurred in respect to the diagnosis of enteric fever.

Of 117 cases so certified, in 24, or 20.5 per cent., the diagnosis was held to be erroneous.

Of 609 cases certified diphtheria, the diagnosis was incorrect in 45, or 7.4 per cent., as evidenced by a bacteriological examination.

Of 1,404 cases certified scarlet fever, in 24, or 1.7 per cent., the patients were found to be suffering from some other disease.

> (Signed) F. FOORD CAIGER, Medical Superintendent.

APPENDIX I.—INFECTIOUS DISEASES.

No. 6.

FOUNTAIN HOSPITAL.

GROVE ROAD,

LOWER TOOTING, S.W., February 9th, 1898.

Statistics. The tables show that the total number of patients under treatment during the year 1897 was 3,167. Of these, 2,795 were direct admissions, and the rest (372 in number) were handed on from the previous year. There were 1,472 patients discharged recovered, 1,061 were transferred to the convalescent hospitals of the Board, 270 died, and 364 patients remained under treatment at the close of the year. The gross mortality was 9.6 per cent.

The scarlet fever admissions numbered 1,807, and those remaining from the previous year 267. Of these, 811 were discharged recovered, 914 transferred to the country, and 81 died. The scarlet fever mortality therefore was 4.4 per cent.

During the year 77 patients were admitted with coexistent scarlet fever and diphtheria. Nineteen of these died—a mortality of 24.6 per cent. Ninety-one scarlet fever patients developed diphtheria after admission, and of these two died—a mortality of 2.19 per cent.

All the serious cases were treated with antitoxic serum. The difference in the mortality emphasises more than anything else can the importance of early administration of antitoxin in these cases.

The diphtheria admissions numbered 875, and those remaining from the previous year 104. Of these, 556 were discharged recovered, 147 transferred to the country, 184 died, and 92 remained at the end of the year. The diphtheria mortality was 20.8 per cent. In 37 cases death took place within 48 hours of admission.

Tracheotomy was performed on 41 completed cases, with 14 deaths—a mortality of 34·1 per cent. The average diphtheria mortality since the regular administration of antitoxin was begun three years ago is 20·02 per cent., and, as compared with the average of 30·3 per cent. in the Board's hospitals before antitoxin was introduced, represents in round numbers a saving of 240 lives during that period in this hospital alone.

With regard to miscellaneous diseases, 113 patients were found not to be suffering from the disease for which they were certified; five died. The percentage of errors numbered $2\cdot 2$ in the case of scarlet fever, $8\cdot 3$ in the case of diphtheria, and $4\cdot 04$ on the total admissions.

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

No. 7.

SOUTH-EASTERN HOSPITAL.

HATFIELD STREET, S.E., January 13th, 1898

statistics. During the past year the accommodation of the hospital has been increased by the opening of a second two-storey pavilion, and also by the temporary addition of beds to certain wards, bringing up the total beds to 481.

The largest number of patients in hospital on any one night was 461.

The total number of cases treated was, however, 35 less than in the preceding year, viz., 3,259, as against 3,294.

The usual statistical tables are appended, and on comparing these with those for 1896, the most noteworthy difference is a fall of 3 per cent. in the case mortality of diphtheria. On the other hand, the mortality of enteric fever has risen 1 per cent. The mortality among cases of diphtheria upon whom tracheotomy was performed, excluding those complicated by measles, &c., was 35-7 per cent., as against 32.

(Signed) F. M. TURNER, Medical Superintendent.

No. 8.

PARK HOSPITAL.

HITHER GREEN, S.E., January 10th, 1898.

statistics. The hospital was opened for the reception of patients on November 8th, 1897.

There were admitted 281 patients from that date to the end of the year. Twentyfive recovered, and 18 died, leaving 238 in hospital on December 31st.

(Signed)

R. A. BIRDWOOD,

Medical Superintendent.

No. 9.

BROOK HOSPITAL.

SHOOTER'S HILL, KENT, February 23rd, 1898.

Statistics. The total number of cases treated was 3,416. Of these, 1,765 recovered, 972 were transferred to Gore Farm Hospital, and 182 died. There remained under treatment on December 31st, 497 patients. The mortality of all cases combined was 6.24 per cent.

The cases of scarlet fever treated numbered 2,400. Of these, 1,021 were discharged recovered, 972 were transferred to Gore Farm Hospital, and 62 died. The mortality was therefore 3.04 per cent.

The complications incident to the scarlet fever patients (see Table I., p. 157) show that the disease was of average severity. Of the diseases co-existing with scarlet fever, the most important was diphtheria (see Table IV., p. 159, and Table VI., p. 164). Forty patients showed concurrent scarlet fever and diphtheria when admitted, while 56 developed diphtheria after admission.

The cases of concurrent scarlet fever and diphtheria on admission were distributed as follows during the months of the year:—There were five in January, six in February, three in March, four in April, two in May, four in June, three in July, none in August, one in September, four in October, two in November, and six in December.

Post-scarlatinal diphtheria cases occurred for the most part during the autumn and winter months. There were 13 in January, 11 in February, one in March, none in April, none in May, one in June, four in July, three in August, two in September, six in October, six in November, and nine in December.

The distribution of the cases in the several wards was erratic.

None in A 1. 1 each in A 2, B 2, G 1, G 2, H 2, R, and S. 2 each in C 1, E 2, P, and Q. 3 each in E 1, F 1, H 1. 5 in B 1, C 2, D 1. 8 in F 2. 9 in D 2.

A causal relation did not appear to exist between any two cases in a particular ward. All the patients recovered. The severe cases were treated systematically with antitoxin.

The cases of diphtheria treated numbered 752. Of these, 549 were discharged recovered and 84 died. The mortality was therefore 13.11 per cent. The disease was of very much the same severity as in the two preceding years. Twelve patients died within 24 hours of admission. The mortality of 13.11 per cent, was exceptionally low—the lowest annual mortality that has occurred in my hospital

experience. Tracheotomy was performed in 32 cases. Ten of these died. Therefore 69 per cent. of the tracheotomies recovered.

Eighty per cent. of the cases were treated with antitoxin.

The following table shows briefly the results of the antitoxin treatment, with especial reference to the day of disease in which the treatment was commenced :---

DAY OF DI	SEAS	E.	18	st.	21	nd.	3r	d.	4t	h.	5th & :	after.	TOTAL.		dity nt.
Ages.			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Mortality per cent.
Under 1			1	0	8	1	0	0	1	0	7	2	17	3	17.6
1 to 2			1	0	2	1	6	2	2	1	17	4	28	8	28.5
2 to 3			0	0	13	0	11	1	8	2	13	1	45	4	8.8 \ 16.5
8 to 4			1	0	15	1	16	1	13	5	22	4	67	11	16.1
4 to 5			2	0	9	0	12	3	19	2	19	5	61	10	16.4 1
5 to 10			4	0	39	2	35	4	41	7	69	20	188	33	17.5
·10 to 15			2	0	17	1	14	0	13	2	20	1	66	4	6:06
15 to 20			0	0	3	0	4	0	1	0	6	1	14	1	7.14
20 and up	war	ls	1	0	4	0	6	1	2	0	8	1	21	2	9.5
Total			12	0	110	6	104	12	100	19	181	39	507	76	14.9
Mortalit cent	ty pe	er}				5.42		11.5		19		21.5		14-9	

TABLE I.-Cases treated with Antitoxin, 1897.

It is to be noted that of the cases in which antitoxin treatment was commenced on the first day of the disease the mortality was nil; on the second day it was 5.4 per cent.; on the third day, 11.5 per cent.; on the fourth day, 19 per cent.; and on the fifth or later, 21 per cent.

This confirms the results of the antitoxin treatment obtained in 1895 and 1896, and shows the paramount importance of early diagnosis, followed by antitoxin treatment at the earliest possible moment.

The cases of enteric fever treated numbered only 92. Of these, 59 were discharged recovered and 18 died; the mortality was therefore 23.38 per cent. The male cases were of a very severe nature.

The miscellaneous diseases treated numbered 172; of these, 136 were discharged recovered and 18 died; the mortality was therefore 11.35 per cent.

The hospital has been inspected by many persons interested in hospital work. by medical officers of health, by medical practitioners at home and abroad, by the Inspector-General of Hospitals and Fleets, and by deputations from Leeds and Glasgow. All have expressed themselves in terms of high praise of the plan and construction of the hospital, and many of them have remarked that the Brook need not fear comparison with any hospital at home or abroad.

(Signed)

JOHN MACCOMBIE,

Medical Superintendent,

No. 10.

NORTHERN HOSPITAL.

WINCHMORE HILL, LONDON, N., February, 1898.

statistics. On December 31st, 1896, 852 cases were remaining in hospital, 5,285 were admitted during 1897, and the total number treated during the year was 6,137. 5,258 were discharged, three were transferred to other hospitals of the Board, and ten died.

Of the admissions, 4,533 were scarlet fever and 752 diphtheria cases. Of the former nine and of the latter one died. The gross mortality was 0.189, that of scarlet fever 0.198, and of diphtheria 0.134.

The complications were much of the usual character, but were generally less numerous than in the preceding year.

The hospital was free from measles up to December 12th; from that date to the end of the year, seven cases occurred, arising from two separate centres of infection.

Two hundred and sixty-seven cases of post-scarlatinal diphtheria were completed during the year, with three deaths; a mortality of 1.127. In one of the three fatal cases, death was not due to diphtheria, and in another was probably unconnected with the diphtheria attack; the actual mortality was therefore less than 1 per cent.

Antitoxin was given in 232, or nearly 87 per cent. of the cases, and to this remedy the result attained is undoubtedly due.

By the application of the treatment, on the lines already initiated by the action of the Board, to primary diphtheria in its early stages, it appears reasonable to expect that the fatality of that form of the disease may be similarly reduced.

Fifty-four diphtheria convalescents contracted scarlet fever ; of these one died.

(Signed)

F. N. HUME, Medical Superintendent. GORE FARM HOSPITAL, 1897.

No. 11.

GORE FARM HOSPITAL.

DARENTH, NEAR DARTFORD, KENT, February, 1898.

Statistics. There were 4,191 cases of scarlet fever under treatment. Of these, 3,605 were discharged recovered, five were transferred to other hospitals, 11 died, and there remained 570 under treatment at the end of the year. The death rate was .307.

Throughout the year 186 cases of post-scarlatinal diphtheria occurred, the incidence on all patients being not quite 4.5 per cent. The death rate on 175 completed cases was 2.3 per cent.

(Signed)

FREDERIC THOMSON, Medical Superintencient.

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APPENDIX I.- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE I .- Showing the

				E	ASTERN	HOSPIT	FAL.				
			Remain-		during 1897.	Total	Disch	arged g 1897.			Remain-
DISEASES.			ing on Dec. 31st, 1896.	Direct from homes.	From other Hospitals of Board.	under treatment during 1897.	Re- covered.	To other Hospitals of Board.	Died during 1897.	Mortality per cent.	ing on Dec. 31st 1897.
Scarlet Diphtheria			273 70	$1,465 \\ 1,174$	1	$1,739 \\ 1,244$	629 604	$910 \\ 264$	76 192	4.93 17.18	$ 124 \\ 184 $
Enterie Typhus			16	105 1		121 1	86 1		17	16 34	18
Other diseases			11	829		340	286		36	11.06	18
Totals			370	3,074	1	3,445	1,606	1,174	321	10.39	844
				NORT	H-EASTI	ERN HO	SPITAL.				
Scarlet			392	2,441		2,833	1,396	1,018	78	2.96	846
Diphtheria Enteric				3 1		3 1	8 				
Other diseases			2	79		81	62		8	10.74	11
Totals			394	2,524		2,918	1,461	1,018	81	3.18	358
				NORT	H-WEST	ERN HO	SPITAL				
Scarlet			201	2,150		2,451	1,010	1,076	82	8.79	283
Diphtheria			105	894		999	743		170	18.81	86
Enteric	•••	•••	15	149		164	115		26	17.93	23
Other diseases			5	207		212	188		15	7.31	9
Totals			426	3,400		3,826	2,056	1,076	293	8.58	401
				W	ESTERN	HOSPI	TAL.				
Scarlet			212	1,925	1	2,138	369	1,468	82	4.26	219
Diphtheria			102	766 64		868	422	219	135	17.50	92
Enteric			13			77	60		7	10.68	10
Other diseases	•••		3	113		116	94		12	10.95	10
Totals			330	2,868	1	3,199	945	1,687	236	8.22	331
				SOUT	H-WEST	ERN HO	OSPITAL				
Scarlet			215	1,380	8	1,598	676	680	55	3.93	187
Diphtheria Enteric			45 17	564 94		609 111	376 73	44	95 22	17.60 23.28	94 16
Other diseases			9	93		102	87		10	10.52	5
Totals			286	2,131	8	2,420	1,212	724	182	8.56	302
				FC	OUNTAIN	HOSPI	TAL.				
Scarlet			267	1,807		2,074	811	914	81	4.48	268
Diphtheria			104	875		979	556	147	184	20.86	208 92
Enteric		•••									
Other diseases			1	113		114	105		5	4.48	4
			and the second se								

Admissions, Discharges, and Deaths during 1897.

			SOUT	H-EASTI	ERN HO	SPITAL				
		Remain-	Admitted d	luring 1897.	Total	Disch during				Remain
DISEASES.		ing on Dec. 31st, 1896.	Direct from homes.	From other Hospitals of Board.	under treatment during 1897.	Re- covered.	To other Hospitals of Board.	Died during 1897.	Mortality per cent.	ing on Dec. 31st 1897.
timb themin		2.0.1	1,696 707	3	1,893	555	1,026	76	4.53	236
intente.	•••• •••	32	174		838 206	528 149	78	122 34	17.06 19.04	$\frac{115}{23}$
Second Lawrence			1		2	2				
ther diseases		8	812		320	263		34	11.14	23
Totals		366	2,890	3	3,259	1,492	1.104	266	9.24	397
				PARK H	IOSPITA	L.				
			231		231	23		12	9.02	196
piphtheria interic			42		42		· ···	4	17:39	38
			8		8	2		2	33-33	4
Total			281		281	25		18	11.11	238
	RETUCTION		· F	ROOK	HOSPIT	АТ.				
		000		ILCON .	100000		0.00			1 330
		101	$2,018 \\ 648$		$2,400 \\ 752$	$1,021 \\ 549$	972	62 84	3.04 13.11	345 119
			77		92	59		18	23.38	15
ther diseases		9	163		172	136		18	11.35	18
Totals		510	2,906		3,416	1,765	972	182	6.24	497
			NO	RTHERI	N HOSP	TAL.				
carlet		789		4,533	5,322	4,536	8	9	0.198	774
iphtheria		00		752	815	722		1	0.134	92
ther diseases										
Totals		852		5,285	· 6,137	5,258	3	10	0.189	866
ALL MARKED WATEL CONTINUES.			GOI	RE FAR	M HOSP	ITAL.				
carlet Diphtheria				3,531 	4,191	3,605	5	11	0.307	570
ther diseases										
Totals		660		3,581	4,191	3,605	5	11	0.307	570
			S	TIMI	MAF	2.82				
carlet		3,685	15,113	8,072	18,798	14,631	8,072	619	4.07	3,548
iphtheria		724	5,673	752	6,397	4,498	752	987	17.69	912
nteric		1	664		772	542		124	18.64	106
yphus		1	2		3	3				
Totals Other diseases		10	$21,452 \\ 1,417$	8,824	$25,970 \\ 1,465$	$19,674 \\ 1,223$	8,824	$1,730 \\ 140$	8.07 10.07	$4,566 \\ 102$
Grand Total	ls	4,566	22,869	8,824	27,435	20,897	8,824	1,870	8.19	4,668
otes.—Thé mortali found in the An The mortality by 100; by half t	nual Re v rates :	ports of the are calculate	Medical St ed according	g to the Re	nts. gistrar-Gen	eral's Form	ula-i.c., by			

APPENDIX I .-- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE II. - Showing the Monthly Admissions

					EAST	ERN HO	SP	TAL.					
1				A	DMISSIC	ONS.					ai	DISCHA	ARGES.
MONTH.	Sc Direct from	arlet. From other	Dipht Direct from	beria. From other	En Direct from	teric. From other Hospitals	Typhus.	Direct	Diseases. From other Hospitals	Total.	DEATHS.	Re- covered.	To other Hospitals of Board.
	Homes.	Hospitals of Board.	Homes.	Hospitals of Board.	Homes.	of Board.	L	Homes.	of Board.	238	05	123	107
Jan. Feb.	$144 \\ 123$				6 8			$ \frac{27}{15} $		202	25 25	116	80 80
Mar.	142		57 46		9 2			21 24		229 203	23 27	$\frac{128}{127}$	63
April May	131 109		52		5			27		193	15	147	67
June	122		108		8		1	33		272 280	17 26	127 123	88 150
July	132 132		110 130		12 12			26 24		298	26	93	129
Aug. Sept.	132		150		13			30		331	28	156	135
Oct.	107		131		7			33		278 289	33 33	147 138	112 109
Nov.	113		$127 \\ 146$		9 14			40 29		263	45	181	54
Dec.	72	1									321	1,606	1,174
Totals	1,465	1	1,174		105		1	829		3,075	021	1,000	1,1.1
				NO	RTH.I	ASTERI	IN	IOSPI	TAL.				
Jan.	165							1		166	7	160	73 66
Feb.	121		1					4 6		126 156	4	97 118	66 24
Mar.	$150 \\ 160$							6		166	8	113	80
April May	172		1					5		178	5	67	83
June	192			#				10		202 271	0 12	87 121	64 93
July	260		1					10 10		291	14	99	114
Aug.	281 260							7		267	4	121	148
Sept. Oct.	257				1			4		262	5	156	99
Nov.	250							6		256 183	6 10	155 167	98 76
Dec.	178							10					
Totals	2,441		3		1			79		2,524	81	1,461	1,018
				NO	RTH-V	VESTER	NJ	HOSPI	TAL.				
Jan.	151		62		5			7		225	32	163	30
Feb.	113		39		7 8			18 15		177 224	12 20	203 170	36 52
Mar.	125 141		76 55		·			1.77		213	9	155	40
April May	177		82		5			13		277	28	133	44
June	149		67		5					242	15	179	78 97
July	197		100		13			3.2		325 301	23 26	167 137	99
Aug.	188		73 72		25 18			10		367	32	167	165
Sept. Oct.	259 235		97		24			34		390	32	188	171
Nov.	233		78		18			24		353	28	161 233	171 93
Dec.	182		93		21			10		306	36		
Totals	2,150		894		149			207		3,400	293	2,056	1,076
					WES	TERN H	tos	PITAI	L.				
Jan.	* 134		60		3					201	22	65	110
Feb.	96		54		5					161	15	71 96	104 95
Mar.	105		66					84		179 187	12 11	69	114
April	121 138		54 72		8			11		227	20	75	105
May June	149		54		8			. 10		216	15	77	106
July	209		87		8					313	21	97	178 196
Aug.	208		71		7			1 1 1		296 288	29 21	65 67	195
Sept.	209		63 67		4			2.4		297	25	197	161
Oct. Nov.	201		62		5			. 5		287	19	89	197
Dec.	140		56		3		-	10		217	26	77	123
Total	s 1,925	5 1	766		64			. 113		2,869	236	945	1,687

of various Diseases, with Discharges and Deaths from all causes during 1897.

fan. Seb. Mar. April May June June July Aug. Sept. Dct. Nov. Dec.	Direct from	arlet. From Hospitals of Board. 	Diph Direct from Homes. 40 39 33 32 33 37 70 54 54 65 56 51 564 81	A theria. From other Hospitals of Board. 	DMISSIC En Direct from Homes. 9 12 2 2 4 7 6 12 11 11 14 13 4 94	DNS. teric. From other Hospitals of Board. 	Typhus.	Direct from Homes. 7 11 6 5 11 10 12 7 6 8	Diseases. From other Hospitals of Board. 	Total. 154 168 135 109 153 170 256 218 184	NHTAR DEATHS.	DISCHA Re- covered. 122 109 94 109 95 93 99 93	ARGES. To other Hospitals of Board. 25 43 35 30 39 58 95 95
fan. Seb. Mar. April May June July Aug. Sept. Dec. Fotals 1, fan. Seb. Mar. April May June July Aug. Sept. Dec. Totals 1, Seb. Mar. April May June July Aug. Sept. Dec. Nov. Dec. Nov. Dec. Nov. Dec. Nov. Dec. Nov. Nov. Dec. Nov. Dec. Nov. Nov. Dec. Nov. Nov. Dec. Nov. Nov. Dec. Nov. Nov. Dec. Nov. Nov. Nov. Dec. Nov. Nov. Nov. Dec. Nov. Nov. Nov. Dec. Nov. Nov. Nov. Nov. Dec. Nov. Nov. Nov. Dec. Nov.	Direct from Iomes. 98 106 94 72 105 116 168 145 118 174 141 48 1,380 129 110 106 89	From other Hospitals of Board.	Direct from Homes. 40 39 33 32 33 37 70 54 54 65 56 51 564	From other Hospitals of Board.	Direct from Homes. 9 12 2 4 7 6 12 11 11 14 13 4	From other Hospitals of Board.		Direct from Homes. 7 11 6 5 11 10 12 7 6 8	From other Hospitals of Board.	$154 \\ 168 \\ 135 \\ 109 \\ 153 \\ 170 \\ 256 \\ 218$	$15 \\ 17 \\ 9 \\ 7 \\ 11 \\ 9 \\ 20 \\ 11$	covered. 122 109 94 109 95 93 99 93	Hospitals of Board. 25 43 35 30 39 58 95
Tan. Seb. Mar. April May June July Aug. Sept. Dec. Fotals 1, Fan. Seb. Mar. April May June July Aug. Sept. Dec. Nov. Dec. Seb. Mar. April May June July Aug. Seb. Mar. April May June July Aug. Seb. Mar. April May June July Aug. Seb. Mar. April May June July June July June July June July June July June July June July June July June July June July June July June July June July June July June July July June July July June July June July June July July June July July July July July July July July	from fomes. 98 106 94 72 105 116 168 145 113 174 141 48 1,380 129 110 106 89	other Hospitals of Board. 	from Homes. 40 39 33 32 33 37 70 54 54 65 56 51 564	other Hospitals of Board.	from Homes. 9 12 2 2 4 7 6 12 11 14 13 4	other Hospitals of Board.		from Homes. 7 11 6 5 11 10 12 7 6 8	other Hospitals of Board.	$154 \\ 168 \\ 135 \\ 109 \\ 153 \\ 170 \\ 256 \\ 218$	$15 \\ 17 \\ 9 \\ 7 \\ 11 \\ 9 \\ 20 \\ 11$	covered. 122 109 94 109 95 93 99 93	of Board. 25 43 35 30 39 58 95
Seb. Mar. April May June July Aug. Sept. Dec. Fotals 1, Fan. Seb. Mar. April May June July Aug. Sept. Det. Nov.	106 94 72 105 116 168 145 113 174 141 48 1,380 129 110 106 89	 	39 33 32 33 37 70 54 54 65 56 51 564		$ \begin{array}{c} 12 \\ 2 \\ $		···· ··· ··· ···	$ \begin{array}{c} 11 \\ 6 \\ 5 \\ 11 \\ 10 \\ 12 \\ 7 \\ 6 \\ 8 \end{array} $		$ \begin{array}{r} 168 \\ 135 \\ 109 \\ 153 \\ 170 \\ 256 \\ 218 \\ \end{array} $	$ \begin{array}{r} 17 \\ 9 \\ 7 \\ 11 \\ 9 \\ 20 \\ 11 \end{array} $	109 94 109 95 93 99 99	43 35 30 39 58 95
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day June July Aug. Sept. Det. Nov. Dec. Fotals 1, Jan. Seb. Mar. April May June July Aug. Sept. Det. Nov.	105 116 168 145 113 174 141 48 1,380 129 110 106 89	 3 3	33 37 70 54 54 65 56 51 564				····	$ \begin{array}{c} 11 \\ 10 \\ 12 \\ 7 \\ 6 \\ 8 \end{array} $		$ \begin{array}{r} 153 \\ 170 \\ 256 \\ 218 \\ \end{array} $	$ \begin{array}{c} 11 \\ 9 \\ 20 \\ 11 \end{array} $	95 93 99 93	39 58 95
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fuly Aug. Sept. Det. Nov. Dec. Fotals 1, fan. Seb. Mar. April May June July Aug. Sept. Det. Nov.	168 145 113 174 141 48 1,380 129 110 106 89	 3 3 	70 54 54 65 56 51 564					$\begin{array}{c}12\\7\\6\\8\end{array}$	 	$\begin{array}{c} 256 \\ 218 \end{array}$	$\frac{20}{11}$	99 93	95
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Vov. Dec. Cotals 1, fan. Feb. Mar. April May June July Aug. Sept. Det. Nov.	141 48 1,380 129 110 106 89	3 3 	56 51 564		13 4					0.01	01	106	64
Dec. Fotals 1, Feb. Mar. April May June July Aug. Sept. Det. Nov.	48 1,380 129 110 106 89	3 3	51		4		1000	6		$\frac{261}{216}$	21 27	121 94	126 89
fan. Seb. Mar. April May June July Aug. Sept. Det. Nov.	129 110 106 89				94			4		110	20	77	25
Seb. Mar. April May June July Aug. Sept. Det. Nov.	110 106 89		81					93		2,134	182	1,212	724
Seb. Mar. April May June July Aug. Sept. Det. Nov.	110 106 89		81		FOUN	TAIN H	tos	PITAL					
Mar. April May June July Aug. Sept. Det. Nov.	106 89							5		215	82	95	81
April May June July Aug. Sept. Det. Nov.	89		66					10		186	25	184	84
May fune fuly Aug. Sept. Det. Nov.			87 64					2 4		195 157	21 17	151 129	17 62
June July Aug. Sept. Det. Nov.			86					5		233	24	90	96
Aug. Sept. Det. Nov.	114		57					11		182	23	91	61
Sept. Det. Nov.	182		87					13		282	28	128	76
Det. Nov.	$ 164 \\ 183 $		54 70					9		227	15	110	68
Nov.	243		71					$\frac{12}{10}$		265 324	21 15	143 159	90 166
Dec.	158		87					20		265	31	94	138
	187		65					12		264	18	148	122
fotals 1	1,807		875					113		2,795	270	1,472	1,061
				SO	UTH.E	ASTER	NI	IOSPI	FAL.				
Jan.	82		51		20			13		166	12	110	74
Geb.	100 81		59		10			14		183	14	126	69
Mar. April	103		71 54		12 7			15 20		179 184	19 16	126 87	38
May	105		51		4			22		182	19	91	90 51
June	120		72		6			27		225	11	126	56
July	175	1	50		7			37		270	28	107	94
Aug.	$205 \\ 183$	1	58		25			33		322	34	113	123
Sept. Det.	214	1	53 53		30 20			32 44		298 332	24 25	151 157	138 143
Nov.	164		69		18		1	26		278	31	145	143
Dec.	164		.66		15			29		274	33	153	114
Fotals 1	1,696	8	707		174		1	312		2,893	266	1,492	1,104
2	-				PA	RK HO	SPI	TAL.					
Jan.													
Feb.													
Mar. April													
May													
June													
July													
Aug.													
Sept. Oct.													
Nov.	197							1		201	6		
Dec.	34		42					4		80	12	25	
Fotals			42										and the second se

APPENDIX I.- INFECTIOUS DISEASES.

1		ATISTICST	ABLE II. (continued)—Showin ischarges and Deaths from all co	ig the Monthl	
			BROOK HOSPITAL.		
		АІ	DMISSIONS.	4	DISCHARGES.
	Scarlet.	Diphtheria.	Enteric, de Other Diseases.	THS	

Typhus,

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Direct

from

Homes.

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Hospitals of Board.

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From

other

Hospitals of Board.

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DEATH

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Total.

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173

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249

291

285

241

314

300

244

2,906

336

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covered.

146

142

166

175

159

124

134

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117

162

182

159

1,765

434

To other Hospitali of Board

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NORTHERN HOSPITAL. 291 45 050 * *

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			GORE	FARM	HOS	PITA	L.				
Totals	 4,533	 752						5,285	10	5,238	
Dec.	 337	 18				•••		855	2	338	
Nov.	 514	 94						608		573	
Oct.	 518	 60						578		584	
Sept.	 592	 71						663		552	
Aug.	 468	 78						546	1	467	
July	 479	 66						545	1	485	
June	 307	 68						375		275	
May	 274	 73						347	1	354	
April	 267	 58						325		397	
March	 234	 66						300		350	
Feb.	 252	 55						307	2	449	
42.00.000	 	 						1			

Jan.		241								241		826	
Feb.		247								247	2	346	
Mar.		51					1			51		272	
April		171								171		159	
May		183								183		114	
June		182								182	1	122	
July		391								391	1	265	1
Aug.		405				***				405	2	267	
Sept.		372								372	1	323	
Oct.		517								517	1	521	1
Nov.		421								421		419	
Dec.		350								350	8	471	8
Totals		3,531								3,531	11	3,605	5
					CTT	MIM	-	27 27					
2 10 10	-				30.	LVAL LVAL		L.L	•				
Jan.	1.063	532	412	45	49			71		1,595	164	1,743	577
Feb.	897	499	362	55	46			90		1,395	124	1,793	554
March	933	285	426	66	38			79		1,476	124	1.671	351
April	933	438	354	58	18			87		1,392	110	1,520	496
May	1,095	457	419	73	21			115		1,651	138	1,825	530
June	1,142	489	438	68	31		1	146		1,758	106	1,301	557
July	1,549	871	557	66	47			134		2,287	178	1,726	936
Aug.	1,513	874	509	78	89			126		2,237	169	1,543	952
Sept.	1,499	965	518	71	97			126		2,240	166	1,903	1,036
Oct.	1,659	1,036	542	60	90			166		2,457	176	2,292	1,097
Nov.	1,667	985	559	94	75		1	143		2,445	193	2,050	1,029
Dec.	1,163	691	577	18	62			134		1,936	222	2,030	709
Grand Totals	15,113	8,072	5,673	752	664		2	1,417		22,869	1,870	20,897	8,824

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MONTU.

Jan.

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Nov.

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Jan.

Totals 2,018

Direct

from

Homes.

160

128

130

116

147

180

226

190

154

228

196

163

From

other

Hospitals of Board.

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Direct

from Homes.

57

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36

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42

43

52

69

56

58

80

58

648

			FEVER STATIST		ECTIOUS DISEASES. FEVER ST/ Administrate and Deaths of Patients for	ATISTICS, 1897.	darias 1802.			71-75
EASTERN HOSPIT	AL. NORTH-EASTERN HOSFITAL	NORTH.WESTERN HOSPITAL	WESTERN BOSPITAL	BOOTH WENTERN HORPFYAL	FOUNTAIN MONPITAL	BOUTH-EASTERN BOSPITAL	PARE HOSPITAL BROOK HOSPITAL	TISTING.	GORN FARM	BUMMARY.
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APPENDIX I .--- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE IV .- Scarlet Fever

ABTENT MACRETAL. CONTRACTERNATION CONTRACTERNATION <th< th=""><th>-</th><th>-</th><th></th><th>-</th><th>-</th><th></th><th>-</th><th>-</th><th>-</th><th>-</th><th></th><th>-</th><th></th><th>-</th><th></th><th>-</th><th>-</th><th>-</th><th>-</th><th>-</th><th></th><th>-</th><th></th><th>-</th><th>-</th><th></th><th>-</th><th>-</th><th>-</th><th>-</th><th>-</th><th>-</th><th></th><th>-</th><th>-</th><th>-</th><th>-</th><th>-</th><th>-</th><th></th><th>-</th><th>-</th><th>-</th><th>-</th><th></th><th>-</th></th<>	-	-		-	-		-	-	-	-		-		-		-	-	-	-	-		-		-	-		-	-	-	-	-	-		-	-	-	-	-	-		-	-	-	-		-
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APPENDIX I .--- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE V .- Diphtheria

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	LES.	Died.	-	+ c,	10	20	15	15	34			-					:							107			-		-		-	-		-	61	-1	91			-	:					:	-	2.9
EASTERN	MALES.	Admitted		0 1	00	10	85	80	167	20	10	× 1	1	00	00		4				:			562		WESTERN	-	6	29	66	24	01	24.	TH	20	15	80	9	2		4	~	1	::		:	-	2000
		AGES.			7 011	2 10 3	8 to 4	4 to 5	5 to 10	to 15	2 4	2	20 10 20	25 to 30	to 35	01 04	05 01 00	40 to 45	45 to 50			00 01 00	And upwards	Totals				1	1 to 2	3			··· 0 0	:		::	20 to 25				30 to 40	40 to 45	45 to 50		55 to 60	And upwards	1	Lotals

dmissions and Deaths at various ages during 1897.

.T.	Died.	84 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	32 118 118 118 1148 333 332 333 6 6 6 6 6 6 3 323 332 33 332 33 332 333 6 6 1148 1148 1148 1148 1148 1148 1148
TOTAL.	Admitted.	16 243 243 243 243 243 243 243 243 243 243	99 549 549 549 549 688 1,962 688 142 688 142 61 835 18 142 61 835 18 18 18 18 18 18 18 18 18 18 18 18 18
68.	Died.	88	17 51 76 76 76 76 7 16 9 16 9 16 9 1 1 4 9 4 1 1 4 9 4 1 4 9 4 1 4 9 4 1 1 7 8 7 1 5 1 1 7 8 5 1 1 7 8 5 1 1 7 8 8 7 8 8 1 1 7 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 1 1 8 8 1 1 8 8 1 1 8 8 1 1 8 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1 1 8 1
FEMALES.	Admitted.	8 8 4 15 4 19 6 19 4 30 4 41 8 34 4 36 8 34 4 107 17 136 17 136 17 136 17 13 1 1 12 11 1 12 4 11 1 12 4 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 1 11 1 1 <td>48 165 292 354 378 1,073 145 69 69 222 12 38 38 38 38 38 38 372 4 4 372 4 4 4 38 38 38 38 38 44 37 44 37 37 37 37 37 37 37 37 37 37 37 37 37</td>	48 165 292 354 378 1,073 145 69 69 222 12 38 38 38 38 38 38 372 4 4 372 4 4 4 38 38 38 38 38 44 37 44 37 37 37 37 37 37 37 37 37 37 37 37 37
	Died.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
MALES.			1
-	Admitted.		eieisse ∞ eieieie
	AGES.	Under 1 1 to 2 2 to 3 2 to 3 3 to 4 5 to 10 10 to 15 15 to 20 20 to 25 30 to 35 30 to 40 55 to 50 55 to 50 55 to 50 55 to 50 7 cold 7 cold	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
	Died.	· ⊢ ∾ · ⊢ · · · · · · · · · · · · · · ·	1.1.1.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
TOTAL.	Admitted.	01010041~0000 in inn i i i i i i i i	1
S.	Died.		
FEMALES.		LIA	
F	Admitted.		
MALES.	Died.	2 1 2 4 4 4 1 1 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
W	.bəttimbA	NOR.	
	AGES.	Under 1 1 to 2 2 to 3 2 to 3 4 to 5 5 to 10 15 to 20 20 to 25 30 to 25 30 to 25 45 to 40 45 to 50 55 to 60 55 to 60 And upwards Totals	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
AL.	Died.	8 11 22 22 32 32 32 16 11 1 1 12 12 12 22 16 16 16 16 16 16 16 16 16 16 16 16 16	
TOTAL.	Admitted.	16 46 86 97 93 91 14 14 14 14 14 14 14 14 17 77 77 77 77 77 77 77 77 77 77 77 77	
ES.	Died.	2 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
FEMALES.	.Admitted.	4 2 26 8 48 12 39 9 54 9 130 14 11 1 6 1 6 1 1 1	
ES.	Died.	6 10 9 9 10 10 9 9 6 10 10 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
MALES.	Admitted.	12 20 38 38 38 38 38 38 38 38 38 38 38 38 38	
-		11111111111111111	· · · · · · · · · · · · · · · · · · ·
	AGES.	Under 1 1 to 2 2 to 3 3 to 4 4 to 5 1 0 to 15 1 0 to 15 2 0 to 20 3 0 to 35 3 0 to 40 4 0 to 45 5 0 to 55 5 0 to 55 5 0 to 55 7 otals G	Under 1 $1 to 2 \dots 1$ $2 to 3 \dots 2$ $2 to 3 \dots 3$ $2 to 5 \dots 3$ $1 to 10 \dots 10$ $15 to 20 \dots 35 \dots 35$ $20 to 25 \dots 30$ $30 to 35 \dots 35$ $15 to 40 \dots 45$ $15 to 50 \dots 55 \dots 50$ $50 to 55 \dots 50 \dots 55$ And upwards

APPENDIX I .--- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE VI. - Enteric Fever

	7		-		-					-	-	-	-		-				-			-		-				-	-	
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	TOTAL	Admitted.				::		:	: :	: :						1		6	10	12	П	0 0	2 00	0 10	00					64
Ŀ	LES.	Died.		:	: :	: :			: :	: :				:		:			: :			:	:-	• :	1	:		: :		01
HOSPITAL.	FEMALES.	Admitted.		:	:			:	: :	:				:		1	ITAL.	-	. 00	00	10	- 2	0 00	1	:		:	:-		22
	ES.	Died.		:	: :	: :	:	:	: :	:		:	:	:		:	N HOSPITAL.		: :	1	1	: *	•	: :			:	::		5
NORTH-EASTERN	MALES.	Admitted.		:	: :	: :		:	: :	: :				:	1	:	WESTERN	6	9	6	9.	# t-		+	00	:	: •	- :		42
OR			İ	:	: :	:	:	:	: :	:	:	:	:	:	-	:	A	-	:	:	:	:	: :	: :	:	:	1	::		:
24				:	: :	:	:	:	: :		:		:	:		:			. :	:	:		: :	: :	:	:	:	: .		Totals
	AGES			:	; ;	: :	:	:	: :	:	:	•••		ards		Totals			::				: :					sbr		
				Under 5	10 to 15	15 to 20	20 to 25	20 to 30	35 to 40	40 to 45	45 to 50	50 to 55	55 to 60	wdn puv				Under 5	5 to 10	10 to 15	15 to 20	20 to 20 95 to 20	30 to 35	35 to 40	40 to 45	45 to 50	00 10 00	And upwards		
	TOTAL.	Died.			1 01	00.1	- 0	- 12	• :		:	:				17			00		0.1	# 0X	2 10	1	:		:	: :		26
	Ton	Admitted.		10	32	17	12	12 1		1	1		1			105		61	22	24	20	8 8	17	8	4	:	:	::		149
	ALES.	Died.				67	c1 -		• :	:						9	Ч.		1			- 05	1	:	::	:	:	::		8
ITAL.	FEMALES.	Admitted.		201	14	10	9 0			1	1			:		52	HOSPITAL	1	11	~	13	* *	10	9	63	:	:	::		73
EASTERN HOSPITAL.	MALES.	Died.		:		1	10 -	1	: :	::	:					80		:	63			0 10	*	1	:	:	:	: :		18
EASTER	MA	Admitted.		- 0	18	1	9 0		a :	:	:		1			53	NORTH-WESTERN	1	11	16	11	14	-	2	67	:	:	::	Ì	76
				:	: :	:	:	:	: :	:	:	:	:	:	-	:	OR	;	:	:	:	: :	: :	;	:	:	:	: :	-	:
				:	: :	:			: :			:		:		:	A	:	:	:		: :				:	:	: :		
	AGES				: :				: :		::	:		ards		Totals		:		:		: :			:			urds		Totals
				5 to 10	10 to 15	15 to 20	20 to 25	20 to 30	35 to 40	40 to 45	45 to 50	50 to 55	09 01 00 V	And upwards				Under 5	5 to 10	10 to 15	10 10 20	25 to 30	30 to 35	35 to 40	40 to 45	40 to 50	55 to 60	And upwards		
			-	-		-	-						-									-		-		-	-	-		-

Admissions and Deaths at various ages during 1897.

I

		And in case of the local division of the		
	AL.	Died-	23 34 1 1 2 1	124
T.	TOTAL.	Ad- mitted.	33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 33 34 33 35 33 36 36 36 36 36 36 36 36 37 37 38 38 39 36 36 36 37 36 38 37 38 38 38 38 38 38 38 38 38 38 38 38 38 <	199
HOSPITAL.	LES.	Died.	1 1 0 1 1 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1	51
1000	FEMALES.	Ad- mitted.	2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	307
SOUTH-EASTERN	MALES.	Died.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	73
UTH-E	MA	Ad- mitted.		357
SO			ards ards ards ards ards ards ards ards	tals
	AGES.		15 15 15 15 15 15 15 15 16<	To
	9V	•	Under 5 10 11 5 to 10 15 11 10 to 15 12 15 to 20 10 15 20 to 25 10 20 to 25 10 20 to 45 10 45 to 40 10 55 to 65 10 55 to 65 10 And upwards Totals 10 11 5 to 10 11 10 to 15 10 15 to 20 10 25 to 30 10 10 to 15 10	Grand Totals
	TOTAL.	Died.		18
	Tot	Ad- mitted.		11
TAL.	FEMALES.	Died.	······································	
HOSPITAL.	FEM	Ad- mitted.	HOSPITAL	40
10000	MALES.	Died.	BROOK H	11
FOUNTAIN	MAI	Ad- mitted.		37
			reds i i i i i i i i i i i i i i i i i i i	:
	AGES.		Under 5 5 to 10 5 to 10 10 to 15 20 to 25 25 to 30 30 to 35 55 to 60 And upwards Totals Under 5 5 to 10 5 to 10 5 to 10 15 to 20 5 to 10 10 to 15 25 to 30 30 to 35 5 to 10 5 to 40 5 to 50 5 to 40 5 to 50 5 to 40	Totals
	AL.	Died.	H4H0004H 1110 8 11111111111111	÷
T.	TOTAL.	Ad- mitted.	91 92 93 94 95 97<	:
HOSPITAL.	FEMALES.	Died.		:
SN H	FEM.	Ad- mitted.	PARK HOSPITAL.	:
SOUTH-WESTERN	MALES.	Died.	1 - 3 - 3 - 3 - 1 - 1 - 1 - 1 - 1 - 1 -	
W-HTI	MA	Ad. mitted.		:
sot				:
	AGES.		10 110 110 110 110 110 110 110 110 110	Totals
	AG		Under 5 5 to 10 10 to 15 15 to 20 20 to 25 25 to 30 45 to 50 55 to 55 55 to 55 And upwards Totals 15 to 20 5 to 10 15 to 20 5 to 10 15 to 20 5 to 10 5 to 10 7 otals 5 to 10 5 to 50 5 to 10	To

81

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APPENDIX I.-INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE VIII. - Details of

Diseases as certified on admission. Num O Cas	General Disease as diagonal admission		er	EAST HOSP	No. of	NOR EAST HOSP	ERN	NOR WEST HOSP	TERN
Cas	General D					No. of		States and the second	
Scarlet Fever					Deatins	Cases.	No. of Deaths.	No. of Cases.	No. of Deaths
	Specific Febrile. Chickenpox							2	
	Influenza			1		1			
	Measles			9	5	6	1		
	Whooping-cou	gh		1		1		1	
	Febricula			1					
	Septicamia, P Irritant Poison	uerperat			1				
	Syphilis	ing				3			
	Gonorrhœa								
				17		8		8	
	Tubercular Ar					1	1	1	
	Septicæmia								
	Not classified. Rheumatism			1			*		
	LOCAL DIS Lymphatic Syste	m.							
	Lymphadenitis	s							
	Nervous System.								
	Puerperal Man	nia							
	Tubercle, Men	ingeal							
	Circulatory Syste Mitral Stenosis	em. s		1	1				
	Pericarditis								
	Respiratory Syst	tem.							
	Pneumonia, La			5		2	1		
	,, L	obular				2	1	2	
	Bronchitis					2		1	
	Phthisis Tuberculosis (1	Pulmonel							
	Pleurisy		-			 1	1		
	T amon altia								
	Digestive System	n.							
	Diarrhœa Enteritis								
	10 1111.1			 5		46		7	
	Carcinoma Py					1	1		
	Stomatitis					1			
	Gastric Catarri					;			
	Jaundice Gastro-Enterit				····	$\frac{1}{2}$	2		· · ·
	Intestinal Obs								
	Urinary System.					2			
	Bright's Disea Albuminuria								
	Skin Diseases. Eczema Erythema			$1 \\ 10$	'			$\frac{1}{7}$	
	Urticaria								
	Purpura								
	Lichen Impetigo Cont	tagiosa				•••		1	
	Pityrasis Vers	acolor						1	
P	Pityrasis Vers Dermatitis							and the second se	
Carried forward 3	Pityrasis Vers Dermatitis Phthiriasis			1.202					

Miscellaneous Diseases admitted during 1897.

OSP	TERN ITAL.		TH- FERN ITAL.	FOUNHOSP	TAIN ITAL.	SOU EAST HOSP		PA HOSP	RK ITAL.	BRO	DOK ITAL.	SUMI	MARY.
o. of ases.	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.	No. of Cases.	No. of Deaths.
											-		
2				1		1				2		8	
												2	
19	4	4		6	1	8	3	1	1	9		62	15
				1		2				3		9	
				1						7		9 2	
												1	1
												3	
3		1		6		2				5		40	
												$\frac{2}{1}$	1
										1	1	1	1
										1		2	
					-				pre-				
						1						1	
0				1									
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						2	2					2	2
												1	1
		1	1									î	î
										3		8	
		2				3						12	1
		1				1	1					6	2
2						2				2		9	
										2	1	2	1
						2	1					$\frac{2}{1}$	1
						1						1	
						-		1				1	1
				1	1	 1	1					2	2
5		9		6		21				14		113	
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de -	1				1.17								
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								1				1	
												2	
1		1		15		4				1		40	
3		1				1						5	
		1										1	
								1		2		$\frac{1}{3}$	
1												1	
						1						2	
										1		1	
18	4	22	1	40	3	55	10	4	1	55	2	370	36

APPENDIX I .--- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE VIII. (continued)-Details

Diseases as certified on	Number	Disease as diagnosed after	EAST HOSP	TERN ITAL.	EAST	TH- TERN ITAL.		TH- FERN ITAL.
admission.	Cases.	admission.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths,	No. of Cases	No. of Deaths
Brought forward .	370		53	7	75	8	28	
Scarlet Fever (continued)	5 6	Local Injuries. Bursitis Patellæ						
		Cut Wrist						
		Burn	1	1				
		Hare-lip Operation						
		Not Classified. Abdominal Myositis, with Suppuration						
		Epiphysitis						
		Otorrhœa Marasmus			2			
	> 96 <	Abscesses						
		No obvious disease	7				21	
		Acute Necrosis of Femur	1	1	1			
		Mammary Abscess Maxillary Abscess	1					
		Maxillary Abscess Dentition	1				···· 7	
		Cellulitis of Arm	1					
		Otitis						
		Cellulitis of Leg Psoas Abscess and Tuber-			•••			
		cular Enteritis						
) (Ptomaine Poisoning Adenitis						
		Adentits						
Diphtheria	466	General Diseases. Specific Febrile.	65	9	78	8	57	
- In the second s		Rötheln						
		Chickenpox						
		Measles	$\frac{2}{12}$	3			 1	 1
		Tuberculosis, Acute	1	1			1	1
		Whooping-cough	3	1			1	î
		Febricula Syphilis					1	
		Puerperal Septicæmia	2				1	
		Enteric Fever						
	-	Not classified. Thrush						
		Aphthæ						
	5 88	Delirium Tremens Pvrexia						
	(00)	Leucocythæmia	1				 1	 1
		LOCAL DISEASES.						1
		Nervous System.				1.000		
		Meningitis					2	
		Laryngismus Stridulus	1				1	
		Respiratory System. Pneumonia						
		, Lobar		1			 1	
		" Lobular	3	3			î	
		Broncho-Pneumonia Pleurisv						
		Bronchitis						
		Coryza	2					
	2 (Laryngitis	1					
	88	Carried forward	31	9			11	5
Carried forward	554		96	18	78		68	5

of Miscellaneous Diseases admitted during 1897.

	No. of Deaths.	No. of Cases. 22 1 1	No. of Deaths.	No. of Cases. 40 	No. of Deaths. 3 	No. of Cases. 55 1 1 1 1 1	No. of Deaths. 10 	No. of Cases. 4 	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases, 370	No. of Deaths 36
···· ··· ··· ··· ··· ··· ··· ··· ··· ·						1 1 					2	370	36
···· ··· ··· ··· ··· ··· ··· ··· ··· ·		··· ··· ··· ··· ···				1							
···· ··· ··· ··· ··· ··· ··· ··· ··· ·		··· ··· ··· ··· ···				1							Section 1
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···· ··· ··· ··· ··· ··· ··· ··		 1 											1.
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 3 1 42 4		1				 1				1		1	
3 42										1		3	
3 1 42										1	1	2	1
··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··						30				4		$\frac{1}{66}$	
···· ··· ··· ··· ··· ··· ··· ··												2	1
··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··												1	
··· 1 ··· 42												$\frac{1}{7}$	
··· 1 ··· 42 ··· 42												1	
1 42 4						1						1	
1 42 42												1	
42 4										1	1	1	1
42									•••			1	
 4										2		2	
 4	4	24	1	40	3	91	10	4	1	65	4	466	40
···· 4						1						1	
4				1								1	
					2		···: 1	2	 1			$\frac{2}{31}$	
	î											3	12 3
						1						5	2
1												1 4	
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				1								1	
		1.15											
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1	-1					 1			•••			1	1
												2	1
1	1											3	1
					•••							2	
						1						1	
		$\frac{1}{1}$	1									5	3
				2								53	3
						1						1	1
1 3				2								3	
						1						52	
12		2	1	10	2	13	1	2	1	7	4		27
54	4	26	2	50	5	104	11	6	2				67

APPENDIX I .- INFECTIOUS DISEASES.

FEVER STATISTICS-TABLE VIII. (continued)-Details

Diseases as certified on	Number	Disease as diagnosed after		TERN	EAST	TH- TERN ITAL.	WES	TH. FERN ITAL.
admission.	Cases.	admission.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths	No. of Cases.	No. of Deaths
Brought forward	554		96	18	78	8	68	5
Brought forward— Diphtheria	88		31	9			11	5
Diphtheria (continued)) (Digestive System. Suppurative Tonsillitis						
		Quinsy Dyspepsia					8	
		Stomatitis	4	1				
		Tonsillitis Dentition	$\frac{158}{2}$				58 1	
		Faucial Ulceration	ĩ					
		,, Cellulitis	2					
the second second		Glossitis						
		Alveolar Abscess	•••				1	
	555	Skin Diseases. Herpes Erythema					1	
		Erythema	1					
		Lymphatic System. Cervical Lymphadenitis	1					
		Unclassified.	0					
		No obvious disease Maxillary Abscess	3				1	
		Cervical Cellulitis	1	i				
		Sarcoma of Skull	1	1				
		Adenitis, Suppurative						
		Otitis Peritonsillar Abscess						
	1 1	Irregular Pulse						
	643		206	12			81	5
Enteric Fever		GENERAL DISEASES. Specific Febrile.						
		Tuberculosis, Acute	1	1			1	1
		Whooping-cough						
		Febricula Influenza	3 2				4	
		Tuberculosis	2				1 2	 1
		Pyæmia		3			ĩ	1
		Measles						
THE STREET		Syphilis	1	1				
		Septicamia	1					
		Malaria Dysentery						
	> 54 <	Glanders						
		Not classified.						
the first first		Cellulitis						
		Rheumatism	1				1	
		Pyrexia						
		Osteo-arthritis						
		LOCAL DISEASES. Nervous System. Melancholia						
		Cerebral Tumour	1	1				
	54	Carried forward	13	6			10	8
Carried forward	1,163		284	27	78	8	148	8

of Miscellaneous Diseases admitted during 1897.

	FERN ITAL.	SOU WEST HOSP	CERN	FOUNHOSP	TAIN ITAL.	EAST	TH. TERN ITAL.	PAHOSP	RK ITAL.	BRO	OOK ITAL.	SUMM	ARY.
vo. 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.	No. of Cases.	No. of Deaths
54	8	26	2	50	5	104	11	6	2	72	. 8	554	67
12	4	2	1	10	2	13	1	2	1		4	88	27
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3		2								1		10	1
37		41	1	62		93		2		60*		511	1
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52	4	45	2	72	2	112	1	4	1	71	4	643	31
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1		5	1			17	2			5	8	51	15
				-	-								
95	8	74	4	112	5	220	13	8	2	141	11	1,160	86

* One case with Morbus Cordis as well.

† One admitted previous year.

APPENDIX I.- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE VIII. (continued)-Details

Diseases as certified on	Number of	Disease as diagnosed after	EAST HOSP	TERN	EAST	TH. TERN ITAL.	NOR WEST HOSP	TERN
admission.	Cases.	admission.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths	No. of Cases.	No. of Deaths.
Brought forward	1,163		284	27	78	8	148	8
Brought forward— } Enteric Fever }	54	1	13	6			10	3
Enteric Fever (contd.)) (Nervous System (continued)						
		Meningitis, Tubercular Cerebral Hæmorrhage	4	4			8 1	3
		Alcoholic Neuritis						
		Hysteria					1	
		General Paralysis of Insane					1	
		Circulatory System.						
		Endocarditis, Malignant						
		Morbus Cordis	3				1	
		Pericarditis						
		Respiratory System.						
-		Planne Jumia						
		Pleurodymia Phthisis	2	ï			2	
		Bronchitis	ĩ					1
21. 1 1		Pleurisy						
		Pneumonia, Lobar	14	1			11	
		" Lobular					1	
		Empyema						
		Tubercle, Pleural						
E. 240 b.	209	Digestive System. Stricture of Rectum						
		Cirrhosis of Liver						
		Constipation	1				16	
		Stomatitis	1					
		Peritonitis	1	1				
		Perityphlitis Gastritis	4					
		Annandiaitia		••••				
		Tonsillitis	-1				$\frac{2}{1}$	1
		Tuberculosis Intestinalis						
		Tabes Mesenterica						
		Gastro-Enteritis					1	
		Diarrhœa Peritonitis, Septic	2				5	
		, Pelvic					1	1
		Dyspepsia					2	
		Colitis, Ulcerative						
		Tubercle, Peritoneal						
		Peritonitis, Tubercular Follicular Tonsillitis					1	1
		Intestinal Obstantian						
		Enteritis						
***		Urinary System.						
		Nonhritia Chronia						-
	1.1.1	Nephritis, Chronic Stricture of Urethra						
		Surgical Kidney						
	263	Carried forward	47	13			61	10
Carried forward	1,372		318	34	78	-8	199	15

f Miscellaneous Diseases admitted during 1897.

OSP	TERN ITAL.	WES'	TERN ITAL.		TAIN ITAL.	EAST	THOTAL.	PA	RK PITAL.	BRO	DOK ITAL.	SUM	WARY.
o. of ises.	No. of Deaths.	No. of Cases.	No. of Deaths										
5	8	74	4	112	5	220	13	8	2	141	11	1,160	86
1		5	1			17	2			5	3	51	15
		1	1			3	3					11 1	11
1	1					2	1					3	2
												1	
												1	
						3	3			1	1	4	4
						3 1	1					47	1
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						1						1	
2	1					4	3			1		11	6
2						1				1		4	***
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		3	1			2				2	2	8 1	3
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		6								ï		$\frac{1}{8}$	1
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,	4	24	7			87	20			25	8	263	62
3	12	93 .	10	112	5	290	31	8	2	161	16	1,372	133

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APPENDIX I .- INFECTIOUS DISEASES.

FEVER STATISTICS .- TABLE VIII. (continued)-Details of

Disease as certified on	Number	Disease as diagnosed after	EAST	ERN	NOR EAST HOSPI	ERN	NOR WEST HOSPI	ERN
admission.	of Cases.	admission.	No. of Cases.	No. of Deaths.		No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward	1,372		318	84	78	8	199	15
Brought forward— Enteric Fever	263		47	18			61	10
Enteric Fever (contd.)) (Generative System. Prolapsus Uteri					1	
		Endometritis	100 CO CO					
		Dysmenorrhœa Parametritis						
		Carcinoma of Uterus	1	1				
		., Scroti						
		Perimetritis						
	30	Skin Diseases. Erythema					1	
		Not Classified. Chronic Otitis, with Cere						
		bral Abscess No obvious disease						
		No obvious disease Otitis						
		Synovitis of Knee Chronic Otitis, with Mastoid	. 1					
		Abscess and Septicamia						
		Multiple Abscess	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1	
		Malnutrition Paralysis of Diaphragm					1	
) (Faraiysis of Diaphragm						
	293		53	14			68	10
Typhus	5 .	Malignant Endocarditis						
Typnus	2	Pneumonia						
	2							
Uncertified		Came in with Mother	. 3		1			
oncertined in in in	13	Born in hospital	0	1			1	
)	Tonsillitis						
	13		5	1	1		1	
	-							
				-				
				-				
GRAND TOTALS .	1,417		329	36	79	8	207	15

Miscellaneous Diseases admitted during 1897.

WEST	TERN TAL	WES	TERN PITAL.	FOUNHOSF	TAIN	EAS'	TH- FERN FITAL.	PA HOSE	RK PITAL.	BR	OOK PITAL.	SUM	MARY.
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,	No. of Cases.	No. of Deaths
113	12	93	10	112	5	290	31	8	2	161	16	1,372	133
19	4	24	7			87	20			25	8	263	62
'												1	
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						1						1	
						1						1	
												1	1
						$\frac{1}{2}$	1					$\frac{1}{2}$	1
												1	
										1	1	1	1
						6						13	
						2	1					2	
												1	
										1	1	1	1
												î	
												1	
						1						1	
19	4	24	7			102	22			27	10	293	67
						1	1					1	1
						1						1	
						2	1					2	1
				- 12									
				1								5	
						1						4	1
						4						4	
				1		5						13	1
13	12	93	10	113	5	312	34	8	2	163	18	1,417	140

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6

APPENDIX I.- INFECTIOUS DISEASES.

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iii. REPORTS OF THE MEDICAL OFFICERS OF THE RIVER AMBULANCE SERVICE AND OF THE MEDICAL SUPERINTENDENT OF THE SMALLPOX HOSPITAL SHIPS FOR THE YEAR 1897.

No. 1.

RIVER AMBULANCE SERVICE.

SOUTH WHARF,

ROTHERHITHE,

January, 1898.

During this past year, 1897, 121 cases have been sent to the wharf Statistics. certified as suffering from smallpox. Of these, there were-64 Sent to hospital ships direct 5 Sent after detention 1 Died of smallpox at wharf 1 Treated in shelters for smallpox Total smallpox cases *71 Of the remaining 50 cases, there were-26 Sent home direct 22 Sent home after detention 1 Died in shelters 1 Remaining under treatment 50 Total non-smallpox patients The following parishes contributed the cases of smallpox :----26 Camberwell $\overline{7}$ St. Paneras $\overline{7}$ Poplar 7 Greenwich 3 Bloomsbury 3 Wandsworth and Clapham 3 St. Olaves 4 Westminster 4 Strand 1 Woolwich 1 City 2 Hackney 1 Islington 1 Marylebone 1 Shoreditch *71 Includes two cases found after admission to the Hospital Ships not to be smallpox.

Forty-seven of these cases were contributed by the parishes of Camberwell, St. Pancras, Poplar, and Greenwich, and may, I think, all be traced to an imported case. A case of smallpox occurred on board a P. & O. steamer, and one of the foreign seamen visited a fellow-countryman residing in Camberwell, in Glengall Road, and at 128, Glengall Road, smallpox actually broke out. The patient, an unvaccinated child, was admitted to the Camberwell Infirmary, and, the case not being there recognised until the eruption was well developed, a number of cases occurred at this institution, and from there several other cases were to be traced to houses in this or other neighbourhoods. I think that there is little doubt that smallpox was introduced in the way I have stated, as from October 26th until the admission of the Lascar fireman on December 28th no case of smallpox had occurred in London.

The patient who died at the wharf from smallpox was E. J., a Lascar, aged 48, sent from Camberwell Infirmary suffering from hæmorrhagic smallpox. Patient was admitted February 7th, died on February 8th.

There has not been a case of smallpox admitted since July 25th, this case being also an imported one, smallpox having been contracted on an infected French steamer on the passage from East Africa.

Of the non-smallpox cases sent to the wharf, the corrected diagnosis is as follows :--

DISEAS (corrected diag		Sent direct home.	Sent home after detention.	Total.	REMARKS.
Varicella		 18	6	24	
Syphilis		 1	1	2	tes a classification test
Eczema		 1		1	A SARAHARA A SA A SA A SA A SA A SA A SA
Febricula		 	3	3	
Measles		 1	1	2	Print Barrish China
Acne		 1		1	and the state of the second second
Lichen planus		 1		1	and the president of the first
Pneumonia		 1	1	2	A PARTY DECISION
Enteric Fever		 	1	1	Remaining under treatment December 31st, 1897.
Rheumatic Eryther	ma	 	1	1	
Lichen scrofulosus		 1		1	series and the series of the s
Herpes		 1		1	an week to be strength and the second
Vaccinia		 	1	1	Died from senile decay.
Ulcerated Leg		 	1	1	
Nil		 	3	3	Second and second
Urticaria		 	1	1	
Malarial Fever		 	1	1	
Impetigo		 	1	1	
Acne medicamentos	sa	 	1	1	
Psoriasis		 	1	1	
		26	24	50	

Non-Smallpox Cases.

APPENDIX I .- INFECTIOUS DISEASES.

The patient who died at the wharf was W.C., a male, aged 82 years. This patient had been sent from an infected ward at the Central London Sick Asylum, and was suffering from vaccinia on admission, and, being very old and feeble, was unable to withstand the constitutional disturbance to which the vaccination gave rise, the patient having had a very bad arm.

(Signed)

T. B. BROOKE, Medical Officer, River Service.

No. 2.

THE SMALLPOX HOSPITAL SHIPS.

(For Statistical Tables, see pp. 96 to 110.)

LONG REACH, NEAR DARTFORD, KENT, January 25th, 1898.

statistics. Seventy patients were admitted into this hospital during the year 1897. One patient was under treatment on December 31st, 1896. On the corresponding date of last year the hospital was empty.

Of the 70 patients admitted, two were not suffering from smallpox. Both were cases of varicella.

Two patients were treated for smallpox at South Wharf, and were not admitted to the hospital. So that there was a total of 70 patients treated for smallpox in institutions of the Managers. Of these 70 patients 13 died—12 at the hospital and one at South Wharf—a very large number among so few patients. Three of the fatal cases were in an advanced stage of tuberculous disease, and were sent here from general hospitals; and, generally, of the patients admitted, an unduly large proportion had smallpox in a severe form. Thus, three patients died at the hospital and one at South Wharf of hæmorrhagic smallpox, and four more who died had symptoms approaching those peculiar to the hæmorrhagic type of the disease.

With one exception, all the patients were admitted during the first five months of the year, and the bulk of them in the first two months. In the month of December, 1896, no cases were admitted to the hospital until the end of the month, when a sailor was admitted from the Port of London. Early in January, 1897, two more sailors, besides another sporadic case, were admitted. At the end of the month a case was admitted from a boarding house in Bloomsbury, where an adult patient had been under treatment for "chickenpox." Three more persons shortly afterwards developed the disease, having contracted it from the same source.

On January 28th, a little boy was admitted from the Havil Street Infirmary, Camberwell. It is not known how he caught smallpox. His parents lived in the vicinity, and when he fell ill they took him to the infirmary. While under treatment there he developed the smallpox rash, the nature of which was not at first recognised. The boy fell ill on January 19th, and was removed from the infirmary on the 27th. During that time he conveyed the infection of smallpox to about 20 persons in and out of the infirmary. A small epidemic was thus started, which promised at one time to assume serious proportions. Happily on the prompt removal of the cases it rapidly subsided.

I have alluded to the fact that some sailors contracted smallpox at the end of 1896 and beginning of 1897, and were admitted to this hospital. This circumstance has doubtless some bearing on the fact that smallpox broke out in the Greenwich Hospital early in February. Five cases were removed during that month, but no cases afterwards occurred there. The Cleveland Street Sick Asylum was another hospital which became infected with smallpox at the beginning of February. Ten cases were traced to this source, but the origin of the outbreak was not ascertained.

After the end of February cases were admitted infrequently from various parts of London. The attacks were mostly isolated, or fell into groups of two or three. The last admission during the first five months of the year took place on May 17th. On June 14th, the patients then remaining were discharged, and the hospital was empty. No more patients were admitted until July 26th. On that date there was admitted a man who had recently arrived in London from Africa. He was discharged on August 14th. Thereafter until the end of the year the hospital was again empty.

Staff.

I present the usual return of the number of persons employed on the staff of the hospital in the course of the year.

Year.	Class.*	Number employed.	Contracted Smallpox.	Year.	Class.*	Number who entered Service,	Contracted Smallpox.					
1897 {	$7 \begin{array}{c cccc} I & 29 \\ II & 53 \\ III & 72 \\ IV & 42 \end{array}$		Nil.	1897	I. II. III. IV.	$ \begin{array}{c} 4 \\ 9 \\ 15 \\ 20 \end{array} $	} Nil.					
Total		196	-	Total		48	-					
	6	*	*			*						
			(8	Signed)	T. F.	r. f. ricketts,						

*CLASS I.-Includes those brought into intimate contact with patients, viz., nurses and members of the medical staff.

CLASS II.-Includes those somewhat less directly exposed to infection, such as wardmaids and laundrymaids.

CLASS III.—Includes those whose duties did not, as a rule, necessitate their entering the wards, or their being directly exposed to infection in other ways.

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CLASS IV .- Includes contractors' men and others temporarily employed at the hospital



SMA	LLP	ox s	та	TIS	TIC	3.—'	TAI	BLE	I.—	-Reti	irn sl	hourin		Nun	abers	of s	Small	lpox	Pati	ients	Adm		fron	i each	Par	rish o	r Un	ISTI ion d Vacci	luring	g eac		nth g	(the	Year	189	7; 6	he T	otal A	1 dmi	istica	u, Di	ischa	rgee,	and			96-:	98	
	Ran Hot Ist	AINING PITAL C JANUAR	13 13 17.	JAN	UART		FER	RUAR	IT.	Ма	RCH.	T	Агя	U.	Γ	Маз	r.	Γ	Juni	к.	Ι	JULI	6	A	DG UST		SEPT	EMBER		Осто	B#R.	No	OV EMI	BER.	DE	CEMB	KR.	ADM	OTAL LBSIC		DE	ATILS.	1	Discil	ABGE	- 11 11	LOSPH LOT DO	TAL ON	
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PARISH OR UNION.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	A towned.	Freent. No Evidence	Absent.	l'resent.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	No Evidence.	Absent.	Present.	A0 Evidence.	Atochi	Vo Voldana	Absent.	Present	No Publication	Abaant	
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Note 1The colum	ns bead	led = n	I evi	idence	e " et	ontai	n the	parti	icular	n of e	uner s	tated	N.B. to ha	-Ad	missi en V	ions, d	åc., fr ated,	rom	" othe	er die ng ne	eases visi	s " du ble ev	ring t	the ye	ar are	e not perati	inclu ion at	ded in ad also	this of	Retu	in wh	ieh n	o stab	emen	t was	made	e, but	the n	unture	e of	the er	uptio	on or	other	r cata	e pre	vent	ed	



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										A OF CECATE												Deaths among Vaccinated Car		esce "	tion
	Class $A^{\pm} \equiv h$	if and upwa	irds of one-h	alf square in	h notal area.	Class $\Lambda^{\pm} \equiv ce$				uch total area	Class			quare inch to	tal area.			* = Arons not				Vaccinated Car	Cica See	trices. Note*	was "abser
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	Four or more.	Three,	Two.	Ose.	Not recorded.	Four or	Three.	Two.	Ose.	Not recorded.	Four or more.	Three.	Two.	Ope.	Net recorded.	Your or more.	Three.	Two.	One.	Not recorded.	den l				
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REPORTS OF THE MEDICAL SUPERINTENDENTS OF THE SEVERAL ASYLUMS AND OF THE SCHOOLS FOR THE YEAR 1897.

(For Statistics, see pp. 116 to 139.)

[N.B.— Those portions of the reports relating to alterations to buildings and other matters of no general interest have been omitted.]

No. 1.

LEAVESDEN ASYLUM.

NEAR WATFORD, HERTS, January, 1898.

Statistics.

A STATE OF		Males.	Females.	Total.
On January 1st, 1897, the asylum contained	 	894	1,096	1,990
Admitted during the year	 	145	103	248
Total under treatment during the year	 	1,039	1,199	2,238
Discharged during the year	 	39	16	55
Died during the year	 	100	84	184
Remaining in the asylum on December 31st, 1897	 	900	1,099	1,999

The admissions, numerically, were well up to the average, and, as for many years past, reached us when well beyond the help of the psychologist, but in time to keep the medical and nursing staff well in action. The result of treatment unfortunately does not, except in rare cases, reward one for the care bestowed. Still, life is prolonged, witness the ages of many of our patients and number of years they have been resident. Of those admitted during the year—

31	were	between	60	and	70	
21	"	,,	70	,,	80	
4	,,	,,	80	,,	90	

The re-admissions were three in number-two males and one female.

E. C., male, was discharged to a county asylum in April, 1896, returned February 10th last, and died after a severe epileptic fit on June 2nd. E. N., male, was discharged as recovered, January 28th, 1891, returned November 16th last. The local magistrate refused to certify him as insane; he was therefore at once again discharged.

L. M., female, was removed to a county asylum as far back as March, 1877. She was sent back to us in November last. She has now lapsed into dementia.

Those admitted from county asylums are as follow :--

				Males.	Females.	1		
From	Colney Hate	h		18	23			
,,	Claybury .			21	7			
,,	Hanwell			3	10			
,,	City of Lond	on, St	one	28	16			
				70	56	=	126	

The probable causes, so far as could be gleaned from relatives and others, of insanity of those admitted during 1897 will be found in Table VI., p. 122.

We have been enabled to send away as recovered 13 males, whose sojourn here, with but one exception, was not of long duration. The cause in the majority of cases was alcoholic indulgence; abstinence and work in the open air soon cured them. I think great care should be exercised in certifying this class of patient as insane, because once sent to an asylum they become tarred with the taint, and when seeking work after discharge, are apt to find people chary of employing them, should the fact ooze out. They then become despondent, and are apt to fly to their old haunts and habits for consolation.

As improved, eight males and six females were discharged and handed over to the care of their friends, with the consent of the various boards of guardians to whose parish they were chargeable.

Those not improved, 16 males and 10 females, were disposed of as follows :--

To Colney Hatel	1		Males.	Females.		
" Hanwell			2	1		
,, Claybury			1	-		
, City of Lond	on, Sto	one	-	1		
			14	8	_	22

The other two males and two females were removed to places of settlement.

The death rate of 9.2 per cent. is slightly lower than in 1896, when I stated it was the lowest since 1888. Senility and pulmonary tuberculosis are the chief causes. (See Table VII., p. 124.) I would also call attention to the few cases which succumbed to preventable chest affection.

One inquest was held, on August 10th, concerning the death of J. E. M., at. 31, admitted from Camberwell. The patient had fallen when at play with another, and sustained a simple fracture of the arm. A day or so afterwards he became acutely maniacal, and died from syncope. The jury returned the following verdict:—

"That on August 8th, at the parish of Watford, in the county of "Hertford, the said J. E. M. died from syncope exhaustion, an accidental "fall causing fracture of humerus, contributing to the acute attack of mania."



No change took place in the principal appointments.

A. Medical staff, three.

B. Nursing staff, including head attendants,	Males.	Females.
c. Other staff, including all remaining sub-	51	68
ordinates	80	21
	131	89
	-	

(Signed) H. CASE,

Medical Superintendent.

No. 2.

CATERHAM ASYLUM.

CATERHAM, SURREY, December 31st, 1897.

statistics. The numerical results of the year 1897 may be thus summarised :---

	Males.	Females.	Total.
On the 1st of January, 1897, the asylum contained	925	1,073	1,998
Admitted during the year	84	58	142
Total number under treatment during the year	1,009	1,131	2,140
Discharged during the year	14	9	23
Died during the year	66	72	138
Remaining under treatment on the 31st December, 1897	929	1,050	1,979

The number of patients admitted during the year was 142 (84 males and 58 females). The general health of a large proportion of the admissions was greatly enfeebled and otherwise impaired, and I fear there is very little prospect of any improvement in this respect until the new asylum infirmary to be erected at Tooting is opened, when a large proportion of such cases can be more satisfactorily cared for in the specially constructed infirmary wards for the reception of aged, paralysed, and feeble insane.

The total number of deaths during the past year was 138, of whom 32 were between 70 and 80, and nine between 80 and 90 years of age. It will be seen on reference to Table VII., p. 124, that 29 deaths were due to senile decay, and 11 to pulmonary consumption, the latter disease being accountable for more than double the number of the preceding year. The percentage of deaths on the average number resident was 6.9.

Five patients have been discharged as recovered, five to the care of their relatives as improved, and one as unimproved. Twelve have been transferred to a county asylum (Cane Hill) as having manifested evidence of being either dangerous to themselves or others, and therefore unfit for further detention.

The total number under care during the year was 2,140. The highest number resident was 2,009, the lowest 1,979, and the average daily number resident during the year was 1,994.

The number of cases attributed in Table VI., p. 123, to alcoholic intemperance being the cause of insanity is recorded as 17; but this does not give anything like a reliable number of the admissions really due to this sad factor, as it is frequently most difficult to obtain trustworthy information from the relatives on this point, owing to their somewhat natural desire to conceal the possession of this vice on the part of those dear to them. I have, however, no hesitation in expressing my opinion that a considerably larger proportion of the admissions was due to this baneful habit.

It is a matter of congratulation that the asylum has been entirely free from epidemic or infectious disease during the year.

Inquest. An inquest was held in September on the body of a male patient, who was subject to epilepsy, and accidentally fell in the day room of his ward during an epileptic fit, sustaining a fracture of the skull, which was verified by a post-mortem examination. The charge attendant of the ward was within a few yards of the deceased at the time of the occurrence. The following verdict was returned----"That the deceased died from fracture of the skull due to a fall whilst in an epileptic fit, and that no blame attached to the officials of this asylum."

Staff.

The average daily number of staff employed during the year was as follows :--

А.	Medical staff	 { Me Tw	dical S to assist	uperintend tant medic	lent. al officers.
в.	Nursing staff	 		113	
с.	Other staff	 		97	

(Signed)

d) G. STANLEY ELLIOT, Medical Superintendent.

DARENTH ASYLUM, 1897.

No. 3.

DARENTH ADULT ASYLUM.

NEAR DARTFORD, KENT,

February 21st, 1898.

statistics. I have the honour, in my capacity as temporary Medical Superintendent, to submit to you the annual report upon the condition of the asylum for the year 1897, together with the usual statistical tables.

The statistical results of the year may be thus classified :---

			Males.	Females.	Total.
In the asylum on January 1st, 1897	 	 	 447	583	1,020
Admitted during the year	 	 	 24	33	57
Discharged during the year	 	 	 4	3	7
Died during the year	 	 	 18	18	36
Remaining December 31st, 1897	 	 	 449	595	1,044

The admissions during the year have numbered 57, viz., 24 males and 33 females. All these cases have been transferred from the schools, as in the preceding year.

There were 36 deaths during the year—18 males and the same number of females. I should mention that during the previous year the total number of female deaths was more than double the male, but in 1897 the mortality of the sexes was equal.

The percentage of deaths on the average number resident was 3.5. It is worthy of note that this is the lowest death-rate since the opening of the asylum in 1880.

Four males and two females were discharged, as dangerous to others, to their respective parishes for transfer to a county asylum; and one female, as improved, to the care of her relatives.

The average daily number resident during the year was 1,041, and the highest number on any one day was 1,050 and the lowest 1,028.

	* *	1.5	*	*	*
Staff.	Medical staff			 	 2
	Female nursing	staff		 	 44
	Male nursing st	aff		 	 37
	Other staff			 	 102

In conclusion, I should state that this report is necessarily brief, as I have only acted in my present temporary capacity for the past fortnight, and am not therefore in a position to enter into further details regarding the general administrative and domestic history of the asylum during the year under review.

(Signed)

G. STANLEY ELLIOT, Acting Medical Superintendent,

ASYLUM STATISTICS .- TABLE I. - Showing

		LEA	VESDI	EN AS	YLUM.								
	Males.	Females.	Total.	Males.	Females.	Total.							
In the Asylums, January 1st, 1897				894	1,096	1,990							
Admitted for the first time during the year, direct from the several Parishes and Unions Re-admitted during the year Admitted from other Asylums of the Board	143 2 	102 1 	245 3 	 145	 103	 248							
Total under care during the year				1,039	1,199	2,238							
Discharged— Not insane	2 13 8 16 100	 6 10 84	2 13 14 26 184										
Total discharged (for various reasons) and died during the year				139	100	239							
Remaining in the Asylums, December 31st, 1897				900	1,099	1,999							
Average numbers resident during the year Highest number resident on any one day Lowest number resident on any one day				895 900 882	$1,095 \\ 1,100 \\ 1,088$	$1,990 \\ 2,000 \\ 1,970$							
TABLE II. – Showing the Admissions, Re-admissions, and Discharges from [N.B.—The following are the dates of the opening of the several Asylums:-													
		pening	of the		l Asylu	ms:—							
		pening	of the	several	l Asylu	ms:—							
[N.B.—The following are the dates of	of the o 	pening LEA	of the	several	l Asylu	ms:—							
[N.B.—The following are the dates of Admitted during the period of $27\frac{$3}{365}$ years, direct from the several Parishes and Unions	Males 3,961 52 182	LEA solution Jacobia J	of the vesol letoL 7,804 72	several Males 	Lemales.	:: Total.							
[N.B.—The following are the dates of Admitted during the period of 27.83 years, direct from the several Parishes and Unions Re-admissions Admitted from other Asylums of Board	of the o solution 3,961 52 182 8 227 216 288 46	LEA solution	of the VESDI 7,804 72 414 13 345 374 560 80	Beveral Males.	Kemales.	Total.							
[N.B.—The following are the dates of the several Parishes and Unions Admitted during the period of 27,83,900,000 several Parishes and Unions Re-admissions Admitted from other Asylums of Board Total of cases admitted Not certified Not certified Improved and escaped Not improved Not improved To tal of cases admitted Improved and escaped Improved and escaped Not improved Not improved To other Asylums of Board Not improved Improved Not No	signature ising with the original sectors in the origi	LEA signature 3,843 20 232 3,843 20 232 5 118 158 272 34 2,409	of the VESDI 7,804 72 414 13 345 374 560 80 4,919	several EN AS solution	Asylu YLUM 4,095 	ms:							
Image: N.B. — The following are the dates of N.B. — The following are the dates of N.B. — The following are the dates of the several Parishes and Unions	of the o isolate 3,961 52 182 2182 216 288 46 2,510 	LEA solution	of the VESDI 7,804 72 414 13 345 374 560 80	several EN AS 'solution 's	Asylu YLUM. Separate 4,095	ms:							

N.B.—From April 16th, 1873, to November, 1876, the North-Western Hospital (Hampstead) was used as an Asylum for the other Asylums of the Board. 222 patients (91 male and 131 female) died and the

the Admissions, Re-admissions, Discharges, and Deaths during the Year 1897.

c	DATE	RHAD	A AS	YLUM			DARE	NTH	ASY	LUM.		5	501	MIN	IA:	RY	
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
			925	1,073	1,998				447	583	1,030				2,266	2,752	5,018
84 	58 	142 	 84 1,009	 58 1,131	 142 2,140	 24 	 33	 57	 24 471	 33 616	 57 1,087	227 2 24 	160 1 33	387 3 57	 253 2,519	 194 2,946	 447 5,465
 5 8 66	 4 5 72	 5 5 13 138				 4 18	 1 2 18	 1 6 36				2 14 13 28 184	 4 7 17 174	2 18 20 45 358			
			80	81	161				22	21	43				241	202	443
					1,979				449		1,044				2,278		5,022
			934		1,994 2,009 1,979		···· ···	 	448 450 445	600	1,041 1,050 1,028		···· ···	···· ···	2,274 2,284 2,256	2,775	5,025 5,059 4,977

the Opening of the First Asylum to the present date, December 31st, 1897. LEAVESDEN, October 9th, 1870; CATERHAM, September 29th, 1870; and DARENTH, May 4th, 1880.]

C	CATE	RHAI	M AS	YLUM	I.		DARENTH ASYLUM.							SUMMARY.							
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.				
4,054 32 129 	3,634 30 204 	7,688 62 333 	 4,215	 3,868	 8,083	775 2 483 	1,222 9 449 	1,997 11 932 	 1,260	 1,680	 2,940	8,790 86 794 	8,699 59 885 		 9,670	 9,643	 19,313				
 242 273 204 87 2,475	$ \begin{array}{c} 2 \\ 180 \\ 162 \\ 175 \\ 48 \\ 2,251 \end{array} $	7 422 435 379 135 4,726				8 30 118 92 73 490	14 123 114 82 731	22 51 241 206 155 1,221				8 13 499 607 584 206 5,475	$14 \\ 7 \\ 319 \\ 443 \\ 561 \\ 164 \\ 5,391$	818 1,050 1,145							
			929	2,818 1,050 1,061	1,979				811 449 338		1,896 1,044 820					2,744	14,291 5,022 4,610				

Imbeciles, and during that period 1,201 patients were admitted direct from the several Parishes and Unions, as well as some from remainder were discharged or transferred to the Asylums at Leavesden and Caterham.

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APPENDIX II.-IMBECILITY.

ASYLUM STATISTICS.—TABLE III.—Showing the Admissions, Discharges, and Admissions for the year 1888,

		AD	MITI	TED.						D		HAR					,
YEAR.	PAR	COM ISHES ND CONS.	OT Asy 0	ROM HER LUMS OF ARD.	nissions.	Ree	COVE	RED.	Ім	PROV	ED.	Ім	No1 PROV		T As	To ot Sylux Boai	IS OF
	Male.	Female.	Male.	Female.	Total Admissions.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
LEAVESDEN ASYLUM.																	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$ 163 \\ 179 $	83 122 157 150 152 95 112 127 102 103			$\begin{array}{c} 156 \\ 264 \\ 320 \\ 329 \\ 337 \\ 255 \\ 266 \\ 253 \\ 241 \\ 248 \end{array}$	$5 \\ 3 \\ 12 \\ 13 \\ 17 \\ 13 \\ 12 \\ 6 \\ 8 \\ 13 \\ 13 \\ 13 \\ 12 \\ 13 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 14$	$ \begin{array}{c} 4 \\ 4 \\ 9 \\ 8 \\ 7 \\ 5 \\ 4 \\ 1 \\ \dots \\ \dots \end{array} $	$9 \\ 7 \\ 21 \\ 24 \\ 18 \\ 16 \\ 7 \\ 8 \\ 13 \\ 13 \\ 13 \\ 13 \\ 13 \\ 13 \\ 14 \\ 14$	$ \begin{array}{r} 4 \\ 10 \\ 7 \\ 14 \\ 7 \\ 10 \\ 9 \\ 4 \\ 5 \\ 8 \\ 8 \end{array} $	$ \begin{array}{c} 1 \\ 5 \\ 7 \\ 12 \\ 4 \\ 4 \\ 3 \\ 6 \\ \end{array} $	$5 \\ 15 \\ 14 \\ 26 \\ 11 \\ 10 \\ 13 \\ 8 \\ 8 \\ 14$	5557 557 1310 1910 212 118	$5 \\ 11 \\ 6 \\ \dagger 9 \\ 14 \\ 7 \\ 7 \\ 7 \\ 9 \\ 10$	$10 \\ 16 \\ 11 \\ 16 \\ 27 \\ 17 \\ 26 \\ 17 \\ 30 \\ 28$	··· ··· ··· ··· ··· ··· ··· ··· ···	···· ··· ··· ··· ···	··· ··· ··· ··· ··· ··· ···
CATERHAM ASYLUM.																	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{r} 83\\92\\121\\104\\103\\86\\102\\85\\84\\84\end{array}$	$81 \\ 79 \\ 123 \\ 108 \\ 115 \\ 76 \\ 113 \\ 76 \\ 59 \\ 58$	··· ··· ··· ··· ···		$\begin{array}{c} 164\\ 171\\ 244\\ 212\\ 218\\ 162\\ 215\\ 161\\ 144\\ 142\\ \end{array}$	$ \begin{array}{r} 6 \\ 13 \\ 5 \\ 35 \\ 2 \\ 6 \\ 7 \\ 6 \\ 1 \end{array} $	$\begin{smallmatrix} 6 \\ 4 \\ 2 \\ 4 \\ 2 \\ 2 \\ 4 \\ 1 \\ 3 \\ 4 \end{smallmatrix}$	$ \begin{array}{c} 12 \\ 17 \\ 7 \\ 7 \\ 4 \\ 10 \\ 8 \\ 9 \\ 5 \\ 5 \end{array} $		1 2 3 5 3 5 3 1 5 ::	5377897685		77678105375	$15 \\ 13 \\ 11 \\ 12 \\ 14 \\ 21 \\ 11 \\ 16 \\ 18 \\ 13$			
DARENTH ASYLUM.																	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	49 128 74 59 24 	$70 \\ 113 \\ 86 \\ 92 \\ 20 \\ 23 \\ 66 \\ 20 \\ \\$	124 26 11 45 38 25 27 24	46 9 31 44 13 45 29 33	$\begin{array}{r} 289\\ 276\\ 160\\ 151\\ 86\\ 112\\ 117\\ 90\\ 56\\ 57 \end{array}$	··· 7 ··· 1 ···		 †19 ;12 †1 ;12 †1 	$ \begin{array}{c} 18 \\ 26 \\ 3 \\ 4 \\ 3 \\ \vdots \\ 2 \\ \vdots \\ 6 \\ \vdots \end{array} $	$ \begin{array}{r} 14 \\ 10 \\ 23 \\ 8 \\ 2 \\ 2 \\ 2 \\ \\ 4 \\ 5 \\ 1 \end{array} $	$ \begin{array}{r} 32 \\ 36 \\ 26 \\ 12 \\ 5 \\ 2 \\ 4 \\ 11 \\ 1 \end{array} $	$ \begin{array}{r} 2 \\ 8 \\ 11 \\ 8 \\ 10 \\ 9 \\ 4 \\ 2 \\ 5 \\ 4 \end{array} $	$\begin{smallmatrix}6&6\\8&4&4\\3&1\\18&4&2\end{smallmatrix}$		21 52 	40 42 	61 94
SUMMARY.																	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{c} 205\\ 362\\ 358\\ 342\\ 246\\ 256\\ 211\\ 223\\ 229\\ \end{array}$	$\begin{array}{c} 234\\ 314\\ 366\\ 350\\ 287\\ 194\\ 291\\ 223\\ 161\\ 161\\ \end{array}$	$124 \\ 26 \\ \dots \\ 11 \\ 45 \\ 38 \\ 25 \\ 28 \\ 24$	46 9 31 44 13 45 29 33	$\begin{array}{c} 609\\ 711\\ 724\\ 692\\ 641\\ 529\\ 598\\ 504\\ 441\\ 447\\ \end{array}$	$11 \\ 16 \\ 17 \\ 23 \\ 22 \\ 15 \\ 19 \\ 13 \\ 14 \\ 14 \\ 14$	$ \begin{array}{r} 10 \\ 8 \\ 11 \\ 24 \\ 9 \\ 9 \\ 9 \\ 8 \\ 2 \\ 3 \\ 4 \end{array} $	$21 \\ 24 \\ 28 \\ 47 \\ 31 \\ 24 \\ 27 \\ 15 \\ 17 \\ 18$	$26 \\ 37 \\ 14 \\ 20 \\ 15 \\ 14 \\ 15 \\ 9 \\ 14 \\ 13 \\ 13 \\ 13 \\ 14 \\ 13 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 13 \\ 14 \\ 14$	16 17 33 25 9 7 7 9 13 7	$\begin{array}{c} 42 \\ 54 \\ 47 \\ 45 \\ 24 \\ 21 \\ 22 \\ 18 \\ 27 \\ 20 \end{array}$	15 19 21 20 29 29 29 29 25 37 30‡	$\begin{array}{c} 18\\ 24\\ 20\\ 20\\ 26\\ 20\\ 13\\ 28\\ 20\\ 17 \end{array}$	$ \begin{array}{r} $	21 52 1 1 	40 42 1 	61 94 2 1

‡ 2 Not insane.

† Not certified.

Deaths, with the mean Annual Mortality and proportion of Recoveries per cent. of the and for each subsequent year.

	DIËD.		R	<i>t year</i> . emainir ember i	ıg	Numb	Average ers Res	e ident.	Re	ercentag ecoverie Admissie	s on	on Av		Deaths Numbers It.
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male,	Female.	Total.	Male.	Female.	Total.
76 124 181 114 131 117 118 103 107 100	$76 \\ 109 \\ 124 \\ 132 \\ 111 \\ 85 \\ 97 \\ 116 \\ 88 \\ 84$	$152 \\ 233 \\ 305 \\ 246 \\ 242 \\ 202 \\ 215 \\ 219 \\ 195 \\ 184$	883 883 841 872 889 899 895 895 895 897 894 900	$\begin{array}{c} 1,089\\ 1,082\\ 1,093\\ 1,082\\ 1,096\\ 1,096\\ 1,096\\ 1,094\\ 1,096\\ 1,099\end{array}$	$\begin{array}{c} 1,972\\ 1,965\\ 1,934\\ 1,954\\ 1,995\\ 1,995\\ 1,991\\ 1,991\\ 1,990\\ 1,999\end{array}$	890 887 853 851 857 894 894 894 895 893 895	$\begin{array}{c} 1,090\\ 1,085\\ 1,081\\ 1,089\\ 1,068\\ 1,097\\ 1,095\\ 1,096\\ 1,097\\ 1,095\end{array}$	$\begin{array}{c} 1,980\\ 1,972\\ 1,934\\ 1,940\\ 1,925\\ 1,991\\ 1,989\\ 1,991\\ 1,990\\ 1,990\end{array}$	$\begin{array}{c} 6.8\\ 2.1\\ 7.3\\ 7.2\\ 9.2\\ 8.1\\ 7.7\\ 4.7\\ 5.8\\ 8.9\end{array}$	$\begin{array}{c} 4 \cdot 8 \\ 3 \cdot 2 \\ 5 \cdot 7 \\ 5 \cdot 3 \\ 4 \cdot 6 \\ 5 \cdot 3 \\ 3 \cdot 5 \\ 0 \cdot 8 \\ 0 \cdot 0 \\ 0 \cdot 0 \end{array}$	5.7 2.6 6.5 6.3 7.1 7.0 6.0 2.8 5.8 8.9	$\begin{array}{c} 8.5\\ 13.9\\ 21.2\\ 13.4\\ 15.3\\ 13.1\\ 13.0\\ 11.5\\ 12.0\\ 11.1\end{array}$	$\begin{array}{c} 7 \cdot 0 \\ 10 \cdot 0 \\ 11 \cdot 4 \\ 12 \cdot 1 \\ 10 \cdot 4 \\ 7 \cdot 7 \\ 8 \cdot 9 \\ 10 \cdot 5 \\ 8 \cdot 0 \\ 7 \cdot 6 \end{array}$	$\begin{array}{c} 7 \cdot 7 \\ 11 \cdot 8 \\ 15 \cdot 7 \\ 12 \cdot 7 \\ 12 \cdot 6 \\ 10 \cdot 1 \\ 10 \cdot 1 \\ 11 \cdot 0 \\ 9 \cdot 8 \\ 9 \cdot 2 \end{array}$
78 83 107 76 83 72 94 57 73 66	85 72 100 86 95 66 91 73 43 72	163 155 207 162 178 138 185 130 116 138	930 919 919 937 941 938 930 933 925 929	1,052 1,046 1,058 1,064 1,071 1,064 1,074 1,072 1,073 1,050	$\begin{array}{c} 1,982\\ 1,965\\ 1,977\\ 2,001\\ 2,012\\ 2,002\\ 2,004\\ 2,005\\ 1,998\\ 1,979\\ \end{array}$	936 930 918 922 919 940 931 932 929 931	$\begin{array}{c} 1,068\\ 1,048\\ 1,062\\ 1,060\\ 1,045\\ 1,070\\ 1,071\\ 1,070\\ 1,074\\ 1,063 \end{array}$	2,004 1,978 1,980 1,982 1,964 2,010 2,002 2,002 2,002 2,003 1,994	$7 \cdot 2 \\ 14 \cdot 1 \\ 2 \cdot 8 \\ 3 \cdot 8 \\ 2 \cdot 3 \\ 5 \cdot 8 \\ 8 \cdot 2 \\ 7 \cdot 1 \\ 1 \cdot 2 \\$	$\begin{array}{c} 7 \cdot 4 \\ 5 \cdot 0 \\ 0 \cdot 8 \\ 3 \cdot 7 \\ 1 \cdot 7 \\ 2 \cdot 6 \\ 3 \cdot 5 \\ 1 \cdot 3 \\ 5 \cdot 0 \\ 6 \cdot 9 \end{array}$	$7 \cdot 3 \\9 \cdot 9 \\2 \cdot 4 \\3 \cdot 3 \\2 \cdot 7 \\2 \cdot 4 \\4 \cdot 9 \\6 \cdot 2 \\3 \cdot 5$	$\begin{array}{c} 8 \cdot 3 \\ 8 \cdot 9 \\ 11 \ 6 \\ 8 \cdot 2 \\ 9 \cdot 0 \\ 7 \cdot 6 \\ 10 \cdot 0 \\ 6 \cdot 1 \\ 7 \cdot 8 \\ 7 \cdot 0 \end{array}$	$\begin{array}{c} 7\cdot 9\\ 6\cdot 8\\ 9\cdot 4\\ 8\cdot 1\\ 9\cdot 0\\ 6\cdot 1\\ 8\cdot 5\\ 6\cdot 8\\ 4\cdot 0\\ 6\cdot 8\end{array}$	8.17.810.48.19.06.89.26.45.76.9
31 54 51 35 32 28 28 28 23 16 18	40 53 62 39 43 67 54 44 35 18	$71 \\ 107 \\ 113 \\ 74 \\ 75 \\ 95 \\ 82 \\ 67 \\ 51 \\ 36$	$\begin{array}{r} 418\\ 484\\ 441\\ 446\\ 436\\ 444\\ 447\\ 447\\ 447\\ 447\\ 449\end{array}$	547 600 551 580 582 575 599 598 598 595	965 1,084 992 1,026 1,018 1,019 1,046 1,045 1,030 1,044	330 467 449 443 446 445 446 448 448 448 448	530 588 563 553 580 574 578 590 592 593	860 1,055 1,012 996 1,026 1,019 1,024 1,038 1,040 1,041				$\begin{array}{c} 9.3 \\ 11.5 \\ 11.3 \\ 7.9 \\ 7.1 \\ 6.3 \\ 6.3 \\ 5.1 \\ 3.6 \\ 4.0 \end{array}$	$\begin{array}{c} 7.5\\ 9.0\\ 11.0\\ 7.0\\ 7.4\\ 11.7\\ 9.3\\ 7.4\\ 5.9\\ 3.0 \end{array}$	$\begin{array}{c} 8.2\\ 10.1\\ 11.1\\ 7.4\\ 7.3\\ 9.4\\ 8.0\\ 6.4\\ 4.9\\ 3.5\end{array}$
185 261 339 225 246 217 240 183 196 184	201 234 286 257 249 218 242 233 166 174	$\begin{array}{r} 386\\ 495\\ 625\\ 482\\ 495\\ 435\\ 482\\ 416\\ 362\\ 358 \end{array}$	2,231 2,286 2,201 2,255 2,266 2,281 2,272 2,272 2,276 2,266 2,278	2,688 2,728 2,702 2,726 2,775 2,775 2,769 2,764 2,7752 2,764 2,752	$\begin{array}{c} 4,919\\ 5,014\\ 4,903\\ 4,981\\ 5,017\\ 5,016\\ 5,041\\ 5,041\\ 5,018\\ 5,022 \end{array}$	2,156 2,284 2,216 2,229 2,279 2,271 2,275 2,275 2,270 2,274	$\begin{array}{c} 2,688\\ 2,721\\ 2,702\\ 2,702\\ 2,693\\ 2,741\\ 2,756\\ 2,756\\ 2,751\\ \end{array}$	$\begin{array}{c} 4,844\\ 5,005\\ 4,926\\ 4,918\\ 4,918\\ 5,020\\ 5,015\\ 5,031\\ 5,033\\ 5,025\\ \end{array}$	$3 \cdot 3$ $4 \cdot 1$ $4 \cdot 7$ $4 \cdot 4$ $6 \cdot 8$ $5 \cdot 5$ $5 \cdot 5$ $5 \cdot 5$ $6 \cdot 1$	3.5 2.5 3.0 3.4 2.8 3.4 2.8 3.6 0.74 1.5 2.5	3.4 3.5 3.8 3.9 4.8 4.5 4.5 3.0 3.8 4.0	$\begin{array}{c} 8 \cdot 5 \\ 11 \cdot 4 \\ 15 \cdot 2 \\ 10 \cdot 1 \\ 11 \cdot 0 \\ 9 \cdot 5 \\ 10 \cdot 6 \\ 8 \cdot 0 \\ 8 \cdot 6 \\ 8 \cdot 0 \end{array}$	7.4 8.5 10.5 9.5 9.2 7.9 8.8 8.4 6.3	7.99.812.79.810.0 $8.79.68.37.17.1$

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APPENDIX II.-IMBECILITY.

ASYLUM	STATISTICSTABLE IVClassifying, under the usual denominations of Mental	
	Disease, the Mental Condition of the Patients admitted during the year 1897.	

Disease, th	LE	AVESI	DEN	CA	TERH	AM	D	ARENT	гн	T	MMA	RY.
MENTAL DISEASES.	Males.	Females.	Total.									
Mania												
Mania, Chronic	6	2	8	5	4	9				11	6	17
Mania and Epilepsy												
Melancholia	1	3	4	2	4	6				3	7	10
General Paresis	5	1	6	2	1	8				7	2	9
Dementia	60	47	107	27	18	45				87	65	152
Dementia and Paralysis	1	1	2	1		1				2	1	8
Dementia and Epilepsy	8	9	17	3	3	6				11	12	23
Senile Dementia	10	8	18	9	12	21	7	8	15	26	28	54
Idiocy	5	5	10	3	2	5	12	21	33	20	28	48
Idiocy and Epilepsy	1		1							1		1
Imbecility	27	13	40	20	13	33	4	4	8	51	30	81
Imbecility and Epilepsy	10	8	18	12	1	13				22	9	31
Of Weak Mind	1	3	4				1		1	2	3	5
Mental Stupor												
Alcoholic Derangement	2	2	4							2	2	4
Delusional Insanity	l	1	2							1	1	2
Epilepsy	5		5							5		5
Not Insane	2		2							2		2
Totals	145	103	248	84	58	142	24	33	57	253	194	447

LUNACY STATISTICS.—TABLE V.— Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients resident in the Asulum on December 31st, 1897.

MENTAL DISEASES	-	ASYL	DEN	C	ATER	HAM UM.		DARE	UM.	s	UMM	ARY.
MENTAL DISEASES.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Mania	20		20		7	7				20	7	27
Mania, Chronic	80	71	151	6	72	78	10	36	46	96	179	275
Mania and Epilepsy	3	7	10	3	15	18	1	2	3	7	24	31
Melancholia	7	54	61	50	47	97		2	2	57	103	160
General Paresis	5	1	6	6	1	7		1	1	11	3	14
Dementia	199	239	438	344	339	683	34	77	111	577	655	1,232
Dementia and Paralysis	13	56	69	30	12	42	7	15	22	50	83	133
Dementia and Epilepsy	66	135	201	152	216	368	32	37	69	250	388	638
Senile Dementia	67	80	147		12	12	. 4	85	39	71	127	198
Idiocy	38	74	112	23	25	48	46	60	106	107	159	266
Idiocy and Epilepsy	15	2	17				9	11	20	24	13	87
Imbecility	263	164	427	288	272	560	197	205	402	748	641	1,389
Imbecility and Epilepsy	80	148	228	27	32	59	86	85	171	193	265	458
Of Weak Mind	27	38	65				28	29	52	50	67	117
Mental Stupor	6	18	24							6	18	24
Alcoholic Derangement	2	4	6							2	4	6
Delusional Insanity		8	8								8	8
Epilepsy	9		9							9		9
Totals	900 1	1,099	1,999	929	1,050	1,979	449	595	1,044	2,278	2,744	5,022

7

ASYLUM STATISTICS .- TABLE VI. -Showing the probable

ZULININI	27	ARES	a	m	HAR	60		нае	Ы	EAV	ESDI	IN A	SYI	LUM.		
	-						-	pred	As isposit	ng		As citing	N.H.A	T	OTAL	310
	PROBA	BLE C	AUSE.					Males.	Females.	Total.	Males.	Pemales.	Total.	Males.	Females.	Total.
5 7 7 0 7				- 11-	1	1	+	*	-	F	-	-	-	-	-	
MORAL.								161	17		2			hron	, air	ala
Domestic trouble	s (inclu	ding lo	ss of re	elation	s and f	riends)		·	4	4		2	2		6	6
Adverse circums pecuniary diff	tances iculties	(inclu	ding 1	ousines 	s anxi	ieties a	nd 		3	8	2	3	5	2	6	8
Mental anxiety, v			luded i	n abov	e), and	overwo	rk		2	2		1	1		3	3
Religious exciten											1		1	1		1
Fright and nervo	us shoc	k									2		2	2		2
								14:	02		12		-	01170	1 .	
PHYSICAL.									24			-	_			
Intemperance in	drink								3	3	9	5	14	9	8	17
Do. sez	kual											2	2		2	2
Alcoholic intemp	erance	of mot	her or	both I	pårents											
Self-abuse (sexua	al)										4		4	4		4
Sunstroke					•••				1	1	••••				1	1
Accident or inju					••• •			4	2	6		2	2	4	4	012
Fright to mother																
Parturition and	the pue	rperal i	state								e			1		1
Teething								1				1			1	1
Change of life	**									1				1		1
Fevers Privation and sta									2	2		3	3		5	5
Old age								12	5	17		7	7	12	12	24
Lead poisoning																
Venereal disease								1		1				1		1
Other bodily dis									6	6		10	10		16	16
Previous attacks								2	22	24		14	14	2	36	38
Hereditary influ	ence as	certain	ed					8	7	15		1	1	8	8	16
Congenital effec	t ascert	ained							2	2		3	8		5	5
Epilepsy								9	13	22		10	10	9	23	32
Unknown					·			74	25	99		35	35	74	60	134
Constitutional				,				15	6	21		3	3	15	9	24
										-						
and share share	-	MA	235	1.872.	1 4.10	1 2			100		10%	-				
		The	total of	Altantic	na doas	not corr	estin	nit wit	h the	num	per of	admiss	dens i	n Tabi	le I., s	a eon

The tosal of eausations does not correspond with the number of admissions in Table I., as so

causes of Insanity in the Patients admitted during the Year 1897.

	C	AT	ERI	IAN	A I	SY	LUN	a.		1	DAR	EN	TH	AS	YL	UM				-	SU	MIN	AN	RY.		
	ause	osing e.		As xeiti caus	ng e.		Tor.	AL. *		As edisp caus	osing		As xeiti cause			Tor	AL.		As dispo cause	sing		As xciti zause			Tot	TAL-
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.
	2	2	1	3	4	1	5	6											6	6	1	5		; 1	11	1:
3	1	4	1	3	4	4	4	8										3	4	7	3	6			10	16
				1	1		1	1											2	2		2				1
																					1		1	1		1
	2	2					2	2											2	2	2		2	2	2	4
																					1					
11		11		6	6	11	6	17								1		11	3	14	9	11	20	20	14	34
																						2	1-2			
									4	5	9				4	5	9	4	5	9				4	5	-
																					4		4	113	120	
2		2				2		2										2	1	8				2		1
4		4				4		4				1	1	2	1	1	2	8	2	10	1	3	4	9	5	14
									1	3	4				1	8	4	1	8	4				1	8	4
				1	1		1	1	3	4	7				3	4	7	3	4	7		1	1	3	5	8
		·												•••				1		1				1		1
																						1	1		1	1
	1	1		•			1	1										1	1	2				1	1	2
																			2	2		3	3		5	5
3	8	11				8	8	11		1.0								15	13	28		7	7	15	20	35
							••																			
			1		1			1	***				•••					1		1	1		1	2		2
0		3	1		1			4										3		9					16	20
8						6		6			•••									30			12		36	44
	14	13					5	13	10	14	24				10	14	24			52						53
3	See.	7					14	24										10				24				29
				1			5 96	8									1	12								40
								56		6					5		11	79								201
																		15	6	21		3	3	15	9	24
					-												1									

of the cases appear in both the columns relating to " Predisposing cause " and " Exciting cause,"

ASYLUM STATISTICS.—TABLE VII.—Showing the causes of calculated from the ages stated

CAUSES OF DE CEREBRAL OR SPINAL DISEA Apoplexy Epileptic Exhaustion General Paresis Dementia and Gradual Ex Brain Wasting Imbecility and Exhaustion Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U Malignant Disease	ses		1000	1 	5 F.	1' M. 	F. 	M. M. 1 	8 F. 	1 M. 	F	20 t	o 29 F. 1 1	30 to M. 3	F
CEREBRAL OR SPINAL DISEA Apoplexy Epileptic Exhaustion General Paresis Dementia and Gradual Ex Brain Wasting Imbecility and Exhaustion Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	ses	···· ··· ···		··· ··· ··· ···		··· 1 		··· 1 					1 1	 3	
Apoplexy Epileptic Exhaustion General Paresis Dementia and Gradual Ex Brain Wasting Imbecility and Exhaustion Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	haustion	···· ··· ···		1 		1 		1 	 			8 	1 1	 8	
Epileptic Exhaustion General Paresis Dementia and Gradual Ex Brain Wasting Imbecility and Exhaustion Paraplegia THORACIC DISEASES Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES Intestinal Obstruction Peritonitis Diseases of Kidneys and U	haustion	···· ··· ···		1 		1 		1 	 			8 	1 1	 8	
General Paresis Dementia and Gradual Ex Brain Wasting Imbecility and Exhaustion Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	haustion	···· ··· ···			···· ···								-		
Dementia and Gradual Ex Brain Wasting Imbecility and Exhaustion Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	haustion 	··· ···							10000						
Imbecility and Exhaustion Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	· ···	 				1000	10000							1000	
Paraplegia THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	· …	··· ··· ···			101000				192						
THORACIC DISEASES— Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	· ···	 			10000								1		
Chronic Bronchitis Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	: :														
Pulmonary Tuberculosis Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U	: :														
Diseases of the Heart Pneumonia ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U										1		12	2	6	
ABDOMINAL DISEASES— Intestinal Obstruction Peritonitis Diseases of Kidneys and U												·		1	
Intestinal Obstruction Peritonitis Diseases of Kidneys and U						1									
Peritonitis Diseases of Kidneys and U															
Diseases of Kidneys and U				100000								1		1	
	rinery S.														
Inlignant Disease	rmary Sy	stem													
tanguant misease															
Debility and Old Age												3		"ï	
General Tuberculosis				100000											
Necrosis and Exhaustion Fertiary Syphilis															
Total	•			1		2		1	1	1		20	5	12	
													CATI	ERH	A
CEREBRAL OR SPINAL DISE.	ASES-														
Apoplexy and Paralysis .													1		
Epilepsy and Convulsions General Paresis			•••	1000										3	
General Paresis Maniacal Exhaustion															
Exhaustion of Dementia											·				
Cerebral Softening follow		mbosis	•												
Abscess of the Brain Tumour of Brain														1 ï	
Tumour of Brain															
THORACIC DISEASES-					1							0			
Pneumonia												2			
Bronchitis Phthisis				1.000					1			2	1		
This of the Heart												ī		1	
			-												
ABDOMINAL DISEASES															
Cirrhosis of Liver															
Charles and the second se															
Bright's Disease															
General Debility and Decay	of Old A	ge													
				-							-	-			
Total	ls							1	1			5	2	5	

Death during the year 1897, together with the Ages of the Decedents on the Orders of Admission.

AS	YLU	м.															ż	
40 to	o 49	50 t	0 59	60 t	o 69	70 t	o 79	80 t	o 89	90 t	o 99	Abov	e 100.	Ag Unki	tes 10wn.		TOTAL.	
M.	F.	М.	F.	M.	F.	M.	F.	M.	F.	M.	F.	М.	F.	М.	F.	М	F.	T1.
 2 3 1 1 	² 2 1 	1 ² 1 ⁶ ² 1		 7 1 1	1 1 3 1 1 		1 1 3 1 		··· ··· ··· ···							 8 6 16 4 3 	2 9 3 8 5 1 1	2 17 9 24 9 4 1
 3 1	 4 2 	 1 3 1	 1 1	2 4 1	2 1 7 	 3 	 6 		 2 							$2 \\ 23 \\ 11 \\ 5$	$2 \\ 10 \\ 18 \\ 1$	4 33 29 6
	1	1	 1 1	 1		2 	 1 1									5 "1 	2 1 2 2	718 2
	"1 …		 1 	1 1 		6 	6 1 	4	5							11 5 	11 4 1 1	22 9 1 1
11	13	18	10	19	17	11	22	4	9							100	84	184
AS	YLU	м.																
 2 1 	 2 	$ \begin{array}{c} 1 \\ 3 \\ \dots \\ \frac{2}{1} \\ \dots \\ 1 \end{array} $	 2 1 	4 1 1 1	···· ··· ··· ···	2	 1 2 									7 6 3 1 4 1 2	 1 16 2	7 7 3 2 0 1 2 2 1 2 2
 1 	2 1 3 	1 1 3 	231 31 3	8 4 	$\frac{1}{\frac{2}{2}}$	 1	 									6 1 3 10 	7 4 8 8 1	13 5 11 18 1
1	"1 "	··· ··· ··· ···	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	1 2 1 	··· ··· ···	 1 1 12	$ \begin{array}{c} $	 1 								$2 \\ 1 \\ 1 \\ 4 \\ 2 \\ 12 \\ 12$	 4 1 1 17	2 4 2 2 4 2 2 4 2 2 9
5	9	14	13	18	15	17	19	1	8							66	72	138

APPENDIX 11 .- IMBECILITY.

ASYLUM STATISTICS. -TABLE VII. (continued) -Showing the calculated from the ages stated

		-	-									-		DAI	RENT	TH
CAUSES OF	DEAT	н.			1	6	1	7	1	8	1	9	20 t	o 29	30 t	0 3
CALCULUS OF .				×	M.	F.	М.	F.	М.	F.	М	F.	М.	F.	М.	F.
CEREBRAL OR SPINAL DIS	EASES-	_														
Apoplexy																
Paralysis and Myelitis Cerebral Abscess																
Dementia and Gradual I													1			
Epileptic Exhaustion											1		1			
THORACIC DISEASES- Pulmonary Tuberculosis	ł												3	3		
Pneumonia														1		
Heart Disease Aneurism of Aorta	•••												1	1		
ABDOMINAL DISEASES-																
Peritonitis																
Scirrhus of Breast Diseases of Kidneys and	 Urina	ne Su	stem	**						•••						
General Tuberculosis	Urina	ry Sy	stem										1			
Laryngeal Tuberculosis																
Senile Decay																
Exhaustion after Childbirth												•••				
Totals											1		8	5		
1														8	U:	IM
CEREBRAL OR SPINAL DIS	EASES-								1		1				1	1
Apoplexy																
Apoplexy and Paralysis																
Epilepsy and Convulsion General Paresis					1		1		2				3	2		
Paralysis and Myelitis													1		0	
Maniacal Exhaustion																
Epileptic Exhaustion Softening of Brain	••••										1		1			
Imbecility and Exhausti	 on															
Brain Wasting																
Exhaustion of Dementia	L	••••				**		••••					1			
Paraplegia Tumour of Brain														1	1	
Abscess of Brain																
THORACIC DISEASES-								-								
Aneurism of Aorta Phthisis					-					 1						
Phthisis Pneumonia							1						23	1		
Bronchitis																
Disease of the Heart													2	1	2	
Empyæmia Pulmonary Tuberculosis											1		15		 6	
ABDOMINAL DISEASES-													10	0		1
Intestinal Obstruction	1.												1		1	
Scirrhus of Breast (Rena Peritonitis												••••				
Cirrhosis of Liver																
Bright's Disease																
Cancer of Stomach																
Cancer of Liver Cystitis																
Diseases of Kidneys and					10000											
General Tuberculosis										1			4		1	
Laryngeal Tuberculosis Necrosis and Exhaustion																
General Debility and Deca	v of Ol	d Ag														
Tertiary Syphilis																1
Malignant Disease						• • •										
Exhaustion after Childbirth	1											••••				
Grand Tot	als				1		2		2	2	2		33	12	17	14
											-					

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causes of Death during the year 1897, together with the Ages of the Decedents, on the orders of Admission.

	LUM.		x 1897	ar stills	(Lenn						alar.	1 1 1 1 1 1	18					_
40 to	o 49	50 to	o 59	60 te	o 69	70 t	0 79	80 to	89	90 H	9 <u>9</u> 9	Ab		Ages kno	not wn.	T	QTAL.	
M.	F.	М.	F.	М.	F.	М,	F	М.	F,	М.	F.	M	F.	M.	F.	М.	F.	Tl.
																	998	
						1	,									1		1 1
			-14.1				1										1	1
					- 1 -				2.1							$\frac{1}{2}$	1	22
										3								
			1	1	1	2	1									42	5 3 2	9 5
			1						2							1	2	3
			1								T'						1	-
			2	1												1		1 3
						1		ï	1				1 1	10		2		2
				ĩ									20) 1001			1		1
				ĩ							1					1	1	2
					- 250 -						··· 1		100 3					-
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M	AF	IY.														1	14	
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			200		1	1	1	1				1				1	-2	3
		1		4		2					1					7	-2	7
2 2	22	5	3		1	111	11-		1		·					14	10	-24
																1		1 2
				1			1.				····		1		5	2		2
		1 1		···: 1												1 3		1
1	1	2		1	11		ï		 1			;				4	5	9
-4	2	8	4	8	14		5				5		s			21	25	,46
		1												1.11		2		23
			1				2										3	0
			1]									100			1 8	11
1	32	2	1 2 3	4	22	2	1			1.1			NA			13	11	24
	$\frac{1}{2}$	1 6	8 5	28	2.9	14			2		1					3 22	$\frac{6}{28}$	9 50
					11											27.	1 15	1 42
3	4	1	2	1	11								+++	1		21.	- 63	+42
	2	1			1	2	11									5 	63	11 3
ï			2	2												3	1	4
***				1			11									1	1	2
		ï	1.7	2		1							111			4		4
			1			1		1						-417		1 2 3	1	24 24 55
			i,	1		î	1	1					1.11			36	 2 4	5 10
	1			1			1						17	+**		1		1
			1		3.27			1	13		i		317			24	1 29	1 53
				2		18	15	4	10								29	1
			1		14.1		1									111	2	1
											-		1 2		-	184	174	358
16	22	32	28	41	84	32	44	6	17		1					104	114	001

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APPENDIX II.-IMBECILITY.

ASYLUM STATISTICS.—TABLE VIII.—Showing the History of the Annual numbers of each year's admissions

	-	1		1	DM	ITT	ED.				Of	EAC	-	YE	AR		ADM	IISSI	IONS	, D	-	miss IARG	1000	
Y	EAR.	1	Ne Cas		Rela Cas	psed es.	From Asyli		03.5	Rec	over	ed.	Imp		T	01	Not		To	oth	sof	D	vied.	-
.m. 3			M.	F.	M.	F.	M.	F.	т1.	M.	F.	Tl.	M	F.	г	M.	F.	Tl.	-	F.	-	M.	F .	TI.
	VESDEN	-			_									1									-	
	(part of))	468	556					1,024				1	1	2							2	3	5
1871			520	545					1,065								1	1				4	4	8
1872 1873			163 141	$256 \\ 165$			41	30	419 377													1 1	3 2	4
1874			115	149	1		1	13	279					100			1	1				1	1	2
1875 1876			111 158	108 79	1	1	 126	184	221 547								···: 1	···· 1				23	24	4 3 2 4 7 1
1877			95				120	4	100													1		i
1878			69	1	1		13		84													1		1
1879 1880			80 92	89 75					169 167														1	1
1881			85	71	4	1			161													1		1
1882			82	85	3	2			172													1	1	2
1883 1884			75 56	106 96	52	1			187	1		1												
1885			71	97	2				170														2	2
1886		•••	62	83	3	3			151													2	1	000040000
1887 1888		••••	80 71	92 83	22				174									1				3	21	2
1889			140	121	2	1			264								· 1	1				1	5	6
1890			162	155	1	2			320													6	3	9
1891 1892			176 181	148 149	3 4	2		"ï	329 337					1	····	$\frac{2}{2}$		22				54	37	11
1893			156		4				255	1		1				3		3				3	4	7
1894			148		6				266	1		1		1	1	1	1	2				9	3	12
1895 1896			125 136		1 3	$\frac{2}{2}$			258 241	14		1 4	22	2	24	33	~~2	35				14 16	18 10	32 26
1897			143		2	ī			248			5	3	1	4	8	3	6				18	4	22
										_		-		-	-	*	-			-				
	Totals	••••	8,961	3,843	52	20	182	232	8,290	13		13	8	6	14	18	10	28				100	84	184
	YLUM.	r						1												3				
1870																								
	(nart of)		156	202					355													3	9	
1871	(part of)		156 664						358 1,534													35		5 18
1872	**		664 259	870 161					1,534													5		18
1872 1873			664 259 183	870 161 167	 1				1,534 420 351									···· ····				5 2	8	18
1872			664 259	870 161 167 169	$ \begin{array}{c} $				1,534												· · · · · · · · · · · · · · · · · · ·	5	8	18
1872 1873 1874 1875 1875			664 259 183 240 158 173	870 161 167 169 180 170	··· 1 2 5	···· ··· 3	··· ··· 72	 36 167	1,534 420 351 525 338 555							····					· · · · · · · · · · · · · · · · · · ·	5	8 : : : 21 33	18
1872 1873 1874 1875 1876 1876			664 259 183 240 158 173 178	870 161 167 169 180 170 56	 1 2 5 2	···· 3 5	··· 72 33	 36 167 1	1,534 420 351 529 338 553 237							····						5 2 1 1	8 : : : 2	18 2 8 4 1
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1872 1873 1874 1875 1876 1877 1878 1879 1880			664 259 183 240 158 173 178 157 176 122	870 161 167 169 180 170 56 47 84 87	··· 1 2 ··· 5 2 ··· 2 ··· 2	··· 3 5 ··· 6	··· 72 33 17	 36 167 1 	1,534 420 351 529 338 553 237 221 260 217													5 2 1 1 1 4 2 1	8 	18 2 8 4 1
1872 1873 1874 1875 1876 1877 1878 1878 1879			664 259 183 240 158 173 178 157 176 122 122	870 161 167 169 180 170 56 47 84 87 105	···· 1 2 ··· 5 2 ··· 2 ··· 2 ··· 2 ···	···· 3 5 ··· 6	··· 72 33 17 6 	 36 167 1 	1,534 420 351 522 338 555 237 221 266 217 227													5 2 1 1 1 4 2	8 	18 2 8 4 1
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1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887			664 259 183 240 158 173 178 157 176 122 122 122 122 8 11 73 98 59 115 103	870 161 167 169 180 170 56 477 84 87 105 377 102 488 91 90	:: 12: 52: 22: 32332	··· 3 ··· 5 ··· ·· 6 ·· 2 3 1 3	··· 72 33 17 6 ···	 36 167 1 	1,534 420 351 522 338 555 237 221 266 217 227 168 110 200 111 210 199													5 1 1 1 4 2 1 1 1 1 1 	$ \begin{array}{c} 8 \\\\ 2 \\ 3 \\ 1 \\\\ 2 \\ 1 \\ 1 \\ 1 \\\\ 2 \\ 4 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\\\ 2 \\ 4 \\ 2 \\ 2 \\ 1 \\ 1 \\ 1 \\\\ 2 \\ 4 \\ 2 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1$	18 2 84 144 22 22 1
1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887 1888			664 259 183 240 158 173 178 157 176 122 122 81 73 98 59 115 103 83 83 83	870 161 167 169 180 170 56 477 105 87 87 105 87 87 105 87 87 87 87 105 87 87 87 105 87 87 87 87 87 87 87 87 87 87	:: 1 2 : 5 2 : 2 : 3 2 3 3 2 :	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	··· 72 33 17 6 ··· ··	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 555\\ 233\\ 222\\ 266\\ 211\\ 222\\ 168\\ 110\\ 200\\ 113\\ 210\\ 199\\ 164\end{array}$													5 2 1 1 1 1 1 1 1 1 1 1 1 1 2 2 1 1 1 1	8 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18 2 84 144 22 22 1
1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887			664 259 183 240 158 173 178 157 176 122 122 81 73 98 59 115 103 83 92	870 161 167 169 180 170 56 47 105 87 105 37 105 37 105 85 37 105 85 37 105 85 37 105 85 85 85 85 87 105 85 87 105 85 87 105 87 87 105 87 87 105 87 87 105 87 87 105 87 87 87 87 105 87 87 87 87 87 87 105 87 87 87 87 87 87 87 87 87 87	:: 1 2 :5 2 :: 2 :: 3 2 3 3 2 ::	$ \begin{array}{c} $	··· 72 33 17 6 ··· ···	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 555\\ 233\\ 222\\ 266\\ 211\\ 222\\ 168\\ 110\\ 200\\ 113\\ 210\\ 199\\ 164\\ 177\end{array}$		······································	···· ··· ··· ··· ··· ··· ··· ··· ···					···· ··· ··· ··· ··· ··· ··· ··· ···	····				5 1 1 1 1 1 1 1 1 1 1 1 1 2 2 1 1 1 1	$ \begin{array}{c} 8 \\ \\ 2 \\ 3 \\ 1 \\ \\ 2 \\ 1 \\ 1 \\ 1 \\ \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2 \\ 2$	18 2 84 144 22 22 1
1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887 1888 1887 1888 1889 1890 1891			664 259 183 240 158 173 178 157 176 122 122 122 122 81 73 98 99 115 103 83 92 119 104	870 161 167 169 180 170 56 477 84 87 105 377 102 910 85 377 102 910 81 90 81 22 108	······································		··· 72 33 17 6 ··· ··	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 223\\ 226\\ 217\\ 225\\ 168\\ 110\\ 200\\ 111\\ 210\\ 110\\ 210\\ 119\\ 164\\ 177\\ 244\\ 215\end{array}$							···· ··· ··· ··· ··· ··· ··· ··· ··· ·	···· ··· ··· ··· ··· ··· ···	···· ··· ··· ··· ··· ···				5 2 1 1 1 1 1 1 1 1 1 1 1 2 2 4	$ \begin{array}{c} 8 \\ \\ 2 \\ 3 \\ 1 \\ \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 3 \\ 3 \\ \\ 3 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ 3 \\ 1 \\ 2 \\ 3 \\ 3 \\ 3 \\ 1 \\ 1 \\ 2 \\ 3 \\ 3 \\ 3 \\ 1 \\ 1 \\ 2 \\ 3 \\ 3 \\ 3 \\ 1 \\ 1 \\ 2 \\ 3 \\ 3 \\ 1 \\ 1 \\ 2 \\ 3 \\ 3 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 1 \\ 1 \\ 1 \\ 2 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1$	18 2 84 144 22 22 1
1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887 1888 1887 1888 1889 1890 1891 1892			$\begin{array}{c} 664\\ 259\\ 183\\ 240\\ 158\\ 173\\ 178\\ 157\\ 176\\ 122\\ 122\\ 122\\ 122\\ 122\\ 122\\ 122\\ 12$	870 161 167 169 180 170 56 477 84 87 105 85 377 102 90 81 90 81 22 108 114	······································		72 33 117 6 	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 222\\ 266\\ 217\\ 222\\ 168\\ 110\\ 200\\ 111\\ 210\\ 110\\ 210\\ 111\\ 210\\ 110\\ 210\\ 111\\ 210\\ 111\\ 210\\ 120\\ 12$		······································	···· ··· ··· ··· ··· ··· ··· ··· ··· ·				···· ··· ··· ··· ··· ··· ··· ··· ··· ·	····	···· ··· ··· ··· ··· ··· ··· ··· ··· ·				5 2 1 1 1 1 1 1 1 1 1 1 1 1 2 4 4 4 4	8 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 2 4 4 2 1 1 1 1	
1872 1873 1874 1875 1876 1877 1878 1879 1880 1881 1882 1883 1884 1885 1886 1887 1888 1887 1888 1889 1890 1891			$\begin{array}{c} 664\\ 259\\ 183\\ 240\\ 158\\ 173\\ 178\\ 157\\ 176\\ 122\\ 122\\ 122\\ 81\\ 733\\ 98\\ 59\\ 115\\ 103\\ 83\\ 92\\ 119\\ 104\\ 101\\ 86\\ 100\\ 86\\ 100\\ 100\\ 100\\ 100\\ 100\\ 100\\ 100\\ 10$	$\begin{array}{c} 870\\ 161\\ 167\\ 169\\ 180\\ 170\\ 56\\ 47\\ 84\\ 87\\ 105\\ 85\\ 37\\ 102\\ 91\\ 90\\ 81\\ 78\\ 91\\ 90\\ 81\\ 78\\ 102\\ 108\\ 114\\ 76\\ \end{array}$			72 33 17 6 	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 222\\ 266\\ 217\\ 222\\ 168\\ 110\\ 200\\ 113\\ 210\\ 110\\ 210\\ 116\\ 177\\ 244\\ 212\\ 213\\ 165\end{array}$		······································	····				···· ··· ··· ··· ··· ··· ··· ··· ··· ·	···· ···· ··· ··· ··· ··· ··· ··· ···	···· ··· ··· ··· ··· ··· ··· ··· ··· ·				5 2 1 1 1 1 1 1 1 1 1 1 1 2 2 4 4 4 4 4	$ \begin{array}{c} 8 \\ \\ 2 \\ 3 \\ 1 \\ \\ 2 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 3 \\ 4 \\ 6 \\ \end{array} $	
1872 1873 1874 1875 1876 1877 1878 1877 1878 1877 1878 1880 1881 1882 1883 1884 1885 1886 1887 1886 1887 1889 1890 1891 1892 1893 1894 1895			$\begin{array}{c} 664\\ 259\\ 183\\ 240\\ 158\\ 173\\ 178\\ 157\\ 176\\ 122\\ 122\\ 81\\ 73\\ 98\\ 59\\ 115\\ 103\\ 83\\ 92\\ 119\\ 104\\ 101\\ 86\\ 100\\ 85\end{array}$	$\begin{array}{c} 870\\ 161\\ 167\\ 169\\ 180\\ 170\\ 56\\ 47\\ 84\\ 87\\ 105\\ 85\\ 37\\ 102\\ 91\\ 90\\ 81\\ 78\\ 91\\ 90\\ 81\\ 122\\ 108\\ 114\\ 76\\ 112\\ 575 \end{array}$			···· 72 33 17 6 ···· ··· ···	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 222\\ 266\\ 217\\ 222\\ 168\\ 110\\ 200\\ 111\\ 210\\ 110\\ 210\\ 111\\ 210\\ 110\\ 210\\ 111\\ 210\\ 111\\ 210\\ 120\\ 12$		······································	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	2					···· ··· ··· ··· ··· ··· ··· ··· ··· ·				5 22 11 1 1 1 1 1 1 1 1 1 1 2 2 1 1 1 1	$ \begin{array}{c} 8 \\ \\ 2 \\ 3 \\ 1 \\ \\ 2 \\ 1 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 3 \\ 4 \\ 6 \\ 11 \\ 8 \\ \end{array} $	18 2 4 4 1 4 4 2 2 2 2 1 1 2 2 2 2 1 1 2 2 2 2
1872 1873 1874 1875 1876 1877 1878 1877 1878 1877 1878 1880 1881 1882 1883 1884 1885 1885 1885 1885 1885 1889 1899 1890 1891 1892 1893 1894 1895 1896			$\begin{array}{c} 664\\ 259\\ 183\\ 240\\ 158\\ 173\\ 178\\ 157\\ 176\\ 122\\ 122\\ 81\\ 73\\ 98\\ 59\\ 115\\ 103\\ 83\\ 92\\ 119\\ 104\\ 101\\ 86\\ 100\\ 85\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83$	$\begin{array}{c} 870\\ 161\\ 167\\ 169\\ 180\\ 170\\ 56\\ 47\\ 84\\ 87\\ 105\\ 85\\ 37\\ 102\\ 91\\ 90\\ 81\\ 78\\ 91\\ 90\\ 81\\ 28\\ 102\\ 102\\ 102\\ 102\\ 55\\ 37\\ 102\\ 55\\ 102\\ 102\\ 102\\ 102\\ 102\\ 102\\ 102\\ 102$	$\begin{array}{c} \vdots \\ 1 \\ 2 \\ \vdots \\ 5 \\ 2 \\ \vdots \\ 2 \\ \vdots \\ 2 \\ 3 \\ 2 \\ 3 \\ 2 \\ 3 \\ 2 \\ \vdots \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1$	 3 5 6 2 3 1 3 1 1 1 1	···· 72 33 17 6 ··· ··· ··· ··· ··· 1		$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 222\\ 266\\ 211\\ 222\\ 168\\ 110\\ 200\\ 113\\ 210\\ 199\\ 166\\ 177\\ 244\\ 211\\ 213\\ 166\\ 214\\ 166\\ 114\\ \end{array}$				 2 1		······································			······································				5 2 1 1 1 1 1 1 1 1 1 1 1 2 2 1 1 1 1	$ \begin{array}{c} 8 \\ \\ 2 \\ 3 \\ 1 \\ \\ 2 \\ 1 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 3 \\ 4 \\ 6 \\ 11 \\ 8 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4$	18 2 4 4 1 4 4 2 2 2 2 1 1 2 2 2 2 1 1 1 2 2 2 2
1872 1873 1874 1875 1876 1877 1878 1877 1878 1877 1878 1880 1881 1882 1883 1884 1885 1886 1887 1886 1887 1889 1890 1891 1892 1893 1894 1895			$\begin{array}{c} 664\\ 259\\ 183\\ 240\\ 158\\ 173\\ 178\\ 157\\ 176\\ 122\\ 122\\ 81\\ 73\\ 98\\ 59\\ 115\\ 103\\ 83\\ 92\\ 119\\ 104\\ 101\\ 86\\ 100\\ 85\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83\\ 83$	$\begin{array}{c} 870\\ 161\\ 167\\ 169\\ 180\\ 170\\ 56\\ 47\\ 84\\ 87\\ 105\\ 85\\ 37\\ 102\\ 91\\ 90\\ 81\\ 78\\ 91\\ 90\\ 81\\ 122\\ 108\\ 114\\ 76\\ 112\\ 55\\ 59\end{array}$	$\begin{array}{c} \vdots \\ 1 \\ 2 \\ \vdots \\ 5 \\ 2 \\ \vdots \\ 2 \\ \vdots \\ 3 \\ 2 \\ 3 \\ 3 \\ 2 \\ \vdots \\ 2 \\ 2$	$ \begin{array}{c} \dots \\ 3 \\ 5 \\ $	···· 72 33 17 6 ···· ··· ···	 36 167 1 	$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 222\\ 266\\ 211\\ 222\\ 168\\ 110\\ 200\\ 113\\ 210\\ 190\\ 166\\ 177\\ 244\\ 211\\ 213\\ 166\\ 211\\ 16\\ 211\\ 16\end{array}$		······································	···· ··· ··· ··· ··· ··· ··· ··· ··· ·	2		······································			···· ··· ··· ··· ··· ··· ··· ··· ··· ·				5 22 11 1 1 1 1 1 1 1 1 1 1 2 2 1 1 1 1	$ \begin{array}{c} 8 \\ \\ 2 \\ 3 \\ 1 \\ \\ 2 \\ 1 \\ 1 \\ 1 \\ 2 \\ 4 \\ 2 \\ 1 \\ 1 \\ 2 \\ 3 \\ 4 \\ 6 \\ 11 \\ 8 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4 \\ 4$	18 2 4 4 1 4 4 2 2 2 2 1 1 8 4 4 1 1 2 2 2 2 1 8 4 4 1 1 2 2 2 2 2 2 1 1 8 4 1 1 2 2 2 2 2 2 1 1 1 1 1 2 2 2 2 2 2
1872 1873 1874 1875 1876 1877 1878 1877 1878 1877 1878 1880 1881 1882 1883 1884 1885 1885 1885 1885 1885 1899 1890 1891 1892 1893 1894 1895 1897			664 259 183 240 158 173 178 157 176 122 122 81 73 98 59 115 103 92 119 104 101 86 100 85 83 84	$\begin{array}{c} 870\\ 161\\ 167\\ 169\\ 180\\ 170\\ 56\\ 47\\ 84\\ 87\\ 105\\ 85\\ 37\\ 102\\ 91\\ 90\\ 81\\ 78\\ 91\\ 90\\ 81\\ 28\\ 102\\ 102\\ 102\\ 102\\ 55\\ 37\\ 102\\ 55\\ 102\\ 102\\ 102\\ 102\\ 102\\ 102\\ 102\\ 102$	···· 1 2 ··· 5 2 ··· 1 ··	$ \begin{array}{c} \dots \\ 3 \\ 5 \\ $	···· 72 33 17 6 ··· ··· ··· ··· ··· 1		$\begin{array}{c} 1,534\\ 420\\ 351\\ 522\\ 338\\ 553\\ 222\\ 266\\ 211\\ 222\\ 168\\ 110\\ 200\\ 113\\ 210\\ 199\\ 166\\ 177\\ 244\\ 211\\ 213\\ 166\\ 214\\ 166\\ 114\\ \end{array}$				 2 1 2		······································			······································				5 2 1 1 1 1 1 1 1 1 1 1 1 2 2 1 1 1 1	$\begin{array}{c} 8\\ \vdots\\ 2\\ 3\\ 1\\ 2\\ 1\\ 1\\ 1\\ 2\\ 4\\ 2\\ 1\\ 1\\ 2\\ 3\\ 4\\ 6\\ 11\\ 8\\ 4\\ 2\\ \end{array}$	18 2 4 4 1 4 4 2 2 2 2 1 1 2 2 2 2 1 1 1 2 2 2 2

* Includes two not insane.

Admissions since the opening of the Asylums, with the Discharges and Deaths and the remaining on December 31st, 1897.

	air is	Тотл	L D	ISCH	ARGE				31st, 1		r's AD	MISSION	IS TO		E	MAININ CH YE.	AR'S
Red	cover	ed.	Im	prove	ed.	Not	Impro	oved.	To ot o	her As	ylums 1.		Died.			DMISSIC IBER 31	онs, st, 1897
M.	F.	ті.	М.	F.	т1.	M.	F.	т1.	М.	F.	Tl.	М.	F.	Tl.	М.	F.	TI.
- No	MIN	- International		1													
15	8	23	26	20	46	24	44	68	12	4	16	829	416	745	62	64	126
20 12	15 6	35 18	29 12	23 11	52 23	49 14	49	98 28	15 5	10 14	25 19	852 118	375	727	55	73	128
9	4	18	12 8	6	23 14	17	21	28 38	10	14	15	118	176 133	294 258	2 13	35 26	37 39
7	2	9	2	7	9	13	17	30	2		2	91	116	207	2	20	22
5	3	8	8	5	8	17	13	30				74	70	144	13	18	31
18 7	3	16 7	18 5	7	25 5	11 3	13	24 3				199 64	184	383 65	43	56 8	99 20
5		5	4		4	3		3				57	î	58	14		14
8	3	6	3	5	8	3	7	10				57	52	109	14	22	36
8 10	47	12	9 6	85	17	87	23	10 10				57 56	35	92	10	26	36
3	6	17 9	3	5	11 8	3	8	6				62	44 58	100 120	14	13 15	23 29
4	2	6	5	8	13	4	7	11				57	62	119	10	28	38
1	8	9	3	3	6	5	7	12				36	62	98	13	16	29
4 3	9	13 3	5 3	3	84	5 7	83	13 10				49 35	55 51	104 86	10 17	$\frac{22}{31}$	32 48
4		7	5	2	7	5	4	9				53	57	110	15	26	48
5	3	8	4	22	6	6	8	9				47	44	91	11	31	42
9	4	13	9	5	14	7	10	17				90	65	155	27	38	65
14 14	11 5	$\frac{25}{19}$	10 7	8 9	18 16	99	6 11	15 20				93 102	79 67	172 169	37 47	53 58	90 105
14	6	20	9	3	12	16	10	26				87	63	150	59	70	129
11	3	14	8	2	10	12	4	16				78	42	120	51	44	95
8	2	10	7	4	11	15	8	28				61	37	98	63	61	124
77	1	87	7 3	23	9 6	14	4 3	18 10	2	1	3	33 30	43	76 47	63 92	76 79	139 171
5		5	3	1	4	3	3	6				18	4	22	116	95	211
27	118	345	216	158	374	296	277	573	46	34	80	2,510	2,409	4,919	900	1,099	1,999
4	4	8	7	13	20	6	7	13	2	1	3	106	139	245	31	38	69
47	31	78	50	30	80	47	36	83	19	6	25	461	644	1,105	40	123	163
24 19	12 10	36 29	24 19	10 6	34 25	11 13	9 19	20 32	16 11	11 8	27 19	170 102	106	276 213	14 20	13 13	27 33
18	24	42	30	13	43	1		1	36	18	54	198	124	322	31	29	60
13	11	24	10	8	18	8	8	16	1	3	4	114	125	239	12	25	37
2	11	13	21	13	34	5	9	14			 1	146 129	225 36	371	37	84	121
5			14	4	18 12	54	35	8 9	1		1	1129	27	165 140	31 40	14 11	45 51
6	4	10	9	4	13	13	1	14				128	44	167	31	31	62
7	4	11	11	7	18	8	7	15				80	55	135	18	20	38
3 9	$\frac{2}{10}$	5 19	6 5	5 5	11 10	10 2	4 5	14 7				72 45	70 51	142 96	31 20	24 16	55 36
11	4	15	4	3	7	3	1	4		1	1	39	20	59	19	11	30
7	12	19	9	10	19	5	4	9				56	52	108	23	25	48
2	2 5	4		1	1	5	24	7				38 64	33 49	71	17 28	13	30
$\frac{2}{12}$	4	17	76	62	13 8	7 6	6	11 12				52	49	113 96	28	$\frac{28}{35}$	56 69
4	4	8	6		6	5	6	11				43	45	88	25	26	51
8	3	11	4	4	8	5	8	13				53	33	86	22	31	58
6	6	12	3	3	6	9	54	14 8				57 45	54 48	111 93	46 49	55	101
52	22	74	$1 \\ 1$	2	32	4	9	13				40	37	77	49 56	52 66	101 122
2 8	3	11	2	5	7	8	4	12	- 41-			38	24	62	30	40	70
6	1	7	6	3	9	27	3	5				38	26	64	50	80	130
42	42	84	32	21	53	7 3	4	11 7				20 21	18 9	38	51 57	48 43	99 100
1		1	2		2	3		3				12	2	14	66	40 56	122
42	180	422	273	162	435	209	177	386*	87	48	135	2,475	2,251	4,726	929	1,050	1,979

ASYLUM STATISTICS.—TABLE VIII. (continued)—Showing the History of Deaths. and the numbers of each year's

		-		-	ADM	IITI	ED.		-		Of				AB	's A	DM	ISSI	_	, D1		ARG		2
YI	EAR.	14 M	New	Cases.	Rela	psed ses.	From Asylu Bot	uns or	Distant 1	Rec	ove	red.	Im	pr'v	ed	Im	Not	red.	A	o otł sylu Boa	ms	r	Died.	100.00
			Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Ma es.	Females.	Total.	Male.	Fenales.	Total.	Males.	Females.	Total.
	LENTH	1000				521.44		N TO S A			13-54									「「「「「「」	C R M C R R			The second second
1880 1881 1882 1883	 		 152 107	185		 1 1	25 78 6	54 13 17 8	242 29 433 274								1	1	 					 1 1 3
1884 1885 1886 1887	···· ····		57 40 45 41	67 54 62 85	···· "1	· ···· ··· ··· ··· ···	 22 20 12	30 8 69	$ \begin{array}{r} 124 \\ 146 \\ 137 \\ 161 \end{array} $													 1 1	1 1	
1888 1889 1890 1891			49 127 74 59	70 112 86 92	1 		124 26 11	46 9 81	289 276 160 151				••••	 1 	1	1						$\begin{array}{c}1\\3\\2\\1\end{array}$	1 : 1 21 21	
1892 1893 1894 1895 1896			24 	19 23 66 20		1	45 38 25 27	44 13 45 29	86 112 117 90 56							 1 1 1	 1	 2 1 1				: 21 55 : : :	* :4 3 :	N CD NI
1897	otals	•••	775				24 483	. 83 449	57 2,040	: + :				1	1		2							
SUM	MAR	Y.														sin				100			-	
Part of 1870 1871	}		624 1,184	758 1,415					1,382 2,599				1	1	2							5 9	5 12	10 21
1872 1873 1874 1875	 	1 2 2 1 3	422 324 355 269	417 332 318 288	 1 3 1	 3 1	41 73	 30 49 	839 728 801 559													1 3 1 3	8 2 1 4	4 10 21 74
1876 1877 1878 1879 1880	•••		331 273 226 256 214	56 48 173	521:2	5	$ \begin{array}{r} 159 \\ 1 \\ 30 \\ 6 \\ 25 \end{array} $	851 5 54	1,100 337 305 435 626		··· ···					··· ···	1	1		···	:::::	4 1 5 2 2 2	7131	11 01 40 40 00
1881 1882 1883 1884		6 4 4 4 5	207 315 255 211	$ \begin{array}{r} 191 \\ 355 \\ 296 \\ 265 \end{array} $		$ \begin{array}{c} 2 \\ 5 \\ 4 \\ 1 \end{array} $	78 6	13 17 8	417 773 577 481	···· 1		···· 1										01 01 04 :	2 3 2 	4 5 4
1885 1886 1887 1888 1889	••• •••		170 222 224 203 359	$ \begin{array}{c} 236 \\ 217 \\ 234 \end{array} $	5 7 4 2 3	8 9 9 9	22 20 12 124 26	30 8 69 46 9	498 531 609		 						···· ··· 1	 3 1			+ + + + + + + + + + + + + + + + + + + +	14344	5 6 4 3 6	10
1890 1891 1892 1893			355 339 306 242	$ \begin{array}{r} 363 \\ 348 \\ 282 \\ 194 \end{array} $	3 3 6 4	3 21 4 :		 32 44	724 692 641 529			 1		1	1	1 4 2 3		1 4 2 4				8 10 8 9	6 8 13 10	14
1894 1895 1896 1897		: :	248 210 219 227	220		1 8 2 1	38 25 28 24	13 45 29 33	504 441	14	1 2 	1 2 6 6		2	3 2 5 6	55	3 1 3 3	5 6 8 9				$ \begin{array}{c} 16 \\ 17 \\ 28 \\ 30 \end{array} $	29 14	4
Gran	nd Total	ls	8,790	8,699	86	59	794	885	19313	14	4	18	13	7	20	* 30	17	47		·		184	174	85

the Annual Admissions since the opening of the Asylum. with the Discharges and admissions remaining on December 31st, 1897.

Rec	over	Total Discharged and Dece vered. Improved. Not Imp						1		her Asy Board		1	Died.		A	CH YE. DMISSIC BER 31	
				Provide				-	01			1				a orp	
Males.	Fema'es.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Totad.
2 8 7 6 7 1 		5212 12 13 10 9 	$\begin{array}{c} 6 \\ \dots \\ 22 \\ 12 \\ 7 \\ 11 \\ 12 \\ 14 \\ 13 \\ 2 \\ 2 \\ 1 \\ 1 \\ 2 \\ \dots \\ \dots \\ \dots \end{array}$	$12 \\ 5 \\ 15 \\ 13 \\ 8 \\ 9 \\ 12 \\ 4 \\ 12 \\ 14 \\ 8 \\ 1 \\ 3 \\ \dots \\ 4 \\ 3 \\ \dots \\ 4 \\ 3 \\ \dots$	$\begin{array}{c} 18\\ 5\\ 37\\ 25\\ 15\\ 20\\ 24\\ 18\\ 25\\ 27\\ 10\\ 3\\ 4\\ 1\\ 2\\ 4\\ 3\\ \ldots\end{array}$	$ \begin{array}{c} 1 \\ \\ 8 \\ 14 \\ 7 \\ 4 \\ 12 \\ 15 \\ 12 \\ 8 \\ 2 \\ 1 \\ 2 \\ 1 \\ \\ \end{array} $	$\begin{array}{c} 23\\1\\19\\7\\6\\5\\10\\8\\9\\7\\6\\2\\3\\2\\5\\1\\\cdots\\\cdots\\\end{array}$	$\begin{array}{c} 24\\ 1\\ 27\\ 21\\ 13\\ 9\\ 11\\ 11\\ 12\\ 12\\ 18\\ 10\\ 5\\ 3\\ 7\\ 2\\ 1\\ \cdots \end{array}$	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	3 1 1 2 1 45 26 3 	3 3 1 4 3 45 82 14 	3 1322 633 284 28 21 366 699 355 127 7 	$128 \\ 15 \\ 118 \\ 95 \\ 40 \\ 43 \\ 30 \\ 29 \\ 44 \\ 51 \\ 46 \\ 43 \\ 15 \\ 9 \\ 18 \\ 7 \\ \dots \\ 100 $	$\begin{array}{c} 131\\ 15\\ 250\\ 158\\ 68\\ 50\\ 80\\ 120\\ 81\\ 68\\ 27\\ 16\\ 25\\ 7\\ \cdots\\ \cdots \\ \end{array}$	$13 \\ 58 \\ 17 \\ 8 \\ 15 \\ 23 \\ 15 \\ 56 \\ 46 \\ 25 \\ 17 \\ 20 \\ 36 \\ 26 \\ 24 \\ 26 \\ 26$	$\begin{array}{r} 48\\ 6\\ 46\\ 39\\ 10\\ 22\\ 18\\ 22\\ 25\\ 47\\ 26\\ 34\\ 30\\ 54\\ 56\\ 53\\ 26\\ 33\\ \end{array}$	$\begin{array}{c} 61\\ 6\\ 104\\ 566\\ 18\\ 37\\ 41\\ 37\\ 81\\ 93\\ 51\\ 51\\ 50\\ 900\\ 82\\ 777\\ 52\\ 57\end{array}$
38	35	73	118	123	241	92	114	206	73	82	155	490	781	1,221	449	595	1,044
$\begin{array}{c} 19\\ 67\\ 36\\ 28\\ 5\\ 15\\ 7\\ 10\\ 9\\ 17\\ 13\\ 20\\ 22\\ 15\\ 11\\ 9\\ 17\\ 20\\ 26\\ 16\\ 19\\ 15\\ 11\\ 9\\ 6\end{array}$	$\begin{array}{c}12\\46\\18\\426\\14\\1\\\\1\\1\\20\\12\\28\\14\\5\\7\\7\\7\\17\\19\\8\\8\\3\\5\\2\\\\\end{array}$	$\begin{array}{c} 31\\ 113\\ 54\\ 42\\ 51\\ 329\\ 7\\ 13\\ 16\\ 28\\ 24\\ 0\\ 38\\ 26\\ 20\\ 8\\ 16\\ 24\\ 38\\ 26\\ 21\\ 8\\ 16\\ 11\\ 6\end{array}$	$\begin{array}{c} 33\\ 79\\ 36\\ 27\\ 32\\ 13\\ 9\\ 15\\ 12\\ 26\\ 12\\ 30\\ 21\\ 19\\ 16\\ 22\\ 5\\ 23\\ 26\\ 15\\ 10\\ 11\\ 15\\ 10\\ 5\\ 5\end{array}$	$\begin{array}{c} 33\\53\\21\\20\\13\\24\\1\\9\\27\\15\\24\\21\\39\\8\\4\\23\\19\\27\\7\\8\\7\\1\end{array}$	$\begin{array}{c} 66\\ 132\\ 57\\ 39\\ 52\\ 26\\ 59\\ 23\\ 16\\ 21\\ 53\\ 27\\ 55\\ 45\\ 40\\ 29\\ 41\\ 33\\ 87\\ 49\\ 34\\ 22\\ 18\\ 18\\ 22\\ 18\\ 18\\ 22\\ 18\\ 12\\ 6\end{array}$	$\begin{array}{c} 30\\ 96\\ 25\\ 30\\ 14\\ 25\\ 16\\ 8\\ 7\\ 16\\ 17\\ 13\\ 21\\ 14\\ 15\\ 14\\ 23\\ 20\\ 21\\ 22\\ 21\\ 19\\ 22\\ 11\\ 6\end{array}$	$\begin{array}{c} 51\\85\\23\\40\\17\\22\\3\\5\\8\\2\\8\\7\\15\\17\\18\\8\\25\\17\\17\\22\\10\\6\\9\\7\\3\end{array}$	$\begin{array}{c}81\\181\\48\\701\\46\\38\\11\\24\\49\\25\\40\\36\\34\\9\\322\\41\\52\\47\\38\\44\\31\\35\\31\\18\\9\end{array}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	5 16 25 13 18 3 3 2 1 45 26 3 1 1 1 	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{r} 435\\813\\288\\227\\289\\188\\345\\193\\170\\180\\140\\128\\239\\159\\120\\111\\127\\126\\126\\212\\185\\172\\185\\172\\185\\172\\139\\123\\106\\53\\51\\30\end{array}$	$\begin{array}{c} 555\\ 1,019\\ 282\\ 244\\ 240\\ 195\\ 409\\ 37\\ 28\\ 96\\ 218\\ 129\\ 227\\ 177\\ 154\\ 131\\ 130\\ 133\\ 149\\ 179\\ 158\\ 115\\ 75\\ 81\\ 68\\ 26\\ 6\end{array}$	$\begin{array}{c} 990\\ 1,832\\ 570\\ 471\\ 529\\ 383\\ 754\\ 230\\ 198\\ 276\\ 358\\ 257\\ 466\\ 336\\ 257\\ 466\\ 336\\ 257\\ 466\\ 336\\ 257\\ 466\\ 336\\ 254\\ 198\\ 187\\ 121\\ 77\\ 36\\ \end{array}$	$\begin{array}{c} 93\\ 95\\ 16\\ 33\\ 25\\ 80\\ 48\\ 54\\ 45\\ 41\\ 42\\ 46\\ 44\\ 42\\ 68\\ 64\\ 92\\ 95\\ 108\\ 113\\ 135\\ 117\\ 139\\ 138\\ 175\\ 206 \end{array}$	$\begin{array}{c} 102\\ 196\\ 48\\ 89\\ 49\\ 43\\ 140\\ 17\\ 11\\ 53\\ 94\\ 43\\ 77\\ 83\\ 51\\ 57\\ 77\\ 83\\ 82\\ 116\\ 134\\ 144\\ 166\\ 138\\ 197\\ 177\\ 148\\ 184\\ \end{array}$	$195 \\ 291 \\ 64 \\ 72 \\ 82 \\ 68 \\ 220 \\ 65 \\ 65 \\ 98 \\ 135 \\ 84 \\ 169 \\ 124 \\ 95 \\ 99 \\ 145 \\ 147 \\ 174 \\ 211 \\ 242 \\ 257 \\ 301 \\ 255 \\ 336 \\ 315 \\ 323 \\ 390 \\ 145 \\ 154 \\ 323 \\ 390 \\ 145 \\ 154 \\ 15$

* Includes the " not certified cases."-Vide Table II., p. 117.

† Includes the "not insane" cases in same table.

ASYLUM STATISTICS .- TABLE IX .- Showing the length of residence of

	7				SIAII	~	00.					Sho		-		10000	-	LUM.	~	_
			LEN	TH C	F RES	IDE	INCH	2					1000	VERED.		EN .	ASI	DIED.		
												м.			[Total	N	1.	F.	Tot	tal
12.5 12		12.25													rotat			r.	101	ai.
		Month															3			3
From	_		Ionth	s .						••		5			5		3	4		7
,,		to 6 to 9	• •			•			••			3			3		8			8
"		to 9 to 12										1		60 H	1		67	24		*
,,			Taama									9			2	1	-	16		$\frac{11}{29}$
"		to 3											1		-	i	20.0	9		25
"		to 5															6	10		16
	1.	to 7															9	5		14
,,	7	to 10															8	8		16
••	10	to 12															2	5		7
.,		to 14	,,																	
,,	-	to 16	,,									1			1		2	1		3
,,		to 18 to 20				•				••							1	1		2
"		and up														1 1	2	1 18		3 32
"	20	and up										1.0		••		1	-		-	
	-		Total	_		_					1	13	_		13	10	_	84	_	.84
ASY	L	UM ST	ATIS	TICS.	-TAB	LE	X	Showi	ing th	he A	jes of	f Pati	ients	reside	ent in	thes	severa	Il Ast	lums	s on
																		on th	e Oro	lers
			-			-	11. 1			0		-		~		0	1			-
							Und	er 16	1	6	1	7	1	8	1	9	2	0	20 t	0 2
	Ye	ars endi	ing De	ecember	r 31st.			173	34	n		1 -		-		-				12
			-				M.	F.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.
		EAVES	DEN	ACUT	TIM	-				1	-			-		-				
-	-	Late V Las	DLit	ADIL							1									
1888									23	17	27	25	28	2	41	14	29	16	184	
1889.									26	20	28	28	31	6	44	15	30	16	191	16
1890.				••	••				1	2	5	2	7	8	7	6	4	7	126	
1891. 1892.							10.000		4	1	4	4	11	5	10	8	9	8	123	7
1893									6 5	23	16 9	24	9 18	9	10	5	9	11	120	
1894 .									6	5	11	10	22	36	11 11	14 17	14 14	8 12	$132 \\ 139$	
1895 .									8	6	15	13	25	6	14	18	13	14	148	10 10
1896 .									12	8	16	19	32	8	13	20	15	16	140	12
1897 .									3	5	9	7	12	5	10	11	15	8	144	11
	C	ATERI	TAM	ASYL	TIM						1	1					-			-
-		AIDRI	inni	AOLD						1										
1888									2	3	2	8	8	7	12	14	25	19	170	15
1889									3	4	4	9	9	9	13	15	26	21	165	15
1890							1			4	2	2	8	4	5	2	8	5	148	11
1891 1892					•••			1	1	3	8	3	4	5	6	4	7	6	145	
1893							1.500.0		5	23	4	6	57	8	8	12	9	11	147	11
1894						••••	1000		4	3	10	12	10	13	10 16	13 18	12	14 16	140	
1895							10.000		10	4	15	13	14	14	15	21	17	18	$142 \\ 150$	
1896									11	5	15	16	18	14	16	21	18	19	150	
1897									14	5	21	19	19	14	20	22	19	18	153	
-	-	DAREN		ASYL					1		i		-			-	1		100	-
	_																			
1888									32	28	35	23	33	23	29	14	32	22	133	14
1889									27	8	42	32	33	29	30	25	27	14	153	15
1890									6	3	16	8	25	21	26	17	25	20	158	
1891.								***	3	6	8	6	16	9	27	22	26	19	178	14
1892. 1893.									7 13	9	9	18	15	11	15	14	26	24	189	14
1894							1	1	13	16 8	13 20	13 17	15	22	19	14	17	17	208	14
1895								1	4	16	14	18	18 22	13 20	$\frac{17}{20}$	$\frac{21}{12}$	26 19	$\frac{17}{22}$	199 201	15:
1896									10	10	10	20	17	19	20 24	12	19	10	196	15
1897									8	14	16	17	11	19	18	19	23	20	189	
	-	-									1						1	20	200	10
	-	UM	L DVL	AH	. x .	-										12				
1888.									57	48	64	56	69	32	82	42	86	57	487	46:
1889									56	82	74	69	73	44	87	55	83	51	509	47
1890.							1		7	9	24	2	35	33	38	25	37	29	432	31
1891								1	8	10	15	13	31	19	43	34	42	33	446	330
	••								18	13	29	26	29	28	33	31	44	46	456	34
1895							1		19	22	28	25	40	34	40	41	43	39	480	460
1894								1	$\frac{18}{22}$	16	41	39	50	32	44	56	54	45	480	370
1895 1896				••••				1	22 33	26 23	44 41	44 55	61	40	49	51 co	49	54	499 492	39-
1896									25	23 24	41 46	50 43	67 42	41 38	53 48	$\frac{60}{52}$	$52 \\ 57$	45 46	492 486	419 407
1001									20		10	10	12	00	10	04	01	10	100	101

those discharged recovered, and of those who have died during the year 1897.

_	_	-					1	-		ENTI		_		uring		-			A	RY	-
	CAT		I	ASY	DIED.				OVERE		I A		HED.	-		RECOV	_	1		DIED.	
M.	F.	Tot	al	M.	F.	Tota	1. 1	M.	F.	Total	M	·]	F.	Total.	M.	F	. T	otal	M.	F.	Total
				1								•							4		4
1			1	57		10	5					38			63		1	6	8 15	43	12 18
				3			8					100			1			1	9	2	11
	 1		ï	47		1	4					31	 1	···· 1	$\frac{1}{2}$		ï	1 3	11 20	4 26	15 46
	i		1	2	14	1						100	i	1			i	1	18	24	42
				7	7 9	1						2	3 4	3 6					13 16	20 18	83 34
	1		1	5	3		4				1	20.01	2	12		1	ï	ï	19	13	32
				3	4		7					1	1	$\frac{2}{2}$		8 0 m m m			$\frac{6}{2}$	10 2	16
		S. 19 1		1	2		23					-	2	2	1			ï	3	5	8
		24. 3		4	3		7					3		3					87	4 5	12 12
				5 10	4 13	2	9					i	3	4		1.1			25	34	59
1	4		5	66	72	13	8				1	8	18	36	14		4	18	184	174	358
				188	88, ar	nd on	the	sam	e da	y in	each	i sub	bsequ	uent ye	ear, o	calcu	lated	l fro	m th	e ages	stated
	1	ssion.	_				_			0.0		00		Abo	ove I	Age	s not	-			
30 to	39	40 ta	0 49	50 t	o 59	60 to	o 69	70 to	0 79	80 to	0 89	90 t	io 99	10			wn.		Te	DTALS.	
М.	F.	М.	F.	М.	F.	M.	F.	M.	F.	М.	F.	М.	F.	М.	F.	M.	F.	M	•	F .	Total.
						-							1								
190	247	195	260		202	55	131									7 5	13	88		089	1,972
180 178	$256 \\ 195$	$198 \\ 175$	$259 \\ 240$	94 174	$\frac{192}{212}$	$\frac{56}{102}$	$122 \\ 178$	46	114	7	32	1	5			8	16	88		082	1,965 1,934
188	188	180	222	166	224	116	177	47	128	8	29	1	32			5 4	10	87	1000	082	1,954
184 185	197 208	194 187	$212 \\ 209$	$156 \\ 166$	$207 \\ 212$	$\frac{124}{113}$	$207 \\ 198$	50 49	120 111	6 4	23 11	1	2		1	5	$\frac{12}{12}$	88		098	1,987 1,995
177	206	183	211	162	212	114	187	50 37	104 86	1	5 1		2		1	5 4	$\frac{12}{12}$	89		096	1,991
179	216 219	$178 \\ 182$	214 212	$167 \\ 165$	$\frac{214}{206}$	109 106	184 175	32	78							4	11	89	4 1	,096	1,991 1,990
167	181	194	223		217	125	172	56	118	2	26		3		2	7	10	90	0 1.	,099	1,999
100	100	10-	100	150	100	140	194	60	74	7	28							93	0 1	.052	1,982
180 184	182	151	178	$150 \\ 149$	180	142	177		72	9	33	1						91	9 1	046	1,965
210	220	187	201	152	191	138	$ \frac{183}{182} $	51 54	89 91	11 14	36 40		1	1		2	7 6	91 93		,058	1,977 2,001
205	$226 \\ 230$	196 192	196 198	$160 \\ 162$	186 184	$142 \\ 140$	185	56	88	13	37							94	1 1	071	2,012
202	232	190	192	163	180	138	181	55	85 90	14 10	33 28							98 98		064	2,002 2,004
190 185	$\frac{226}{218}$	193 190	195 190	$160 \\ 157$	175 174	$130 \\ 122$	$180 \\ 178$	50 47	84	10	23	î						93	35 1	072	2,005
183	219	187	188	155	170	111	173	49	85 77	87	22 15	••••						92 92		,073	1,998
183	228	193	181	153	165	106	166	41	11	1	10				-			02		0001	1,979
00	0-	90	67	21	39	31	68	13	33	2	18		1					41	8	547	965
29 46	65 86	28 37	75	25	55	43	66	19	42	22	17							48	4	600	1,084
52	97	39	65	26 25	67 62	42 42	63 64	22 22	46 49	44	11 14		1				$\frac{2}{2}$	44		551 580	992 1,026
-56 54	$105 \\ 108$	39 39	81 77	23	62	36	59	19	38	4	12		3				2	43	16	582	1,018
49	102	42	69	18	71	-30	51	14	87 40	55	11 9		32				8 2	44		575 599	1,019
58 70	$113 \\ 110$	37 36	76	16 16	70 74	30 27	58 56	13 14	37	4	8		2				1	44	17	598	1,046 1,045
79	115	34	72	19	69	23 18	53 49	13 18	32 32	$\frac{3}{2}$	7 9		2				1	44		583 595	1,030 1,044
100	121	31	73	20	69	18	43	10	02	-	-	*	-							000	1,011
399	494	388	516	275	431	235	383	73	107	9	46		1			7	13	2,23	31 2	,688	4,919
410	432	386	512	268	427	241	365	82	114	11	50 79	1		"ï			25	2,28 2,20	6 2	,728	5,014
440	512 519	365 415	506 503		470 472	282 300	424 423	119 123	249 268		83	1	4			5	18	2,23	55 2	,702	4,903 4,981
438	535	425	487	341	461	.300	451	125	256	23	72	1	5			4	14	2,20	6 2	,751	5,017
436 425	542 545	419 413	470		463	281 274	430 425		133 234		55 42	1 1	54		1	55	15 14	2,28		,735	5,016 5,041
425	544 544		475	340	462	258	418	98	207	14	32	Î	3			4	13	2,2'	77 2	,764	5,041
437 450	558 525					240 249			195	11	29 50		24		2	47	12 11	2,20		,752	5,018 5,022
1 100	020	110		020	1 101		001			-		-									

ASYLUM STATISTICS .- TABLE XI.-Showing the Ages

calculated from the ages stated

	-	-	 1.	1		- Land		DEN A			-						
				1	^c hē Adı	nissi	ons.			:	The Di	schar	ges.				
	AGES.			om Pa	arishes lons.		rom o Asylu of Boa		R	ecovo	ered.	Im	Remo prove therv	ed, or	Т	he De	aths
	Contra d	****	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From	1 5 to 10 ye	ears	 														
,,,	10 to 15	,,	 														
,,	15 to 20	37	 18	11	29							2	2	4	5	2	
**	20 to 30	,,	 30	13	48				1		1	7	5	$1\overline{2}$	20	6	2
**	30 to 40	**	 26	15	41				4		4	7	4	11	13	7	2
"	40 to 50	,,	 26	17	43				5		5	3	4	7	10	11	2
**	50 to 60	,,	 13	20	83	1.1			1		1	3		3	22	13	8
"	60 to 70	"	 17	14	31				2	***	2	3	1	4	17	17	3
"	70 to 80	"	 11	10	21				•••	••••		1		1	9	22	3
23	80 to 90	"	 1	3	4										4	6	1
	90 and up		 i ö								***						
Ages	unknown		 8		3												
	Totals		 145	103	248				13		13	26	16	42	100	84	18

LEAVESDEN ASYLUM.

DARENTH ASYLUM.

				-	'he Adı		ons.	11		r	The Dis				T	1e De	aths
A	GES.		Froan	m Pa d Un	rishes ions.		Asylu f Bo	ums	R	ecove	red.	Im	lemov prove therv	ed, or			urne.
			Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 t	o 10 years																
" 10 t	ið 15 "																
, 15 t	to 20 🕠					18	21	39				1	1	2	1		1
"	io 30 33	-			444	6	10	16			·	3	11.1	3	8	5	18
,, 30 1	io 40 "						2	2					1	1		2	:
	to 50 ,,	4															
	to 60 ",	5								•••						5	
	to 70 "						+ * *						1	1	4	2	
	to 80 "														4	3	
"	to 90 "	•••			145										1	••	
	and upward	ls			••;			.d.								1	
ges unki	iown						-		***								
T	itals	11				24	33	57				4	8	7	18	18	в
and a starting	mi inde	in				-	-	Land and		and a	Lune is	Lan al					

Ī

of the Admissions, Discharges, and Deaths during the year 1897, on the orders of Admission.

YRAMMUS M	120.00	LAG.	c	ATE	RH	AM AS	YLU	M.							
	Part 2	Г	The Ad	missi	ons.		and of the	т	he Dis	charg	es.				
AGES.		m Pa d Uni	rishes ions.	As	om o ylum Boar	is of	Re	ecove	red.	Im	emov prove therw	ed, or	Th	e De	aths.
	Males.	Females.	Tota ¹ .	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females	Total.	Males.	Females.	Total.
Prom. 5 to 10 mode							X								anosa
From 5 to 10 years														111	
" 15 to 20 "	17	 5	22							2		2		1	4
" 20 to 30 "	10	8	18					1	1	5	1	6	6	2	8
" 30 to 40 "		9	19				1		1	4		4	6	5	11
, 40 to 50 ,	12	6	18					1	1	1	3	- 4	6	9	15
" 50 to 60 "	11	9	20	14.				1	1		1	1	14	12	26
" 60 to 70 "	14	9	23							1		,1	17	16	33
" 70 to 80 "	10	11	21					1	1				13	19	32
" 80 to 90 "	·	1	1										1	8	9
" 90 and upwards				RI-			?								
Ages unknown		•					•••())								
Totals	84	58	142				1	4	5	13	5	18	66	72	138

SUMMARY.

T

							,	The Ad	lmissi	ions.			Г	he Dis	char	zes.		-	1016	and.
			AGES.		-		m Pa d Un	irishes ions.		rom o sylun Boar	ns of	R	ecove	ered.	Im	Remov prove therv	ed, or	T	he De	āths.
						Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
	Fr	om	5 to 10 ye	ars																
I		,,	10 to 15	,,																
I		,,	15 to 20	,,		35	16	51	18	21	39				5	8	8	9	3	12
I		,,	20 to 30	,,		40	21	61	6	10	16	1	1	2	15	6	91	34	13	47
I		,,	30 to 40	,,		36	24	60		2	2	5		5	11	5	16	19	14	33
I		,,	40 to 50	, .		38	23	61			i	5	1	6	4	7	11	16	20	36
I		,,	50 to 60	,,		24	29	53				1	1	2	3	1	4	36	30	66
I		,,	60 to 70	,,		31	23	54			i	2		2	4	2	6	33	35	73
I		,,	70 to 80	.,		21	21	42					1	1	1		1	26	44	70
I		,,	80 to 90	,,		1	4	5										6	14	20
ł		,,	90 and upv	wards								••							1	1
	A	ges	unknown			3		3												
			Grand T	otals		229	161	890	24	33	57	14	4	18	48	24	67	184	174	358

ASYLUM STATISTICS .- TABLE XII.-Showing the Departments

DEPART	MENTS.			LEAVESDEN ASYLUM.	CATERHAM ASYLUM.	DARENTH ASYLUM.	SUMMARY
		1000	-		Agolecinets/ a	17	MALES,
MAI	LES.			Remond	Case Brom nihit	109 mint	
Blocks				127	165	60	352
Centre and Hall				19		4	30
Coaling				8	6		14
Stores				4	3	4	11
Kitchen				32	11		43
Bakehouse				9	1	4	14
Mess Room				3	7	1	11
Tailor's Shop				9	8	18	85
Shoemaker's Sho	p			6	8	16	30
Upholsterer's Sho	op			37	24	16	77
Painter's Shop					2		2
Grounds				70	46	54	170
Laundry				20	22		42
Farm							
Gas House				5	5		10
Engine House				3	2		5
The Lodge					1		1
Attending to Ear Drains	rth Clo	sets a	nd		8		3
Residence of Stew					1		1
Carpenters				3			3
Lunches					2		2
Drain Man						 1	1
					the local sector		
Total				355	324	178	857
Total number o		ients	in				
Asylum				900	929	449	2,278

where Patients were employed on December 31st, 1897.

DEPARTMENTS	3.	LEAVESDEN ASYLUM,	CATERHAM ASYLUM.	DARENTH ASYLUM.	SUMMARY, FEMALES,
Females.	-	11. A.	are K	and the second se	
Laundry		36	29	30	95
Work Room		14	25	20	59
Helpers in Blocks		129	206	106	441
Needlework in Blocks		89	98	30	212
Centre		7	10	7	24
Mess Room		5	6	1	12
Kitchen			2	6	8
Medical Superintendent's	8 Residence		2		2
Steward's Residence			1		1
Matron's Residence		1	1		2
Total		281	875	200	856
Total number of P Asylum	atients in	1,099	1,050	595	2,744

8

ASYLUM STATISTICS .- TABLE XIII. -Showing the Occupations previous to

	L		/ESI		4			ERI	IAM M.	r		AS		TH M.		S		MA		
OCCUPATIONS.		Nu	MBEI	RS.			Nu	MBE	RS.			Nu	MBE	RS.			Nu	MBEE	. s.	
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.
Males.			_	_										-						
Actor Artist Barber				1	1			 1 1	···· ····	 1 1				 				 1 1	1	
Bootmakers Brass-tip Maker	$\frac{1}{1}$	1			$\frac{2}{1}$		1			1						1 1	2			
Butcher Butler Cabinet Makers			 1 1		$ \frac{1}{2} $		····							····		1 1		 1 1		
Cabmen Cardboard-box Mkrs Carmen	2	1	2		3 2 1			1		1						 2	1 2	3 1		
Carpenters Carriage Trimmer				1	1	$1 \\ 1$		1		$\frac{2}{1}$						1 1		1	1	
Cellarman Cheesemonger's Asst Clerks	1	2	1		 4	1 1	1	···· ····	···· ····	 1 2						$\frac{1}{2}$	···· 3		 1	
Cook Decorator Diamond Setter		 1				···· ···	1			1 1 							1 1 1			
Dye Worker Errand Boys Fisherman	0	···· ····		1										···· ····		$\frac{2}{1}$			1 	
French Polisher Furrier Gilder		 1		···· ····	 1		1	1		1 1					···· ····		1 1	"i		
Glazier Grainer Gunmaker			 1 		 1 1		1			1						 1	1	 1 		
Harness Repairer Hatter Hawkers		1			1 3	···· 2		1		1 2						···· ··· 4	1	 1 	 1	
Horse Keepers Jeweller Labourers	110	 6	 4		 30	1 7	1 8	1		$ \begin{array}{c} 2 \\ 1 \\ 18 \end{array} $						 1 23	1 14	1	 4	
Leather Case Make Messengers Musician	2		2		1 4 1											1 2		2	 1	
No occupation Not known Painters	. 27	1	3	3 10 1	23 11 4	27	1	2		 30 1	24				24		2	3 2 1	3 10 1	11 AL
Paper Carrier Paperhanger Pearl Cutter						1	1			1 1 1						1 	 1 1			
Piano Maker Plasterer Policeman	. 1			1	1 1	1										1			 1 	
Polishers (French) Porters	. 1 5 9	$\begin{vmatrix} 1\\ 1 \end{vmatrix}$		1	3 6 2	···				··· 1						1 6 2	1 1		1	
Rag Sorter Sailor				1 1	1											 1			1 1	
Schoolmaster Shipbuilder Shoemakers		2			2	1 1 	••••			1 1 						1	2			
Carried forward	. 70	20	15	28	133	46	19	14		79	24				24	140	39	29	28	2

admission, and condition as to Marriage of the Patients admitted during the year 1897.

						-	20.00	12. A. M.	-	crito	1 10 10	-			~				1.11	
-	I	AS	VES	SDE UM.	N				HAI UM.					UM.		s		MALI		۲.
OCCUPATIONS.		Nu	MBI	ERS.			Nt	MBI	ERS,		NUMBERS.				NUMBERS.					
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.
MALES-continued.							_												-	-
Brought forward	70	20	15	28	133	46	19	14		79	24				24	140	39	29	28	236
Shoeblack Slater Soldier Stableman Stevedore Sweep Tailors Waiters Wood Carver Wood Choppers	1 1 	···· ··· ··· ··· ··· ··· ···	··· 1 1 1 1		$ \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 3 \\ \cdots 2 \\ 2 \end{array} $	···· ··· ··· ··· ··· ··· ···	···· ··· ··· ···	···· ··· ··· ··· ··· ···		$\begin{array}{c} \vdots \\ \vdots \\ 1 \\ \vdots \\ 2 \\ \vdots \\ 1 \\ 1 \end{array}$				··· ··· ···		$ \begin{array}{c} 1 \\ \\ 1 \\ \\ 1 \\ \\ 2 \end{array} $	 2 1	··· 1 1 1 1 1 1 	··· ··· ··· ··· ··· ··· ··· ···	$ \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \\ 4 \\ 3 \\ 1 \\ 3 \end{array} $
Total	74	22	18	31	145	48	20	16		84	24				24	146	42	34	81	253
Females.																	F	EMAL	ES.	
Actress Artificial Flower Makers Bootwork	 2 19	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$		··· ··· ··· ··· ··· ··· ··· ··· ··· ··	$1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 3 \\ 2 \\ 4 \\ \\ 6 \\ 47 \\ 1 \\ 2 \\ 9 \\ \\ 2 \\ 9 \\ .$	······································	···· 1 ···· 5 ···· ··· ··· ··· 1 ···· 1 ···· 1 ···· 8	$ \frac{1}{1} \frac{5}{11} \frac{1}{11} \frac{1}{11} \frac{1}{11} \frac{1}{17} \frac{1}{7} 7 $		$\begin{array}{c} & 1 \\ & \ddots \\ & & 1 \\ & \ddots \\ & & 1$						$\begin{array}{c} & & & 1 \\ & & 1$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{c} \vdots & 1 \\ \vdots & 1 \\ \vdots & 2 \\ 1 \\ 1 \\ 2 \\ 1 \\ 2 \\ 1 \\ 2 \\ 1 \\ 2 \\ 1 \\ 1$	······································	$\begin{array}{c}1\\2\\1\\1\\1\\1\\3\\7\\5\\1\\1\\8\\80\\1\\3\\23\\1\\3\\41\end{array}$
Total	40	21	19	28	103	22	15	20	1	58	33				33	95	36	39	24	194

No. 4.

DARENTH SCHOOLS AND PAVILIONS.

NEAR DARTFORD, KENT,

January, 1898.

(For Statistics, see pp. 143 to 153.)

Statistics.

On January 1st, 1897, there were in the schools and pavilions 977 patients, viz., 636 males and 341 females.

	Males.	Females.	Total.
Admitted during the year 1897	76	56	132
Discharged during the year	49	58	102
Died during the year	25	16	41
Remaining December 31st, 1897	. 636	341	.977

During the year there have been admitted 76 males and 56 females, total 132. Of this number, 26 are of the helpless crippled class, removed from any possibility of remedial benefit. Forty-three are of the "fair grade" class, and will derive distinct benefit from the special methods of training. Fifty-six of a lower grade are capable of improvement in a lesser degree.

The following extracts from the annual reports of the medical superintendents indicate the character of the admissions during the past ten years :---

The late Medical Superintendent (Dr. Beach) reported in-

1887.—" Many of the cases admitted during the year have unfortunately not been of a character to admit of much improvement. . . . On the girls' side only 23 of our patients can be employed."

1890.—" More patients, both males and females, would have been employed, but, owing to the very large number of feeble, epileptic, and helpless paralysed cases here, it is impossible to increase the number."

1891.—" Few cases sent, I regret to say, are capable of much improvement, and the remark that I made in my report some years ago that the institution was becoming every year more like a hospital than a training school applies with as much force as ever. Very few of the cases admitted were capable of industrial training."

1892.—" The large number of epileptic and helpless patients sent for admission have for many years largely outnumbered the able-bodied cases. Very few of the cases admitted during the year were capable of industrial training."

In my reports I remarked-

1893.—" That a critical review of the patients showed that out of a population of 950 there are 512 totally helpless—can neither wash, dress, nor feed themselves —200 of these are crippled. There are 300 epileptics, requiring constant care and continuous supervision by night and day. This is an unfavourable material from which to effect cures." 1894.—"Of the patients presented for admission, the number of helpless and incurable preponderates over the healthy and recoverable. The accumulation of these helpless and hopeless cases tends to increase at a greater rate than formerly."

1895.—" It is matter for regret that this institution should be in danger of becoming converted into a huge custodial institution for helpless crippled and incurable adult or semi-adult patients."

To the adult asylum have been transferred during the year 24 male and 33 female patients above the age of 16.

During the 23 years the institution has been in existence, there have been discharged to friends-

As " recovered "	 	 107
As " improved "	 	 274

Not all of those discharged "recovered" would come under the category of idiot or imbecile; they are rather those on the border line—of unstable mental equilibrium—easily unbinged when exposed to adverse influences. Residence here, with the attendant advantages, restores these subjects to their average physical and mental condition.

With regard to those discharged "improved," experience goes to show that those children who become at all capable of engaging in domestic or industrial pursuits are removed by their friends, who desire to have their help in their homes or in their work, leaving in the institution a large number of the indifferent, the crippled, and the epileptic, incapable of rendering efficient service.

The death rate for the past year is again low, viz., 4.10 per cent. on the average number resident.

Causation. Of the 132 children admitted during the year, the family history is well ascertained and clear in 104 cases, and demonstrates that alcoholic intemperance of parents and hereditary predisposition are the main factors in the production of idiocy and imbecility.

	P	atients admitt	ed.
CAUSES.	Boys.	Girls.	Total.
 Excessive alcoholic intemperance in one or both parents (complicated with suicide, cerebral palsy, delirium tremens, and alcoholic dementia) Marked phthisical (tubercular) disease in one or both parents (complicated with Bright's disease (one case), feeble mindedness, and excessive fecundity (22 births in one family, of whom seven died and one was an 	10	9	19
idiot) 3. Definite cerebral disease (epilepsy, imbecility, paralysis,	13	9	22
insanity, &c.) in one or both parents 4. Delicate and feeble health of mother, often with difficult labour (three boys and four girls), and	12	20	32
asphyxia of child (four boys and one girl)	9	8	17
5. Fright or worry and anxiety of mother during gestation	9 2 6 3	4	6
3. Injury or accident to child	6	4 2 2	6 8 5
7. Causes doubtful (syphilis or alcohol)	3	2	3
	55	54	109

Epidemic I or Zymotic Disease. r

During the early part of the year there occurred some 20 cases of rötheln or epidemic roseola of a mild character.

			-						
Staff.	Average	daily number of	patie	nts resi	dent dur	ing the	e year	977.6	
	Average	daily number of	staff	employ	ed			207	
	Viz.:	-Medical staff					2		
		Nursing staff					116		
		Teaching staff					11		
		*Other staff (th	nis inc	eludes 1	3 scrub	bers)	78		
							207		
		(8	Signed	l) F	. н. w			, M.D.,	
						Medic	al Sup	erintendent.	

* In addition to this number, 78, there were employed during the year 18 men in the repainting and cleansing works and in levelling a portion of the recreation ground.

DARENTH SCHOOLS AND PAVILIONS, 1897.

IMBECILITY STATISTICS-DARENTH SCHOOLS AND PAVILIONS.

TABLE I.—Showing the Admissions, Re-admissions, Discharges, and Deaths during the Year 1897.

				Males.	Females.	Total.			
In the Asylum, January 1st, 1897				634	854	988			
	Males.	Females.	Total.						
Admitted for the first time during the year (direct from the several Parishes & Unions)	76	55	131						
Re-admitted during the year		1	1						
Admitted from other Asylums of Board				76	56	132			
Total under care during the year	al under care during the year								
	Males.	Females.	Total.						
Discharged-									
Recovered		5	6		03				
Improved Not improved	20	12 3	82 7						
To other Asylums of Board	24	88	57			-			
Died	25	16	41						
Total discharged (for various reasons) and	died du	uring the	year	74	69	143			
Remaining in the Asylum, December 31st	, 1897			636	341	977			
Average numbers resident during the year				637.0	340.6	977.			
Highest number resident on any one day .				633	354	987			
Lowest number resident on any one day				634	829	963			

TABLE II.—Showing the Admissions, Re-admissions, and Discharges from the opening of the Asylum to the present date, December 31st, 1897.

	Males.	Females.	Total.	Males.	Females.	Total.
Admitted during the period of 23 years (di- rect from the several Parishes & Unions) Re-admissions	1,704	$1,131 \\ 43 \\ 211$	$2,835 \\ 97 \\ 441$			
Total of Cases Admitted				1,988	1,385	3,373
	Males.	Females.	Total.			
Discharged— Recovered Improved Not improved To other Asylums of Board Died	159 161	$57 \\ 115 \\ 82 \\ 460 \\ 330$	107 274 243 988 784			
Total discharged and died during the 23 y	ears			1,352	1,044	2,396
Remaining December 31st, 1897				636	341	977
Average numbers resident during the 23 y	ears			889.9	251.9	641.8

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APPENDIX II. -- IMBECILITY.

	AFFENDIA							- 1 1	DLU	JILI	11.			
suc	e of	dent.	.fstoT	6.45	3-07	2.82	4.63	8-75	09-9	4.70	2.42	3-77	4-10	
lmissic	Percentage of	Deaths on Average Numbers Resident.	Females.	5.51	4.04	3-24	6-83	4-06	6.40	5.75	3-33	3.41	4·H	3.711.1124(3)
he Ac	Por	Death	Males.	6-94	2.46	2.57	3.18	3-55	6-70	4-20	1-90	26.8	4-09	
t. of t	of	011 18.	Total.	1-14	1-30	1.15	0-01	7.40	6.87	3-12	8-44	10-0	0-9	
r cen	Percentage of	tecoveries or Admissions.	Females.	;	1.62	0-95	10-0	5.17	9-72	00-9	5-26	15.78	5.31	inel smilech eder
ies pe	Perc	Adi	Males.	2.10	1-06	1-35	:	66-6	4-54	1.20	10-52	6-02]	1.31	all side and "scalarity
cover	840		.latoT	635.4	614-8	8-117	885.0	929-8	946-1	947-1	973-1	6-616	9-17-6	alan turing and the second s
of Re	Average Numbers	Resident.	Females.	217-6 6	249-3 6		351-0 8							the man and the state
rtion	VATSON	Resi				4 311-6		4 369-4	5 354-9	9 356-2	7 365-4	1 350-8	0 340-6	
ocloud			Males.	417-3	365-5	466-4	534-0	590-4	592-5	590-9	2-209	629-1	637-0	
and ear.	Remaining	year.	.IntoT	562	647	841	937	973	947	963	990	988	776	- Sarangel
dity out y	emain	becomper 318 in each year.	Females.	221	256	337	363	369	357	368	360	354	341	
lorta	Be	in	Males.	341	391	504	574	604	590	595	630	634	636	
al M subs		-	.IstoT	41	19	22	41	36	63	45	24	37	41	
h the Mean Annual Mortality and 888, and for each subsequent year.	11114	.D100.	Females	12	10	10	24	15	23	20	12	12	16	
an A			Males.	29	6	12	17	21	40	25	12	25	25	a sectore products
Me , and		ter us of 1.	Total.	170	35	;	:	42	89	10	02	56	12	1 72 - Million - Store St
h the 888		0728	Femiles.	46	6	:	:	31	44	13	45	29	88	
d Deaths, wit for the year 1		. 4	Total.	22 124	8 26	:	:	8 11	7 45	9 38	8 25	27	7 24	
ge 3	geo	Im		61	00	9 22	7 18	00	6 13	01	~	4 10	00	
the	har	Not Im. proved.	Kemales.		10			10	H	1-	20	6	*	
0r	Discharged			12 14	1-	11 13	16 11	00	171	00	67	25	32	
l J	I	Im. roved.	Total.								-			and the stand
8		Im- proved.	Males.	7 0	3 4	02 02	10 6	::	6 11	1 2	0	6 9	20 12	
rge			Total.	01	61	00	1 10	10	11	4	13 10	14 16	620	
ha		Re- covered.	Females.	:	-		-	31	71	00	3 1	9 1	10	
)isc	1	Eov	Males.	61	1	01	:	1-	4	-	10	10	1	
-Showing the Admissions, Discharges, and Deaths, with the Mean Annual Mortality and proportion of Recoveries per cent. of the Admissions for the year 1888, and for each subsequent year.		.1.	.LatoT	175	156	252	172	135	160	128	154	140	132	inderlands
1881		Total.	Females.	80	62	104	64	58	72	51	57	57	56	longing and a
4dn			Males.	95	94	148	108	E	88	77	97	83	76	
the .	tted.	ther ms rd.	.fatoT	61	:	94	:	:	-	61	61	:	:	
Gui	Admitted.	From other Asylums of Board.	Females.	1 40	1	2 42	:	:			1 1	:	:	n Barra Monthe in
nou			.soinM	21	:	52	:	:	:			:	:	
		From Parishes and Unions.	.fetoT	0 114	62 156	62 158	172	\$ 135	72 160	51 126	152	57 140	56 132	
-III	1 10	From Parishe d Unio	Females.	40			64	58			56			
B		and	Males.	14	94	96	108	11	88	75	96	88	76	
TABLE		Year.		1888	1889	1890	1891	1892	1893	1894	1895	1896	7681	
				Н	H	Н	П	-	-	1	Ч	1	-	

Mental Diseases	 Males.	Females.	Total.	
Idiocy	 	 19	11	30
Idiocy and Epilepsy	 	 13	10	23
Imbecility	 	 85	26	61
Imbecility and Epilepsy	 	 8	4	12
Of Weak Mind	 	 1	5	6
Totals		 76	56	132

TABLE IV.—Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients admitted during the Year 1897 direct from the Parishes and Unions.

TABLE V.—Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients resident in the Asylum on the December 31st, 1897.

Mental D	DISEASES		Males.	Females.	Total.		
Idiocy		••			125	108	288
Idiocy and Epilepsy					166	99	265
Imbecility					276	98	374
Imbecility and Epilepsy			·		69	36	105
						ET BEL	-
						-	2
Total	s			-	636	341	977
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APPENDIX II.-IMBECILITY.

Discharged and Died of each Year's Admit to December 31st, 1897.	Died.	Total. To	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	274 161 82 243 528 460 988 454 330 784 636 341 977
Discharged and Died of each Year's Admissions to December 31st, 1897.	Improved. Improved. Of Board. Died.	Females. Total. Nales. Total. Total. Total. Total. Total. Total. Total. Total. Total. Total. Total.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460 988 454 330 784 636
Discharged and Died of each Year's Admissions to December 31st, 1897.	Improved. Improved. Of Board. Died.	Females. Total. Total. Total. Total. Males. Males. Total. Total.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460 988 454 330 784 636
Discharged and Died of each Year's Admissions to December 31st, 1897.	Improved. Improved. Of Board. Died.	Females. Total. Total. Total. Total. Males. Males. Total. Total.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460 988 454 330 784
al Discharged and Died of each Year's Admissions to December 31st, 1897.	Improved. Improved. Asylums of Board.	Females. Total. Total. Total. Total. Females. Total. Total. Total.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460 988 454 330
al Discharged and Died of each Year's Admissic to December 31st, 1897.	Improved. Improved. Asylums of Board.	Females. Total. Total. Total. Males. Males. Total. Females.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460 988 454
al Discharged and Died of each Year's Adn to December 31st, 1897.	Improved. Improved. of	Total. Total. Total. Total. Total. Total. Total.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460 988
al Discharged and Died of each Year's to December 31st, 1897.	Improved. Improved. of	Females. Total. Males. Total. Total. Females.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528 460
al Discharged and Died of each Yo to December 31st, 1897	Improved. Improved. of	Females. Total. Total. Total. Total.	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	161 82 243 528
al Discharged and Died of each to December 31st,	Improved. Improved.	Females. Total. Males. Total.	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	161 82
al Discharged and Died o to December 5	Improved.	Females. Total. Males.	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	161 82
al Discharged and Die to Decembe	Improved.	Females. Total. Males.	27 27 8 111 8 121 14 121 15 121 16 6 6 8 11 11 12 12 13 13 14 11 15 12 16 6 6 3 7 12 13 12 14 11 15 12 16 11 17 18 11 18 11 18 11 18 11 18 12 19 13 19 10 12 11 13 12 13 13 14 14 15 15 15 16 13 17 15 18 10	161 82
al Discharged and to Dece	Improved.	Temales. Males.	22 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	74 161
al Discharged a to D	Improved.	Females.	22 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	741
al Discharge		Females.		
al Disch			H	10
I Di				11
2 2	vered.	Males.		107 159 115
ota	vei	Total.	-1228-6951201-040998044 :9	
Total I	6	Females.		57
Ā	Rec	Males.	100 140401 11000001101 11	50
5		Total.		418
pur	Died.	Females.	· · · · · · · · · · · · · · · · · · ·	16
d, a	iq -		······································	25
arg		Total. Males.		219
of each year's dumessions remaining on h Year's Admissions, Discharged, and Died, in 1897.	Asylums of Board.	Females.	: : : : : : : : : : : : : : : : : : : :	000
ns, 1 897.	As As	Males.	[]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]	24
in 1	ed.	Total.		1-
year s uumss Admissions, 1 Died, in 1897	Improved	Females.		00
Da	Imj	Males.		4
each Year's	red	Total.		32
A	Improved	Females.		6 20 12
- eacl	- R	Total. Males.	000004-00-	620
Of each	Becovered.	Females.	9	10
	Beco	Males.		_
		.IstoT	$\begin{array}{c} 377\\ 120\\ 56\\ 73\\ 155\\ 116\\ 116\\ 117\\ 17\\ 17\\ 17\\ 17\\ 17\\ 17\\ 17\\ 17\\ 1$	3373
=	be rd.	Females.	124 4 124 124 124 124	211
Pro	other Asylums of the Board.	Males.	1122 1122 1122 1122 1122 1122 1122 112	230 2
		Females	041411110010101004 100 1111	43 2
ed.	A Uni Relap case	Males.		54
Admitted.	ashes an ases.	Females.	$\begin{array}{c} 324\\ 326\\ 556\\ 556\\ 556\\ 556\\ 556\\ 556\\ 556\\ 5$	131
A	From Parishes and Unions. New Cases. Rehapsed cases.	Males.	47 47 50 50 50 50 50 50 58 58 58 58 58 58 58 58 58 58 58 58 58	1704 1131
-	A A			
		Year.	1875 1875 1876 1877 1877 1877 1878 1879 1881 1882 1883 1884 1885 1886 1887 1888 1888 1889 1891 1892 1893 1894 1893 1894 1895 1896 1897	Totals

TABLE VI.-Showing the History of the Annual Admissions since the opening of the Asylum, with the Discharges and Deaths, and the numbers

DARENTH SCHOOLS AND PAVILIONS, 1897.

	Und	er 16	1	6.	1	7.	1	8.	1	9.	20 to	o 29.	Г	OTAL	
CAUSES OF DEATH.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
CEREBRAL OR SPINAL DISEASES- Epilepsy	11	8	2								2	1	15	9	24
Hydrocephalus (Chronic) Tumour of Cere-				1										1	1
bellum Progressive Cere-		1												1	1
bral Sclerosis Meningo-Encepha- litis (Sub-acute)	1												1		1
THORACIC DISEASE— Bronchitis Tuberculosis Cardiac Disease	 4	2 2 			1 1 				 1		 1 		1 6 1	2 2 	3 8 1
ABDOMINAL DISEASE— Liver (Cystis of Hydatid)		1												1	1
Totals	17	14	2	1	2				1		3	1	25	16	41

TABLE VII.—Showing the Causes of Death during the year 1897, together with the Ages of the Decedents, calculated from the Ages stated on the Orders of Admission.

TABLE VIII.—Showing the length of Residence in those Discharged Recovered, and in those who have Died during the year 1897.

		RECOVERED.		DIED.						
LENGTH OF RESIDENCE.	Males.	Females.	Total.	Males.	Females.	Total.				
Under 1 Month										
From 1 to 3 Months		1	1	1		1				
,, 3 ,, 6 ,,		1	1							
,, 6 ,, 9 ,,		1	1		1	1				
,, 9 ,, 12 ,,	-1	2	3							
				9	6	15				
,, 1 ,, 2 rears ,, 2 ,, 3 ,,				4	2					
				Å	2 8	7				
				4 3	1					
,, 5 ,, 7 ,,				0.000	2	7				
" 7 " 10 "					2	2				
,, 10 ,, 12 ,,				2	1	3				
,, 12 ,, 14 ,,			•••	1		1				
,, 14 ,, 16 ,,				1		1				
,, 16 ,, 18 ,,										
" 18 " 20 "										
Totals	1	5	6	25	16	41				

148

APPENDIX II.-IMBECILITY.

110				~	- LI	UIA	IL	-1.00	DEGILITT.
Ages			Total.	947	963	990	988	1770	
calculated from the		TOTALS.	Females.	357	368	360	354	341	
ted fr			Males.	690	595	630	634	636	e presente e
loulo		70 to 80.	Females.	:	:	÷	:	:	DIA C
		70 t	Males.	:	:	:	:	:	
1897;		60 to 70.	Females.	1	1	:	-	1	
		60 t	Males.	:	:	:	:	:	The second s
6, a		50 to 60.	Females.	1	1	.:	1	61	· · · ·
1893, 1894, 1895, 1896, and	1	50 t	Males.	:	:	. :	.:	:	and the second states
895,		40 to 50.	Females	01	-	61	61	63	I have descent the
94, 1		VALUE AND DESCRIPTION OF	Males.		••••	-	-1	÷	the fail of a failed and and
, 189		30 to 40.	Females.	15	17	11	6	12	
1893	sion.	30 t	Males.	17:	:	.00	1.	.:	and an and an in making salles
31st, 1	Admission	20 to 30.	Females.	25	40	18	33	5	Afriquegan
r 31	of A	20 t	Males.	40	51	56	11	101	Sim (Soil of A
December		20.	Females.	20	13	12	10	19	
Dec	Orders	S4 .	Males.	30	28	28	18	18	and many a survey a survey of
no	the	19.	Females.		6	14	9	9	These Vills-Medic the mysics
ylum	no	-	Males.	35	20	31	29	19	with the and the
S A8.	stated	18.	Females.	13	12	16	10	16	
n the	8	1	Males.	27	26	47	23	32	Liver, or Receiver.
int i		17.	Females.	17	21	17	18	23	
eside		-	Males.	46	42	23	36	23	I far
nis 1	+	16.	Females.	39	39	24	29	27	
Patie			Males.	47	25	27	36	51	
of 1		Under 16.	Females.	217	214	238	240	230	
lges		Und	Males.	365	403	415	420	392	
he A			lst.	:	:	:	:	:	
ng t		1 :	ber 31	. :	:	. :	:	:	二、二、二、竹二、
how	**		sceml	:	:	:	:	:	
S.			1g De						
IX		1 1	endir		i	:	:	3 :	
TABLE IX Showing the Ages of Patients resident in the Asylum			Years ending December 31st.	1893	1894	1895	1896	1897	

			_		IISSI	ONS.	hor		THE	DISC	HAR				THE	
1	AGES.		Dari		Asyl	ums o Board	fthe	Re	cover	ed.	Imp	emove rovéd herwi	, or	DI	EATH	ь.
		Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
	From 5 to 10 years	41	31	72					2	2	5	7	12			
1	,, 10 ,, 15 "	35	25	60				1	3	4	7	7	14	18	13	31
	,, 15 ,, 20 "										29	21	50	4	2	6
											. 7	11	18	3	1	4
	,, 30 ,, 40 ,,											2	2			
	· ,, 40 ,, 50 ,,															
	,, 50 ,, 60 ,,						e									
	Total	76	56	132				1	5	6	48	48	96	25	16	41

 TABLE X.—Showing the Ages of the Admissions, Discharges, and Deaths during the Year 1897, calculated from the Ages stated on the Orders of Admission.

TABLE XI.—Showing the Departments where Patients were employed on December 31st, 1897.

MALES.			FEMALES.	
Departments.		Numbers Employed.	Departments.	Numbers Employed.
Blocks,		73	Laundry	17
Stores		1	Work Room	3
Kitchen		3	Helpers in Blocks	31
Tailors' Shop		30	Needlework in Blocks	3
Shoemakers' Shop		32	Med. Superintendent's Residence	1
Grounds		23	Helpers in School Room	3
Surgery		1		
Mat Making		4	•	
Total		167	Total	58
Total No. of Patients in Asyl	um	636	Total No. of Patients in Asylum	341

APPENDIX II.-IMBECILITY.

DARENTH SCHOOLS .- TABLE XII. - Time Table.

		MORI	NING CLASSES		
		10.0 to 10.30.	10.30 to 11.15.	11.15 to 11.45.	11.45 to 12.0.
Monday	1	Reading	Paper Cutting	Knot and Loop	Marching
	2	Pricking	Colour Work	Addition and Sub.	,,
	3	Cubes	Cane Weaving	Reading	Kinder Garten
	4	Knot and Loop	Clock and Colour	Stick Laying	Games
Tuesday	1 2 3 4	Natural History Coins and Shop Pricking Paper Plaiting	Writing Paper Cutting Paper Folding Stick Laying	Paper Folding Pricking Number Lesson Counting	Singing and Repeating
Wednesday	1	Coins and Shop	Paper Plaiting	Reading	Reciting
	2	Natural History	Drawing	Spelling	,,
	3	Writing	Knot and Loop	Object Lesson	Drilling
	4	Knot and Loop	Cane Weaving	Letters	,,
Thursday	1	Object Lesson	Writing	Knot and Loop	Tables
	2	Figures	Knot and Loop	Reading	,,
	3	Counting, &c.	Paper Plaiting	Personal Appear.	Games
	4	Paper Folding	Drawing	Object Lesson	,,
Friday	1	Joint and Lath	Drawing	Spelling	Drilling
	2	Addition and Sub.	Paper Folding	Colour and Clock	Reciting
	3	Reading	Colour Work	Stick Laying	Counting
	4	Colour and Clock	Writing	Coins, &c.	"
Saturday	1 2 3 4	Reading Object Lesson Addition and Sub. Letters	Colour Work Paper Plaiting Knot and Loop Paper Folding	Pricking Reading Writing Natural History	Singing and Repeating

DARENTH SCHOOLS AND PAVILIONS, 1897.

DARENTH SCHOOLS .- TABLE XII. (continued)-Time Table.

	LA	FTERNOON CL	ASSES.	
2.0 to 2.30.	2.30 to 3.15.	3.15 to 3.45.	3.45 to 4.0	10.0 to 11.45. 2.0 to 3.40.
Spelling Knot and Loop Pricking Counting	Cane Weaving Drawing Colour Work Cane Weaving	Pricking Reading Spelling Pricking	Tables ,, Reciting ,,	Sewing Knitting Kindergarten, &c. Basket Making
Dictation Addition and Sub. Reading Stick Laying	Paper Cutting Cane Weaving Paper Folding Pricking	Reading Writing Drawing Letters	Drilling Reciting Tables ,,	Sewing Knitting Kindergarten, &c. Basket Making
	Half-	Holiday.	{	Sewing Knitting Kindergarten, &c. Basket Making
Cane Weaving Dictation Cubes Writing	Addition and Sub. Paper Plaiting Cane Weaving Drawing	Transcribing Addition and Sub. Paper Plaiting Knot and Loop	Singing and Repeating	Sewing Knitting Kindergarten, &c. Basket Making
Reading Stick Laying Colour and Clock Drawing	Drawing Paper Plaiting Knot and Loop Stick Laying	Paper Folding Reading Stick Laying Number, &c.	Marching and Singing	Sewing, &c. ,, ,, Basket Making
	Half-	Holiday.	{	Sewing, &c. ,, ,, Basket Making

APPENDIX II.-IMBECILITY.

TABLE XII. (continued)-Time Table.

		MORNING	CLASSES.	
		10.0 to 10.30	10.30 to 11.10.	11.10 to 11.35.
MONDAY	5	Cubes	Paper Folding	Marching and Drilling
TUESDAY	5	Colour and Clock	Knot and Loop	Reciting
WEDNESDAY	5	Drawing	Colour Lesson	Kindergarten Games
THURSDAY	5	Writing	Cane Weaving	Singing
Friday	5	Natural History	Pictures, &c.	Marching and Singing
SATURDAY	5	German Target	Beads	Object Lesson
		10.0 to 10.30.	10.30 to 11.0.	11.0 to 11.10.
Monday	6	Beads and Reels	Pictures	Singing
TUESDAY	6	Boards, Cushions, & Pins	Paper Plaiting	Drilling
WEDNESDAY	6	Letters	Toys	Games
Thursday	6	Cubes	Beads and Reels	Marching
FRIDAY	6	Colour Lesson	Shredding	Singing
Saturday	6	Personal Appearance	Pictures	Games

DARENTH SCHOOLS AND PAVILIONS, 1897.

TABLE XII. (continued)-Time Table.

	AFTERNO	ON CLASSES.					
2.0 to 2.30.	2.30 to 3.10.	3.10 to 3.30.					
Stick Laying	Cane Weaving	Singing and Marching					
Letters	Paper Plaiting.	Ball Games					
	HALF-HOLIDAY.		Sewing, Knitting, Embroidery, and Modelling are				
Cubes	Paper Folding	Drilling	Special Lessons.				
Drawing	Cushions and Beads	Reciting					
	HALF-HOLIDAY.						
2.0 to 2.30.	2.30 to 3.0.	3. 0 to 3.10.					
Cubes	Shredding	Games					
Colour Lesson	Pictures	Singing	•				
	HALF-HOLIDAY.		Sewing, Knitting, Embroidery, and Modelling are				
roys, &c.	Paper Plaiting	German Target	Special Lessons.				
Stick Laying	Pins, Cushions, Beads	Drilling					
	HALF-HOLIDAY.						



MEDICAL SUPPLEMENT

TO THE

REPORT OF THE STATISTICAL COMMITTEE

FOR THE

YEAR 1897.

EDITED BY

F. FOORD CAIGER, M.D. LOND.,

AND

E. W. GOODALL, M.D. LOND.

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COMPLICATIONS AND CO-EXISTENT INFECTIOUS DISEASES, 1897.

Tables I. to III., which are compiled from the returns sent in from the different hospitals, show the number and percentage incidence of the various complications which arose among the scarlet fever, diphtheria, and enteric fever cases completed during the year 1897.

Table IV. gives the number of cases in which two separate infectious diseases were co-existent at the time of the patient's admission into hospital.

		Fev	er con	mplet	ed dr	iring	189	7.					
COMPLICATION.	Eastern.	North- Eastern.	North- Western.	Western.	South- Western.	Fountain.	South- Eastern.	Brook.	Park.	Gore Farm.	Northern.	Total.	Percentage Incidence.
Otitis Albuminuria Adenitis (of convales-	229 51	$\begin{array}{c} 294\\ 410 \end{array}$	245 120	258 194	177 158	237 132	178 77	391 134	6 9	89 41	90 27	2,194 1,353	14·39 8·87
cence)	81	108	78	75	160	91	58	130	1	34	28	853	5.59
Suppurative Adenitis (included) Rheumatism Nephritis Tonsillitis (of con-	$27 \\ 35 \\ 52$	7 70 97	30 34 51	21 91 53	$\begin{array}{c}13\\76\\24\end{array}$	20 40 52	19 59 44	38 59 55	 1		6 11 12	202 507 428	1.32 3.32 2.80
valescence) Stomatitis Broncho-pneumonia Bronchitis Abscess (other than	9 11 11 25	36 26 23 38	15 4 20 7	26 29 35 28		18 14 23 11	8 13 23 9	35 23 20 32	 5 	133 81 12 17	$\begin{smallmatrix}&25\\102\\&2\\&9\end{smallmatrix}$	$368 \\ 325 \\ 209 \\ 197$	$2.41 \\ 2.13 \\ 1.37 \\ 1.29$
Mastoid or Glan- dular)	25 17 16 4 4 4 4 4 16 6 1 2 31 35 36 10 1 2 31 35 36 10 1 2 31 35 36 10 1 2 31 35 36 10	$\begin{array}{c} 16\\ 19\\ 17\\ 12\\ 7\\ 9\\ 4\\ \vdots\\ 1\\ 3\\ \vdots\\ 2\\ 29\\ 36\\ 13\\ 23\\ 6\\ \vdots\\ 1\\ 2\\ 3\\ 3\\ 3\\ 6\\ \vdots\\ 1\\ 2\\ 3\\ 3\\ 3\\ 3\\ 3\\ 5\\ 1\\ 3\\ 3\\ 3\\ 5\\ 1\\ 3\\ 3\\ 3\\ 3\\ 5\\ 1\\ 3\\ 3\\ 3\\ 5\\ 1\\ 3\\ 3\\ 3\\ 1\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\ 3\\$	14 9 ; 3 3 ; 5 ; 2 2 1 3 1 5 3 6 4 9 2 ; 9 ; ;	15 11 6 6 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	$\begin{array}{c} 10\\ 8\\ 17\\ 6\\ 4\\ .\\ 2\\ 6\\ 1\\ 1\\ .\\ 2\\ .\\ .\\ 31\\ 18\\ 1\\ 3\\ 15\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\ .\\$	255 15 11 8 5 4 5 8 21 1 2 2 2 2 2 1 9	17 12 15 15 10 8 3 4 : 3 4 : : : : : : : : : : : : : : : : : : :	$\begin{array}{c} 42\\ 42\\ 14\\ 26\\ 11\\ 17\\ 20\\ 9\\ 4\\ 7\\ 1\\ 2\\ 1\\ 1\\ 56\\ 32\\ 6\\ 2\\ 31\\ 1\\ 2\\ 31\\ 2\\ 3\\ 1\\ 2\\ 2\\ 2\\ 1\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\ 2\\$	······································	$\begin{array}{c} 12 \\ 6 \\ 5 \\ 21 \\ 2 \\ 16 \\ 1 \\ 3 \\ \\ 175 \\ 54 \\ 9 \\ 9 \\ 4 \\ 15 \\ 1 \\ 4 \\ \\ \\ 175 \\ 54 \\ 9 \\ 9 \\ 4 \\ 15 \\ 1 \\ 4 \\ $	³⁷⁷ 177 25 6 3 	$\begin{array}{c} 131\\ 118\\ 117\\ 111\\ 71\\ 74\\ 40\\ 37\\ 24\\ 24\\ 24\\ 17\\ 14\\ 14\\ 14\\ 14\\ 14\\ 14\\ 1596\\ 532\\ 185\\ 95\\ 90\\ 21\\ 9\\ 90\\ 21\\ 9\\ 6\\ 2\end{array}$	$\begin{array}{c} 1.18 \\ 776 \\ 72 \\ 458 \\ 264 \\ 15 \\ 15 \\ 12 \\ 12 \\ 99 \\ 00 \\ 5.22 \\ 349 \\ 88 \\ 62 \\ 9349 \\ 88 \\ 62 \\ 9349 \\ 588 \\ 62 \\ 9349 \\ 14 \\ 95 \\ 003 \\ 01 \\ \end{array}$

TABLE I.-Showing incidence of Complications amongst 15,241 cases of Scarlet Fever completed during 1897.

Note.—In the above table for the year 1896, in the column referring to the South-Eastern Hospital, three cases of erysipelas were in error recorded as enteric fever.

From the above record it may be affirmed generally that the numerical incidence of each of the chief complications of scarlet fever has been closely similar during 1897 to that recorded in recent years.

It should be noted that the cases returned as "Albuminuria" comprise those in which 'albumin was detected in the urine simply, without any other symptoms pointing to affection of the kidneys. If, to the cases returned as simple albuminuria, there be added those which are returned as "Nephritis," the percentage of cases showing renal affection comes out at 11.67. This is slightly in excess of former records. So, too, the cases returned under the heading "Adenitis" comprise those in which the gland inflammation was limited to the submaxillary or submastoid region, and which was not directly connected, as far as could be determined, with the presence at the time of any primary lesion of the faucial structures.

Cases returned as "Mastoid Abscess" include all those in which suppuration occurred in the mastoid region, whether superficial to the bone, sub-periosteal, or within the mastoid antrum.

Under the term "Relapse of Disease" are included those cases alone in which the reappearance of the symptoms was sufficiently distinctive as to warrant a diagnosis of scarlet fever. This definition of "relapse," moreover, holds good in respect to the two following tables: —

TABLE II.—Showing incidence of Complications amongst 5,493 cases of Diphtheria completed during 1897.

Complication.	Eastern.	North- Eastern.	North- Western.	Western.	South- Western.	Fountain.	South- Eastern.	Brook.	Park.	Gore Farm.	Northern.	Total.	Percentage Incidence.
Albuminuria Paralysis Relapse of Disease Broncho-pneumonia Pneumonia Nephritis Scarlet Fever Chickenpox Measles Whooping Cough Rötheln Tuberculosis	$372 \\ 161 \\ 10 \\ 14 \\ 4 \\ \\ 36 \\ 4 \\ 4 \\ 2 \\ 4 \\ 4 \\ 2 \\ 4 \\ 4 \\ 2 \\ 4 \\ 4$	Not receiving cases of Ea	$\begin{array}{c c} & & & \\ & & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & &$	X 333 96 92 16 5 1 45 14 3 	207 106 15 15 1 37 	04 289 115 13 25 1 8 8 8 :2 ::::::::::::::::::::::::::::	S S S S S S S S S S S S S S	260 172 17 6 6 3 15 11 2 1 2 1	No admissions : Pa till December : Pa	Not receiving cases of Go	N 16 30 4 1 1 54 4 ;2 	E 2,316 1,129 110 108 24 19 384 43 29 15 6 1	42'16 20'55 2'00 2'14 '45 '34 6'99 '78 '52 '27 '10 '01

A closely similar incidence of complications is also noticeable among the cases of diphtheria completed during the year 1897.

The affections comprised in the foregoing table are recognised complications of the disease, and do not include those which are known to be dependent upon any particular form of treatment.

The large proportion of the cases were treated with antitoxin, but the special complications resulting from its employment are not given. A record of their incidence simply without an accompanying statement showing how much serum each case received would be valueless.

		com	pleted	aur	any t	001			-		-		-
Complication.	Eastern.	North- Eastern.	North- Western.	Western.	South- Western.	Fountain.	South- Eastern.	Brook.	Park.	Gore Farm.	Northern.	Total.	Percentage Incidence.
Relapse of Disease Hæmorrhage Abscesses Perforation Perioration Perioratis Periostitis Pleuritis Phlebitis Dementia Broncho-pneumonia Parotitis Diseases Scarlet Fever Diphtheria	15 6 2 5 : : : : : : : : : : : : : : : : : :	Not receiving Enterio Fever.	$15 \\ 14 \\ 14 \\ 3 \\ 6 \\ \\ 1 \\ \\ 2 \\ \\ 2 \\ 1 \\ 4 \\ \\ 1$	13 6 ; 99 3 91 91 1 3 ; ; ; 1 1	20 14 6 4 2 1 1 : 1 3 : : : : : : :	Not.receiving Enteric Fever.	13 20 8 4 3 4 4 7 1 1 2 2 	$11 \\ 6 \\ 2 \\ 3 \\ 2 \\ 4 \\ 1 \\ 1 \\ 2 \\ 3 \\ 1 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2 \\ 1 \\ 2 \\ 2$	Notreceiving Enteric Fever.	Not receiving Enteric Fever.	Not receiving Enteric Fever.	$\begin{array}{c} 87\\ 66\\ 32\\ 21\\ 16\\ 13\\ 10\\ 10\\ 8\\ 7\\ 6\\ 4\\ 6\\ 2\end{array}$	$\begin{array}{c} 1306\\990\\480\\310\\240\\190\\150\\190\\190\\190\\60\\-90\\30\\30\end{array}$

TABLE III.—Showing incidence of Complications amongst 666 cases of Enteric Fever completed during 1897.

The above table shows that the incidence of the more important complications

of enteric fever was slightly higher during the year 1897 than it has been in recent years, but in other respects it presents nothing worthy of remark.

TABLE IV. - Showing the number of Cases in which two separate Infectious Diseases were co-existent at the time of admission into the Acute Fever Hospitals during 1897.

Co-existent Infections.	Eastern.	North- Eastern.	North- Western.	Western.	South- Western.	Fountain.	South- Eastern.	Brook.	Park.	Total.
Scarlet Fever and Diphtheria Scarlet Fever and Chickenpox Scarlet Fever and Whooping Cough Scarlet Fever and Measles Scarlet Fever and Tuberculosis Scarlet Fever and Rötheln Scarlet Fever and Enteric Fever Diphtheria and Measles Diphtheria and Chickenpox Diphtheria and Chickenpox Diphtheria and Tuberculosis Diphtheria and Tuberculosis Diphtheria and Enteric Fever Diphtheria and Rötheln	7833116621	5 15 8 1 5 4 	17 14 7 1 1 3 	51 6 17 2 2 1 1 	15 7 12 6 1 3 1 	85 19 5 21 ; 21 ; 5 1 1 ; ;	37 14 7 9 6 ; 9 13 9 ; 3 9 ;	40 15 11 9 4 2 3 25 1 1	3 	1 2 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Total										$596 = \begin{cases} 2.78 \\ per \\ cent. \end{cases}$

It is seen from the above table that among 21,400 cases suffering from either scarlet fever, diphtheria, or enteric fever on admission, in 596, or 2.78 per cent., a second disease was also present. The percentage of cases showing co-existent diseases in the previous year was 2.9 per cent. For the two years 1896 and 1897, the incidence among 41,483 cases was 2.8 per cent. As has been the case in all previous records, the combination most frequently present was that of scarlet fever and diphtheria, their concurrence being nearly three times as frequent as that of any other two infectious diseases.

The adoption of the bacteriological test has rendered the diagnosis much more secure in respect to cases in which the presence of diphtheria was suspected.

F. F. C.

POST-SCARLATINAL DIPHTHERIA, 1897.

The following ten tables give the details of the cases of post-scarlatinal diphtheria occurring at the various hospitals during the year 1897. As in the tables given last year, the cases tabulated exclude those remaining in hospital at the end of the year, but include those remaining from the previous year. There were no cases at the Park Hospital. A column has been added to each table for the purpose of showing in which cases the antitoxin treatment was employed,

No.	Initials	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Res	ult.	Antitoxin or not.
1 2	J. B. J. S.	M M	3 9	St. David Honour	Oct. 12 ,,	Nov. 24/96	12 29	Faucial & Laryngeal Faucial	R		Antitoxin. No antitoxin.
34.0	A. Y. L. M. M. D.	M M F	784	Honour Honour Truth	Nov. 7 ., Dec. 5 ,, 11 16	Dec. 3 ., Jan. 1/97	20 25 19	··· ··· ···	R	D.	Antitoxin,
$\frac{6}{7}$	D. T. R. M.	MF	215	Honour Truth	Jan. 5/97 Dec. 8/96	, 28 Feb. 2	18 54	Faucial & Laryngeal	R R		Antitoxin.
8 9 10	L, T. W. A. M. H.	FMF	894	Truth Honour Truth	Jan. 6/97 ,, 23 ,, Feb. 2	", ³ ., , 13 ., ., 18	28 21 15	Faucial & Laryngeal Faucial & Laryngeal	R R	 D	No antitoxin. Antitoxin. No antitoxin.
10 11 12	м. н. L. E. E. C.	F M F	4 4 93	Truth Courage Courage	Feb. 2 ,, Dec. 10/96	,, 18 ,, ,, 20 ,, ,, 21 ,,	69 72	Faucial	R R		Antitoxin.
13 14	R. S. H. D.	F M	1 3	Fortitude Courage	Feb. 14/97 Dec. 12/96	, 24 , , 26 ,	9 73	Faue al & Laryngeal	RR	***	**
15 16 17	H. M. B. L. N. S.	M M F	4 12 10	Truth Mercy Fortitude	Jan. 25/97 Feb. 4 ,, 12 ,,	Mar. 1 ,, ,, 2 ,, ,, 3 ,,	32 24 17	Faucial	RRR	***	No antitoxin. Antitoxin.
18 19	B. C. A. D.	M M	12 5	Mercy Hut	Dec. 24/96 Jan. 5/97	··· 8 ···	44 60	Faucial and Nasal Nasal	R		55 51
20 21 22	W. S. R. L. A. C.	M M F		Honour Honour Courage	Feb. 10 ,, ,, 26 ,, Dec, 30/96	" ⁸ " " ¹⁴ " Apr. 1	25 17 91	Faucial	R R R		", No antitoxin.
23 24	A. A. S. F.	M M	7 15	Honour Mercy	Jan. 21/97 Mar. 25 .,	Apr. 1 ,, ,, 6 ,, ,, 9 ,,	73 14	··· ··· ···			Antitoxin.
25 26	F. C. G. C. H. F.	F M M	2 14	Joy Honour	May 25 ,,	June 10 ,,	12 14 29	Faucial & Laryngeal Faucial	RR	D	
27 28 29	H. F. R. E. S. K.	M F M	586	Hope Hope Honour		·· 15 ·· ·· 21 ··	29 15 23	Faucial and Nasal	R		11 11
30 31	W. L. M. D.	M F	9 6	Mercy Patience	., 18 ,, ,, 24 ,,	July 5 ,,	40 38	Nasal Faucial	R		

EASTERN HOSPITAL.-TABLE I.-Post-Scarlatinal Diphtheria, 1897.

NOTE .--- In all three fatal cases death was due to measles.

NORTH-EASTERN HOSPITAL.-TABLE II.-Post-Scarlatinal Diphtheria, 1897.

No.	Initials	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$\frac{1}{2} \frac{2}{3} \frac{3}{4} \frac{5}{5} \frac{6}{6} \frac{7}{7} \frac{8}{9} \frac{9}{10} \frac{11}{11} \frac{12}{13} \frac{13}{14} \frac{15}{15} \frac{16}{117} \frac{17}{18} \frac{19}{12} \frac{20}{22} \frac{22}{22} \frac{23}{24} \frac{25}{25}$	E. W. H. B. J. W. A. G. D. J. G. A. M. F. R. G. W. F. R. G. W. P. W. B. A. K. C. G. A. W. P. M. B. A. G. J. P. W. B. A. G. J. V. H. B. J. W. A. G. B. J. W. H. B. J. W. A. G. D. J. K. B. J. W. H. B. J. P. W. B. A. G. H. G. K. J. P. W. B. A. G. H. G. K. B. J. G. A. J. P. W. B. A. G. H. J. P. M. B. J. P. M. B. J. J. J	FFMMFFFMMMMMFMMMMMMMMMMMMMMMMMMMMMMMMM	$\frac{4}{4} \frac{4}{17} \frac{1}{2} \frac{5}{5} \frac{2}{5} \frac{1}{11} \frac{1}{9} \frac{1}{5} \frac{1}{11} \frac{1}{11} \frac{4}{14} \frac{3}{13} \frac{1}{6} \frac{3}{3} \frac{2}{5} \frac{5}{3} \frac{3}{3} \frac{3}{3} \frac{3}{5} \frac{5}{5} \frac{3}{5} \frac{3}{5$	$\begin{array}{c} 10 \\ 4 \\ 15 \\ 3 \\ 2 \\ 3 \\ 2 \\ 6 \\ 13 \\ 3 \\ 15 \\ 13 \\ 13 \\ 13 \\ 13 \\ 13 $	Nov. 23/96 	Dec. 5/96 , 27 , Feb. 3/97 , 12 , , 17 , Mar. 1 , , 22 , , 17 , Mar. 1 , , 22 , , 18 , , 25 , , 18 , , 25 , , 18 , , 25 , , 18 , , 20 , July 27 , July 27 , July 27 , July 27 , , 20 , , 22 , , 20 , , 21 , , 22 , , 20 , , 21 , , 22 , , 21 , , 22 , , 23 , , 23 , , 30 ,	10 49 37 38 7 52 53 86 33 51 57 54 53 57 57 59 53 55 55 58 66 33 51 57 57 54 51 53 57 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 58 57 57 58 57 58 57 58 57 58 57 58 57 58 57 57 58 57 58 57 57 57 57 58 57 57 57 57 57 57 57 57 57 57	Faucial	R R	Antitoxin. """"""""""""""""""""""""""""""""""""
$\frac{26}{27}$ 28	H. G. L. R. J. C.	M F M	$9 \\ 2_{12} \\ 4$	15 3 13	, 12 , , 27 , Sept. 6 ,	Nov. 30 ., Sept. 20 ., Nov. 30 ., Sept. 29 .,	36 94 22	Faucial & Laryngeal Laryngeal Faucial, Nasal, and Laryngeal	R	
29	A. W.	М	8	15	,, 21 ,,	Oct. 9 ,,	12	Faucial and Nasal	R	

NORTH-WESTERN HOSPITAL.-TABLE III.-Post-Scarlatinal Diphtheria, 1897.

No.	Initials.	Sex.	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$\frac{1}{2} \frac{2}{3} \frac{3}{4} \frac{5}{5} \frac{6}{6} \frac{7}{7} \frac{8}{8} \frac{9}{9} \frac{111}{12} \frac{12}{13} \frac{14}{15} \frac{16}{16} \frac{7}{18} \frac{18}{19} \frac{9}{21} \frac{22}{23} \frac{24}{25} \frac{26}{26} \frac{27}{28} \frac{9}{20} \frac{31}{31} \frac{223}{33} \frac{24}{34} \frac{12}{36} \frac$	L. B. R. F. E. P. M. S. G. M. J. T. C. H. V. W. A. C. H. V. W. A. E. F. H. B. F. H. B. F. H. B. F. H. B. F. H. B. F. K. H. B. S. C. C. J. S. F. H. B. F. K. H. B. F. K. H. B. F. K. H. B. F. K. H. B. F. K. H. B. F. K. H. B. F. K. H. J. C. K. W. E. F. H. B. F. H. B. F. F. H. B. F. H. B. F. H. B. F. H. B. F. H. B. F. H. B. F. H. B. H. C. B. M. B. F. F. K. H. B. H. C. H. B. H. C. H. B. H. C. H. B. H. C. H. B. H. C. H. J. B. H. C. M. J. B. H. J. H. H. J. H. H. J. H.	FFMMFFFMFFMM FFFMMFFFFMMFF	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3EEA33F22F2BB82F268AC4D4DD42CEDC6A	Oct. 23/96 Nov. 16 ,, Dec. 1 ,, . 2 ,, . 1 ,, . 1 ,, . 31 ,, Jan. 13/97 , . 25 ,, . 25 ,, . 7 , 27 ,, . 9 , 21 ,, . 21 ,, . 21 ,, . 21 ,,	Dec. 7/96 , 16 , , Jan. 17/97 , 3 , , 6 , , 17, , , 3 , , 6 , , 1 , , 7 , , 7 , , 90 , Feb. 23 , , Mar. 2 , , 29 , , Apr. 24 , May 30 , , 21 , , 21 , , 22 , , 31 , , 27 , , 31 , , 27 , , 16 , , 29 , , Apr. 24 , May 30 , , 14 , , 27 , , 16 , , 21 , , 22 , , 16 , , 22 , , 22 , , Aug. 10 , , 22 , , 40 , , 50 , , 7 , , 9 , , 10 , , 9 , , 9 , , 10 , , 9 , , 10 , , 9 , , 10 ,	$\begin{array}{c} 43\\ 28\\ 130\\ 300\\ 205\\ 21\\ 33\\ 55\\ 8\\ 35\\ 51\\ 33\\ 55\\ 8\\ 45\\ 33\\ 55\\ 8\\ 49\\ 8\\ 22\\ 35\\ 55\\ 8\\ 49\\ 8\\ 9\\ 19\\ 8\\ 22\\ 5\\ 5\\ 8\\ 49\\ 8\\ 9\\ 19\\ 8\\ 22\\ 5\\ 5\\ 8\\ 49\\ 8\\ 9\\ 19\\ 8\\ 22\\ 5\\ 5\\ 8\\ 49\\ 8\\ 9\\ 19\\ 8\\ 22\\ 5\\ 5\\ 8\\ 49\\ 8\\ 9\\ 19\\ 8\\ 22\\ 5\\ 5\\ 8\\ 49\\ 8\\ 9\\ 19\\ 8\\ 22\\ 5\\ 5\\ 8\\ 49\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 8\\ 19\\ 19\\ 8\\ 19\\ 19\\ 19\\ 19\\ 19\\ 19\\ 19\\ 19\\ 19\\ 19$	Faucial	R D P	No antitoxin. Antitoxin. No antitoxin. Antitoxin. """"""""""""""""""""""""""""""""""""

WESTERN HOSPITAL.-TABLE IV.-Post-Scarlatinal Diphtheria, 1897.

No.	Initials.	Sex.	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Resul	t. Antitoxin or not.
$\frac{1}{2} \frac{2}{3} \frac{3}{4} \frac{4}{5} \frac{5}{6} \frac{6}{7} \frac{7}{8} \frac{9}{9} \frac{10}{11} \frac{11}{12} \frac{11}{13} \frac{14}{15} \frac{16}{17} \frac{17}{18} \frac{9}{20} \frac{21}{21} \frac{23}{21} \frac{24}{25} \frac{5}{26} \frac{6}{27} \frac{28}{29} \frac{9}{20} \frac{31}{21} \frac{23}{23} \frac{23}{21} 23$	T. G. O. V. S. C. A. P. L. S. W. C. D. S. F. B. A. M. D. B. H. J. W. F. S. M. B. H. J. W. F. S. M. B. K. B. M. B. H. J. W. F. S. M. B. K. K. B. K. K. C. C. L. S. S. F. B. M. B. H. J. W. F. S. M. B. H. J. W. F. S. M. B. K. S. M. B. K. S. K. S. S. K. S	F M F F F M M F M F M F F F M	5535397893902596382421 539023248449	$\begin{array}{c} 8 \\ 8 \\ 3 \\ 3 \\ 12 \\ 3 \\ 4 \\ 11 \\ 12 \\ 4 \\ 12 \\ 4 \\ 13 \\ 4 \\ 13 \\ 9 \\ 9 \\ 13 \\ 4 \\ 4 \\ 13 \\ 4 \\ 9 \\ 10 \\ 9 \\ 3 \\ 8 \\ 4 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 $	Oct. 23/96 Nov. 15 , p 28 " Dec. 13 " Jan. 10/97 " 17 " " 26 " Feb. 22 " Mar. 4 " " 26 " Feb. 22 " Mar. 4 " " 13 " " 13 " " 13 " " 13 " " 13 " " 26 " " Feb. 22 " Mar. 4 " " 26 " " 27 " May 2 0 " " 27 " May 2 0 " " 27 " " 28 " " 28 " June 21 " " 28 " " 2	Nov. 9/96 Dec. 6 ,, ,, 17 ,, Mar. 20/97 May 18 ,, ,, 25 ,, May 18 ,, ,, 25 ,, May 26 ,, Apr. 4 ,, Mar. 26 ,, Apr. 8 ,, May 26 ,, Apr. 8 ,, May 18 ,, Apr. 28 ,, May 18 ,, Apr. 28 ,, May 20 ,, June 6 , May 19 ,, , 31 ,, , 25 ,, June 20 ,, , 13 ,, May 22 ,, June 17 ,, , 222 ,, June 17 ,, , 222 ,, Juny 10 ,, Sept. 30 ,, Aug. 5 ,, , 30 ,, , 31 ,, , 30 ,, , 30 ,, , 30 ,, , 30 ,, , 31 ,	$\begin{array}{c} 15\\ 19\\ 17\\ 107\\ 12\\ 127\\ 127\\ 74\\ 58\\ 37\\ 17\\ 65\\ 43\\ 57\\ 59\\ 21\\ 30\\ 16\\ 19\\ 45\\ 36\\ 12\\ 23\\ 16\\ 25\\ 19\\ 99\\ 51\\ 7\\ 25\\ 26\\ 15\\ 11\\ \end{array}$	Laryngeal Faucial Faucial Faucio-laryngeal Faucio-laryngeal Faucial Laryngeal Faucial Faucial Faucial Faucial Faucial Faucial Faucial Faucial Faucio-laryngeal Faucial	RRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRRR	" No antitoxin, Antitoxin, No antitoxin, Antitoxin, No antitoxin, No antitoxin, " " " " " " " " " " " " " " " " " " "
34	F. D.	F	1	9	,, 18 ,,	Oct. 7 "	75		R	No antitoxin.

WESTERN HOSPITAL .- TABLE IV. Post-Scarlatinal Diphtheria, 1897-contd.

No,	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$\begin{array}{r} 35\\ 36\\ 37\\ 38\\ 39\\ 40\\ 41\\ 42\\ 43\\ 44\\ 45\\ 46\\ 47\\ 48\end{array}$	H, P. R, C. A, B. H, H. F, R, W, C. H, F, R, W, C. H, F, D, F, D, F, D, F, G, D, P, C, P, L, B,	M F F M M M F F M M F F M M F F M	$11\\42299\\14766\\10\\486$	3 9 9 9 9 9 9 9 9 9 9 9 9 12 10 9 9 9	Jylu 21/97 30 Aug. 15 16 18 21 Sept. 1 6 10 12 17 17 21 	Aug. 16/97 Oct. 5 ., Sept. 10 ., Sept. 30 ., Oct. 2 ., Sept. 30 ., Oct. 2 ., Sept. 21 ., Sept. 21 ., ., 25 ., Oct. 14 ., ., 17 ., ., 11 ., ., 12 ., Nov. 30 .,	24 65 53 42 38 10 31 32 8 17 18 34	and the second second	R R R R R R R R R	Antitoxin. No antitoxin. Antitoxin. No antitoxin. No antitoxin. No antitoxin. No antitoxin. No antitoxin. No antitoxin. No antitoxin.

SOUTH-WESTERN HOSPITAL.-TABLE V.-Post-Scarlatinal Diphtheria, 1897.

No.	Initials	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$\begin{array}{c}1\\2\\3\\4\\5\\6\\7\\8\\9\\10\\11\\12\\13\\14\\15\\16\\17\\7\\18\\9\\22\\22\\3\\24\\25\\6\\27\\28\\9\\30\\31\end{array}$	H. B. B. A. C. K. W. A. C. K. W. A. C. K. W. A. C. K. W. A. C. H. A. P. A. B. I. D. A. P. S. R. W. M. B. S. S. H. M. N. C. F. S. C. M. N. M. B. J. B. W. N. C. F. S. C. M. N. M. B. J. B. W. N. C. D. S. A. F. A. W. M. B. W. W. N. C. D. S. A. B. W. W. M. S. T. C. M. S. T. B. W. W. S. T. S. W. W. S. T. S. S. W. W. S. T. S.	M M M M F M M M F F M M M F F F F M M M F F F F F M M F F F F F M M F	35745749984943353568556262311576	Bostock Cameron Devon Brewer Bostock Lockyer Bostock Harvey Bostock Harvey Bostock Haygarth Cameron South B'ngough South B'ngough South B'ngough South B'ngough South Cameron Lockyer Cameron Lockyer Cameron Haygarth Brewer Cameron Haygarth Bostock Lockyer Cameron Cameron South	Jan. 15/97 , 24 ,, , 24 ,, , 24 ,, , 27 ,, , 29 ,, Feb. 3 ,, , 4 ,, , 21 ,, Mar. 3 ,, June 2 ,, June 2 ,, , 6 ,,	Dec, 16/96 Oct. 15 , Jan. 5/97 Oct. 22/96 Feb. 20/97 Nov. 28/96 , 15 , , 30 , Jan. 8/97 , 20 , , 19 , , 19 , , 19 , , 19 , , 19 , , 19 , , 20 , , 13 , , 30 , , Jan. 8/97 , 20 , , 19 , , 12 , , 19 , , 12 , , 13 , , 14 , , 15 , , 12 , , 16 , , 16 , , 17 , , 19 , , 12 , , 18 , , 18 , , 19 , , 20 , , 19 , , 20 , , 19 , , 20 ,	$\begin{array}{c} 182\\ 36\\ 94\\ 19\\ 142\\ 50\\ 25\\ 34\\ 59\\ 29\\ 26\\ 55\\ 24\\ 32\\ 12\\ 429\\ 28\\ 25\\ 31\\ 27\\ 29\\ 22\\ 40\\ 50\\ 28\\ 61\\ 23\\ 15\\ 23\end{array}$	Laryngeal Faucio-nasal Naso-laryngeal Faucial 	R R	No antitoxin. Antitoxin. No antitoxin. No antitoxin.

FOUNTAIN HOSPITAL.-TABLE VI.-Post-Scarlatinal Diphtheria, 1897.

No.	Initials.	Sex	Age	Ward,	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$1 \\ 2 \\ 3 \\ 4 \\ 6 \\ 7 \\ 8 \\ 9 \\ 10 \\ 11 \\ 12$	J. T. W. G. S. R. W. R. W. F. W. C. M. W. G. B. W. B. A. B. H. G. F. C.	M M M M F F M F M F	$ \begin{array}{r} 7 \\ 3 \\ 4 \\ 10 \\ 6 \\ 7 \\ 5 \\ 2 \\ 6 \\ 5 \\ 5 \\ 5 \\ 5 \end{array} $		Sept. 27/06 Oct. 9 ,, Sept. 30 , Nov. 4 , Oct. 5 ,, , 25 ,, Sept. 27 ,, Nov. 23 ,, Nov. 28 ,, Nov. 8 ,, , 22 ,, Dec. 20 ,,	Nov. 14 ,, Jan. 6/97 Dec. 11/96 Oct. 29 ,, Dec. 18 ,,	$15 \\ 55 \\ 70 \\ 11 \\ 66 \\ 17 \\ 90 \\ 17 \\ 17 \\ 17 \\ 31 \\ 21 \\ 18$	Faucial Faucial & Laryngeal Nasal Faucial Nasal Faucial Faucial Faucial Faucial Faucial	R R R R R R R R R R R	Antitoxin. No antitoxin. Antitoxin. No antitoxin. Antitoxin.

FOUNTAIN HOSPITAL.-TABLE VI.-Post-Scarlatinal Diphtheria, 1897-contd.

No,	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after	Nature of	•			sult,	Antitoxin or not.
13	A. A.	F	4	4	Dec. 2/95	Jan. 15/97	42	Faucial			R		Antitoxin.
14	G. A.	F	12	1	Oct. 28	,, 15 ,,	56	,			R		37
15 16	A. H. D. G.	F	8	4 21	Dec. 18 Jan. 20/97	Feb. 20 ,, ,, 14 ,,	64 23	Laryngeal Faucial		12.0	R		
17	G. A.	M	5	9	Dec. 8/96	,, 14 ,, Jan. 28 ,,	61	Faucial as	nd Na	sal	R		
18	N. M.	М	10	10	Jan. 17/97	Feb. 8 ,,	20	13	,,		R		
19 20	W. R.	F	3 4	6	Dec. 3/96		59	Enviol	12		R		
21	E. B. K. E.	F	10	4	Jan. 10/97	,, 8,, ,, 14,,	28 18	Faucial			R		
22	H. A.	M	5	6	., 29 ,,	Mar. 2 ,,	33	Faucial ar	nd Na		R		
23	M. P.	F	16	2	Feb. 23 ,,	., 11 .,	15	Faucial			R		
24 25	E. R. A. M.	F	5	21 8	,, 16 ,, Jan. 30 ,,	, 23 , , 20 ,	25 46		***		R		No antitoxin. Antitoxin.
26	L. S.	F	6	2	., 19 .,	Feb. 7 ,,	19				R		
27	M. S.	M	5	6	Feb. 2	,, 19 ,,	17	12			R		
28 . 29	A. E. A. S.	FF	5 5	4		Mar. 4 ,, 16	23 25				R		,,
30	R. M.	F	2	3	··· 18 ··· ·· 4 ···	,, 16 ,, ,, 17 ,,	40	Laryngea	1		R		
31	W. C.	м	4	2	,, 8,,	2	32	Faucial			R		
32	T. A.	M	8	12	Mar. 4 ,,	Apr. 7 ,,	32	**			R	***	-17
33 34	A. V. E. H.	F	6 5	3	17	,, 21 ,, ,, 19 ,,	33 25	**			R	***	No antitoxin.
35	R. W.	M	3	10	", ²¹ ", ", ²¹ ",	", ¹⁹ ", ", ¹² ",	19	Nasal			R		Antitoxin.
36	F. H.	М	7	10	,, 13 ,,	,, 5 ,,	20	Faucial			R		31
37	H. P.	M	6	12	n. 1 2 11	Mar. 19	16	**	***		R		
38 39	E. K. E. B.	F	6 5	82	Feb. 27 ,, 28 ,,	·· 19 ··	20 20	- 11			R		No antitoxin.
40	A. M.	M	500	2	,, 28 ,, ,, 24 ,,	··· 19 ···	16				R		
41	R. W.	F	6	8	,, 19 ,,	Apr. 3	38				R		Antitoxin.
42	M. B.	F	2	6	., 25 ,,	., 3 .,	36			***	R	***	,,
43 44	M. F. G. C.	FM	5 9	1 10	Jan. 30 ., Dec. 21/96	,, 1 ,, Jan, 14 ,,	57 21		***		R	***	"
45	F. W.	F	6	2	Mar. 21/97	Apr. 18 ,,	28	Faucial &	Lary		R		
46	F. M.	F	1	6	Feb. 8 ,,	Mar. 18 ,,	37	Faucial			R	-	No antitoxin.
47	G. M.	F	3	2	Mar. 26 ,,	Apr. 12 ,,	17	Nasal			R	***	,,
48 49	M. N. B. M.	F	20 12	1 6		Mar. 27 ,, May 1 ,,	21 53	Faucial	***	***	R	***	Antitoxin.
50	F. M.	M	7	9	··· 25 ,;	May 1 ,, Apr. 12 ,,	14	37 11			R		12/16
51	A S.	M	5	9	,, 18 ,,	,, 13 ,,	29				R		No antitoxin.
52	E.B.	F	9	2	Apr. 8 ,,	., 30 ,,	21	**			R		Antitoxin.
53 54	F. R. A. W.	FM	64	2	Mar. 19 ,, July 3 ,,	July 25	16 19	Nasal			R		,,
55	E. B.	F	2	3	May 10 .,	June 20 ,,	38	Faucial	***		R		
56	H. F.	M	15	9	Apr. 12 ,,	May 8 ,,	24	17			R		No antitoxin.
57	M. S.	F	11	2	Aug. 21 ,,	Sept. 1 .,	9		117		R		Antitoxin.
58 59	G. P. M. A.	F	6 2	3 8	July 30	., 20 ,,	21 50				R		No antitoxin.
60	C. C.	M	2	5	Aug. 17 ,,	Oct. 4	47	Nasal			R		**
61	E. G.	F	6	5	,, 17 ,,	Sept. 1 ,,	11	Faucial			R		**
62	A. M.	M	5	3	., 20 ,,	. 28	24 18			***	R	***	**
63 64	G. W. C. B.	FF	6	6 8	June 8	Anne 20	79			***	R		Antitoxin.
65	F. R.	M	ĩ	6	Sept. 27 ,,	Oct. 7 .,	7	Nasal				D	.,
66	C. S.	M	5	2	July 20 ,,	Aug. 27	37	Faucial			R		
67	V. G.	F	3	8	., 27 ,,	·· 26 ··	28 78	Nasal Faucial	***		R		.,
68 69	N. P. E. K.	FF	4 10	8	June 12 ,, Aug. 4 ,,	,, 31 ., Sept. 15 .,	40				R	**	No'antitoxin.
70	J D.	F	4	3	July 13 ,,	., 2 ,,	45				R		13
71	C. M.	F	4	8	Aug. 15 "	4	16	**	***		R		
72 73	D. B. C. T.	F	5	4	June 13 ,,	Aug. 10 ,	82 14		***	***	R		"
73 74	C. M.	MF	13 6	10	July 25 Aug. 29	Aug. 10 ,, Sept. 7 ,,	8	**			R	***	
75	L. B	F	5	1	July 26	. 1	33		***		R		.,
$\frac{75}{76}$	D. B.	F	8	6	May 13 ,,	June 25 .,	41				R		Antitoxin.
77	F. S. D L.	FM	10	6	,, 10 ,, July 2 ,,	, 10 ,, Sept. 20 ,,	29 42	Nasal	***		R	**	
78 19	F. J.	F	2 8	83	July 2 ,, ,, 19 ,,	Sept. 20 ,, Aug. 29 ,,	40	Faucial			R		No antitoxin.
80	J. J.	M	3	2	June 27 ,,	,, 21 ,,	52	,,			R		Antitoxin.
81	A. W.	M	5	9	July 12 ,,	,, 19 ,,	36				R		
82 83	A. W. B. M.	M F	11	2 5	,, 14 ,, Sept. 6 ,,	oct. 11 .,	39 32				R		No antitoxin.
84 84	E. L.	F	5	8	July 24	Sept. 23 ,	57	Nasal		***	R		
85	W. L.	F	2	8	Sept. 2	., 29 ,,	26				R		Antitoxin.
86	R. B.	F	9	5	Aug. 15 ,.	Oct. 3 ,,	16 33	Faucial			R		No antitoxin.
87	E. S. A. S.	MF	83	12 8	,, 24 ,, Apr. 30 ,,	Sept. 27 ,, Aug. 6 ,,	- 55 - 98				R		Antitoxin.
88 89	E. S.	M	2	6	Oct. 12	Nov. 11 ,,	27	Nasal			121	D	
90	H. G.	M	11	10	Aug. 20 ,,	Sept. 15 ,,	23	Faucial			R		No antitoxin.
91	S. C.	М	5	10	Oct. 19 ,,	Nov. 20 ,,	29	**	11.1	***	R		

SOUTH-EASTERN	HOSPITALTABLE	VIIPost-Scarlatinal Di	phtheria, 1897.
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No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$\begin{array}{c}1\\2\\3\\4\\5\\6\\7\\8\\9\\10\\11\\12\\13\\14\\15\\16\\17\\18\\19\\20\\21\\22\\3\\24\\25\\6\\27\\28\\29\\30\\31\\32\\33\\4\end{array}$	$\begin{array}{l} {\rm A. \ L. }\\ {\rm C. \ B. \ R. \ V. }\\ {\rm W. \ W. }\\ {\rm G. \ 8. }\\ {\rm G. \ 8. \\}\\ {\rm F. \ J. \\}\\ {\rm F. \ J. \\}\\ {\rm E. \ L. \\}\\ {\rm F. \ J. \\}\\ {\rm F. \ J. \\}\\ {\rm H. \ A. \\}\\ {\rm H. \ A. \\}\\ {\rm H. \ B. \\}\\ {\rm F. \ H. \\}\\ {\rm H. \ B. \\}\\ {\rm F. \ H. \\}\\ {\rm H. \ B. \\}\\ {\rm F. \ H. \\}\\ {\rm H. \ B. \\}\\ {\rm H. \ H. \\}\\ {\rm S. \ D. \\}\\ {\rm S. \ D. \\}\\ {\rm H. \ S. \\}\\ {\rm M. \ M. \\}\\ {\rm G. \ M. \\}\\ {\rm H. \ C. \\}\\ {\rm H. \ $	FFMMMMFFFFMFFFFFFFFFFFFFFFFFFFFFFFFFFF	1-41-4000400400400400400400400000000000	$\begin{array}{c} 14\\ 14\\ Hut\\ Hut\\ 13\\ 15\\ 13\\ 13\\ 13\\ 13\\ 13\\ 13\\ 13\\ 13\\ 13\\ 13$	Sept. 20/96 Nov. 20 , , , 20 , Dec. 6 , Feb. 23/7 Mar. 27 , , 24 , Mar. 19 , , 27 , Mar. 27 , Mar. 19 , , 27 , Apr. 3 , Mar 30 , Apr. 26 , May 12 , Apr. 25 , June 22 , May 12 , Apr. 3 , May 12 , Apr. 3 , May 12 , June 22 , June 14 , Apr. 10 , June 14 , Apr. 10 , June 21 , , 22 , , 22 , June 22 , June 22 , June 22 , June 23 , June 24 ,	Sept. 28/96 Jan. 3/97 Dec. 18/96 , 22 , Jan. 4/97 Mar. 31 , , 22 , , 23 , , 22 , , 23 , , 22 , , 20 , , 20 , , 20 , , 20 , , 21 , , 31	$\begin{smallmatrix}&5\\&40\\&87\\&21\\&36\\&22\\&23\\&22\\&18\\&34\\&223\\&17\\&532\\&20\\&11\\&532\\&26\\&11\\&15\\&31\\&26\\&9\\&80\\&38\\&33\end{smallmatrix}$	Faucial	R D R R R R R R R R R	No antitoxin. Antitoxin. No antitoxin. Antitoxin. No antitoxin. Antitoxin. No antitoxin. Antitoxin. No antitoxin. Antitoxin. No antitoxin. No antitoxin. Antitoxin. No antitoxin. Antitoxin.

BROOK HOSPITAL.-TABLE VIII.-Post-Scarlatinal Diphtheria, 1897.

No,	Initials.	Sex	Age	Ward,	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Res	ult.	Antitoxin or not.
1 2	A. B. E. H.	F	54	C2sep C 2	20	Nov. 24/96 Dec. 28 .,	83 54	Nasal	R		No antitoxin.
3 4	S. D. G. H.	M F	6 30	D 1 B 1	Nov. 17 ., ., 20 .,	Jan. 1/97 Dec. 19/96	43 26	Faucial	2.2		"
5 6	A. L. C. H.	M	5 23	RP	Sept. 27 ,, Oct. 6 ,,	, 17 ., Nov. 19	76 42	Faucial and Nasal Faucial, Nasal, and	R		Antitoxin.
7	E. E.	F	7	B 1	Nov. 13 ,,	10.000	44	Laryngeal	R		
8	H. H.	M	- 21	F 1	Oct. 8 "	. 22	63	Nasal	R		No antitoxin.
9 10	A. J. V. T.	M F	54 8	F 2 P	Nov. 30 ,, Dec. 10 ,,	Jan. 7/97	44 23	Faucial	R		Antitoxin.
11 12	C. R. A. C.	M M	12 4	E 1 F 2	Nov. 11 ,, Dec. 30 ,,	··· 7 ·· ·· 25 ···	58 25	Nasal	R		No antitoxin.
13 14	A. N. P. T.	M	63	F 1 B 1	Nov. 8 ,, Dec. 13 ,,	,, 28 ,, ,, 6 ,,	83 22	Nasal and Faucial	R		Antitoxin.
15 16	P. W. A. B.	MF	3 3	$^{\rm Q}_{\rm C~2}$	Oct. 26 ,,	Nov. 17/96	25 25	Faucial Nasal	R		No antitoxin.
17 18	W. R. J. P.	M	11	F 2 H 2	Nov. 25 .,	Feb. 1/97	68 51	,,	R		33
19	C. D.	F	23	D 1	., 15 ,,	,, 11 .,	45		R	***	
· 20 21	J. C. F. P.	M M	4 8	S G 2	., 18 ,, Dec. 27 ,,	Feb. 21 ., ., 8 .,	25 39	Faucial			
22 23	A. P. C. M.	MF	8 22	F 2 H 1	Jan. 4/97 Nov. 4/96	,, S., Jan. 4.,	85 55	Nasal	R		53
24 25	R. H. J. C.	M	6	E 2 F 2	Dec. 18 ,, Jan. 7/97	, 18 ,, Feb. 23 ,,	81 42	Nasal and Faucial	R		
26 27	M. N. M. P.	FF	3 4	H I B I	Dec. 10/96	Dec. 23/96 Jan. 13/97	12 29	Nasal	R		,, ,,
28 29	S. A. A. E.	MF	34 3	A 2	., 11 ,,	Dec. 22/96	7	11 ··· ··· 13 ··· ···	R		** **
30	S. H.	F	4	B 1	Nov. 28 Oct. 21	Feb. 12/97	24 60		RR	***	
81	М. В.	F	4	C 2	Dec. 27 ,,	,, 24 ,,	47	Nasal, Faucial, and Laryngeal	R		Antitoxin.
32	G. P.	M	8	F 2	Nov. 25 .,	., 24 .,	90		R	***	No antitoxin.

BROOK	HOSPITAL	LABLE	VIII.—Post-	Scarlatinal	Diphth	eria.	1897—Contd.
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No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of Attack.	Result.	Antitoxin or not.
$\begin{array}{c} 33\\ 34\\ 35\\ 36\\ 37\\ 39\\ 40\\ 41\\ 42\\ 43\\ 44\\ 45\\ 46\\ 7\\ 89\\ 50\\ 55\\ 55\\ 55\\ 55\\ 55\\ 55\\ 55\\ 55\\ 55$	A. L. G. L. A. N. W. N. S. H. E. S. S. R. E. C. E. S. S. R. E. C. H. B. R. E. C. P. T. P. H. H. A. C. M. F. B. L. C. V. J. R. A. J. G. A. J. G.	M MM M MFFFFM FFFFF M MFFFFF M M	12 4 17 10 3 3 6 6 8 3 4 2 3 9 5 3 2 9 5 17 2 4 4	G 1 1 2 2 2 1 2 2 2 1 2 2 2 2 2 2 2 2 2	Jan. 2/97 13 24 19 Feb. 9 Oct. 11/96 May 30/97 June 26 Juny 4 6 20 17, Sept. 11 Sept. 7 July 25 Sept. 7 June 9 Sept. 9 Sept. 9 	Feb. 26/97 " 2 ", " 24 ", " 17 ", Mar. 6 ", Jan. 18 ", July 19 ", " 26 ", " 23 ", Aug. 23 ", Aug. 28 ", " 8 ", Oct. 6 ", Sept. 29 ", Oct. 30 ", " 20 ", July 21 ", Nov. 2 ", Sept. 28 ",	$\begin{array}{c} 52\\ 19\\ 26\\ 19\\ 22\\ 99\\ 8\\ 63\\ 26\\ 16\\ 40\\ 16\\ 77\\ 14\\ 68\\ 30\\ 18\\ 52\\ 48\\ 15\\ 41\\ 54\\ 14\\ 54\\ 14\\ \end{array}$	Nasal	R RRR RRR RR	No antitoxin. Antitoxin. "" No antitoxin. Antitoxin. No antitoxin. No antitoxin. "" "" "" "" "" "" "" "" "" "" "" "" ""
56	D. H.	F	4	Q	,, 11 ,,	Nov. 3 ,,	51	Faucial	R	Antitoxin.

GORE FARM HOSPITAL .- TABLE IX. - Post-Scarlatinal Diphtheria, 1897.

No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Onse	e of et of heria.	Days after Admissiou	Nature o	f Atta	ck.	Res	alt.	Antitoxin or not.
i	M. R.	F	6	N	Aug. 13/96	Oct.	30/96	55	Faucial			R		Antifumin
2	J. S.	M	8	ŝ		Jan.	3/97	123		100		R	**	Antitoxin.
3	W. P.	M	4	A	1.0		25/96	46	**	***	***	R		
4	C. G.	F	6	A	, 15 ,	Nov.	9 ,.	55		***		R		**
5	N. C.	F	2	A	,, 21 ,,	Jan.	30/97	137		***	**	R	***	,,
6	G. P.	M	10	K	Sept. 4 .,	Dec.	1/96	60	**			R	***	"
7	E. E.	F	5	B	. 15		11 ,,	35	**			R		5+
8	J. S.	M	7	A	Oct. 1 .,	Dec.	16 ,,	69	"			R		
9	C. S.	M	6	0	Sept. 17 ,,	Nov.	15 ,,	33				R		31
10	C. S.	F	7	Q	2		14	31				R		
11	P. H.	F	5	Å	., 15 ,,		5 ,,	21				R		
12	V. S.	M	5	P	Oct. 7 ,,	Oct.	22 ,,	6	Faucial &	Larvn	geal	R	111	
13	E. W.	M	4	N	,, 2 ,,	Dec.	2	44	Faucial			R		
14	S. N.	M	5	R	Sept. 23 ,,	Nov.	17	31				R		
15	W. R.	M	10	K	Oct. 2 ,,	Dec.	2 ,,	-44	33			R		
16	F. S.	M	5	Q	Sept. 23 ,,	Nov.	25 ,,	34	,,			R		**
17	A. S.	F	5	P	,. 26 ,,	Oct.	28 ",	5				R		
18	W. W.	M	7	L	Oct. 7 "	Nov.	2 ,,	6				R		
19	M. F.	F	6	A	7		26 ,,	30				R		
20	A. W.	M	7	H	22 1 22	Dec.	4 ,,	37				R		
21	F. W.	M	3	N		.99	3 ,,	36				R		11
222	S. T. E. G.	FM	8 5	P		a. 11	13 "	46	,,			R	***	11
24	A. P.	M		I L	Sept. 26 ,,	Nov.	11 ,,	14	33		111	R		19
25	E. H.	M	8	I	Oct. 13 ,,	Dec.	10 ,,	42	3.9		4.4.4	R	***	,,
26	E. W.	F	8	p	Sept. 22 .,	Nov.	18 ,,	15 5	33	111		R		
27	E. W.	M	6	T	Oct. 2 ,. Sept. 15	Jan.	11/97 24	75	33	***		R	***	
28	L. A.	F	7	Å		Dec.	17/96	27	3.5			R		23
29	T. M.	M	7	Î		Nov.	29	9	"		100	R	***	13
30	A. C.	M	2	Ť	Th	Mar.	2/97	62	33		***	R	***	11
31	A. M.	M	6	Ĵ	Nov. 13 ,	Feb.	5	31	**			R		
32	J. F.	M	7	L	Dec. 5	Mar.	3 ,,	43	**	***		R		**
33	P. J.	M	8	T	., 16 ,,	Feb.	22 ,,	32	**			R		**
34	A. C.	M	8	J	., 10 .,		12	10				R		
35	E. J.	M	4	J	Jan. 18/97		9 ,,	1				S 10 1		
36	J. P.	M	3	B	19		21	12				R		
37	E. S.	F	13	C	,, 22 ,,	Mar.	28 ,,	44	11			R		
38	J. R.	M	10	I	., 19 .,	Apr.	2	48	**			R		
39	A. J.	M	2	B	., 12 ,,	Mar.	18 ,,	29				R		
40	W. P.	M	4	R	Feb. 1 ,,	May	12 ,,	84				R		
41	E. E.	F	7	E	Dec. 28/96	Feb.	23 ,,	3	33		***	R		
42	B. H.	M	4	M	Jan. 14/97	May	31 ,,	102			+++	R		
43	E. S.	F	18	F	Dec. 31/96	Mar.	9 ,,	19				R		
44	A. S.	F	4	A	Jan. 25/97	Apr.	30 ,,	68	**			R	***	

GORE FARM HOSPITAL.-TABLE IX.-Post-Scarlatinal Diphtheria, 1897-contd.

No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature o	f Atto	ick.	Re	sult.	Antitoxin or not.
45	H. W.	М	9	I	Dec. 30/96	Mar. 5/97	11	Faucial			R	1	Antitoxin.
46	W. A.	M	10	Н	Jan. 18/97	28	33				R		
47	A. N. C. J.	M	65	s	Feb. 2 ,,	May 5 .,	71	**			R		
48 49	M. H.	F	7	A	, 18 ,, , 12 ,,	June 2 ,, Apr. 30 ,,	63 29	**		***	R		11
50	T. McM.	M	10	R	Mar. 8 .,	2	L	17			R		.,
51	T. C.	F	11	FR	Feb. 17 ,,	May 5 ,,	27				R		
52 53	J. L. V. S.	MF	6 9	M	Mar. 25 ,, ,, 2 ,,	Apr. 14 ., May 5 ,,	12				R		
54	R. S.	F	4	A	. 8 .,	31	38	Faucial &			R		
55	E. J.	F	8	A	20	29	32	,,	99		R		.,
56 57	F. B. N. P.	F	8 4	A P	Feb. 11 ., ., 15 .,	,, 20 ,, ,, 10 ,,	23 10	Faucial			RR		**
58	E. C.	F	5	È	Apr. 1	, 27 ,	27	55			1.1		**
59	W. H.	M	4	A	Mar. 27 ,,	June 11 .,	38	33	***		100		••
60 61	E. N. G. M.	FM	10 14	CI	Apr. 12	$ \begin{array}{c} , 12 \\ , 6 \\ , \end{array} $	39 26	"	**		R		••
62	G. C.	M	9	M	Dec. 24/96	··· 6 ·· ·· 20 ··	40	**			R		
63	J. T.	F	4	A	Mar. 31/97	July 12 ,,	50	Faucial &	Laryı		R		
64 65	E. C. P. F.	MF	6 7	S A	Apr. 28 ,, 17	June 9 ,, July 1 ,,	23 44	Faucial		***	R		,,
66	A. S.	F	1	ĉ	. 16 .	July 1 ,, ,, 18 ,,	61 61	**	***		R		
67	E. S.	F	10	C	., 29 ,,	May 24	3				R		
68	C. B.	F	8	A	18	July 25 .	65	,,			R		17
69 70	W. S. B. A.	MF	16 7	SP	·· 26 ·· 26 ··	June 4 ., July 2 .,	13 41	Faucial &	Lary	igeal	R		.,
71	C. S.	F	7	P	May 3 ,,	May 27 ,,	3				100		"
72	D. T.	F	9	0	,, 10 ,,	June 15 "	14				R		
78	J. S.	M	6	LO	., 15 .,	Aug. 14 ,,	72	Pariated to	1		R	Ď	
74 75	H. F. R. C.	F	4	ĕ	,, 10 ,, Apr. 19 ,,	June 5 ,, ,, 18 ,,	1 10	Faucial & Faucial	naryr	igear	Ř		,,
76	F. W.	F	13	č	May 14 ,,	., 21 .,	12	33			R		51 75
77	A. B.	F	6	A	., 21 .,	July 13	34	**					
78	E. B. M. H.	F	11	CB	., 8 ,,	June 17 ,,	7	**	***		R	***	"
79 80	J. S.	M	8 5	B	,, 14 ,, ,, 10 ,,	July 9 ,, ,, 19 ,,	29 85	97 93					
81	A. A.	F	5	B	ss 7 ss	,, 29 ,,	45	39			R		
82	E. G.	F	7	B	,, 17 ,,	June 28 "	11	••		***			.,
83 84	R. K. H. G.	F	57	B	,, 20 ,, Mar. 31 ,,	July 13 ,, ., 28 ,,	26 40				R		
85	C. L.	F	9	č	Mar. 31 ,, May 17 ,,	", ²⁸ ", ", ¹⁰ ",	17	**			R		
86	J. B.	M	9	S	,, 20 ,,	Aug. 16	53	Faucial &		igeal	R		
87	E. S. G. A.	F	6	A A	June 10 ,,	July 1 "	24	Faucial			R		
88 89	E. W.	F	5	Ē	May 17 ,, June 4 ,,	·, 5 ·, , 15 ,,	14	,, ,,	***		R		**
90	W. A.	M	13	K	May 23 ,,	Aug. 12	38				R		
91	R. S.	F	4	A	. 15 .	July 25 "	18	**					33
92 93	C. B. J. B.	MF	36	0	June 9 ,,	,, 21 ,, Aug. 29 ,,	14 53	••	***		R		,,
94	E. H.	F	5	F	. 11	Aug. 29 ,, July 29 ,,	21	**			R		**
95	N. P.	F	10	F	,, 18 ,,	Aug. 15	34				R		,,
96 97	E. G. M. T.	FF	9	O F	·· 14 ··	July 20 ,,	8	"			R		
97	M. W.	F	6		,, ²¹ ,, ,, 1,,	Aug. 14 ,, July 23 ,,	31 9	>7 >3			R		
99	W. T.	F	8	QE	,, 26 ,,	Aug. 10 ,,	25	**			R		**
100	G. C.	F	14	C	4	July 24 ,,	8	,,	***		R		
101 102	W. G. E. F.	FF	14	C E	, 15 n , 14 n	Aug. 16 ,, ,, 3 ,,	31 18	"			R		
103	R. D.	M	5	R	,, 19 ,,	., 2 ,,	14	Faucial &			R		**
104	S. C.	M	4	R	,, 21 ,,	Sept. 13	55	Laryngeal	1		R		
105 106	F. G. A. G.	FF	8	A O	July 9	Oct. 27 "	92	Faucial	***		R	***	,,
105	A. G. A. F.	F	6	B	July 9 ,,	Aug. 10 ,, ,, 10 ,,	14 13	"			R		**
108	M. K.	F	4	В	May 29 ,,	. 5	8	Laryngeal		ucial	R		
109	E. H.	F	6	0	July 2 "	Oct. 30 ,,	94	**	,,		R		,,
110	H. P. M. R.	MF	13	JB		Aug. 10 ,, ,, 25 ,,	12 27	**	2.9		Ř	D	
112	M. H.	F	3	В	June 17 ,,	4	6	33	>> >>		R		
113	M. H.	F	9	В	July 9 "	,, 12 ,,	14		,,		R		,,
114 115	F D. E. H.	MF	10 12	J B	,, 13 ,, June 30	,, 10 ,,	11	Laryngeal Fancial			R		
115	H. M.	M	6	I	June 30 ,, July 8 ,,	, 17 ., Sept. 10 .,	17 39	Faucial			R		53
117	A. C.	M	7	J	,, 16 ,,	,, 13 ,,	41	.,			R		**
118	E.B.	F	77	E	., 10 .,	Aug. 13 ,,	9				R		
119 120	O. C. T. B.	FM	7 9	O K	, 5 ,, , 15 ,,	,, 10 ,, Sept. 1 ,,	5 27	**	1.11.1		R		.,
121	C. B.	M	9	K	16	Aug. 31	21	haryngeal	& Fa	ucial	R		**
122	J. B.	M	6	В	June 12 ,,	., 23 .,	11	Faucial			R		
123 124	J. B. A. F.	M	7	H I	July 21	Oct. 12	61	La?			R		
124	M. C.	M	4	A	·· 29 ·· ·· 21 ··	Sept. 26 ,,	44 20	Laryngeal			R		"
			-			,, -,,		- and dates			-		"

			aor	1114	L. IADI	G 1111	000-0000	erecercise x.	representer	ece,	100	· contra.
No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria.	Days after Admission	Nature of	f Attack.	Re	sult.	Antitoxin or not.
126	G. M.	м	4	J	Index 2 402	1007		Panoial in	Lawrences	D		(antitional as
120	L. W.	F	6	B	July 7/97 ,, 16 ,,	Aug. 19/97	6	Faucial &	and the second se		Ď	Antitoxin.
128	B. S.	M	9	K		Oct. 16	60	**	**	R		
129	A. E.	M	14	ŝ	Aug. 5 ,,	, 1,	48	**		R		"
130	H. P.	M	10	T	July 19 ,,	., 3 ,,	45		**	R		**
131	J. P.	M	6	K	Aug. 6 ,,	Sept. 23 ,,	35			R		
132	F. T.	M	8	K	July 28 "	5	17			R		
133	T. C.	M	6	I	,, 11 ,,	,, 12 ,,	24		,,	R	1.1.1	3.9
134	O. H.	F	4	A	June 17 ,,	Oct. 21 ,,	58		**	R		
135	F. E.	M	12	T	Aug. 4 ,,	., 20 ,,	57	Faucial				33
136	E. S. F. D.	F	8	O P	July 28 ,,	Sept. 12 ,,	17	3.9	*** **	1 15		
137 138	H. C.	M	11	R	Aug. 4 ., July 29 .,	··· 24 ··	28 2			1 15		93
139	S. H.	F	7	0 h	000	Aug. 30 ,, Sept. 14 ,,	14	,,	*** **	1 11	***	33
140	H. C.	M	10	K	A		2	37	*** **	1 15		33
141	J. C.	M	6	K	July 8 "	0	7	33		7.1		"
142	W. R.	M	5	T	Aug. 2	0	6	**		1 1 1		,,
143	W. S.	M	12	Ĥ	,, 17 ,,	Nov. 2	53	27		1 11		33
144	R. T.	M	6	T	,, 16 ,,	Sept. 14 .,	4	Fancial &				
145	J. D.	F	9	0	., 18 ,,	,, 23 ,,	18	Faucial		1 85		
146	S. F.	F	7	0	July 27 ,,	, 17 ,,	4			S		
147	A. P.	M	5	R	Aug. 3 ,,	480	13			R		
148	F. N.	M	9	L	,, 27 ,,	Oct. 26 ,,	41			R		
149	A. B.	M	8	J	., 19 ,,	Sept. 19 ,,	4	,,				
150	M. B.	F	7	M	July 19 ,,	,, 16 ,,	1					
151	M. B.	F	10	C	Aug. 21 "	Oct. 16 "	25	.,				
152	E.S.	F	3	C	,, 28 ,,		12	3.9	*** **	R	***	33
153	W. L.	M	7	L	., 5 .,	Sept. 24 .,	2	.,	*** **		***	33
154	H. N. L. A.	M	12 6	R	11 23 11	Oct. 12 ,, ,, 19 ,,	20	33	***	1 11		
156	C. C.	F	5	0 N	Sept. 8 ,,	1.00	25 19	"	***	E D	***	"
157	H. W.	M	6	s	,, 18 ,, ,, 9 ,,	10	15	33	••• •••	1		**
158	H. K.	F	11	F	0	00	24	*7	*** **	1 10		"
159	D. S.	F	8	ĉ	Aug. 30	4.00	10	3.9				,,
160	J. B.	M	4	č	,, 28 ,,	, 22 ,	14	33 31		R		"
161	A. M.	M	4	č	7	,, 11 ,,	13	33		Th		
162	W. D.	M	7	J	Sept. 21 ,,	., 19 ,,	10			1 12		,,
163	G. B.	M	7	J	., 3 ,,	,, 28 ,,	16			1. 11.		
164	F. C.	M	5	B	,, 9,,	., 26 .,	13	Laryngeal		1.11		
165	F. T.	F	6	N	,, 8,,	22	8			R		
166	A. S.	M	8	R	Aug. 25 "	33 222 33	7			R		,,
167	J. K.	M	3	T	Sept. 10 "	., 27 ,,	12	Faucial &	Laryngeal		D	**
168	D. W.	F	5	E	,, 24 ,,	Nov. 10 ,,	26	Faucial				
169	M. H.	M	10	H	4	Oct. 30 "	14					,,
170	W. W.	M	9	K	Aug. 31 ,,	Nov. 3 ,,	18	**		R		••
171	J. N. F P	MF	13	븉	Sept. 11 ., Oct. 7 .,	,, 6,,	10	,,		R		
172 173	E. P. J. D.	M	4	N	Classif Off	$ \begin{array}{c} 1 \\ 1 \\ 1 \\ $	5 8	Faucial & I	Dawnwood	R		**
174	A. A.	M	12	R	Oct 0	E.	7	Faucial		R	***	**
175	E. J.	F	10	0	Sept. 14 ,,		4			R		**
1					meper as as			"		1		

GORE FARM HOSPITAL. - TABLE IX. - Post-Scarlatinal Diphtheria, 1897-contd.

NORTHERN HOSPITAL.-TABLE X.-Post-Scarlatinal Diphtheria, 1897.

No.	Initials.	Sex	Age	Ward.	Dat Onse Scar Fev	t of elet	Ons	te of et of heria.	Days after Admission	Nature o	4 Atta	sk.	Res	ult.	Antitoxin or not.
1 2 3 4 5 6 7 8 9 10 11 12 13 14	E. L. A. W. F. B. F. M. G. D. M. C. A. D. G. C. A. O. B. M. G. L. D. R. J. D. M. B.	FFMFFFFMMFMFMF	4 8 5 4 3 5 11 4 11 7 7 7 5 6	$\begin{array}{c} 12 \\ 7 \\ 5 \\ 18 \\ 17 \\ 17 \\ 17 \\ 17 \\ 9 \\ 16 \\ 25 \\ 2 \\ 5 \\ 1 \end{array}$	June July Sept. July Sept. June Aug. Sept. Oct. Sept. Oct. Sept.	23 ,, 10 ,, 11 ,, 27 ,, 3 ,,	Aug. Oct. ,, ,, ,, ,, ,, ,, ,, Nov. ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	5/96 12 ,, 18 ,, 19 ,, 21 ,, 23 ,, 25 ,, 3 ,, 9 ,, 13 ,, 15 ,, 13 ,, 15 ,, 13 ,, 15 ,, 15 ,, 15 ,, 15 ,, 15 ,, 15	38 10 12 26 70 16 93 32 26 10 4 27 6 30	Faucial " Faucial & Faucial & " " " " "	 Laryn 	geal	RRRRRRRRRRRRRRRRR		No antitoxin. Antitoxin. No antitoxin. Antitoxin. "" "" "" "" No antitoxin Antitoxin.
15 16 17 18	A. C. D. G. E. J. H. T. H.	F F F F M	7 5 61 14	2179	oct. Sept.	30 ,, 2 ,, 12 ,, 25 ,,	··· ··· ···	$ \begin{array}{c} 17 \\ 18 \\ ., \\ 20 \\ \\ 20 \\ ., \end{array} $	$ \begin{array}{r} 17 \\ 22 \\ 49 \\ 29 \end{array} $	17 17 17			RRRR		,, No antitoxin. Antitoxin.

NORTHERN HOSPITAL. - TABLE X. - Post-Scarlatinal Diphtheria, 1897-contd.

No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	On	te of set of	Days after Admission	Nature o				sult.	Antitania
19	F. H.	м	5	18	Sept. 22/97	Nov	. 21/97	17	Faucial &	Lary	ngeal	R		Antitoxin.
20	W. M.	M	6	2	Oct. 8 ,,		27	20	Faucial			R		
21 22	S. B. J. B.	MF	9	25 16	Sept. 22 ,,	Dec		44				R		,,
23	F. S.	F	7	8	Oct. 1 ,, Sept. 22 ,,		6. ,, s	40 40		1.00		R		17
24	C. R.	M	5	17	Oct. 22 .,	23	8 ,, 8 ,,	13	23 31	***		R		No antitoxin.
25	J. H.	F	12	7	9		11 ,,	21				R		Antitoxin.
26	P. G.	F	11	5	8		13 ,,	40				R		
27	L. E.	F	7	7	., 24 ,,		14 "	24		***	***	R		
28	W. H.	M	65	16	Nov. 18 ,,	.,	17 ,,	3		***		R		,,
29 30	S. W. S. W.	M	4	19 5	Oct. 1 ,,		21 27	54 47	9.9	***	4.9.1	R		,,
31	A. M.	F	16	4	18	"	31	40	3.5			R		"
32	K. D.	F	11	8	., 8.,		31	40	33			R		No antitoxin.
33	E. G.	F	27	8	., 17 .,		30	40				R		Antitoxin.
34	F. T.	M	9	25	,, 24 ,,		20 ,,	35	.,			R		.,,
35	E. T.	M	7	25	., 29 ,,	Jan.	1/97	22			100	R		No antitoxin.
36	G. M.	FF	7	6	11 24 11	33	5 ,,	39	>>	***		R	***	
37 38	F. S. W. B.	M	13 8	21 25	Nov. 19 ,,		1 ,,	41 15	,,	***		R	***	Antitoxin.
39	V. W.	F	4	7	Nov. 19 ,, Oct. 6 ,,	27	1 ., 3 .,	65	"		***	R		**
40	M. P.	F	7	7	,, 13 ,,	17 19	4 ,,	60	11	***		R		"
41	C. F.	F	10	8	Sept. 4 ,,		5 ,,	74				R		No antitoxin.
42	E. B.	F	15	8	Oct. 22 ,,	57	6	47	,,			R		Antitoxin.
43	E. T.	F	7	. 6	., 23 ,,	13	7 ,,	41	31		***	R	***	No antitoxin.
44	L. D. W. D.	FM	10	17	Nov. 1	.,,	10 .,	44	De N. Le			R	***	Antitoxin.
45 46	W. B. E. N.	F	5 16	4	Dec. 17 ,,	,,	13 ,,	4	Faucial &			R	***	33
47	H. C.	M	8	25	·· 10 ··	>2	19 ,, 19 ,,	13 5	,,	***		R	***	33
48	AT.	F	9	17	. 4	5.5	20 ,	4	25		***	R		No antitoxin.
49	P. F.	M	3	17	1		20 ,,	28	Faucial &	Laryi	igeal	R		Antitoxin.
50	E. P.	F	13	5	Nov. 11 .,		21 ,.	16				R		
51	L. B.	F	8	16	,, 15 ,,	13	22 ,1	3	Faucial			R	***	No antitoxin.
52	J. R.	FF	20	7	., 19	• • •	25 ,,	30	**			R	***	Antitoxin.
53 54	E. G. R. G.	F	4 3	6 21	Dec. 23 ,,	13	25 ,,	3	3.5			R	***	23
55	J. A.	F	8	7	Oct. 20 ,, Nov. 1 ,,	33	25	48 52	5.5	***		RR		
-56	E. W.	M	10	11	Nov. 1	**	26 ,	62		***		R		**
57	L. B.	F	4	17	, 18 ,		27	48				R		"
58	D. I.	F	9	7	,, 11 ,,	Feb.	4	28	.,			R		
59	A. H.	F	12	6	Dec. 4		12 ,,	42				R		99
60	C. H.	M	3	17	Nov. 2 ,,		6 ,,	24	Laryngeal			R	***	,,
61	E. H.	F	42	8	Dec. 2 ,,	2.2	5 ,,	31	Faucial			R	***	11
62 63	E. H. H. N.	M M	12 5	11 5	Nov. 18 ,, Dec. 6	5.8	8	30 35	**	***	**	R		,,
64	A. B.	M	8	25	0000000 020000	8.5	9	35	.,,		**	R	***.	**
65	A. P.	M	5	6	Nov. 29 ,,	**	9	67	Faucial &	Larvn	real	R	***	**
66	H. A.	M	8	25	,, 19 ,,		12 ,,	59	Faucial			R		
67	C. H.	F	5	3	Jan. 2/97		15 ,,	9				R		
68	E. H.	F	6	1	Dec. 25/96	,,	15 ,,	10	**			R		23
69	M. S.	F	12	5	Jan. 4/97		17 ,,	15	"			R		13
$\frac{70}{71}$	N. S. M. C.	FF	10	12	Dec. 4/96	33	17 ,,	48	33			R	***	
72	D. R.	F	18	17 12	" ¹¹ " Nov. 1 "	,	18 ,, 15 ,,	22 83	33		***	R	***	**
78	M. H. P.	F	5	19	Dec. 25 ,,	**	10 ,	3	**		***	R	***	"
74	M. S.	F	11	12	Nov. 29	**	21	50				R		
75	E. S.	F	5	20	Oct. 30 ,,	**	21 ,,	89				R		
76	N. M.	F	7	16	Jan. 22/97	Mar.	1	12				R		.,
77	L. W.	F	4	19	Dec. 28/96		2 .,	45	P.P. LAN		***	R		
78 79	L. D.	FF	4	6	Nov. 30 .,		2	68	Faucial & I			R	***	,,
80	A. W. I. M. S.	F	10 7	1 16	Jan. 3/97 Nov. 23/96	,,	4 ,,	80 72	Faucial	•••	***	R	***	No antitoxin.
81	D. B.	F	6	3	Dec. 31 ,,	33	6 ,, 6 ,,	37	**			R		Antitoxin.
82	W. K.	M	4	1	Jan. 1/97	**	6 ,,	36	**			R		
83	F. L	F	16	8	6	**	6	10	**			R		**
84	R. M.	F	7	3	23		7	14	11			R		33
85	R. T.	M	8	18	28		7	5	Faucial & I	Laryn		R		
86	G. A. H.	M	7	25	33 . 20 33		7	9	Faucial			R		31
87 88	D. P.	F	8 5	10	Dec. 26/96 Jan. 2/97		8 ,,	45	**	***	4.4.3	R	***	
89	R. I. A. K.	M	4	18 16	Jan. 2/97 Feb. 2 ,,		9 ,, 9 ,,	36	Laryngeal	***	4.8.4	R		
90	R. P.	F	9	16	Nov. 15/96	**	15 ,,	94	Faucial	***	***	R		"
91	R. T.	F	4	16	22	33	15 ,,	68	Laryngeal			R		
92	W. G.	M	4	12	,, 30 ,,	,,	15	74	Faucial			R		
93	C. J. P.	F	6		Jan. 18/97	.,	15 ,,	10	,,	***		R		
94	G. C.	F	5	16	Nov. 8/96	,,	18 ,,	104	11			R	***	
100		M	3	7	Feb. 8/97		18 ,,	11	Laryngeal	***		R		
95							10					TR.	100 Carl 1	
96	F. C.	F	Ď	4	,, 18 ,,	.,,	19	3	Faucial	***		R	***	
	F. C.			4			19 ,, 19 ,, 20 ,,	43				R R R	100 Carl 1	

NORTHERN HOSPITAL.-TABLE X.-Post-Scarlatinal Diphtheria, 1897-contd.

		1	1	1	Da	te of	1		1	1			1		1
No.	Initials.	Sex	Age	Ward.	Ons Sea	et of arlet ver.	Ons	te of set of theria.	Days atter Admission	Nature o	ł Att	ack.	Re	esult.	Antitoxin or not.
99	Т. В.	M	48	16	Dee	16/96	N	01.05	0.5		107	1.00	1	1	
100	A. F.	M	4	5	Feb.	16/96 9/97	Mar.	21/97 22 ,,	95 13	Laryngea Faucial, N	lasal,	and	R		Antitoxin,
101	A. S.	M	3	1	Jan.	22 ,,		22	5	Faucial			R		
102 103	J. H. B.		3	5	Feb.	15	>> >>	24	15	Laryngeal	1		R		
04	H. H. E. W.	M	5	19	,,	10		26 ,,	16	Faucial			13775	D	15
05	M. B.	F	56	19 21	D."	10	.,	26 ,,	16	Laryngeal	l				
06	W. L.	M	5	19	Dec. Jan.	31/96 18/97	23	28 ,, 29 ,,	50 17	Faucial			1.1.1		,,
07	F. B.	F	5	17	Dec.	25/96		30 ,,	62	**			10		**
08	M. P. M. O.	FF	.4	17	Jan.	9/97		30 ,,	58				R		39
10	R. A.	F	11	4 19	37	24 ,,		30 ,,	15	T			R		
11	J. W. G.		4	5	Feb.	15 ., 23 .,	Apr.	30 ,,	18 9	Laryngeal Faucial		••••	1 12		
12	G. G.	F	9	8	.,	15 ,,		2	20	1)			Th		**
13 14	E. J. P.	F	6	6	Mar.	6 ,,		7 ,,	5				Th.		**
14	A. W. A. P.	MF	9 15	25 8	Feb.	6 ,,	,,	10 ,,	37				R		
16	I. W.	F	9	12	Mar.	² ₁₀ ,		11 ,,	46 9	**			R		
17	A. N.	F	4	7	Feb.	27 ,,	**	11 12	12	**	•••	•••	R		No antitoxi
18	L. H.	F	14	7	Mar.	ĩi "	37	12 ,	7	**			R		Antitoxin.
19	W. D.	M	5	8	Feb.	9		17 ,,	35	**			1.12		
20 21	A. R. M. B.	M	12	10	Jan.	3 ,,	13	19 ,,	60				R		
22	а. Б. С. М.	FF	8	38	M."	5 ,,		20 ,,	73	Laryngeal			R		,,
23	K. B.	F	4	3	Mar.	2 .,	,,	21 ,, 20 ,,	7 10	Faucial	***	***	R		**
24	E. L. H.	F	8	4	**	13 ,	**	0.1	1	2.9	•••				
25	E. C.	F	8	17	Jan.	11	**	25 ,,	44	"			R		
26 27	F. A.	F	7	6	Feb.	11 ,,	May	1 ,,	42				R		**
28	A. G. J. P.	M	6	25		24 ,,	29	3 ,,	46		***		R		
19	R. L.	MF	7 5	25	**	11 ,, 9		2 ,,	24	,,			R		,,
10	E. C.	F	4	7	Mar.	30 "	**	3 ,,	43 27	"		•••	R		**
31	H. K.	F	7	6	Apr.	5 ,,	**	4	4	Nasal			R		.,
12	A. R.	F	8	3	Mar.	1 .,		10 ,,	16	Faucial			R		
33	N. P.	F	6	12	,,	21 ,,	**	10 ,,	6				R		
35	M. B. E. C.	F	17	3	**	26 ,,		12 ,,	18	93			R		11
6	G. B.	FM	15 5	12 17	Apr.	23 ,,	,,	12 ,,	4 6		***		R		,,
7	E. B.	F	6	12	Mar.	00 "	**	15 ,,	13	"		•••	R		.,
8	H. H.	M	4	6	Apr.	17 ,	**	19 ,,	4	**		-	R		**
9	A. B.	F	18	7		11 .,		18 ,,	12				R		
0	J. T.	F	11	8	Mar.	19 ,,	,,	24 ,,	40				R		* **
2	F. F. J. S.	FM	7	8	Apr.	21 ,,	7.77	29 ,,	5	,,	***		R		
3	F. G.	F	12 5	25 3	Mar.	21 " 12 "	June	2 .,	20 23	Laryngeal	***		R		
4	J. W.	F	7	8		16 "	,,	4	42	Faucial		•••	R		"
5	C. C.	M	3	6		12 ,,	"	7 ,,	23				R		No antitoxi
6	A. B.	M	5	11	,,	13 ,,	.,	8 ,,	28	,,			R		Antitoxin.
8	S. W.	F	5	8		27 ,,	,,	11 ,,	21	,,	***		R		,,
9	E. S. K. I. B.		10	10	May	3 ,,		13 ,,	16	**	•••		R		"
0	F. G.		15 12	17 3	Apr. Mar.	22 ,, 31 ,,	"	15 ,, 16 ,,	12 25	,,	***		R		"
L	M. N.	F	5	17	May	15 ,,	**	21 ,,	12	**			R		"
2	J. Y.	M	14	10		19 ,,	"	22 ,,	19	,,			R		33 33
3	A. S.		18	17		27	,,	27 ,,	10	,,			R	***	
1	E. W. M. B.	FF	23	17		28 ,,	,,	29 ,,	5	**	•••		R		,,
3	G. B.	F	97	7 20		22 ., 6 .,	July	30 ,,	12 5	"	•••		R	••••	
7	A. J. T.	M	4		June Apr.	1.4		3 ,,	8	Laryngeal			RR		
3	F. C.	F	17	8		25	**	4 ,,	40	Faucial		***	R		" "
9	F. S.	M	8	10	May	5 ,,		6	40				R		
2	P.B.	F	6	20	June	7 ,,	,,	7 ,,	7	,,	***		R	***	
	M. K. E. B.	FF	8	5		15 ,,	,,	14 ,,	6 97	,,	***		R		.,
	E. D.	F	4		May June	6 ,,	**	16 ,,	37 9	**		•••	RR		"
	J. W.W.	M	6		Apr.	26 ,,	",	18 ,,	51	"			R		>>
5	D. O.	F	9	7	June	24	"	18 ,,	2	**			R		,, ,,
3	A. F.		12	10		21 ,,	,,	19 ,,	4				R		
	H. K.		12		Apr.	7	,,	19 ,,	81		•••		R		
3	E. W. R. W.		17			28 ,,	,,	21 ,, 23 ,,	27 8	"		***	R	***	
5	F. G.	F	5		June Jan.	8 ,,	1000	0.0	102	**		***	R		**
1	E. L.	F	9	8	July	9 .,	**	26	1				R		**
	R. K.	F	9	5	June 1	10		26	20				R		
\$	R. J.	F	16 9	12	Apr. :	2		27 ,, 28 ,,	11	,,	***		R		No antitoxin
1	E. C.			17	A BARRY	10		100	56	**			R		Antitoxin.

* Death due to otitis media, meningitis, and pneumonia, on May 28th, apparently unconnected with the attack of diphtheria two months previously.

NORTHERN HOSPITAL.-TABLE X.-Post-Scarlatinal Diphtheria, 1897-contd.

No.	Initials.			Ward.	Date of Onset of Scarlet	Date of Onset of Diphtheria.	Days after Admission	Nature of	Attack.	Res	ult.	Antitoxin or not.
					Fever,							
175	J. J. G.	М	9	11	June 15/97	July 30/97	15	Faucial		R		Antitoxin.
176	G. G.	M	10 6	11 25	July 4 June 1	,, 31 ,, Aug. 5 ,,	4 85	**		R		**
177 178	A. B. E. H.	M F	10	17	June 1 ,, ,, 26 ,,	, 5 ,	15			R		
179	N. M.	F	4	17	,, 10 ,,	,, 6,,	23 12	,,		R		**
180	C. G. R. J. A.	FM	12 7	7 10	July 8 ,, June 19	··· 6 ··	24	"		R		**
181 182	E. J.	F	3	2	June 19 ,, ,, 3 ,,		13			R		
183	A. C.	F	5	12	,, 19 ,,	. 10 .	11 6	"		R		No antitoxin.
184 185	G. H. J. G.	FM	67	18 10	May 7 ., July 11 .,	11	6			R		Antitoxin.
186	A. S.	F	10	8	., 14 ,,	,, 12 ,,	18		Denelal	R		No antitoxin. Antitoxin.
187	E. G.	M	4	2 25	June 18 ,, 30	·· 13 ·· ·· 12 ··	15 19	Faucial	& Faucial	R		Mintoxin.
188 189	A. P. I. L.	MF	10 4	12	. 9,	, 12 ,	28			R	41.1	,,
190	T. W.	М	3	17	., 11 ,,	., 13 ,,	43		Laryngeal	Ř	D	"
191	M. A. G. M. M. H.	F	20 4	5	July 11 ,.	., 14 ,,	4 19	Faucial		R		
192 193	J. C.	M	12	10	June 9	, 10 ,, , 16 ,,	31			R	***	
194	R. M.	M	12	10	July 4 "	,, 16 ,,	20 6	**		R		No antitoxin.
195 196	R. B. E. S.	M F	14 8	10 17	·· 19 ·· ·· 9 ··	,, 18 ,, ,, 18 ,,	6	**		R		Antitoxin.
197	C. N.	M	6	4	2	,, 16 ,,	23	Faucial an		R		**
198	W. F.	M	10 5	10 12	" ⁸ "	,, 19 ,, ,, 19 ,,	14	Faucial &	Laryngeal	R		No antitoxin.
199 200	C. G. L. H.	MF	9	12	" ¹² "	,, 19 ,, ,, 19 ,,	3	33		R		Antitoxin.
201	W. L.	М	13	11	,, 12 ,,	,, 20 ,,	8	**		R		No antitoxin.
202	A. B. E. G.	F	18 4	12 4	, 15 ., June 30 .,	·· 19 ··	14 26			R		Antitoxin.
203	W. B.	M	14	10	July 2	,, 19 ,,	7	.,		R		
205	L. R.	F	12	18	,, 13 ,,	., 21 ,,	15 19	**		R		33 33
206 207	M. M. A. A. F.	FF	54 10	12	,, 12 ,, June 18 ,,	··· 21 ·· ·· 21 ··	38			R	***	**
208	M. H. P.	F	6	18	July 25 ,,	,, 23 ,,	5			R		
209	G. S.	M	11	11 10	May 16	·· 23 ··	78 29			R		
210 211	F. K. A. W.	M	5	8	, 26 "	·· 20 ·· ., 25 .,	5	**		R		
212	F. M.	F	17	17	June 21 ,,	., 25 .,	34 22			R		No antitoxin.
213 214	E. H. N. M.	F	8 13	8 12	July 7 ,, ,, 14 ,,	27	8	**		R		A STATE OF THE STATE OF THE STATE
214	F. A.	M	8	11	June 15 ,,	,, 28 ,,	43			R		Antitoxin.
216	E. A.,W.	F	10	8	July 16 ,, Aug. 2	" 2J "	16 4	"		R		"
217 218	0. H. E. H.	MF	11 10	11 6	Aug. 2 ,, June 8 ,,	., 29 .,	30			R		No antitoxin.
219	E.A.EW	F	10	18	July 19 ,,	,, 23 ,,	24	**		R		,
220 221	E. W. F. W.	FF	12 4	6	··· 22 ··· ·· 11 ···	Sept. 1 .,	11 25	Faucial &	Laryngeal			Antitoxin.
222	J. H.	M	9	10	" <u>11</u> "	,, 1,,	11	Faucial		R		No antitoxin.
223	L. R.	F	10	7	·· 17 ·· 2 ··	5	20 23	"		R		100 100 h
224 225	M. A. A. G.	FM	4	1		··· 6 ··	44		*** ***	R		Antitoxin.
226	E. H.	F	11	18	Aug. 5 ,,	,, 6 ,,	12			R		
227	H. G.	M	9 10	11 10	June 29 ,, July 18 ,,		34 20	**		TD .		No antitoxin.
228 229	F. W. E. H.	M	11	11	Apr. 15 ,,	., 7 .,	101			R		Antitoxin.
230	G. B.	F	5	57	Aug. 1 ,,		10 26	**		R		
231 232	A. S. F. H.	M F	64	77	July 16 ,, Aug. 8 ,,	, 10 "	10			R		No antitoxin.
233	R. G. H.	M	12	10	,, 27 ,,	,, 18 ,,	2			TD		Antitoxin.
234	C. E. L. S.	F	7 5	10 7	,, 16 ,, ,, 11 ,,	·, 19 ,, ., 22 ,,	3 12	Laryngea Faucial	· · · ·	R		**
235	A. B.	M	5	7	, ¹¹ , ,	,, 23 ,,	24	Faucial,	Nasal, and	R		**
	100000		-	- 10		0.0	23	Laryn		R		
237 238	W. S. A. W.	F	7 9	10	July 26 ,,	··· 26 ·· ·· 27 ··	23	Faucial		R		37 37
239	A. M.	F	13	4	,, 20 ,,	,, SO ,,	55			R		No antitoxin.
240	S. W. E. K. W.	FF	35	7 12	Aug. 4 ,, Sept. 1 ,,	Oct. 1 ,,	30 7	Faucial &	Laryngeal	R		Antitoxin.
241 242	E. F.	M	10	11	June II ,,	,, 1,,	85	Faucial		R		
243	G. M.	F	4	26	Aug. 18 ,,	4	22 32	"		10		No antitoxin.
244 245	L. W. E. M. L.	F	16 5	21	Sept. 7	··· 3 ·· ·· 5 ··	8	**		R		
246	E. S.	F	7	20	June 5 "		103			R		Antitoxin.
247	N.B.	FM	14 12	111	Sept. 5 ,, Aug. 5 ,,	,, 7 ,, ,, 10 ,,	10 31	**		10.		>> >>
248 249	F. H. A. G.	F	4	20	15	,, 13 ,,	7	**		R		
250	H. M.	M	4	19	,, 30 ,,	., 13 ,,	10 30		Larvngeal	R		"
251	F. S. G. H.	M	3	10	sept. 7 ,,	·· 15 ··	21	Faucial	Laryngea	R		
253	E. D.	F	6	7	·, 21 ·,	, 15 ,	2	23		1. 11.		No antitoxin.
-		-	-							-	-	

No.	Initials.	Sex	Age	Ward.	Date of Onset of Scarlet Fever.	Date of Onset of Diphtheria,	Days after Admission	Nature of	f Atta	ick.	Res	sult.	Antitoxin or not.
254 255 256 257 258 259 260 261 262 263 264 265 266 265 266 267	R. A. C. F. M. M. F. T. A. D. G. F. D. B. O. B. S. E. F. L.	F M F F F M F F F M F M F		$19 \\ 10 \\ 10 \\ 18 \\ 12 \\ 27 \\ 20 \\ 3 \\ 3 \\ 16 \\ 17 \\ 5 \\ 1$	Sept. 15/87 Aug. 21 ,, , , 25 ,, Sept. 20 ,, Aug. 20 ,, Sept. 15 ,, , , 21 ,, , 21 ,, , 21 ,, , 22 ,, , 22 ,, , 22 ,, July 27 ,, Sept. 25 ,, , , 18 ,, Oct. 9 ,,	Oct. 16/97 , 18 , , 20 , , 22 , , 23 , , 26 , , 27 , , 27 , , 28 , , 27 , , 29 , , 29 , , 29 , , 29 , , 29 , , 21 , , 20 , ,	8 37 17 3 28 7 13 9 29 71 14 11 32 11	Faucial "" "" "" "" "" Latyngeal			RRRRRRRRRRRRRRRRRRRRRRRRRRRRRRR	 D	No antitoxin. Antitoxin. " " " No antitoxin. Antitoxin. " " "

NORTHERN HOSPITAL.-TABLE X .- Post-Scarlatinal Diphtheria, 1897-contd.

* Recovery from diphtheria in this case (L.C.) appeared to be complete when the patient developed pneumonia, and died on December 19th.

General Incidence and Mortality.

Sex.

There were 15,241 completed cases of scarlet fever during the year, and amongst these were 796 cases of post-scarlatinal diphtheria. This gives an incidence of 5.22 per cent., 0.58 more than last year. Since the beginning of 1895 bacteriological methods have been freely

employed in the diagnosis of diphtheria in the Managers' hospitals, and it is doubtless largely owing to this fact that since that year the incidence of postscarlatinal diphtheria has been so high. On this account also it is impossible now to institute any fair comparison between the incidence of diphtheria on the scarlet fever patients in the hospitals and its incidence on the population of London generally. As on previous occasions the two convalescent hospitals (Gore Farm Hospital and the Northern Hospital, Winchmore Hill) have furnished the larger proportion of the cases, viz., 442. In 119, or 14.9 per cent. of the 796 cases, the larynx was involved, 3.7 per cent. more than last year. The total case-mortality was 3.7 per cent., that of the laryngeal cases 8.4, and that of the remainder 2.9. These rates are extraordinarily low. Last year they were 5.1, 22.7, and 2.8 respectively ; so that the lessening in the total case-mortality appears to be entirely due to the lessening in the mortality of the laryngeal cases, and not to the inclusion of a larger number of mild ("bacteriological") faucial and nasal cases.

Table XI., p. 173, shows the sex-incidence and mortality.

There were 367 cases occurring in males and 429 in females, an incidence on the total number of scarlet fever cases of each sex admitted of 5 per cent, and 5.4 per cent. respectively.

The case-mortality of the males was higher than that of the females, being 4 per cent., as against 3.4 per cent.

Table X.II., p. 174, shows the age-distribution of the cases, with the Age. rates of mortality at the different ages. Of the 796 cases the majority are over five years of age, and the same observation is true of the faucial and nasal cases. But of the laryngeal cases the majority are under five years of age. In all the groups the mortality of the cases under five years of age is very low, being less than 9 per cent.

When the number of attacks at different ages, as shown in Table XII., is expressed at a percentage of the total scarlet fever admissions at the same age, it appears that the incidence is highest in the second quinquennium, viz., $6\cdot3$ per cent. It is 5.2 in the first quinquennium, and $4\cdot7$ and $2\cdot8$ in the third and fourth respectively. On all admissions of twenty years of age and upwards, the incidence is $1\cdot1$ per cent.

Time of Onset. Table XIII., pp. 175–176, shows the time of onset dating from the commencement of the attack of scarlet fever. The greatest number of cases occur during the fifth and sixth weeks, and the weekly number is late as the twenty-eighth week. There were no deaths amongst cases arising after the eleventh week.

Season. From Table XIV., p. 177, it appears that the greatest number of cases arose during the months of August and October, and the least during May and December. During the first quarter of the year there were 202 cases; during the second, 143; during the third, 242; and during the fourth, 199. The seasonal prevalence of scarlet fever being greater in the autumn and winter than the spring and summer, the number of cases under treatment in hospitals is also greater during these times, without there necessarily being any overcrowding. This fact may perhaps account for the greater number of post-scarlatinal diphtheria cases during the last six months of the year. The percentage incidence on the scarlet fever admissions for the four quarters of the year was as follows:—First quarter, 6.9; second, 4.5; third, 5.3; fourth, 4.4. So that, relatively, more cases occurred during the first and third quarters, and fewer during the second and fourth.

Except for the differences pointed out in the foregoing remarks, there was no alteration in the behaviour of post-scarlatinal diphtheria during 1897 as compared with 1896, and the facts of last year shed no fresh light upon its etiology. Though the introduction of bacteriology into diagnosis has been of immense benefit by facilitating the early recognition and therefore specific treatment of the disease, yet, as has been already remarked, it frustrates the making of any just comparisons between its incidence in and outside of hospitals. With the increase of diphtheria in London in 1888 post-scarlatinal diphtheria began to be noticeable in the Board's hospitals, and the same coincidence was stated to have been observed at Birmingham in 1895.* Probably as long as the disease continues to be so prevalent in the Metropolis it will be found attacking patients convalescing from scarlet fever.

E. W. G.

-									1								
Mortalit	per cent.	3-0	5.8	6.3		00 61	8-6	8.4		-F	3-4	69					
Total.	Deuths.	6	11	20	5-0	9	4	10	8.4	12	15	30	1=				
To	Cases.	294	383	229	¢1	73	46	119		367	429	796	60				
Northern.	Deaths.	1	0	1	0-4	1	1	01	6.2	61	1	00	ы				
Nort	Cases.	29	156	235	0	19	13	22	9	88	169	267	1				
Farm.	Deaths.	0	0	0		00	-	*	11.7	00	1	4	93 01				
Gore Farm.	Cases.	20	Ŀ	141	0	83	12	10	1	92	33	175	01				
ok.	Deaths.	0	0	0		0	0	0	0	0	0	0	0				
Brook.	Cases.	51	54	51	0	00	01	5		30	26	99	0				
-th-	Deaths.	0	4	+		0	0	0		0	*	4	7.11				
South- Eastern,	Cases.	6	24	8	12.1	-	0	1	0	10	24	34	11				
tain.	Deaths.	e1	0	61	01 01	0	0	0	0	61	0	. 03	2-1				
Fountain.	Cases.	35	22	15		1	00	4		36	12	16					
th. ern.	Deaths.	-	1	03		0	0	0	0	1	1	01	6.4				
South- Western.	Cases.	18	6	27	5.4	**	1	+		21	10	31	9				
.in	Desths.	1	1	63	00	03	0	01	ė1	00	-	+	8:3				
Western.	Cases.	16	18	2	8-9	1-	1-	14	14.2	83	52	4S					
th. em.	Desths.	03	1	00	φ	0	0	0	0	03	-	60	8.8				
North- Western.	Cases.	90	14	81	13-6	80	4	12		16	18	34					
4 É	Deaths.	01	01	4	0	0	1	1	12.5	01	63	13	17-2				
North- Eastern.	Cases.	15	9	21	19-0	9	01	90	12	51	00	6	1				
ern.	Deaths.	0	03	01	9.2	0	1	1	0-05	0	00	00	9.6				
Eastern.	Cases.	17	6	26	1-	00	01	10	61	20	H	31					
		(Males	Females	Total	Mortality per cent.	(Males	Females	Total	Mortality per cent.	Males	Females	Total	Mortality per cent.				
	Laryngeal Cases. Faucial and Masal											All Cases. Laryngeal					

TABLE XI.-Sex, Distribution, and Mortality.

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1 .	.	10		~			
talit	per cent.	8. 55		80 80		20 20	
Mor	per	833 844 111 111 111 111 111 111 111 111 111	5.0	000017773000 000017773000	8.4	000 000 000 000 000 000 000 000 000 00	1,00 1,10
Total.	Desths.	004000	65	0	10	0401000000000	8
To	Cases.	$^{2}_{8}$	229		611	47 116 116 388 888 888 888 888 888 888 888 888 88	2002
Northern.	Deaths.	0 0000 - 000	-	000440000	01	000444000	00
Nort	Cases.	1229 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	235	000010000	83	0 0 0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0	267
Farm.	Deaths.	00000000	0	000444400	4	000000000	4
Gore Farm.	Cases.	000144558-00	141	0004872000	34	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	175
ok.	Deaths.		0	000000000	0	00000000	0
Brook.	Cases.	100888801	15	0001-010000	13		99
South- Eastern.	Deaths.	000000000	4	000000000	0	00001000	4
Sou East	Cases.	-9186851-00	88	000000000	1		34
tain.	Deaths.	04400000	61		0	0000000	01
Fountain.	Cases.	0000000000	87	004400000	4	0032008201	16
ith. ern.	Deaths.	000000000	01	000000000	0	000000000	03
South- Western.	Cases.	0004000000	51	000440000	-	001087800	Ħ
estern.	Deaths.	00000000	61	010001000	63	0-00000	4
Wes	Cases.	0 03 10 03 10 03 00 03 11	35	0	14	1046450	48
North- Western.	Deaths.	0-00000	00		0	010011000	60
Not	.sosnD	000000000000000000000000000000000000000	83	0-00+00000	15	0000000000	34
North- Eastern.	Deaths.	0-0000		00000-000	1	0-000000	2
Not East	Cases.	0	12		∞		20
Eastern.	Deaths.	0000010000	61	00+00000	1	00+000000	**
East	Cases.	011148010	26	000000000	22	0-0100+00-0	31
		11111111	1	1111111111	1	111111111	:
Window.		0-1 0-1 1 5-9 10-14 15-10	Total	0-1 2 2 3 5-9 10-14 10-14 10-14 10-14 10-14 10-14	Total	0-1 0-1 0-1 0-1 0-1 10-14 110-14 10-13 10-13 10-14 10-14 10-14 10-14 10-14 10-14 10-14 10-14 10	Total
		ial and Yasal Cases.	onug	Aryngeal Cases.	-	VII Cuses.	-

TABLE XII.-Age-Distribution.

	Mortality	per cent.	997788229292999999999999999999999999999	5.3	833 000 000 000 000 000 000 000 000 000
	Total.	Deaths.	000000000000000000000000000000000000000	50	000000000000000000000000000000000000000
	°E	Cases.	0 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	677	
	Northern.	Deaths.	000000000000000000000000000000000000000	-	000000+0+000000000000000000000000000000
	Nort	Cases.	0010252258248000000000	235	0000000401-00-0000000000000000000000000
	Gore Farm.	Deaths.		0	* 0000000000000000 *
Fever.	Gore	Cases.	000000000000000000000000000000000000000	141	000000000000000000000000000000000000000
Scarlet	ok.	Deaths.		0	
	Brook.	Cases.	0847-09944480444400400	19	000000000000000000000000000000000000000
ent of	South- Eastern.	Deaths.	000000000000000000000000000000000000000	4	•••••••••••••••••••••••••••••••••••••••
Commencement	Sou East	Cases.	000040400000000000000000000000000000000	8	
omme	tain.	Deaths.	0-00-0000000000000000000000000000000000	01	•••••••••••••
	Fountain	Cases.	000001100001010000000000000000000000000	87	• • • • • • • • • • • • • • • • • • •
Onset after	South- Western.	Deuths.	000000000000000000000000000000000000000	01	•••••••••••••••••••••••••••••••••••••••
	Sou West	Cases.	000000000000000000000000000000000000000	22	CO0000000000000000 4
ne of	Western.	Deaths.	000H00H000000000000	01	000000000000000000000000000000000000000
-Time	West	Cases.	000000000000000000000000000000000000000	34	00000000000000000
XIII	North- Western.	Deaths.	000000000000000000000000000000000000000	60	
	Wes	Cases.	0H048%PH00H000000000	81	C00040H0H0C000CC00 0
TABLE	North- Eastern.	Deaths.	000000000000000000000000000000000000000	4	
	No East	Cases.	000000400140400000000000	12	000000H000000 0
	Eastern.	Deaths.	000000000000000000000000000000000000000	01	H 000000000000000000000000000000000000
	East	Cases.	0	26	040000000000000000000000000000000000000
			d over		
	-		week	Total	week
			184 w 320d 320d 344 544 544 544 946 1946 1146 1146 1146 1146 1146 114	F	Ist week 3nd 5nd .
			Faucial and Masal Cases.	-	Laryngeal Cases.

r																							
	Mortality	per cent.	0.0	59.6	3.1	4.3	71 10	3-1	6-9	0.0	8.9	1.6	2.1	0-0	0-0	0.0	0.0	0.0	0-0	0-0	6.0	0.0	50
	al.	Deaths.	0	+	01	4	10	60	9	0	*	1	1	0	0	0	0	0	0	0	0	0	8
Total.	Tot	.sses.	0	15	64	92	96	96	98	21	83	છ	46	22	16	11	15	4	00	9	+	6	296
	en.	Deaths.	0	0	0	0	0	0	01	0	1	0	0	0	0	0	0	0	0	0	0	0	00
	Northern.	Cases.	0	0	1	10	45	88	8	52	19	35	12	15	9	10	1-	e0	e1	00	1	01	267
of Scarlet Fever-continued.	'arm.	Deaths.	0	0	0	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	-
-cont	Gore Farm.	Cases.	0	0	00	10	11	24	18	24	81	15	16	10	9	+	69	0	-1	01	-	10	175
ever-	ok.	Deaths.	•	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 .	0	•
et F	Brook.	.sesr)	0	00	10	00	10	00	9	5	+	4	0	÷	1	1	1	0	0	1	0	0	99
Scarl	South- Eastern.	Deaths.	0	0	0	1	1	0	1	0	1	0	0	0	0	0	•	0	0	0	0	0	4
t of	Sou East	.sest.)	0	01	9	80	+	00	4	01	01	0	01	1	0	0	0	0	0	0	0	0	35
Onset after Commencement	tain.	Deaths.	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	•	64
imene	Fountain.	Cases.	0	00	19	19	13	12	9	10	00	95	0	9	0	1	1	0	0	•	•	•	16
. Con	South- Western.	Deaths.	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	c	0	0	•	0	01
after	Sou	Cases.	0	0	01	80	9	00	05	1	60	93	0	0	0	0	1	0	0	0	0	01	31
Onset	Western.	Deaths.	0	1	0	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	-
of	West	Cases.	•	01	15	00	62	03	4	00	01	**	1	1	0	0	1	1	0	0	61	•	48
-Time	North- Western.	Deaths.	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	00
TABLE XIIITime	No	Cases.	9	1	01	4	1-	1-	00	00	1	0	1	0	0	0	0	0	0	•	0	0	5
EX	North- Eastern.	Deaths	0	1	0	0	0	1	1	0	1	0	1	•	0	0	0	0	0	0	0	0	10
LABL	No	Cases.	0	03	01	6	00	9	1	60	1	0	1	0	0	1	•	0	0	0	0	•	81
-	Eastern.	Denths.	0	1	01	0	0	0	0	0	•	0	0	0	0	0	0	0	0	0	0	0	00
	Eas	Cases.	0	01	6	90	1	03	1	1	1	1	+	0	0	0	1	0	0	0	0	0	18
			:	1	1	1		i	:	:	1	ł	:	:	:	:		:				OVO	1-
			k	:	:	:	-		:	-	:	:	:	:	:	;		:	:	:	:		Total
			1st week	F	:	:		2	**	:	:	:		:	:	:			. 1			:	Tota
		2	(1st	2nd	3rd	4th	5th	0th	7th	Sth	9th	10th) 11th	12th	13th	14th	15th	16th	17th	18th	19th	20th	
-				All Cases.																			

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MEDICAL SUPPLEMENT, 1897.

1				
Mortality	per cent.	54895558859 4 9	00 00 00 00 00 10 10 10 10 10 10 10 10 1	4-1 6-2 6-2 6-2 6-2 6-2 6-2 6-2 6-2 6-2 6-2
tal.	Deaths.	8 9 4 0 9 H 91 80 0 91 H 8	000000000000000000000000000000000000000	001401001000141
Total.	Cases.	551 552 552 552 552 552 552 552 552 552	6 16 15 15 15 15 15 15 113 113	288 252 258 258 258 258 258 258 258 258
bern.	Deuths.	00-0000000 7	000000000000000000000000000000000000000	000000000000000000000000000000000000000
Northern.	Cases.	20 21 21 22 23 23 23 23 23 23 23 23 23 23 23 23	0001 H - O - H 0000 + O 000	23 116 116 116 116 116 116 116 116 116 11
Gore Farm.	Deaths.	•••••••••	* 000000000	0000000000 4
Gore	Cases.	4 6 7 11 15 10 20 20 20 9 9 111	20000000000000000000000000000000000000	4 6 7 7 113 21 21 21 22 22 22 22 22 21 21 21 21 21
ok.	Deaths.			
Brook.	Cases.	13 10 10 10 10 10 10 10 10 10 10 10 10 10	011000000011 13	56 56 56 56 56 56 56 56 56 56 56 56 56 5
South- Eastern.	Deaths.			H000H0H00H0 4
Sot	Cases.	010-1-034440-0101	00000100000	0,0
tain.	Deaths.			00000000HH 8
Fountain.	Cases.	6 5 5 4 4 6 6 11 10 11 10 11 10 11 10 11 10 10 10 10	00000000	6 8 11 12 14 14 14 14 14 14 14 14 14 14 14 14 14
South- Western.	Deaths.	000000000 0		00000000000
Wes	Cases.	10 00 0 F 0 F 0 F 01 10 01 F 11	011000010010 *	541-F0F05368F
tern.	Deaths.	000000000000000000000000000000000000000	000000000000000000000000000000000000000	000000000
Western.	Cases.	000:242240001	1010701051051	
North- Western.	Deaths.	H0H0000H0000 %		
Wes	Cases.	+001000000000	01111110100	0-0-+++++++++++++++++++++++++++++++++++
North- Eastern.	Deaths.	* 00000000	0000000000	0000000000
No East	Cases.	000111490100	000000000000	0001414400000
Eastern.	Deaths.	HH00000000 00	0000000000000	
East	Cases.	880000000000000000000000000000000000000	000-00000000000000000000000000000000000	v*
		January	January	
		Faucial and Yasal Cases.	Laryngeal Cases.	All Cases.

TABLE XIV.-Seasonal Incidence.

SUMMARY OF THE ANTITOXIN TREATMENT OF DIPHTHERIA DURING THE YEAR 1897.

After the elaborate reports on this subject presented to the Managers last year and the year before, it is felt to be unnecessary to occupy space with the details of the 1897 cases. But the following tables (compiled from figures supplied by the medical superintendents of the various hospitals) summarise the results. They refer to completed cases only.

Hospital.	Ca	ses treated Antitoxi		All Cases; both those treated with Antitoxin and those not.				
		Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	
Eastern		980	185	18.8	1,060	192	18.1	
North-Western		632	156	24.6	913	170	18.6	
Western		569	104	18.2	738	118	15.9	
South-Western		327	90	27.5	516	95	18.4	
Fountain		771	176	22.8	875	184	$21 \cdot 2$	
South-Eastern		591	105	17.7	711	111	15.6	
Brook		507	76	14.9	642	84	13.0	
Park		4	4	100.0	4	4	100.0	
Total		4,381	896	20.4	5,459	958	17.5	

TABLE I.-All forms of Diphtheria.

TABLE II .- All Laryngeal Cases.

Hospital.	Ca	ses treated Antitoxi		All Cases; both those treated with Antitoxin and those not.				
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.		
Eastern	 88	88	87.5	90	85	88.8		
North-Western	 44	16	36.3	47	17	36.1		
Western	 74	14	18.9	79	16	20.2		
South-Western	 57	26	45.6	58	27	46.5		
Fountain	 56	15	26.7	58	17	29.3		
South-Eastern	 87	24	27.5	92	- 26	28.2		
Brook	 65	12	18.4	65	12	18.4		
Park	 2	2	100.0	2	2	100.0		
Total	 478	142	30.0	491	152	30.9		

Hospital.		Ca	ses treated Antitoxi		All Cases; both those treated with Antitoxin and those not,				
		Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.		
Eastern		38	18	47.3	39	19	48.7		
North-Western		41	14	34.1	43	14	32.5		
Western		34	11	32.3	35	12	84.2		
South-Western		28	19	67.8	28	19	67.8		
Fountain		41	14	34.1	41	14	34.1		
South-Eastern		42	15	35.7	44	17	38.6		
Brook		32	10	31.2	82	10	31.2		
Park		2	2	100.0	2	2	100.0		
Total		258	103	39.9	264	107	40.5		

TABLE III. --- Tracheotomy Cases.

(Cases of diphtheria were admitted into the Park Hospital so late in the year that no patients had been discharged recovered before January 1st, 1898.

The results tabulated above correspond fairly closely with those of 1896. In that year the mortality of the antitoxin cases was 25.9 per cent., and of all the cases 20.8; so that the figures for 1897 show a slight improvement. A larger proportion of cases has been treated with serum, 80.2 per cent., as against 66.2 in 1896. The results in the laryngeal and tracheotomy cases were almost the same as in 1896, when the mortality of the laryngeal cases treated with antitoxin was 28.8per cent., and of all the laryngeal cases however treated 29.6; while of the tracheotomies treated with antitoxin the mortality was 40.6 per cent., and of all the tracheotomies 41. It will be remembered that in 1894, the year just before the general introduction of the antitoxin treatment into the Managers' hospitals, the mortalities of the different classes of case were as follows :—All cases, 29.6 per cent.; all laryngeal cases, 62; all tracheotomies, 70.4.

In 491 of the 5,459 cases, or 8.9 per cent., the larynx was involved; and in 264 of the laryngeal cases, or 53.7 per cent., tracheotomy was performed. In 1896 these figures were 12.6 and 41; while in 1894 they were 12 and 56. It will thus be seen that the percentage of laryngeal cases requiring tracheotomy (calculated on the total laryngeal cases) rose to nearly the same height as it was in 1894. But the experience at the Eastern Hospital of the writer of this note gives him ground for saying that the vast majority of the tracheotomy cases are in need of the operation when they are admitted to hospital, and that it is quite the exception for a patient who, on admission, has little or no laryngeal symptoms and who is treated with antitoxin to develop urgent laryngeal obstruction afterwards, though this was by no means an uncommon event in the days before the serum treatment was introduced.

Turning now to the post-scarlatinal diphtheria cases, the most striking fact is the exceedingly low mortality of the laryngeal cases, 8.4 per cent. All the

laryngeal cases but two (which both recovered) were treated with antitoxin. Of the 796 cases of all forms of diphtheria, in 630, or 79.1 per cent., was the serum treatment employed; 26 of these cases were fatal, so that the mortality of the antitoxin cases was 4.1 per cent. These good results are most probably due chiefly to the fact that the patients are brought under treatment at an early period of the disease.

E. W. G.

DIPHTHERIA AND THE HEART.

(By ARTHUR STANLEY, M.D., B.S. Lond.)

The following observations have been made on a series of 500 cases of diphtheria during two years' work in a diphtheria ward at the North-Western Hospital. All the cases were treated by antitoxin, and all doubtful cases were verified by bacteriological examination. The total number of deaths in the series numbered 80, a death rate of 16 per cent.

A patient examined soon after the onset of diphtheria has a full and rapid pulse of fair tension ; the heart's impulse is exaggerated, and the first sound good. Towards the end of the first week of the disease the toxæmic condition manifests itself. The temperature sinks and is frequently sub-normal, the rapid pulse gives place to one of moderate speed, the cardiac impulse becomes feeble and the first sound shorter; but the most noticeable feature of all is the reduced tension of the pulse. This condition of lessened heart-power continues far into convalescence, and if paralysis supervenes, may again become marked. But paralysis seldom follows when the heart has once become normal. Cases which develop paralysis almost invariably remain pale, with lowered arterial tension and altered heartrhythm, until the knee-jerks are found to be lost and the voice nasal. In the second week of the disease, what may be called the diphtheritic heart-condition is well The patient is pale and languid, the pulse is of remarkably low established. tension, the wave short and ill-sustained, of moderate speed, but more frequent than the temperature would indicate, and sometimes irregular both in rhythm and force. The heart is usually of normal size, the apex beat in its normal situation, and the impulse feeble. The veins are not distended, the first sound is short, the pulmonary second sound is relatively loud, and there is very frequently reduplication of the second sound, especially on listening over the third left costal interspace.

Systolic murmurs are frequent both at base and apex, and in the carotid arteries.

Changes in the length of the pauses of the cardiac cycle are frequent, and of great importance in prognosis. The most common change is a lengthening of the short pause, giving rise to spacing of the heart-sounds. The relative lengthening of the short pause may be of all degrees up to "tic-tac" rhythm where the short equals the long pause, so that the heart-sounds are equidistant. The change in the relative lengths of the two pauses is almost always accompanied by a change in the character of the sounds, namely, the first sound of the heart comes to resemble the second in quality—the first sound losing its so-called deep muscular sound, making more audible the valvular sound which resembles the ordinary valvular second sound. In this way the two sounds and the two intervals tend to equality. This "tic-tac" rhythm, caused by the lengthening of the first pause, indicates danger ahead—danger of heart-failure. But of worse prognosis is that condition in which, instead of the first pause being lengthened, it is shortened, so that the second sound follows very closely on the first. This condition is almost always a fatal sign, and occurs with or may be followed by sudden heart-failure.

A condition characterised by what may be termed *delayed beats* is the commonest form of irregularity of the heart's action met with in diphtheria. After a series of regular heart-beats a pause occurs, followed by a sudden scramble of two or more heart-beats, in order as it were to make up for lost time. This gives rise to an intermittent pulse, owing to the fact that during the scramble all the beats do not reach the wrist.

Heart-failure.—Sudden heart-failure is the most terrible complication of diphtheria, and one in which we are as a rule powerless in preventing death. Diphtheria is the disease *par excellence* in which sudden cardiac failure manifests itself. In comparing diphtheria with other diseases associated with peripheral neuritis, heart-failure is, with the notable exception of Beri-Beri, a rare cause of death. Heart-failure is usually made manifest by the following symptoms : pallor, vomiting, increasing weakness of the pulse, coldness of the extremities, and irregular respiration.

These symptoms occurring together almost invariably lead to a fatal termination. Heart-failure may take the form of a gradual syncope, which is nearly always fatal. The syncopal attack is marked rather by duration than by intensity; loss of consciousness is rare.

The date of onset of heart-failure is most commonly at the beginning of the second week of the disease, but it may occur during convalescence, while the subjects of diphtheritic paralysis are prone to it.

Heart-failure is always preceded or accompanied by change in the heart-rhythm. The first pause is usually shortened, so that there is a rapid sequence of the second sound after the first. This condition, as has been mentioned, is frequently preceded by spacing of the sounds. There may be "cantering" rhythm with or without heartdilatation. Reduplication of the second sound is common, and reduplication of the first is sometimes heard. Dilatation of the heart occurs in association with heart-failure, but is not common.

A Typical Case of Sudden Heart-failure occurring early in Diphtheria.-H. C., aged 6. Onset sudden, with headache, vomiting, and sore throat on November 20th, 1897.

On admission on November 24th, the fauces were completely covered with offensive-smelling membrane, spreading forwards on soft palate. Glands moderately enlarged on both sides. General condition fair. Temperature 100°. Eight thousand units of antitoxin given. The diphtheria bacillus was yielded by a culture on blood serum.

November 26th.—Membrane separating quickly. Pulse tension low. Cardiac impulse feeble, first sound short, pulmonary second accentuated. First pause rather longer than normal. Second sound reduplicated. Knee-jerks present.

November 27th .- Membrane almost all cleared away.

November 28th .- Trace of albuminuria, Pulse tension low; boy pale.
November 30th.—When seen at 11 a.m. was going on satisfactorily, but at 12 a.m. had a sudden syncopal attack, vomiting, lips of a lilac-tinted pallor, pulse not able to be felt at wrist. First cardiac sound short, and followed very quickly by second, at a rate of 150 a minute. Three minims of liq. strychninæ were injected, but death took place an hour and a half after the first symptoms of syncope.

Case of Cardiac Failure coming on during Diphtheritic Paralysis, six weeks after Admission to Hospital.—A. C., aged 2¹/₃. Onset October 8th, 1897, with vomiting.

On admission on October 10th, the fauces were much inflamed, with recent white membrane on tonsils. There was some stridor, considerable recession of lower thoracic wall, and slight cyanosis. Ten thousand units of antitoxin were injected. Diphtheria bacilli found.

October 11th.—Fauces heaped up with foetid membrane. Laryngeal symptoms abating. Sibili heard over both lungs. Knee-jerks present.

October 14th.—Throat clean. Trace of albuminuria. Pulse-tension low, heart-impulse feeble. First sound short, second sound reduplicated. Pulmonary second accentuated.

October 25th .- Voice becoming nasal. Knee-jerks present.

November 8th .- Voice nasal. No regurgitation. Knee-jerks lost.

November 12th.—Pulse irregular. Arterial tension diminished considerably. Short pause lengthened. Heart-sounds equally loud at apex, and of very similar character. Delayed beats occasionally; about every four beats the heart stops, and after a pause beats quickly twice in succession; at other times, after a first sound, there would be a longer pause than usual, then a second sound, followed immediately by a first sound.

November 23rd.—Occasional difficulty in swallowing solids; apt to go the wrong way. Nasal feeding adopted. Cardiac second sound accentuated and reduplicated.

November 24th.-Pulse smaller and tension lower. Heart more irregular. Getting paler.

November 25th.—Pulse scarcely felt. Heart-impulse very feeble and irregular. Second sound follows quickly on the first.

Respirations sighing and irregular. Death.

Analysis of 500 Cases of Diphtheria with regard to Fatal Heart-failure.

Total number of cases dying of heart-failure	30
Of these, vomiting was associated in	30 27
Well-marked dilatation of the heart in	3
Number of cases dying of heart-failure before the onset of paralysis Average day of the disease on which death took place in	22
these cases	9-8
Number of cases dying of heart-failure after the onset of paralysis Average day of the disease on which death took place in	8
Average day of the discuss on which may be in the	28
Average day of the disease on which paralysis was first detected	15.4

Dilatation of the Heart.—Well-marked signs of dilatation occurred in only 11 of the 500 cases of diphtheria. Three of these were fatal by heart-failure. The

comparative rarity of dilatation may be explained by the extremely low arterial pressure which obtains in diphtheria, for, although the heart-muscle is weak, yet even so the blood-pressure is not great enough to cause distension. The special effect of diphtheria on the heart is to produce a condition leading to defective arterial pressure, hence the low-tension pulse, and the frequency of syncopal attacks: while, when dilatation does occur, it never produces dropsy, for the same reason.

Changes in the Heart-rhythm .- These may be briefly stated as follows :-

- (1) Lengthening of the short pause, giving rise to spacing of the heartsounds and "tic-tac" rhythm.
- (2) Shortening of the short pause, the second sound following the first rapidly, a sign of grave import.
- (3) Lengthening of the long pause, causing infrequent heart-beat and slow pulse.
- (4) "Delayed" heart-beat, occurring at rhythmic intervals.
- (5) Irregularity in force and frequency apart from above.
- (6) Reduplication of heart-sounds, especially of the second sound.
- (7) Murmurs.

It is a significant fact that disturbance of the respiratory rhythm is a frequent accompaniment of change in the cardiac rhythm—such as sighing respiration, which is a bad prognostic; very slow respirations, with a normal pause between each; quick respirations, with a long pause between each, giving rise, in a child of five years of age, to a respiratory speed of six to the minute; conditions also with a quick inspiration followed by a slow expiration; and, again, typical Cheyne-Stokes breathing.

With regard to the frequency of the heart's action in diphtheria, the pulse-rate is, as a rule, greater than the temperature, which at the end of the first week of the disease is usually sub-normal, would indicate. In children a slow pulse is very rarely met with, but in adults it is more common; and when arterial tension also is low it indicates danger of heart-failure.

Reduplication of the second sound occurred in over 40 per cent. of the cases, and is best heard when the stethoscope is placed over the third left intercostal space, close to the edge of the sternum. Reduplication of the second sound, however, is frequently found at this situation in the normal condition in children. The first sound was reduplicated in 12 of the 500 cases. Cantering rhythm was present in a few cases, usually shortly before death, in those cases where there was also dilatation, though also in cases where there was no dilatation.

In order to understand the conclusions to be drawn from the length of the first pause of the cardiac cycle, which is so markedly altered in diphtheria, it may be instructive to consider its mechanism. In "tic-tac" rhythm, when the short pause is lengthened the ventricular systole is probably lengthened on account of the heartpower being out of proportion to the arterial resistance, but still able to cope with it; when, however, the short pause is shortened and the second sound approximates the first, it tends to show that the heart is in a still feebler condition, and is brought up short by the resistance in the arterial system. Systolic murmurs are frequent and are not due to endocarditis, but may occasionally be due to some yielding of the mitral curtains, yet most usually come under the category of so-called "hæmic" murmurs.

Pathological Conclusions drawn from the above Clinical Facts.--Sudden heartfailure may occur at any time in the course of diphtheria, and may or may not be accompanied by paralysis. Heart-failure occurring during the first week of the disease cannot with any degree of probability be put down to disturbed innervation, for nervous tissue is comparatively slow in being acted upon by the toxin of diphtheria. The heart, in contradistinction to the skeletal muscles, partakes of the nature of an automatic mechanism, though influenced through the vagus and sympathetic nerves. No extra-cardiac trophic nerve to the heart is as yet known. Moreover, there is no evidence after death of any lesion, macroscope or microscopic, of the immediate nerve-supply of the heart. To attribute heart-failure to a neuritis of the vagus is alike unnecessary, inadequate, and unproved.

To a certain extent heart-failure and changes in the cardiac rhythm occur in other diseases, e.g., typhoid fever, and in that disease a somewhat similar condition of the heart is found post mortem as in diphtheria, namely, one of parenchymatous degeneration of the heart-muscle. To explain the comparative frequency of cardiac failure in diphtheria it is only necessary therefore to establish that the parenchymatous degeneration of the heart-muscle, the result of diphtheria toxin, is more extensive and general than in other toxin diseases. This is borne out by the results of post-mortem observation. That the toxin of diphtheria has a special predilection for heart-muscle is also borne out by the experiments on animals. Muscle is much more quickly acted upon than nerve, and hence the heart-changes occur as a rule at a much earlier date than those found in the nerves. The results of muscle-degeneration through direct action of the toxin manifest themselves before those of nerve-degeneration. The suddenness of the heart-failure does not, however, indicate a sudden lesion. In a muscular organ like the heart it is "all or nothing"; either it acts with sufficient force to maintain the circulation, or it ceases altogether, and often suddenly. The stoppage of the heart, though sudden, may therefore be really due to a gradually accumulating weakness, and this is borne out by clinical experience. That the heart-failure is not due to a general loss of vitality, but rather to a specific effect on the heart itself, is made evident clinically by the power of voluntary movement, being in remarkable contrast to the weakness of the heart, and by the clearness of the intellect even a short time before death from heart-failure.

Although a slight throat affection may be followed by death from heart-failure, yet this is certainly the exception.

Besides the action of the toxin on the heart-muscle, other parenchyma besides nerve is specially liable to be affected, as, for instance, the epithelium of the kidney.

Albumin is found in the urine in all quantities in diphtheria by the end of the first week of the disease, *i.e.*, at about the same time that the cardiac condition also manifests itself. But the affection of the two again bears no direct relation the one to the other. Granular degeneration of the kidney epithelium is present in all cases dying with marked albuminuria, and leads frequently to total suppression of urine, in which latter cases nephritis is rarely found *post-mortem*.

The kidney condition of diphtheria never gives rise to increased arterial tension; the blood-tension was lowered in every one of the 500 cases.

In conclusion, the circulatory physical signs in diphtheria point to a weakness in circulatory power, due to a degeneration of the cardiac muscle.

Results of Post-mortem Examination of the Heart.—Cases dying of cardiac failure always show pathological changes in the heart. The heart to the naked eye is usually flabby, soft, pale, wanting in lustre, and in sections it often has a greyish colour. Punctiform hoemorrhages are common in the visceral layer of the pericardium and pleure. Adherent ante-mortem clot is often found, except in those severe toxemic cases, when the blood is of a dark chocolate colour and very fluid.

On teasing out the muscle under the miscroscope there may be seen small albuminous granules varying in size, which are insoluble in ether, but swell up, and become almost invisible on being treated with acetic acid, and which may be so abundant as to conceal the striation of the muscle.

The degeneration is usually general and uniformly distributed through the heart. This granular albuminous degeneration may be associated with the formation of fat-globules, which are soluble in ether and brought out by osmic acid solution ; sometimes fatty degeneration only is seen, and appears to be a later stage of the granular albuminous degeneration. Sometimes granular degeneration is seen which in certain parts has gone on to fatty change. While the granular degeneration is usually general, the fatty degeneration is more often patchy. Fragmentation of the contractile substance of the muscle is frequently seen. Nothing abnormal can be discovered in the immediate extra-cardiac nerves or the nerve-endings.

ON THE DATE OF ONSET OF THE VARIOUS FORMS OF DIPHTHERITIC PARALYSIS.

(BY A. MILLER, M.B., B.C. Camb.)

The annexed tables and chart have reference to cases of diphtheritic paralysis which occurred at the South-Eastern Hospital among cases completed during the years 1896 and 1897. Only those cases have been included in which the date of onset of paralysis was definitely stated.

Table I. shows the number of cases in which the onset was primarily (a) in the muscles of the palate, (b) in the oculo-motor muscles, and (c) in the muscles of other parts, respectively, arranged according to the day of disease on which the paralysis was first observed. Thus, out of 392 cases, 185 were primarily paralysis of the palate; 197, strabismus; and 10, paralysis of other muscles.

Table II. refers to cardiac paralysis; all cases of heart-failure which were apparently of paralytic origin are included. The fatal and non-fatal cases are shown separately, and are arranged according to the date of the earliest symptoms. Out of 102 cases, 91 died and 11 recovered.

The chart shows the same facts graphically. Measurements along the base line correspond to the number of days from the onset of the disease, while the ordinates denote the number of cases which occurred at the various stages. Cases of cardiac secondary to other paralyses appear in both tables.

$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Day of Disease,	Cases of Primary Paralysis of Palate.	Cases of Primary Occulo- motor Paralysis.	Cases of Primary Paralysis of other parts.	Total.	Day of Disease.	Cases of Primary Paralysis of Palate.	Cases of Primary Occulo- motor Paralysis.	Cases of Primary Paralysis of other parts.	Total
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						matel	105	107	10	392

TABLE I.—Cases of Diphtheritic Paralysis (with the exception of Cardiac Paralysis) Classified according to the Region first Affected.

TABLE II.—Cases of Cardiac Paralysis.

Day of Disease.	Fatal Cases.	Recoveries.	Total Cases,	Day of Disease.	Fatal Cases.	Recoveries.	Total Cases.
1				Bro. for.			
			3	31			
23				32	1		1
4	1	 	1	33			
5	4	1	5	34			
6	12	1	13	35			
6 7	11		11	36			
5	11		12	37	1		1
8	9		9	38			
9			2	39	4		4
10	2	***	Ä	40	1		1
11			3	41			
12	3	3	0	42		***	2
13	8	1	3	43	ĩ		ī
14	3	1	3	44			1.0
15	2		2		***	1	1
16	1		1	45	111		
17	1		1	46			1
18	1		1	47	***	1	
19		2	2	48		***	
20	2	1	8	49	1	***	1 1
21	1		1	50	1		1
22				51	***		
23				52			***
24	1	***	1	58	33.5		
25				54	2		2
26				55	***		
27		1	1	56			
28				57			
29	1		1	58			
30				59		1	1
Car. for.				Totals	91	11	102

186



All cases, exclusive of Cardiac Paralysis uncomplicated by other Paralysis, _____ Cases of Primary Paralysis of the Palate, _____ Cases of Cardiac Paralysis in which death occurred, , , ', , , , , recovery Cases of Primary Strabismus, _____



A CASE OF ENTERIC FEVER: PERFORATION OF INTESTINAL ULCER; LAPAROTOMY; SUTURE; DEATH.

(By J. S. RICHARDS, M.D. Lond., and E. W. GOODALL, M.D. Lond.)

Lillian B., a pale and neglected-looking girl, eight years of age, was admitted into the Eastern Hospital on February 19th, 1897. She was suffering from a rather sharp attack of enteric fever, having been ill some seven or eight days. There were a few rose-coloured spots on the abdomen and back; moderate abdominal distension; some bronchitis; pulse, 153; respiration, 56; temperature 103.4° Fah. The spleen could not be felt. During the next nine days there was nothing special about the case, except that the bronchitis persisted. The bowels were moved about once every twenty-four hours, the motions being light and loose. On March 1st there were no spots. During the next four days the temperature began to oscillate more than before, falling during the morning to below 100° Fah. The patient appeared better, and frequently asked for something to eat.

On March 6th two fresh spots were observed upon the abdomen, and the morning temperature was not below 100.8° Fah. The patient complained of pain in the abdomen, but it was not severe. By March 9th several more rose-spots had appeared, but the abdominal pain had gone. During these three days the temperature varied from 100° to 103° . There was no increase in the number of the motions.

On the evening of the 9th the temperature rose to 103.8°, and at 6 a.m. next morning (March 10th) to 104.4°. During the forenoon the girl complained of pain in the abdomen, which was tender but not distended. The respiration was chiefly thoracic ; there was no vomiting. At 10 a.m. the temperature was 102.8°; pulse, 128. She was ordered a mixture containing laudanum every four hours. The symptoms at this time did not point to perforation. At 2 p.m. the patient was worse. The temperature had fallen to 99.2°, but the pulse-rate had increased in frequency. The abdominal pain was more acute, and the abdomen was becoming distended. The patient was also retching occasionally. A perforation was now diagnosed. All nourishment by the mouth was stopped, except a little brandy and water with some laudanum. The patient's friends were communicated with, and their consent to any operative measures was obtained late in the afternoon. During the afternoon the patient vomited several times; at 6 p.m. she had a fifth of a grain of morphia injected subcutaneously. At 9 p.m. the abdomen had become more distended and rigid; pulse 160, but of fairly good volume. The temperature had risen to 101°. There was less abdominal pain.

At 11.30 p.m. the patient was put under chloroform, and a median incision about two and a half inches long was made into the peritoneal cavity, midway between the umbilicus and the pubes. On opening the cavity slightly turbid serum and flakes of lymph escaped. The surface of the intestines was much injected, and here and there patches of lymph adhered. The gut was moderately distended. It was only after a search of twenty minutes' duration that the perforation was discovered. It was round, and of about the diameter of a pea across. From it gas and intestinal contents escaped. There was distinct thickening of the intestinal wall around the perforation, and there was much lymph on the peritoneum. The coil of gut in which the perforation was situated appeared to be nearly empty. The perforation was inverted, and the peritoneal surfaces on each side of it thus brought together were held in position by a few irregular sutures. Then a continuous silk suture was introduced in the longitudinal line of the gut for about two inches, the site of the perforation being in the middle of this line. The peritoneum was very soft and readily tore through. The suturing reduced the calibre of the bowel by about a third. On account of the feebleness of the patient's pulse brandy was now injected subcutaneously. The abdominal cavity was washed out with warm water as thoroughly as her condition allowed, and, a drainage tube being introduced, the wound was stitched up. The operation lasted an hour. After being put back to bed the child soon rallied and began to talk, and to call for bread and butter and something to drink. She was allowed occasional sips of brandy and water, and the nutrient enemata were continued.

The patient lived for nearly four days, dying at 6.45 p.m. on March 14th. She became much more emaciated than before the operation. The pulse, varying in rate from 120 to 160, became more and more feeble. There was vomiting at intervals. Until the 13th she was free from pain, except on two occasions, when it was slight; but on the morning of that day she appeared to be in considerable pain. The abdomen became gradually more distended, but was never excessively so. At 10 a.m. on the 11th, the temperature was $100^{\circ}6^{\circ}$; afterwards it fell to subnormal, and so remained to the end. One of the stitches at the lower extremity of the abdominal wound gave way on the 14th. A little sero-purulent fluid was from time to time sucked up through the drainage tube, but it was never offensive. The nutrient enemata were retained up to the morning of the 13th.

A post-mortem examination was made at 3.30 p.m. on March 16th. There was great wasting. The abdomen was tumid, and discoloured from post-mortem changes. The abdominal wound was gaping at the site of the lower two stitches. There was a little fluid pus in Douglas's pouch, and thickish layers of purulent lymph on the right side of the pouch, extending to the right iliac fossa, and covering one or two coils of intestine. There was no fæcal material present in the peritoneal cavity, and no fetor. There was one marked adhesion of coil to coil, causing a rather sharp kink in the gut, but this was remote from the site of the perforation, which was lying just below and to the right of the umbilicus. On pulling the injured gut up a few soft adhesions gave way, and a few bubbles of gas and a bead of yellow fæcal material were seen to escape from a point to one side of the line of suture. This point was subsequently ascertained to be a second perforation occurring in a different ulcer from that in which the first perforation had taken place. The line of suture was about two inches long, running slightly obliquely in the axis of the gut. There was no escape of gas or faces from the original perforation at any point along the line of suture. A drop of pus welled up from a small hole in the peritoneum, nearly opposite the second perforation on the other side of the line of suture. Very few of the stitches appeared to have cut through the tissues. There was little or no lymph thrown out round the sutures. The gut was markedly constricted, but gas and fluid readily passed through the narrowed portion. On opening the gut there was seen a ridge two inches long, and projecting about a quarter of an inch into the interior of the bowel. It

corresponded to the line of suture, and was surmounted at its middle by an ulcer rather smaller across than a sixpenny piece. To one side of this was found a second and apparently recent ulcer, involving the mucous, submucous, and muscular coats, at the bottom of which was a funnel-like perforation along the line of one of the stitches, large enough to admit a knitting-needle. This was the second perforation described above. A second stitch lay exposed in the floor of this ulcer, and a third could be felt beneath the mucous membrane higher up. On the other side of the ridge a small collection of pus, the size of a small pea, was seen beneath the mucous membrane, which was intact. There would thus appear to have been around the stitches some formation of pus, which on one side had given rise to a perforation along the stitch in the floor of the second ulcer, but on the other side had not penetrated the mucous membrane. Not one of the stitches appeared to have originally wounded the mucous membrane, though, owing to the softened state of the peritoneum at the time of the operation, the needle had to be dipped somewhat deeply. The original perforation was situated in the ileum, thirty inches above the ileo-cæcal valve. There were numerous ulcers in the small intestine, the highest at a distance of fifty-six inches from the valve. They were mostly transverse in direction, presented clean bases, and in many of them the peritoneum was exposed. There were, however, three or four ulcers in which sloughs still remained, and which appeared of more recent date than the rest. There was a comparatively small area of ulceration about the valve and the few inches of the ileum just above it. There were numerous ulcers throughout the large intestine as far down as the sigmoid flexure. The mesenteric glands were enlarged. The peritonitis was more or less limited to the lower half of the abdomen, though there was lymph on the surface of the spleen. The transverse colon was distended, and the descending colon and sigmoid flexure full of rather J. S. R. firm faces. The rest of the organs were normal.

Remarks.—This operation, performed by Dr. Richards, was undertaken with the hope of saving a patient, the victim of a complication of enteric fever which, if left to itself, is practically always fatal. As the patient lived for nearly four days after the operation, her death was certainly not hastened thereby. According to Dr. Finney, in a paper read to the Johns Hopkins Medical Society last year (see abstract in *Lancet*, July 10th, 1897), laparotomy had up to that time been performed for a perforating enteric ulcer 47 times, with 13 recoveries. As far, however, as the United Kingdom is concerned, I am aware only of six published cases, exclusive of the case now reported; of these six, one recovered. In another published case laparotomy was performed for symptoms of a perforating ulcer, but nothing was found to account for the symptoms. This patient also recovered.

In the case now under consideration there are four points worthy of note. Firstly, though the perforation occurred nearly at the end of the fourth week of the disease, yet the patient was by no means convalescent. As a matter of fact, both the clinical and the *post-mortem* evidence went to show that a recrudescence of the disease had taken place or, as it were, a relapse overlapped the primary attack. This is by no means an uncommon occurrence in enteric fever, but it is one that unfortunately militates against the success of any operative measure. Secondly, it was only after a search of at least twenty minutes' duration that the perforation

was found; usually it is found more readily. I noted at the time of the operation that it was impossible to tell, either by the touch or the sight, the position of any ulcers with the exception of two, one of them being that in which the perforation had occurred. Yet at the autopsy many ulcers were found. Thirdly, at the autopsy there were no signs of repair. On the contrary, both in the gut and at the wound in the abdominal wall there was evidence of loss of vitality in the tissues. In this respect the case differs from those collected by Dr. Finney, for he states that in all of them healing was taking place. Doubtless the condition of recrudescence mentioned above was the cause of this loss of vitality. Fourthly, one of the stitches had involved another ulcer which lay close to the one that had perforated, and in this second ulcer perforation had taken place. The result was not affected by this occurrence, which, however, must always be borne in mind as being likely to lead to a failure of the operation. On these two latter accounts (want of immediate attempts at repair and presence of neighbouring ulcers), I think it would be better in a similar case to bring the perforated bowel out through the abdominal wound and there to leave it for the chance of future treatment, rather than at the time to attempt any resection or suturing.

The following are the names of the operators in the published cases to which I alluded above:—Bland Sutton (Clin Soc. Trans., vol. xxvii.); Allingham (quoted by Bowlby); Parkin (of Hull, *British Medical Journal*, January 26th, 1895); Bowlby (Med. Chir. Trans., vol. lxxx.); Dalziel (of Glasgow, Report of City of Glasgow Fever Hospital, 1897), two cases. Bowlby's case recovered. He also operated in the case in which nothing was found to account for the symptoms that led to the diagnosis of perforation.

E. W. G.

A NOTE ON THE ÆTIOLOGY OF NECROSIS OF THE JAW IN SCARLATINA.

(By H. F. MANTELL, M.B. Lond.)

In a series of 12,230 consecutive cases of scarlatina treated at the Western Hospital, there were 19 in which the bone in the upper or lower jaw became necrosed. These cases here collected and epitomised show the type of the disease which predisposes to this necrosis, and the factor which actually determines it. It is to be noted that between 70 and 80 per cent. of the cases of scarlet fever were transferred to the convalescent hospitals at about the 25th day of disease; the series is therefore of little value in showing how the condition may occur in the later stages. The first 16 cases being closely allied, are grouped together; the 17th occurred in a different type of case and in a later stage of the disease; whilst the 18th and 19th are added for the sake of completeness, and are merely coincidences of two distinct pathological conditions, *i.e.*, scarlet fever and alveolar abscess.

Cases 1 to 16.—These cases were all under seven years of age, were of the septic type, and had a common factor determining the jaw necrosis, viz., mechanical injury. In all the faucial inflammation was severe, and the stomatitis general, going on to ulceratior, sometimes in one place, sometimes in another. In all there

was considerable glandular enlargement, and profuse, and long-continued, nasal discharge. In 11, inflammation had spread to both middle ears before death. In nine, there was a septic rash observed in the second or third week. In six, there was septic broncho-pneumonia, and in two, pyæmic arthritis. The necrosis began in the height of the acute stage close to the symphysis of the lower jaw, rarely also in the corresponding portion of the upper jaw. It thus started in that region most liable to injury on forcibly opening the mouth, and the sequence of events which led to it was as follows. The throat and mouth were, of necessity, frequently cleansed and food given at frequent intervals. The patient actively resisted this treatment. The fangs of the milk teeth being slender, and the gums swollen, the spatula, the nozzle of the syringe, the mouthpiece of the feeder, and the finger introduced to swab the mouth, loosened the teeth and detached the gums. Streptococcal infection from the inflamed mucous membrane now spread between gum and tooth to the alveolar periosteum, and in no case did the bone become exposed by ulceration through the gum. In those cases which survived, the sequestrum came away some time between the eighth and eleventh week of the disease, the body of the jaw was not involved, and the effect on the permanent dentition is unknown.

Case 1.—C. R., aged 3. Severe faucial ulceration—ulceration of lips and of gums posteriorly. Rhinitis. Double suppurative otitis. Broncho-pneumonia. Septic rash 18th day. Central incisors of lower jaw loose about 14th day. Four lower incisors dropped out on 19th day, and alveolar process became bare. Death on 25th day. There was probably pus in both ankle-joints at time of death.

Case 2.—G. W., aged 3. Severe faucial ulceration—ulcers on soft and hard palate and on tongue. Rhinitis. Broncho-pneumonia. Lower incisors dropped out on fifth day. Septic rash 14th day. Alveolar process exposed 14th day. Death on 18th day.

Case 3.—A. K., aged 3. Severe faucial ulceration—ulcer on gum near the symphysis. Rhinitis. Double suppurative otitis. Bronchitis. Arthritis. Two left lower incisors dropped out on tenth day. Septic rash 14th day. Sequestrum involving alveolar process of four lower incisors removed in 11th week. Recovery.

Case 4.—A. S., aged 5. Severe faucitis. General stomatitis. Rhinitis. Double suppurative otitis. Septic rash in second week. Lower incisors loose in second week and alveolar process bare. Rigors. Death on 18th day. Smith's gag was used early when the throat was cleansed.

Case 5.—E. C., aged 3. Severe faucial ulceration—ulcers on lips and gums. Rhinitis. Double suppurative otitis. Broncho-pneumonia. Septic rash in second week. Lower incisors on left side loose in second week. Sequestrum involving alveolar process of all the lower incisors removed in the ninth week. Recovery.

Case 6.—R. H., aged 3. Severe faucial inflammation. Rhinitis. Double suppurative otitis. Lower incisors loose in second week. Alveolar process in front of lower jaw exposed in fourth week. Death in fourth week.

Case 7.—A. Z., aged 3. Severe faucitis. Nasal regurgitation. Ulceration of lips and gums. Rhinitis. Double otitis. Septic rash 17th day. Alveolar process bare around symphysis in fourth week. Death in 11th week. No sequestrum.

Case 8.-C. McK., aged 4. Severe faucitis-ulceration of lips and gums. Rhinitis. Double suppurative otitis. Broncho-pneumonia. Septic rash in second week. Sequestrum involving alveolar process of left lower incisors removed in 11th week. Recovery.

Case 9.—A. H., aged 3. Severe faucitis soft and hard palate ulcerated. Rhinitis. Double suppurative otitis. Two left lower incisors dropped out in second week, and their alveolar process bared. Date of removal of sequestrum not noted. Recovery.

Case 10.—P. J., aged 4. Severe faucitis—ulceration on palate. Rhinitis. All lower incisors dropped out and alveolar process exposed on 14th day. Pyæmic arthritis. Death in third week.

Case 11.—E. H., aged 3. Severe faucitis. Rhinitis. Double suppurative otitis. Arthritis. In the fifth week the alveolar process corresponding to the lower incisors was bare. Date of removal of sequestrum not noted. Recovery.

Case 12.—H. F., aged 2. Severe faucial ulceration. Nasal regurgitation. Rhinitis. Double otitis. Septic rash in third week. Sequestrum involving alveolar process of lower jaw removed in eighth week. Recovery.

Case 13.—M. H., aged 3. Severe faucitis. Rhinitis. Broncho-pneumonia. Ulcerative stomatitis of lips and gums. Septic rash in second week. Alveolar process of both upper and lower jaw corresponding to incisor teeth bare in second week. Death in second week.

Case 14.-G. J., aged 4. Severe faucitis. Rhinitis. Alveolar process corresponding to all the incisors in the lower jaw and the two central incisors in the upper jaw laid bare in second week. Pyæmic arthritis. Date of removal of sequestra not noted. Recovery.

Case 15.—J. R., aged 3. Severe faucitis. Ulceration of soft palate, lips, and gums. Rhinitis. In second week a piece of bare bone on palatine process of superior maxilla. Removal of sequestrum not noted. Recovery. This was probably caused by the point of nozzle of a syringe or by a spatula.

Case 16.-W. P., aged 5. Severe faucitis. Nasal regurgitation. Ulceration of lips and gums. Rhinitis. Double suppurative otitis. Broncho-pneumonia. Lower incisors loose in the second week. Sequestrum involving alveolar process of lower incisors removed during the third month. Recovery.

In Case 17, the onset was mild. The fauces soon became healthy. General ulcerative stomatitis began in the fourth week. An ulcer below the lower central incisors exposed bone in the sixth week, and death occurred in the tenth week.

In Case 18 there was suppuration around a carious molar, the alveolar process was bared, and there was pus in the antrum of Highmore.

In Case 19 there was at the onset an alveolar abscess around a carious tooth, and the jaw eventually became bared.

ACUTE SUPPURATIVE PERITONITIS ASSOCIATED WITH SCARLATINAL NEPHRITIS.

(By G. THORNTON, M.D. Edin.)

The two cases recorded below illustrate a fatal termination which is very unusual in scarlet fever. For on looking over the records of some 7,000 cases of the disease treated in the Fountain Hospital during the past four years, amongst whom nearly 300 cases of nephritis occurred, these two cases only of associated peritonitis were noted. I have been unable to find any record of a similar case elsewhere. Dr. Allchin, in vol. iii. of Allbut's "System of Medicine," states that peritonitis may occur in association with nephritis, or independent of it, in scarlet fever. Most of those who have had much experience in fever hospitals have seen cases of peritonitis in scarlet fever, but there is no reference to the association of peritonitis with nephritis. Hence I have thought it might be of interest to record these cases.

William B., aged 4 years; admitted with scarlet fever on November 25th, 1895, which was, according to the history, the fourth day of the disease. The attack was one of considerable severity, and, owing to ulceration of the fauces, followed by acute suppurative otitis. The temperature remained up until the 19th day. Two days later, December 6th, the patient had a slight rigor, and the temperature rose again to 102° Fah.; next morning both blood and albumen were present in the urine in considerable quantity. For the next two days the temperature ranged from 102° to 103° Fah., but on the five succeeding days the characteristic "spiking" of the chart, seen in so many cases of nephritis, was well marked, the daily range being from 103° or 104° to 98°. The amount of urine passed during that period was from 14 to 16 ozs. daily; there was always much albumen, but a varying quantity of blood. On December 14th the notes state : "the patient has evidently a good deal of pain in the abdomen, which is very distended and tympanitic; urine a dark porter colour, 10 ozs.; pulse quick, but of good tension; first cardiac sound thumping." On December 15th: "pain in abdomen continues, much tympanites and some tenesmus ; much diarrhœa, no blood in motions and none in urine to-day; pulse very quick and fluttering; apex of heart displaced outwards; patient very prostrate; temperature 101° to 102°." On December 16th: "very restless night; much diarrhea, stools vellow and fluid; pulse 180 and very feeble; pain in abdomen, which is very distended and tympanitic; temperature 99°; death at 5 p.m.; temperature at 4 p.m., 106.4°."

On *post-mortem* examination on the following day, both kidneys found to be engorged with blood and swollen. The abdominal cavity contained 12 ozs. of purulent fluid. There was much lymph on the surface of the liver and spleen, with some matting of the intestines. Many small hæmorrhages and patches of congestion found in the mucous membrane of both the large and small intestine. There was neither perforation of the gut, nor apparent affection of the appendix. The lungs were hyperæmic ; there was no excess of fluid in the pericardial or pleural sacs.

Richard B., aged 6 years; admitted with scarlet fever on December 12th, 1895, this being the fourth day of the disease. The attack was but a mild one; by the 19th day the patient was on ordinary diet, and apparently convalescent. On the 24th the child looked ill, was pallid and puffy about the eyes, and on examination of the urine much albumen but no blood was found; there was no rise of temperature. Next day the child was very sick; passed but little urine, loaded with albumen, but no blood; temperature still normal. On December 27th it was noted that there was but little sign of improvement; sickness still troublesome; very little urine being passed, and no specimen obtained. December 28th.—Extremities cold; pulse very feeble. December 29th.—Still very bad; little, if any, urine being passed; temperature 101° to 102°. December 30th.—Temperature still up; seems to have pain in abdomen, which is distended and tympanitic; no urine passed during the last 24 hours; severe diarrhœa, with some blood in motions; slight hæmatemesis also; death at 3 p.m.; temperature 104.4° .

On *post-mortem* examination: kidneys swollen and somewhat congested; purulent fluid and flakes of lymph in abdominal cavity; patches of congestion and a few hæmorrhages in small intestine; no perforation of gut or apparent affection of appendix; no fluid in pleural cavities; lungs engorged; slight excess of fluid in pericardium.

It is curious that both these cases should have occurred in the same month, within a few days of each other. The peritonitis in both cases was associated with, and followed, acute nephritis, than which no other cause could be made out. Its occurrence seems to point strongly to the probability of the nephritis having been a "septic" nephritis, as distinct from the ordinary glomerular nephritis of scarlet fever; and both having been the result of secondary infection with pyogenic organisms, rather than to the effect of the true scarlatinal virus. I regret that neither a bacteriological nor histological examination of the organs was made, but at that time the hospital was not equipped with the apparatus necessary for such work.

SEPTIC OSTEITIS OF LEFT HUMERUS, COMPLICATING SCARLET FEVER.

(By MARY F. SINCLAIR, L.R.C.P., L.R.C.S. Edin., L.F.P.S. Glas.)

The following case, which was under my care last year at the North-Eastern Hospital, is, I think, worth recording as a rare and serious complication of scarlet fever.

F. M., aged 6 years, was admitted to the North-Eastern Hospital on May 21st, 1897, suffering from a well-marked attack of scarlet fever, which had commenced suddenly five days previously. The fauces were swollen and ulcerated, there was considerable enlargement of the glands on both sides of the neck, and profuse watery rhinorrhea.

During the next few days her symptoms, if anything, increased in severity. The fauces continued very dirty and foul-smelling; double conjunctivitis developed, and the right ear, which commenced to ache on the 24th, began to discharge on the 27th.

May 28th.—Albumen appeared in the urine, nourishment was administered with difficulty, and the patient seemed very weak.

June 1st.—About an ounce and a half of foul-smelling pus was let out from an abscess in the left side of the neck. Fauces looking cleaner.

June 9th.—Child more fretful. Some fulness and tenderness about the left shoulder. During the last six days the temperature has risen to about 102° each evening, falling to 99° in the morning.

June 11th.—It being impossible to satisfactorily examine the left shoulder, owing to the great tenderness of the part and consequent restlessness of the child, she was put under chloroform for the purpose of exploring the joint, a diagnosis of septic arthritis being made.

When, however, the patient had been anæsthetised, and one was able properly to examine the part, there was found to be distinct thickening of the surgical neck of the left humerus as compared with that of the other side, while there was no obvious excess of fluid in the shoulder-joint. The diagnosis was consequently altered to one of acute para-epiphysitis, for the relief of which, with Dr. Cuff's assistance, I did the following operation.

An incision one and a half inches in length was made on the outer aspect of the arm, commencing just below the acromion process. This exposed the great tuberosity of the humerus, the periosteum covering which was inflamed and readily detached. The underlying bone was discoloured and easily penetrated with a large gouge. At a depth of half an inch pus appeared in the cancellous tissue, which was freely removed until the walls of the bony cavity were quite clean and free from any sign of suppuration. The medullary canal was not opened during the operation.

The wound was dusted with iodoform and packed with strips of sterilised gauze, the forearm being placed across the front of the chest and retained in that position with a bandage.

On dressing the arm next day I found a hard swelling, about the size of a walnut, on the posterior aspect of the humerus, just below the level of the operation wound. This, which was a sub-periosteal collection of pus, I opened under chloroform on the following morning, a probe passing into it from the upper wound between the periosteum and the bone. A counter-opening was made for drainage, and at the same time the hole in the great tuberosity was deepened with a gouge, there being signs of suppuration about its floor.

After this second operation the patient's general condition began to improve, and two days later her temperature ceased to rise above normal. The subsequent history is one of uninterrupted progress towards recovery. She left the hospital on August 5th with the wound in the arm quite healed, and no impairment in the movements of the limb.

A CASE OF GLANDERS.

(By A. D. P. HODGES, M.D. Lond.)

Benjamin D., aged 50, carman, admitted to the South-Eastern Hospital on 23rd October, 1897, certified suffering from enteric fever. The history brought with the patient was as follows :---

October 15th.—Had influenza, with headache, diarrhœa, lasting a week; delirium, five days. Left ankle swollen and painful.

October 22nd.—Incision into ankle. History obtained later from his friends:— Illness began suddenly on October 4th with pain in left ankle. He has been ill ever since, but getting worse for about a week. No history of injury (horse-bite, scratch, &c.). He has had partial care of his horses.

Condition on Admission.—No rash or abdominal distension. Tongue dry, brown, and fissured. Delirious. Third finger of R. hand swollen and inflamed. Dirty, dark, bloody discharge from incision over L. ankle; joint disorganised. Temperature 104°. October 24th.—Free oozing of sanious discharge from L. ankle; R. third finger much swollen, with blebs, and rapidly becoming gangrenous. Other smaller centres are—a bleb on dorsum of R. foot; small fluctuating swelling over R. tibia; nodule on R. thigh, another on L. arm, about the size of a pea. A cultivation and smear specimen taken from the bleb on the R. foot showed numerous slender bacilli. Patient in typhoid condition. Diarrhœa. Heart-sounds faint, no brüit. Bronchitis, bronchial breathing at R. apex. Great tremor. Gums spongy, sordes, no nasal discharge.

October 25th.—Inflammatory swelling on R. elbow, near olecranon. Gangrene of finger well marked. Several more blebs and nodules, from which were obtained bacilli similar to those previously seen. High fever. Rapid breathing.

October 26th.—Fresh blebs on L. elbow, R. ankle, and right side of face; fresh nodules on R. leg and L. hand. Comatose. Bloody discharge from R. eye. No nodule distinguished on conjunctiva.

October 27th.—Face much swollen, eyes closed, blebs suppurating, some having hæmorrhage into them; all have some surrounding angry-looking infiltration. Bloody nasal discharge, chiefly from R. nostril. Numerous papules and subcutaneous nodules, the older ones fluctuating and containing pus, some sanious. The same bacilli found. Nodules vary in size from a pea to a pigeon's egg. Many more small flat blebs. General condition much worse. Died at 7.40 p.m., remaining comatose till the end.

In cultivation on blood serum, the colonies were watery in 24 hours, and afterwards turned yellowish in colour. Most of them were nearly pure, and contained the same bacillus. Nearly pure cultures were obtained on potato, and resembled the characteristic glanders growth, being first yellowish and honey-like; afterwards of a deep brown colour, darker in the centre.

The bacilli in fresh specimens were fairly numerous, but lay singly or in pairs, and stained readily with watery fuchsine. A specimen of pus was sent to Dr. Washbourn, who confirmed the diagnosis of "glanders."

On *post-mortem* examination, the L. ankle-joint and distal joints of R. third finger disorganised; the cartilages and synovial membrane mostly destroyed. Contents dark and liquid, consisting of pus and altered blood. Nodular deposits in the lungs, varying in size from a pea to a millet seed, most numerous near R. apex, but scattered sparsely everywhere. Some were breaking down, others greyish and hard, others dark red. They were easily felt, but were not visible from the external surface. A little pneumonia at R. apex. Much ædema of both lungs. Old adhesions of pleuræ and pericardium.

Throat, &c.-Small nodules on epiglottis, pharynx, larynx, trachea, and bronchi, in and under mucous membrane, scattered sparsely. One larger one in the uvula, breaking down. No deposit could be seen on nasal mucous membrane.

One white miliary nodule on lower palpebral surface of R. conjunctiva.

A few minute white nodules scattered over mucous membrane of large intestine, chiefly in its lower part. Patches of submucous hæmorrhage.

Skin.—Numerous small abscesses, the four largest the size of a pigeon's egg down to that of a large pea. Many that appeared to be in the cellular tissue proved on dissection to be in the superficial layer of the muscles. Also many nodules still hard, and greyish white on section. A fair number of blebs; the larger ones

very irregular in shape, flat-topped, with surrounding infiltration; the smaller ones more numerous, irregularly rounded, flat; no central depression. Contents serous, sanious or purulent. The abscesses contained sometimes thick yellow pus, sometimes sanious pus or grumous fluid.

Cultivations from the lung showed the presence of the glanders bacillus.

SERUM DIAGNOSIS OF ENTERIC FEVER.

(By R. G. KIRTON, M.B. Lond.)

For some time past the test commonly known as "Widal's reaction" has been made use of in the diagnosis of enteric fever.

Since November, 1896, I have, as far as possible, tried this reaction in all cases certified enteric fever. I have also used it as a help in the diagnosis of doubtful cases.

The blood is obtained from the lobule of the ear usually in capillary tubes. These are sealed up, and so may be tested at a convenient time. Sometimes discharged patients have sent their blood on blotting paper. The blood when tested is then extracted from the blotting paper by means of normal saline solution.

A culture of typhoid bacilli on agar or gelatine of some weeks' age is kept, and from this peptone beef tubes are inoculated. These peptone beef tubes are incubated for about 18 hours at 37° C. A drop of the young culture of typhoid bacilli so obtained is examined under the microscope to see that they are motile, and that there is no clumping. If this be so, the specimens of blood are then tested with it.

The method I have most commonly used is to take a drop of the blood serum to be tested, and dilute it by means of a platinum loop with normal saline solution to a strength of one in ten. A drop of this diluted blood serum is then placed on a clean coverslip, and a drop of the same size of the culture is added. The two drops are thoroughly mixed together, the coverslip is inverted over a hollow glass slide, and then examined under the microscope. Should there be no sign of reaction within half to three-quarters of an hour, I have considered the test as giving a negative result.

If the motility of the bacilli be lost almost at once, and at the same time good clumping take place, I have considered the reaction as strong. If the reaction take some time and the clumps be poor, but quite definite, I have considered the reaction as weak. The difference between the two reactions, strong and weak, is best observed when testing several specimens of blood. If the blood serum of healthy individuals or patients not suffering from enteric fever be added undiluted to the culture of typhoid bacilli, in some cases the motility of the bacilli is lost, and a species of clumping takes place; but, as far as my experience goes, this reaction should not be mistaken for a positive one.

I append tables of-

(i.) Enteric fever cases proving to be so post mortem, or of which the clinical symptoms pointed to a diagnosis of enteric fever. Where a post-mortem examination was made, "P.M." has been noted against the case.

To this table I have added a few cases which were stated to have had enteric fever at some varying period previously.

- (ii.) Cases sent in as enteric fever which proved not to be so post mortem or of which the symptoms, &c., did not warrant a diagnosis of enteric fever.
- (iii.) A number of cases of other diseases, together with a certain number of cases apparently healthy.

Here I may mention that I had the opportunity of testing the blood from-

- (1) A feetus of six months.
- (2) Two full-term infants (one stillborn).

Of these three, the blood from the stillborn infant gave the reaction; the blood of the foctus and that of the other full-term infant gave a negative reaction.

The blood of the three mothers in each instance gave a positive reaction.

					sus	bool		St	åge i	n Disease	в.	tion.	
Date of Admission.	Initials.	Age.	Sex.	Severity of Case	Date when blood was taken.	Day of Disease when blood was taken.	Pyrexia.	Relapse.	Convalescence.	No. of Days, if any, Temperature normal since acute stage or last Relapse.	No. of Days, if any, before Temperature became normal.	+ = Positive. - = Negative. Reaction.	Remarks.
Sept. 3/96	Е. М.	5	М	s	Nov. 24/96 Dec. 13 ., ,, 29 .,	87 106	No ,,		Yes	41 60		++++	Conservation
" ⁵ "	S. M. F. S.	8 29	F M	M M	Nov. 24 ., ., 24 .,	122 83 94 105	**	 I. I.	··· ···	76 36 28	***	+++++	An office and the second
$\begin{array}{ccc} & & 6 & \mu \\ & & 6 & \mu \\ & & 6 & \mu \end{array}$	J. S. A. A. S.	12 5	F F	M S	Nov. 21 ,, Dec. 1 ,, ,, 13 ,,	78 91 - 103	11 11 11 11	····	22 23 23	39 37 31 43	***	+-++	
,, 8,,	C. I.	26	F	vs	Jan. 13/97 Nov. 18/96 Jan. 22/97	134 82 147	17 17	I. I.	··· ···	74 12 77		+++++	Blood now tested about every three
Nov. 14 "	C. D.	15	м	М	Nov. 24 ,, ,, 24/96 , ,, 27 ,,	81 84	22 11 22		Yes	28 31		++++	months, April /98.
Oct. 6 ,	J. S. G. R.	21 14	M	M	, 24 ,, , 24 ,, Dec. 5 ,,	81 65 76	97 17	•••	** **	28 33 44		+++++++++++++++++++++++++++++++++++++++	
Nov. 6 ,,	B. R.	15	F	м	Nov. 24 ., Dec. 29 ,, Jan. 14/97 ., 1/98	41 76 92	Yes No ''	L L "	No Yes "	27 43	8 	++++	Developed scarlet fever Dec. 31/96. Blood sent on blot- ting paper every
,, 7 ,,	Н. С.	18	F	М	Nov. 18/96	24 30	Yes		No	***	6	++++	few months.
					,, 27 ,, Dec. 13 ,, Jan. 7/97	33 49 74	No "		Yes	8 19 44		+++	
, 14 , Blood taken	E. H.	4 afte	M r de	M ath.	Nov. 25/96 Jan. 2/97	25	y'es		No 			+++	Developed diphtheria. Died Jan. 2/97. P.M.
"	4 hours	"	"	"	·· 2 ,,	***						+	Recent healed Ty- phoid ulcers.
Nov. 17/96	F. C.	12	М	М	Nov. 24/96 Jan. 6/97	24 67	Yes No		No Yes	35	8	++++	priori dicers.
,, 17 ,,	M. S.	21	F	s	Nov. 20/96 ,, 21 ,,	11 12	Yes		No		11 10		
					Jan. 19/97	15. 71	No	ï	Y'es	33	7	++++	
	ra nela			2	Feb. 2 ,, Mar. 15 ,, Apr. 23 ,,	85 126	"	"	"			+	Weak reaction. Sent as stain on

TABLE I. - Enteric Fever.

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TABLE I.-Enteric Fever (continued).

					as	hood		Sta	ge i	n Disease		tion.	
Date of Admission,	Initials.	Age.	Sex.	Severity of Case.	Date when blood was taken,	Day of Disease when blood was taken.	Pyrexia.	Relapse.	Convalescence.	No. of Days, if any, Temperature normal since acute stage or last Relapse.	No. of days, if any, before Temperature became normal.	$\begin{array}{l} + = \mbox{Positive.} \\ - = \mbox{Negative.} \end{array} \} \mbox{Reaction.}$	Remarks.
Nov. 25/96	P. 8.	15	М	М	Nov. 25/96 Dec. 1 ,, Jan. 13/97 ,, 26 ,, Feb. 2 ,,	$ \begin{array}{c} 12 \\ 18 \\ 61 \\ 74 \\ 81 \\ 11 \end{array} $	Yes No	 I. I. I.	No Yes	 18 31 38	13 7 	+++++	
., 25 .,	A. D.	23	F	?	Mar. 4 ,, Nov. 26/96	111 5 wk.	" Yes	I. ?	" No	68	20	+	Stain on blotting paper.
,, 26 ,,	S. S.	29	м	м	Jan. 13/97 Nov. 27/96	12 wk. 18	Yes		Yes No	28	7	+++	
0.0	B. A.	10	F	s	Jan. 6/97 Nov. 26/96	58 9	No Yes		Yes No	33		++++	Developed scarlet
,, 20 ,,					Jan. 14/97	58	No		Yes			+	fever and diph- theria, Dec. 12/96. Pyrexia still present.
					Feb. 27 ,, Mar. 21 ,,		**		**			÷}	Reaction weaker.
Dec. 4 .,	G. S.	26	м	s	Apr. 5 ,, Dec. 5/96	ii	Y'es		No		34	+ + +	Pure culture of
					Jan. 19/97 Feb. 24 ,,	56 92	No "	? I. I.	Yes	11 47		+	typhoid bacilli ob- tained from pus, taken from perios- teal abscess.
,, 14 ,,	W. W.	33	М	М	Dec. 14/96 Jan. 26/97	17 60	Yes No		No Yes	31	12	+++++	toni nooccosi
,, 18 ,,	R. S.	34	м	м	Feb. 2 ., Dec. 18/96	67 13	Y'es		No	88	17	+++	
,, 15 ,,	I. 0.				, 22 , Feb. 2/97	17 59	No		Y's	29	13	+++++	
,, 22 ,,	A. G.	13	F	М	Dec. 22/96	17	Yes	?L ?L ?L	No Yes	36	10	+	
				~	Feb. 6/97	63 70		? I.	No	43		+++++	
,, 24 ,,	G.H.G.	14	М	s	Dec. 24/96 Feb. 6/97	11 55	Yes No	ï.	Yes	12	14	+++	
,, 26 ,,	M.E.G.	7	F	М	Mar. 12 ,, Dec. 26/96	89 8	Yes	I.	No	46	8	+++++	
Sept. 24 ,,	NurseG.		F	М	Feb. 13/97 Nov. 24/96	57 69	No 		Yes	41 1 month		+++	
					Jan. 25/98		,,		"			+	Still present, but very weak.
Jan. 2/97	F. D.	21	F	VS	,, 2/97 Feb. 6 ,,	15 50	Yes	ï.	No		14 3	+++++	
					,, 23 ,, Mar. 1 ,,	67 73		II. II.	**		6	+++	
					,, 11 ,,	83 105	No	II. II.	Yes	10 32		+++	
-	TH	90	F	м	May 29 .,	162 13	" Yes	II.	No	89	 11	+++	
	J. H.	20	F	m	Feb. 6 ,,	43	No		Yes	19 97		+	
,, 13 ,,	W. M.	30	М	М	,, 24 ,, Jan. 13 ,,	61 9	Yes		No	37	6	++++	
,, 20 ,,	А. Н.	6	F	М	Feb. 6 ,, Jan. 21 ,,	33 15	No Yes		Yes No	18	15	+++	
	20.000				Feb. 7 ,, Mar. 10 ,,	32 63	No Yes		Yes	2 33		*+	* Retested Jan. 30/98.
,, 21 ,,	R. V.	8	F	М	Jan. 21 ,, Feb. 7 ,,	6 23	No	•••	No Yes	9	8	+++	
,, 28 ,,	C. W.	32	М	М	Mar. 11 ,, Jan. 29 ,, Feb. 6 ,.	55 10 18	Yes No		No Yes	41 4	 4 	++++	
Feb. 12 ,,	L. W.	29	F	м	Mar. 10 ,, Feb. 12 ,,	50 8	y"es		No	36	12	+	
					,, 13 ,, ,, 17 ,,	9 13	** **		" "		11 7	+++	
					,, 20 ,, Mar. 1 ,,	16 25	No		Yes		4	+	
					,, 10 ,, Apr. 1 ,,	34 56	33		,,	14 36		?++++	
	Nile of						"		"				
				N	-Mild. S	-Seve			ve	Verv Sev			

M-Mild, S-Severe, VS-Very Severe,

blood Reaction. Stage in Disease. Date when blood was taken. Severity of Case. Day of Disease when was taken. No. of days, if any, before Temperature ò No. of days, if any, Temperature normal since acute stage last Relapse. became normal. Date of Age. Positive. Negative. Sex. Initials. Convalescence. Remarks. Admission. of days, Relapse. Pyrexia. 11 11 No. +1 Feb. 8/97 N. B. 8 F 8 Feb. 10/979 Yes No 14 + 22 37 92 ÷ 1 2.2 22 Mar. 10 ,, Pyrexia probably due to car disease. + Apr. 2 60 No Yes .. 15 73 15 2.5 29 87 .. F Feb. Yes No 13 S 10 8 . A. E. 14 ., ** 4 ÷ 28 ,, 17 1 32 No Mar. Yes 10 14 ... Apr. Feb. 2 15 37 4 ** No Yes 10 M. P. 12 F M 15 ... ,, 11 23 18 ** 3 Mar. 10 ,, No Yes 83 12 ++ Apr. Mar. 14 ,, 68 47 No Mar. 4 ., A. P. 9 F M Yes 2 712 5 ... +++ 10 ,, No Yes Apr. 35 2 26 ** .. ÷ 14 47 7 12 35 38 ++ Mar. E. H. F M No 4 ... 8 Yes 10 10 ,, 5 ÷ No Yes Apr 0117 18 +++ ** 7 ,, M 8 Mar. Yes C. S. 30 12 No 18 ** 36 37 31 No Yes 6 Apr. 1 33 6 42 ., ** 12,, ... 8 44 14 +++ ** 55 ** ... 14 5020 ... ** 37 79 29 65 ... 35 May 14 80 ++ .. 50 Yes No 9 ,, 15 G. D. 25 M M Mar. 10 17 1.5 .. 6 38 53 31 No Yes .. + Apr. 15 ... 21 ÷ ... 39 28 66 ., 34 ÷ No 12 ., Mar. Yes G. D. 42 М М 12 11 24 + 31 30 5 ++ 11 No 10 Yes Apr. 15 ,, 45 29 .. 59 24 ÷ No 19 ,, M. P. 14 F VS Mar. 20 Yes 20 .. + P.M. = Enteric. Died P.M. Mar. 25/98. Blood taken P. M., 42 hours ÷ after death. Re-tested Jan. 20/98. + Re-26 ,, A. L. 25 F VS 27 ,, Yes No 15 Died April 2. P.M. = Enteric. ... +++ P.M. 23 ,, Apr. 22 .. H. P. 23 F 8 $\frac{14}{19}$ No Apr. Yes 29 28 ,, 24 ÷ June No 1 53 Yes 10 ** + July 87 ** ** 44 キキキ 31 113 70 Yes No "Retested Jan, 30/98.+ No May ï May 9 ... F G. D. 13 M 10 8 11 June 30 Yes 15 -1 ., 14 43 28 ÷ July 13 $72 \\ 10$ 57 ... 4 No June 10 .. y'es H. S. 17 M M June 10 17 .. -26 ,, 26 35 + ... July 5 I. 4 ,, 4 No 22 31 2 61 Yes I. Sept. 2.8 94 I. *+ Tested 41 months 80. after. 17 ,, 7 H. K. F M June 17 12 No Yes 32 23 18 26 ... $\frac{23}{26}$,, 99 ** +++ $\frac{21}{30}$ 28 July •, 14 No 31 56 Yes 19 ÷ July 28 " D. F. 7 M M 28 No 6 Yes 29 33 11 31 9 6 11 ... Aug. Aug. 13 ,, M. F. F 38 8 10 14 28 ** No ï. Oct. 17 74 Yes ** 11 Tested Jan. 24/98. Nov. 4 92 I. 29 ÷ ,, 16 ,, A. H. 10 F M Aug. 19 ,, No 16 Yes

TABLE I. - Enteric Fever (continued).

M-Mi'd.

S-Severe.

VS-Very Severe,

TABLE I.-Enteric Fever (continued).

						SEW	book		Sta	ige i	n Disease		Reaction.	
	te of lission.	Initials.	Age.	Sex.	Severity of Case.	Date when blood w taken.	Day of Disease when blood was taken.	Pyrexia.	Relapse.	Convalescent.	No. of days, if any, Temperature normal since acute stage or last Relapse.	No. of days, if any, before Temperature became normal.	+ = Positive. Reac - = Negative.	Remarks.
Aug.	19/97	K.W.	9	F	?	Oct. 11/97		No		Yes			+	Had scarlet fever
,,	23 ,,	G. H.	36	М	vs	Sept. 2 ,,	14	Yes		No			*+	(concurrent). Retested Jan. 30/98 + P.M. = Enteric.
,,	28 ,,	Н. В.	28	М	М	" <u>12</u> "	29	,,		,,		7	+	T.M Butterns
,,	29 ,,	H. S.	23	М	М	,, 16 ,, ,, 12 ,,	33 24	Yes		"		3 13	++++	
,,	31 ,,	C. K.	17	М	М	Nov. 17 ., Sept. 12 .,	89 20	No Yes		Yes	? 52		°	"Tested Jan. 24/98.
Sept		J. H.	33	м	М	Oct. 20 ,,	58	No	***	Yes	34		+	
	2 ,,	E. M.	43	F	vs	sept. 15 ,, ,, 9 ,,	22 37				8 		++	Blood taken 17 hours after death. P.M. = Enteric.
- 15	6 ,,	A. G.	8	М	М	0.7 15 ···	19	Yes No	***	No Yes		4	+	^a Tested Jan. 21/98.
,,	6 ,,	A. M.	16	М	VS	Oct. 28 ,, Sept. 12 ,,	62 15	Yes		No	39		°+ +	P.M. = Enteric.
,,	9 ,,	J. O'C.	19	М	P M M	, 14 ,, , 9 ,,	17 12	Yes		No		15	*+ +	* Taken at P.M. Retested Jan. 21/98.
33 33	$ \begin{array}{c} 9 \\ 10 \\ ,, \end{array} $	A. H. G. E.	9 12	M M	M M	., 9,,	12 8		***	**		16 8	++++++	
	13 ,,					Oct. 30 ,,	56	No		Yes No	40	***	+	Tested Jan. 21/98.
		J. D.	31	M	М	Sept. 13 ,, Nov. 30 ,,	12 90	Yes	ï.	Yes	35	10	+++++++++++++++++++++++++++++++++++++++	Retested Jan. 24/98.
"	$ \begin{array}{c} 16 \\ 21 \\ ., \end{array} $	W. B. T. S.	13 7	M	M ?	Sept. 16 ,, ,, 21 ,,	11 24	Yes No		No Yes		9	+++++	Came in practically convalescent.
						Oct. 17 ,, ,, 28 ,,	50 61	**		**			++}	Tested Jan. 30/98.
,,	21 ,,	N. N.	17	F	М	Sept. 21 .,	12 38	Yes No		No Yes		17	t.	
	21 ,,					Nov. 16 ,,	68	Yes			39		+++	Tested Jan. 31/98.
,,	÷1 ,,	A. V.	18	F	8	Sept. 21 ,, Oct. 17 ,,	14 40	No		No Yes	12	14	+++++	Tested Jan. 31/98.
"	22 ,,	W. W.	9	м	s	Nov. 22 ,, Sept. 22 ,, Nov. 10 ,,	76 7 56	Yes No		No Yes	48	20	+ 1 + 1 ? 1	
	22 ,,	M. W.	12	F	8	Dec. 6 ,,	82 28	Yes		No	55		-1	Tested Jan. 31/98.
**	,,		12	r	0	Oct. 17 ,,	53	No		Yes	20		+	
						Nov. 9 ,, 22 ,,	76 89	9.9 . 5.9		**	43 56		+)	Tested Jan. 30/98.
.,,	22 ,,	A. W.	8	М	8	Sept. 22 ., Feb. 1/98	6	Yes		No		41	+	Developed scarlet fever Dec. 18.
	23 .,,	M. M.	11	P	N	., 25 ,,				No		27		
"			11	F	М	Sept. 23/97 Oct. 17 ,,	7 31	Yes	***			3	+	
						Nov. 6 ,, Dec. 6 ,,	51 81	No		Yes	17 47		=j	Tested Jan. 31/98.
"	23 ,,	C. B.	18	М	s	Sept. 23 ,, Feb. 1/98	14	Yes	•••	No 		15 	+	Discharged Dec. 11/97, well. Re-admitted with scarlet fever.
.,,	21 ,,	E. G.	22	F	М	Sept. 27/97	20	Yes		No		5	+	with scarter rever.
						Oct. 17 ,, ,, 28 ,,	43 54	No ,,		Yes	18 29		++}	Tested Jan. 30/98.
"	24 ,,	A. L.	16	F	М	Sept. 24 ., Oct. 28 ,,	23 57	Yes No		No Yes	31	3	++++	Tested Jan. 31/98.
"	26 ,,	M. W.		F	VS P M	Sept. 26 ,,	9 21	Yes		No			+++	P.M. = Enteric.
	28 ,,	Е. В.	19	F	P M M	Oct. 8 ,, Sept. 28 ,,	15	Yes		No		13	+	
						Oct. 17 ,, Nov. 6 ,,	34 54	No	 L	Yes	6		+	 Pyrexia next day, Relapse, Tested end of Jan.,
						., 26 ,,	74	**	I.	,,	26	***	+	1898.
Oct.	2 ,,	Е. Н.	34	М	vs	Dec. 6 ,, Oct. 2 ,, ,, 16 ,,	81 8 22	Yes	L 	No 	36 		+)+-	^o This was blood taken P.M. and tested Jan. 21/98. Blood putrid.
														P.M. = Enteric.

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TABLE I.-Enteric Fever (continued).

-						su	bool		Sta	ge ii	n Disease		tion.	
	Date of Admission.	Initials.	Age.	Sex.	Severity of Case.	Date when blood was taken,	Day of Disease when blood was taken.	Pyrexia.	Relapse.	Convalescence.	No. of days, if any. Temperature normal since acute stage or last Relapse.	No. of days, if any, before Temperature became normal.	+ = Positive. Reaction. - = Negative.	Remarks.
	Oct. 8/97	L. J.	25	F	М	Oct. 10/97	?6 wk.	Yes		No		5	-	P.M. = Enteric; but see below.
						" 15 " " 20 " Nov. 6 "		No Yes		Y'es	 5 		11	
	,, 9,,	E. L.	59	F	s	Oet. 9 	P.M. 11 19	 Yes		No 19			+	P.M. = Enteric. Tested Jan. 24/98.
	,, 16 ,,	н. т.	14	М	P M M	., 29 ,, ., 16 ,, Jan. 19/98	31 11 97	" Yes No		No Yes		 17	++++	Tested Jan. 17/98.
	,, 18 ,, ,, 20 ,,	C. S. L. C.	27 32	M F	VS P M M	Oct. 18/97 ,, 30 ,,	10 30 12	Yes		No			+++-	P.M. = Enteric. Tested Jan. 17/98.
	23	E. L.		F	vs	Nov. 6 Dec. 15 Oct. 23	29 68 15	No		Yes	4 43		+++++++++++++++++++++++++++++++++++++++	Tested Jan. 24/98.
						Nov. 20 ,, 1, 23 ,,	23 43 46	No Yes	 T.	Yes No	6	14 	+)	Tested Jan. 30/98.
	., 31 ,,	W.B.	34	М	vs	Jan. 21/98 Oct. 31/97	105 12	No Yes	Î.	Yes	49		++5 ++	*Weaker reaction than previously. P.M. = Enteric.
	,, 13 ,,	I. N.		F	P M S	Nov. 7 ., Oct. 15 ., 	19 10	***					+	Tested Jan. 20/98. In this case the tem- perature fell to nor-
						,, 18 ,, ,, 19 ,,		•••					-	mal, and remained down from about
						$ \begin{array}{cccccccccccccccccccccccccccccccccccc$			•••					Nov. 27. On Oct. 26 and 27 she had rigors and a high
						" 25 " " 27 " " 30 "			•••	••••				temperature. These attacks simulated an attack of ague.
						Nov. 1 ,,		•••						In one the tempera- ture shot up to 106 ⁻ 8°.
						··· 11 ·· ·· 12 ··							-	
						,, 13 ,, ,, 14 ,, ,, 15 ,,					···· ···			
						$ \begin{array}{cccccccccccccccccccccccccccccccccccc$							=	
						$ \begin{array}{cccccccccccccccccccccccccccccccccccc$,							
						·· 24 ·· ·· 25 ··								
	Nov. 1 ,,	W. C.	22	М	м	Dec. 1 ,, ., 11 ,,		···· ···		···· ···	 		=}	Tested Jan. 30/98.
		J. W. E. S.	30 8	MF	VS	1	23 10 7	 Yes		 No		23	+++++++++++++++++++++++++++++++++++++++	Came in practically convalescent. Died Nov. 4/97. See below.
	··· 9 ·· ·· 9 ·· ·· 9 ··	G. L. J. T. A. P.		M F F	MMS	. 8., 9., 9., 9., 10.,	14 6 6	**		** **		5 8 17	+++++	See below. See helow.
	,, 10 ,, ,, 8 ,,	J. L. A. H.	16 10	M F	M S	,, 11 ,, Jan. 10/98 *Dec. 15/97	8 68 2	No Yes		" Yes No	50	10 5	++++	* Probably about 15th
						,, 17 ,, ,, 20 ,, Jan. 17/98	21010-0	". No	···· ···	 Yes	 28	3 	+++	day. Tested Jan. 20/98, Reaction weaker.
-						Feb. 1 ,,		"		"	43	***	+	Reaction weaker still.

M-Mild, S-Severe, VS-Very Severe,

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			-			vas	blood		St	age i	n Disease		stion.	
	ate of nission.	Initials.	Age.	Sex.	Severity of Case.	Date when blood was taken.	Day of Disease when blood was taken.	Pyrexia.	Relapse.	Convalescence.	No. of days, it any, Temperature normal since acute stage or last Relapse.	No. of days, if any, before Temperature became normal.	+ = Positive. - = Negative. Reaction.	Remarks.
Nov	. 12/97	G. W.		М	М	Nov. 13/97							+	Came in convales-
						Feb. 1/98 ., 25 .,				•••			++	cent, but developed scarlet fever. Two brothers, sister, and mother admitted
.,	13 ,,	W. H.	13	М	М	Nov. 21/97	17	Yes		No		9	+	with enteric.
						Feb. 1/98	20 89	No		res	63	6	+++	
	22 ,,	W. A.	17	М	VS	Nov. 22/97	15	Yes		No			+	P.M. = Enterie.
	29 ,,	J. R.	20	м	РМ	Dec. 10 ,, Nov. 20 ,,	33	 Yes		 No			*+	 Tested Jan. 17/98. The blood had dried up, but gave the reaction.
••		0. 1.		- au	15	Nov. 20 ,,	15	108					++++	Weak. Strong.
						Dec. 3 ,,	18			.,		***	+1	P.M. = Enteric.
					P M	" ⁸ "	28 28	**		**			+1+	Tested Jan. 21/98. Tested Jan. 17/98.
Dec.	4 ,,	A.W.8.	9	М	s	., 6 .,	14	Yes		No		12	-	Acout 6an. 14/88.
						Feb. 23/98	16 92	No		Yes	66	10	++++	
	7 ,,	J. G.	7	F	М	Dec. 7/97	21	Yes		No		7	+	
	7 ,.	S. G.	13	F	s	Feb. 1/98 Dec. 7/97	77 10	No Yes		Yes No	49	äi	++	In this case the tem-
				-	~	8	11	10 In			***	40	+>	perature fell almost
							12 17	37		••		39	+1	to normal about
						., 14 .,	20	**		97 44		34 31	+++	Jan. 3rd-6th, and then rose again.
						24	27					24	+ (Tested Jan. 24/98.
						Jan. 7/98 ,, 17 ,,	41 51	"		27 17		10	Ŧí	and any server
						,, 18 ,,	52	No	10	Yes	1		+++++	
						·· 20 ··	54 58	22		**	37		+ 1	-
						., 26 .,	60	**		33 33	9		+	Tested Feb. 1/98.
1.13	8 ,,	E. D.	23	F	vs	Feb. 7 ,, Dec. 8/97	72 11	y's	***	No	21	***	+ .	P.M. = Enterie,
"	- "						12	108	***	33			+++	Tested Jan. 24/98.
	28 ,,	H. G.	21	м	P M	, 13 ,	16		***				++++	Tested Jan 17/98.
"	20 ,1	n. o.	-	100			8	Yes			•••		Ŧ	Moribund on admiz-
					P M	,,28 ,,	8						*+	Retested Jan. 30/98. + Reaction. Blood then putrid.

TABLE I .-- Enteric Fever (continued).

M-Mild. S-Severe. V:

VS-Very Severe.

TABLE IA .- Cases stated to have had Enteric Fever.

Initi	als.	Date of A	ttack.	Date when blood was taken.	Reaction.		
8		 December, 1894				Sept. 30/97	+ weak.
P		 April, 1893	***			Nov. 11	
W. J. P.		 Two years back		***		1, 21/96	
J. B.		 	244			June 29/97	
J. K.		 One year back				July 11	-1-
J. Ba.		 August, 1897				Jan. 4/98	-

Date of Admission.	Initials.	Dis	ease.					Reaction.	Remarks.
Oct. 31/96 Nov. 4	E. C. E. F.	Pneumonia Tuberculous Peritonitis	***					-	DW
	W. G.	Departmente	***					-	P.M.
26	S. F.	Morbus Cordis						-	
Dec. 4 ,,	J. T.	Perityphlitis							
,, 4 .,	S. L.	Influenza, Pneumonia						_	
,, 14 ,,	E. L.	Pleurisy							
Jan. 7/97	S. W.	Pneumonia						-	
,. 29 Feb. 9	E. J. L. B.							-	
	L. B. J. G.	Conditional & Desiliant		11.1	44.4				
2.0	M. S.	Constipation, ? Perityph	Europ				***	-	DW
10	M. H.	Ulcerative Endocarditis, Chronic Bronchitis	supp				***		P.M.
Mar. 24	H. C.	Pneumonia					***	_	
., 17 ,,	L. C.	Gastro-Enteritis			. *1				
,, 29 ,,	W. P.	Chronic Ear Disease, Sep	stican	ia				_	P.M.
June 8 "	G. L.	Pneumonia						_	
,, 12 ,,	A. C.	Febricula					***		
,, 14 ,,	R. S.	Tonsillitis						-	
,, 24 ,,	S. J.	Febricula					***		
1. 29	M. B.	Middle Ear Disease, Cere	ebral /	Apace:	\$5,				P.M.
July 26 ,,	M. B. J. C.	Pneumonia		***			***	-	P.M.
00	E. D.	Dishebasia Collection of			***	***		-	
Course a straight	M. K.	Diphtheria, Cellulitis of Miliary Tuberculosis					444	-	P.M.
sept. 4 ,,	A. W.	Appendicitis				***		-	г.м.
Oct. 7	M. D.	Relapsing Perityphlitis			***			_	
. 9	M. P.	Phthisis						_	Tubercle Bacillus
									found in Sputum.
,, 28 ,,	F. L.	Broncho-Pneumonia						-	P.M.
., 28 ,,	W. L.							_	P.M.
Nov. 8 ,,	W. W.	Pneumonia	***					-	P.M.
n 24 n	A. W.	Febricula	***			***		-	
Dec. 18 ,,	W. C. A. W.		***			***		-	
" 14 "	A. W. W. S.	General Tuberculosis				***		-	P.M.
,, 30 ,,	w. o.	Urinary Disease			***				

TABLE II.-Other Diseases certified Enteric Fever.

TABLE III .- Results in Other Diseases.

Diphtheria			 			7	Neg. R.
carlet Fever	***		 		***	17	11
Consillitis			 			1	4 39
Rheumatism	***		 			1	
Jastro-Enteritis			 ***		***	1	
nfluenza		***	 	***	***	1	
Puerperal Fever			 			1	
Iealthy	•••		 	***		19	From B. H.
						48	

In Table I., consisting of 101 cases of enteric fever, there are three which did not give a positive reaction :---

- (i.) J. S., admitted September 6th, 1896. This case should be omitted, as the blood was not tested till the 78th day of disease. The patient was then on the point of discharge. In some cases by this time the blood has lost its power of giving the reaction.
- (ii.) L. J., admitted October 8th, 1897; died November 7th, 1897. From the history, symptoms, and *post-mortem* appearance, this patient came in practically convalescing from enteric fever. The cause of death was a general peritonitis, proceeding from disease of the right fallopian tube.
- (iii.) I. N., admitted October 13th, 1897. This was considered a case of enteric fever on clinical evidence. The personal history also pointed

to the same conclusion. The patient was a shop-girl, and in the same shop two other girls fell ill about the same date of a disease diagnosed as enteric fever.

In three cases the blood was taken daily from the day of admission until December 22nd, 1897. These specimens of blood were tested during January, 1898, with the exception of those taken on the days of admission, and these were tested soon after admission :—

- (i.) E. S., admitted November 8th, 1897; discharged January 21st, 1898. The blood of November 22nd and 23rd, 1897, was not tested. The attack was severe. The day of admission corresponded to the seventh day of disease. The temperature fell to normal on December 2nd, 1897, and remained down. The blood gave a strong reaction throughout this period, but got weaker towards the end. The blood taken on the day of discharge gave a still weaker but positive reaction.
- (ii.) J. T., admitted November 8th, 1897; discharged January 8th, 1898. The attack was mild. The day of admission corresponded to the sixth day of disease. The temperature fell to normal on November 18th, 1897, and remained down. The blood gave a strong reaction throughout. The blood taken on the day of discharge gave a weaker reaction than previously, but still a strong reaction.
- (iii.) A. P., admitted November 10th, 1897; discharged January 8th, 1898. The blood of November 16th, 18th, 21st, and December 4th was not tested. The attack was severe. The day of admission corresponded to the sixth day of disease. The temperature fell to normal on November 28th, and remained down. The blood of December 3rd and 5th gave only a weak reaction. The rest gave a strong reaction.

As far as possible the blood was taken on the day of admission in all cases.

CONCLUSIONS.

(a) Briefly, it may be stated that "Widal's reaction" is usually obtained in cases suffering from enteric fever, whether the case be mild or severe. Conversely, it is not obtained in cases suffering from other diseases; but those cases which had recently had enteric fever might prove exceptions.

(b) That the reaction is obtained earlier in some cases than others. The earliest date on which it may be obtained is difficult to ascertain, as cases do not usually come in within the first week.

Three cases did not give the reaction at first, but gave it afterwards :---

M. S., admitted November 17th, 1896	Reaction negative, 11th day.
	Reaction positive, 12th day.
H. K., admitted June 17th, 1897	Reaction negative, 12th day.
	Reaction positive, 18th day.
A. U. S., admitted December 4th, 1897	Reaction negative, 14th day.
	Reaction positive, 16th day.

One case (A. E., admitted February 8th, 1897) gave the reaction on the fourth day, *i.e.*, the day of admission.

(c) That the blood retains its power of giving the reaction for a variable time, but finally loses it; maybe in a few months, or after some years.

In Table I., at present there are eight cases which have lost the reaction.

In Table IA., J. Ba. had given the reaction in August. The remaining three, giving a negative reaction, had not had Widal's test applied previously.

Occasionally during the period that the blood gives the reaction it has been lost for a time. See L. W., admitted February 12th, 1897; C. S., admitted March 7th, 1897. In both these cases the temperature had been normal for some days and remained down.

(d) That the blood, taken *post mortem* from cases which have shown the reaction during life, may retain the power of giving the reaction.

Referring to Table I., there are fifteen cases where the blood was taken *post* mortem. Only one of them did not give the reaction. In this case, however, the blood was not tested for three months, and was then putrid (*vide infra*).

(e) That severe cases generally give a strong reaction; but mild cases may often do so. In Table I. there is no reference to this point, as it was only during the later months that I paid much attention to the strength of the reaction.

(f) That the blood may be kept for some time without losing the reaction (see Remarks, Table I.). The longest time of keeping has been eleven months.

Cases in which the blood previously tested has become putrid have again given the reaction. The exception to this might be the *post-mortem* blood of E. H., admitted October 2nd, 1897. Unfortunately this blood had not previously been tested.

I have to tender my especial thanks to Professor Macfadyen, of the British Institute of Preventive Medicine, for his ever-ready advice and assistance. It was entirely at his suggestion that I made trial of this reaction. I have also to thank Mr. Pakes, of Guy's Hospital, for useful suggestions.



























