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METROPOLITAN ASYLUMS BOARD.

ANNUAL REPORT—1901

(IN TWO VOLS.)

VOL. II.


BEING THE

16TH REPORT OF THE STATISTICAL COMMITTEE,
WITH APPENDICES.

PRICE 5/-
THE TWO VOLS.

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

1902



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PRINTED BY HENRY LITTLEWOOD, ST. MARTIN'S LANE, W.C.

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1901-1902

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METROPOLITAN ASYLUMS BOARD.

REPORT OF THE STATISTICAL COMMITTEE FOR THE YEAR 1901.

*To the Managers of the
Metropolitan Asylum District.*

4th July, 1902.

We submit our report for the year 1901 upon the statistics concerning:—

- (1) The notification of cases of infectious disease in the Metropolis ;
- (2) The work of the ambulance service ; and
- (3) The inmates of the various institutions under the Managers' control.

i. INFECTIOUS DISEASES.

Notification Statistics. (1.) During the year there were notified in the Metropolis 40,361 (*35,247*)* cases of infectious disease. Of these, 35,501 (*30,243*) were legally admissible to the Managers' hospitals. The remainder—mainly cases of erysipelas, but including also 253 (*237*) cases of puerperal fever—were not admissible. Out of the 35,501 admissible cases, 26,521 (*21,361*)† cases, or 74·7 (*70·63*) 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 steadily increasing (with the exception of a decrease in the year 1893, see p. 14, and a slight decrease in the year 1895) from 33·59 to 74·7, as follows:—

1890	..	33·59	per cent.	1896	...	52·37	per cent.
1891	...	36·69	„	1897	...	58·50	„
1892	..	43·17	„	1898	...	65·50	„
1893	...	36·91	„	1899	...	68·08	„
1894	..	52·23	„	1900	...	70·63	„
1895	...	50·31	„	1901	...	74·70	„

* Italic figures in brackets throughout are the corresponding figures for 1900.

† Including 73 cases detained for observation at South Wharf, but excluding Tottenham and other extra-metropolitan cases.

Table A, pp. 11-12, shows the number of notifications of, and deaths from, those notifiable diseases which are admissible 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 1901.

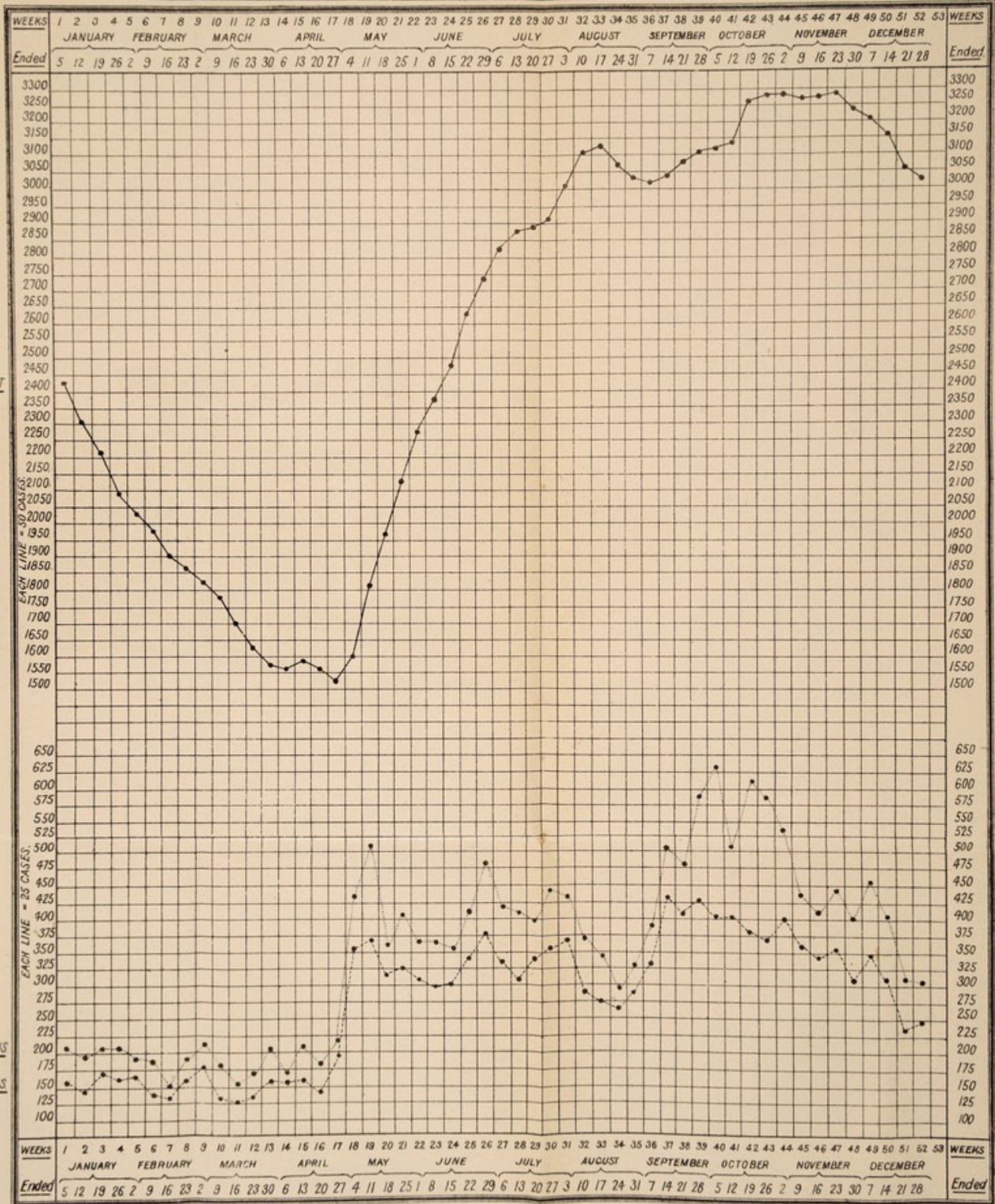
For the first time for some years past there was a decrease in the ratio of diphtheria to scarlet fever, notwithstanding that the number of diphtheria notifications actually exceeded those of scarlet fever in 3 (*13*)* different districts, viz., Fulham, Hackney, and Poplar.

Facing p. 13 we give four charts tracing the course throughout the year of scarlet fever, diphtheria, enteric fever, and smallpox respectively. Each chart shows week by week (*a*) the notifications of the disease to which it relates, (*b*) the admissions, and (*c*) the number of patients under treatment.

* Italic figures in brackets throughout are the corresponding figures for 1900.

METROPOLITAN ASYLUMS BOARD.

CHART showing the mean number of SCARLET FEVER patients remaining under treatment each week, also the number of cases notified and the number admitted during each week of 1901, (uncorrected for mistakes in diagnosis.)



UNDER TREATMENT

UNDER TREATMENT

NOTIFICATIONS

NOTIFICATIONS

ADMISSIONS

ADMISSIONS

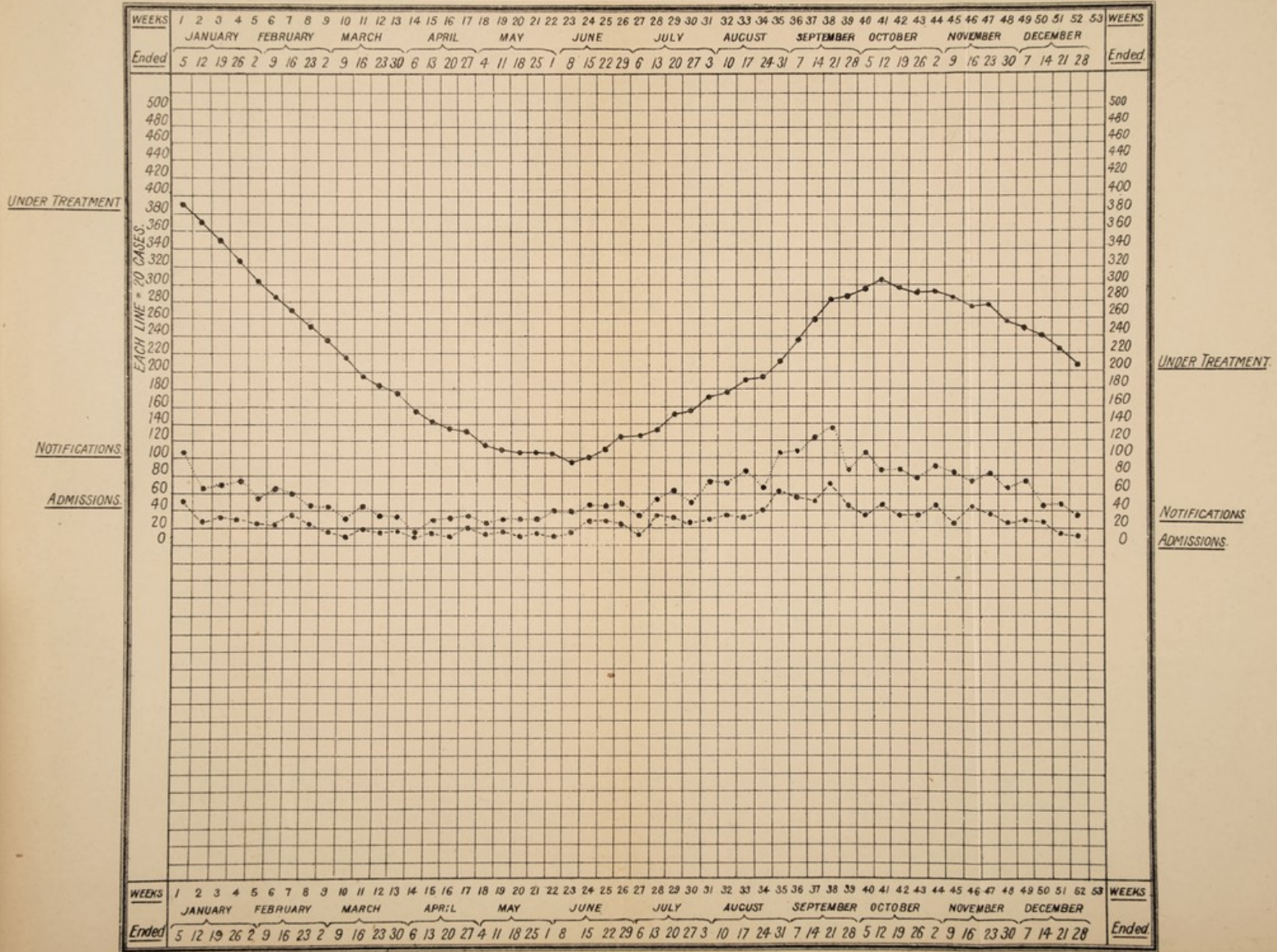
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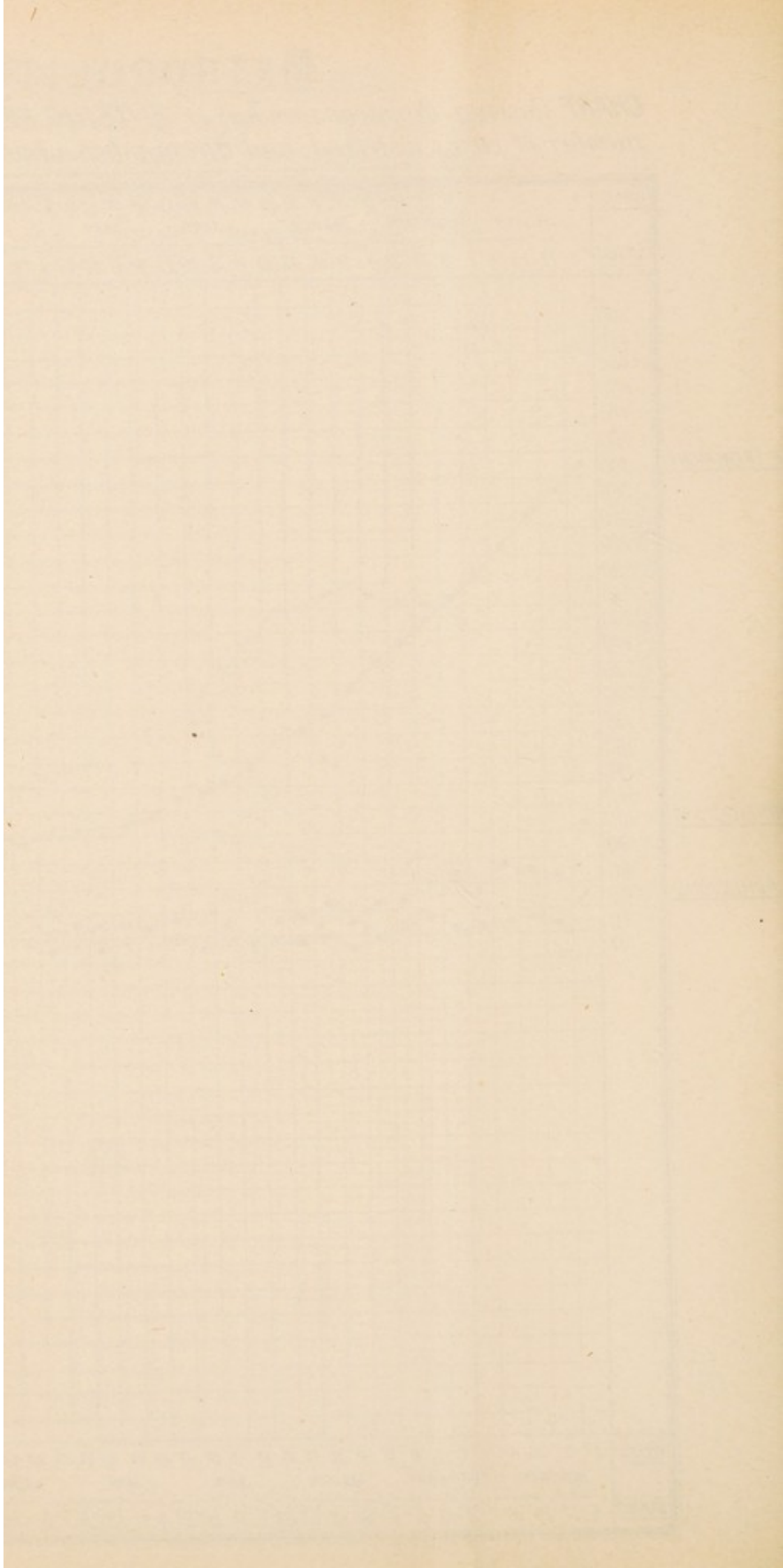
CHART showing the mean number of DIPHThERIA patients remaining under treatment each week, also the number of cases notified, and the number admitted during each week of 1901, (uncorrected for mistakes in diagnosis.)



METROPOLITAN ASYLUMS BOARD.

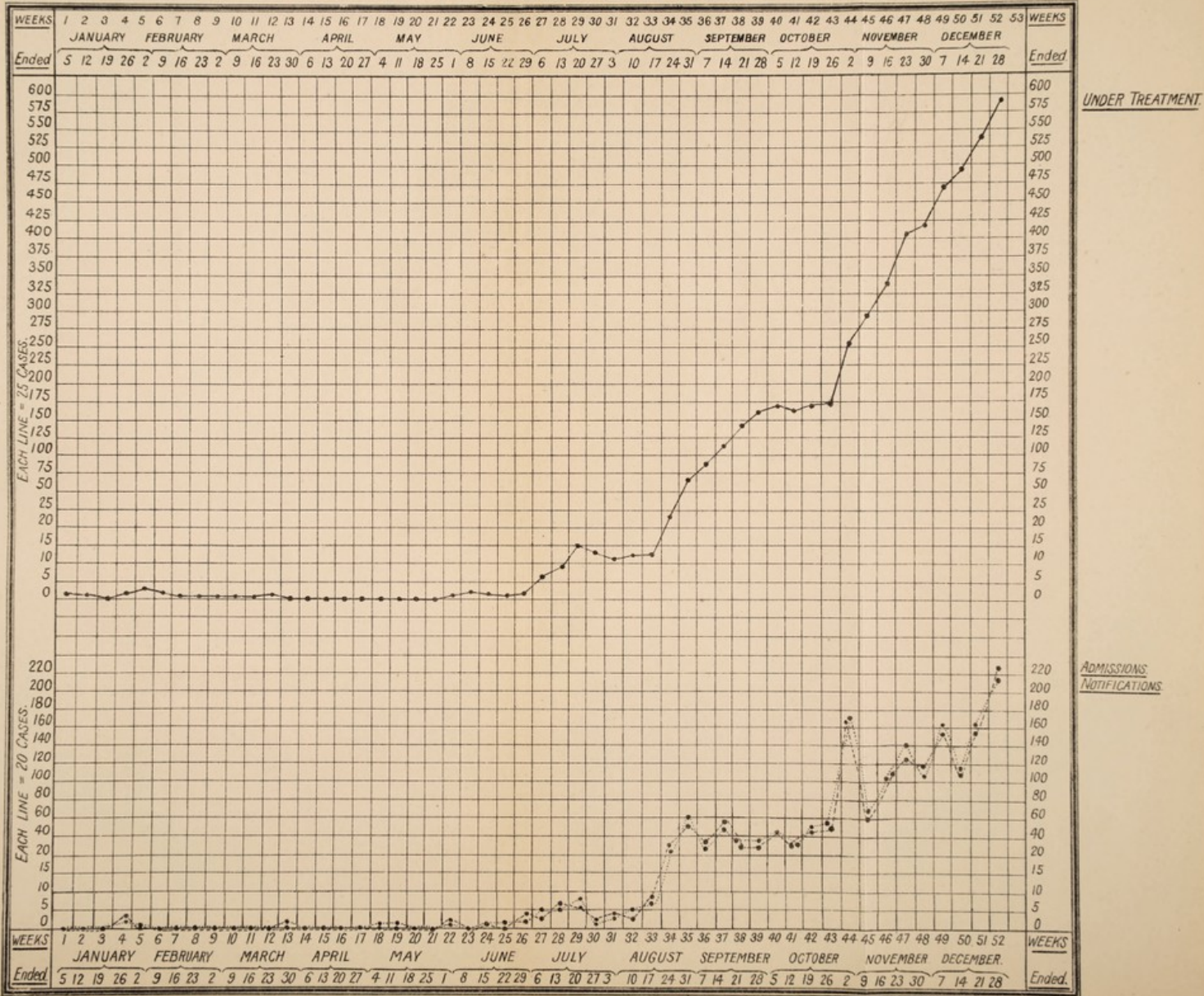
CHART showing the mean number of ENTERIC FEVER patients remaining under treatment each week, also the number of cases notified, and the number admitted during each week of 1901, (uncorrected for mistakes in diagnosis)





METROPOLITAN ASYLUMS BOARD.

CHART showing the mean number of SMALL-POX patients remaining under treatment each week, also the number of cases notified, and the number admitted during each week of 1901, (uncorrected for mistakes in diagnosis)



METROLOGICAL

CHART showing the mean temperature, wind force, and other meteorological data for the year 1880.

Month	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Mean Temperature	32	35	40	48	55	62	68	72	70	62	50	38
Wind Force	10	12	15	18	20	22	25	28	25	20	15	10
Relative Humidity	85	80	75	70	65	60	55	50	55	60	65	70
Barometric Pressure	30.0	30.2	30.5	30.8	31.0	31.2	31.5	31.8	31.5	31.2	30.8	30.5
Cloudiness	4	3	2	1	1	1	1	1	2	3	4	5
Days of Rain	10	8	6	4	3	2	1	1	2	4	6	8
Quantity of Rain	4.0	3.5	3.0	2.5	2.0	1.5	1.0	1.0	1.5	2.5	3.5	4.0
Thunder Days	0	0	0	0	0	0	0	0	0	0	0	0
Thunder Quantity	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Days of Frost	15	12	8	4	2	1	0	0	0	0	0	0
Quantity of Frost	15.0	12.0	8.0	4.0	2.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0
Days of Snow	10	8	5	3	2	1	0	0	0	0	0	0
Quantity of Snow	10.0	8.0	5.0	3.0	2.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0
Days of Hail	0	0	0	0	0	0	0	0	0	0	0	0
Quantity of Hail	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Days of Fog	5	4	3	2	1	1	1	1	2	3	4	5
Quantity of Fog	5.0	4.0	3.0	2.0	1.0	1.0	1.0	1.0	2.0	3.0	4.0	5.0
Days of Clear	10	12	15	18	20	22	25	28	25	20	15	10
Quantity of Clear	10.0	12.0	15.0	18.0	20.0	22.0	25.0	28.0	25.0	20.0	15.0	10.0

The numbers of notifications and admissions in each chart are based upon the figures in the following table:—

TABLE A1.—Cases of Scarlet Fever, Diphtheria, Enteric Fever, and Smallpox notified, Number admitted, and Percentage of Admissions to Notifications for each week during 1901.

WEEK ENDED	SCARLET FEVER.			DIPHTHERIA.			ENTERIC FEVER.			SMALLPOX.		
	Notifica- tions.	Admissions.	Percentage of Admissions.	Notifica- tions.	Admissions.	Percentage of Admissions.	Notifica- tions.	Admissions.	Percentage of Admissions.	Notifica- tions.	Admissions.	Percentage of Admissions.
1901.												
1 Jan. 5	208	155	74·52	187	132	70·59	104	50	48·08	...	...	..
2 " 12	199	149	74·87	149	104	69·80	65	29	44·62	...	...	..
3 " 19	207	174	84·06	176	133	75·57	71	32	45·07	...	...	*
4 " 26	205	161	78·54	193	154	79·79	78	31	39·74	3	4	133·33
5 Feb. 2	191	165	86·39	178	116	65·17	52	26	50·00	1	1	100·00
6 " 9	189	137	72·49	204	136	66·67	64	23	35·94	...	...	...
7 " 16	150	134	89·33	180	135	75·00	61	36	59·02	2	1	50·00
8 " 23	192	158	82·29	162	120	74·07	46	23	50·00	...	...	...
9 Mar. 2	215	176	81·86	163	150	92·02	42	17	40·48	...	...	...
10 " 9	178	132	74·16	201	147	73·13	33	13	39·39	...	...	...
11 " 16	153	125	81·70	167	146	87·42	42	20	47·62	...	...	...
12 " 23	173	135	78·03	183	127	69·40	37	18	48·65	...	...	...
13 " 30	204	156	76·47	161	106	66·25	34	19	55·88	1	...	0·00
14 Apr. 6	167	152	91·62	143	121	84·62	18	10	55·56	...	...	...
15 " 13	213	156	73·24	163	95	58·28	29	17	58·62	...	...	...
16 " 20	178	143	80·34	134	97	72·39	34	13	38·24	...	...	...
17 " 27	223	188	84·30	171	139	81·29	36	20	55·56	...	...	...
18 May 4	434	353	81·34	185	143	77·30	26	13	50·00	1	...	0·00
19 " 11	508	374	73·62	246	189	76·83	30	18	60·00	1	..	0 00
20 " 18	364	311	85·44	226	186	82·30	29	11	37·93	...	...	...
21 " 25	407	327	80·34	185	140	75·68	29	15	51·72	...	...	...
22 June 1	367	308	83·92	172	139	80·81	40	10	25·00	1	2	200·00
23 " 8	369	299	81·03	191	158	82·72	40	16	40·00	...	...	...
24 " 15	354	300	84·75	219	166	75·80	46	29	63·04	1	1	100·00
25 " 22	418	343	82·06	215	176	81·86	44	29	65·91	1	...	0·00
26 " 29	477	377	79·04	226	185	81·86	48	24	50·00	2	3	150·00
27 July 6	415	338	81·45	245	191	77·96	33	18	54·55	5	2	40·00
28 " 13	408	308	75·49	261	227	86·97	56	33	58·93	5	6	120·00
29 " 20	399	346	86·72	253	207	81·82	64	31	48·44	8	5	62·50
30 " 27	442	355	80·32	290	213	73·45	49	26	53·06	1	2	200·00
31 Aug. 3	428	370	86·45	229	193	84·28	78	37	47·44	3	4	133·33
32 " 10	371	292	78·71	217	167	76·96	77	38	49·35	5	3	60·00
33 " 17	342	276	80·70	228	171	75·00	84	36	42·86	7	8	114·29
34 " 24	295	264	89·49	204	168	82·35	66	40	60·61	22	30	136·36
35 " 31	332	289	87·05	237	197	83·12	109	62	56·88	60	51	85·00
36 Sep. 7	391	333	85·17	265	203	76·60	109	59	54·13	27	31	114·81
37 " 14	503	437	86·88	326	270	82·82	123	52	42·28	53	58	109·43
38 " 21	479	409	85·39	362	247	68·23	135	71	52·59	37	33	89·19
39 " 28	593	427	72·01	327	250	76·45	85	48	56·47	39	33	84·62
40 Oct. 5	635	403	63·46	360	241	66·94	106	38	35·85	44	42	95·45
41 " 12	508	401	78·94	319	216	67·71	83	49	59·04	28	27	96·43
42 " 19	610	377	61·80	348	246	70·69	85	37	43·53	48	43	89·58
43 " 26	589	372	63·16	356	266	74·72	79	39	49·37	54	52	96·30
44 Nov. 2	531	401	75·52	323	231	71·52	90	46	51·11	173	163	94·22
45 " 9	432	363	84·03	258	167	64·73	85	27	31·76	64	60	93·75
46 " 16	412	346	83·98	288	203	70·49	74	42	56·76	104	106	101·92
47 " 23	448	356	79·46	291	204	70·10	81	39	48·15	140	126	90·00
48 " 30	400	304	76·00	264	212	80·30	67	25	37·31	105	115	109·52
49 Dec. 7	458	349	76·20	252	175	69·44	74	29	39·19	163	154	94·48
50 " 14	402	314	78·11	242	161	66·53	43	26	60·47	117	114	97·44
51 " 21	313	235	75·08	241	170	70·54	46	18	39·13	161	152	94·41
52 " 28	302	248	82·12	202	121	59·90	35	16	45·71	213	222	104·22
	18,381	14,501	78·89	11,968	8,957	74·85	3,194	1,544	48·34	1,700	1,654	97·29

(N.B.—Extra-metropolitan cases admitted into the Board's hospitals are deducted from the weekly admissions. Enteric fever cases taken to London general hospitals are added to the weekly admissions.)
* For an explanation of the percentage rates of smallpox cases, see p. 14.

This table is also of interest as showing the great variation from week to week in the percentages of cases admitted to hospital. The variations range from 61.80 (65.32)* to 91.02 (85.40) in the case of scarlet fever; from 58.28 (62.23) to 92.02 (87.91) in the case of diphtheria; and from 25.00 (35.00) to 65.91 (65.43) in the case of enteric fever. Practically all cases of smallpox find their way into the Managers' hospitals, less than 3 per cent. of the cases notified in the year being treated elsewhere. It will be observed that frequently the smallpox admissions exceed the number of notifications. This is probably due in many instances to the disinclination of medical practitioners to send their certificates to the medical officers of health until they know whether the diagnosis has been confirmed by the Board's experts.

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 1901:—

TABLE A₂.—Number of cases of admissible Diseases† notified during the years from 1890 to 1901.

YEARS.	Scarlet.	Diphtheria.	Enteric.	Typhus.	Smallpox.	Relapsing Fever.‡	Continued Fever.‡	TOTALS.
1890	15,330	5,870	2,877	35	60	7	237	24,416
1891	11,398	5,907	3,372	27	114	39	152	21,009
1892	27,095	7,781	2,465	20	423	7	147	37,938
1893	36,901	13,026	3,663	22	2,813	4	205	56,634
1894	18,440	10,655	3,360	21	1,192	2	162	33,832
1895	19,757	10,772	3,506	14	979	3	105	35,136
1896	25,647	13,362	3,190	6	225	3	103	42,536
1897	22,848	12,803	3,103	4	104	1	67	38,930
1898	16,894	11,543	3,024	16	32	1	55	31,565
1899	18,089	13,346	4,453	13	29	1	69	36,000
1900	13,800	11,776	4,291	7	87	—	73	30,034
1901	18,381	11,968	3,194	20	1,700	—	48	35,311

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:—

TABLE A₃.—Percentage of Admissions to Notifications of each admissible Disease during the years 1890 to 1901.

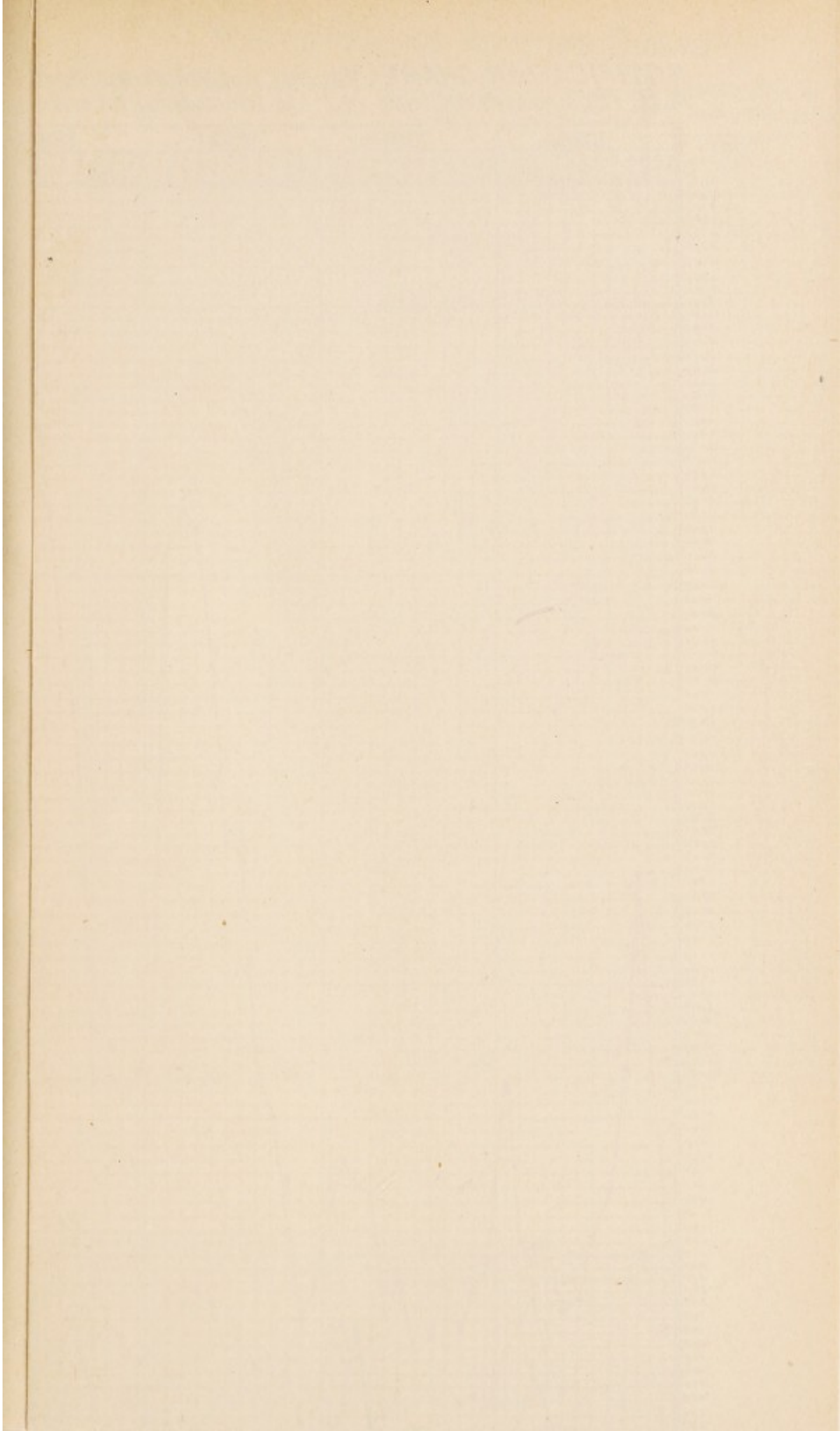
DISEASES.	1890.	1891.	1892.	1893.	1894.	1895.	1896.	1897.	1898.	1899.	1900.	1901.
Scarlet Fever	42.82	46.84	48.80	39.68	63.94	58.20	62.65	66.99	73.16	74.34	75.15	78.89
Diphtheria ...	17.87	25.07	30.19	24.52	38.89	41.55	39.92	51.64	62.12	69.69	72.48	74.85
Enteric Fever	22.49	27.34	25.27	20.01	20.24	24.13	27.02	30.36	36.64	40.78	47.70	45.34
Typhus Fever	42.86	70.37	60.00	36.36	61.90	42.86	33.33	50.00	87.50	84.62	57.14	85.00
Smallpox ...	36.67	55.26	66.67	81.23	78.44	84.58	61.78	66.34	15.62	55.17	73.56	97.29

N.B.—These percentages are exclusive of extra-metropolitan cases, but 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 Table on p. 18.

* Italic figures in brackets throughout are the corresponding figures for 1900.

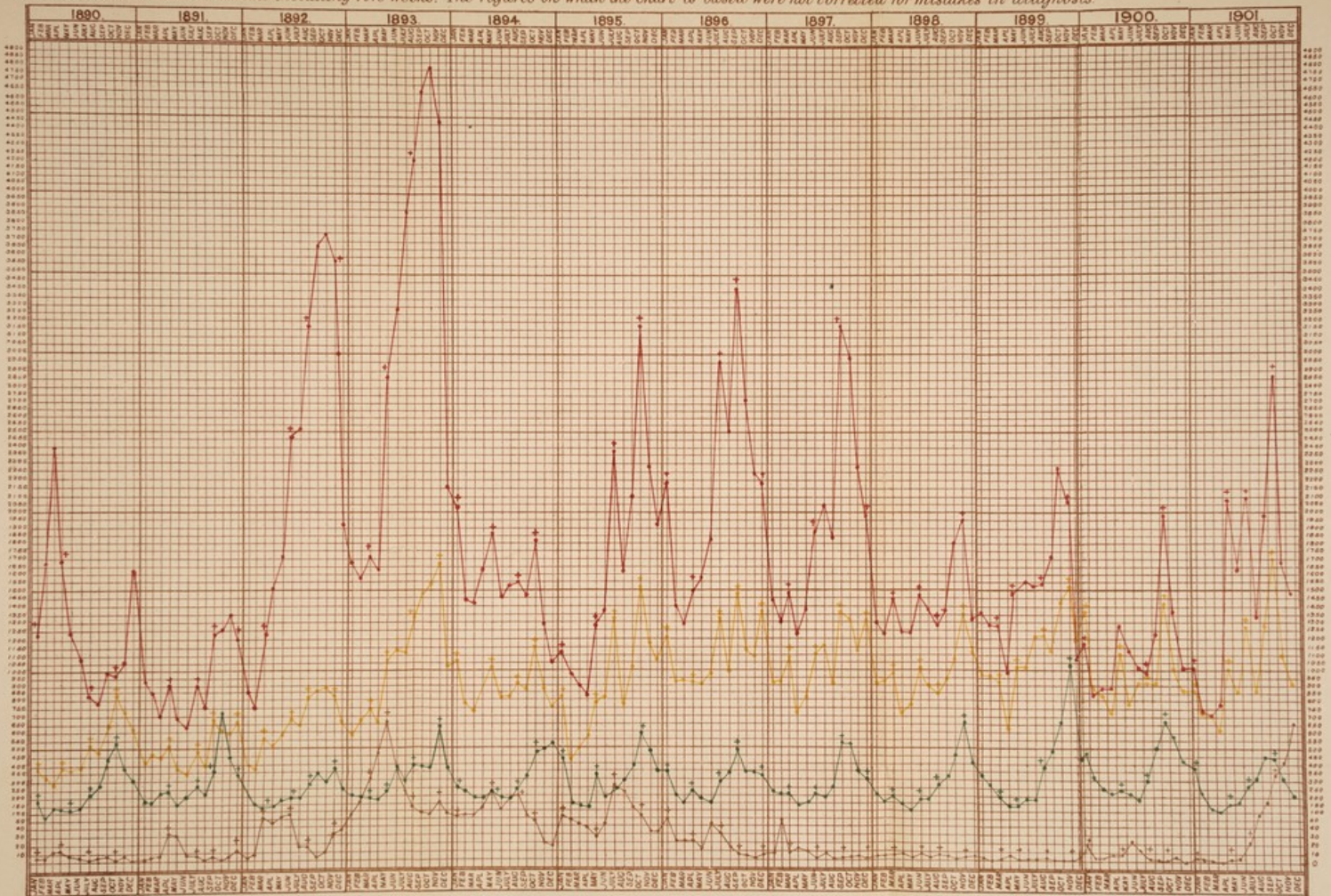
† Cases of membranous croup are not included in this table. See note, p. 20.

‡ Although relapsing and continued fevers are admissible to the Managers' hospitals, few cases so certified are sent in.



METROPOLITAN ASYLUMS BOARD.

NOTIFICATION CHART.—Monthly notifications, Scarlet fever, Red line—, Enteric fever, Green line—, Diphtheria, Yellow line—, Smallpox, Brown line—.
N.B. The crosses indicate months including five weeks. The figures on which the Chart is based were not corrected for mistakes in diagnosis.



The proportion of scarlet fever admissions to notifications has risen from 42·82 to 78·89, of diphtheria cases from 17·87 to 74·85, and of enteric cases from 22·49 to 45·34. The low figures of 1893 were due to the fact that scarlet fever and diphtheria were unusually prevalent that year, and the Board's hospital accommodation was quite inadequate. Inadequacy of hospital accommodation was also the cause of the falling-off in the scarlet fever admission rate in the year 1895.

The chart facing this page traces the course of scarlet fever, diphtheria, enteric fever, and smallpox month by month during each year from 1890 to 1901. Notwithstanding that the Managers have more than doubled their accommodation for fever cases since 1891, it may still become necessary to make further provision, as the present accommodation would prove inadequate should scarlet fever and diphtheria again become as prevalent as they were in the year 1893.

SPOTTED
MAPS. Maps spotted to show the distribution of the principal fevers throughout the Metropolis during 1901 will be found in the pocket at the end of this volume.

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

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

Diphtheria cases are on two maps—one for each half-year.

Enteric Fever cases are on one map.

Smallpox and *Typhus Fever* cases are shown on one map, the former being represented by spots and the latter by crosses.

AGE AND SEX
DISTRIBUTION. Tables A₄, A₅, A₆, and A₇ exhibit the age and sex of cases notified as scarlet fever, diphtheria, enteric fever, and smallpox respectively during the year. Scarlet fever and diphtheria 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. As might be expected, owing to the protection afforded by vaccination in infancy, comparatively few cases of smallpox were notified amongst children under ten years of age.

Ages of Cases Notified—1901.

TABLE A4.—SCARLET FEVER.				TABLE A5. DIPHTHERIA.			TABLE A6. ENTERIC FEVER.			TABLE A7. SMALLPOX.		
AGES.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Under 1	143	108	251	124	90	214	5	3	8	8	15	23
1 to 2	346	295	641	394	329	723	8	5	13	9	17	26
2 ,, 3	651	596	1,247	547	450	997	20	13	33	13	7	20
3 ,, 4	788	832	1,620	593	638	1,231	28	26	54	15	14	29
4 ,, 5	887	918	1,805	674	672	1,346	35	31	66	15	15	30
Total under 5	2,815	2,749	5,564	2,332	2,179	4,511	96	78	174	60	68	128
5 to 10	3,288	3,636	6,924	1,734	2,068	3,802	181	189	370	68	64	132
10 ,, 15	1,405	1,590	2,995	612	809	1,421	261	240	501	69	80	149
15 ,, 20	676	688	1,364	329	391	720	285	226	511	104	108	212
20 ,, 25	350	446	796	201	330	531	251	207	458	123	118	241
25 ,, 30	156	234	390	130	272	402	195	174	369	128	95	223
30 ,, 35	66	95	161	88	165	253	159	111	270	95	73	168
35 ,, 40	39	56	95	50	81	131	113	101	214	80	61	141
40 ,, 45	20	16	36	43	47	90	73	55	128	84	48	132
45 ,, 50	11	15	26	13	27	40	49	39	88	49	25	74
50 ,, 55	7	12	19	6	27	33	29	23	52	26	20	46
55 ,, 60	2	3	5	4	5	9	17	12	29	10	10	20
Upwards	2	3	5	7	17	24	12	18	30	23	11	34
Unrecorded ...	1	...	1	...	1	1	...	...	...	...	...	...
Totals	8,838	9,543	18,381	5,549	6,419	11,968	1,721	1,473	3,194	919	781	1,700

Ambulance Work. (2.) The statistical tables concerning the work of the ambulance service will be found on pp. 55 to 57.

During the year 27,380 (21,524)* fever, diphtheria, and smallpox patients were conveyed to the various hospitals of the Managers; 5,223 (5,394) convalescent patients were transferred to the Northern and Gore Farm Hospitals; and 5,539 (5,416) recovered patients were brought back from those hospitals to London. Further, 388 (327) private persons were removed on payment to other places than the Managers' hospitals; 159 (20) were taken from the out-patient departments of general hospitals to their homes, owing to there being no suitable beds immediately available in the Managers' hospitals (they were admitted the following day), none of these cases being smallpox; and 98 (201) enteric patients were removed from their homes to the general hospitals, where arrangements for their reception had been made by the Managers.

Altogether, 39,966 (33,791) removals were effected by the land ambulance service during 1901, and the various vehicles made 30,587 (24,808) journeys, and ran 317,278 (232,848) miles.

The steamboats of the river ambulance service conveyed 5,453 (1,635) passengers to and from the hospital ships at Long Reach; of that number 1,614 (64) were patients taken to the hospital ships, 633 (69) were recovered

* Italic figures in brackets throughout are the corresponding figures for 1900.

patients brought back to London, and 3,206 (1,502)* were visitors, staff, workmen, &c.

Hospital Accommodation.

(3.) FEVER AND DIPHTHERIA.—The normal accommodation at the fever hospitals open at the end of the year was as under :—

HOSPITAL.	No. of Beds.
Eastern Hospital	362
North-Eastern Hospital (including the new permanent buildings and the old temporary buildings) ..	600
North-Western Hospital (including some temporary buildings)	460
Western Hospital	450
South-Western Hospital	366
Fountain Hospital (temporary buildings)	402
Grove Hospital	522
South-Eastern Hospital (including small temporary buildings)	432
Park Hospital	548
Brook Hospital	488
Northern Hospital (including temporary buildings) ..	748
Total	5,378

Further accommodation will be provided at :—

Southern Convalescent Hospital	800
Grand total	<u>6,178</u>

This accommodation is capable of further increase in times of pressure by placing extra beds in the wards of several of the hospitals ; but from the total should be deducted 100 beds to the use of which the Urban District of Tottenham is entitled.

SMALLPOX.—For this disease the Managers possessed at the end of 1901 250 beds at the hospital ships and 1,074 at Gore Farm. To meet the expected demands of the smallpox epidemic, buildings were in course of erection at the end of the year which would increase the total number of beds to 3,238, exclusive of 940 beds in the permanent Joyce Green Hospital (in course of construction) and 464 beds in wooden (Hawkins') huts.

Hospital Statistics.

(4.) FEVER.—On the last day of 1900 there were 4,142 (4,895) patients in the fever hospitals then open.

By 25th April, 1901, the number under treatment had fallen to the minimum, 2,563 (*May 5th, 1900, 2,948*). After that date, the number rose to 4,708 by the 12th August, when it began to decline, and on the 24th of that month it was reduced to 4,508. It then began to rise again, and attained the maximum, 5,165, for the year on November 3rd (*November 27th, 1900, 4,779*), and then declined until the end of the year, when 4,588 (4,142) patients remained under treatment.

* Italic figures and dates in brackets throughout are the corresponding figures and dates for 1900.

The following was the distribution of patients amongst the various hospitals on November 3rd:—

HOSPITAL.	BEDS OCCUPIED.					TOTAL.
	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	
Eastern Hospital	22	245	...	33	..	300
North-Eastern Hospital..	402	124	...	23	...	549
North-Western " ...	323	109	...	31	...	463
Western " ...	257	132	...	18	...	407
South-Western " ...	219	102	...	17	...	338
Fountain " ...	427	...	...	...	...	427
Grove " ..	..	353	...	58	...	411
South-Eastern " ...	131	132	...	37	1	301
Park " ...	453	137	...	26	..	616
Brook " ...	308	161	...	49	...	518
Northern " ...	747	88	...	...	...	835
Gore Farm " ...	...	..	...	...	...	...
TOTALS	3,289	1,583	..	292	1	5,165

The prevalence of smallpox compelled the Managers to close the Gore Farm Hospital against the reception of scarlet fever and diphtheria convalescent patients. The last fever patients left the hospital on the 29th October, and the first smallpox patients were received on the following day.

Tables I. to VIII. and the accompanying chart summarise the several fever hospital tables given on pp. 70-102.

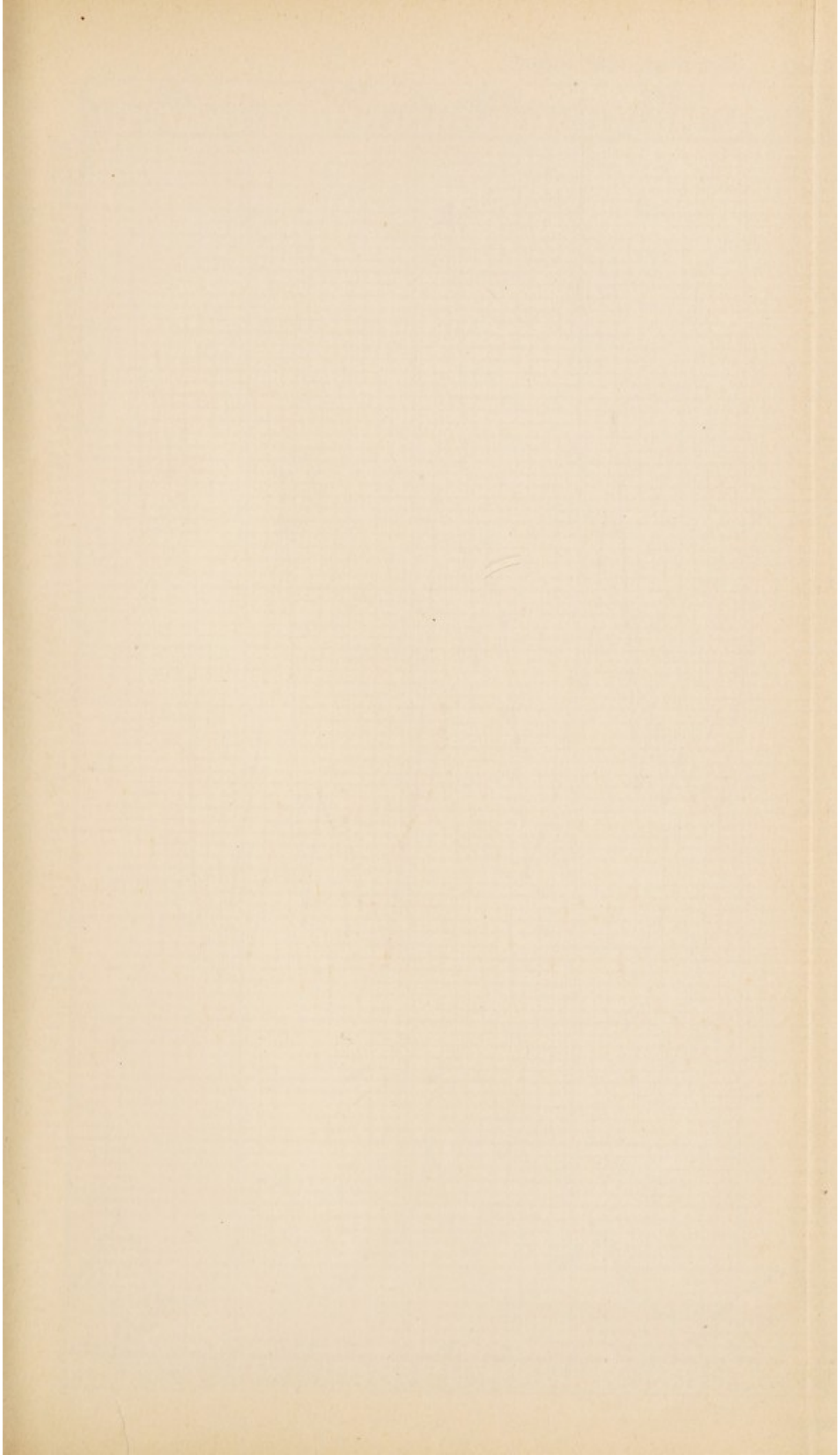
TABLE I.—Admissions, Discharges, and Deaths at Fever Hospitals during 1901.

DISEASES.	Re- maining on Dec. 31, 1900.	Admitted.	Total under treatment during 1901.	Dis- charged.	Died.	Mortality per cent.	Re- maining on Dec. 31, 1901.
Scarlet	2,485	14,539	17,024	13,358	542	3·81	3,124
Diphtheria	1,184	7,622	8,806	6,757	849	11·15	1,200
Enteric	358	1,129	1,487	1,158	175	14·22	154
Typhus ... ..	...	13	13	9	4	30·77	...
Totals	4,027	23,303	27,330	21,282	1,570	6·80	4,478
Other diseases	115	2,365	2,480	2,203	167	7·07	110
Grand Totals... ..	4,142	25,668	29,810	23,485	1,737	6·83	4,588

NOTES.—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.

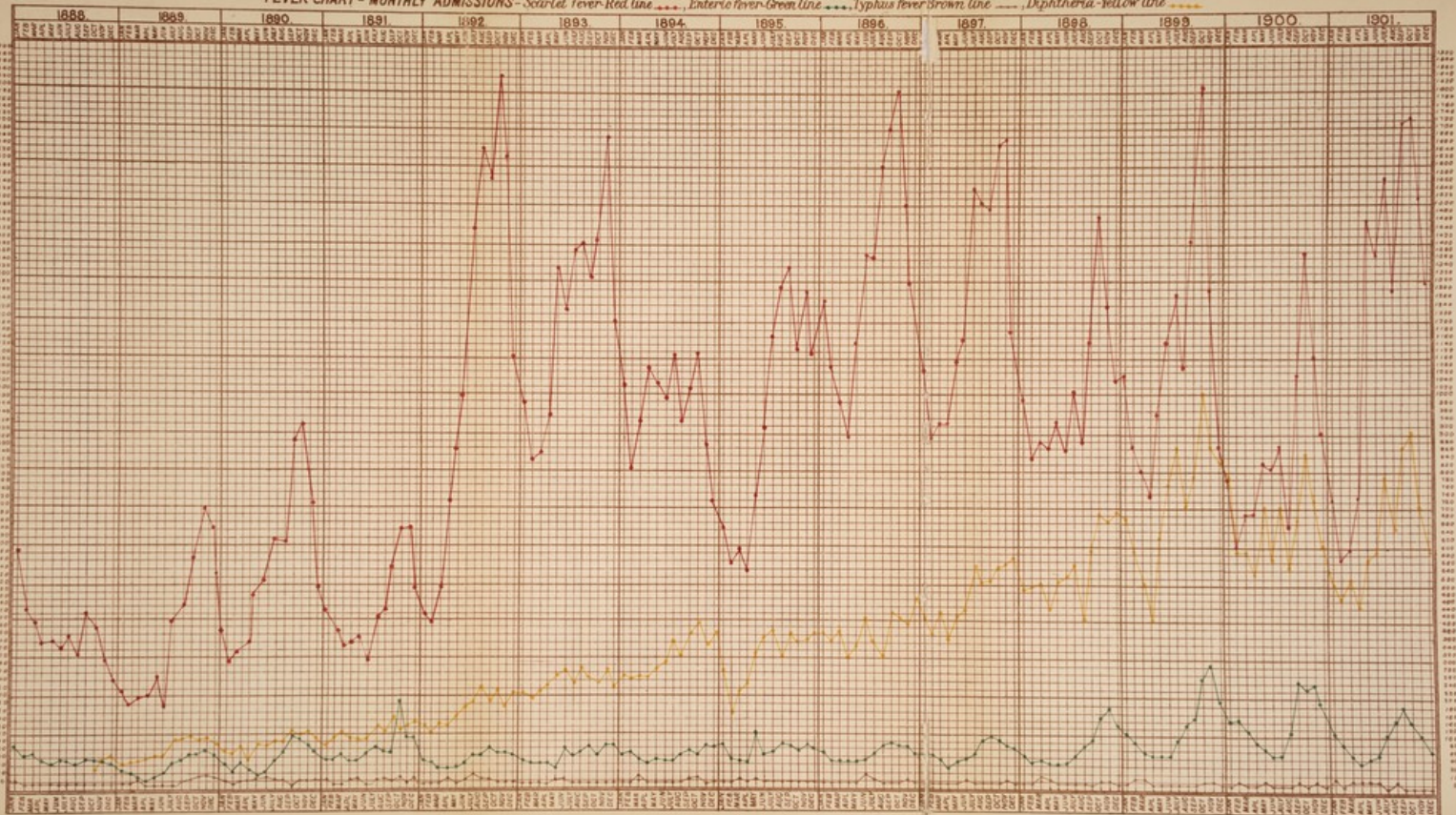
The mortality rates are calculated according to the Registrar-General's formula—i.e., by dividing the deaths, multiplied by 100, by half the sum of the admissions, discharges, and deaths for the year.

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 98.



METROPOLITAN ASYLUMS BOARD.

FEVER CHART - MONTHLY ADMISSIONS - Scarlet fever - Red line - - - - - , Enteric fever - Green line - - - - - , Typhus fever - Brown line - - - - - , Diphtheria - Yellow line - - - - -



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

The total number of patients treated during the year was 3,206 higher than in the preceding year, and is the highest on record.

TABLE II.—*Monthly Admissions, Deaths, and Discharges at Fever Hospitals during 1901.*

MONTH.	ADMISSIONS.						DEATHS.						MORTALITY PER CENT.					
	Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total.	Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total.	Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total.
Jan. ...	726	502	111	8	107	1,454	33	67	23	1	10	134	3.48	11.73	14.74	12.50	9.66	7.52
Feb. ...	566	467	81	...	127	1,241	20	53	16	1	11	101	2.89	10.87	13.91	...	9.65	7.16
March ...	599	520	50	1	132	1,302	30	53	11	...	13	107	4.18	9.98	13.10	...	9.32	7.26
April ...	737	445	34	1	203	1,420	31	43	7	...	16	97	4.30	8.64	12.50	...	7.82	6.55
May ...	1,457	568	42	1	237	2,305	57	51	5	1	24	138	5.27	9.66	10.90	...	10.88	7.35
June ...	1,368	593	59	1	270	2,291	59	55	2	...	16	132	5.13	9.91	3.60	66.67	6.41	6.57
July ...	1,561	794	102	...	204	2,661	65	88	11	...	12	176	4.60	12.07	14.67	...	5.24	7.19
Aug. ...	1,278	650	149	1	215	2,293	57	77	27	1	17	179	4.37	11.86	22.22	66.67	8.23	7.84
Sept. ...	1,711	874	181	...	225	2,991	49	83	26	...	12	170	3.00	10.57	17.93	...	5.34	6.10
Oct. ...	1,726	903	146	...	257	3,032	52	107	22	...	12	193	3.14	12.28	15.07	...	4.68	6.58
Nov. ...	1,516	714	109	...	219	2,558	35	92	14	...	10	151	2.23	12.55	10.26	...	4.32	5.66
Dec. ...	1,294	592	65	...	169	2,120	54	80	11	...	14	159	4.04	11.83	11.64	...	7.43	6.93
Totals	14,539	7,622	1,129	13	2,365	25,668	542	849	175	4	167	1,737	3.81	11.15	14.22	30.77	7.07	6.83

The total monthly admissions were lowest in February (*August*),* and highest in October (*October*).

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

During the thirty 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 twelve times in February, four times in March, eight 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, fifteen 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, nine times in April, nine times in May, eight times in June, and once in July; and rose to the maximum once in May, six times in September, twelve times in October, ten times in November, and once in December.

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, six times in April, and once in August; while the maximum admissions took place once in July, once in August, twice in September, four times in October, twice in November, and thrice 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

* Months in italics in brackets are the corresponding months for 1900.

the accommodation in the Managers' hospitals became completely exhausted, and consequently any further rise in the number of admissions was impossible.

The maximum death-rate was for scarlet fever in May, for diphtheria in November, and for enteric fever in August. The minimum rate was for scarlet fever in November, for diphtheria in April, and for enteric fever in June.

TABLE III.—Admissions and Deaths of Patients at Fever Hospitals during 1901, divided according to Parishes or Unions.

PARISH OR UNION.	Scarlet.	Diphtheria.	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.
Kensington	370	169	49	2	43	633	48
Hammersmith	252	149	28	...	24	453	43
Fulham	505	477	47	...	73	1,102	68
Paddington	390	239	26	...	38	693	44
Chelsea	152	49	12	...	19	232	11
St. George's, Hanover Square	224	82	10	...	30	346	15
Westminster... ..	100	47	11	...	24	182	7
St. Marylebone	307	161	26	...	39	533	40
St. Pancras	839	625	57	...	115	1,636	125
Hampstead	130	82	10	...	10	232	20
Islington	927	563	80	...	112	1,682	120
Hackney	721	686	65	...	157	1,629	113
St. Giles & St. George, Bloomsbury	110	31	3	...	9	153	3
Strand	53	9	...	...	9	71	6
Holborn	579	283	40	...	72	974	67
London, City of	81	39	7	...	13	140	13
Shoreditch	466	204	36	...	119	825	54
Bethnal Green	636	220	34	...	82	972	76
Whitechapel	272	142	14	...	82	510	29
St. George-in-the-East	129	71	21	...	36	257	20
Stepney	204	150	29	1	66	450	35
Mile End Old Town	253	118	30	1	58	460	37
Poplar	408	390	74	...	131	1,003	69
Southwark	1,196	352	48	...	173	1,769	112
St. Olave's	775	203	72	1	130	1,181	86
Lambeth	798	332	46	...	132	1,308	71
Wandsworth and Clapham	962	483	70	...	122	1,637	89
Camberwell	1,050	472	53	...	156	1,731	143
Greenwich	661	358	37	8	125	1,189	80
Woolwich	305	167	42	...	63	577	32
Lewisham	332	178	28	...	55	593	33
Port of London	1	...	...	...	...	1	...
Tottenham	349	90	24	...	48	511	27
Beyond Metropolitan Area	2	1	...	...	...	3	1
Totals	14,539	7,622	1,129	13	2,365	25,668	1,737

In several districts mentioned in the foregoing table III. the admissions were considerably in excess of those of the previous year, the most notable instances being, as regards scarlet fever cases, Holborn, 579 (303)*; Shoreditch, 466 (252); Bethnal Green, 636 (216); Poplar, 408 (296); Southwark, 1,196 (626); St. Olave's, 775 (320); and Camberwell, 1,050 (528); and as regards diphtheria cases, Paddington, 239 (104); St. Pancras, 625 (418); Hackney, 686 (466); and Holborn, 283 (148).

* The italic figures in bracket throughout are the corresponding figures for 1900.

SCARLET FEVER.—TABLE IV.—Admissions, Deaths, and Mortality per cent. of Scarlet Fever Patients during 1901, divided according to age and sex.

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 ...	86	17	19·77	68	13	19·12	154	30	19·48
1 to 2 ...	287	42	14·63	255	29	11·37	542	71	13·10
2 ,, 3 ...	536	52	9·70	492	59	11·99	1,028	111	10·80
3 ,, 4 ...	639	56	8·76	655	39	5·95	1,294	95	7·34
4 ,, 5 ...	744	27	3·63	751	30	3·99	1,495	57	3·81
Totals under 5 years ...	2,292	194	8·46	2,222	170	7·65	4,514	364	8·06
5 to 10 ...	2,566	70	2·73	2,896	43	1·48	5,462	113	2·07
10 ,, 15 ...	1,171	10	0·86	1,293	18	1·39	2,464	28	1·18
15 ,, 20 ...	568	7	1·21	502	9	1·79	1,070	16	1·40
20 ,, 25 ...	284	7	2·46	293	7	2·39	577	14	2·43
25 ,, 30 ...	115	...	...	152	2	1·32	267	2	0·74
30 ,, 35 ...	52	1	1·92	52	...	...	104	1	0·96
35 ,, 40 ...	19	2	10·53	27	1	3·70	46	3	6·52
40 ,, 45 ...	10	...	...	11	...	...	21	...	...
45 ,, 50 ...	3	...	...	5	...	...	8	...	...
50 ,, 55 ...	3	1	33·33	2	...	...	5	1	20·00
55 ,, 60 ...	...	...	...	...	...	...	...	...	...
And upwards	1	...	...	1	...	...	2	...	...
Grand Totals	7,084	292	4·12	7,455	250	3·35	14,539	542	3·73

The total admissions of scarlet fever cases in 1901 were 14,539 (10,343)*: the female were 371 (67) in excess of the male admissions. The total mortality, calculated on the admissions, was 3·73 (3·0) per cent.

DIPHTHERIA.—TABLE V.—Admissions, Deaths, and Mortality per cent. of Diphtheria Patients during 1901, divided according to age and sex.

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 ...	66	21	31·82	51	20	39·22	117	41	35·04
1 to 2 ...	228	60	26·20	203	59	29·06	431	119	27·55
2 ,, 3 ...	375	78	20·80	330	63	19·09	705	141	20·00
3 ,, 4 ...	445	65	14·61	436	62	14·22	881	127	14·42
4 ,, 5 ...	472	64	13·53	503	56	11·13	975	120	12·30
Total under 5 years ...	1,588	288	18·14	1,523	260	17·07	3,111	548	17·62
5 to 10 ...	1,259	117	9·29	1,453	129	8·88	2,712	246	9·07
10 ,, 15 ...	404	18	4·46	494	20	4·05	898	38	4·23
15 ,, 20 ...	186	6	3·23	193	1	0·52	379	7	1·85
20 ,, 25 ...	91	...	...	129	1	0·78	220	1	0·45
25 ,, 30 ...	50	1	2·00	80	2	2·50	130	3	2·31
30 ,, 35 ...	27	3	11·11	59	...	...	86	3	3·49
35 ,, 40 ...	13	...	...	23	1	4·35	36	1	2·78
40 ,, 45 ...	11	...	...	11	...	...	22	...	...
45 ,, 50 ...	7	...	...	12	1	8·33	19	1	5·26
50 ,, 55 ...	...	...	...	5	...	...	5	...	...
55 ,, 60 ...	1	...	...	2	1	50·00	3	1	33·33
And upwards	2	...	...	1	...	...	3	...	...
Grand Totals	3,637	433	11·90	3,985	416	10·44	7,622	849	11·14

* Italic figures in brackets throughout are the corresponding figures for 1900.

The total admissions were fewer in number by 149 cases than in 1900, and the death-rate, 11.14 per cent., was 1.42 below that of the previous year, and was the lowest on record.

ENTERIC FEVER.—TABLE VI.—Admissions, Deaths, and Mortality per cent. of Enteric Fever Patients during 1901, divided according to age and sex:—

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 5 ...	20	1	5.00	24	4	16.67	44	5	11.36
5 to 10 ...	59	7	11.86	65	3	4.62	124	10	8.06
10 ,, 15 ...	111	6	5.41	95	11	11.58	206	17	8.25
15 ,, 20 ...	126	25	19.84	80	9	11.25	206	34	16.50
20 ,, 25 ...	97	15	15.46	84	7	8.33	181	22	12.15
25 ,, 30 ...	60	15	25.00	72	14	19.44	132	29	21.97
30 ,, 35 ...	52	14	26.92	35	6	17.14	87	20	22.99
35 ,, 40 ...	36	11	30.56	35	6	17.14	71	17	23.94
40 ,, 45 ...	25	8	32.00	9	1	11.11	34	9	26.47
45 ,, 50 ...	8	1	12.50	22	7	31.82	30	8	26.67
50 ,, 55 ...	2	1	50.00	4	1	25.00	6	2	33.33
55 ,, 60 ...	1	1	100.00	2	1	50.00	3	2	66.67
And upwards	2	...	...	3	...	...	5	...	...
Totals ...	599	105	17.53	530	70	13.21	1,129	175	15.50

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

There were 599 fewer cases of enteric fever admitted than during 1900.

The total death-rate was 1.3 per cent. higher than in that year.

Thirteen (4)* cases of typhus fever were admitted during the year 1901, and they are entered in the following table:—

TYPHUS FEVER.—TABLE VIIA.—Admissions and Deaths of Typhus Fever Patients during 1901, divided according to age and sex.

AGES.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5 ...	2	...	...	...	2	...
5 to 10 ...	2	...	...	...	2	...
10 ,, 15 ...	1	...	...	...	1	...
15 ,, 20 ...	...	...	1	...	1	...
20 ,, 25 ...	2	1	1	...	3	1
25 ,, 30 ...	...	...	...	...	...	...
30 ,, 35 ...	...	...	...	...	...	...
35 ,, 40 ...	1	1	1	1	2	2
40 ,, 45 ...	...	...	1	1	1	1
45 ,, 50 ...	...	...	...	...	...	...
50 ,, 55 ...	1	...	...	...	1	...
55 ,, 60 ...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...
Totals ...	9	2	4	2	13	4

N.B.—In the above table three cases were treated at the Eastern and one at the Grove Hospital.

Table VIII., pp. 93-102, gives details of the cases of miscellaneous diseases admitted during 1901, and is further referred to in the paragraph on p. 31 relating to cases of mistaken diagnosis.

* The italic figures in brackets throughout are the corresponding figures for 1900.

LENGTH OF RESIDENCE OF PATIENTS IN HOSPITAL.

We have again had tables prepared to show the length of residence of patients treated in the Managers' hospitals.

For scarlet fever and diphtheria there are two tables for each disease, one dealing with cases treated to termination at the Board's town hospitals and the other with cases completing their treatment at the convalescent hospitals.

SCARLET FEVER PATIENTS.

TABLE IXA.—Length of Residence of Scarlet Fever Patients treated to Recovery or Death in the Board's Town Hospitals during the year 1901.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence.	Recovered Cases only.	Number of Days' Residence.	Average Residence.
Eastern	109 (186)*	5,227 (11,560)	47·95 (62·2)	98 (161)	4,993 (11,002)	50·95 (68·4)
North-Eastern ...	1,373 (1,401)	85,304 (94,596)	62·13 (67·5)	1,279 (1,362)	84,014 (93,934)	65·69 (69·0)
North-Western ...	743 (549)	43,135 (30,139)	58·06 (54·9)	660 (502)	41,643 (29,391)	63·09 (58·5)
Western	757 (617)	49,571 (43,318)	65·48 (70·2)	707 (575)	48,786 (42,805)	69·00 (74·4)
South-Western ...	807 (744)	52,628 (49,851)	65·21 (67·0)	755 (723)	51,616 (49,388)	68·37 (68·3)
Fountain	1,674 (581)	99,291 (39,917)	59·31 (68·7)	1,621 (561)	98,520 (39,518)	60·78 (70·6)
Grove	133 (234)	8,753 (14,189)	62·06 (60·6)	123 (219)	8,059 (13,843)	65·76 (63·2)
South-Eastern ...	457 (472)	28,697 (28,643)	62·79 (60·7)	408 (438)	27,563 (28,127)	67·56 (64·2)
Park	1,734 (599)	86,707 (38,848)	50·00 (64·9)	1,634 (562)	85,423 (38,275)	52·28 (68·1)
Brook	1,263 (988)	81,680 (70,040)	64·67 (70·9)	1,228 (958)	81,234 (69,451)	66·15 (72·5)
Totals	9,050 (6,371)	540,493 (421,101)	59·72 (66·1)	8,513 (6,060)	531,881 (415,734)	62·48 (68·6)

TABLE IXB.—Length of Residence of Scarlet Fever Patients who completed their Recovery or Died at the Board's Convalescent Hospitals during the year 1901.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.			Average Residence.			Recovered Cases only.	Number of Days' Residence.			Average Residence.		
		Town Hospital.	Convalescent Hospital.	Total.	Town Hospital.	Convalescent Hospital.	Total.		Town Hospital.	Convalescent Hospital.	Total.	Town Hospital.	Convalescent Hospital.	Total.
Northern...	3,708 (2,223)	109,910 (69,630)	160,728 (108,583)	270,638 (178,213)	29·64 (31·3)	43·35 (48·8)	72·99 (80·1)	3,703 (2,221)	109,736 (69,559)	160,611 (108,508)	270,347 (178,067)	29·63 (31·3)	43·37 (48·9)	73·01 (80·2)
Gore Farm	1,142 (2,156)	33,050 (64,131)	58,492 (108,005)	91,542 (172,136)	28·94 (29·7)	51·22 (50·1)	80·16 (79·8)	1,142 (2,156)	33,050 (64,131)	58,492 (108,005)	91,542 (172,136)	28·94 (29·7)	51·22 (50·1)	80·16 (79·8)
Total ..	4,850 (4,379)	142,960 (133,761)	219,220 (216,588)	362,180 (350,349)	29·47 (30·5)	45·2 (49·5)	74·08 (80·0)	4,845 (4,377)	142,786 (133,690)	219,103 (216,513)	361,889 (350,203)	29·47 (30·5)	45·22 (49·5)	74·69 (80·0)

* The italic figures in brackets throughout are the corresponding figures for 1900.

The average duration of residence of scarlet fever cases was at the town hospitals 59.72 (66.1)* days including deaths, and 62.48 (68.6) days if the fatal cases be excluded. At the convalescent hospitals the averages were 74.68 and 74.69 (80.0) respectively (including residence in the town hospitals). So that, on the whole, the total residence of cases completing their recovery at the country hospitals was 12.21 days longer than that of cases at the town hospitals.

As regards the residence of the recovered patients in the town hospitals, there are very considerable variations. The shortest residence was 50.95 (58.5) days at the Eastern Hospital (*North-Western Hospital*), or 11.53 (10.1) below the average, and the longest was 69.00 (74.4), or 6.52 (5.8) days above the average, at the Western Hospital (*Western Hospital*).

DIPHTHERIA PATIENTS. TABLE XA.—Length of Residence of Diphtheria Patients treated to Recovery or Death in the Board's Town Hospitals during the year 1901.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence.	Recovered Cases only.	Number of Days' Residence.	Average Residence.
Eastern ...	1,066 (1,046)	58,830 (58,069)	55.19 (52.6)	917 (846)	57,223 (52,330)	62.40 (61.9)
North-Eastern ...	316 (13)	11,368 (731)	34.97 (56.2)	252 (10)	10,803 (721)	42.86 (76.1)
North-Western ...	873 (794)	38,510 (35,030)	44.11 (44.1)	751 (680)	37,107 (33,634)	49.41 (49.5)
Western ...	656 (791)	34,913 (41,616)	53.22 (52.6)	570 (691)	34,138 (40,957)	59.89 (59.3)
South-Western ...	422 (569)	20,253 (24,270)	47.99 (42.7)	380 (500)	19,871 (23,653)	52.29 (47.3)
Fountain ...	97 (651)	6,084 (34,662)	62.72 (53.2)	96 (598)	6,077 (33,892)	63.30 (56.7)
Grove ...	1,226 (569)	69,988 (35,879)	57.09 (63.1)	1,135 (519)	69,025 (35,261)	60.81 (67.9)
South-Eastern ...	628 (835)	37,412 (47,666)	59.57 (57.1)	538 (688)	36,276 (46,101)	67.43 (67.0)
Park ...	840 (1,098)	35,017 (53,288)	41.69 (48.5)	724 (937)	33,920 (51,480)	46.85 (54.9)
Brook ...	802 (829)	42,289 (48,320)	52.73 (58.3)	714 (738)	41,557 (47,469)	58.20 (64.3)
Totals ...	6,926 (7,195)	354,664 (376,368)	51.21 (52.3)	6,077 (6,207)	345,997 (365,498)	56.94 (58.9)

* Italic figures, &c., in brackets throughout are the corresponding items for 1900.

TABLE Xb.—Length of Residence of Diphtheria Patients who completed their Recovery or Died at the Board's Convalescent Hospitals during the year 1901.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.			Average Residence.			Recovered Cases only.	Number of Days' Residence.			Average Residence.		
		Town Hospital.	Convalescent Hospital.	Total.	Town Hospital.	Convalescent Hospital.	Total.		Town Hospital.	Convalescent Hospital.	Total.	Town Hospital.	Convalescent Hospital.	Total.
Northern...	(No deaths.) (No deaths)*	...	...	...	592 (469)	23,069 (17,467)	22,245 (19,061)	45,314 (36,528)	33·97 (37·2)	37·57 (40·6)	76·54 (77·8)	
Gore Farm	(No deaths.) (No deaths.)	...	...	...	88 (565)	3,447 (24,248)	6,169 (17,833)	9,616 (42,181)	39·17 (42·9)	70·10 (51·7)	109·27 (74·6)	
Total	680 (1,034)	26,516 (41,715)	28,414 (36,894)	54,930 (78,709)	38·99 (40·3)	41·79 (35·8)	80·78 (76·1)	

The average length of residence of diphtheria patients at the town hospitals was 51·21 (52·3) days including deaths, and 56·94 (58·9) if the fatal cases be omitted. At the convalescent hospitals, where there was no death, the average residence (including residence in the town hospitals) was 80·78 (76·1) days, or 23·84 days longer than in the town hospitals.

The variations in length of residence at different hospitals are again very remarkable, ranging from 42·86 (47·3) days at the North-Eastern Hospital (South-Western Hospital), 14·08 (11·6) days below the average, to 67·43 (67·9) days at the South-Eastern Hospital (Grove Hospital), or 10·49 (9·0) days above the average.

ENTERIC
FEVER
PATIENTS.

TABLE XI.—Length of Residence of Enteric Fever Patients treated to Recovery or Death in the Board's Town Hospitals during the year 1901.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence.	Recovered Cases only.	Number of Days' Residence.	Average Residence.
Eastern ...	165 (214)	10,417 (10,855)	63·13 (50·7)	155 (180)	10,228 (10,414)	65·99 (57·9)
North-Eastern ...	31 (5)	1,272 (330)	41·03 (66·0)	23 (5)	1,235 (330)	53·69 (66·0)
North-Western ...	237 (326)	9,985 (13,836)	42·13 (42·4)	194 (270)	9,485 (13,173)	48·89 (48·8)
Western ...	134 (171)	9,345 (11,974)	69·74 (70·0)	119 (155)	9,185 (11,690)	77·18 (75·4)
South-Western ...	73 (100)	4,123 (5,549)	56·48 (55·5)	62 (85)	4,041 (5,393)	65·18 (63·4)
Grove ...	227 (350)	13,853 (19,031)	61·26 (54·4)	202 (298)	13,392 (18,365)	66·29 (61·6)
South-Eastern ...	107 (212)	6,634 (10,747)	62·00 (50·7)	93 (189)	6,484 (10,374)	69·72 (54·9)
Park ...	168 (214)	7,950 (10,994)	47·32 (51·4)	146 (179)	7,604 (10,559)	52·08 (58·9)
Brook ...	190 (159)	10,884 (8,930)	57·28 (56·2)	163 (145)	10,555 (8,742)	64·75 (60·3)
Total ...	1,332 (1,751)	74,463 (92,246)	55·90 (52·7)	1,157 (1,506)	72,209 (89,040)	62·41 (59·1)

* The italic figures, &c., in brackets throughout are the corresponding items for 1900.

The average residence of enteric fever patients was 55.90 (52.7) days including deaths, and 62.41 (59.1)* days if the fatal cases be excluded. The shortest residence of recovered cases was 48.89 (48.8) days, or 13.52 (10.3) days below the average, at the North-Western Hospital (*North-Western Hospital*), and the longest 77.18 (75.4) days, or 14.77 (16.3) days above the average, at the Western Hospital (*Western Hospital*).

MISCELLANEOUS DISEASES.

TABLE XII.—*Length of Residence of Patients suffering from Miscellaneous Diseases treated to Recovery or Death in the Board's Town Hospitals during the year 1901.*

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence.	Recovered Cases only.	Number of Days' Residence.	Average Residence.
Eastern	237 (245)	6,316 (6,640)	26.65 (27.1)	215 (217)	6,085 (6,386)	28.30 (29.4)
North-Eastern	379 (108)	10,009 (3,582)	26.41 (33.1)	363 (103)	9,813 (3,551)	27.03 (34.5)
North-Western	227 (189)	5,144 (3,743)	22.66 (19.8)	200 (158)	4,751 (3,497)	23.75 (22.1)
Western	141 (164)	3,243 (4,258)	23.00 (26.0)	126 (152)	2,874 (4,239)	22.81 (27.9)
South-Western	144 (87)	4,668 (2,824)	32.42 (32.5)	132 (77)	4,579 (2,772)	34.69 (36.0)
Fountain	71 (126)	1,176 (2,409)	16.56 (19.1)	67 (125)	1,162 (2,395)	17.64 (19.2)
Grove	264 (126)	7,851 (3,609)	29.74 (28.6)	244 (104)	7,651 (3,330)	30.99 (32.0)
South-Eastern	266 (215)	5,197 (5,092)	19.54 (23.7)	242 (189)	5,007 (4,757)	20.69 (25.2)
Park	446 (310)	7,608 (4,981)	17.06 (16.1)	434 (293)	7,518 (4,895)	17.32 (16.7)
Brook	190 (102)	4,207 (2,478)	22.14 (24.3)	175 (87)	3,923 (2,330)	22.42 (27.4)
Totals	2,365 (1,672)	55,419 (39,616)	23.43 (23.7)	2,198 (1,505)	53,363 (38,202)	24.28 (25.4)

Of the cases of miscellaneous diseases (cases of mistaken diagnosis) treated, the average residence of each patient was 23.43 (23.7) days including deaths, and 24.28 (25.4) days if the fatal cases be excluded. The shortest residence of recovered cases was at the Park Hospital (*Park Hospital*), 17.32 (16.7) days, or 6.96 (8.7) days below the average, and the longest at the South-Western Hospital (*South-Western Hospital*), 34.69 (36.0) days, or 10.41 (10.6) days above the average.

* Italic figures, &c., in brackets throughout are the corresponding items for 1900.

SMALLPOX PATIENTS. Of smallpox patients 1,033 were treated. Average residence, including deaths, 24·10 days, or, excluding deaths, 29·94 days.

SMALLPOX. Certain modifications have been introduced into the smallpox statistical tables, with the view of affording a more complete analysis of the condition of the patients as regards vaccination.

Table I. shows as heretofore the number of patients admitted from each parish or union, during each month of the year 1901, the deaths, the discharges, and the number remaining at the end of the year, but the column formerly headed "No evidence" (*i.e.*, as to vaccination) is now headed "Vaccination evidence inconclusive."

TABLE II.—The practice of preparing three tables—IIA. Males, IIB. Females, and IIC. Males and Females together—has been abandoned, as the distinction of sex is believed to have no value commensurate with the labour involved in preparing the table. Table II., therefore, includes particulars of all the patients, males and females, admitted. The cases are divided into three classes:—A—vaccinated class, B—"doubtful" class (*i.e.*, evidence as to vaccination inconclusive), and C—unvaccinated class. Classes B and C are further subdivided into classes B₁ and C₁—"vaccinated unsuccessfully during the period of incubation of smallpox," and classes B₂ and C₂—"successfully vaccinated during the period of incubation of smallpox." The two subdivisions of each class are totalled, and these total columns are comparable with the columns which have appeared in the reports of former years headed "Cases in which there was no evidence as to cicatrices," and "Cases in which vaccination cicatrix was absent."

Three supplemental tables have been added:—One containing an analysis of the cases placed in the "doubtful" class in Table II., showing the reasons for considering the evidence as to their vaccination inconclusive; the second containing an analysis of the cases included in Table II. which had been successfully vaccinated or revaccinated during the period of incubation of smallpox; and the third being a list of list of cases stated to have previously suffered from smallpox, and included in Table II.

TABLE XIII.—The following table is a condensed form of Table I. (smallpox) on pp. 110-12:—

TABLE XIII.—Admissions, Deaths, and Discharges at Smallpox Hospitals during 1901.

PARISH OR UNION.	Remaining in Hospital on 1st January, 1901.			Admissions.			Deaths.			Discharges.			Remaining in Hospital on 31st December, 1901.			
	Vaccinated.	Doubtful.	Unvaccinated.	Class A.	Class B.	Class C.	Class A.	Class B.	Class C.	Class A.	Class B.	Class C.	Class A.	Class B.	Class C.	Total.
Kenington	12	5	15	...	...	1	7	1	1	7	1	...	6
Hammersmith	36	5	46	...	...	3	4	...	...	4	...	...	26
Fulham	16	1	19	...	...	1	3	...	...	3	...	...	12
Paddington	12	1	15	...	...	...	...	...	...	...	...	...	...
Chelsea	6	...	6	...	...	...	...	...	...	...	...	...	1
St. George's	10	1	13	...	...	...	...	...	...	...	...	...	6
Westminster	19	...	23	...	...	...	...	...	...	...	...	...	8
St. Marylebone	46	1	58	...	...	...	...	...	...	...	...	...	6
St. Pancras	104	14	122	...	...	...	...	...	...	...	...	...	72
Hampstead	6	...	9	...	...	...	...	...	...	...	...	...	2
Islington	46	5	56	...	...	...	...	...	...	...	...	...	17
Hackney	51	2	67	...	...	...	...	...	...	...	...	...	33
St. Giles and St. George, Bloomsbury	100	2	126	...	...	...	...	...	...	...	...	...	72
Strand	36	3	49	...	...	...	...	...	...	...	...	...	18
Holborn	128	10	168	...	...	...	...	...	...	...	...	...	66
London, City of	7	2	12	...	...	...	...	...	...	...	...	...	4
Shoreditch	10	4	19	...	...	...	...	...	...	...	...	...	7
Bethnal Green	18	1	25	...	...	...	...	...	...	...	...	...	12
Whitechapel	67	2	78	...	...	...	...	...	...	...	...	...	51
St. George-in-the-East	5	4	9	...	...	...	...	...	...	...	...	...	5
Stepney	27	1	33	...	...	...	...	...	...	...	...	...	24
Mile End Old Town	20	...	29	...	...	...	...	...	...	...	...	...	18
Poplar	34	2	46	...	...	...	...	...	...	...	...	...	30
St. Saviour's	63	3	71	...	...	...	...	...	...	...	...	...	43
St. Olave's	71	8	85	...	...	...	...	...	...	...	...	...	31
Lambeth	41	3	52	...	...	...	...	...	...	...	...	...	41
Wandsworth and Clapham	58	3	66	...	...	...	...	...	...	...	...	...	25
Camberwell	28	...	36	...	...	...	...	...	...	...	...	...	12
Greenwich	10	2	14	...	...	...	...	...	...	...	...	...	23
Woolwich	20	...	23	...	...	...	...	...	...	...	...	...	1
Lewisham	3	2	7	...	...	...	...	...	...	...	...	...	6
Port of London	4
Beyond Metropolitan area	113	7	139	...	...	...	...	...	...	...	...	...	40
Totals ...	1,282	89	372	1,743	112	38	107	257	658	17	101	776	512	34	165	711

N. B.—Admissions, &c., from "other diseases" during the year are not included in this return. The columns headed "Doubtful" contain the particulars of cases stated to have been vaccinated but having no visible evidence of the operation, and also of those in which no statement was made, but the nature of the eruption or other cause prevented any observation of the marks, if any existed. An analysis of these cases appears in Table XV., p. 30.

In addition to the 1,743 genuine smallpox cases included in the foregoing table, there were of non-smallpox cases 27 (*1*)* admitted to the smallpox hospitals (exclusive of 8 infants who were admitted with their mothers while in the incubation stage of the disease); 73 (*18*) detained at the observation shelters at South Wharf for upwards of two days; 157 (*12*) were returned direct to their homes on the day of admission or the following day, 4 were transferred to a fever hospital, and 3 died at South Wharf.

TABLE II., pp. 113-17, shows the ages and condition as regards vaccination of the patients admitted during 1901. All of the 1,743 cases admitted during the year had been completed (*i.e.*, had died or been discharged recovered) before the date of this report. It has therefore been possible to deal with the whole number in this table.

To meet demands made at the time for information as to the vaccination of the cases admitted, we, on the 10th January, 1902, issued an interim report. The report dealt with 1,017 cases and showed a death-rate amongst vaccinated class of cases of 14·21, amongst doubtful class of cases of 65·08, and amongst unvaccinated class of cases of 50·52, and a total death-rate of 24·29. We pointed out that many cases of recent admissions had been included because they had been completed by death; whereas the contemporary cases, which would nearly all ultimately recover, could not be included until completed by discharge; and that the result was that the rates of mortality given were undoubtedly higher than they would be when all the cases should have been completed and the final rates ascertained. This has now been done, and the following table is a summary of the totals of each class as shown in Table II., pp. 113-17, and of the revised mortality rates:—

TABLE XIV.

	Admissions.	Deaths.	Mortality per cent.
A. Vaccinated class:—			
A ¹ , half and upwards of half square inch total area of cicatrices ...	939	69	7·35
A ² , one-third, but less than half ditto ...	172	28	16·28
A ³ , less than one-third ditto ...	159	23	14·47
A ⁴ , area not recorded ...	12	7	58·34
Totals of vaccinated class ...	1,282	127	9·91
B. Doubtful class ...	89	46	51·69
C. Unvaccinated class ...	372	119	31·99
Grand totals ...	1,743	292	16·75

Under ten there were only 20 vaccinated cases and no death; 4 doubtful cases, of whom 1 died; and 192 unvaccinated cases, of whom 65 died—a percentage of 33·85.

Under 20, there were 264 vaccinated cases, of whom 3 died—a percentage of 1·14; 14 doubtful cases, of whom 3 died—a percentage of 21·43; and 309 unvaccinated cases, of whom 95 died—a percentage of 30·74.

The diminution after the age of 20 years in the protective power afforded by infant vaccination is shown by the rise in the death-rate from 6·67 in vaccinated cases between 20 and 25 years of age to 18·31 in cases between 35 and 40.

* Italic figures in brackets throughout are the corresponding figures for 1900.

TABLE XV.—The following is a summary (at all ages) of the analysis in Table III., pp. 118-20, of the "doubtful" class of cases contained in Table II., pp. 113-17, and shows the reasons for considering the evidence as to vaccination inconclusive:—

	Admissions.	Deaths.	Mortality per cent.
CLASS I.—Cases stated to have been successfully vaccinated in which cicatrix was absent ...	63	23	36.51
CLASS II.—Cases in which the absence of cicatrices could not be asserted on account of the abundance of the eruption:— (a) Stated to have been successfully vaccinated (b) No statement or statement uncertain ...	22 1	20 1	91.00 100.00
Total ...	23	21	91.30
CLASS III.—Cases in which observation of cicatrices was not made, or was impossible from causes other than the abundance of the eruption:— (a) Stated to have been successfully vaccinated (b) No statement or statement uncertain ...	3 ...	2 ...	66.67 ...
Total ...	3	2	66.67
CLASS IV.—Cases in which it was doubtful whether the cicatrices were the result of vaccination:— (a) Stated to have been successfully vaccinated (b) No statement or statement uncertain ...	...	...	...
Total ...	...	...	...

TABLE XVI.—The following summarises Table IV., pp. 121-4, and shows the results at all ages of the analysis of cases included in Table II., p. 113-17, which had been successfully vaccinated or revaccinated, after having been infected by smallpox.

	Days on which Vaccination was stated to have been performed before day on which Rash appeared.									
	CLASS I. 11th to 15th Day.		CLASS II. 8th to 10th Day.		CLASS III. 5th to 7th Day.		CLASS IV. 4th Day before Rash.		CLASS V. Day Unascertained.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
	D.	C.	D.	C.	D.	C.	D.	C.	D.	C.
(a) Previously vaccinated and showing cicatrices...	9	...	22	4	23	2	1	13	1	1
(b) Evidence as to vaccination inconclusive ...	1	...	2	1	1	1	1	1	...	...
(c) Evidence of previous vaccination absent ...	11	...	39	2	7	4	5	7	2	4
Total ...	...	...	...	...	...	...	...	...	...	...

* Type of Disease:—D—Discrete; C—Confluent.

TABLE XVII.—The following particulars are taken from Table V., p. 125, which is a list of the cases stated to have previously suffered from smallpox and included in Table II., pp. 113–17. Number of cases, 7; type of disease, discrete; result, all recovered.

RE-VACCINATED CASES. A memorandum by Dr. Ricketts, medical superintendent, Smallpox Hospital Ships, with regard to patients alleged to have been successfully re-vaccinated before they contracted smallpox will be found on p. 126-7.

CASES OF MISTAKEN DIAGNOSIS. *Fever.*—In the course of the year 1901 no fewer than 2,365 (1,706)* patients, or a percentage on the total admissions of 9·2 (7·8), 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 (see Table VIII., pp. 93–102). The largest number of cases thus admitted to any one hospital was at the Park Hospital (*Park Hospital*), where the proportion was 436 (322) out of 3,643 (2,999) admissions, or 11·9 (10·7) per cent. of the total. The percentage on the total scarlet fever cases was 5·6 (5·5), diphtheria cases 12·8 (8·3), and enteric fever cases 25·5 (18·2).

Amongst the 857 (608) cases wrongly certified as scarlet fever there were 91 (63) of measles, 108 (106) of rubella, 173 (129) of tonsilitis, 162 (104) of erythema, and 168 (60) had no obvious disease. Amongst the 1,118 (709) cases wrongly certified as diphtheria were 47 (40) of measles, 880 (498) of tonsilitis, and 21 had no obvious disease. Amongst the 384 (386) cases wrongly certified as enteric fever were 13 (21) of influenza, 22 (24) of febricula, 86 (89) of pneumonia, 9 (14) of bronchitis, and 12 had no obvious disease.

Smallpox.—In the case of smallpox the original medical certificate is revised by the examination of a medical officer of the Board at the London wharves. 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 245 (30) out of 1,845 (94), or 13·3 (32·0) per cent.; and these are the figures properly to be compared with those given above in the case of fever.

(5.) FEVER.—The return on p. 33 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.

Statistics since Establishment of the Managers' Hospitals.

* Figures, &c., in italics in brackets throughout are the corresponding items for 1900.

There was again an increase in the mortality amongst scarlet fever patients, the rate being 3.81 as compared with 2.97 in 1900 and 2.65 in 1899.

There is, however, a further decline in the percentage mortality amongst diphtheria patients from 12.27 to 11.15. The mortality rate from this disease fell from 40.74 in 1889 to 29.29 in 1894; to 22.85 in 1895 (when the antitoxic serum treatment was first adopted); to 21.20 in 1896; to 17.69 in 1897; 15.37 in 1898; 13.95 in 1899; 12.27 in 1900; and 11.15 in 1901.

In connection with the mortality of diphtheria cases, we draw special attention to the rate per 1,000 of the estimated population. For some years prior to 1893 it had been steadily advancing, notwithstanding occasional reductions, until in the year mentioned it had attained the very high figure of 0.76. Since 1893, however, the rate has shown a distinct tendency to fall, and this fall has been coincident with the introduction and increasing use of the antitoxic serum treatment of diphtheria. The slight rises in the rates of 1896 and 1899 coincided with the increased prevalence of the disease in those years (see Table A₂, p. 14).

Smallpox.—In the case of smallpox the original medical certificate is revised by the examination of a medical officer of the Board at the London Wharves. 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 245 (30) out of 1,845 (32), or 13.3 (32.0) per cent.; and these are the figures properly to be compared with those given above in the case of fever.

(5) *Fever.*—The return on p. 22 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.

* Figures, &c., in italics in brackets throughout are the corresponding items for 1900.

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

YEAR.	ADMISSIONS.					DEATHS.					Mortality per cent. of Patients treated in Managers' Hospitals.					Annual Mortality per 1,000 of estimated Population.					
	Scarlet.	Diphtheria	Typhus.	Enteric.	Other Diseases.	Total.	Scarlet.	Diphtheria	Typhus.	Enteric.	Other Diseases.	Total.	Scarlet.	Diphtheria	Typhus.	Enteric.	Scarlet.	Diphtheria	Typhus.	Enteric.	
1871
1872	108	...	134	279	343	864	11	...	30	57	70	168	10.78	...	23.62	21.96	0.58	0.11	0.12	0.27	
1873	92	...	401	381	271	1,145	6	...	91	56	58	211	6.55	...	23.15	15.13	0.28	0.08	0.05	0.24	
1874	804	...	536	435	359	2,134	89	...	106	63	84	342	12.15	...	19.62	14.87	0.77	0.12	0.09	0.26	
1875	1,182	...	65	299	269	1,815	160	...	16	78	54	308	13.69	...	23.85	24.68	1.06	0.17	0.04	0.23	
1876	671	...	139	288	294	1,392	90	...	28	59	71	248	12.13	...	19.31	20.34	0.65	0.11	0.04	0.22	
1877	479	...	170	372	186	1,207	54	...	36	79	33	202	12.10	...	23.07	22.93	0.44	0.09	0.04	0.25	
1878	679	...	168	484	233	1,564	91	...	47	100	40	278	14.34	...	26.25	20.26	0.49	0.15	0.04	0.28	
1879	1,469	...	48	385	196	2,098	211	...	11	74	39	335	15.27	...	21.56	19.73	0.72	0.15	0.02	0.23	
1880	1,949	...	28	248	239	2,464	242	...	6	43	37	328	12.30	...	20.68	15.63	0.82	0.14	0.02	0.19	
1881	1,477	...	219	415	211	2,322	168	...	34	86	46	334	11.10	...	16.95	21.47	0.55	0.17	0.02	0.25	
1882	1,850	...	148	515	354	2,867	189	...	27	104	60	380	10.37	...	16.92	20.71	0.52	0.22	0.01	0.25	
1883	1,920	...	45	486	269	2,720	234	...	11	74	66	385	12.38	...	21.15	15.64	0.51	0.24	0.01	0.25	
1884	1,845	...	29	493	180	2,547	234	...	5	98	55	392	12.27	...	20.00	18.82	0.36	0.24	0.01	0.23	
1885	1,353	...	53	220	229	1,855	130	...	7	36	46	219	9.47	...	12.17	15.82	0.18	0.23	0.01	0.15	
1886	1,780	...	10	333	74	2,197	151	...	4	47	22	224	9.04	...	42.10	14.85	0.17	0.21	0.00	0.15	
1887	5,900	...	35	441	161	6,537	489	...	4	61	59	613	9.54	...	11.59	14.59	0.36	0.23	0.00	0.15	
1888	4,408	99	1	450	194	5,152	501	46	...	72	60	679	9.89	59.35	...	14.64	0.30	0.32	0.00	0.17	
1889	4,518	722	23	290	219	5,772	366	275	6	41	48	736	8.85	40.74	31.57	15.15	0.19	0.39	0.00	0.13	
1890	6,537	942	16	498	341	8,334	510	316	5	93	81	1,005	7.86	33.55	25.66	19.68	0.21	0.33	0.00	0.15	
1891	5,292	1,312	18	755	462	7,809	357	397	1	106	102	963	6.67	30.63	5.88	14.52	0.14	0.32	0.00	0.13	
1892	13,093	2,009	19	430	725	16,276	839	583	2	65	140	1,629	7.28	29.35	9.76	13.20	0.27	0.46	0.00	0.10	
1893	14,548	2,848	2	544	732	18,674	901	865	1	110	105	1,982	6.11	30.42	50.00	20.54	0.37	0.76	0.00	0.16	
1894	11,598	3,666	6	534	863	16,667	717	1,085	1	96	150	1,999	5.92	29.29	16.67	18.13	0.22	0.62	0.00	0.15	
1895	11,271	3,635	3	661	1,277	16,847	591	820	...	119	142	1,672	5.45	22.85	...	18.17	0.19	0.54	0.00	0.14	
1896	15,982	4,508	9	600	1,174	22,273	666	948	2	96	109	1,821	4.29	21.20	25.0	15.84	0.21	0.60	0.00	0.13	
1897	15,113	5,673	2	664	1,417	22,869	619	987	...	124	140	1,870	4.07	17.69	...	18.64	0.18	0.51	0.00	0.12	
1898	12,125	6,566	9	869	1,488	21,057	514	991	1	143	147	1,796	4.12	15.37	11.11	17.73	0.13	0.39	0.00	0.13	
1899	13,290	8,676	11	1,535	1,982	25,094	333	1,182	...	240	160	1,935	2.65	13.95	...	16.47	0.09	0.43	0.00	0.17	
1900	10,343	7,873	4	1,728	1,706	21,654	313	988	1	245	167	1,714	2.97	12.27	22.22	14.09	0.08	0.34	0.00	0.16	
1901	14,539	7,622	13	1,129	2,365	25,668	542	849	4	175	167	1,737	3.81	11.15	30.77	14.22	0.13	0.29	0.00	0.11	
Totals	174,185	56,151	2,364	15,761	18,413	269,874	10,338	10,282	487	2,840	2,558	26,505	5.92	18.50	20.60	18.10

NOTE.—1. From 1st December, 1870, to the end of September, 1871, smallpox cases only were admitted to the Board's hospitals.

2. The deaths of fever patients include those deaths due to intercurrent maladies.

3. Diphtheria cases have only been admitted into the Managers' hospitals since 23rd October, 1888. The use of antitoxic serum in the treatment of diphtheria began in 1894.

4. The mortality rates of patients in the Managers' hospitals 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.

(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 XIX.—Admissions, Deaths, and Mortality per cent. of Smallpox Patients since 1st December, 1870, together with the Annual Mortality per 1,000 persons living of the Population of the Metropolis from Smallpox, extracted from the Registrar-General's Annual Summaries.

YEAR.	ADMISSIONS.			DEATHS.			Mortality per cent. of Patients treated in Managers' Hospitals.	Total Annual Mortality per 1,000 of estimated Population.
	Smallpox.	Other Diseases.	Total.	Smallpox	Other Diseases.	Total.	Smallpox.	Smallpox.
1st Dec., 1870, to 3rd Feb., 1871	582	...	582	97	...	97	20·81	...
1871-2 (4th Feb., 1871, to 31st Jan., 1872) ...	13,139	6	13,145	2,460	...	2,460	18·95	2·42
1872-3 (year ended 31st Jan., 1873)	2,359	3	2,362	467	1	468	17·84	0·54
1873-4 (year ended 31st Jan., 1874)	174	17	191	35	...	35	17·02	0·03
1874 (11 months ended 31st Dec.)	112	8	120	10	...	10		0·02
1875	89	22	111	22	...	22		0·01
1876	2,134	16	2,150	372	1	373	21·64	0·21
1877	6,516	104	6,620	1,214	4	1,218	17·92	0·71
1878	4,558	96	4,654	824	9	833	17·99	0·39
1879	1,628	60	1,688	273	5	278	15·69	0·12
1880	1,982	50	2,032	286	2	288	15·95	0·12
1881	8,551	120	8,671	1,417	14	1,431	16·61	0·62
1882	1,799	55	1,854	260	3	263	12·96	0·11
1883	598	28	626	93	...	93	16·06	0·03
1884	6,363	204	6,567	940	3	943	15·98	0·31
1885	6,146	198	6,344	1,052	3	1,055	15·80	0·35
1886	99	33	132	22	2	24	14·28	0·01
1887	56	3	59	3	...	3		0·00
1888	62	5	67	8	...	8		0·00
1889	5	...	5	...	...	...	...	...
1890	22	5	27	3	...	3	11·29	0·00
1891	63	1	64	8	...	8		0·00
1892	325	23	348	35	...	35		0·01
1893	2,376	*118	2,494	180	2	182	7·64	0·05
1894	1,117	*120	1,237	102	7	109	8·87	0·02
1895	941	*81	1,022	64	1	65	6·36	0·01
1896	190	*41	231	9	1	10	4·01	0·00
1897	70	*26	96	13	1	14	18·44	0·00
1898	5	*9	14	...	...	...	...	0·00
1899	18	*18	36	3	...	3	20·69	0·00
1900	66	*19	85	3	...	3	4·3	0·00
1901	1,743	*107	1,850	257	3	260	18·51	0·05
Totals	63,888	1,596	65,480	10,532	62	10,594	16·57	...

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

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

YEARS.	Estimated Population in the Middle of each Year.	DEATHS FROM SMALLPOX.		
		Annual Total.	Annual Rate per Million of Population.	Rate per Million on Averages of Five Years.
1838	1,766,169	3,817	2,161	—
1839	1,802,751	634	352	—
1840	1,840,091	1,235	671	—
1841	1,878,205	1,053	561	—
1842	1,917,108	360	188	787
1843	1,954,041	438	224	399
1844	2,033,816	1,804	887	506
1845	2,073,298	909	438	460
1846	2,113,535	257	122	372
1847	2,202,673	955	434	421
1848	2,244,837	1,620	722	521
1849	2,287,302	521	228	389
1850	2,330,054	499	214	344
1851	2,373,081	1,062	448	409
1852	2,416,367	1,159	480	418
1853	2,459,899	211	86	291
1854	2,503,662	694	277	301
1855	2,547,639	1,039	408	340
1856	2,591,815	531	205	291
1857	2,636,174	156	59	207
1858	2,680,700	242	90	208
1859	2,725,374	1,158	425	237
1860	2,770,181	898	324	221
1861	2,815,101	217	77	195
1862	2,860,117	366	128	209
1863	2,905,210	1,996	687	328
1864	2,950,361	547	185	280
1865	2,995,551	640	214	258
1866	3,040,761	1,391	457	334
1867	3,085,971	1,345	436	396
1868	3,131,160	597	191	297
1869	3,176,308	275	87	277
1870	3,221,394	973	302	295
1871	3,267,251	7,912	2,421	688
1872	3,319,736	1,786	537	708
1873	3,373,065	113	33	676
1874	3,427,250	57	16	661
1875	3,482,306	46	12	602
1876	3,538,246	736	207	161
1877	3,595,085	2,551	709	194
1878	3,652,837	1,417	387	266
1879	3,711,517	450	120	287
1880	3,771,139	471	124	309
1881	3,824,964	2,367	617	391
1882	3,862,876	430	110	271
1883	3,901,164	136	34	201
1884	3,939,832	1,236	307	238
1885	3,978,883	1,419	347	283
1886	4,018,321	24	5	160
1887	4,058,150	9	2	139
1888	4,098,374	9	2	132
1889	4,138,996	—	—	71
1890	4,180,021	4	1	2
1891	4,221,452	8	2	1.4
1892	4,263,294	41	10	3
1893	4,306,411	206	50	12
1894	4,349,166	89	22	16
1895	4,392,346	55	13	18
1896	4,421,955	9	2	18
1897	4,463,169	16	4	17
1898	4,504,766	1	0.2	7.6
1899	4,546,752	3	0.6	3.8
1900	4,589,129	4	0.8	1.4
1901	4,544,983	229	55	11

**Staff Illness
in the Fever
and
Smallpox
Hospitals.**

(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 4,162 (*4,333*)* persons employed at the fever hospitals during the course of the year, of whom 197 (*216*), or 4.7 (*4.9*) per cent., fell ill with fever or diphtheria, and 1 (*3*), died; while 1,216 (*1,397*), or 29.2 (*32.2*) per cent., suffered from other forms of illness. One ambulance driver contracted smallpox.

The table also shows that 575 (*118*) persons were employed at the Smallpox Hospitals during the year, none of whom contracted smallpox, but 226 (*18*), or 39.8 (*15.2*) per cent., suffered from other forms of illness.

We have many times in our annual reports drawn attention to the almost absolute impunity with which a hospital staff can be brought into contact with smallpox, provided the members are properly protected by vaccination; and the evidence afforded during the present epidemic of the disease is still to the same effect; notwithstanding that one ambulance driver last year and one this year (1902) contracted the disease in a very mild form.

ii. IMBECILITY.

**Accommo-
dation for
Imbecile
Patients.**

(1.) The following table gives particulars of the accommodation for imbecile patients which the Managers now possess:—

INSTITUTION.	Males.	Females.	Total.
Leavesden Asylum	818	962	1,780
Caterham ,, ...	888	1,065	1,953
Darenth ,, (Adult Department) ...	1,070	924	1,994
,, ,, (Schools Department) ...			
Rochester House ...	96	60	156
	2,872	3,011	5,883
In course of erection and approaching completion:—			
Tooting Bec Asylum (including Children's Receiving Home—56 beds) ...	...	...	806
Total ...	...	...	6,689

**Annual
Reports.**

The annual reports of the medical superintendents of the asylums will be found on pp. 128-51.

* Italic figures in brackets throughout are the corresponding figures for 1900.

ANNUAL REPORT, STATISTICAL COMMITTEE, 1901. TABLE XX.—Staff Illness in Infectious Hospitals during the year 1901.

NATURE OF DISEASE.	OFFICERS.	Eastern Hospital.	North-Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospital.	Fountain Hospital.	Green Hospital.	South-Eastern Hospital.	Park Hospital.	Brook Hospital.	Northern Hospital.	SEWARD (Febr Hospital).	Hospital Ship (Scarlat).	Green Farm Hospital (Smallpox).	SEWARD (Smallpox Hospital).	REMARKS. (All recovered except where other wise stated.)													
		Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.		Number of days worked.												
		Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.	Number of days worked.	Number of Officers.		Number of days worked.												
Scarlet fever	Assistant medical officers	B.H., one remaining worked at end of year. S.W.H., one; F.H., two; P.H., three remaining worked at end of year. H.S., one remaining worked at end of year. P.H., one remaining worked at end of year. B.H., one remaining worked at end of year. W.H., one died. B.H., one remaining worked at end of year.													
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dispensaries	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laundrymaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Domestic maid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Ambulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria	Assistant medical officers	B.H., one remaining worked at end of year. F.H., one remaining worked at end of year. W.H., one died.													
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dispensaries	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laundrymaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Domestic maid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Ambulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric fever	Assistant medical officers	W.H., one died. B.H., one remaining worked at end of year.													
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dispensaries	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laundrymaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Domestic maid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Ambulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Smallpox	Assistant medical officers	P.H., two; B.H., one remaining worked at end of year. F.H., three; B.H., two remaining worked at end of year. S.W.H., two; P.H., one; B.H., one remaining worked at end of year. P.H., one remaining. W.H., one died.													
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dispensaries	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laundrymaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Domestic maid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Ambulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other diseases	Assistant medical officers	P.H., one remaining. W.H., one died.													
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dispensaries	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laundrymaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Domestic maid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Ambulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
TOTALS	93	1,796	131	1,224	56	1,819	140	3,508	147	2,058	302	1,118	126	3,832	69	1,061	174	3,161	178	3,096	386	1,627	1,414	32,861	99	698	136	2,770	226	5,418
Number employed	Males	79	66	37	58	49	58	63	121	60	125	74	792	79	71	150														
	Females	321	355	268	302	346	354	899	203	247	244	294	3,570	221	294	427														
Number engaged during the year	Males	31	25	18	16	19	14	19	45	25	62	17	222	45	62	108														
	Females	64	136	94	137	60	78	171	96	177	94	114	1,305	175	214	369														
Number that left during the year	Males	80	15	10	14	9	11	14	82	21	62	8	292	15	86	71														
	Females	79	97	82	150	62	86	152	110	136	99	79	1,150	69	187	266														

* From South Ward.

NATURE OF DISEASE

SYMPTOMS

No.	SYMPTOMS	NATURE OF DISEASE
1
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Asylum Statistics. The annual statistical tables for each asylum are printed on pp. 152-79.

The following tables summarise the statistics of the four asylums:—

TABLE I.—Admissions, Re-admissions, Discharges, and Deaths at Asylums during 1901.

	Males.	Females.	Total.
In the asylums, January 1st, 1901	2,782	2,945	5,727
Cases admitted—	Males.	Females.	Total.
First admissions	216	219	435
Not first admissions	2	...	2
From other asylums of the Board	43	55	98
Total cases admitted during the year	261	274	535
Total cases under care during the year	3,043	3,219	6,262
Discharged—	Males.	Females.	Total.
Recovered	5	1	6
Relieved	1	3	4
Not improved	15	21	36
To other asylums of the Board	43	55	98
Died...	170	172	342
Total cases discharged and died during the year	234	252	486
Remaining in the asylums, December 31st, 1901	2,809	2,967	5,776
Average number resident during the year	2,769	2,919	5,688
Persons* under care during the year†	3,001	3,165	6,166
Persons admitted	219	220	439
Persons recovered	5	1	6
Transferred from other asylums not under the Board‡	26	33	59
Transferred to other asylums not under the Board§	9	14	23

The medical superintendents continue to draw attention to the weakness, age, and decrepitude of many of the patients sent for care and treatment to the asylums, many of them requiring infirmary treatment on their arrival. It is for the reception of this latter class of patients that the Managers are now providing accommodation at Tooting Bec.

Of the discharges, 23 were transferred to county asylums as “dangerous to themselves or others.”

* Persons, *i.e.*, separate persons in contradistinction to “cases,” which may include the same individual more than once. † Total cases, minus re-admissions of patients discharged during the current year.

‡ Included in first admissions.

§ Included with not improved cases.

TABLE IA.—(1) *Previous Attacks among Persons Admitted at the Asylums during 1901, and (2) the Number of Times they have previously Recovered in one of those Asylums or any other Asylum.*

(1) NUMBER OF PREVIOUS ATTACKS.								PERSONS.		
								Males.	Females.	Total.*
Have had 1 attack	...	...	...	...	...	...	...	4	3	7
" 2 attacks	...	...	...	...	...	...	...	3	4	7
" 3 "	...	...	...	...	...	...	...	...	...	...
" 4 "	...	...	...	...	...	...	...	...	...	...
" 5 "	...	...	...	...	...	...	...	...	...	...
" 6 "	...	...	...	...	...	...	...	...	...	...

(2) NUMBER OF TIMES PATIENTS RECOVERED.								IN BOARD'S ASYLUMS.			IN ANY ASYLUM.			
								M.	F.	Total.	M.	F.	Total.†	
Once	} Insufficient data obtainable, hence impossible to give reliable figures.						
Twice							
3 times							
4 "							
5 "							
6 "							

TABLE II.—*Admissions, Re-admissions, Discharges, and Deaths from the opening of the Asylums to the 31st December, 1901.*

	Males.	Females.	Total.	Males.	Females.	Total.
Persons admitted during the period of 31 years and 83 days	11,427	10,765	22,192			
Re-admissions	158	112	270			
Admissions from other asylums of Board... ..	1,160	1,267	2,427			
Total cases admitted				12,745	12,144	24,889
Discharged cases—						
Not insane	27	24	51			
Recovered	600	405	1,005			
Relieved	827	588	1,415			
Not improved	861	755	1,616			
To other asylums of the Board... ..	871	795	1,666			
Died	6,750	6,610	13,360			
Total cases discharged and died since opening of the asylums				9,936	9,177	19,113
Remaining December 31st, 1901				2,809	2,967	5,776
Average number resident during the 31 years and 83 days				2,748	3,035	5,783
Transferred from other asylums not under the Board‡				323	620	943||
Transferred to other asylums not under the Board§				221	211	432||

* No figures given in respect of Darenth Asylum or Rochester House.

† No figures given in respect of Caterham or Darenth Asylums or Rochester House.

‡ Included in the admissions.

§ Included with the not improved cases.

|| See notes to Summary, Table II., pp. 152-3.

TABLE II A.—Admissions and Recoveries of Persons from the opening of the Asylums to the 31st December, 1901 (31 Years and 94 Days).

	Males.	Females.	Total.
Persons * admitted	9,041	8,654	17,695
Persons discharged recovered during the same period ...	517	326	843
Of whom were re-admitted relapsed † ... ..	...	...	...
Recovered persons who have not relapsed ... ..	...	...	...
Relapsed persons discharged recovered ‡ ... ..	...	...	...
Net recovered persons §	261	192	453

N.B.—This is an incomplete table. See notes to Summary, Table II A., pp. 154-5.

* Persons, *i.e.*, separate persons in contradistinction to *cases*, which may include the same individual more than once.

† *i.e.*, persons who have relapsed one or more times.

‡ *i.e.*, after last re-admission, if relapsed more than once.

§ *i.e.*, recovered persons, sane at the present time, so far as the asylum statistics show.

TABLE III.—Admissions, Discharges, and Deaths, with the Mean Annual Mortality and proportion of Recoveries per cent. on the Admissions at the Asylums for 1892, and each subsequent year.

YEAR.	ADMITTED.						DISCHARGED.						DIED.			Remaining 31st December in each year.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers Resident.											
	From Parishes and Unions.*		From other Asylums of Board.		Total.		Recovered.		Not Improved.†		To other Asylums of Board.		Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.									
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.																								
1892 ...	389	344	733	11	32	43	400	376	776	29	12	41	18	9	27	34	29	63	11	31	42	267	264	531	2,870	3,120	5,990	2,812	3,063	5,875	7.3	3.1	5.3	9.4	8.6	9.0
1893 ...	334	266	600	45	44	89	379	310	689	19	16	35	20	18	38	41	26	67	45	44	89	257	241	498	2,871	3,092	5,963	2,872	3,096	5,968	5.0	5.1	5.0	8.9	7.7	8.3
1894 ...	331	342	673	40	13	53	371	355	726	20	11	31	16	9	25	36	15	51	38	13	51	265	262	527	2,867	3,137	6,004	2,862	3,100	5,962	5.4	3.1	4.2	9.3	8.4	8.8
1895 ...	307	279	586	26	46	72	333	325	658	23	5	28	19	11	30	30	61	67	26	46	72	195	245	440	2,907	3,124	6,031	2,883	3,121	6,004	6.9	1.5	4.2	6.8	7.8	7.3
1896 ...	306	218	524	28	29	57	334	247	581	19	12	31	30	22	52	48	24	67	28	29	57	221	178	399	2,900	3,106	6,006	2,899	3,114	6,013	5.6	4.9	5.3	7.6	5.7	6.6
1897 ...	305	217	522	24	33	57	329	250	579	15	9	24	33	19	52	34	20	54	24	33	57	209	190	399	2,913	3,085	5,998	2,891	3,092	5,983	4.5	3.6	4.1	7.2	6.1	6.6
1898 ...	260	289	549	19	25	44	279	314	593	24	12	36	15	13	28	41	34	75	19	25	44	202	216	418	2,892	3,099	5,991	2,953	3,087	6,040	8.6	3.8	6.1	6.8	6.9	6.9
1899 ...	298	228	526	26	21	47	324	249	573	12	8	20	31	8	39	43	33	176	26	21	47	214	217	431	2,890	3,061	5,951	2,874	3,069	5,943	3.7	3.2	3.4	7.4	7.0	7.2
1900 ...	175	209	384	48	70	118	223	279	502	10	8	18	14	6	20	24	27	51	48	70	118	235	284	519	2,782	2,945	5,727	2,836	2,995	5,831	4.5	2.8	3.6	8.2	9.4	8.8
1901 ...	218	219	437	43	55	98	261	274	535	5	1	6	1	3	4	15	21	36	43	55	98	170	172	342	2,809	2,967	5,776	2,769	2,919	5,688	2.3	0.4	1.4	6.1	5.9	6.0

* Including transfers from asylums not under Board.

† Including transfers to asylums not under Board.

‡ Includes 3 males, 1 female, not insane.

TABLE IV.—History of the Annual Admissions since the opening of the Asylums, with the Discharges and Deaths, and the numbers of each year remaining on the 31st December, 1901.
(Table VIII. in reports previous to 1900.)

YEAR.	ADMITTED.						OF EACH YEAR'S ADMISSIONS DISCHARGED AND DIED IN 1901.						TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.						Remaining of each year's Admissions 31st December, 1901.			
	New Cases.		Re-lapsed Cases.		From other Asylums of the Board.		Total.		Recovered.		Relieved.		Not Improved.		To other Asylums of the Board.		DIED.		Males.	Females.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.	Total.		
1870 (part of)	624	758	...	...	...	...	1,382	...	...	...	...	...	...	...	...	...	...	...	...	62	66
1871	1,184	1,415	...	...	...	...	2,599	...	...	...	...	...	...	...	...	...	...	...	...	65	151
1872	422	417	...	...	...	...	839	...	...	...	...	...	...	...	...	...	...	...	...	11	30
1873	324	332	1	...	...	...	728	...	...	...	...	...	...	...	...	...	...	...	...	21	24
1874	355	318	3	3	...	...	801	...	...	...	...	...	...	...	...	...	...	...	...	27	32
1875	316	322	12	7	155	124	930	...	...	...	...	...	...	...	...	...	...	...	...	21	28
1876	400	285	12	9	159	335	1,230	...	...	...	...	...	...	...	...	...	...	...	...	65	103
1877	305	79	2	1	1	5	383	...	...	...	...	...	...	...	...	...	...	...	...	38	10
1878	276	64	3	4	31	...	378	...	...	...	...	...	...	...	...	...	...	...	...	40	10
1879	345	237	1	1	6	...	582	...	...	...	...	...	...	...	...	...	...	...	...	36	44
1880	291	390	2	7	25	54	707	...	...	...	...	...	...	...	...	...	...	...	...	30	68
1881	273	239	3	3	...	13	533	...	...	...	...	...	...	...	...	...	...	...	...	29	58
1882	403	411	3	6	78	17	918	...	...	...	...	...	...	...	...	...	...	...	...	71	62
1883	342	377	9	6	6	8	748	...	...	...	...	...	...	...	...	...	...	...	...	60	60
1884	269	291	8	3	...	...	571	...	...	...	...	...	...	...	...	...	...	...	...	32	28
1885	216	226	8	4	22	30	500	...	...	...	...	...	...	...	...	...	...	...	...	33	45
1886	284	268	11	7	20	8	598	...	...	...	...	...	...	...	...	...	...	...	...	59	63
1887	307	278	5	6	12	69	677	...	...	...	...	...	...	...	...	...	...	...	...	61	73
1888	275	272	4	2	145	86	734	...	...	...	...	...	...	...	...	...	...	...	...	115	82
1889	451	370	5	6	26	9	976	...	...	...	...	...	...	...	...	...	...	...	...	133	95
1890	448	421	6	7	52	42	1,005	...	...	...	...	...	...	...	...	...	...	...	...	60	60
1891	443	412	7	2	...	...	864	...	...	...	...	...	...	...	...	...	...	...	...	32	28
1892	381	339	8	5	11	32	776	...	...	...	...	...	...	...	...	...	...	...	...	33	45
1893	328	283	6	3	3	45	689	...	...	...	...	...	...	...	...	...	...	...	...	138	123
1894	323	341	10	1	38	13	735	...	...	...	...	...	...	...	...	...	...	...	...	117	108
1895	305	275	2	4	26	46	658	...	...	...	...	...	...	...	...	...	...	...	...	111	128
1896	301	215	5	3	28	29	534	...	...	...	...	...	...	...	...	...	...	...	...	189	180
1897	303	215	2	2	24	33	579	...	...	...	...	...	...	...	...	...	...	...	...	131	121
1898	256	286	4	3	19	25	579	...	...	...	...	...	...	...	...	...	...	...	...	128	153
1899	291	226	7	2	26	21	573	...	...	...	...	...	...	...	...	...	...	...	...	147	138
1900	170	204	5	5	48	70	502	...	...	...	...	...	...	...	...	...	...	...	...	168	155
1901	216	219	2	...	43	55	535	...	...	...	...	...	...	...	...	...	...	...	...	167	226
Total	11,427	10,765	158	112	1,160	1,267	12,144	24,889	5	1	6	1	3	4	15	21	26	43	55	98	170	
									1,027	827	539	1,416	880	765	1,645	876	735	1,065	6,750	6,610	13,360	2,806
																					2,967	5,776

* Includes the "not insane" cases in Table II., p. 153 (Darenth Asylum).
† Includes the "not insane" cases in Table II., p. 153 (Leavesden and Caterham Asylums).

TABLE V.—*Causes of Death at the Asylums*

(Table VII. in

CAUSE OF DEATH.	5 and under 10.			10 and under 20.			20 and under 25.			25 and under 30.			30 and under 35.			35 and under 40.			40 and under 45.			45 and under 50.			
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	
	CEREBRO-SPINAL DISEASES—																								
Apoplexy	1	1																							
Cerebral hæmorrhage																									
Cerebral softening							1	1																	
Cerebral softening and pulmonary tuberculosis																									
Cerebral thrombosis																									
Dementia							1	1					1	1											
Epilepsy	1	1	2	1	3	4	6	2	8	1	1	2	2	2					1	1	1	1	1	2	2
General paralysis of the insane				1	2	3	1	1	2										2	2	1	2	3	4	4
General paralysis of the insane and pulmonary tuberculosis																			1	1			2	2	2
Idiocy and imbecility				1	1																	1	1	1	1
Locomotor ataxy																									
Meningitis																									
Meningitis, chronic				1	1																				
Organic brain disease																							1	1	1
Status epilepticus				1	1		2	2														1	1		
THORACIC DISEASES—																									
Abscess of lung				1	1																				
Aneurism																									
Chronic bronchitis																									
Collapse of lung				1	1																				
Degeneration of heart																									
Fatty heart																									
Pericarditis																									
Phthisis				3	3	3	2	5	2	2	4	2	1	3	1	1	3	1	1	3	1	4			
Pneumonia				2	4	1	1	2		1	1	1	1	1	2	1	3	2	1	3	2	1	3	2	3
Pulmonary tuberculosis				1	2	3	1	2	3	2	1	3	3	1	4	2	3	5	6	3	9	3	3	3	3
Pulmonary tuberculosis and cancer of the pancreas							1	1																	
Pulmonary tuberculosis and valvular disease of heart																									
Pulmonary tuberculosis and tubercular disease of kidney																									
Pulmonary tuberculosis and tubercular peritonitis																									
Pulmonary tuberculosis and meningitis																			1	1					
Pulmonary tuberculosis and senile gangrene of foot																									
Pulmonary tuberculosis and chronic nephritis																									
Valvular disease of heart							1	1													1	1			
ABDOMINAL DISEASES—																									
Calculus pyelitis				1	1																				
Carcinoma of stomach																									
Carcinoma of stomach and enteritis																									
Carcinoma of uterus																									
Chronic nephritis																									
Colitis																									
Cystitis																									
Enteritis																									
Peritonitis																									
Peritonitis (secondary to an ovarian abscess)																									
Peritonitis (secondary to ulcerative colitis)																									
Pyo-nephritis																									
Simple stricture of œsophagus																									
Tuberculosis of kidneys																									
Ulcerative colitis																									
Volvulus																									
GENERAL DISEASES—																									
Cancer																									
Enteric fever																									
Epiphysitis, acute																									
Erysipelas				1	1																				
Pernicious anæmia																									
Phlebitis of leg and cerebral thrombosis																									
Pyæmia following erysipelas																									
Rodent ulcer																									
Senile decay																									
Senile gangrene																									
Tuberculosis				3	3																				
Tubercular disease of vertebrae													1	1								1	1		
ACCIDENT OR VIOLENCE—																									
Choking																									
Fracture of femur																									
Fracture of ribs																									
Totals	1	2	3	16	9	25	17	10	27	6	5	11	10	2	12	9	6	15	16	12	28	14	4	18	

N.B.—Number of cases in which the cause of death was ascertained by

From the foregoing table it will be seen that other principal causes of death were tuberculosis, epilepsy, organic brain disease, influenzal pneumonia, diseases of the heart, and senile decay.

TABLE VI.—*Length of Residence in those Discharged Recovered and in those who have Died at the Asylums during 1901. (Table IX. in reports previous to 1900).*

LENGTH OF RESIDENCE.	RECOVERED.			DIED.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under 1 Month... ..	...	...	...	1	1	2
From 1 to 3 Months ...	...	...	...	6	1	7
" 3 " 6 " " ...	...	...	...	4	3	7
" 6 " 9 " " ...	1	...	1	2	3	5
" 9 " 12 " " ...	...	...	...	1	5	6
" 1 " 2 Years ...	3	...	3	25	20	45
" 2 " 3 " " ...	1	1	2	12	13	25
" 3 " 5 " " ...	...	...	..	17	17	34
" 5 " 7 " " ...	...	...	...	17	16	33
" 7 " 10 " " ...	...	...	...	16	14	30
" 10 " 12 " " ...	...	...	...	15	12	27
" 12 " 15 " " ...	...	...	...	10	7	17
" 15 " 20 " " ...	...	...	...	14	13	27
" 20 " 25 " " ...	...	...	...	12	9	21
" 25 " 30 " " ...	...	...	...	18	38	56
" 30 years, and upwards	...	...	...	...	...	...
Totals ..	5	1	6	170	172	342

Most of the patients who died had been inmates for many years; 56 of them between 25 and 30 years.

TABLE VII.—*Duration of Insanity on Admission in the Admissions, Discharges, and Deaths at the Asylums during 1901.*

CLASS.	DURATION OF DISEASE ON ADMISSION IN FIVE CLASSES.											
	Admissions.			Recoveries.			Removals not Recovered.			Deaths.		
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
First class—First attack—												
Within 1 week on admission...	...	...	...	...	...	..	...	...	...	...	...	...
" 1 month " " ...	2	1	3	...	1	1	...	...	...	2	2	4
" 2 months " " ...	2	1	3	...	...	..	...	...	...	..	6	6
" 3 " " " ...	6	5	11	...	..	...	...	1	1	9	10	19
Second class—First attack—												
Above 3 and within 6 months												
on admission	5	3	8	...	...	...	...	...	...	4	1	5
Above 6 and within 12 months												
on admission .. ..	...	4	4	2	..	2	...	...	...	4	5	9
Third class—Not first attack, and												
within 1 month on admission	...	...	...	...	..	...	...	...	...	...	...	...
" 6 months " " ...	1	...	1	...	...	...	...	...	...	1	1	2
" 12 " " " ...	15	2	17	...	...	...	...	...	...	4	...	4
Fourth class—First attack or not,												
but over 12 months on admission	69	65	134	1	..	1	3	6	9	78	45	123
Fifth class—Congenital	142	165	307	...	...	...	54	68	122	53	52	105
Unknown	19	28	47	2	...	2	1	4	5	15	50	65
Totals	261	274	535	5	1	6	58	79	137	170	172	342

Of the six recoveries, three were of patients admitted within 12 months of the first attack.

TABLE VIII.—Ages of Patients Admitted, Recovered, and Died at the Asylums during 1901, and of those remaining on 31st December, 1901.

(In place of tables X. and XI. in reports previous to 1900.)

AGES.	ADMISSIONS.						TOTAL ADMISSIONS.			RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DECEMBER, 1901.		
	From Parishes and Unions.*			From other Asylums of the Board.														
	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.
Under 5 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
From 5 and under 10 years	37	28	65	13	4	17	50	32	82	...	...	...	1	2	3	93	64	157
" 10 " 15 "	22	30	52	29	23	52	51	53	104	...	...	...	5	4	9	200	146	346
" 15 " 20 "	31	37	68	...	17	17	31	54	85	...	...	...	10	5	15	297	204	501
" 20 " 25 "	17	8	25	...	10	10	17	18	35	...	...	...	17	10	27	312	208	520
" 25 " 30 "	6	15	21	...	...	...	6	15	21	3	...	3	8	5	13	295	229	524
" 30 " 35 "	9	9	18	...	...	...	9	9	18	...	...	...	9	3	12	244	247	491
" 35 " 40 "	13	10	23	...	...	...	13	10	23	...	...	...	10	5	15	214	207	421
" 40 " 45 "	11	6	17	...	...	...	11	6	17	1	...	1	15	13	28	204	237	441
" 45 " 50 "	6	7	13	...	...	...	6	7	13	...	1	1	14	5	19	204	256	460
" 50 " 55 "	11	2	13	...	...	...	11	2	13	...	...	...	13	7	20	193	225	418
" 55 " 60 "	8	8	16	...	1	1	8	9	17	1	...	1	13	14	27	152	224	376
" 60 " 65 "	13	13	26	...	...	...	13	13	26	...	...	...	10	15	25	131	232	363
" 65 " 70 "	11	20	31	...	...	...	11	20	31	...	...	...	16	13	29	109	185	294
" 70 " 75 "	13	14	27	1	...	1	14	14	28	...	...	...	13	26	39	89	146	235
" 75 " 80 "	7	8	15	...	...	...	7	8	15	...	...	...	10	22	32	49	98	147
" 80 " 85 "	2	4	6	...	...	...	2	4	6	...	...	...	4	13	17	8	40	48
" 85 " 90 "	1	...	1	...	...	...	1	...	1	...	...	...	2	9	11	11	9	20
" 90 " 95 "	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	7	9
" 95 " 100 "	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
" 100 " 105 "	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	3
Unknown ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total ...	218	219	437	43	55	98	261	274	535	5	1	6	170	172	342	2,809	2,967	5,776
Mean age ...	34	35	35	11	16	14	31	31	31	37	49	40	48	59	53	37	44	40

Of the direct admissions 106 were patients over 60 years of age. One patient over 55 years of age was discharged as recovered. There were 33 patients over 85 years old remaining in the asylums at the end of the year.

TABLE IX.—Condition as to Marriage of Patients Admitted, Recovered, and Died at the Asylums during 1901.

(Included in table XIII. in reports previous to 1900.)

CONDITION AS TO MARRIAGE.	ADMISSIONS.						TOTAL ADMISSIONS.			RECOVERIES.			DEATHS.		
	From Parishes and Unions.*			From other Asylums of Board.											
	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.
Single ...	145	148	293	42	54	96	187	202	389	4	...	4	86	80	166
Married ...	44	28	72	...	1	1	44	29	73	1	1	2	33	26	59
Widowed ...	28	40	68	1	...	1	29	40	69	...	...	...	18	32	50
Unknown ...	1	3	4	..	...	...	1	3	4	...	...	...	33	34	67
Totals ...	218	219	437	43	55	98	261	274	535	5	1	6	170	172	342

293 out of a total of 437 direct admissions are recorded as unmarried.

* Including transfers from asylums not under the Board.

TABLE X.—*Probable Causes of Insanity in the Patients admitted at the Asylums during 1901.*

(Table XI. in reports previous to 1900.)

CAUSES OF INSANITY.	NUMBER OF INSTANCES IN WHICH EACH CAUSE WAS ASSIGNED.											
	Number of Cases. Admissions—Males, 261; Females, 274; Total, 535.											
	As predisposing cause.			As exciting cause.			As predisposing or exciting, where these could not be distinguished.			Total.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
MORAL—												
Domestic trouble (including loss of relatives and friends) ...	...	2	2	1	6	7	...	...	...	1	8	9
Adverse circumstances (including business anxieties and pecuniary difficulties) ...	...	...	...	...	...	...	...	...	...	...	...	...
Mental anxiety and worry (not included under the above two heads) and overwork ...	3	...	3	...	2	2	...	...	...	3	2	5
Fright and nervous shock ...	1	3	4	1	...	1	3	1	4	5	4	9
PHYSICAL—												
Intemperance in drink... ..	2	4	6	8	8	16	...	1	1	10	13	23
Veneral disease	3	...	3	1	...	1	...	...	...	4	...	4
Self-abuse, sexual ... ..	...	...	...	6	...	6	1	...	1	7	...	7
Sunstroke ... ..	...	...	...	1	1	2	...	...	...	1	1	2
Accident or injury	3	1	4	2	1	3	4	6	10	9	8	17
Puberty and adolescence ...	1	...	1	...	...	...	...	...	...	1	...	1
Change of life ... ..	...	1	1	...	...	...	...	...	...	...	1	1
Fevers ... ..	...	...	...	1	...	1	...	1	1	1	1	2
Old age	17	32	49	6	10	16	...	...	...	23	42	65
Other bodily diseases or disorders... ..	...	...	...	18	4	22	...	...	...	18	4	22
Previous attacks	1	7	8	...	...	...	...	...	...	1	7	8
Hereditary influences ascertained (direct and collateral)	23	37	60	...	...	...	...	...	...	23	37	60
Congenital defect, ascertained	64	49	113	...	...	...	...	...	...	64	49	113
Epilepsy ... ..	...	...	...	...	9	9	...	...	...	...	9	9
Unknown... ..	...	...	...	...	...	...	12	14	26	12	14	26

NOTE.—With reference to the distinction between "predisposing" and "exciting" causes, it must be understood that no single cause is enumerated as both predisposing and exciting in the case of any individual patient.

The figures in the total column represent the entire number of instances in which the several causes (either alone or in combination with others) were stated to have produced the mental disorder. The excess of the aggregate of such causes over the number of patients admitted is owing to combinations of causes.

Transfers from other asylums are not included in this table.

Intemperance in drink is assigned as a predisposing cause in only 6 instances, and as an inciting cause in 16, hereditary influence in 60, and congenital defect in 113.

TABLE XI.—Form of Mental Disorder in the Admissions, Recoveries, and Deaths at the Asylums during 1901 and of Inmates on 31st December, 1901.
(Includes tables IV. and V. in reports previous to 1900.)

FORM OF MENTAL DISORDER.	ADMISSIONS.			RECOVERIES.			DEATHS.			REMAINING IN ASYLUMS.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
CONGENITAL OR INFANTILE MENTAL DEFICIENCY—												
Congenital—(a) with epilepsy	44	55	99	...	...	...	31	28	59	488	395	883
(b) without ..	108	119	227	...	...	...	37	25	62	1,290	1,111	2,401
Epilepsy acquired	15	5	20	...	...	...	17	8	25	68	96	164
General paralysis of the insane	12	5	17	...	...	...	14	6	20	20	13	33
MANIA—												
Acute	2	...	2	...	...	...	...	...	...	12	3	15
Chronic	12	12	24	...	...	...	5	...	5	230	253	483
Recurrent ... ..	...	...	...	...	...	...	...	...	...	54	17	71
A potù ... ..	...	...	...	1	...	1	...	...	...	2	2	4
Senile ... ..	...	...	...	...	...	...	...	...	...	...	6	6
MELANCHOLIA—												
Acute	3	2	5	...	...	...	...	...	...	2	2	4
Chronic	3	1	4	2	1	3	...	1	1	11	58	69
Recurrent ... ..	...	...	...	2	...	2	...	...	...	3	...	3
Senile ... ..	...	1	1	...	...	...	...	...	...	3	5	8
DEMENTIA—												
Primary ... ..	...	6	6	...	...	...	...	...	...	20	30	50
Secondary	34	37	71	...	...	...	35	54	89	440	828	1,268
Senile	25	29	54	...	...	...	30	50	80	154	144	298
Organic (i.e., from tumours, coarse brain disease, &c.)...	3	2	5	...	...	...	1	...	1	12	4	16
Totals	261	274	535	5	1	6	170	172	342	2,809	2,967	5,776

3,481 out of the 5,777 patients remaining in the asylums at the end of the year were cases of congenital insanity, 483 of chronic mania, 69 of chronic melancholia, 1,268 of secondary dementia, and 298 of senile dementia.

TABLE XII.—Station or Occupation of Patients Admitted at the Asylums during 1901.
(Included in table XIII. in reports previous to 1900.)

MALES.			
Army-pensioner	1	Coachman	1
Artist	1	Collector	1
Bakers	2	Cook	1
Blacksmith	1	Costermongers	2
Blind maker, venetian	1	Decorators	2
Boot-repairer	1	Fitter	1
Bricklayer	1	Hairdresser	1
Cabinet-maker	1	Harness maker	1
Cabman	1	Hawkers	3
Canvasser	1	Insurance agent	1
Carmen	3	Labourers	31
Carpenter	1	Lighterman	1
Carver, wood	1	Machinist	1
Cigar maker	1	Masons	2
Clerks	3	Messenger	1
		Moulder	1
		Ostler	1
		Packers	2
		Picture frame maker	1
		Polisher, French	1
		Porters	5
		Printers	3
		Retired major	1
		Road sweeper	1
		Sailor	1
		Scaffolder	1
		Ship's fireman	1
		Shoeblocks	3
		Shop assistant	1
		Skinner	1
		Stick maker	1
		Tailors	4
		Tea cooper	1
		Tennis bat maker	1
		Twine spinner	1
		Undertaker	1
		Waiter	1
		Warehouseman	1
		Waterman	1
		No occupation	38
		Unknown	74
		Total	218

NOTE.—Transfers from other asylums of the Board are not included in this table.

FEMALES.					
Bookfolder ... 1	Factory girl ... 1	Needlewomen ... 2	Tailoress ... 1		
		Nurses ... 3	Teacher ... 1		
Charwomen ... 13	Hawkers ... 2			No occupation .. 69	
Cooks ... 2	Housemaid ... 1			Unknown .. 83	
	Housekeeper ... 1	Scrubber ... 1			
Domestic workers 3	Housewives ... 5	Sempstresses ... 3			
Dressmaker ... 1	Laundresses ... 4	Servants ... 18			
	Mantle maker ... 1	Shirt maker ... 1			
Embroidress ... 1		Stewardess ... 1			
					Total... 219

NOTE.—Transfers from other asylums of the Board are not included in this table.

TABLE XIII.—Table of Heredity in Patients admitted in the Asylums during 1901.

DEGREE.						Males.	Females.	Total.
I. DIRECT—								
Paternal						6	7	13
Maternal						7	3	10
Grandparents						3	1	4
II. COLLATERAL—								
Brothers or sisters						6	14	20
Paternal uncles or aunts						3	4	7
Maternal „ „						1	...	1
Maternal or paternal uncles or aunts						1	...	1
Paternal grandparents						1	3	4
Maternal „ „						1	3	4
Cousins ... ..						..	3	3
III. REMOTE—								
Undefined						2	5	7
Totals						31	43	74
Total number of admissions						218	219	437
Number in which causes were assigned						88	86	174
Percentage of heredity on admissions						14·22	19·63	16·93

This table contains no information in regard to patients admitted at Leavesden Asylum. In the 74 cases dealt with, there appears to have been a history of insanity in the parents or grandparents of the patients in 27 cases and in other relatives in 40 cases.

iii. CHILDREN'S HOMES.

Statistics.

Into the homes at Herne Bay and Margate for children requiring the benefits of seaside air there were admitted during the year 121 (104)* boys and 137 (120) girls. There were discharged 109 (100) boys and 127 (113) girls, and 2 (1) boy and 5 (2) girls died.

* Italic figures in brackets throughout are the corresponding figures for 1900.

In the homes for defective children there have been under training 37 (13)* boys and 29 (22) girls (see the table on p. 180).

In February a school for children suffering from ringworm was opened at Witham. Into it 91 boys and 92 girls have been admitted, and from it 22 boys and 17 girls have been discharged.

There remained under care at the end of the year in all the homes 195 boys and 193 girls.

iv. TRAINING SHIP "EXMOUTH."

Statistics. The number of boys admitted during the year was 413 (423) (including 144 (80) from extra-metropolitan parishes and unions), while the number discharged was 385 (392).

Of the latter number, 151 (115) entered the royal navy, 146 (145) the mercantile marine, 56 (93) the army as musicians, and 32 (39) were returned to their respective parishes and unions. There were 2 (1) deaths.

At the end of the year there remained 587 (561) boys under training, of whom 169 (115) were chargeable to extra-metropolitan districts.

The statistical tables on pp. 181-190 supply detailed information concerning the boys under training.

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, 1901.*
Fever patients (including 218 cases of relapsing fever treated in 1870) ... }	270,092	4,588
Smallpox patients	65,488	710
Imbeciles	22,192	5,776
Boys on training ship "Exmouth"	8,028	587
Children at homes and special schools	1,344	387
Totals	367,144	12,048

vi. MEDICAL SUPPLEMENT.

In continuance of the arrangement begun in 1896, there will be found at the end of this volume a Medical Supplement, edited by two of the Board's medical superintendents (Dr. F. M. Turner and Dr. H. E. Cuff), who have been appointed for that purpose by their colleagues. In this supplement

* Italic figures in brackets throughout are the corresponding figures for 1900.

there are included, in the first place, reports based on the records of the fever hospitals for 1901, 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.

(Signed) V. B. KENNETT-BARRINGTON,
Chairman.

i. APPENDIX I.—INFECTIOUS DISEASES.

(Statistical tables detached from the Ambulance Committee's Annual Report in Vol. I.)

APPENDIX A.—LAND AMBULANCE SERVICE.

Number of Patients removed by the Ambulances of the Board.

	From 1881 to 1893	1894	1895	1896	1897	1898	1899	1900	1901	TOTALS.
FEVER:—										
From homes to Hospitals	77,462	16,573	16,725	22,152	22,795	20,923	24,917	21,430	25,532	248,509
Convalescents to North- ern and other Hospitals	26,374	5,159	5,037	9,998	8,941	6,437	7,973	5,394	5,223	80,536
Recovered cases from Northern Hospital to Town Hospitals for discharge	20,702	4,090	4,464	5,899	5,259	4,226	4,530	2,681	4,300	56,151
Recovered cases dis- charged from Northern Hospital conveyed from Eastern, Western, and South-Eastern Hos- pitals to other Hospitals	160	221	82	154	111	1	99	29	126	981
Recovered cases from Gore Farm Hospital to Town Hospitals for discharge	4,187	1,375	...	3,629	3,658	2,445	3,374	2,735	1,239	22,642
Recovered cases from Gore Farm Hospital conveyed from the South-Eastern, the South-Western, and the Brook Hospitals to other Hospitals	309	112	...	31	181	125	31	233	87	1,109
Other transfers between Hospitals ... ..	...	7	61	1	10	2	8	39	201	329
From Hospitals to homes From General Hospitals to homes, owing to want of room in the Managers' Hospitals, or to the patients being extra - Metropolitan residents	*3,317	251	256	377	350	317	385	577	642	6,472
468	143	724	1,287	752	71	144	20	159	3,768	
Enteric Fever cases from homes to General Hos- pitals	170	216	241	109	186	133	247	201	98	1,601
Total Fever Patients	133,149	28,147	27,590	43,637	42,243	34,680	41,706	33,339	37,607	422,098
SMALLPOX:—										
From homes to Hospitals and Wharves	16,765	1,186	1,045	265	121	36	28	94	1,848	21,388
From Hospitals to Wharves	5,484	8	...	...	...	...	8	...	3	5,503
Other transfers between Hospitals	6	1	3	...	...	...	7	...	2	19
From Hospitals and Wharves to homes	10,412	77	77	39	33	1	1	31	118	10,789
Total Smallpox Patients	32,667	1,272	1,125	304	154	37	44	125	1,971	37,699
Conveyance of Patients to other places than the Managers' Hospitals...)	1,281	269	326	433	361	326	369	327	388	4,080
Grand Totals ...	167,097	29,688	29,041	44,374	42,758	35,043	42,119	33,791	39,966	463,877

* Includes some smallpox cases.

N.B.—In addition to the above removals, 96 imbecile children of the improvable class were conveyed from Darenth Asylum to Rochester House, Little Ealing; 180 children to the Liverpool Street railway station *en route* to the Bridge School at Witham, and 13 defective children from the home at Kingwood Road, Fulham, to the Home at Elm Grove, Peckham; total, 289.

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

Return of Work for the Twelve Months ended December 31st, 1901.

PARTICULARS OF WORK.	Number of Journeys.	MILES RUN.				
		By Horses.				By Vehicles.
		1	2	3	4	
REMOVALS FROM HOME—						
To the Board's Hospitals—						
Fever Patients	24,351	224,316	680	...	...	224,996
Smallpox Patients... ..	...	...	...	...	...	...
To the Board's Wharves—						
Smallpox Patients... ..	1,715	28,704	...	...	...	28,704
To General Hospitals—						
Enteric Patients	93	874	...	...	...	874
OTHER REMOVALS—						
From General Hospitals to homes owing to want of room in the Board's Hospitals, or to the patients being extra-Metropolitan residents ...	156	1,246	...	...	...	1,246
Non-Smallpox Patients returned home	114	1,434	...	...	...	1,434
Other Patients returned home...	53	457	...	...	...	457
Patients sent for, but for various causes not removed ...	659	4,963	32	...	...	4,995
Patients' friends taken from home to Hospital	31	430	...	...	...	430
Patients' friends taken from Hospital to home	24	325	...	...	...	325
TRANSFERS BETWEEN HOSPITALS—						
Fever Patients to and from Northern Hospital... ..	967	6,777	15,732	...	...	22,509
Fever Patients to and from Gore Farm Hospital	517	1,266	8,719	34	...	10,019
Other transfers between Hospitals	170	1,648	734	...	...	2,382
Board's Hospitals to Wharves ...	3	52	...	...	...	52
RECOVERED PATIENTS TAKEN HOME—						
From Fever Hospitals	551	6,386	59	...	...	6,459
From Wharves:—Smallpox	116	1,792	...	...	...	1,792
Service requirements	677	5,930	204	14	...	6,026
Conveyance of Ambulance Committee	3	...	31	...	...	31
Conveyance of other Committee ...	...	...	...	...	...	...
	30,200	286,600	26,191	48	...	312,731
Conveyance of Patients to other places than Managers' Hospitals (private removals) }	387	4,158	389	...	...	4,547
Totals for 1901	30,587	290,758	26,580	48	...	317,278
Totals for 1900	24,808	203,532	29,224	92	...	232,848
Totals for 1899	28,184	222,128	37,855	452	..	260,367
Totals for 1898	23,120	182,255	32,421	33	...	214,677
Totals for 1897	26,055	231,143	39,417	810	41	271,411
Totals for 1896	26,646	249,376	46,792	337	301	296,792
Totals for 1895	19,963	189,360	23,004	...	...	212,364
Totals for 1894	19,796	176,602	26,918	72	228	203,820
Totals for 1893	24,017	214,884	30,186	...	241	245,311
Totals for 1892	17,607	147,606	27,497	...	3,535	178,638
Totals for 1891	8,254	66,129	12,958	...	791	79,873
Totals for 1890	8,644	67,443	14,167	415	2,405	84,423
Totals for 1889	5,594	40,957	6,276	232	881	48,346
Totals for 1888	5,550	34,842	12,767	...	1,910	49,519
Totals for 1887	6,507	51,894	5,223	...	1,009	58,126
Totals for 1886	2,073	13,578	1,980	...	...	15,558
Grand Totals	277,405	2,382,487*	373,265	2,491	11,342	2,769,351

* Includes 234 miles by horses only.

APPENDIX C.—RIVER SERVICE.

Number of Patients, Visitors, Staff, &c., conveyed to and from the Hospital Ships during the year 1901.

MONTH.	Patients conveyed to Hospital Ships.	Recovered cases conveyed from Hospital Ships.	Visitors conveyed to and from Hospital Ships (including Managers).	Staff, &c., conveyed to and from Hospital Ships.	Totals.
January	3	1	1	83	88
February	1	2	...	107	110
March ... ..	...	1	...	113	114
April ... ..	...	...	...	131	131
May	1	...	...	92	93
June	5	1	2	99	107
July	14	6	...	101	121
August	83	11	55	85	234
September	147	36	287	275	745
October	234	130	350	234	948
November	418	163	328	243	1,152
December	708	282	277	343	1,610
Totals for 1901	1,614	633	1,300	1,906	5,453
Totals for 1900	64	69	42	1,460	1,635
Totals for 1899	11	6	17	1,434	1,468
Totals for 1898	6	5	7	937	955
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	3,742	7,614
Totals for 1893	2,364	2,053	2,195	4,040	10,652
Totals for 1892	298	235	121	735	1,389
Totals for 1891	63	53	155	503	774
Totals for 1890	26	25	38	339	428
Totals for 1889	5	4	51	445	505
Totals for 1888	62	63	246	476	847
Totals for 1887	54	45	395	478	972
Totals for 1886	130	145	458	*3,929	4,662
Totals for 1885	5,468	5,809	†	†	11,277
Totals for 1884	5,592	4,267	†	†	9,859
Grand Totals	18,040	15,511	7,934	25,638	67,123

STEAMERS.

STEAMER.	Fires alight.		Under Steam.		Under Way.		Coal consumed.		Number of days when steam raised.	Distance run. Miles.
	Hours.	Mins.	Hours.	Mins.	Hours.	Mins.	Tons.	Cwt.		
" Albert Victor " ...	1,614	30	1,367	...	418	15	120	17	140	5,249
" Geneva Cross " ...	1,740	...	1,587	...	155	23	133	6	76	3,974
" Maltese Cross " ...	1,903	30	1,596	15	439	...	155	1	147	4,307
" White Cross " ...	704	20	429	35	230	...	17	2	89	2,524
Totals ...	5,936	20	4,979	50	1,242	38	426	6	452	16,054

Quantity of Stores, Parcels, &c., conveyed to and from the Hospital Ships.

Number, 2,791. Weight, 76 tons 3 cwt. 3 qrs. 21 lbs.

* Included in this number is the number of contractors' workmen who were engaged on building and other work in connection with the Hospital Ships, and who were conveyed to and from Long Reach each week.

† No figures were given in the Committee's Report for 1884 and 1885.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF THE FEVER HOSPITALS FOR THE YEAR 1901.

No. 1.

EASTERN HOSPITAL.

HOMERTON, N.E.,

January 27th, 1902.

Statistics. During the year, 2,332 patients have been under treatment. Of these, 1,385 have been discharged from the hospital, 491 have been transferred to other hospitals of the Board, and 193 have died, leaving 263 under treatment at the end of the year.

Scarlet Fever. The number of scarlet fever cases under treatment has been 211. Of these, 98 were discharged, 72 were transferred, 11 died, and 30 remained. The percentage mortality is 5·72. Included amongst the 8 deaths are 3 cases fatal from diseases other than scarlet fever, viz., measles, 2, and measles combined with diphtheria, 1. If these cases are excluded from amongst the deaths, the mortality becomes 4·16 per cent.

Post-Scarlatinal Diphtheria. There have been 6 cases of secondary or post-scarlatinal diphtheria; 1 of the cases was fatal, but in that instance the attack of diphtheria was complicated with co-existent measles and broncho-pneumonia. 5 of the cases occurred in Courage and 1 in Fortitude ward, the only two wards which during the past year have been set aside for scarlet fever patients. There were 9 cases of secondary tonsillitis.

Diphtheria. The number of cases of diphtheria under treatment was 1,684. Of these, 917 were discharged, 419 were transferred to the Northern Hospital, 149 died, and 199 remained at the end of the year. The mortality per cent. is 10·10, the lowest hitherto recorded for this hospital. The previous lowest mortality was 14·04 in the year 1900. Included amongst the fatal cases are 21 in which death was due to diseases other than diphtheria, viz., scarlet fever, 13; measles, 5; cerebral disease, 2; and tuberculosis, 1. One of the patients, also included amongst the deaths, died before admission. Making allowance for these cases, the mortality is 8·59 per cent.

Enteric Fever. Of enteric fever, 182 cases have been under treatment. Of these, 155 were discharged, 10 died, and 17 remained at the end of the year. The mortality per cent. is 6·38. This rate is very much below the average, and is the lowest hitherto recorded for this hospital. On one occasion only has the mortality been below 10 per cent., viz., 9·6 in 1879. The cause of this low mortality appears to be the mild character of the disease, for there is nothing in the ages of the patients, nor has there been any alteration in the treatment, to account for it.

Typhus Fever. One case of typhus fever was admitted, which proved fatal within 24 hours of admission.

Combined mortality. The combined mortality of the above-mentioned diseases is 9·39 per cent.

Other diseases. Of the 2,026 cases admitted directly from their homes, 235, or 11·6 per cent., were found to be suffering from diseases other than those notifiable diseases which are usually admitted to the Managers' hospitals. The percentage of error was, for scarlet fever, 12·4; for diphtheria, 8·9; and for enteric fever, 29·2.

Plague accommodation. Since March last one wing of the southern portion of the hospital, containing beds for 24 patients and accommodation for all the necessary staff, has been kept empty for the possibility of the introduction of plague into London. Apparatus for the sterilisation of linen and of excreta has been erected in the airing court adjoining these wards. The whole of this part of the hospital has been railed off, so that in the event of plague cases being admitted, it will be administered quite separately from the remaining part of the hospital.

Staff illness. There has been less illness amongst the staff than during last year; and I am glad to say that no death has occurred.

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

No. 2.

NORTH-EASTERN HOSPITAL.

ST. ANN'S ROAD, TOTTENHAM, N.,

March 10th, 1902.

Statistics. The total number of patients treated in the hospital last year was 3,998. Of these, 182 died, 1,917 were discharged, 1,364 transferred to Winchmore Hill, and 535 left in at the end of the year.

Fevers and Diphtheria. Of scarlet fever, 3,094 cases were treated, with 94 deaths, the mortality therefore being 3·41 per cent.; of diphtheria, 467 cases were treated, with 64 deaths, or a mortality of 15·59 per cent.; while the enteric fever patients numbered 42, of whom 8 died, giving a death rate of 21·91 per cent.

Other diseases. During the year 383 patients were admitted who had neither scarlet fever, diphtheria, nor enteric. The percentage of error in the notifications of the three diseases was as follows:—Scarlet fever, 8·7; enteric, 26·1; diphtheria, 27·2—figures which are undoubtedly far too high. Further, it must be remembered that this does not represent the total percentage of error, since it does not include those cases where, on arrival, patients were found to be suffering from a notifiable disease other than that named on the certificate.

Post-Scarlatinal Diphtheria. The cases of post-scarlatinal diphtheria numbered 20. Of these, 1 died from an attack of acute pneumonia a month after the onset of diphtheria. It is interesting to note that in 1900, when we did not take in diphtheria, and when we treated 1,000 fewer scarlet fever patients than in 1901, we had 43 cases of this complication.

New buildings. The chief event of the year for us has been the completion and opening of the new permanent buildings, which include wards for diphtheria and enteric, a laundry and kitchen, an administrative block, and the much-needed mess, sleeping, and sitting room accommodation for the staff. Seven of the temporary buildings which were in consequence vacated were converted into wards, 84 beds being thus added to the hospital accommodation, which now stands at 604.

Staff. It is obvious that a thoroughly efficient and capable medical staff is very necessary for the proper working of such a large institution, in which the medical superintendent cannot give the same amount of help and supervision to his junior colleagues that would be possible in a smaller hospital.

There has necessarily been a large increase in all branches of the staff due to the opening of the new buildings. During the year 25 males and 196 females entered, and 13 males and 97 females left the service. The average daily number of patients was 400. The average daily number of staff employed was as follows:—Medical, 4·6; nursing, 117; other staff, 144.

Staff illness. Two members of the staff—an assistant nurse and the carpenter—died of enteric fever last year; 5 nurses, 2 wardmaids, and one laundry-maid contracted diphtheria, and 1 nurse and 2 porters scarlet fever; all recovered.

In conclusion, I should like to say how much I have been helped by my senior assistant medical officer—Dr. W. T. G. Pugh—in carrying on the work of the hospital during an exceptionally busy year.

(Signed) H. E. CUFF,
Medical Superintendent.

No. 3.

NORTH-WESTERN HOSPITAL.

LAWN ROAD, FLEET ROAD, HAMPSTEAD, N.W.,

February 26th, 1902.

Statistics. The tables show that the total number of patients under treatment during the year just completed was 3,781; of these, 1,805 were discharged, 1,326 were transferred, 275 died, and 375 remained under treatment on December 31st.

Of the 3,504 admissions, all direct from their homes or public institutions, 2,177 were cases of scarlet fever, 905 of diphtheria, 205 of enteric fever, and 217 were found at the time of arrival or subsequently to be suffering either from disorders other than the infectious disease notified or from none of an obvious or recognisable character.

Scarlet Fever. Of the total admissions, 62·1 were affected with scarlet fever, and 83 deaths were responsible to this disease or its complications, the percentage mortality, according to the Registrar-General's formula, being 3·92, a trifle higher than that of the previous year.

Diphtheria. The 905 cases of diphtheria admitted in 1901 is an increase of 133 when compared with the antecedent 12 months. Of this number, 122 died, the mortality, calculated by the accepted formula, being 13·63, a slight decrease

on all former returns. These patients manifested the usual clinical features of the disease, and for the most part gave confirmative bacteriological testimony. Antitoxin was resorted to as a customary and now recognised essential practice in all forms approaching severity. Of the whole, 41.2 were under 5 years of age and 34.4 between the years of 5 and 10, or a total of 75.6 from birth to 10 years.

Those who succumbed within 48 hours after admission are, of course, included, and number 31. Of the laryngeal cases, operative interference for the relief of impending suffocation was needed in 36 instances only, or in 3.9 per cent. of the total coming under observation. The results were most satisfactory, 77.8 per cent. recovering. Intubation was not resorted to.

**Enteric
Fever.**

Of the 205 enteric patients, 43 died, the mortality being 25.9 per cent. for males and 15.8 for females. On the whole, the type was severe.

This disorder, attacking chiefly young adults, has not infrequently obscure symptoms of a lingering and prolonged character, leading very often to the development of grave complications, and is associated with extreme risk to those removed at an advanced stage; such, however, are by no means a few of those admitted, hence the great variations in the death rate of this disorder, as recorded year after year. To justify this remark, I would state that no less than 17 succumbed at periods varying from four hours to six days after admission.

**Other
diseases.**

Of the other diseases, 217 in all were admitted, 114 were certified as scarlet fever, 70 as diphtheria, and 33 as enteric. Of the total, 27 died, or 12.13 per cent.

Transfers.

1,313 convalescent scarlet fever patients were transferred to the Northern Hospital, or 56.49 per cent.; but for this institution being available, our accommodation would have been very insufficient to meet the demand, practically great throughout the year.

**Post-
Scarlatinal
Diphtheria,**

Post-scarlatinal diphtheria was seen in 13 cases only, but of those 4 proved fatal. Antitoxin was given in each instance in the initial stage.

Staff illness.

The usual list is appended (see pp. 37-40) showing the number of those members of the staff attacked and warded on account of illness contracted in the discharge of their duties. From this it will be noted that 4 were incapacitated by scarlet fever, 3 by diphtheria, and 2 by enteric fever. There were also 39 illnesses of a non-infectious character. It is with great satisfaction that I am again able to report that no death has occurred in the nursing staff. Many changes in the nursing department, as usual, have occurred in the past year. Indeed, any long service is scarcely to be expected, as without a year's general training no assistant nurse can become a charge nurse, whatever the length of time she has been associated with the work. There can be no doubt that much valuable help is lost thereby, a fully-trained nurse looking upon a few months' residence in a fever hospital as a kind of finish to her education. It has also always been my opinion that if probationers were enrolled, the vacancies in the ranks of first and second assistants would be more easily and satisfactorily filled.

(Signed) Wm. GAYTON,

Medical Superintendent.

No. 4.

WESTERN HOSPITAL.

SEAGRAVE ROAD, FULHAM, S.W.,

February 25th, 1902.

Statistics. During last year, 2,883 patients were under treatment, including 1 born in the hospital. Of these, 1,523 were discharged, 802 were transferred, 167 died, and 391 remained under treatment at the end of the year.

Scarlet Fever. Of scarlet fever, 1,713 cases were treated, 707 were discharged, 712 were transferred, and 50 died.
The scarlet fever mortality was 3·36 per cent., as compared with 3·09 in the previous year.

Post-Scarlatinal Diphtheria. 29 patients developed post-scarlatinal diphtheria, with 1 death. In 8 cases the diagnosis of the super-added disease depended on the bacteriological examination.

Diphtheria. Of diphtheria, 866 cases were treated, 570 were discharged, 87 were transferred, and 86 died.

The diphtheria mortality was 11·48 per cent., as compared with 11·16 in the previous year.

Antitoxin was employed in 98 per cent. of the cases treated.

Tracheotomy was performed on 46 patients, of whom 24 recovered.

Enteric Fever. Of enteric fever, 148 cases were treated, 119 were discharged, and 15 died, a mortality of 12·44 per cent., as compared with 9·84 per cent. in the previous year.

Typhus Fever. 2 cases of typhus fever came under treatment, of which 1 died.

Other diseases. The original diagnosis was not confirmed in 3·2 per cent. of the cases certified scarlet fever, in 7·2 per cent. of those certified diphtheria, and in 38 per cent. of those certified enteric fever.

Plague and other accommodation. During the year the accommodation for enteric fever was reduced from 48 to 28 beds to admit of an additional ward being put into use for scarlet fever patients, and a block of 32 diphtheria beds, as well as 8 isolation wards, containing in all 16 beds, have been set apart and kept in readiness for plague cases and suspects and the requisite staff. A plague suspect was admitted in November, but was found not to be suffering from the disease.

Staff illness. 11 members of the staff contracted scarlet fever, 9 diphtheria, and 3 enteric fever, of whom 1 died. 117 suffered from other illnesses, and of these 1, a sempstress, died of meningitis.

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

No. 5.

SOUTH-WESTERN HOSPITAL.

LANDOR ROAD, STOCKWELL, S.W.,

February 6th, 1902.

Statistics. The most noteworthy facts which the statistical tables reveal are the low mortality of the diphtheria cases, viz., 8·51 per cent., and the large proportion of recoveries after tracheotomy, viz., 76·8 per cent., all of whom were treated with diphtheria antitoxin.

Works. No works of any importance have been undertaken during the year.

Staff illness. 9 members of the staff contracted an infectious disease, as a result, probably, of their employment. Happily, all recovered.

In July, after nearly four years' excellent service, Dr. A. C. Ta'Bois was transferred to Gore Farm as senior assistant medical officer. The vacancy was filled by the appointment of Dr. A. S. Morley.

(Signed) F. FOORD CAIGER,
Medical Superintendent.

No. 6.

FOUNTAIN HOSPITAL.

TOOTING GROVE,

TOOTING GRAVENEY,

February 18th, 1902.

Statistics. The total number of patients under treatment during the year was 2,414, of whom 2,245 suffered from scarlet fever, 97 from diphtheria (all but 8 admitted in 1900), and 72 from other diseases.

1,784 cases were discharged recovered, 178 were transferred to other hospitals under the Board, 58 died, and 394 remained under treatment at the end of the year.

The mortality of scarlet fever was 2·72 per cent. ; of diphtheria 1·90 per cent. ; and the gross mortality was 2·84 per cent.

Scarlet Fever. In accordance with the order of the Board, the hospital has been reserved exclusively for patients suffering from scarlet fever. The admission of diphtheria cases ceased after the first week in January. In view of the liability of scarlet fever patients to contract diphtheria and *vice versa*, and in view of the belief held in some quarters that the treatment of both classes of disease in the same hospital was the predisposing factor, the Managers decided to try the effect of reserving the Fountain Hospital for scarlet fever and the Grove Hospital for diphtheria and enteric fever. The results at this hospital are not very encouraging, since 47 patients and 5 members of the staff contracted diphtheria during the year.

Staff and administrative accommodation. The attention of the Hospitals Committee has been drawn to a report which I submitted to you dealing with the inadequacy of the staff and administrative accommodation, and in view of its importance as regards the comfort and efficient administration of the hospital, I venture to hope that the Managers will place this accommodation upon a more satisfactory footing at no distant date.

Staff illness. I submit returns showing (1) the number of staff warded through illness, including 7 cases of scarlet fever, 5 cases of diphtheria, and 90 cases of miscellaneous disorders; (2) the number of staff engaged and left during the year. As compared with 1900, the resignations show a considerable increase, chiefly in consequence of the nursing staff remaining shorter periods in the service than hitherto.

I am indebted to my colleagues for their valuable assistance in carrying on the work of the hospital. Dr. Turner has kindly prepared for me the statistical tables.

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

No. 7.

GROVE HOSPITAL.

TOOTING GROVE,

TOOTING GRAVENY, S.W.,

February 4th, 1902.

Statistics. The number of patients under treatment during the past year has been 2,159; of these, 1,704 were discharged recovered, 12 were transferred, and 146 died, leaving in hospital at the end of the year a total of 297.

The admissions included 57 cases of scarlet fever, 1,386 of diphtheria (including 173 convalescent patients, who were transferred to the hospital from other hospitals of the Board), 167 of enteric fever, and 267 suffering from other diseases.

Scarlet Fever. Of the 57 cases of scarlet fever, 10 died, showing a mortality of 9.95 per cent.

Diphtheria. Of the 1,386 cases of diphtheria, 91 died, showing a mortality of 6.96 per cent. If the transferred cases are excluded, the case mortality among the diphtheria patients becomes 8.02 per cent. Antitoxin was given in 93.4 per cent. of the cases.

Enteric Fever. As regards enteric fever, 167 patients were admitted, and 25 deaths occurred, giving a case mortality of 12.69 per cent.

Other diseases. The original diagnosis was not confirmed in 267 of the 1,704 patients who were admitted direct from their homes.

The percentage of cases in which a different diagnosis was made subsequent to admission amounted to 17·6 in the case of diphtheria patients, and 27·6 in the case of enteric fever.

Two of the scarlet fever cases were admitted as such, before the Manager's decision to admit to the hospital only patients certified to be suffering from diphtheria and enteric fever came into force on the 4th January, 1901. The rest of the scarlet fever patients (55 in number) were certified on admission to be suffering from diphtheria. Of these, 33 were diagnosed as almost certainly scarlet fever in the receiving room, and admitted direct to scarlet fever or isolation wards; 11 were regarded as doubtful and admitted to the separation rooms of the diphtheria wards; 11 escaped recognition in the receiving room, and were admitted direct to the diphtheria wards. Six other patients who were brought to this hospital as cases of diphtheria were diagnosed as scarlet fever in the receiving room, and transferred to the Fountain Hospital at once.

It is of importance that all the medical officers upon whom the duty of admitting patients rests should have experience in all the diseases which are taken into the Managers' hospitals.

On this account, the present arrangement at this hospital, by which their experience is limited, renders mistakes between the diagnosis of scarlet fever and diphtheria in the receiving room more likely to occur.

Scarlet fever subsequent to admission occurred in 37 of the 1,227 completed cases of diphtheria, or a percentage incidence of 3·0. During the previous year, when scarlet fever was being admitted to this hospital, 23 out of the 589 completed cases of diphtheria were attacked by scarlet fever.

Average residence.

The average stay of patients in hospital shows some reduction for diphtheria patients, and a slight increase in the case of enteric fever.

The numbers, however, from which this average is obtained vary within such wide limits that it does not at all represent the probable duration of stay of a case of average severity. Thus, among the enteric fever patients, the extremes varied between 4 days and 252 days.

More valuable information would be obtained from a table showing for each disease the percentage discharged at the end of each week's stay in hospital.

Staff illness.

A considerable amount of illness occurred amongst the staff, especially during the autumn of the year. It is of interest to observe that 1 medical officer, 1 charge nurse, 3 assistant nurses, 6 wardmaids, and 1 housemaid suffered from scarlet fever; whilst in the previous year, when scarlet fever patients were being regularly received into the hospital, the numbers were 1 medical officer, 1 charge nurse, 3 assistant nurses, and 5 wardmaids. In several instances there was no evidence of exposure to infection from any scarlet fever patients in the hospital.

3 members of the staff died during the year—1 charge nurse and 1 assistant nurse from enteric fever, and 1 wardmaid from pneumothorax. The assistant nurse had contracted the disease before she joined the hospital.

(Signed) J. E. BEGGS,
Medical Superintendent.

No. 8.

SOUTH-EASTERN HOSPITAL.

AVONLEY ROAD, S.E.,

6th February, 1902.

Statistics. During the year 1901, the total number of patients under treatment was 2,325, or 302 less than in 1900 and 632 less than in 1899. The chief cause in the diminution was the increased reserve which was set aside for plague purposes during the early part of the year.

The total number of admissions was 1,992. Of these, 922 were suffering from scarlet fever, 692 from diphtheria, 103 from enteric fever, 1 from typhus, 1 from a doubtful attack of plague, and 274 from other diseases.

The deaths were 177, of which 49 were from scarlet fever, 90 from diphtheria, 14 from enteric fever, and 24 from other diseases.

Calculated on the Registrar-General's formula, the case mortality was—for scarlet fever, 5·32; diphtheria, 12·57; enteric fever, 13·27; and other diseases, 8·9.

As compared with the figures for 1900, there was a rise of 1 per cent. in the scarlet fever mortality, a fall of 2 per cent. in that of diphtheria, and a rise of 3 per cent. in that of enteric fever.

Of disease contracted in hospital, 17 scarlet fever patients contracted diphtheria, 10 chickenpox, and 28 measles; 40 diphtheria patients contracted scarlet fever.

Staff illness. There have occurred among the staff 9 cases of infectious disease, all of which resulted in recovery, except 1 case of enteric fever in an assistant nurse, who, though recovered sufficiently to return to duty, has been under treatment ever since for one of the complications of that disease; and at the present time, 11 months after the onset of enteric fever, is again confined to the ward. The total of staff warded was 69, including 8 cases from other institutions. All recovered except one laundrymaid, who became insane and was transferred to an asylum.

Plague. Early in the year the special sub-committee charged with making arrangements for plague determined to set aside four wards as a plague reserve, instead of the two held in reserve the previous autumn. These wards have been fenced in and various internal alterations made. The result of this reservation is to curtail the accommodation for other diseases by 92 beds. One case only has been admitted to these wards since these arrangements were made. A boy of 10 years old, from Islington, was taken to St. Bartholomew's Hospital with an acute illness, and removed here later when most of the symptoms had disappeared. He, however, suffered after admission from buboes on each side, and I think his disease was probably a mild attack of plague. No other cases were notified in London.

Works. Besides the preparations for plague noticed above, no important alterations have been made. The subject of reconstructing the most defective portions of the hospital, which engaged your attention during the autumn of 1900, received further consideration during last year. I fear, however, the present outbreak of smallpox will cause the consideration of this subject to be still further postponed.

(Signed) F. M. TURNER,

Medical Superintendent.

No. 9.

PARK HOSPITAL.—No report.

No. 10.

BROOK HOSPITAL.

SHOOTERS HILL, WOOLWICH,

March 4th, 1902.

Statistics. The total number of cases treated was 3,006 (4 being transfers from other hospitals). Of these, 2,287 were discharged recovered, 84 were transferred to other hospitals of the Board, and 167 died. There remained under treatment on December 31st, 468 patients.

Scarlet Fever. The number of cases treated was 1,662. Of these, 1,228 were discharged recovered, 74 were transferred, and 35 died. The mortality was therefore 2·53 per cent.

Diphtheria. The number of cases treated was 925. Of these, 714 were discharged recovered, 10 were transferred, and 88 died. The mortality was therefore 10·79 per cent.

There were 37 hæmorrhagic cases, and 12 died within 24 hours of admission. Tracheotomy was performed on 39 patients, of whom 10 died; therefore 74·4 per cent. of those operated on recovered.

Antitoxin treatment. Of 812 completed cases, 723 were treated with antitoxin. The following table shows the results of the antitoxin treatment with special reference to the day of disease on which the treatment began:—

AGES.	DAY OF DISEASE ON WHICH TREATMENT BEGAN.										TOTAL.		Mortality per cent.
	1st.		2nd.		3rd.		4th.		5th. and upwards.		Cases.	Deaths.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.			
Under 1	1	0	0	0	1	0	1	0	5	2	8	2	25·0
1 to 2	4	0	11	2	9	2	4	0	12	4	40	8	20·0
2 to 3	6	0	15	1	23	4	10	1	22	2	76	8	10·5
3 to 4	6	0	20	1	21	2	22	4	24	2	93	9	9·6
4 to 5	5	0	25	1	24	4	21	3	27	5	102	13	12·7
5 to 10	12	0	61	1	69	10	54	9	65	13	261	33	12·6
10 to 15	2	0	20	0	26	0	13	0	17	3	78	3	3·8
15 to 20	1	0	13	1	8	1	3	0	7	0	32	2	6·2
20 and upwards	1	0	5	0	11	0	9	0	7	0	33	0	0·0
Total	38	0	170	7	192	23	137	17	186	31	723	78	...
Mortality per cent. ... }	0·0		4·1		11·9		12·4		16·6		10·79		...

For the purpose of comparison I give the results of the antitoxin treatment here for the five years 1897 to 1901 inclusive:—

		1897.	1898.	1899.	1900.	1901.
Of cases treated on 1st day of disease	the mortality per cent. was	0·0	0·0	0·0	0·0	0·0
„ „ „ 2nd	„ „ „	5·4	5·0	3·8	3·6	4·1
„ „ „ 3rd	„ „ „	11·5	14·3	12·2	6·7	11·9
„ „ „ 4th	„ „ „	19·0	18·1	20·0	14·9	12·4
„ „ „ 5th day and after	„ „ „	21·0	22·5	20·4	21·2	16·6

For five consecutive years, therefore, there has not been a death among the cases that came under treatment on the first day of disease, and of those coming under treatment on the second day of disease the mortality has not exceeded 5·4 per cent. These statistics afford striking evidence of the value of antitoxin in the treatment of diphtheria, and of the paramount importance of the treatment being adopted at the earliest possible moment after the onset of the disease.

**Enteric
Fever.**

The number of cases treated was 211. Of these, 163 were discharged recovered, and 27 died. The mortality was therefore 15·21 per cent.

**Illness of
staff.**

(a) *Infectious diseases.*—7 officers contracted scarlet fever, 7 contracted diphtheria, and 2 contracted enteric fever. All recovered.
(b) *Other diseases.*—156 officers were warded with various ailments.

All recovered.

(Signed) JOHN MACCOMBIE,
Medical Superintendent.

No. 11.

NORTHERN HOSPITAL.

WINCHMORE HILL, N.,
January 31st, 1902.

Statistics.

The total number of patients treated during the year was 5,091. Of these, 562 were in the hospital at the end of 1900, and 4,529 were admitted during 1901; 4,322 were discharged, and 5 died; 764 remaining under treatment at the end of the year.

Of the admissions, 3,950 were scarlet fever and 574 diphtheria cases. The total mortality was 0·11, that of scarlet fever being 0·13, and that of diphtheria *nil*. Two of the deaths were due to measles.

109 cases of post-scarlatinal diphtheria were completed, with 1 death.

Works.

No structural works have been undertaken. Towards the close of the year a section of the roads was re-made, and in part paved with granite setts; and a wood pavement laid down in a part of the laundry yard and the road immediately adjoining it.

The electric light has continued to give entire satisfaction.

Staff illness. I regret to record the death of the chaplain, the Rev. A. C. A. Drought. His successor as vicar of Winchmore Hill, Rev. A. J. B. Dewdney, has been appointed chaplain in his place.

The staff statistics, together with the average daily number of patients, are given on the table on pp. 37-40.

108 members of the staff have been incapacitated for duty for varying periods by illness. Of these, 8 assistant nurses, 4 wardmaids, 1 housemaid, and 1 porter contracted scarlet fever, and 1 nurse, 1 sempstress, 2 wardmaids, and 1 porter, diphtheria. All recovered, with the exception of Wardmaid Neil, who died from scarlet fever.

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

No. 12.

GORE FARM HOSPITAL.

DARTFORD, KENT,

April 7th, 1902.

Statistics. During the year 1901 there were 1,245 fever and diphtheria patients treated in the hospital. Of these, 1,231 were discharged recovered, and 14 were transferred to other hospitals of the Board. There was no death.

Scarlet Fever. The number of scarlet fever patients under treatment was 1,156. Of these, 1,142 were discharged recovered, and 14 were transferred to other hospitals of the Board.

Diphtheria. The number of diphtheria patients under treatment was 88, and all were discharged recovered.

Enteric Fever. There was 1 case of enteric fever under treatment, and this case was discharged recovered.

Post-Scarlatinal Diphtheria. There were 75 completed cases of post-scarlatinal diphtheria.

Smallpox. The hospital was opened for the reception of smallpox patients on the 30th of October, and from that date to the end of the year 1,073 smallpox patients were admitted. Of these, 532 were discharged recovered, 3 died, and 538 remained in the hospital at the end of the year.

(Signed) FREDERIC THOMSON,
Medical Superintendent.

FEVER STATISTICS.—TABLE I.—

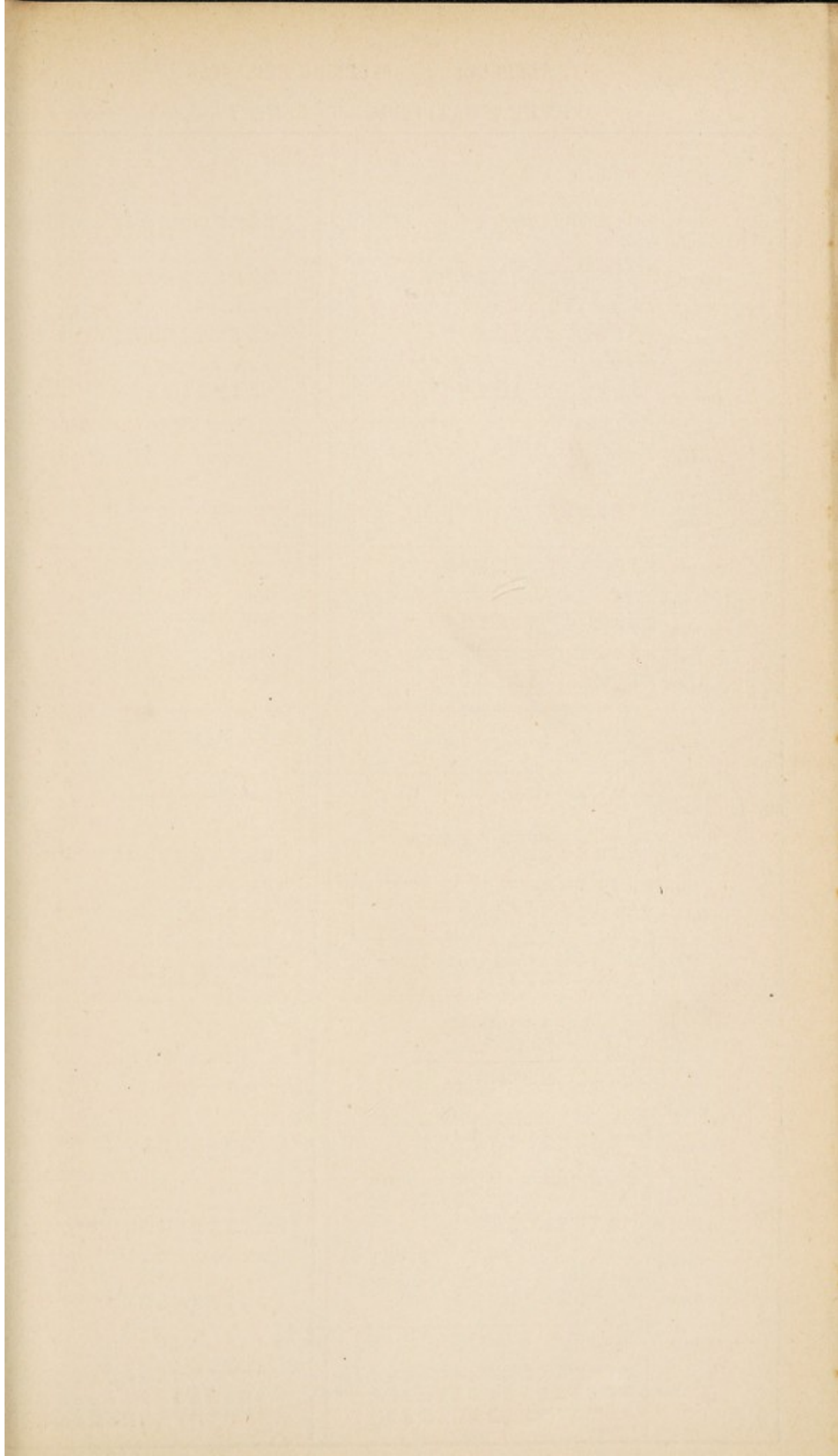
EASTERN HOSPITAL.									
DISEASES.	Remain- ing on Dec. 31st, 1900.	Admitted during 1901.		Total under treatment during 1901.	Discharged during 1901.		Died during 1901.	Mortality per cent.	Remain- ing on Dec. 31st, 1901.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet	8	190	13	211	98	72	11	5.72	30
Diphtheria	227	1,450	7	1,684	917	419	149	10.10	199
Enteric	32	150	...	182	155	...	10	6.38	17
Typhus ... ..	...	1	...	1	...	...	1	100.00	...
	267	1,791	20	2,078	1,170	491	171	9.39	246
Other diseases	19	235	...	254	215	...	22	9.32	17
Totals	286	2,026	20	2,332	1,385	491	193	...	263
NORTH-EASTERN HOSPITAL.									
Scarlet	288	2,805	1	3,094	1,279	1,324	94	3.41	397
Diphtheria	1	466	...	467	252	39	64	15.59	112
Enteric ... ..	...	42	...	42	23	...	8	21.91	11
Typhus ... ..	...	...	...	...	...	...	...	...	...
	289	3,313	1	3,603	1,554	1,363	166	5.18	520
Other diseases	12	383	...	395	363	1	16	4.19	15
Totals	301	3,696	1	3,998	1,917	1,364	182	...	535
NORTH-WESTERN HOSPITAL.									
Scarlet	146	2,177	1	2,324	660	1,313	83	3.92	274
Diphtheria	79	905	...	984	751	12	122	13.63	90
Enteric	46	205	...	251	194	...	43	19.45	11
Typhus ... ..	...	...	...	...	...	...	...	...	...
	271	3,287	1	3,559	1,605	1,325	248	7.67	375
Other diseases	5	217	...	222	200	1	27	12.13	...
Totals	276	3,504	1	3,781	1,805	1,326	275	...	375
WESTERN HOSPITAL.									
Scarlet	212	1,500	1	1,713	707	712	50	3.36	244
Diphtheria	111	754	1	866	570	87	86	11.48	123
Enteric	41	107	...	148	119	...	15	12.44	14
Typhus ... ..	...	2	...	2	1	...	1	50.00	...
	364	2,363	2	2,729	1,397	799	152	6.45	381
Other diseases	11	143	...	154	126	3	15	10.45	10
Totals	375	2,506	2	2,883	1,523	802	167	...	391
SOUTH-WESTERN HOSPITAL.									
Scarlet	173	1,189	2	1,364	755	339	52	4.45	218
Diphtheria	66	494	...	560	380	71	42	8.51	67
Enteric	18	66	...	84	62	...	11	15.82	11
Typhus ... ..	...	...	...	...	...	...	...	...	...
	257	1,749	2	2,008	1,197	410	105	6.06	296
Other diseases	9	145	...	154	132	...	12	8.30	10
Totals	266	1,894	2	2,162	1,329	410	117	...	306
FOUNTAIN HOSPITAL.									
Scarlet	207	2,017	21	2,245	1,621	178	53	2.72	393
Diphtheria	89	8	...	97	96	...	1	1.90	...
	296	2,025	21	2,342	1,717	178	54	2.84	393
Other diseases ... ..	...	72	...	72	67	...	4	2.79	1
Totals	296	2,097	21	2,414	1,784	178	58	...	394
GROVE HOSPITAL.									
Scarlet	93	57	...	150	123	11	10	9.95	6
Diphtheria	87	1,213	173	1,473	1,135	1	91	6.96	246
Enteric	84	167	...	251	202	...	25	12.69	24
Typhus ... ..	...	...	...	...	...	...	...	...	...
	264	1,437	173	1,874	1,460	12	126	7.85	276
Other diseases	18	267	...	285	244	...	20	7.53	21
Totals	282	1,704	173	2,159	1,704	12	146	...	297

Admissions, Discharges, and Deaths during 1901.

SOUTH-EASTERN HOSPITAL.									
DISEASES.	Remain- ing on Dec. 31st, 1900.	Admitted during 1901.		Total under treatment during 1901.	Discharged during 1901.		Died during 1901.	Mortality per cent.	Remain- ing on Dec. 31st 1901.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet	132	922	1	1,055	408	462	49	5.32	136
Diphtheria	151	692	...	843	538	112	90	12.57	103
Enteric	34	103	...	137	93	1	14	13.27	29
Typhus ... ..	...	1	...	1	1	...	...	...	...
Other diseases	317	1,718	1	2,036	1,040	575	153	8.77	268
Totals	15	274	...	289	242	...	24	8.9	23
Totals	332	1,992	1	2,325	1,282	575	177	...	291
PARK HOSPITAL.									
Scarlet	91	2,262	8	2,361	1,634	231	100	4.72	396
Diphtheria	108	821	1	930	724	5	116	13.92	85
Enteric	57	124	...	181	146	...	22	15.07	13
Typhus ... ..	...	...	...	...	...	...	...	...	...
Other diseases	256	3,207	9	3,472	2,504	236	238	7.68	494
Totals	20	436	...	456	434	...	12	2.72	10
Totals	276	3,643	9	3,928	2,938	236	250	...	504
BROOK HOSPITAL.									
Scarlet	238	1,420	4	1,662	1,228	74	35	2.53	325
Diphtheria	106	819	...	925	714	10	88	10.79	113
Enteric	46	165	...	211	163	...	27	15.21	21
Typhus ... ..	...	9	...	9	7	...	2	22.22	...
Other diseases	390	2,413	4	2,807	2,112	84	152	6.37	459
Totals	6	193	...	199	175	...	15	7.83	9
Totals	396	2,606	4	3,006	2,287	84	167	...	468
NORTHERN HOSPITAL.									
Scarlet	481	...	3,950	4,445	3,703	12	5	0.13	711
Diphtheria	81	...	574	646	592	10	...	...	53
Other diseases	562	...	4,524	5,091	4,295	22	5	0.11	764
Totals ... ..	...	...	5	...	5	...	...	...	...
Totals	562	...	4,529	5,091	4,300	22	5	...	764
GORE FARM HOSPITAL.									
Scarlet	416	...	740	1,156	1,142	14	...	...	...
Diphtheria	78	...	10	88	88	...	...	...	...
Enteric ... ..	...	...	1	1	1	...	...	...	...
Other diseases	494	...	751	1,245	1,231	14	...	...	...
Totals ... ..	...	...	...	...	...	...	...	...	...
Totals	494	...	751	1,245	1,231	14	...	...	...
SUMMARY.									
Scarlet	2,485	14,539	4,742	17,024	13,358	4,742	542	3.81	3,124
Diphtheria	1,184	7,622	766	8,806	6,757	766	849	11.15	1,200
Enteric	358	1,129	1	1,487	1,158	1	175	14.22	154
Typhus ... ..	...	13	...	13	9	...	4	30.77	...
Other diseases	4,027	23,303	5,509	27,330	21,282	5,509	1,570	6.80	4,478
Totals	115	2,365	5	2,480	2,203	5	167	7.07	110
Grand Totals	4,142	25,668	5,514	29,810	23,485	5,514	1,737	...	4,588

NOTES.—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.



FEVER STATISTICS.—TABLE IV.—Scarlet Fever Admissions

AGES.	EASTERN HOSPITAL.						NORTH-EASTERN HOSPITAL.						NORTH-WESTERN HOSPITAL.						WESTERN HOSPITAL.												
	MALES.			FEMALES.			TOTAL.			MALES.			FEMALE.			TOTAL.			MALES.			FEMALES.			TOTAL.						
	Admitted.	Died.	Of Direct Admissions.	Admitted.	Died.	Of Transferred Cases.	Admitted.	Died.	Of Direct Admissions.	Admitted.	Died.	Of Transferred Cases.	Admitted.	Died.	Of Direct Admissions.	Admitted.	Died.	Of Transferred Cases.	Admitted.	Died.	Of Direct Admissions.	Admitted.	Died.	Of Transferred Cases.	Admitted.	Died.	Of Direct Admissions.	Admitted.	Died.	Of Transferred Cases.	
Under 1	1	...	1	2	1	...	17	2	8	2	23	4	4	...	18	2	11	...	29	2	...	5	...	...	24	1	3	13	3	...
1 to 2	4	2	...	8	2	...	55	6	46	5	103	11	...	43	3	37	3	80	6	...	24	1	...	57	4	30	54	4	...		
2 to 3	9	1	...	20	3	...	102	14	90	6	192	20	...	77	6	77	16	154	22	...	57	4	...	72	10	56	113	8	...		
3 to 4	12	...	...	22	2	...	108	8	139	9	247	17	...	78	8	87	5	165	13	...	72	10	...	62	...	70	142	18	...	
4 to 5	13	...	...	21	1	...	148	3	158	6	306	9	...	107	8	104	4	211	12	...	62	...	...	72	...	72	134	4	...	
5 to 10	16	...	...	55	1	...	545	15	528	3	1073	18	...	363	12	472	9	835	21	...	218	4	...	218	4	317	4	535	8	...
10 to 15	5	...	...	14	1	...	258	4	228	3	486	7	...	136	2	209	1	345	3	...	108	...	...	108	...	145	...	253	...	...
15 to 20	4	...	...	10	...	...	111	2	104	1	215	3	...	60	...	85	1	145	1	...	75	1	...	75	1	54	1	129	2	...
20 to 25	...	...	...	10	...	...	43	2	48	1	91	3	...	22	...	30	...	125	1	...	41	1	...	41	1	31	1	72	2	...
25 to 30	1	...	...	10	...	...	19	...	20	...	39	...	...	9	...	13	...	52	...	...	13	...	...	13	...	19	...	32	...	...
30 to 35	...	...	...	1	...	...	6	1	12	...	18	1	...	4	...	4	...	22	...	...	10	...	...	10	...	5	...	15	...	...
35 to 40	...	...	...	...	...	...	1	...	4	...	5	...	...	4	...	4	...	8	...	...	2	...	...	2	...	2	...	4	...	...
40 to 45	...	...	...	...	...	...	2	...	1	...	3	...	...	1	...	3	...	4	...	...	1	...	...	1	...	3	...	4	...	...
45 to 50	1	...	...	1	...	...	1	...	1	...	2	1	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...	2	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60
And upwards
Totals...	66	3	124	8	190	11	1418	58	1387	36	2805	94	...	979	43	1198	40	2,177	83	...	688	21	...	688	21	812	29	1,500	50	...	
	SOUTH-WESTERN HOSPITAL.						FOUNTAIN HOSPITAL.						GROVE HOSPITAL.						SOUTH-EASTERN HOSPITAL.												
Under 1	11	4	12	1	23	5	10	2	9	...	19	...	...	2	1	2	1	4	4	2	8	2	...	21	6	5	13	4	...	...
1 to 2	21	6	20	1	41	7	28	2	29	3	57	5	...	3	1	4	2	7	7	3	2	3	...	45	4	24	45	10	...	...
2 to 3	41	6	43	3	84	9	68	3	59	6	127	9	...	3	1	1	1	4	4	2	2	3	...	45	4	43	12	88	16	...	
3 to 4	63	6	54	3	117	9	104	7	73	3	177	10	...	...	...	...	...	...	...	...	...	...	...	39	4	46	4	85	8	...
4 to 5	53	2	56	2	109	4	117	5	84	3	201	8	...	4	...	2	...	6	6	...	...	...	...	43	1	54	2	97	3	...
5 to 10	194	9	248	4	442	13	404	6	366	5	770	11	...	9	...	7	1	16	1	1	1	1	...	126	5	205	2	231	7	...	
10 to 15	86	1	97	...	183	1	196	1	163	4	339	4	...	5	...	4	1	9	9	1	1	1	...	46	1	89	...	135	1	...	
15 to 20	48	1	46	...	94	1	89	1	59	1	148	2	...	4	...	3	...	7	7	...	...	...	...	26	...	39	...	65	...	...
20 to 25	24	1	23	2	47	3	49	2	38	1	87	3	...	2	...	1	1	3	3	1	1	1	...	10	...	25	...	35	...	...
25 to 30	15	...	12	...	27	...	20	...	21	1	41	1	2	...	18	...	20
30 to 35	4	...	5	...	9	...	14	...	7	...	21	2	...	2
35 to 40	2	...	4	...	6	...	2	...	4	...	6	4	...	6
40 to 45	2	...	1	...	3	...	1	...	1	...	2
45 to 50	1	...	1	...	2	1	...	1
50 to 55	1	...	1	1
55 to 60
And upwards	1	1
Totals	566	36	623	15	1189	52	1103	26	914	27	2017	53	...	32	3	25	7	57	10	...	368	23	...	368	23	554	26	922	49	...	

and Deaths during 1901, divided according to Age and Sex.

AGES.	PARK HOSPITAL.						BROOK HOSPITAL.						NORTHERN HOSPITAL.						GORE FARM HOSPITAL.						
	MALES.			FEMALES.			MALES.			FEMALES.			MALES.			FEMALES.			MALES.			FEMALES.			
	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	
Under 1	9	3	5	17	2	19	7	3	10	4	1	5	4	1	5	11	1	12	4	1	5	4	1	5	
1 to 2	47	8	55	88	6	94	39	7	46	23	2	25	23	2	25	62	2	64	39	7	46	23	2	25	
2 to 3	84	12	96	160	6	166	50	1	51	36	3	39	36	3	39	86	3	89	50	1	51	36	3	39	
3 to 4	105	9	114	217	4	221	58	4	62	63	...	63	63	...	63	121	4	125	58	4	62	63	...	63	
4 to 5	129	6	135	263	5	268	68	2	70	79	1	80	79	1	80	147	3	150	68	2	70	79	1	80	
5 to 10	428	18	446	865	11	876	263	1	264	277	2	279	277	2	279	540	3	543	263	1	264	277	2	279	
10 to 15	199	1	200	406	4	410	132	1	133	130	4	134	130	4	134	262	5	267	132	1	133	130	4	134	
15 to 20	90	1	91	146	3	149	61	...	61	46	2	48	46	2	48	107	2	109	61	...	61	46	2	48	
20 to 25	26	1	27	58	...	58	28	...	28	21	49	29	21	49	...	...	...	28	...	28	21	49	...	...
25 to 30	13	...	13	26	...	26	10	...	10	10	1	11	10	1	11	20	1	21	10	...	10	10	1	11	
30 to 35	5	...	5	10	...	10	4	...	4	2	6	4	2	6	...	...	...	4	...	4	2	6	...	...
35 to 40	2	...	2	7	...	7	4	...	4	...	4	4	...	4	...	...	...	4	...	4	...	4	...	...
40 to 45	1	...	1	2	...	2	2	...	2	1	3	2	1	3	...	...	...	2	...	2	1	3	...	...
45 to 50
50 to 55
55 to 60
And upwards
Totals...	1,198	59	1,257	2,262	41	2,303	726	19	745	694	16	710	420	35	455	1	1	2	726	19	745	694	16	710	

SUMMARY.						
AGES.	Admitted.	Died.	Total.	Admitted.	Died.	Total.
Under 1	86	17	103	154	13	167
1 to 2	287	42	329	512	29	541
2 to 3	536	52	588	1,028	59	1,087
3 to 4	639	56	695	1,294	39	1,333
4 to 5	744	27	771	1,495	30	1,525
5 to 10	2,566	70	2,636	5,462	43	5,505
10 to 15	1,171	10	1,181	2,464	18	2,482
15 to 20	568	7	575	1,070	9	1,079
20 to 25	284	7	291	577	7	584
25 to 30	115	...	115	267	2	269
30 to 35	52	1	53	104	1	105
35 to 40	19	2	21	46	3	49
40 to 45	10	...	10	21	...	21
45 to 50	3	...	3	8	...	8
50 to 55	3	1	4	5	...	5
55 to 60	1	...	1	2	...	2
And upwards	...	...	...	...	...	...
Grand Totals	7,084	292	7,376	14,539	250	14,789

Admissions and Deaths at various ages during 1901.

AGES.	PARK HOSPITAL.						BROOK HOSPITAL.						NORTHERN HOSPITAL.						GORE FARM HOSPITAL.								
	MALES.			FEMALES.			TOTAL.			MALES.			FEMALES.			TOTAL.			MALES.			FEMALES.			TOTAL.		
	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.
	Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.		Of Direct Admissions.	Of Transferred Cases.	
Under 5	5	1	1	6	1	3	5	2	8	2	26	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
5 to 10	5	...	5	10	1	12	14	2	26	2	25	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
10 to 15	19	...	9	28	2	13	12	2	25	1	37	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
15 to 20	13	3	4	17	4	28	7	9	37	1	33	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
20 to 25	8	2	13	21	4	21	2	12	33	...	14	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
25 to 30	9	2	11	20	4	7	2	7	14	2	10	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
30 to 35	5	1	1	6	1	4	2	6	10	2	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
35 to 40	4	1	4	8	2	3	1	2	5	...	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
40 to 45	2	1	1	3	1	3	1	1	4	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
45 to 50	2	...	3	5	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	72	11	52	124	22	95	16	70	165	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27	27

SUMMARY.						
AGES.	MALES.	FEMALES.	TOTAL.	Admitted.	Died.	Transferred Cases.
Under 5	20	1	24	4	5	...
5 to 10	59	7	65	3	10	...
10 to 15	111	6	95	11	17	...
15 to 20	126	25	80	9	34	...
20 to 25	97	15	84	7	22	...
25 to 30	60	15	72	14	29	...
30 to 35	52	14	85	6	20	...
35 to 40	35	11	35	6	17	...
40 to 45	25	8	9	1	9	...
45 to 50	8	1	22	7	8	...
50 to 55	2	1	4	1	2	...
55 to 60	1	1	2	1	2	...
And upwards	2	...	3	...	...	...
Grand Totals	599	105	580	70	175	...

TABLE VII.—*Typhus Fever Admissions and Deaths*

AGE.	EASTERN HOSPITAL.							WESTERN HOSPITAL.						
	MALES.		FEMALES.		TOTAL.			MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.		Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	
						Of Direct Admissions.	Of Transferred Cases.						Of Direct Admissions.	Of Transferred Cases.
Under 5
5 to 10
10 to 15
15 to 20
20 to 25	1	1	...	...	1	1	...	...	...	...	...	...	...	...
25 to 30
30 to 35
35 to 40
40 to 45	1	1	1	1	...
45 to 50
50 to 55	1	...	...	1	...	...
55 to 60
And upwards
Totals	1	1	...	...	1	1	...	1	...	1	1	2	1	...

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

Disease as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.		NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Scarlet Fever ...	673	GENERAL DISEASES.								
		Erysipelas ... ..	...	...	...	...	1	1	...	...
		Febricula	1	...	...	...	...	...	...	...
		Gonorrhœa ... ..	...	...	...	...	...	...	...	...
		Measles	1	...	8	3	17	4	6	1
		Purpura ... ..	...	...	...	...	...	...	...	...
		Rheumatism ... ..	...	...	...	...	...	...	...	...
		" acute ... ..	...	...	1	1	...	...	...	...
		Rickets ... ..	...	...	...	...	...	...	...	...
		Rubella ... ..	...	...	23	...	21	...	18	...
		Syphilis ... ..	...	...	...	...	...	...	...	...
		Vaccinia ... ..	...	...	1	...	...	...	...	...
		Varicella ... ..	...	...	6	1	2	...	1	...
		Variola ... ..	...	...	1	...	1	...	1	...
		Whooping Cough ... ..	...	...	3	1	1	...	...	...
		LOCAL DISEASES.								
		<i>Digestive System.</i>								
		Catarrh, gastric... ..	...	...	...	...	...	...	...	...
		Dentition ... ..	...	...	...	...	3	...	...	...
		Enteritis ... ..	...	...	...	...	...	...	...	...
		Intussusception... ..	...	...	...	...	...	...	...	...
		Pharyngitis	2	...	...	...	...	...	...	...
		Stomatitis ... ..	...	...	...	...	1	...	...	...
		Tonsillitis	7	...	44	...	3	...	12	...
		<i>Respiratory System.</i>								
		Bronchitis ... ..	...	...	...	...	...	...	...	...
		Laryngitis ... ..	...	...	1	...	...	...	...	...
		Phthisis ... ..	...	...	1	...	...	...	1	...
		Pleurisy ... ..	...	...	...	...	...	...	...	...
		Pneumonia... ..	...	...	...	...	...	...	1	...
		" broncho-... ..	...	...	1	1	1	1	...	...
		Pneumothorax ... ..	...	...	...	...	...	...	...	...
		<i>Nervous System.</i>								
		Hydrocephalus	1	1	...	...	...	...	...	...
		Meningitis ... ..	...	...	...	...	2	2	...	...
		<i>Urinary System.</i>								
		Albuminuria	1	...	...	...	...	...	...	...
		Nephritis ... ..	...	...	1	1	...	...	...	...
		Vesical calculus ... ..	...	...	1	1	...	...	...	...
		<i>Skin Diseases.</i>								
		Acne ... ..	...	...	...	...	...	...	...	...
		Dermatitis	1	...	1	1	...	...	...	...
		Drug rash ... ..	...	...	...	...	1	...	...	...
Eczema ... ..	...	...	1	...	...	...	...	...
Erythema	1	...	54	...	15	...	...	...
Herpes ... ..	...	...	1	...	...	...	...	...
Impetigo ... ..	...	...	...	...	...	...	...	...
Mussel rash ... ..	...	...	1	...	...	...	...	...
Pityriasis rosea ... ..	...	...	...	...	1	...	...	...
Tinea versicolor ... ..	...	...	...	...	...	...	...	...
Urticaria ... ..	...	...	1	...	1	...	1	...		
Xeroderma ... ..	...	...	...	...	...	...	...	...
Carried forward	673	...	15	1	151	10	71	8	41	1

Miscellaneous Diseases admitted during 1901.

SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE HOSPITAL.		SOUTH-EASTERN HOSPITAL.		PARK HOSPITAL.		BROOK HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
...	1	...	...	...	1	...	3	1
...	2	...	...	...	3	...
...	1	...	1	...	...	...	2	...
11	3	12	1	...	...	8	2	22	...	6	...	91	14
...	...	1	...	...	...	...	...	...	...	...	...	1	...
...	1	...	1	...	2	...
...	1	1
1	1	...
15	...	20	...	...	...	2	...	9	...	...	...	108	...
...	1	...	1	...
...	3	...	...	...	4	...
...	3	...	3	...	3	...	18	1
...	3	...
1	1	...	1	...	...	...	7	1
...
1	1	...
...	...	1	...	...	...	...	...	2	...	...	...	6	...
...	2	...	...	...	2	...
1	1	...	...	...	...	...	...	...	...	...	...	1	1
1	1	...	...	...	4	...
1	2	...
19	...	14	...	...	...	14	...	51	1	9	...	173	1
...	3	...	1	...	4	...
...	1	...
...	2	...
1	1	...
2	...	3	1	...	...	1	...	4	...	1	...	12	1
1	1	...	...	...	4	2
...	1	...	...	...	1	...
...	1	...
...	1	1	...	...	...	...	1	1
...	3	3
...
...	...	1	...	...	...	...	...	...	...	...	...	2	...
...	...	1	...	...	...	...	...	2	...	...	...	4	1
...	1	1
...
1	1	...
...	2	1
1	...	3	...	...	...	...	...	2	...	13	...	20	...
...	1	...
19	...	9	...	...	...	15	...	49	...	...	...	162	...
...	1	...
...	...	1	...	...	...	...	...	1	...	2	...	4	...
...	1	...
...	1	...
...	1	...	...	...	1	...
...	...	1	...	...	...	...	...	3	...	...	...	7	...
1	1	...	...	...	...	...	2	...
77	4	67	2	...	...	48	3	165	1	38	...	673	30

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

Disease as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.		NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward	673	... ..	15	1	151	10	71	8	41	1
Scarlet Fever (continued)	184	<i>Circulatory System.</i>								
		Heart disease ... ..	...	...	1	...	...	...	...	...
		Heart disease, congenital ... ..	...	...	...	...	...	...	...	...
		<i>Not Classified.</i>								
		Abscess ... ..	...	...	...	...	...	...	...	...
		Adenitis ... ..	...	...	...	...	...	...	...	...
		Cellulitis	1	...	...	...	...	...	...	...
		Marasmus ... ..	...	...	...	...	...	...	...	...
		Sarcoma of rib ... ..	...	...	...	...	1	...	...	...
		Tuberculous disease of foot	1	...	...	...	...	...	...	...
No obvious disease ...	10	...	93	...	40	...	8	...		
Admitted with mother ...	...	...	...	...	2	...	...	...
	857		27	1	245	10	114	8	49	1
Diphtheria ...	176	GENERAL DISEASES.								
		Debility ... ..	...	...	...	...	...	...	...	...
		Febricula ... ..	...	...	...	...	...	...	...	...
		Measles	8	2	1	...	3	2	5	...
		Rheumatism ... ..	...	...	...	...	...	...	...	...
		Syphilis	1	...	...	...	4	...	...	...
		Tuberculosis ... ..	...	...	...	...	...	...	...	...
		Vaccinia	1	...	...	...	...	...	...	...
		Varicella	1	...	...	...	...	...	...	...
		Variola ... ..	...	...	...	...	...	...	...	...
		Whooping Cough ...	1	...	1	...	...	...	2	...
		LOCAL DISEASES.								
		<i>Respiratory System.</i>								
		Bronchitis	2	...	1	...	...	...	...	...
		Catarrh ... ..	...	...	...	...	...	...	...	...
		Coryza	5	...	...	...	...	...	...	...
		Laryngitis	16	...	4	...	...	...	...	...
		Phthisis ... ..	...	...	...	...	1	...	...	...
		Pneumonia	1	...	1	...	1	...	...	...
		„ broncho-	4	3	1	1	3	3	...	...
		<i>Digestive System.</i>								
		Colitis, ulcerative ...	...	...	...	...	...	...	...	...
		Dental abscess ... ..	...	...	...	...	...	...	...	...
Dentition	1	...	...	...	...	...	1	1		
Diarrhœa ... ..	...	...	...	...	...	...	...	...
Jaundice	1	...	...	...	...	...	...	...
Pharyngitis ... ..	...	...	...	...	...	...	...	...
Post - pharyngeal abscess	1	...	...	...	3	1	...	...
	176	Carried forward ...	43	5	9	1	15	6	8	1
Carried forward	1,033	... ..	70	6	254	11	129	14	57	2

of Miscellaneous Diseases admitted during 1901.

SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE HOSPITAL.		SOUTH-EASTERN HOSPITAL.		PARK HOSPITAL.		BROOK HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
77	4	67	2	...	...	48	3	165	1	38	...	673	30
...	1	...
...	...	1	1	...	...	...	...	...	...	...	...	1	1
1	3	...	...	...	4	...
...	1	...	...	...	1	...
...	...	1	1	...	...	...	...	...	...	...	...	1	1
...	1	...
2	...	1	...	...	...	3	...	7	...	4	...	168	...
...	...	2	...	...	...	...	...	...	...	1	...	5	...
80	4	72	4	...	...	51	3	176	1	43	...	857	32
...	1	...	...	...	...	...	...	...	1	...
...	1	...	...	...	...	...	...	...	1	...
3	8	2	5	1	8	3	6	2	47	12
...	1	...	...	...	...	...	...	...	1	...
...	2	...	...	...	1	...	2	...	10	...
1	1	...	...	2	2	...	...	...	...	...	...	3	3
...	1	...
...	1	...	2	...
1	1	...
...	2	...	...	...	...	...	...	...	6	...
...	2	...	1	...	6	...
...	1	...	...	...	1	...
...	2	...	5	...	10	...	...	...	37	...
...	1	...
2	8	3	1	...	3	2	17	5
2	2	...	...	3	1	...	...	...	...	...	...	13	10
...	1	1	...	...	1	1
...	1	...	...	...	...	...	...	...	1	...
...	1	...	...	...	3	1
...	1	...	1	...
...	1	...
1	1	...	...	5	...	...	...	1	...	1	...	8	1
1	2	...	...	...	1	...	...	...	8	1
11	4	...	...	30	5	18	4	27	4	15	4	176	34
91	8	72	4	30	5	69	7	203	5	58	4	1,033	66

FEVER STATISTICS—TABLE VIII. (continued)—Details

Disease as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL		NORTH-EASTERN HOSPITAL.		NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward	1,033	...	70	6	254	11	129	14	57	2
Brought forward —Diphtheria	176	...	43	5	9	1	15	6	8	1
Diphtheria (continued)										
	942	<i>Digestive System (contd.)</i>								
		Stomatitis ...	1	...	1	...	2	...	...	...
		Thrush ...	...	...	...	...	...	...	...	...
		Tonsillitis ...	88	...	169	1	50	...	41	...
		<i>Circulatory System.</i>								
		Heart disease ...	...	...	...	...	...	...	...	...
		<i>Female Breast, Disease of.</i>								
		Mastitis ...	...	...	...	...	...	...	...	...
		<i>Locomotive System.</i>								
		Morbus coxæ ...	...	...	...	...	...	...	...	...
		<i>Nervous System.</i>								
		Convulsions ...	...	...	...	...	...	...	...	...
		Hemiplegia ...	...	...	1	1	...	...	...	...
		Meningitis ...	1	1	...	...	1	1	1	1
		<i>Skin Diseases.</i>								
		Erythema ...	1	...	...	...	...	...	...	...
		Herpes ...	1	...	...	...	...	...	...	...
		Impetigo ...	...	...	...	...	...	...	1	...
		<i>Nose, Disease of.</i>								
		Rhinitis ...	...	...	...	...	1	...	...	...
	<i>Urinary System.</i>									
	Nephritis ...	...	...	1	...	...	...	...	...
	<i>Not Classified.</i>									
	Adenitis ...	...	...	...	...	...	...	...	...
	Angina Ludovici ...	...	...	1	1	...	...	...	...
	Conjunctivitis ...	1	...	...	...	...	...	...	...
	Otitis media ...	1	...	...	...	...	...	...	...
	No obvious disease ...	5	...	5	...	1	...	4	...	
	Children admitted with mothers ...	2	...	...	...	...	...	...	...
	1,118		144	6	127	4	70	7	55	2
Enteric Fever ...	63	GENERAL DISEASES.								
		Alcoholism ...	...	...	...	...	1	...	...	...
		Anæmia ...	1	...	...	...	...	...	...	...
		Debility ...	...	...	...	...	...	...	...	...
		Erysipelas ...	...	...	...	...	...	...	2	1
		Febricula ...	10	...	...	...	1	...	...	...
		Gonorrhœa ...	...	...	...	...	...	...	...	...
		Influenza ...	2	...	...	...	...	...	5	...
		Leucocythæmia ...	...	...	...	...	...	...	...	...
		Measles ...	...	...	...	...	...	...	...	...
		Puerperal fever ...	...	...	...	...	1	1	1	1
		Pyæmia ...	...	...	1	...	...	...	...	...
	Rheumatism ...	...	...	...	...	...	...	...	...
	Sapræmia ...	...	...	...	...	...	...	1	...	
	63	Carried forward ...	13	...	1	...	3	1	9	2
Carried forward	2,038	...	184	7	373	14	187	16	113	5

of Miscellaneous Diseases admitted during 1901.

SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE HOSPITAL.		SOUTH-EASTERN HOSPITAL.		PARK HOSPITAL.		BROOK HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
91	8	72	4	30	5	69	7	203	5	58	4	1,033	66
11	4	...	...	30	5	18	4	27	4	15	4	176	34
3	2	...	4	...	13	...
...	1	...	1	...	...	...	2	...
24	163	...	143	...	178	...	84	...	880	1
...	1	...	...	...	...	...	...	...	1	...
...	1	...	...	...	...	...	...	...	1	...
...	1	...	...	...	...	...	...	...	1	...
...	1*	...	1
...	1	1
...	1	1	4	4
...	1	...	...	...	...	...	...	...	2	...
...	1	...
...	1	...
...	1	...	...	...	2	...
...	1	...	...	...	...	...	2	...
...	2	...	2	...
...	1	1
1	2	...	...	...	...	...	...	...	4	...
1	4	...	1	...	...	...	...	...	1	...
1	4	...	1	...	...	...	...	...	21	...
...	2	...
40	4	...	...	203	5	164	4	209	4	106	6	1,118	42
...	1	...
...	2	...	...	...	...	...	...	...	3	...
1	1	1	...	...	...	...	...	...	2	1
1	1	...	...	...	...	1	...	...	...	1	...	5	2
...	1	...	5	...	5	...	...	...	22	...
...	1	...	...	...	1	...
...	3	...	3	...	13	...
...	1	1	...	...	...	...	...	...	1	1
...	1	...	...	...	...	...	1	...
...	1	1	...	...	...	...	3	3
...	2	1	...	...	...	...	3	1
...	1	...	3	...	...	...	3	1	7	1
...	1	...
2	1	...	...	6	2	13	2	9	...	7	1	63	9
122	9	72	4	209	7	228	9	394	5	156	7	2,038	83

* Admitted during 1900.

FEVER STATISTICS.—TABLE VIII. (continued) Details

Disease as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.		NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward	2,038	.. .. .	184	7	373	14	187	16	113	5
Brought forward—Enteric Fever	63	.. .. .	13	..	1	..	3	1	9	2
Enteric Fever (continued)										
		GENERAL DISEASES (continued).								
		Syphilis .. .. .	..	..	..	..	..	..	..	..
		Tuberculosis .. .. .	..	..	..	..	..	..	3	3
		,, acute miliary	1	1	..	..	..	..	..	..
		Vaccinia	1	..	..	..	..	..	..	..
		Whooping Cough ..	2	..	..	..	..	..	..	..
									
		LOCAL DISEASES.								
		<i>Respiratory System.</i>								
		Bronchitis	1	1	..	..	1	..	..	..
		Empyema	1	1	..	..	..	..	2	1
		Phthisis .. .. .	..	..	..	..	2	1	2	1
		Pleurisy .. .. .	..	..	..	..	1	1	1	..
		Pneumonia	12	3	4	..	6	4	8	2
		,, broncho-	1	1	..	..	1	1	4	..
									
		<i>Circulatory System.</i>								
		Endocarditis, malignant	..	..	..	..	..	..	1	1
		Heart disease	2	2	1	1	..	..	..	..
		Pericarditis .. .. .	..	..	..	..	..	..	..	..
		Phlebitis .. .. .	..	..	..	..	..	..	..	..
									
		<i>Digestive System.</i>								
	272	Appendicitis	1	..	1	..	..	..	..	..
		Cholecystitis .. .. .	..	..	..	..	..	..	..	..
		Colitis .. .. .	..	..	..	..	..	..	..	..
		Constipation	11	..	..	..	1	..	..	..
		Dentition .. .. .	..	..	..	..	1	..	..	..
		Diarrhoea .. .. .	..	..	..	..	6	..	..	..
		Dyspepsia .. .. .	..	..	..	..	..	..	..	..
		Enteritis .. .. .	..	..	1	..	1	..	..	..
		Gallstones .. .. .	..	..	..	..	..	..	..	..
		Gastritis	1	..	..	..	1	..	2	..
		Herpes of palate ..	..	..	..	..	1	..	..	..
		Inanition .. .. .	..	..	..	..	..	..	..	..
		Perihepatitis .. .. .	..	..	..	..	..	..	..	..
		Peritonitis, acute sup- purative	1	1	1	1	..	..	..	..
		,, tuberculous	1	..	..	..	..	..	..	..
		Pharyngitis .. .. .	..	..	..	..	..	..	..	..
		Tonsillitis .. .. .	..	..	..	..	..	..	..	..
									
		<i>Female Breast, Disease of.</i>								
		Mastitis .. .. .	..	..	..	..	..	..	..	..
									
		<i>Nervous System.</i>								
		Cerebral abscess ..	..	..	..	..	..	..	..	..
		,, tumour .. .. .	..	..	..	..	..	..	..	..
		Hydrocephalus	1	1	..	..	..	..	..	..
		Meningitis .. .. .	..	..	..	..	2	2	..	..
		,, tuberculous	1	1	..	..	1	1	2	2
									
	335	Carried forward ..	51	12	9	2	28	11	34	12
Carried forward	2,310	.. .. .	222	19	381	16	212	26	138	15

of Miscellaneous Diseases admitted during 1901.

SOUTH-WESTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE HOSPITAL.		SOUTH-EASTERN HOSPITAL.		PARK HOSPITAL.		BROOK HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
122	9	72	4	209	7	228	9	394	5	156	7	2,038	83
2	1	...	...	6	2	13	2	9	...	7	1	63	9
...	1	...	...	...	...	...	...	...	1	...
2	1	...	...	7	5	2	2	3	3	2	...	19	14
...	1	1
...	1	...
...	1	1	1	...	...	...	...	...	4	1
...	2	...	2	...	1	...	2	...	9	1
...	2	...	...	...	...	...	...	...	5	2
...	1	...	...	...	5	2
2	3	...	2	...	1	...	1	...	11	1
3	11	2	7	1	15	2	12	3	78	17
...	2	...	...	...	8	2
1	1	1	3	2	1	1	...	...	7	5
2	1	...	3	1	9	4
...	1	1	2	2	...	...	...	...	3	3
...	1	...	1	...
3	1	...	...	4	1	1	1	1	...	3	2	14	5
...	1*	...	1
...	4	1	...	...	...	...	1	...	5	1
...	2	...	...	...	...	...	...	...	14	...
...	1	...
4	3	...	...	...	2	...	15	...
2	7	...	1	...	1	...	1	...	3	...
...	2	...	1	...	...	...	12	...
1	1	...	3	...	...	...	...	...	2	...
...	9	...
...	1	...	1	...
...	1	...	...	...	1	...
...	2	1	...	...	2	...	6	3
...	3	...	...	...	...	...	4	...
1	1	...	2	...
...	1	...	1	...	...	...	2	...
...	1	...	...	...	...	...	...	...	1	...
1	1	...	...	1	1	...	...	...	...	...	...	2	2
...	1	1	...	...	...	...	1	1
...	1	1
...	1	1	1	1	2	...	6	4
...	3	3	...	...	...	...	7	7
24	4	...	...	55	15	53	16	40	7	41	8	335	87
144	12	72	4	258	20	268	23	425	12	190	14	2,310	161

* Admitted during 1900.

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

Disease as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.		NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	
Brought forward	2,310	... ..	222	19	381	16	212	26	138	15
Brought forward —Enteric Fever	335	.. ..	51	12	9	2	28	11	34	12
Enteric Fever (continued)		Urinary System.									
	49	Cystitis	1	...	...	...	...	...	1	...
		Nephritis	3	1	...	...	1	1	...	...
		Perinephritic abscess	...	...	...	...	...	...	...	...
		Skin Diseases.									
		Erythema ... ..	...	...	...	...	...	...	...	...
		Generative System.									
		Balanitis	1	...	...	...	...	...	...	...
		Metritis ... ..	...	...	...	...	1	...	...	...
		Ovarian tumour ...	...	...	...	...	...	...	...	...
		Parametritis ... ..	...	...	...	...	...	...	...	...
		Locomotive System.									
		Synovitis of knee joint	...	...	...	...	...	...	...	...
		Lymphatic System.									
		Bubo ... ..	...	...	...	...	...	...	...	...
		Not Classified.									
		Abdominal tumour ...	1	...	...	...	...	...	...	...
		Cellulitis ... ..	...	...	...	...	...	...	...	...
		Otitis media	1	...	...	...	...	...	...	...
		Pelvic cellulitis... ..	1	...	...	...	...	...	...	...
		Pleurodynia	2	...	...	...	...	...	...	...
	Pregnancy	1	...	...	...	...	...	...	...
	No obvious disease ...	...	...	...	...	3	...	3	...	
	Not Certified.										
	Admitted with mother	...	...	...	...	...	...	...	...
	Born in hospital ...	...	...	...	...	...	...	...	...
	No disease ... ..	...	...	2	...	...	...	...	...
	383	...	62	13	11	2	33	12	38	12	
Typhus Fever ...	5	GENERAL DISEASES.									
		Acute tuberculosis ...	1	1	...	...	...	...	...	...
		Measles ... ..	...	...	...	...	...	...	...	...
	Purpura ... ..	...	...	...	...	...	...	...	...
	Circulatory System.										
	Endocarditis, malignant... ..	1	1	...	...	...	...	...	...
	5	...	2	2	...	...	...	...	...
Plague	1	Inguinal buboes ...	...	...	...	...	...	...	1	...
	1	...	...	...	...	...	...	...	1	...
GRAND TOTALS	2,365	... ..	235	22	383	16	217	27	143	15

REPORTS OF THE ACTING MEDICAL OFFICER OF
THE RIVER AMBULANCE SERVICE AND OF THE
MEDICAL SUPERINTENDENTS OF THE SMALLPOX
HOSPITALS FOR THE YEAR 1901.

No. 1.

RIVER AMBULANCE SERVICE.

SOUTH WHARF,

ROTHERHITHE, S.E.,

May 2nd, 1902.

Statistics. During the year 1901, 1,867 patients were received at South Wharf, Of these, 1,845 were certified to be suffering from smallpox, and 22 were infants not suffering from smallpox. 1,625 patients were transferred to the Hospital Ships, 230 were returned home immediately or after various periods of detention, 4 were transferred to fever hospitals of the Board, and 8 died at the wharf. Of the patients sent to the ships, 22 were not suffering from smallpox, but accompanied their mothers, who suffered from that disease. In addition, 8 were found on further examination at the ships to be suffering, not from smallpox, but from other diseases, one of these patients being afterwards returned to the wharf for isolation. Of the 8 patients who died, 5 were suffering from smallpox and 3 from other diseases.

The following table gives a summary of the cases which were dealt with at the wharf. Nearly all these cases were admitted between the months of July and December.

DISEASE.	Died at South Wharf.	Transferred to Hospital Ships.	Transferred to a Fever Hospital.	Returned on day of Admission or following day.	Detained in Shelters.			TOTAL.
					2 to 4 days.	5 to 7 days.	7 days and upwards.	
Smallpox	5*	1,595	...	...	...	...	...	1,600
Vaccinia	4	4	...	1	9
Varicella	1	5†	...	61	8	2	...	77
Acne	18	6	1	...	25
Lichen	2	3	...	...	5
Urticaria	6	3	...	...	9
Erythemata	2	...	4	6	...	2	14
Pemphigus	1	1	...	...	2
Herpes	1	1	1	...	3
Impetigo	4	1	...	...	5
Eczema	11	...	...	...	11
Dermatitis, various	13	4	1	...	18
Scabies	4	...	...	...	4
Drug rashes	4	...	...	2	6
Farunculus	1	6	3	...	10
Syphilis	14	2	...	1	17
Scarlet fever	4	...	...	...	...	4
Measles	1	...	2	1	...	...	4
Febricula...	1	4	1	...	6
Acute uninfected diseases, without eruption	2	...	...	2	5	...	...	9
Nil (including infants admitted with their mothers)	22	...	4	2	...	1	29
Totals	8	1,625	4	157	57	9	7	1,867

* One died January 1st, 1902.

† One re-transferred for isolation at South Wharf.

Errors of diagnosis.

Excluding the cases of 22 infants not certified as smallpox, who were admitted under charge of their mothers, there were 1,845 certified patients admitted to the wharf, of whom 237 were found at the wharf not to be suffering from smallpox—a proportion of 12·7 per cent. By including the 8 cases of other diseases in which the diagnosis was corrected at the ships, the proportion of errors of diagnosis in certified cases rises to 13·3 per cent. It is interesting to compare these figures with those of 1893, when there was the last considerable epidemic of smallpox. In that year, the proportion of errors of diagnosis detected at the wharf was 7·2 per cent.; but by including 70 cases of other diseases in which the diagnosis was further corrected at the ships, the proportion of errors of diagnosis in certified cases became 10 per cent., a figure which is more comparable with the 13·2 per cent. of last year. These figures convey the impression that there is, on the part of the certifiers, less skill in the diagnosis of smallpox than existed 10 years ago; but the facts are susceptible of another explanation. What has happened, I think, is, that medical men have become accustomed to certify cases of smallpox at an earlier stage than formerly—at a stage, that is, when the diagnosis is more difficult, and mistakes are more apt to be made. A greater tendency, too, now exists to certify cases in which there is a reasonable doubt as to the diagnosis. This is all to the good. But there has appeared a tendency to carry these practices to extremes, and to certify patients whom it is beyond power of anyone to pronounce to be suffering from smallpox. What happens in such cases is that some person is known to have been exposed to the infection of smallpox and is under observation on that account. Such a person has some febrile disturbance, and the possibility arises that he is about to develop an attack of smallpox. Without allowing time for the characteristic eruption to show itself, the patient is promptly certified to be suffering from smallpox and sent to the wharf. This practice imposes a somewhat unfair burden on the Managers' resources, and should it increase, the consequences might be somewhat serious. For in these cases it is impossible for the medical officer to confirm or to refute the diagnosis without waiting two or three days for the proper symptoms of smallpox to develop. For this reason it is necessary to detain these cases under observation at the wharf in the very limited isolation accommodation which exists there. To meet this difficulty, indeed, you have taken steps to erect at the wharf accommodation for dealing with this class of cases. This accommodation will doubtless be sufficient for the present needs. But if it is to be sufficient in the future, it is to be hoped that the practice of certifying "suspects" will not grow to more considerable proportions.

Additional accommodation for patients.

Steps have also been taken to provide at South Wharf adequate receiving rooms for the examination of patients on their admission at the wharf. The need for this reform hardly calls for demonstration. Hitherto patients have been examined in a small room on the pier, badly lighted, inconvenient, and difficult of disinfection when in constant use. At the acute fever hospitals of the Board, suites of rooms are provided for the reception and examination of patients on their admission. Owing to the more serious issues at stake, the provision of such rooms at the wharf is still more essential. Their absence makes a correct diagnosis unnecessarily difficult to arrive

at, and leads on the one hand to patients being detained in shelters for further observation, and on the other hand to patients who are not suffering from smallpox being transferred to the Hospital Ships. I have reported that some such patients were so transferred last year. I feel sure that in most of these cases the error of diagnosis would have been detected had there been better facilities for examination at the wharf. It must be remembered that at the ships, when a large number of patients are being admitted, it is impossible to guarantee that the diagnosis shall be revised by competent officers in all cases, and a patient who is admitted in error runs a very serious risk of getting smallpox.

If his equipment is of importance, of still greater importance is the personality of the medical officer responsible for the examination of the patients. The 8 errors in 1,603 cases transferred to the ships make a proportion of 0·5 per cent., a figure which compares favourably with those of previous years. In 1893, for example, the percentage of errors was six times as great. The task of revising the diagnosis of cases certified as smallpox demands exceptional mental and professional qualifications, as well as a large experience of smallpox itself. On this account the Managers were fortunate to secure the services of Dr. W. McC. Wanklyn to assist me. To him credit must be given for the very successful way in which the work was done. With better equipment I look forward to still better results in the current year.

(Signed) T. F. RICKETTS,
Acting Medical Officer.

No. 2.

HOSPITAL SHIPS.

LONG REACH,
DARTFORD,
May 27th, 1902.

Statistics. On December 31st, 1900, there was 1 patient under treatment in this hospital. During the past year 1,763 have been admitted, 252 have died, and 181 remained under treatment on December 31st, 1901. 35 patients were not suffering from smallpox on admission. Of these, 24 were infants who were admitted under care of their mothers; 8 of these 24 infants proved to be in the incubation stage of smallpox, and developed the disease after their arrival; 5 of these 8 died. Two more of the 24 infants died, not of smallpox, but of other diseases, namely:—1 of spina bifida, and 1 (after premature birth) of inanition. The remainder of the 35 patients were suffering from the following diseases:—

Varicella	..	..	..	..	..	..	6
Vaccinia	..	..	..	..	..	..	2
Erythema	..	..	..	..	..	..	2
Measles	..	..	..	..	..	..	1

None of these 11 patients contracted smallpox.

132 cases were admitted from Erith, Dartford, and the surrounding districts. Of these 132 cases, 3 were suffering, not from smallpox, but from other diseases, and 2 were infants admitted with their mothers. These cases are included among those mentioned above. 22 of the above 132 patients died during the year. In addition, two others died here in January. Six cases were admitted from the district of Orsett, in Essex. None of these cases have died.

The gross mortality among all patients admitted to this hospital last year was 15 per cent., calculated by the Registrar-General's formula. The mortality at this hospital from smallpox was 15·2 per cent., calculated by the same formula. But, writing as I do, when all patients admitted to the hospital last year have either been discharged or died, I am able to take account of those patients admitted last year who died in the early months of the current year. There were 30 patients admitted in 1901 who died in the hospital in 1902. The actual mortality from smallpox is therefore 16·1 per cent. among patients admitted to this hospital. Taking account of all patients who have been admitted to institutions of the Managers during the year 1901, and of those of such patients who have died in those institutions in 1901 or 1902, the actual mortality among smallpox cases admitted last year becomes 16·7 per cent. A similar method has been adopted in compiling the tables of vaccination statistics; that is to say, fatalities among 1901 cases occurring in 1902 have been taken account of in the tables.

A certain number of patients died of intercurrent disorders. I give a list of these cases, showing the disease from which the patients died, the type of the attack of smallpox for which they were admitted, and the observations made with regard to their vaccination. In this table cases are not included where death was due to an ordinary complication of smallpox, nor cases where death was due to the attack of smallpox itself rather than to any other disease from which the patient may have suffered. Reference may be made to this table in studying the tables of vaccination statistics, where all deaths are included whether directly due to smallpox or not.

Cases in which Death was due to Intercurrent Disease.

No.	initials.	Age.	Sex.	Date of Smallpox Eruption.	Type of Disease.	Intercurrent Disease.	Date of Death.	Statement as to Primary Vaccination.	No. of Scars.	Collective area of Scars.	Fraction of Foveated Scars.	Revaccination.	Remarks.	Case No.
1	M. H.	$\frac{4}{3}$	F	1901. 28 Sept.	Mild discrete...	Marasmus	1901. 5 Oct.	Not	0	...	...	...	...	284
2	H. E.	38	M	28 Oct.	Mild discrete...	Acute tuberculosis ...	22 Nov.	Inf.	4	1.39	0	Not	Died at Gore Farm	525
3	R. G.	60	M	3 Nov.	Mild discrete...	Diabetes	18 "	Inf.	0	...	...	1876 Oct. 28, 1901, success., three places	Died at Gore Farm	601
4	W. S.	51	M	15 "	Severe discrete	Pericarditis	22 Dec.	Inf.	2	greater than 0.50	0	Not	Died at Gore Farm	739
5	A. P.	6	F	15 "	Mild discrete...	General tuberculosis ...	8 "	Not	0	...	...	...	...	830
6	E. B.	23	F	19 "	Very mild discrete	Erysipelas	1 "	Inf.	4	less than 1.00	0	Not	...	854
7	W. P.	69	M	2 Dec.	Mild discrete...	Erysipelas	18 "	Inf.	2	0.41	0	3 years ago	Evidence as to re-vaccination inconclusive	1059
8	G. J.	40	M	3 "	Very mild discrete	Tuberculosis of lung ...	1902. 2 Feb.	Inf.	3	0.68	4	Not	Died at Gore Farm	1106
9	B. S.	23	M	8 "	Very mild discrete	Appendicitis and peritonitis	25 Dec. 1902.	Inf.	2	0.74	0	Not	...	1188
10	J. M.	39	M	13 "	Very mild discrete	Tuberculosis of lung ...	12 Jan. 1901.	Inf.	4	1.80	$\frac{1}{2}$	Not	Died at Gore Farm	1296
11	J. D.	45	M	16 "	Very mild discrete	Bronchitis	26 Dec.	Inf.	2	0.55	0	Dec. 3, 1901, success., three places	Died at Gore Farm	1342
12	A. M.	48	M	13 "	Very mild discrete	Chronic bronchitis and bronchiectasis	25 "	Inf.	1	0.22	0	Dec. 9, 1901, success., four places	...	1376
13	J. F.	39	M	18 "	Severe discrete	Thrombosis and gangrene of leg	27 "	Inf.	3	1.49	$\frac{1}{2}$	Not	...	1388

All patients admitted were treated entirely at this hospital until the end of October. As the accommodation then threatened to become exhausted, the transfer of convalescent patients to Gore Farm Hospital was commenced, and was continued until the end of the year. The first batch of patients was sent to Gore Farm on October 30th.

History of smallpox in 1901. The history of the incidence of smallpox in the Metropolis in 1901 is an example of the remarkable swiftness with which the disease is capable of laying hold of the population and assuming epidemic proportions. During the first five months of the year there was, practically speaking, no smallpox in London, 9 cases only having been admitted during that time. Between January and May only 4 cases were admitted. One case occurred in St. George's East in January, the origin of which was not discovered; but in the 3 other cases which occurred in the first four months, the disease in every instance was imported from abroad.

The seeds of the present epidemic were sown in June. The two first patients admitted in that month lived in Whitechapel and East Ham respectively. In neither case could the origin of the disease be traced, nor, so far as is known, did other cases develop from them. Two more important foci of infection appeared at the end of June: (1) A man who had visited Paris returned to his home in Streatham and developed smallpox there; he died, but the nature of his illness was not appreciated; a relative of his caught smallpox from him and was admitted here; his linen was sent to a laundry to be washed, and two persons working in that laundry also got smallpox. (2) A laundry carman working in Hackney caught smallpox, doubtless from the linen of one of the customers of the laundry; a laundrymaid also caught the disease from the same source; from this source 9 others contracted the disease in July and August.

Two more centres were noted in the month of July. The first of these was a house in Norfolk Square, Paddington, the housekeeper and a domestic servant employed at the house falling victims, as well as a gentleman who was in the habit of visiting there; the origin of the disease in this case could not be ascertained. The second centre was in Willesden, and the disease in this case appears to have been spread by means of infected bedding which was sent to Willesden to be disinfected or cleaned. I do not know whence this bedding came, but three persons caught smallpox directly or indirectly from this source.

This carries us up to the end of July and the beginning of August, when a few cases occurred in the west of London—cases which were apparently unconnected, but which probably came from a common source and were the forerunners of a serious outbreak. The first of these was a case of a woman of French nationality who lived in the borough of Westminster. At the same time occurred the cases of two sisters who lived in Marylebone; a sister of these patients was stated to have had chickenpox, but, assuming her illness to have been smallpox, its origin was unknown. A fourth case was that of a German waiter at the Langham Hotel. On August 9th a patient was admitted who lived in Huntley Street, Tottenham Court Road; a few days afterwards two patients were admitted from Holborn, another from St. Pancras. In none of these cases could the source of infection be traced, and, generally speaking, the cases seemed to be unconnected. But the common factor was that their places of residence, their avocations or amusements, took them into that part of London about the Tottenham Court Road; and it was

in that neighbourhood, in some crowded streets lying on the west side of Tottenham Court Road, that smallpox broke out in the latter half of August, and shortly assumed an epidemic form. Between the 19th and 31st August, 68 patients were admitted, of whom all but 8 either resided in the district I have mentioned or appeared to have caught the disease there. In September the disease continued to spread in that district, but at the same time it appeared widely in all parts of London. Its prevalence in its original seat continued up to the end of the year, so that of the total number of cases which occurred in London during the year, one-third were removed from St. Pancras, Holborn, and Bloomsbury. But there was not a single union which escaped the visitation.

From what has been said it will be seen that, once it had obtained a foothold, the epidemic developed with great rapidity. Thus, on August 19th, there were only 15 patients under treatment in this hospital. In eight days this number increased to 73. In a little over two months the hospital was full and patients were being transferred to Gore Farm, and in four months patients were being admitted at a rate of upwards of 30 a day. This course of events illustrates once more the fact that outbreaks of smallpox are prone to occur without warning and to reach unpleasant proportions with great rapidity; and it emphasises the need for being always prepared to deal with an emergency.

Increase of accommodation. During the course of the autumn it became obvious to the Managers that the accommodation for acute cases afforded by the ships would be likely to prove insufficient for our needs during the following winter. It was decided to increase that accommodation by erecting a temporary hospital on land adjoining the hospital enclosure at Long Reach. At the same time steps were taken to increase the resources of the hospital ships by the erection of an additional staff block. The wisdom of both these decisions has been abundantly shown by the course of events in the early months of the current year.

Staff. The health of the staff has been satisfactory. Two persons developed scarlet fever, viz., an assistant sempstress and a porter. No member of the staff contracted smallpox. One person, a butcher's driver, caught smallpox here when engaged in delivering meat. It is not the custom for the persons so employed to be admitted within the hospital gates. But by an unfortunate misunderstanding on the part of the gate porter the man in question was admitted within the precincts of the hospital premises (though not on board the ships), and he caught smallpox in consequence. The case of this man is included in the table I give below. He was not protected by revaccination.

I append the usual return of staff.

<i>Staff employed at the Hospital.</i>				<i>Staff newly employed.</i>			
Year.	Class.*	Number employed.	Contracted Smallpox.	Year.	Class.*	Number newly employed.	Contracted Smallpox.
1901	I.	98	...	1901	I.	87	...
	II.	131	...		II.	92	...
	III.	73	...		III.	33	...
	IV.	178	1		IV.	137	1
Total	...	480	1	Total	...	349	1

(Signed) T. F. RICKETTS,
Medical Superintendent.

No. 3.

GORE FARM HOSPITAL. (See p. 69.)

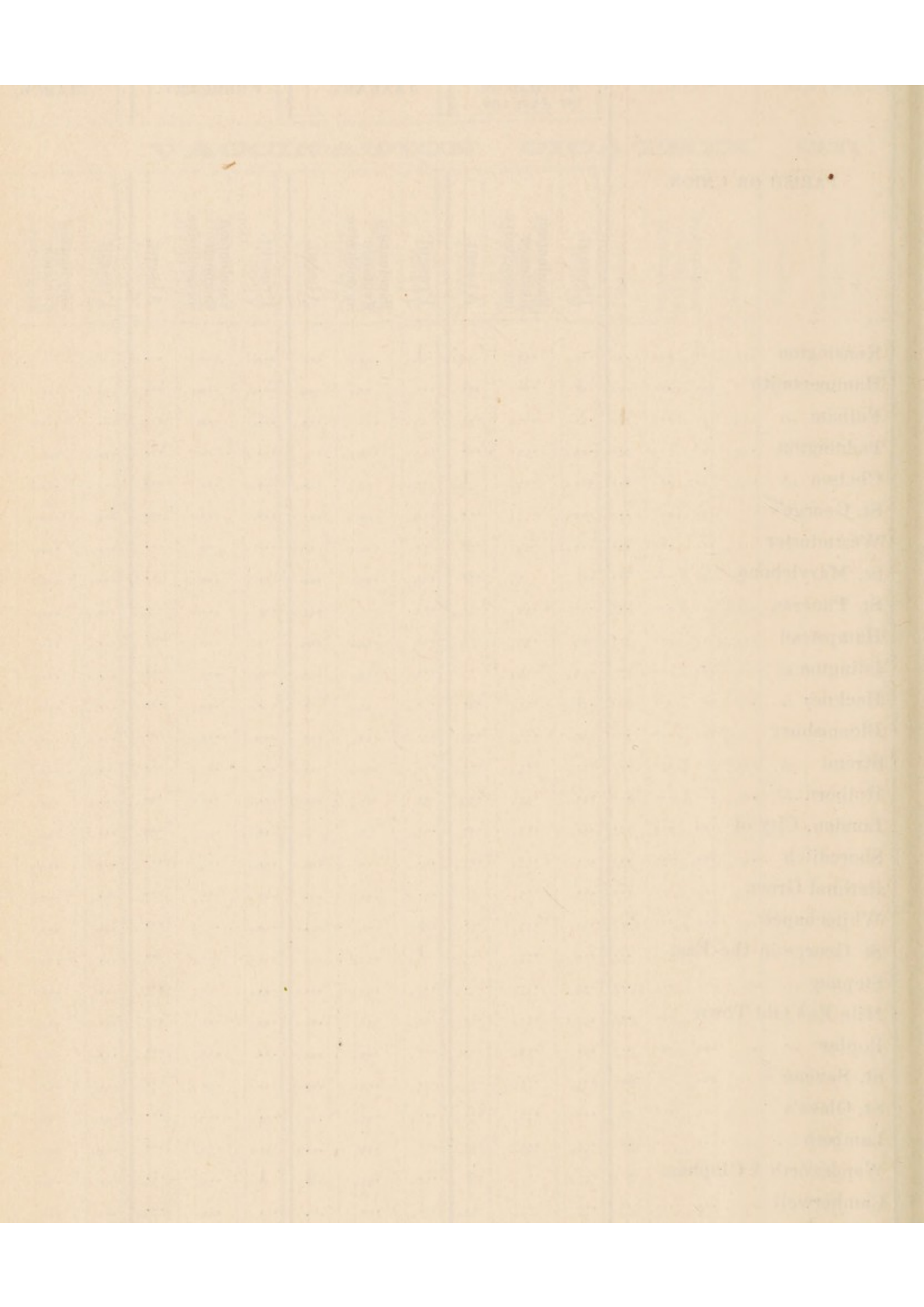
* For a definition of these classes see note on page 127.

APPENDIX I.—INFECTIOUS DISEASES. SMALLPOX STATISTICS, 1901.

SMALLPOX STATISTICS.—TABLE I.—Returns showing the Numbers of Smallpox Patients Admitted from each Parish or Union during each Month of the Year 1901; the Total Admissions, Discharges, and Deaths during the Year, and the condition of the Patients as to Vaccination.

PARISH OR UNION.	RELATIONS IN HOSPITAL ON 1st JANUARY.		JANUARY.	FEBRUARY.	MARCH.	APRIL.	MAY.	JUNE.	JULY.	AUGUST.	SEPTEMBER.	OCTOBER.	NOVEMBER.	DECEMBER.	TOTAL ADMISSIONS.	DEATHS.	DISCHARGES.	RELATIONS IN HOSPITAL ON 31st DECEMBER.	
	Present.	Absent.																	
	VACCINATION CICATRIX OR CICATRICES.																		
	Present.	Vaccination Evidence inconclusive.																	
	Absent.																		
Kennington	1																		
Hammersmith																			
Fulham																			
Putney																			
Chelsea	1																		
St. George's																			
Westminster																			
St. Marylebone																			
St. Pancras																			
Hampstead																			
Islington																			
Hackney																			
Bloomsbury																			
Strand																			
Holborn																			
London, City of																			
Shoreditch																			
Bethnal Green																			
Whitechapel																			
St. George-in-the-East	1																		
Stepney																			
Mile End Old Town																			
Poplar																			
St. Saviour's																			
St. Olave's																			
Lambeth																			
Wandsworth & Clapham																			
Canterbury																			
Greenwich																			
Woolwich																			
Lewisham																			
Port of London																			
Beyond Metropolitan Area																			
Totals	1	2	1				1	3	2	11	1	2	50	7	25	116	9	42	207
Totals combined	1	2	1				1	3	2	11	1	2	50	7	25	116	9	42	207

N.B.—(1)—Admissions, &c., from "other diseases" during the year are not included in this Return.
 (2)—The column headed "Vaccination Evidence inconclusive" contains the particulars of cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also of those in which no statement was made, but the nature of the eruption or other cause prevented any observation of the marks, if any existed. An analysis of these cases appears in Table III.



STATE OF NEW YORK

No.	Name	Age	Sex
1	John Smith	25	M
2	Mary Jones	22	F
3	James Brown	30	M
4	Sarah White	28	F
5	Robert Black	35	M
6	Elizabeth Green	20	F
7	William Red	40	M
8	Jane Blue	25	F
9	Thomas Yellow	32	M
10	Anna Purple	27	F
11	George Grey	38	M
12	Charlotte Pink	23	F
13	Richard Orange	45	M
14	Lucy Green	21	F
15	Henry Blue	50	M
16	Isabella Yellow	26	F
17	Samuel Red	42	M
18	Margaret Purple	24	F
19	Charles Grey	48	M
20	Frances Pink	29	F
21	Edward Orange	55	M
22	Ann Green	22	F
23	Joseph Blue	60	M
24	Rebecca Yellow	27	F
25	Samuel Red	45	M
26	Elizabeth Purple	25	F
27	Thomas Grey	52	M
28	Sarah Pink	30	F
29	Robert Orange	58	M
30	Jane Green	23	F
31	William Blue	65	M
32	Mary Yellow	28	F
33	James Red	50	M
34	Anna Purple	26	F
35	George Grey	55	M
36	Charlotte Pink	31	F
37	Richard Orange	62	M
38	Lucy Green	24	F
39	Henry Blue	70	M
40	Isabella Yellow	29	F
41	Samuel Red	55	M
42	Margaret Purple	27	F
43	Charles Grey	60	M
44	Frances Pink	33	F
45	Edward Orange	68	M
46	Ann Green	25	F
47	Joseph Blue	75	M
48	Rebecca Yellow	30	F
49	Samuel Red	60	M
50	Elizabeth Purple	28	F
51	Thomas Grey	65	M
52	Sarah Pink	35	F
53	Robert Orange	72	M
54	Jane Green	26	F
55	William Blue	80	M
56	Mary Yellow	31	F
57	James Red	65	M
58	Anna Purple	29	F
59	George Grey	70	M
60	Charlotte Pink	36	F
61	Richard Orange	78	M
62	Lucy Green	27	F
63	Henry Blue	85	M
64	Isabella Yellow	32	F
65	Samuel Red	70	M
66	Margaret Purple	30	F
67	Charles Grey	80	M
68	Frances Pink	38	F
69	Edward Orange	85	M
70	Ann Green	28	F
71	Joseph Blue	90	M
72	Rebecca Yellow	33	F
73	Samuel Red	75	M
74	Elizabeth Purple	31	F
75	Thomas Grey	85	M
76	Sarah Pink	40	F
77	Robert Orange	90	M
78	Jane Green	29	F
79	William Blue	95	M
80	Mary Yellow	34	F
81	James Red	80	M
82	Anna Purple	32	F
83	George Grey	85	M
84	Charlotte Pink	39	F
85	Richard Orange	92	M
86	Lucy Green	30	F
87	Henry Blue	100	M
88	Isabella Yellow	35	F
89	Samuel Red	80	M
90	Margaret Purple	33	F
91	Charles Grey	90	M
92	Frances Pink	41	F
93	Edward Orange	95	M
94	Ann Green	31	F
95	Joseph Blue	105	M
96	Rebecca Yellow	36	F
97	Samuel Red	85	M
98	Elizabeth Purple	34	F
99	Thomas Grey	95	M
100	Sarah Pink	45	F

SMALLPOX STATISTICS.—TABLE V.—List of Cases stated to have previously suffered from Smallpox, and included in Table II.

Consecutive Numbers.	Patients' Age.	PREVIOUS VACCINATION.			PREVIOUS SMALLPOX.			Type of Disease.	Result.	Reference Number in Case Register.
		A.		B.	C.	Whether Scars present, affording presumptive evidence of previous Smallpox.	Period stated to have elapsed since previous attack of Smallpox.			
		Vaccination Cicatrix or Cicatrices present.	Number.	Area.	Evidence as to Vaccination inconclusive.						Vaccination Cicatrix Absent.
1	57	...	...	...	Absent	Evidence not recorded ...	1849 (52 years) ...	Discrete	Recovered	539
2	62	...	...	...	"	Evidence ...	59 years ...	"	"	571
3	34	...	...	...	"	Evidence ...	1877 (24 years) ...	"	"	747
4	26	2	'98	...	...	No evidence ...	1884 (17 years) ...	"	"	865
5	36	2	'86	...	...	Evidence not recorded ...	Between 1865 and 1875, exact date unknown (26 and 36 years)	"	"	1,509
6	39	...	...	...	Absent	Evidence ...	1862 (39 years) ...	"	"	1,651
7	47	1	'19	...	...	No evidence ...	1856 (45 years) ...	"	"	1,729

MEMORANDUM BY DR. RICKETTS, MEDICAL SUPERINTENDENT,
SMALLPOX HOSPITAL SHIPS, AS TO CASES ALLEGED TO HAVE
BEEN SUCCESSFULLY RE-VACCINATED.

It has not hitherto been the custom to publish in these reports statistics relating to re-vaccination. In dealing with this class of cases, the difficulty presents itself that there are no such criteria for determining the success of the operation as exist in the case of primary vaccination. In many cases scars are present, but it is very commonly impossible to determine whether they are due to primary vaccination or to re-vaccination or to both. For there is no essential difference between a scar due to primary vaccination and one due to re-vaccination. On the other hand, it is to be recognised that re-vaccination scars are often less permanent than those due to primary vaccination. For that reason the absence of scars within a few years of the second operation is not good evidence of its failure. The statement of the patient, unsupported by other evidence, is equally unreliable. For, although the statement may be depended on that the operation of re-vaccination was performed, the statement that the result was successful is usually of not much value. Sometimes the patient's recollection of the symptoms that followed the operation affords valuable confirmatory evidence. But as a rule the patient cannot recollect such effects, or describes such trifling effects as may have resulted from the scratch marks themselves. In many cases, indeed, it becomes fairly clear on cross-examination that the patient has no grounds for the conclusion that the re-vaccination was successful, and merely "supposes that it was." The patients received at a metropolitan smallpox hospital are generally speaking ignorant, and many of them recognise no distinction between re-vaccination and successful re-vaccination.

For many years past, up to and including the year 1901, records have been kept at the Hospital Ships of those cases in which the patient made the statement that he had been successfully re-vaccinated. It was felt that any attempt to balance the evidence as to the success of the operation would introduce the personal equation of the observer to such a degree as would destroy the value of any statistics which might be compiled by classifying the records. No such attempt, therefore, has been made. In this memorandum a summary is presented of cases admitted during the year 1901 in which a history was given of successful re-vaccination. It must be understood that all cases of reputed re-vaccination are included in this summary, except those in which the patient made the definite statement that the operation was unsuccessful. That is to say, the patient's statement has been accepted, even though the evidence may have been clear that it had no foundation in fact. It follows that the summary includes a considerable but uncertain number of cases of unsuccessful re-vaccination, and that the statistics, as statistics of re-vaccination, are diluted to that extent. Indeed, the summary includes some cases in which no confirmatory evidence existed either of re-vaccination or of primary vaccination.

In future years an attempt will be made to present statistics of re-vaccination in such a way that due weight may be given to the evidence existing in support of the patient's statement as to the success of the operation of re-vaccination. By

adopting that plan the judgment of the observer must of necessity be engrafted on to a question of fact. But by presenting a list of cases, with particulars of each case, instead of analysing and classifying the cases, it will be possible to keep the opinion separate from the fact, so that objection on that score will not appear.

During 1901 a total of 82 cases was admitted in which the patients made the statement that at one time or another before contracting smallpox they had undergone with success the operation of re-vaccination, a statement which was sometimes supported and sometimes unsupported by confirmatory evidence.

In 72 out of these 82 cases a cicatrix or cicatrices (whether due to primary vaccination or to re-vaccination or to both) were observed. In 10 no such cicatrix was to be seen; in one the arm said to have borne vaccination marks had been amputated, in another the possibility that scars might have been present though obscured by the abundance of the eruption could not be excluded. In 27 the total number of scars observed was two or one only. In 26 the total area of all observed scars was below $\frac{1}{2}$ square inch.

With one exception information was obtained as to the interval believed to have elapsed since the alleged re-vaccination, with the results as follows:—In 12 cases re-vaccination was stated to have been performed more than four years but less than 10 years before the attack of smallpox. Of these 12 cases nine had a "mild discrete" attack, three a "severe discrete" or "confluent" attack. One out of these 12 cases was fatal. In 24 cases re-vaccination was stated to have been performed more than ten years but less than 20 years before the attack of smallpox. Of these 24 cases 14 had a "mild discrete" attack, eight a "severe discrete" or "confluent" attack, and two a hæmorrhagic attack. Of these 24 cases three were fatal.

In 45 cases re-vaccination was stated to have been performed 20 years or more before the attack of smallpox. Of these 45 cases 30 had a "mild discrete" attack, 12 had a "severe discrete" or "confluent" attack, and three had a hæmorrhagic attack. Of these 45 cases nine were fatal.

In the above summary no cases are included in which the patient was successfully re-vaccinated only during the period of incubation of smallpox. These cases are included in Table IV.

As before stated, cases are also excluded from the summary where the patients stated definitely that they had been re-vaccinated without success (this statement being confirmed by absence of scar evidence). These patients were, of course, protected by primary vaccination only, and their cases are included in Table II. Although the operation of re-vaccination in these cases (being unsuccessful) was of no importance, with possibly a very few exceptions the fact was noted in the records. It may, therefore, be worth while stating that an unsuccessful re-vaccination is recorded in 22 cases.

(Signed) T. F. RICKETTS.

NOTE.—Definition of classes referred to in table at foot of p. 109 :—

Class I.—Includes members of the medical and nursing staffs.

„ II.—Includes wardmaids and laundrymaids who may be considered to be somewhat less directly exposed to infection of smallpox.

„ 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.

„ IV.—Includes contractors' workmen and men temporarily employed at the hospital.

ii. APPENDIX II.—IMBECILITY.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF
THE IMBECILE ASYLUMS FOR THE YEAR 1901.

(For Statistical Tables, see pp. 152-179.)

No. 1.

LEAVESDEN ASYLUM.

KING'S LANGLEY, HERTS,

3rd January, 1902.

Statistics.

	Males.	Females.	Total.
On January 1st, 1901, the asylum contained	813	992	1,805
Admitted during the year	81	65	146
Total number under treatment during the year	894	1,057	1,951
Discharged during the year	8	12	20
Died during the year	75	89	164
Remaining in the asylum on 31st December, 1901	811	956	1,767

Admissions. Every year it is necessary to draw attention to the weak, aged, and decrepit people sent for care and treatment to the asylum. The feeble state of the admissions is well seen in the following table:—

	Males.	Females.	Total.
1. In good bodily health and condition ..	2	—	2
2. In average bodily health and condition	6	—	6
3. In indifferent bodily health and condition	15	13	28
4. In weak bodily health	36	33	69
5. In very weak bodily health and exhausted condition	22	19	41
	81	65	146

Nos. 4 and 5 include all patients suffering from physical disease, including epileptics.

Out of 146 admissions 41 were brought from other asylums:—

Name of Asylum.	Males.	Females.	Total.
Claybury	—	16	16
Colney Hatch	2	4	6
Hanwell	1	—	1
City of London, at Stone	18	—	18
	21	20	41
	21	20	41

There was one re-admission. George M., aged 28, chargeable to Holborn, was re-admitted 13th April, 1901. He was previously admitted on 5th September, 1890, and discharged 6th June, 1891 at the request of the guardians to the care of his relatives.

Discharges. The following is the table of discharges:—

	Males.	Females.	Total.
Recovered	—	—	—
Relieved	—	—	—
Not improved	8	12	20
	8	12	20
	8	12	20

Of these 20, 13 were sent to other asylums as suicidal or dangerous to others:—

Name of Asylum.	Males.	Females.	Total.
Claybury	2	4	6
Colney Hatch	2	2	4
Hanwell	1	—	1
City of London, at Stone	1	1	2
	6	7	13
	6	7	13

Deaths. The deaths numbered 164—75 males and 89 females—being the lowest number of deaths in any one year since 1888. In 1900 the deaths numbered 310, this being the largest number of deaths that had occurred in any one year in the history of the institution.

The percentage of deaths on the average number resident was in 1901 as follows:—

Males.	Females.	Total.
9·2	9·2	9·2

There were 147 *post-mortem* examinations—67 males and 80 females—this representing nearly 90 per cent. of the deaths.

Bedsore were found in 8 male and 3 female bodies after death. This is a considerable reduction on the numbers in previous years. Many of the bedsore

were very trifling. Every body was systematically examined for bedsores, and it was proved that the majority of the bedsores formed a few hours before death.

The greatest cause of death at Leavesden Asylum in 1901 and for many years previously was tuberculosis. The following table gives a list of those deaths during 1901 where tuberculosis played a principal or secondary part :—

	Males.	Females.	Total.
Pulmonary tuberculosis	29	21	50
Pulmonary tuberculosis and cancer of the pancreas	1	—	1
Pulmonary tuberculosis and valvular disease of heart	1	—	1
Pulmonary tuberculosis and tubercular disease of kidney	—	1	1
Pulmonary tuberculosis and tubercular peritonitis..	—	2	2
Pulmonary tuberculosis and meningitis	—	1	1
Pulmonary tuberculosis and senile gangrene of foot	—	1	1
Pulmonary tuberculosis and chronic nephritis ..	—	1	1
Cerebral softening and pulmonary tuberculosis ..	1	—	1
General paralysis of the insane and pulmonary tuberculosis.. .. .	4	1	5
Tuberculosis of kidneys	1	—	1
Tubercular disease of vertebræ	1	1	2
	<hr/>	<hr/>	<hr/>
	38	29	67
	<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

It is unsatisfactory to find that out of 164 deaths, in 67, or 40·8 per cent., tuberculosis was the primary or secondary cause of death.

In last year's annual report it was shown that during the four years 1897, 1898, 1899, and 1900, 40 persons over 60 years of age died of tuberculosis. In 1901, 18 such persons succumbed to the same malady, although in outside practice it is considered unusual for elderly people to die of "consumption." The number of cases dying of tuberculosis in whom the disease was recognised on admission to the asylum is but small, and many of the patients dying of tuberculosis had been long resident in the asylum. It may therefore be confidently affirmed, and this can be proved by figures, that the majority of the cases of tuberculosis are generated in the asylum after the patients are admitted.

The steps which should be taken to arrest the spread of tuberculosis both among the patients in the asylum and among the cows at the farm-steading has been a matter of grave consideration during the year. The neighbourhood of the asylum is very healthy, but the Leavesden Asylum patients mainly consist of broken-down human wreckage drawn mostly from the poorest homes of London, and such people are peculiarly liable to become infected with tuberculosis when brought daily in contact with cases of the disease. Even the staff too have been affected, three male officials leaving on this account during the year. The tubercular patients are housed in separate wards, 346 beds being apportioned to them. Two female and two male infirmary wards of 35 beds, allowing 100 square feet of floor space by day and by night, have been allotted to the advanced

tubercular cases, whilst the incipient tubercular cases are allowed 60 square feet of floor space by night and 30 square feet of floor space by day and occupy two blocks, respectively accommodating 120 females and 86 males. Rustic shelters have been erected in the four airing courts used by tubercular patients, so that independently of the weather the patients may spend as much time as possible in the open air. Tubercular patients no longer attend the services at the chapel or the entertainments in the recreation hall, but special religious services and entertainments are given in the tubercular wards. The tubercular male patients are employed in the garden, and are especially not allowed to work at the farm-stead among the cows. They get frequent exercise around the estate by the new paths—a great boon to the asylum—and they also take walks in the surrounding country outside the asylum estate. Their diet and medical treatment are carefully considered by the assistant medical officers. All these means of treatment systematically carried out will in time largely reduce the numbers suffering from tuberculosis, especially if preventive measures be taken with those patients not yet infected with the disease.

Among the other chief causes of death during 1901 were pneumonia (29), chronic nephritis (14), senile decay (10), and general paralysis of the insane (7).

Seven patients had erysipelas, of whom five recovered and two died.

In 1899 the asylum population suffered from an epidemic of enteritis, septic pneumonia, and enteric fever, and these diseases have occurred from time to time ever since. In February and March of 1901 two male and one female patient suffered from enteric fever, the disease being fatal in the female case. Enteritis was the primary or secondary cause of death in three cases during the year. Another disease—ulcerative colitis or asylum dysentery—which has also been prevalent in the London County Asylums, should also be mentioned. Looking at the death register since 1st January, 1899, seven cases have been proved by *post-mortem* examination to have suffered from colitis at the time of death. It is satisfactory to record that at the end of the year there was no case of enteric fever, enteritis, or colitis in the asylum.

**Accidents,
inquests,
and sudden
deaths.**

There have been 15 serious accidents during the year involving fractures of bone; all were fully reported on at the time.

Besides these accidents, the coroner held three inquests during 1901.

On 26th August, an inquest, after a *post-mortem* examination, was held on the body of Caroline Stone, aged 86, when the jury returned the following verdict:—"That Caroline Stone died at Leavesden Asylum, in the parish of Watford, Herts, on the 20th August, 1901, from injuries received by accidentally falling from a chair in No. 3 A Infirmary, Leavesden Asylum, on the 10th August, 1901, and that no blame is attached to any person."

On 18th September, an inquest, after a *post-mortem* examination, was held on the body of James Rendell, aged 51, when the jury returned the following verdict:—"That the said James Rendell died at Leavesden Asylum, in the parish of Watford, Herts, on the 15th September, 1901, and his death was caused by his being

“choked by a piece of meat during dinner time, and that no blame is attached to any one.”

On 25th September, an inquest, after a *post-mortem* examination, was held on the body of John Franz, aged between 70 and 80, when the jury returned the following verdict:—“That the said John Franz died at the Metropolitan Asylum at Leavesden, in the county of Hertford, on Friday, the 20th September, 1901, and the cause of death was heart disease accelerated by fractured or broken ribs, and how the injuries occurred there is not sufficient evidence to show.”

There were six cases of unexpected deaths in which the coroner, after satisfying himself as to the facts, did not deem an inquest necessary. . . .

Entertainments and amusements provided for the patients. The weekly and some special dances, 12 cricket matches, 12 football matches, six theatrical and other entertainments in the recreation hall, the sports in the orchard, the harvest home dinner for working male patients, and the Christmas dinner, were as much enjoyed as ever.

Improvements and additions. A new building, which is a great acquisition, consisting of a *post-mortem* room, laboratory, visitors' room, and room for the reception of dead bodies, has been built.

The female blocks I., III., and XI. have been repainted and redecorated, all the floors being dry rubbed instead of scrubbed. Blocks VII. and IX. are in process of being done, and it is expected that by the spring of 1902 the whole asylum will have been repainted and redecorated, the work having taken over three years.

The chapel has been thoroughly cleaned and repainted, some extra ventilators being placed in the roof.

A good deal of external painting both of the asylum buildings and of the gas-works has been undertaken.

The boundary walls have been repointed.

Some hot-water radiators have been fixed in the corridors, and these are a great advantage. Formerly in severe weather the temperature in the corridors fell below freezing point, whereas during the severe frosts at Christmas time the temperature in the corridors stood at 40° F.

Four excellent rustic shelters have been erected in the airing courts used by the tubercular patients.

A great improvement is being effected in the airing courts by enlargements, by rearranging the paths, beds, and plots of grass, and by the planting of new shrubs and trees.

Many other smaller improvements, alterations, and additions have also taken place.

Among the works in progress may be included the alterations, improvements, and additions at the laundry, the relaying of defective drains and the laying of

new drains comprised in the drainage scheme sanctioned by the committee, and the erection of the apparatus for the sterilising and softening of the water.

* * * * *

Staff. The training of the nurses and attendants by means of lectures and demonstrations is continued with good results. In May, five nurses and two attendants obtained the nursing certificate of the Medico-Psychological Association, whilst 54 officials have gained the first-aid certificate of the St. John Ambulance Association.

In February and March two nurses had enteric fever, but made, however, good recoveries. The charge attendant of the male admission ward is convalescing from smallpox. It is with thankfulness I record that no other official or patient contracted the disease.

Scarlet fever occurred among the children of the gasworks foreman resident on the estate, but precautions were taken and the disease did not attack the patients.

* * * * *

General remarks. Two of the Commissioners in Lunacy visited on 29th April. Three Local Government Board Inspectors have visited—Dr. Downes on 11th July and 19th November, Mr. Court on 19th June, and Mr. Walsh on 21st November. A general inspection of the asylum by the Asylums Committee took place on 10th July. Deputations from the Poplar, Fulham, and Hammersmith Boards of Guardians have visited the patients chargeable to their parishes and have seen over the asylum.

The number of patients working on 31st December was as follows:—

Males.	Females.	Total.
368	372	740

Every endeavour is made to encourage as many of the patients as possible to be at work, but it is difficult to push this very far owing to the weak and helpless state of so many of the patients.

The well water has been a constant source of anxiety during the year, and indeed ever since it was proved to be the cause of the epidemic of enteric fever, enteritis, and pneumonia in 1899. It has been bacteriologically examined every month by Dr. Cartwright Wood, and these examinations show it to be variable as to its pureness. All drinking water supplied to the patients and staff is either boiled or else got from the Abbots Langley Water Company. The committee, acting on expert advice, are having a steriliser and softener erected, which is guaranteed by the contractors to both sterilise and soften all the water for use in the asylum.

There was no necessity during 1901 to use seclusion, mechanical restraint, or strong dresses in the treatment of the patients.

All the patients sleep under continuous night supervision. The table below gives some information as to the satisfactory way in which the night nursing is performed:—

	Males.	Females.
Average number of faulty patients } per night during the year .. }	13·05	30·98
Average number of dirty articles } per night during the year .. }	46·16	82·14
Total number of soiled and wet } mattresses during the year (day } and night) }	27	20

* * * * *

(Signed) FRANK ASHBY ELKINS, M.D.,
Medical Superintendent.

No. 2.

CATERHAM ASYLUM.

CATERHAM VALLEY, SURREY,

27th January, 1902.

Statistics. The following will show the numerical changes which have occurred during the year:—

	Males.	Females.	Total.
On 1st January, 1901, the asylum contained	895	1,037	1,932
Admitted during the year	54	65	119
Total number under treatment during the year	949	1,102	2,051
Discharged during the year	6	6	12
Died during the year	57	52	109
Remaining in the asylum on 31st December, 1901	886	1,044	1,930

Admissions. As compared with last year, there has been a slight increase in the number admitted, and among the cases, 12 were the subject of epilepsy, 10 of general paralysis of the insane, and in 11 pulmonary tuberculosis was diagnosed. One female patient was transferred from the Board's asylum at Leavesden, and 5 male and 13 female patients from the London County Asylum, Cane Hill.

I would like to draw attention to the difficulty often experienced in warding many of the patients sent down as "healthy," who, owing to advanced age and bodily infirmity, are quite unfit to be placed in our large wards, which contain 150 or more patients, without serious risk of accident. There appears to be an impression in some quarters that these aged and infirm cases, if not actually confined to bed and under active medical treatment, may be notified as "healthy."

Discharges. The total number of patients discharged, namely, 12, is the lowest for several years past, and includes 2 males and 1 female as recovered, 1 male and 2 females as relieved, and 6 not improved, of whom 2 males and 3 females were transferred direct to the London County Asylum at Cane Hill as suicidal or dangerous, and 1 male patient who, owing to delusions of persecution and a fixed idea that certain attendants were in the habit of putting poison in his food, was transferred to Darenth, in the hope that a change and new surroundings might benefit him.

Deaths. The deaths during the year numbered 109, 57 males and 52 females, the percentage on the average number resident being 5·7, and it is noteworthy that the mortality is the lowest for any year since the opening of the

asylum. In 84 per cent. of the cases the cause of death was ascertained by *post-mortem* examination, and I am pleased to be able to report, as it speaks well for the care and attention of the nursing staff, that bed sores were found in only five instances, and in two are described as slight. Death was due to pulmonary tuberculosis in 9 male and 3 female patients, and to exhaustion of senile decay in 39 cases, of whom in 9 the age was between 80 and 90.

Causation. Owing to the inadequate information obtainable on admission, and to the reticence on the part of relatives, who are always interviewed on the occasion of their first visit, great difficulty is experienced in assigning causes for the mental condition of those admitted.

That alcoholic intemperance, directly or indirectly, by leading to other excesses, is a frequent cause of mental and moral as well as physical degeneration, there can be no doubt, and from personal observation here, I am of opinion that a great many of the congenitally defective patients in asylums, are the offspring of those predisposed to nervous affections or of faulty constitution.

Casualties and Inquest. These were eight in number, and involved fracture of bones of the lower limbs. In five cases, advanced age and bodily enfeeblement largely contributed in causing the accident, one being over and two nearly 80 years of age. Each was fully reported at the time, and all have done well, with the exception of a male patient, the subject of general paralysis of the insane, who died about two months after the injury. The coroner for the district decided to hold an inquest, when a verdict of "death from natural causes" was returned.

In the case of two male patients who died somewhat suddenly, a special report was sent to the coroner, who did not consider an inquest necessary.

Employment. As I fully appreciate the benefit to be derived from outdoor life and useful occupation, I have selected three male attendants, who each take a party of patients to work on the grounds. So far, the result has been most satisfactory, and when the extensions and reconstruction work in progress at the laundry are completed, and the separation of the sexes assured, I hope to be able to augment the number, and send a better class of patients from the female side to that department.

Amusements. As in previous years, the importance of this form of treatment has not been lost sight of. Throughout the winter months the weekly entertainments, which consist of concerts, theatricals, and dances, and during the summer, cricket matches and picnics in the Home Wood, by lessening the monotony, both for patients and staff, have tended to contentment and been greatly appreciated.

Works. The structural alterations at the laundry are progressing rapidly, and the reconstruction and additional machinery to be supplied will greatly facilitate the work in that department, which for several years has been carried on with difficulty.

The main chimney shaft has been repaired and a new lightning conductor fixed.

The necessary painting work, which included several of the male and female wards and parts of the administrative buildings, has been carried out.

A fire engine station has been erected, and a steam fire engine supplied.

Two large hot closets have been placed in the general kitchen, the dinners being now issued to the wards in a much more satisfactory manner.

Hot-water radiators have been fixed in the main and cross corridors; the advantage has been very noticeable during the cold and damp weather.

The thatched rustic shelters reported in course of construction last year have been completed, and the paths in all the female airing courts have been tar-paved.

General.

I am pleased to be able to report that there has been no sign of epidemic or infectious disease, that the health of the patients has been generally good, and that the sanitary condition of the asylum during the past year has been satisfactory.

Two Commissioners in Lunacy, Mr. Hardinge Giffard and Dr. Marriott Cooke, inspected the asylum and saw the patients on June 4th.

Two Local Government Board Inspectors, Mr. E. D. Court and Mr. Gerald Walsh, visited the asylum during the year, and deputations from the Boards of Guardians saw and interviewed the patients chargeable to Fulham, Poplar, and Hammersmith.

In no instance has mechanical restraint been required, and in comparatively few cases has it been necessary to resort to seclusion.

Lectures.

Between 80 and 90 of the attendants, both male and female, are showing great interest in the instruction given by the medical staff. Classes for first-aid and nursing certificates of the St. John Ambulance Association are being conducted on both sides, and it is proposed later on to prepare those who are eligible for the examination for the certificate in mental nursing granted by the Medico-Psychological Association.

Staff.

The average daily number of staff (temporary and permanent) employed during the year was :—

A.	Medical	{ Medical superintendent and Three assistant medical officers }	4
B.	Nursing staff ..	{ This includes matron, assistant matron, superintendent nurse, head attendants, and several temporary attendants perform- ing the duties of attendants still serving with the colours }	139
c.	Other staff ..	{ Including the steward, chaplain, Roman Catholic religious in- structor, clerks, and artisans, both permanent and temporary }	120

I am indebted to my medical colleagues and to the other officers and members of the staff, for their readiness to at all times assist me in endeavouring to promote the comfort of the patients and well-being of the asylum, and it is gratifying to be able to testify to the general good conduct of, and satisfactory manner in which the duties have been performed, by the attendants and *employés*. During the year, two male attendants and one nurse have retired on well earned pensions, the services of three male attendants were dispensed with, owing to impaired health, and one female and two male attendants were dismissed for breaches of discipline.

* * * * *

(Signed) P. E. CAMPBELL,
Medical Superintendent.

No. 3.

DARENTH ASYLUM.

DARENTH DARTFORD, KENT,

January, 1902.

Statistics. The following is a brief summary of the statistics:—

	Males.	Females.	Total.
On January 1st, 1901, the asylum contained	1,074	916	1,990
Admitted during the year... .. .	85	90	175
Total number under treatment during the year	1,159	1,006	2,165
Discharged during the year	49	62	111
Died during the year... .. .	38	31	69
Remaining in the asylum on December 31st, 1901	1,072	913	1,985

Admissions. There was a falling-off in the number of patients admitted during the past year as compared with 1900, but nevertheless the numbers were well up to the average. Of the total admissions, 43, *i.e.*, 20 males and 23 females, went to the adult department, and 132, *i.e.*, 65 males and 67 females, to the children's department. Of those admitted to the adult department, 8 females and 4 males were over 70 years of age and 2 females were cripples. The character of the adult admissions shows little or no improvement over those of the previous year, and it is becoming increasingly difficult to find patients capable of assisting in the wards, laundry, &c., to take the place of those who through old age and other

causes are no longer able to work. Of the 23 females admitted to this department, 20 were cases of chronic insanity and only 3 were cases of congenital insanity, whereas on the male side 11 of the 20 patients admitted were congenital cases.

Of the 132 patients admitted to the children's department, 128 were cases of congenital insanity and 4, *i.e.*, 3 females and 1 male, were cases of juvenile general paralysis; 32 males and 25 females were epileptics. Of the total admissions, 17 males and 26 females are "uneducable"; the remainder are probably capable of more or less improvement, but amongst the "improvables" are a number of epileptics in whom the prognosis with regard to education depends so very much on the frequency of their attacks and the extent to which their malady can be controlled. If the epileptic attacks are at all frequent, it is certain that dementia ensues, which, combined with the already existing amentia, renders improvement quite hopeless.

The following table shows the admissions to the children's department classified according to the particular type of congenital insanity:—

	Males.	Females.	Total.
Imbecility or idiocy	28	33	61
" " " with epilepsy	30	22	52
Microcephalic	1	3	4
" with epilepsy	2	3	5
Hydrocephalic	1	2	3
" with epilepsy ... ..	...	...	...
Mongolian	1	1	2
Cretin	1	...	1
General paralysis	1	3	4
	65	67	132

Discharges. During the year 111 patients, *i.e.*, 49 males and 62 females, were discharged. Of this number, 41 males and 54 females were transferred to Rochester House, all improved; 4 males and 4 females were discharged to the care of friends on guardians' orders, of whom 3 males and 1 female were improved; 1 male and 4 females were sent to the county asylums as dangerous to themselves or others; and 3 males, all from the adult department, were discharged recovered. 2 of these last were on admission suffering from mania and 1 from melancholia.

Deaths. The deaths numbered 69, *i.e.*, 38 males and 31 females, giving the very low death rate of 3.47 per cent. on the average number resident. Considering the class of patients received, this rate is very remarkable, and says much for the healthiness of the asylum and the care and attention bestowed on the inmates. Tuberculosis caused 10 deaths last year, against 13 in 1900, and the

number of new cases of this disease which developed during the year was very small. 6 patients died from general paralysis, and of these, 4, *i.e.*, 3 females and 1 male, were children. Judging from the number of deaths from juvenile general paralysis which have occurred at this institution during the last three years, this disease would appear to be by no means so rare as at one time it was supposed to be, and the fact that the females were in a proportion of 3 to 1 both in the admissions and deaths is noteworthy. I find, however, that taking the last three years the proportion of deaths between the sexes from this disease is more nearly equal, being 5 males to 7 females, which approximately agrees with the conclusion of Dr. Mott that the sexes are affected equally. In 2 of these cases no history could be obtained; in 1, a female, there was a well-marked history of insanity and probably syphilis; and in the male cases syphilis could not be excluded. 1 male patient died from stricture of the œsophagus three months after swallowing some substance which he picked up in the stores yard, apparently soap or soda. An inquest was held, and the jury returned a verdict of "death by misadventure."

Post-mortem examinations were made in the case of 55 patients, or in 79·7 per cent. of all deaths. This percentage is not quite so good as last year, but objections were more numerous. I hope before long the Board may see their way to appoint a pathologist in connection with their asylums, and thus utilise for scientific research some of the valuable material which this asylum affords. I feel sure that such an appointment would be of the utmost value in throwing light on the causation and prevention of congenital insanity.

Accidents. Beyond a few cases of fracture, no serious accident has occurred during the year.

Restraint and seclusion. Neither of these methods of treatment has been employed.

Epidemics. During the twelve months which have elapsed since my last report, 5 sporadic cases of scarlet fever occurred, but there has been no serious outbreak; these, with two exceptions, were in the children's department. In addition to the above, there were several cases of chickenpox, 2 cases of whooping-cough, and 1 case of diphtheria, all in the children's department, and 2 cases of German measles and 2 of dysentery in the adult department. In August last a male patient in the children's department developed smallpox and was removed to the Ships, and a fortnight later the foreman of works who burnt the bedding also developed the disease in a mild form. Dr. Beresford, who was in charge at the time, at once took all necessary steps to prevent the spread of the infection, and between, Monday and Thursday the whole of the staff and patients were vaccinated, some 2,400 persons. Great praise is due to Dr. Beresford and the other medical officers for the energetic measures they adopted in this most serious emergency. No satisfactory evidence of causation could be found in any of the above cases, but I am of opinion that many of these diseases are introduced by visitors to patients.

The number of different infectious diseases which have occurred impresses me very strongly with the need of a properly constructed infectious hospital where any doubtful case could at once be isolated. The number of cases of ringworm and

ophthalmia was about the same as in former years, and has been sufficient to keep the isolation block nearly constantly filled.

It is worthy of record that no death has occurred from any of these diseases.

Causation. It is more convenient to treat of this separately for adults and children, and I propose first to deal with the latter. Owing to visiting having been stopped since last August, it has not been possible to obtain such reliable information concerning the antecedents of patients as was done last year, and we have been forced to accept the written statements of the relatives in a large proportion of the cases, but whenever possible the friends have been interviewed. Following the plan adopted last year, I shall deal with the hereditary causes in a similar manner, and the subjoined table shows for the different forms of congenital insanity the number of times each cause was present in the 68 cases where a fairly reliable history could be obtained:—

	History of Insanity.			History of Phthisis.			History of Syphilis.			History of Alcohol.			Abnormal Labour.			History of Trauma to Patient.		
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Imbecility or idiocy ...	3	5	8	3	2	5	...	...	...	4	1	5	6	2	8	1	1	2
„ with epilepsy	7	5	12	...	3	3	...	...	...	...	...	...	6	5	11	3	2	5
Microcephalic ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...
„ with epilepsy	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hydrocephalic ...	...	...	...	...	...	...	1	1	2	...	...	...	...	...	...	...	...	...
„ with epilepsy	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mongolian ...	...	...	1	1	...	1	1	...	...	1	...	1	...	1	1	...	...	...
General paralysis ...	...	...	...	...	...	...	...	1	1	...	...	...	...	1	1	...	...	...
	10	11	21	3	6	9	1	2	3	5	1	6	12	10	22	4	3	7

The above table shows there was a family history of insanity in 30·8 per cent., of phthisis in 13·2 per cent., of syphilis in 4·4 per cent., of alcohol in 8·8 per cent., of abnormal labour in 32·3 per cent., and of trauma to the patient in 10·1 per cent. It is probable from the imperfect histories of some of the cases, these percentages under-estimate the prevalence of the above causes. Compared with last year, hereditary insanity as a predisposing cause shows an increase of 8 per cent., whilst phthisis has dropped 15 per cent. and abnormal labour 8 per cent. With regard to abnormal labour, there is need of caution in paying too much attention to it as a predisposing or exciting cause. Since parturition undoubtedly is the resultant of the joint efforts of mother and child, if the child be imperfectly developed it would appear to be highly probable that the labour might be prolonged and abnormal, apart from any physical defect on the part of the mother. Hereditary syphilis and alcohol again appear to play but a small part as predisposing causes. Trauma to the patient after birth seems to play a somewhat prominent part, but undoubtedly caution must be used in accepting this as an adequate cause.

With regard to the adults, "old age" was by far the most important cause both in males and females. There was a history of heredity in 3 males and 6 females; the other causes were various, and call for no special comment.

Industries. The following table shows the amount of work done during the past year in the needlerooms and workshops, together with the number of patients employed :—

Department	Number of Patients Employed.		Average time Employed.		Number of Staff.		Articles Made.		Articles Repaired.	
	A.	C.	A.	C.	A.	C.	A.	C.	A.	C.
Upholsterer's shop	16	...	4 $\frac{3}{4}$	...	2*	...	...	...	...	...
Tailor's ,,	15	19	4 $\frac{3}{4}$	2 $\frac{1}{2}$	1	1	630	376	8,645	8,042
Shoemaker's ,,	16	22	2 $\frac{1}{2}$	2 $\frac{1}{2}$	1	1	216	131	2,471	2,892
Needleroom	10	16†	4	2 $\frac{1}{2}$	4	7	10,950	8,977	...	17,178
Mending room	10	...	4	...	1	...	...	...	20,338	...

A—Adult.

C—Children.

In addition to the numbers shown above, 32 patients are employed in the adult laundry in the morning and 42 in the afternoon, besides 2 in the laundry of the children's department, and a considerable number help in the grounds and in the wards of all three divisions of the institution. Owing to the fact that a large number of the elder patients in the children's department were in August last transferred to Rochester House, it was found necessary to employ 2 additional daily women to assist in the ward work of this department, but I hope later on it will be found possible to dispense with these. Judging, however, from the class of patients received from the parishes in exchange for those sent away, it does not appear probable we shall be able to dispense with the additional paid labour just at present.

School work and progress. The head schoolmistress sends me the following report of the school work :—

Statistics.—"On the 31st December last there were 347 names on the school registers. Of this number, 199 were boys and 148 girls. 225 attended school all day, 96 half-day, and 26 two hours and a half daily.

"During the year 51 girls and 41 boys were transferred, 2 boys and 3 girls discharged to friends, 2 boys died, and 3 boys and 1 girl removed to wards."

History.—"In August last 30 girls were transferred to Rochester House, all improved or improvable cases, and since then 24 girls and 41 boys have been transferred also. We have missed them and their work in the school, as the new admissions do not replace them at present either in occupations or industries. The senior assistant schoolmistress was also transferred with the children."

Progress.—"The results of the various occupations and industries are shown by the annexed table. The numbers of articles indicate that the majority of children in the school are now employed in producing work which is valuable

* An assistant upholsterer has been employed for about six weeks to make a number of new mattresses. 10 of these patients were in August last transferred to Rochester House.

“ from a commercial point of view. At the same time, the children generally are bright and responsive and take the keenest interest in both mental and manual work. Considering the many drawbacks which handicap our boys and girls, we have reason to think the year’s work a highly successful one, and hope to produce in the future a steady increase in the quantity of articles made, and also in the quality of the work done.”

Results.—“ Articles made in schoolroom during the year 1901 :—

No.	Industry.	Number of Articles Sold.	Amount Realised.
1	Paper flower work	558	£ s. d. 3 12 6
2	Paper work	2,069	13 18 7
3	Macramé work	134	8 8 7
4	Rug work	13	2 8 0
5	Plain and fancy sewing ...	99	3 15 4
6	„ „ knitting ...	279	18 12 5
7	Fancy basket work	370	11 6 5
8	Osier „ „	28	1 19 3
	Total	3,550	64 1 1

Osier Basket Shop.	No. of Articles.	Institution Work.	No. of Articles.
Fitched store baskets ...	36	Plain sewing	488
Prickle white „ ...	11	Ironing	3,367
„ brown „ ...	38	Repairing	587
Store baskets, small ..	14		
„ „ large ...	47		
Cane bushel baskets ...	2		
Small round linen basket	1		No. of Articles.
Workmen’s dinner baskets	3	Cane chairs, seated ...	40
Small arm „ ...	6	Baskets made	25
Gallon fruit sieves... ..	6		
Small hampers	4	Value of above—	
Picking baskets	12	Chairs	£ s. d. 2 7 6
Half-bushel round baskets	40	Baskets	2 3 9
Linen baskets, corner ...	8		£4 11 3
„ „ large, corner	3		
Total	231		

Amalgamation of the adult and children’s departments.

During the past year some progress has been made towards the complete amalgamation. In May last the Local Government Board issued an order directing that for all purposes of administration the pavilions should be deemed to be part of the adult asylum. The washing and cooking for the pavilions are now done in the adult department, and the laundry and kitchen have been suitably fitted up to execute the additional work thrown on them by this change.

A messroom has been provided on both the male and female sides of the pavilions for the nurses and attendants' breakfast and tea, and this is felt to be a very great boon by the staff; at present, however, arrangements cannot be made for them to have dinner in these rooms, and the messrooms at the adult are used for this purpose.

The stores have been re-arranged, the one at the adult being used for provisions and the one at the children's department for dry goods, and in connection with this all new work in the needleroom will from the commencement of the new year be executed in the children's department, the needleroom at the adult being used only for mending from that department and the pavilions.

It is much to be desired that it may shortly be possible to carry out the remaining steps of the complete amalgamation.

Amuse-ments. The amusement and recreation of the patients has been well looked after during the past year. As in former years, there have been weekly entertainments throughout the winter months; and during the summer months cricket and other out-door games were indulged in, and in addition the band gave weekly performances on the recreation fields. I have again to acknowledge the kindness of the editor of *Truth* in sending a large quantity of toys for the younger patients at Christmas.

Instruction for nurses and attendants. I am pleased to record that the lectures given by the assistant medical officers and myself during the past year have been well attended, and the result of the different examinations held has been very satisfactory. 6 attendants and 11 nurses obtained the first-aid certificate of the St. John Ambulance Association, and 3 attendants and 10 nurses the certificate for sick nursing. At the examination for the Medico-Psychological certificate in May, 8 attendants and 7 nurses entered, and of these, 6 attendants and all the nurses were successful. I am glad to know the sub-committee have recognised the value of this certificate. Both the mental and sick nursing is well carried out, and the Lunacy Commissioners at their annual visit called special attention to the fact that only one case of bed sore existed in the entire institution, and further said that "this and other evidences which we saw assured us that the nursing of the very large proportion of feeble and helpless persons in the asylum is creditable to those who have the charge of them," and I am glad to be able to bear testimony to the care and attention the attendants and nurses bestow on the feeble and helpless as well as on the sick and infirm.

Building and improvements. During the past year a considerable amount of new work has been undertaken and improvements effected in the institution. The following is a list of the more important new work completed or in progress:—

(1.) Tar-paving and laying out the airing courts of the adult asylum (completed).

(2.) Alteration of the laundry of the adult department and provision of new machinery and new cooking appliances in the kitchen (completed).

(3.) Remodelling of the sanitary arrangements and lavatory fittings in the pavilions (in progress).

(4.) Erection of five w.c.s in connection with the five workshops, allowing a separate w.c. to each workshop (completed).

(5.) Painting and redecoration of the whole of the ten pavilions and connecting corridors (completed).

(6.) Redecoration of the workshops block (completed).

(7.) Redecoration of the nurses' block and blocks 12 and 23, children's department (completed).

(8.) New heating apparatus in male and female bathrooms and corridors, adult department (completed).

In addition to the above, a number of minor improvements have been carried out, such as provision of new star lights to the male and female infirmary wards, adult department; new drains to asylum airing courts; erection of sun blinds in the asylum and schools airing courts, and a large number of other smaller improvements.

It will be seen from the above list that the new work accomplished has been very considerable, and the improvements effected will be a great boon to the institution. In former reports I have pointed out how desirable it was that the airing courts should be improved, and now that this work is completed, besides adding largely to the appearance of the institution, I hope it will enable the patients to be much more in the open air than formerly. I am convinced from observation that the surroundings of patients have a marked effect on their mental states. The improvement in their environment has already produced a change for better in their temperament.

The taking over of the administration of the pavilions by the adult department necessitated extensive alterations and additions to the laundry machinery in order to cope with the additional washing. Three modern washing machines have been fixed in place of the two old ones, and the heavy platform on which the old machines were fixed has been removed, giving much more space in the wash-house and relieving the floor of a very heavy burden. New hydros of modern construction have taken the place of the old ones. These hydros work from above, and so obviate the vibration of the floor which formerly occurred. The improvements effected are only part of the complete scheme for remodelling the laundry when the amalgamation is fully carried out, and with the large amount of foul washing which now has to be done it is much to be desired that the committee may see their way shortly to erect separate foul linen wash-houses, which are part of the complete scheme. If these foul wash-houses were erected it would give additional accommodation for steeping tanks and the sorting of clothes, both of which are difficulties felt somewhat acutely at present.

Two gas ovens and two gas grills of a modern type have been erected in the kitchen of the adult department in place of the old ones, which were worn out, and an additional potato steamer has also been provided and two extra baker's ovens have been built. This has enabled the cooking for the pavilions to be carried out

in this kitchen and has considerably relieved the kitchen in the children's department, which was far too small to do the cooking of that department and the pavilions.

Until recently the pavilions had been fitted with the old form of trough closets, and there was only very limited washing accommodation for the patients. By the improvements carried out, pedestal closets with automatic flush tanks have replaced the old trough closets, and four additional washing basins with water laid on have been fixed in each pavilion.

The provision of separate w.c. accommodation for each workshop was urgently needed. Each workman can now properly supervise the patients under his charge, and adults and children are prevented from mixing together.

The heating apparatus erected in the bathrooms of the adult department has already proved a great boon, and this fact can readily be appreciated when one remembers the exposed position of the institution, and the number of old and feeble patients who have to use the bathrooms.

The planting of forest trees in the airing courts and grounds mentioned in my last report has been continued, and is now practically finished. In a few years these trees will provide the shade so urgently needed in the summer months when the patients are out in the airing courts and grounds. During the recent hot summers patients have been unable to take their usual exercise owing to lack of shade.

Staff. I am pleased to be able to record that there have been considerably fewer changes amongst the staff during the past year than in the previous year, and this was especially marked amongst the male staff. In 1900 55 male attendants resigned and last year only 22; there were also fewer nurses resigned, 36 against 40 in the previous year. No doubt the new rules, which came into force early in the year, and allowed all nurses and attendants a whole day a week off duty, were largely responsible for the smaller number of resignations. A recreation room for the male attendants has also been provided and fitted up, and fills a long-felt want; but I regret to say that the proposed new block for nurses has not yet been commenced, and consequently nurses still have to sleep in patients' single rooms, but I hope before long this much-required additional accommodation will be provided.

* * * * *

I regret to say two members of the staff died during the past year, *i.e.*, Frederick Green, gate porter, and Edith Dietrich, nurse in the children's department.

* * * * *

(Signed) F. R. P. TAYLOR, M.D., B.S. (LOND.),
Medical Superintendent.

No. 4.

ROCHESTER HOUSE, EALING.

4th March, 1902.

Objects of Rochester House.

The Metropolitan Asylums Board having provided at Rochester House accommodation for about 150 improvable imbecile children to be trained apart from less hopeful cases, my first duty, after having had the honour of being appointed medical expert in relation with the new establishment, was to select for residence therein suitable patients from amongst the inmates of Darenth Schools.

Nature of accommodation and administration in relation to selection of inmates.

It had been calculated that there would be room at Rochester House for 90 male and 60 female patients, the former to reside in the new building, the latter in the old building which formed the original mansion. As these portions, though detached, were in close proximity, and it had been decided that the resident staff should consist exclusively of women, it was obvious that only younger male patients (*i.e.*, boys who had not attained puberty) could be received into the establishment, while no such restriction of age need attach to the admission of female patients. In dealing with adolescent imbeciles, it was necessary to bear in mind that although in many cases both mental and physical development is backward, it does not follow that those who are mere children in intelligence remain immature as regards animal instincts: indeed, the contrary is too often the case.

Selection of cases at Darenth.

Guided by such considerations as the above, I proceeded (in June and July last) to examine individually all the patients in school attendance at Darenth, and others who appeared to be susceptible of improvement. In this work I had the advantage of consultation with Drs. Taylor and Beresford, and of the experience of the schoolmistress (Miss Hoatson); and the case-book records were freely placed at my disposal. As a result, 60 females ranging in age from 8 years to 23, and 90 boys ranging from 6 to 15, were placed on a list to be recommended for transfer to Rochester House. So far as I could judge, this list exhausted the category of cases then resident at Darenth that fell within the necessary limitations of age, &c., and that seemed likely to benefit by separate training.

Delays in admission of patients to Rochester House.

It is unnecessary for me to recount the unexpected delays which occurred in the completion of alterations at Rochester House, and interfered with the reception of patients as early as had been hoped. In the first week of August, 1901, 30 female patients were transferred, most of them being older girls capable of helping in the cleaning of the premises and in otherwise preparing for their occupation; 40 boys (not including 1 sent back to Darenth within a few days of admission) were received in November, and in December 24 additional girls were admitted.

Number resident 31st December, 1901. On the 31st December, 1901, the number resident at Rochester House was 40 male and 54 female patients—total, 94.

Results. The period of residence of the majority of the patients is of course insufficient to justify any comprehensive statement of results, and the arrangements for training have hitherto been of a merely provisional character. But it is a matter of common observation that those longest in residence present so notable an improvement in general appearance and demeanour as to encourage the expectation of considerable amelioration in the future as the result of greater individual attention and more homelike surroundings than are possible in a very large institution. There is, indeed, definite evidence of amendment in manners and in personal habits in a certain number of cases.

Unsuitable cases for Rochester House. It is not, however, to be expected that in every case selected for Rochester House favourable results will be obtained; and when experience has shown that transferred patients are not really suitable, it seems desirable that after due trial such cases should be sent back to Darenth, so that their places may be filled by others more amenable to the influences of the smaller establishment.

School work. School work suitable to the varying capacities of the pupils, and comprising a judicious modicum of manual training, has from the first been conducted under the direction of Miss Hargreaves (head schoolmistress and matron) by Miss Palmer, with the assistance of selected nurses who have shown aptitude for this duty. The younger girls and boys have attended school "full time," *i.e.*, both morning and afternoon; but the older girls who are engaged in housework have one hour's school each morning in addition to one afternoon each week. The boys also who are industrially employed—at present chiefly in tailoring and garden work—attend school half-day only.

Industrial training. For the girls industrial training has been carried on in general housework, in the kitchen and scullery, in cookery classes, and in needlework. One of the patients has practically performed the duties of mess-room maid, and under the direction of the sempstress much useful needlework has been done by the girls in the way of making blinds, curtains, nurses' uniforms, and other articles serviceable to the establishment. The boys have assisted in the work of their own dormitories and day-rooms; and eight of them have recently been instructed in tailoring (two being able to make knickerbockers), and four have been working with the gardener. I look forward to a considerable extension of outdoor employment as the season advances, the large kitchen garden and grounds of Rochester House affording excellent scope in this direction. In addition to older boys practically assisting the gardener, I think the girls and younger boys might advantageously be encouraged to take an interest in horticultural pursuits, and a beginning was made last summer by some of the girls assisting in weeding. They might also help to gather peas, beans, and some kinds of fruit, of course under proper supervision. The care of poultry would also be a beneficial occupation for some of them.

Arrangements are in progress for establishing systematic training in laundry work, in basket and mat making, in shoe making and mending, in carpentry, in

sash-line plaiting, and perhaps in some other industries. In the selection of suitable occupations, not only the possibility of making them in the after-life of the patients more or less remunerative, but their efficacy in training hand and eye and in sharpening the faculties of imbeciles should be taken into account. At first but slow progress can be reasonably expected, and the quality of the work rather than the amount of "output" should be the main consideration; but ultimately a considerable degree of mechanical aptitude may be looked for in many cases. It is not, however, probable that any considerable number of patients from Rochester House will become qualified to compete for employment in the outside world, from which indeed most of them, the females especially, will need to be permanently protected.

Need for industrial colony.

The formation of an industrial colony where trained patients may continue to carry on under favourable circumstances the industries they have acquired seems to be the natural and proper sequel of what is now being done; and, indeed, segregation in some form would appear to be essential to the interests of succeeding generations by preventing the reproduction of a defective stock. This social necessity has been widely recognised in connection with American State institutions for imbeciles and feeble-minded, and those which have been longest in operation are now usually supplemented by an industrial establishment for the permanent employment and protection of their so-called "graduates" — *i.e.*, those who have passed through the training institution.

Rochester House already furnishes an object-lesson that the better-class imbeciles form under judicious management a well-conducted, cheerful, and contented community.

Moral training.

The moral training received in the course of school instruction, and in the Sunday and Thursday ministrations of the chaplain (the Rev. Dr. Oliver), has, no doubt, a wholesome influence on character, and the religious services seem to be much appreciated by the patients.

Recreations, &c.

Besides the usual Christmas festivities, recreations of a varied character have, from time to time, been provided, the children themselves often contributing songs and recitations for mutual entertainment. Country walks are frequently taken in the vicinity of Rochester House, and afford, under intelligent guidance, opportunities for the best kind of "Nature lessons." It is intended, also, to send occasionally select parties of more advanced patients to "shop" in Ealing, as one of the most practical methods of inculcating the value of money and simple calculation.

Health.

The ordinary medical attendance of the patients is in the hands of Dr. Halstead Dixon, whom I may congratulate on the remarkably healthy condition of the establishment since its opening. The appointment of a surgeon-dentist (Mr. C. E. Wallis) will no doubt be beneficial in view of the frequent irregularities in the formation of jaws and arrangement of teeth from which imbecile patients suffer.

(Signed) G. E. SHUTTLEWORTH, M.D., &c.,
Medical Expert, Rochester House.

No. 4a.

ANNUAL REPORT OF THE HEAD SCHOOLMISTRESS AND MATRON
OF ROCHESTER HOUSE, EALING.

27th February, 1902.

The above home for improvable imbecile children was opened during the first week in August, 1901, when 30 girls were admitted. As the house was undergoing alterations, the number of patients was not increased for the first few months. During that time the elder girls assisted in cleaning and putting the new building straight, ready for the reception of the boys.

40 boys and 27 girls were admitted at the end of November and beginning of December. To-day we have 65 male and 57 female patients, making a total of 122.

Occupation of patients. 27 girls are industrial workers, *e.g.*, making beds, cleaning corridors, helping the cook, housemaid, and scullery-maid, whilst one girl practically takes the place of the messroom-maid by keeping the room clean and in good order.

Cookery class. 10 girls attend a cookery class, and have already learnt to make a few fancy cakes and cook one or two simple dishes.

Needle-work. 4 girls assist the sempstress, and have helped to make curtains, blinds, boys' linings, nurses' uniform, &c.

Tailor's shop. 8 boys are in the tailor's shop, and 2 are making knickerbockers.

Garden and household work. 8 boys assist the gardener weeding, wheeling the barrow, and raking dead leaves and sticks together. 4 boys are bed makers, and 4 boys help in scrubbing.

School. The number of children attending school full time is 30 girls and 41 boys. One class is taught by the teacher (Miss Palmer) and the other classes at present by nurses. The 27 working girls attend school from 11 a.m. in the morning, and on Thursday afternoons.

Religious services. Services have been held in the girls' day-room Sunday afternoon and Thursday evening by Dr. Oliver, rector of St. Mary's Church, Ealing. The Bible lessons are plain and simple, so that the children understand what is said to them. They also have scripture lessons on Sunday morning and in school. The hymns are sung well and heartily, many of the children having good voices.

Recreation. As many children as can be sent go for walking parties Saturday afternoons, when the weather permits. Up to the present, owing to infectious disease in the neighbourhood, their walks have been confined to Ealing Park, a few minutes' distance from Rochester House; but in the near future the children will go out twice a week on shopping expeditions, &c. Dances and small concerts are held in the evenings.

**Improve-
ment.**

I think the children have improved very much with the extra freedom which can be allowed in a house of this description. The girls go about their work as they would do in their own homes. Though under supervision, they have a certain amount of licence, and are trusted to do little things by themselves, which gives them confidence in their own power and adds pleasure to their work.

The younger children have greatly improved in habits by the individual attention given to them. They are better behaved at table and have learnt to use their spoons and forks. The majority of the girls wash and dress themselves, and the younger ones are being taught to do the same.

The children when not in school or at work are out in the grounds, and I think this amount of fresh air has helped to keep them in such good health.

Staff.

The nurses at Rochester House are not simply attendants on the patients, but train the children to do the housework of the place and teach the younger boys and girls in kindergarten work.

(Signed) M. HARGREAVES,
Head Schoolmistress and Matron.

ASYLUM STATISTICS.—TABLE I.—Admissions, Re-admissions,

	LEAVESDEN ASYLUM.						CATERHAM ASYLUM.					
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
In the asylums, 1st January, 1901 ...	...	...	...	813	992	1,805	...	...	...	895	1,037	1,932
Cases admitted—												
First admissions ...	80	65	145	...	...	...	54	64	118	...	...	...
Not first admissions ...	1	...	1	...	...	...	...	...	...	...	...	...
From other asylums of the Board ...	...	...	...	...	...	...	...	1	1	...	...	...
Total cases admitted during the year	...	...	...	81	65	146	...	...	...	54	65	119
Total cases under care during the year	...	...	...	894	1,057	1,951	...	...	...	949	1,102	2,051
Cases discharged—												
Recovered ...	...	...	...	...	...	...	2	1	3	...	...	...
Relieved ...	...	...	...	...	...	...	1	2	3	...	...	...
Not improved ...	8	11	19	...	...	...	2	3	5	...	...	...
To other asylums of the Board ...	...	1	1	...	...	...	1	...	1	...	...	...
Died ...	75	89	164	...	...	...	57	52	109	...	...	...
Total cases discharged and died during the year	...	...	...	83	101	184	...	...	...	63	58	121
Remaining in the asylums, 31st Dec., 1901	...	...	...	811	956	1,767	...	...	...	886	1,044	1,930
Average number resident during the year	...	...	...	813	959	1,772	...	...	...	886	1,044	1,930
Persons* under care during the year†	...	...	...	894	1,057	1,951	...	...	...	949	1,102	2,051
Persons admitted	...	...	...	81	65	146	...	...	...	54	65	119
Persons recovered	...	...	...	...	...	...	...	...	...	2	1	...
Transferred from other asylums not under the Board‡	...	...	...	21	20	41	...	...	...	5	13	18
Transferred to other asylums not under the Board§	...	...	...	6	7	13	...	...	...	2	3	5

* Persons, i.e., separate persons in contradistinction to "cases," which may include the same individual more than once.
† Total cases, minus re-admissions of patients discharged during the current year.

TABLE II.—Admissions, Re-admissions, Discharges, and Deaths

[N.B.—The following are the dates of the opening of the several Asylums:—CATERHAM, Sept. 29th,

	LEAVESDEN ASYLUM.						CATERHAM ASYLUM.					
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Persons admitted during the period of 31 years and 94 days	4,373	4,204	8,577	...	...	...	4,299	3,933	8,232	...	...	...
Re-admissions	56	23	79	...	...	...	38	34	72	...	...	...
Admissions from other asylums of the Board	240	312	552	...	...	...	129	205	334	...	...	...
Total cases admitted	...	...	...	4,669	4,539	9,208	...	...	...	4,466	4,172	8,638
Discharged cases—												
Not insane ...	13	8	21	...	...	...	6	2	8	...	...	...
Recovered ...	256	134	390	...	...	...	261	192	453	...	...	...
*Relieved ...	251	171	422	...	...	...	283	170	453	...	...	...
Not improved ...	354	333	687	...	...	...	227	200	427	...	...	...
To other asylums of the Board ...	49	35	84	...	...	...	88	49	137	...	...	...
Died	2,935	2,902	5,837	...	...	...	2,715	2,515	5,230	...	...	...
Total cases discharged and died since opening of the asylum	...	...	...	3,858	3,583	7,441	...	...	...	3,580	3,128	6,708
Remaining 31st December, 1901	...	...	...	811	956	1,767	...	...	...	886	1,044	1,930
Average number resident during the 31 years and 94 days	...	...	...	838	1,048	1,886	...	...	...	854	1,059	1,913
† Transferred from other asylums not under the Board	As the annual reports of this asylum are only available since 1888, these cannot be accurately ascertained.						...	...	...	266	342	\$60
‡ Transferred to other asylums not under the Board							...	...	...	219	200	419

* These include a few escapes which have occurred since the opening of the asylum.
N.B.—From April 16th, 1873, to November, 1876, the North-Western Hospital (Hampstead) was used as an asylum for the insane; 222 patients (91 males and 131 females) died, and the remainder were discharged.

Discharges, and Deaths during the Year ended 31st December, 1901.

DARENTH ASYLUM.						ROCHESTER HOUSE ASYLUM.						SUMMARY.					
F.	TL.	M.	F.	TL.		M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.
...	...	1,074	916	1,990	...	...	...	...	...	...	...	...	...	...	2,782	2,945	5,727
2	90	172	...	...	...	...	...	...	...	...	...	216	219	435	...	...	...
1	...	1	...	...	...	...	...	...	...	...	...	2	...	2	...	...	...
2	...	2	...	...	...	41	54	95	...	...	...	43	55	98	...	...	...
...	...	...	85	90	175	...	...	...	41	54	95	...	...	...	261	274	535
...	...	...	1,159	1,006	2,165	...	...	...	41	54	95	...	...	...	3,043	3,219	6,262
3	...	3	...	...	...	...	...	...	...	...	...	5	1	6	...	...	...
...	1	1	...	...	...	...	...	...	...	...	...	1	3	4	...	...	...
5	7	12	...	...	...	...	...	...	...	...	...	15	21	36	...	...	...
1	54	95	...	...	...	1	...	1	...	...	...	43	55	98	...	...	...
8	31	69	...	...	...	...	Nil.	...	...	...	...	170	172	342	...	...	...
...	...	...	87	93	180	...	...	...	1	...	1	...	...	...	234	252	486
...	...	...	1,072	913	1,985	...	...	...	40	54	94	...	...	...	2,809	2,967	5,776
...	...	...	1,070	916	1,986	...	...	...	...	...	...	...	...	...	2,769	2,919	5,688
...	...	...	1,158	1,006	2,164	...	...	...	...	...	...	...	...	...	3,001	3,165	6,166
...	...	...	84	90	174	...	...	...	...	...	...	...	...	...	219	220	439
...	...	...	3	...	3	...	...	...	...	...	...	...	...	...	5	1	6
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	26	33	59
...	...	...	1	4	5	...	...	...	...	...	...	...	...	...	9	14	23

† Included in first admissions. § Included with not improved cases.

from the Opening of the Asylums to the 31st December, 1901.

1870; LEAVESDEN, Oct. 9th, 1870; DARENTH, May 4th, 1880; and ROCHESTER HOUSE, Aug. 1st, 1901.]

DARENTH ASYLUM.						ROCHESTER HOUSE ASYLUM.						SUMMARY.					
I.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.
755	2,628	5,383	...	...	...	...	...	...	...	...	...	11,427	10,765	22,192	...	...	...
64	55	119	...	...	...	...	...	...	...	...	...	158	112	270	...	...	...
750	696	1,446	...	...	...	41	54	95	...	...	...	1,160	1,267	2,427	...	...	...
...	...	...	3,569	3,379	6,948	...	...	...	41	54	95	...	...	...	12,745	12,144	24,889
8	14	22	...	...	...	...	...	...	...	...	...	27	24	51	...	...	...
83	79	162	...	...	...	...	...	...	...	...	...	600	405	1,005	...	...	...
993	247	540	...	...	...	...	...	...	...	...	...	827	588	1,415	...	...	...
980	222	502	...	...	...	...	...	...	...	...	...	861	755	1,616	...	...	...
733	711	1,444	...	...	...	1	...	1	...	...	...	871	795	1,666	...	...	...
100	1,193	2,293	...	...	...	...	...	...	...	...	...	6,750	6,610	13,360	...	...	...
...	...	...	2,497	2,466	4,963	...	...	...	1	...	1	...	...	...	9,936	9,177	19,113
...	...	...	1,072	913	1,985	...	...	...	40	54	94	...	...	...	2,809	2,967	5,776
...	...	...	1,056	928	1,984	...	...	...	...	...	...	...	...	...	2,748	3,035	5,783
...	...	...	57	278	335	...	...	...	...	...	...	...	...	...	323	620	943
...	...	...	2	11	13	...	...	...	...	...	...	...	...	...	221	211	432

† Included in the admissions. § Included with the not improved cases. § Information prior to 1890 not obtainable. Imbeciles, and during that period 1,201 patients were admitted direct from the several parishes and unions, as well as some or transferred to the asylums at Leavesden and Caterham.

TABLE 1A.—Showing (1) the previous attacks among persons admitted during 1901

(1) Number of previous attacks.	LEAVESDEN ASYLUM.			CATERHAM ASYLUM.					
	PERSONS.			PERSONS.					
	Males.	Females.	Total.	Males.	Females.	Total.			
Have had 1 attack	Insufficient data obtainable, hence impossible to give reliable figures.			4	3	7			
„ „ 2 attacks				3	4	7			
„ „ 3 „ ... ..				...	...	...
„ „ 4 „ ... ..				...	...	...
„ „ 5 „ ... ..				...	...	...
„ „ 6 „ ... ..				...	...	...
(2) Number of times patients recovered.	In this Asylum.			In any Asylum.					
	M.	F.	Tl.	M.	F.	Tl.			
Once	Insufficient data obtainable, hence impossible to give reliable figures.								
Twice
3 times
4 „
5 „
6 „

TABLE 1A.—Admissions and recoveries of persons* from the opening

	Males.	Females.	Total.	Males.	Females.	Total.
Persons* admitted during 31 years and 94 days	4,613	4,516	9,129	4,428	4,138	8,566
Persons discharged during the same period ...	256	134	390	261	192	453
Of whom were re-admitted relapsed† ...	Insufficient data obtainable, hence impossible to give reliable figures.			Insufficient data obtainable, hence impossible to give reliable figures.		
Recovered persons who have not relapsed ...						
Relapsed persons discharged recovered ‡						
Net recovered persons§				261	192	453

* Persons, i.e., separate persons in contradistinction to cases, which may include the same individual.

† i.e., after last re-admission, if relapsed more than once.

§ i.e., recovered.

and (2) the number of times they had previously recovered in this or any asylum.

DARENTH ASYLUM.			ROCHESTER HOUSE ASYLUM.			SUMMARY.											
PERSONS.			PERSONS.			PERSONS.											
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.									
Insufficient data obtainable, hence impossible to give reliable figures.			Imbeciles.			4	3	7									
						3	4	7									
														
														
														
In this Asylum.		In any Asylum.		In this Asylum.		In any Asylum.		In Board's Asylums.			In any Asylum.						
M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.			
Insufficient data obtainable, hence impossible to give reliable figures.						Imbeciles.					
											
											
											
											

of the asylums to the 31st December, 1901 (31 years and 94 days).

Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Insufficient data obtainable, hence impossible to give reliable figures			Imbeciles.			9,041	8,654	17,695
						517	326	843
						261	192	453

more than once.

† i.e., persons who have relapsed one or more times

persons, sane at the present time, so far as the asylum statistics show.

TABLE III.—Admissions, Discharges, and Deaths, with the Mean Annual Mortality and

YEAR.	ADMITTED.									DISCHARGED.											
	From Parishes and Unions.*			From other Asylums of Board.			Total.			Recovered.			Relieved.			Not Improved. †			To other Asylums of Board.		
	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.
LEAVESDEN ASYLUM.																					
1892	185	151	336	...	1	1	185	152	337	17	7	24	7	4	11	13	14	27	...	...	...
1893	160	95	255	...	...	...	160	95	255	13	5	18	10	...	10	10	7	17	...	...	...
1894	154	112	266	...	...	...	154	112	266	12	4	16	9	4	13	19	7	26	...	...	...
1895	126	127	253	...	...	...	126	127	253	6	1	7	4	4	8	10	7	17	1	1	2
1896	139	102	241	...	...	...	139	102	241	8	...	8	5	3	8	21	9	30	1	...	1
1897	145	103	248	...	...	...	145	103	248	13	...	13	8	6	14	18	10	28	...	...	...
1898	119	135	254	...	...	...	119	135	254	18	9	27	5	6	11	19	18	37	...	...	...
1899	184	135	319	12	11	23	196	146	342	9	4	13	25	5	30	29	19	48†	...	...	...
1900	32	29	61	46	69	115	78	98	176	2	3	5	5	2	7	16	16	32	2	...	2
1901	81	65	146	...	...	...	81	65	146	...	...	...	...	...	...	8	11	19	...	1	1
CATERHAM ASYLUM.																					
1892	103	115	218	...	...	...	103	115	218	5	2	7	5	3	8	6	8	14	...	...	...
1893	86	76	162	...	...	...	86	76	162	2	2	4	4	5	9	11	10	21	...	...	...
1894	102	113	215	...	...	...	102	113	215	6	4	10	4	3	7	6	5	11	...	...	...
1895	85	76	161	...	...	...	85	76	161	7	1	8	5	1	6	13	3	16	...	...	...
1896	84	59	143	1	...	1	85	59	144	6	3	9	3	5	8	11	7	18	...	...	...
1897	84	58	142	...	...	...	84	58	142	1	4	5	5	...	5	8	5	13	...	...	...
1898	80	120	200	...	...	...	80	120	200	6	3	9	2	4	6	5	8	13	...	...	...
1899	76	68	144	...	...	...	76	68	144	3	4	7	3	1	4	10	8	18	...	...	...
1900	41	51	92	...	...	...	41	51	92	8	4	12	4	1	5	7	6	13	...	1	1
1901	54	64	118	...	1	1	54	65	119	2	1	3	1	2	3	2	3	5	1	...	1
DARENTH ASYLUM.																					
1892	101	78	179	11	31	42	112	109	221	7	3	10	6	2	8	15	7	22	11	31	42†
1893	88	95	183	45	44	89	133	139	272	4	9	13	6	13	19	20	9	29	45	44	89
1894	75	117	192	40	13	53	115	130	245	2	3	5	3	2	5	11	3	14	38	13	51
1895	96	76	172	26	46	72	122	122	244	10	3	13	10	6	16	7	21	28	25	45	70
1896	83	57	140	27	29	56	110	86	196	5	9	14	22	14	36	11	8	19	27	29	56
1897	76	56	132	24	33	57	100	89	189	1	5	6	20	13	33	8	5	13	24	33	57
1898	61	34	95	19	25	44	80	59	139	...	...	...	8	3	11	17	8	25	19	25	44
1899	38	25	63	14	10	24	52	35	87	...	...	...	3	2	5	4	6	10	26	21	47
1900	102	129	231	2	1	3	104	130	234	...	1	1	5	3	8	1	5	6	46	69	115
1901	83	90	173	2	...	2	85	90	175	3	...	3	...	1	1	5	7	12	41	54	95
ROCHESTER HOUSE ASYLUM.																					
1901 ... ..	...	...	...	41	54	95	41	54	95	...	...	...	...	...	...	...	...	...	1	...	1
SUMMARY.																					
1892	389	344	733	11	32	43	400	376	776	29	12	41	18	9	27	34	29	63	11	31	42
1893	334	266	600	45	44	89	379	310	689	19	16	35	20	18	38	41	26	67	45	44	89
1894	331	342	673	40	13	53	371	355	726	20	11	31	16	9	25	36	15	51	38	13	51
1895	307	279	586	26	46	72	333	325	658	23	5	28	19	11	30	30	31	61	26	46	72
1896	306	218	524	28	29	57	334	247	581	19	12	31	30	22	52	43	24	67	28	29	57
1897	305	217	522	24	33	57	329	250	579	15	9	24	33	19	52	34	20	54	24	33	57
1898	260	289	549	19	25	44	279	314	593	24	12	36	15	13	28	41	34	75	19	25	44
1899	298	228	526	26	21	47	324	249	573	12	8	20	31	8	39	43	33	76	26	21	47
1900	175	209	384	48	70	118	223	279	502	10	8	18	14	6	20	24	27	51	48	70	118
1901	218	219	437	43	55	98	261	274	535	5	1	6	1	3	4	15	21	36	43	55	98

* Including transfers from asylums not under Board.

† Including transfers to asylums not under Board.

‡ Includes 3 males, 1 female, not insane.

proportion of Recoveries per cent. on the Admissions for the year 1892, and each subsequent year.

DIED.			Remaining December 31st in each year.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers Resident.		
M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
131	111	242	889	1,098	1,987	857	1,068	1,925	9.2	4.6	7.1	15.3	10.4	12.6
117	85	202	899	1,096	1,995	894	1,097	1,991	8.1	5.3	7.0	13.1	7.7	10.1
118	97	215	895	1,096	1,991	894	1,095	1,989	7.7	3.5	6.0	13.0	8.9	10.1
103	116	219	897	1,094	1,991	895	1,096	1,991	4.7	0.8	2.8	11.5	10.5	11.0
107	88	195	894	1,096	1,990	893	1,097	1,990	5.8	0.0	3.3	12.0	8.0	9.8
100	84	184	900	1,099	1,999	895	1,095	1,990	8.9	0.0	5.2	11.1	7.6	9.2
92	102	194	885	1,099	1,984	889	1,097	1,986	15.1	6.6	10.6	10.3	9.3	9.8
121	129	250	897	1,088	1,985	869	1,083	1,952	4.6	2.7	3.8	13.9	11.9	12.8
137	173	310	813	992	1,805	863	1,042	1,905	2.5	3.1	2.8	15.8	16.6	16.2
75	89	164	811	956	1,767	813	959	1,772	0.0	0.0	0.0	9.2	9.2	9.2
83	95	178	941	1,071	2,012	919	1,045	1,964	3.8	1.7	2.7	9.0	9.0	9.0
72	66	138	938	1,064	2,002	940	1,070	2,010	2.3	2.6	2.4	7.6	6.1	6.8
94	91	185	930	1,074	2,004	931	1,071	2,002	5.8	3.5	4.6	10.0	8.5	9.2
57	73	130	933	1,072	2,005	932	1,070	2,002	8.2	1.3	4.9	6.1	6.8	6.4
73	43	116	925	1,073	1,998	929	1,074	2,003	7.1	5.0	6.2	7.8	4.0	5.7
66	72	138	929	1,050	1,979	931	1,063	1,994	1.2	6.9	3.5	7.0	6.8	6.9
67	83	150	929	1,072	2,001	931	1,056	1,987	7.5	2.5	4.5	7.1	7.8	7.5
58	53	111	931	1,074	2,005	932	1,070	2,002	3.9	5.8	4.8	6.2	4.9	5.5
58	76	134	895	1,037	1,932	919	1,061	1,980	19.5	7.8	13.7	6.3	7.2	6.8
57	52	109	886	1,044	1,930	886	1,044	1,930	3.7	1.6	2.7	6.4	5.0	5.7
53	58	111	1,040	951	1,991	1,036	950	1,986	9.99	5.17	7.58	10.65	10.46	10.55
68	90	158	1,034	932	1,966	1,038	929	1,967	4.54	9.72	7.13	13.00	18.10	15.55
53	74	127	1,042	967	2,009	1,037	934	1,971	1.20	6.00	3.60	10.50	15.05	12.77
35	56	91	1,077	958	2,035	1,056	955	2,011	10.52	5.26	7.89	7.00	10.73	8.86
41	47	88	1,081	937	2,018	1,077	943	2,020	6.02	15.78	10.90	7.57	9.31	8.44
43	34	77	1,085	936	2,021	1,065	934	1,999	1.31	5.31	3.31	8.09	7.11	7.60
43	31	74	1,078	928	2,006	1,133	934	2,067	...	...	...	8.87	7.11	7.99
35	35	70	1,062	899	1,961	1,073	916	1,989	...	...	...	6.90	7.70	7.30
40	35	75	1,074	916	1,990	1,054	892	1,946	...	0.23	0.23	3.79	3.92	3.85
38	31	69	1,072	913	1,985	1,070	916	1,986	3.52	...	1.71	3.55	3.39	3.47
...	...	...	40	54	94	...	...	...	0.0	0.0	0.0	0.0	0.0	0.0
267	264	531	2,870	3,120	5,990	2,812	3,063	5,875	7.3	3.1	5.3	9.4	8.6	9.0
257	241	498	2,871	3,092	5,963	2,872	3,096	5,968	5.0	5.1	5.0	8.9	7.7	8.3
265	262	527	2,867	3,137	6,004	2,862	3,100	5,962	5.4	3.1	4.2	9.3	8.4	8.8
195	245	440	2,907	3,124	6,031	2,883	3,121	6,004	6.9	1.5	4.2	6.8	7.8	7.3
221	178	399	2,900	3,106	6,006	2,899	3,114	6,013	5.6	4.9	5.3	7.6	5.7	6.6
209	190	399	2,913	3,085	5,998	2,891	3,092	5,983	4.5	3.6	4.1	7.2	6.1	6.6
202	216	418	2,892	3,099	5,991	2,953	3,087	6,040	8.6	3.8	6.1	6.8	6.9	6.9
214	217	431	2,890	3,061	5,951	2,874	3,069	5,943	3.7	3.2	3.4	7.4	7.0	7.2
235	284	519	2,782	2,945	5,727	2,836	2,995	5,831	4.5	2.8	3.6	8.2	9.4	8.8
170	172	342	2,809	2,967	5,776	2,769	2,919	5,688	2.3	0.4	1.4	6.1	5.9	6.0

TABLE IV.—History of the Annual Admissions since the opening of the Asylums, with the (Table VIII. in

YEAR.	ADMITTED.						OF EACH YEAR'S ADMISSIONS, DISCHARGED AND DIED IN 1901.																
	New Cases.		Re-lapsed Cases.		From other Asylums of the Board.		TOTAL.			Re-covered.	Relieved.	Not Improved.	To other Asylums of the Board.			DIED.							
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Grand Total.				Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.		
LEAVESDEN ASYLUM.																							
1870 part of	468	556	...	...	...	...	468	556	1,024	...	...	...	...	...	...	...	...	...	18
1871	520	545	...	...	...	...	520	545	1,065	...	...	...	...	...	...	...	...	...	19
1872	163	256	...	...	...	...	163	256	419	...	...	...	...	...	...	...	...	...	4
1873	141	165	...	...	41	30	182	195	377	...	...	...	...	...	...	...	...	...	4
1874	115	149	1	...	1	13	117	162	279	...	...	...	...	...	...	...	...	...	4
1875	111	108	1	1	...	...	112	109	221	...	...	...	...	...	...	...	...	...	4
1876	158	79	...	...	126	184	284	263	547	...	...	1	1	...	...	...	...	...	4
1877	95	...	...	...	1	4	96	4	100	...	...	...	...	...	...	...	...	...	4
1878	69	1	1	...	13	...	83	1	84	...	...	...	...	...	...	...	...	...	4
1879	80	89	...	...	...	...	80	89	169	...	...	...	1	1	...	...	...	...	4
1880	92	75	...	...	...	...	92	75	167	...	...	...	...	...	...	...	...	...	4
1881	85	71	4	1	...	...	89	72	161	...	...	...	...	...	...	...	...	...	4
1882	82	85	3	2	...	...	85	87	172	...	...	...	...	...	...	...	...	...	4
1883	75	106	5	1	...	...	80	107	187	...	...	...	...	...	...	...	...	...	4
1884	56	96	2	...	...	...	58	96	154	...	...	...	...	...	...	...	...	...	4
1885	71	97	2	...	...	...	73	97	170	...	...	...	...	...	...	...	...	...	4
1886	62	83	3	3	...	...	65	86	151	...	...	...	...	...	...	...	...	...	4
1887	80	92	2	...	...	...	82	92	174	...	...	...	...	...	...	...	...	...	4
1888	71	83	2	...	...	...	73	85	156	...	...	...	...	...	...	...	...	...	4
1889	140	121	2	1	...	...	142	122	264	...	...	...	...	...	...	...	...	...	4
1890	162	155	1	2	...	...	163	157	320	...	...	...	...	...	...	...	...	...	4
1891	176	148	3	2	...	...	179	150	329	...	...	...	...	...	...	...	...	...	4
1892	181	149	4	2	...	1	185	152	337	...	...	1	1	...	...	...	...	...	4
1893	156	95	4	...	...	...	160	95	255	...	...	...	...	...	...	...	...	...	4
1894	148	112	6	...	...	...	154	112	266	...	...	1	1	...	...	...	...	...	4
1895	125	125	1	2	...	...	126	127	253	...	...	...	...	...	...	...	...	...	4
1896	136	100	3	2	...	...	139	102	241	...	...	1	1	...	...	...	...	...	4
1897	143	102	2	1	...	...	145	103	248	...	...	...	...	...	...	...	...	...	4
1898	118	134	1	1	...	...	119	135	254	...	...	...	1	1	...	...	...	...	4
1899	182	134	2	1	12	11	196	146	342	...	...	1	1	1	1	1	1	1	24		
1900	32	28	...	1	46	69	78	98	176	...	...	...	...	...	...	...	...	...	15
1901	80	65	1	...	...	...	81	65	146	...	...	3	3	...	...	...	...	...	9
Totals	4,373	4,204	56	23	240	312	4,669	4,539	9,208	8	11	19	...	1	1	75	89	164	
CATERHAM ASYLUM.																							
1870 part of	156	202	...	...	...	...	156	202	358	...	...	...	...	...	...	...	...	...	4
1871	664	870	...	...	...	...	664	870	1,534	...	...	...	...	...	...	...	...	...	5
1872	259	161	...	...	...	...	259	161	420	...	...	...	...	...	...	...	...	...	1
1873	183	167	1	...	...	...	184	167	351	...	...	...	...	...	...	...	...	...	2
1874	240	169	2	3	72	36	314	208	522	...	...	...	...	...	...	...	...	...	2
1875	158	180	...	...	...	...	158	180	338	...	...	...	...	...	...	...	...	...	1
1876	173	170	5	5	33	167	211	342	553	...	...	...	...	...	...	...	...	...	4
1877	178	56	2	...	...	1	180	57	237	...	...	...	...	...	...	...	...	...	4
1878	157	47	...	...	17	...	174	47	221	...	...	...	...	...	...	...	...	...	4
1879	176	84	...	...	6	...	182	84	266	...	...	...	...	...	...	...	...	...	4
1880	122	87	2	6	...	...	124	93	217	...	...	...	...	...	...	...	...	...	4
1881	122	105	...	...	...	...	122	105	227	...	...	...	...	...	...	...	...	...	4
1882	81	85	...	2	...	...	81	87	168	...	...	...	...	...	...	...	...	...	4
1883	73	37	3	3	...	...	76	40	116	...	...	...	...	...	...	...	...	...	4
1884	98	102	2	1	...	...	100	103	203	...	...	...	...	...	...	...	...	...	4
1885	59	48	3	3	...	...	62	51	113	...	...	...	...	...	...	...	...	...	4
1886	115	91	3	1	...	...	118	92	210	...	...	...	...	...	...	...	...	...	4
1887	103	90	2	1	...	...	105	91	196	...	...	1	1	...	...	...	...	...	4
1888	83	81	...	...	...	...	83	81	164	...	...	...	...	...	...	...	...	...	4
1889	92	78	...	1	...	...	92	79	171	...	...	...	...	...	...	...	...	...	4
1890	119	122	2	1	...	...	121	123	244	...	...	...	...	...	...	...	...	...	4
1891	104	108	...	...	...	...	104	108	212	...	...	...	...	...	...	...	...	...	4
1892	101	114	2	1	...	...	103	115	218	...	...	...	...	...	...	...	...	...	4
1893	86	76	...	...	...	...	86	76	162	...	...	...	...	...	...	...	...	...	4
1894	100	112	2	1	...	...	102	113	215	...	...	1	1	...	...	...	...	...	4
1895	85	75	...	1	...	...	85	76	161	...	...	1	1	...	...	...	...	...	4
1896	83	59	1	...	1	...	85	59	144	...	...	...	...	...	...	...	...	...	4
1897	84	58	...	...	...	...	84	58	142	...	...	...	...	...	...	...	...	...	4
1898	77	119	3	1	...	...	80	120	200	1	1	...	...	...	...	...	...	...	4
1899	73	67	3	1	...	...	76	68	144	1	1	...	...	...	...	...	...	...	4
1900	41	49	...	2	...	...	41	51	92	1	1	...	...	...	...	...	...	...	4
1901	54	64	1	54	65	119	1	1	2	1	2	3	4			
Total	4,290	3,933	38	34	129	205	4,466	4,172	8,638	2	1	3	1	2	3	2	3	5	1	1	57	52	109

Discharges and Deaths, and the numbers of each year remaining on the 31st December, 1901. reports previous to 1900.)

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.															Remaining of each year's Admissions 31st December, 1901.		
Recovered.			Relieved.			Not Improved.			To other Asylums of the Board.			DIED.			Males.	Females.	Total.
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
15	8	23	26	21	47	25	44	69	12	4	16	354	442	796	36	37	73
20	15	35	30	23	53	50	49	99	15	10	25	366	392	758	39	56	95
12	6	18	12	11	23	15	14	29	5	14	19	119	189	308	...	22	22
9	4	13	9	6	15	17	21	38	10	5	15	131	145	276	6	14	20
7	2	9	2	7	9	13	17	30	2	...	2	93	129	222	...	7	7
5	2	7	3	5	8	17	13	30	...	...	...	76	80	156	11	8	19
13	3	16	18	7	25	12	13	25	...	...	...	211	199	410	30	41	71
7	...	7	5	...	5	3	...	3	...	...	...	70	4	74	11	...	11
5	...	5	4	...	4	3	...	3	...	...	...	61	1	62	10	...	10
3	3	6	3	5	8	3	8	11	...	...	...	61	57	118	10	16	26
8	4	12	10	8	18	8	2	10	...	...	...	60	42	102	6	19	25
11	7	18	7	5	12	7	3	10	...	...	...	59	52	111	5	5	10
3	6	9	3	5	8	3	3	6	...	...	...	67	63	130	9	10	19
4	2	6	3	8	15	4	8	12	...	...	...	59	69	128	6	20	26
2	8	10	3	3	6	5	7	12	...	...	...	39	75	114	9	3	12
4	9	13	5	4	9	5	8	13	...	...	...	54	60	114	5	16	21
3	...	3	3	1	4	7	3	10	...	...	...	38	62	100	14	20	34
4	3	7	5	3	8	5	5	10	...	...	...	59	64	123	9	17	26
5	3	8	4	6	10	7	3	10	...	...	...	47	54	101	10	21	31
9	4	13	10	5	15	8	12	20	...	...	...	99	76	175	16	25	41
14	12	26	12	8	20	12	6	18	...	...	...	105	94	199	20	37	57
14	6	20	7	9	16	13	14	27	...	...	...	119	81	200	26	40	66
14	6	20	11	4	15	22	10	32	...	...	...	111	86	197	27	46	73
12	4	16	8	2	10	15	9	24	...	...	...	96	63	159	29	17	46
10	2	12	9	5	14	17	11	28	...	...	...	84	57	141	34	37	71
8	2	10	9	3	12	17	9	26	...	...	...	64	72	136	26	40	66
10	1	11	4	4	8	14	7	21	...	...	...	57	42	99	54	48	102
8	1	9	8	4	12	9	12	21	...	...	...	56	39	95	64	47	111
9	5	14	4	...	4	7	11	18	...	...	...	47	51	98	52	68	120
6	2	8	9	2	11	20	15	35	...	...	...	54	42	96	106	84	190
2	3	5	1	1	2	1	4	5	...	...	...	14	16	30	58	74	132
...	...	...	...	...	...	3	...	3	...	...	...	5	4	9	73	61	134
256	134	390	251	171	422	367	341	*708	49	35	84	2,935	2,902	5,837	811	956	1,767
4	4	8	7	13	20	6	7	13	2	1	3	111	148	259	26	29	55
47	31	78	50	30	80	47	36	83	19	6	25	475	672	1,147	26	95	121
24	12	36	24	10	34	11	9	20	16	11	27	173	111	284	11	8	19
19	10	29	19	6	25	13	19	32	11	8	19	107	114	221	15	10	25
18	24	42	30	13	43	1	...	1	36	18	54	202	128	330	27	25	52
13	11	24	10	8	18	9	8	17	1	3	4	115	130	245	10	20	30
2	11	13	21	13	34	5	9	14	...	...	...	148	247	395	35	62	97
...	...	...	14	4	18	5	3	8	...	...	...	133	40	173	27	10	37
5	3	8	11	1	12	4	5	9	1	...	1	123	28	151	30	10	40
6	4	10	9	4	13	13	1	14	...	...	...	128	47	175	26	28	54
7	4	11	11	7	18	8	7	15	...	...	...	81	60	141	17	15	32
3	2	5	6	5	11	10	4	14	...	...	...	79	74	153	24	20	44
9	10	19	5	5	10	2	5	7	...	...	...	45	53	98	20	14	34
11	4	15	4	3	7	3	1	4	...	...	1	41	21	62	17	10	27
7	12	19	9	10	19	6	4	10	...	...	...	60	57	117	18	20	38
2	2	4	...	1	1	5	2	7	...	...	...	39	33	72	16	13	29
12	5	17	7	6	13	10	4	14	...	...	...	67	49	116	22	28	50
7	4	11	6	2	8	7	6	13	...	...	...	59	48	107	26	31	57
4	5	9	6	...	6	5	6	11	...	...	...	51	47	98	17	23	40
8	3	11	4	4	8	5	8	13	...	...	...	58	42	100	17	22	39
8	6	14	4	3	7	9	6	15	...	...	...	65	60	125	35	48	83
5	2	7	1	2	3	4	5	9	...	...	...	53	59	112	41	40	81
2	2	4	1	1	2	6	11	17	...	...	...	50	55	105	44	46	90
8	3	11	2	5	7	8	5	13	...	...	...	43	34	77	25	29	54
6	1	7	6	3	9	3	5	8	...	...	...	50	50	100	37	54	91
4	4	8	4	3	7	8	5	13	...	...	...	33	31	64	36	33	69
2	2	4	3	1	4	5	5	10	1	...	1	36	19	55	38	32	70
5	2	7	2	1	3	7	1	8	...	...	...	34	20	54	36	34	70
1	3	4	5	3	8	5	10	15	...	...	...	24	25	49	45	79	124
10	2	12	1	2	3	2	3	5	...	...	1	18	8	26	45	52	97
2	4	6	...	1	...	...	...	...	...	...	...	9	4	13	30	43	73
...	...	...	1	1	2	1	2	3	...	...	...	5	1	6	47	61	108
261	192	453	283	170	453	233	202	435	88	49	137	2,715	2,515	5,230	886	1,044	1,930

* Includes the "not insane" cases in Table II., pp. 152-3.

TABLE IV. (contd.)—History of the Annual Admissions since the opening of the Asylum, with
(Table VIII. in

YEAR.	ADMITTED.						OF EACH YEAR'S ADMISSIONS, DISCHARGED AND DIED IN 1901.											
	New Cases.		Re-lapsed Cases.		From other Asylums of the Board.		TOTAL.			Re-covered.	Relieved.	Not Im-proved.	To other Asylums of the Board.	DIED.				
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Grand Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
DARENTH ASYLUM.																		
1870 part of ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1871 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1872 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1873 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1874 ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1875 ...	47	34	11	6	155	124	213	164	377	...	...	...	...	...	...	...	...	...
1876 ...	69	36	7	4	...	4	76	44	120	...	...	...	...	...	...	...	...	...
1877 ...	32	23	...	1	...	...	32	24	56	...	...	...	...	...	...	...	...	...
1878 ...	50	16	2	4	1	...	53	20	73	...	...	...	...	...	...	...	...	...
1879 ...	89	64	1	1	...	...	92	65	157	...	...	...	...	...	...	...	...	...
1880 ...	77	228	...	1	25	54	100	283	383	...	...	...	...	...	...	...	...	1 11
1881 ...	66	63	1	2	...	13	67	78	145	...	...	...	...	...	...	...	...	1 11
1882 ...	240	241	...	2	78	17	318	260	578	...	...	...	...	...	...	...	...	1 11
1883 ...	194	234	1	2	6	8	201	244	445	...	...	...	...	...	...	...	...	1 11
1884 ...	115	93	4	2	...	...	119	95	214	...	...	...	...	...	...	...	...	1 11
1885 ...	86	81	3	1	22	30	111	112	223	...	...	...	...	...	...	...	...	...
1886 ...	107	94	5	3	20	8	132	105	237	...	...	...	...	...	1	1	4	4
1887 ...	124	96	1	5	12	69	137	170	307	...	...	...	...	...	...	...	...	1 11
1888 ...	121	108	2	2	145	86	268	196	464	...	...	...	...	...	1	1	2	2
1889 ...	219	171	3	4	26	9	248	184	432	...	...	...	...	...	...	...	3	3
1890 ...	167	144	3	4	52	42	222	190	412	...	...	...	1	1	2	2	2	2
1891 ...	163	156	4	...	...	...	167	156	323	...	...	...	...	...	...	...	5	1
1892 ...	99	76	2	2	11	31	112	109	221	...	...	...	1	1	3	3	3	3
1893 ...	86	92	2	3	45	44	133	139	272	...	...	...	...	...	6	6	5	2
1894 ...	75	117	2	...	38	13	115	130	245	...	...	...	2	1	3	2	4	6
1895 ...	95	75	1	1	26	46	122	122	244	...	...	...	1	1	2	4	5	9
1896 ...	82	56	1	1	27	29	110	86	196	...	...	...	...	...	9	5	14	1
1897 ...	76	55	...	1	24	33	100	89	189	...	...	...	1	1	4	9	13	...
1898 ...	61	33	...	1	19	25	80	59	139	...	...	...	1	1	7	5	12	2
1899 ...	36	25	2	...	14	10	52	35	87	...	...	...	...	...	1	3	4	...
1900 ...	97	127	5	2	2	1	104	130	234	3	3	...	2	2	9	7	16	6
1901 ...	82	90	1	...	2	...	85	90	175	...	...	...	1	1	5	1	6	...
TOTALS ...	2,755	2,628	64	55	750	696	3,509	3,379	6,948	3	3	...	1	1	5	7	12	41
ROCHESTER HOUSE ASYLUM.																		
1901 ...	...	...	...	...	41	54	41	54	95	...	...	...	...	...	1	1	...	...
SUMMARY.																		
1870 part of ...	624	758	...	...	...	...	624	758	1,382	...	...	...	...	...	...	...	6	11
1871 ...	1,184	1,415	...	...	...	...	1,184	1,415	2,599	...	...	...	...	...	...	...	4	8
1872 ...	422	417	...	...	...	...	422	417	839	...	...	...	...	...	...	...	4	4
1873 ...	324	332	1	...	41	30	366	362	728	...	...	...	...	...	...	...	4	5
1874 ...	355	318	3	3	73	49	431	370	801	...	...	...	...	...	...	...	3	3
1875 ...	316	322	12	7	155	124	483	453	936	...	...	...	...	...	...	...	...	3
1876 ...	400	285	12	9	159	355	571	649	1,220	...	...	...	1	1	...	...	1	7
1877 ...	305	79	2	1	1	5	308	85	393	...	...	...	...	...	...	...	4	...
1878 ...	276	64	3	4	31	...	310	68	378	...	...	...	...	...	...	...	3	...
1879 ...	345	237	1	1	6	...	354	238	592	...	...	...	1	1	...	...	4	1
1880 ...	291	390	2	7	25	54	316	451	767	...	...	...	...	...	...	...	...	3
1881 ...	273	239	5	3	...	13	278	255	533	...	...	...	...	...	...	...	...	2
1882 ...	403	411	3	6	78	17	484	434	918	...	...	...	...	...	...	...	...	2
1883 ...	342	377	9	6	6	8	357	391	748	...	...	...	...	...	...	...	...	1
1884 ...	269	291	8	3	...	...	277	294	571	...	...	...	...	...	...	...	...	3
1885 ...	216	226	8	4	22	30	246	260	506	...	...	...	...	...	...	...	...	1
1886 ...	284	268	11	7	20	8	315	283	598	...	...	...	...	...	1	1	6	3
1887 ...	307	278	5	6	12	69	324	353	677	...	...	...	1	1	...	...	3	4
1888 ...	275	272	4	2	145	86	424	369	794	...	...	...	...	...	1	1	4	...
1889 ...	451	370	5	6	26	9	482	385	867	...	...	...	...	...	...	...	...	8
1890 ...	448	421	6	7	52	42	500	470	976	...	...	...	1	1	2	2	4	4
1891 ...	443	412	7	2	...	...	450	414	864	...	...	...	...	...	...	...	...	2
1892 ...	381	339	8	5	11	32	400	376	776	...	...	...	2	2	3	3	7	5
1893 ...	328	263	6	3	45	44	379	310	689	...	...	...	...	...	6	6	6	7
1894 ...	323	341	10	1	38	13	371	355	726	...	...	...	3	3	6	2	4	6
1895 ...	305	275	2	4	26	46	333	325	658	...	...	...	2	2	1	2	4	5
1896 ...	301	215	5	3	28	29	334	247	581	...	...	...	1	1	10	5	15	6
1897 ...	303	215	2	2	24	33	329	250	579	...	...	...	3	3	4	9	13	6
1898 ...	256	286	4	3	19	25	279	314	593	1	1	...	1	1	2	7	5	12
1899 ...	291	226	7	2	26	21	324	249	573	1	1	...	1	1	1	4	5	17
1900 ...	170	204	5	5	48	70	223	279	502	4	4	...	4	4	9	7	16	18
1901 ...	216	219	2	...	43	55	261	274	535	...	...	...	1	1	2	4	3	7
TOTALS ...	11,427	10,765	158	112	1,160	1,267	12,745	12,144	24,889	5	1	6	1	3	4	15	21	36

* Includes the "not insane" cases in Table II., pp. 152-3 (Darenth Asylum).

(The Discharges and Deaths, and the numbers of each year remaining on the 31st December, 1901. Reports previous to 1900.)

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.															Remaining of each year's Admissions 31st December, 1901.		
Recovered.			Relieved.			Not Improved.			To other Asylums of the Board.			DIED.			Males.	Females.	Total.
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
...
...
...
...
5	12	7	7	19	26	41	16	57	102	82	184	58	45	103	...	...	...
3	5	5	11	...	11	4	10	14	37	17	54	21	15	36	...	...	...
...	3	3	4	4	8	...	...	2	14	9	23	12	8	20	...	...	...
1	...	1	9	...	11	4	1	5	27	14	41	12	3	15	...	...	...
3	3	6	7	6	13	7	...	7	44	30	74	31	26	57	...	...	...
6	6	12	10	21	31	4	26	30	36	36	72	37	160	197	7	34	41
3	7	10	9	12	21	5	2	7	26	19	45	24	34	58	...	4	4
12	10	22	23	20	43	23	24	47	42	28	70	176	140	316	42	38	80
9	13	22	25	25	50	17	15	32	48	38	86	87	126	213	15	27	42
8	5	13	15	11	26	11	9	20	25	14	39	55	51	106	5	5	10
6	4	10	18	11	29	8	5	13	29	19	48	38	57	95	12	16	28
...	...	...	23	19	42	4	13	17	33	19	52	49	39	88	23	15	38
1	1	2	21	6	27	14	12	26	18	73	91	57	53	110	26	25	51
3	...	3	16	15	31	21	17	38	71	64	135	69	62	131	88	38	126
8	4	12	25	21	46	29	14	43	34	38	72	97	71	168	55	36	91
4	1	5	12	11	23	29	17	46	29	56	85	65	67	132	83	38	121
9	16	25	12	7	19	18	6	24	14	35	49	64	69	133	50	23	73
1	2	3	13	4	17	7	6	13	13	22	35	38	39	77	40	36	76
1	2	3	6	2	8	7	7	14	11	25	36	31	28	59	77	75	152
3	3	6	8	4	12	8	7	15	14	19	33	25	35	60	57	62	119
1	3	4	5	12	17	3	5	8	11	17	28	17	21	38	85	65	150
...	...	...	2	7	9	1	...	1	17	8	25	14	16	30	76	55	131
1	5	6	5	5	10	3	5	8	8	11	19	7	12	19	76	51	127
...	...	...	4	3	7	8	...	8	10	5	15	4	2	6	54	49	103
...	...	...	1	1	2	1	...	1	6	4	10	2	4	6	42	26	68
3	1	4	2	...	2	1	4	5	9	8	17	10	8	18	79	109	188
...	...	...	...	...	...	...	1	1	5	1	6	...	2	2	80	86	166
91	93	184	293	248	541	280	222	502	733	711	1,444	1,100	1,193	2,293	1,972	913	1,985
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	40	54	94
19	12	31	33	34	67	31	51	82	14	5	19	465	590	1,055	62	66	128
67	46	113	80	53	133	97	85	182	34	16	50	841	1,064	1,905	65	151	216
36	18	54	36	21	57	26	23	49	21	25	46	292	300	592	11	30	41
28	14	42	28	12	40	30	40	70	21	13	34	238	259	497	21	24	45
25	26	51	32	29	61	14	17	31	38	18	56	295	257	552	27	32	59
23	16	39	20	32	52	67	37	104	103	85	188	249	255	504	21	28	49
18	16	34	50	20	70	21	32	53	37	17	54	380	461	841	65	163	168
7	3	10	23	8	31	10	3	13	15	9	24	215	52	267	38	10	48
11	3	14	24	3	27	11	6	17	28	14	42	196	32	228	40	10	50
12	10	22	19	15	34	23	9	32	44	30	74	220	139	359	36	44	80
21	14	35	31	36	67	29	35	64	36	36	72	178	202	449	30	68	98
17	16	33	22	22	44	22	9	31	26	19	45	162	160	322	29	29	58
24	26	50	31	30	61	28	32	60	42	28	70	288	256	544	71	62	133
24	19	43	36	36	72	24	24	48	48	39	87	187	216	403	38	57	95
17	25	42	27	24	51	22	20	42	25	14	39	154	183	337	32	28	60
12	15	27	23	16	39	18	15	33	29	19	48	131	150	281	33	45	78
15	5	20	33	26	59	21	20	41	33	19	52	154	150	304	59	63	122
12	8	20	32	11	43	26	23	49	18	73	91	175	165	340	61	73	134
12	8	20	26	17	43	33	26	59	71	64	135	167	163	330	115	82	197
25	11	36	39	30	69	42	34	76	34	38	72	254	189	443	88	83	171
26	19	45	28	22	50	50	29	79	29	56	85	235	221	456	138	123	261
28	24	52	20	18	38	35	25	60	14	35	49	236	209	445	117	103	220
17	10	27	25	9	34	35	27	62	13	22	35	199	180	379	111	128	239
21	9	30	16	9	25	30	21	51	11	25	36	170	125	295	131	121	252
19	6	25	23	12	35	28	23	51	14	19	33	159	142	301	128	153	281
13	9	22	18	18	36	28	19	47	13	18	31	114	124	238	147	138	285
12	3	15	9	12	21	20	12	32	18	8	26	107	77	184	168	135	303
14	8	22	15	10	25	19	18	37	8	11	19	97	71	168	176	132	308
10	8	18	13	6	19	20	21	41	10	5	15	75	78	153	151	196	347
16	4	20	11	5	16	23	18	41	7	6	13	74	54	128	193	162	355
7	8	15	3	1	4	2	8	10	11	8	19	33	28	61	167	226	393
...	...	...	1	1	2	4	3	7	5	1	6	40	7	17	240	262	502
608	419	*1,027	827	589	1,416	880	765	1,645	870	795	1,665	6,750	6,610	13,360	2,809	2,967	5,776

* Includes the "not insane" cases in Table II., pp. 152-3 (Leavesden and Caterham Asylums).

TABLE V.—Causes of Death during
(Table VII. in

LEAVESDEN																											
CAUSE OF DEATH	5 and under 10.			10 and under 20.			20 and under 25.			25 and under 30.			30 and under 35.			35 and under 40.			40 and under 45.			45 and under 50.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
CEREBRO-SPINAL DISEASES—																											
Cerebral hæmorrhage																									1	1	
Cerebral softening																											
Cerebral softening and pulmonary tuberculosis																											
Cerebral thrombosis																											
General paralysis of the insane																											
General paralysis of the insane and pulmonary tuberculosis																											
Locomotor ataxy																											
Organic brain disease																											
Status epilepticus				1		1	2		2																1		1
THORACIC DISEASES—																											
Aneurism																											
Chronic bronchitis																											
Fatty heart																											
Pericarditis																											
Pneumonia																											
Pulmonary tuberculosis				1		1	1	2	3	2	1	3	3	1	4	2	3	5	6	3	9	3			1		1
Pulmonary tuberculosis and cancer of the pancreas							1		1																		
Pulmonary tuberculosis and chronic nephritis																											
Pulmonary tuberculosis and meningitis																											
Pulmonary tuberculosis and senile gangrene of foot																											
Pulmonary tuberculosis and tubercular disease of kidney																											
Pulmonary tuberculosis and tubercular peritonitis																											
Pulmonary tuberculosis and valvular disease of heart																											
Valvular disease of heart																											
ABDOMINAL DISEASES—																											
Carcinoma of stomach																											
Carcinoma of stomach and enteritis																											
Carcinoma of uterus																											
Chronic nephritis																											
Cystitis																											
Enteritis																											
Peritonitis																											
Peritonitis (secondary to ovarian abscess)																											
Peritonitis (secondary to ulcerative colitis)																											
Pyo-nephritis																											
Tuberculosis of kidneys																											
Ulcerative colitis																											
Volvulus																											
GENERAL DISEASES—																											
Enteric fever																											
Erysipelas																											
Phlebitis of leg and cerebral thrombosis																											
Pyæmia following erysipelas																											
Senile decay																											
Tubercular disease of vertebra																											
ACCIDENT OR VIOLENCE—																											
Choking																											
Fracture of femur																											
Fracture of ribs																											
Totals				2		2	4	3	7	3	2	5	5	1	6	4	4	8	9	9	18	5		3			

N.B.—Number of cases in which the cause of death was ascertained by *post-mortem*

TABLE V. (continued)—Causes of Death during
(Table VII. in

CATERHAM																									
CAUSE OF DEATH.	5 and under 10.			10 and under 20.			20 and under 25.			25 and under 30.			30 and under 35.			35 and under 40.			40 and under 45.			45 and under 50.			
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	
CEREBRO-SPINAL DISEASES—																									
Apoplexy																									
Dementia									1	1															
Epilepsy									2	2					1	1									
General paralysis									1	1															
Idiocy and imbecility																									
Meningitis																									
Organic disease of the brain																									1
THORACIC DISEASES—																									
Heart, degeneration of																									
Heart, valvular disease of																									
Pericarditis																									
Phthisis									1	1	1	2	3	1	1	1	1	1	3	3	3				
Pneumonia														1	1	1	1	1	1	1	1	1	1	1	1
ABDOMINAL DISEASES—																									
Bright's disease, chronic																									
Colitis																									
Obstruction of bowels (volvulus)																		1	1						
GENERAL DISEASES—																									
Cancer																									
Pernicious anæmia... ..																									1
Senile decay... ..																									1
Totals				1		1	4	1	5	1	2	3	3		3	3	2	5	7	1	8	6	1		
DARENTH																									
CEREBRO-SPINAL DISEASES—																									
Apoplexy		1	1																						
Epilepsy		1	1	2	1	3	4	4	2	6	1	1	1	1	1									1	
General paralysis					1	2	3		1	1														1	
Meningitis (chronic)					1	1																			
Softening of bra'n								1	1																
THORACIC DISEASES—																									
Abscess of lung					1	1																			
Collapse of lung					1	1																			
Heart, valvular disease of								1	1												1	1			
Phthisis					3	3	3	1	4	1	1	1	2							1	1				
Pneumonia					2	2	4	1	1	2							1	1						1	
ABDOMINAL DISEASES—																									
Calculus pyelitis					1	1																			
Colitis																									
Simple stricture of œsophagus										1	1														
GENERAL DISEASES—																									
Acute epiphysitis					1	1																			
Cancer																									
Rodent ulcer																									
Senile decay... ..																									
Senile gangrene																									
Tuberculosis... ..					3	3																			
Totals	1	2	3	13	9	22	9	6	15	2	1	3	2	1	3	2		2		2	2	2	3		

TABLE V. (continued)—Causes of Death during

(Table VII. in

CAUSE OF DEATH.	SUM																										
	5 and under 10.			10 and under 20.			20 and under 25.			25 and under 30.			30 and under 35.			35 and under 40.			40 and under 45.			45 and under 50.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
CEREBRO-SPINAL DISEASES—																											
Apoplexy...	1	1																									
Cerebral hæmorrhage...																									1	1	
Cerebral softening...								1	1																		
Cerebral softening and pulmonary tuberculosis...																											
Cerebral thrombosis...																									1	1	
Dementia...								1	1																		
Epilepsy...	1	1	2	1	3	4	6	2	8	1	1	2	2	2	4	1	1	2	2	2	1	2	3	4	1	1	
General paralysis of the insane...				1	2	3	1	1	2																		
General paralysis of the insane and pulmonary tuberculosis...																								1	1		
Idiocy and imbecility...				1	1																			1	1	1	
Locomotor ataxy...																											
Meningitis...								1	1																		
Meningitis, chronic...								1	1																		
Organic brain disease...																									1	1	
Status epilepticus...				1	1	2			2																1	1	
THORACIC DISEASES—																											
Abscess of lung...						1	1																				
Aneurism...																											
Chronic bronchitis...																											
Collapse of lung...				1	1																						
Degeneration of the heart...																											
Fatty heart...																											
Pericarditis...																											
Phthisis...				3	3	3	2	5	2	2	4	2	1	3	1	1	1	3	1	4							
Pneumonia...				2	4	1	2	2	1	1	1	1	1	1	2	1	3	2	1	3	2	1					
Pulmonary tuberculosis...				1	1	2	3	2	1	3	3	1	4	2	3	5	6	3	9	3							
Pulmonary tuberculosis and cancer of the pancreas...						1	1																				
Pulmonary tuberculosis and valvular disease of heart...																											
Pulmonary tuberculosis and tubercular disease of kidney...																											
Pulmonary tuberculosis and tubercular peritonitis...																											
Pulmonary tuberculosis and meningitis...																		1	1								
Pulmonary tuberculosis and senile gangrene of foot...																											
Pulmonary tuberculosis and chronic nephritis...																											
Valvular disease of heart...								1	1															1	1		
ABDOMINAL DISEASES—																											
Calculus pyelitis...						1	1																				
Carcinoma of stomach...																											
Carcinoma of stomach and enteritis...																											
Carcinoma of uterus...																											
Chronic nephritis...																								1	1	1	
Colitis...																											
Cystitis...													1	1													
Enteritis...																											
Peritonitis...																											
Peritonitis (secondary to an ovarian abscess)...									1	1																	
Peritonitis (secondary to ulcerative colitis)...																											
Pyo-nephritis...																								1	1		
Simple stricture of œsophagus...											1	1															
Tuberculosis of kidneys...											1	1															
Ulcerative colitis...																											
Volvulus...															1	1											
GENERAL DISEASES—																											
Cancer...																											
Enteric fever...																											
Epiphysitis, acute...						1	1																				
Erysipelas...																											
Pernicious anemia...																									1	1	
Phlebitis of leg and cerebral thrombosis...																											
Pyæmia following erysipelas...																											
Rodent ulcer...																											
Senile decay...																											
Senile gangrene...																											
Tuberculosis...						3	3																				
Tubercular disease of vertebræ...													1	1										1	1		
ACCIDENTS OR VIOLENCE—																											
Choking...																											
Fracture of femur...																											
Fracture of ribs...																											
Totals	1	2	3	16	9	25	17	10	27	6	5	11	10	2	12	9	6	15	16	12	28	14	4				

N.B.—Number of cases in which the cause of death was ascertained by post-mortem examination

TABLE VI.—Length of Residence in those Discharged

(Table IX. in

LENGTH OF RESIDENCE.	LEAVESDEN ASYLUM.						CATERHAM ASYLUM.					
	RECOVERED.			DIED.			RECOVERED.			DIED.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Under 1 Month	1	1	2	...	...	...	...	...	...
From 1 to 3 Months	4	1	5	...	...	...	2	...	2
" 3 to 6 "	1	1	...	...	...	3	...	3
" 6 to 9 "	2	2	...	...	...	...	1	1
" 9 to 12 "	2	2	...	...	...	...	...	...
" 1 to 2 Years	14	15	29	1	...	1	9	2	11
" 2 to 3 "	9	9	18	1	1	2	3	3	6
" 3 to 5 "	9	4	13	...	...	...	6	11	17
" 5 to 7 "	9	5	14	...	...	...	5	4	9
" 7 to 10 "	6	4	10	...	...	...	2	6	8
" 10 to 12 "	3	4	7	...	...	...	5	5	10
" 12 to 15 "	2	2	...	...	...	4	3	7
" 15 to 20 "	4	10	14	...	...	...	4	1	5
" 20 to 25 "	6	5	11	...	...	...	6	2	8
" 25 to 30 "	10	24	34	...	...	...	8	14	22
" 30 and upwards)
Totals	75	89	164	2	1	3	57	52	109

TABLE VII.—Duration of Insanity on Admission, in

CLASS	LEAVESDEN ASYLUM.						CATERHAM ASYLUM.																			
	DURATION OF DISEASE ON ADMISSION IN FIVE CLASSES.						DURATION OF DISEASE ON ADMISSION IN FIVE CLASSES.																			
	Ad-missions.			Re-coveries.			Re-movals not Re-covered.			Deaths.			Ad-missions.			Re-coveries.			Re-movals not Re-covered.			Deaths.				
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.
First class—First attack—																										
Within 1 week on admission																										
1 month "																										
2 months "																										
3 " "																										
Second class—First attack—																										
Above 3 and within 6 months on admission																										
" 6 " 12 "																										
Third class—Not first attack—																										
And within 1 month on admission																										
" 6 months "																										
" 12 " "																										
Fourth class—First attack or not—																										
But not over 12 months on admission																										
Fifth class—																										
Congenital																										
Unknown																										
Totals																										

TABLE VIII.—Showing in Quinquennial Periods the Ages of those Admitted, (In place of Tables X. and

AGES.	ADMISSIONS.						TOTAL ADMISSIONS.			RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DECEMBER, 1901.		
	From Parishes and Unions.*			From other Asylums of the Board.														
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
LEAVESDEN ASYLUM.																		
Under 5 years
From 5 and under 10 years
10	15
15	20	12	14	26	...	...	13	14	26	...	...	2	...	2	27	27	54
20	25	7	3	10	...	...	7	3	10	...	...	4	3	7	75	53	128
25	30	3	10	13	...	...	3	10	13	...	...	3	2	5	92	88	180
30	35	3	4	7	...	...	3	4	7	...	...	5	1	6	69	74	143
35	40	5	3	8	...	...	5	3	8	...	...	4	4	8	70	67	137
40	45	6	1	7	...	...	6	1	7	...	...	9	9	18	87	89	176
45	50	2	2	4	...	...	2	2	4	...	...	5	3	8	88	98	186
50	55	7	...	7	...	...	7	...	7	...	...	10	4	14	76	100	176
55	60	3	2	5	...	...	3	2	5	...	...	6	8	14	61	87	148
60	65	9	4	13	...	...	9	4	13	...	...	5	11	16	59	93	152
65	70	8	4	12	...	...	8	4	12	...	...	10	7	17	40	70	110
70	75	8	13	21	...	...	8	13	21	...	...	6	14	20	39	57	96
75	80	5	5	10	...	...	5	5	10	...	...	4	10	14	19	35	54
80	85	2	...	2	...	...	2	...	2	...	...	1	10	11	6	12	18
85	90	1	...	1	...	...	1	...	1	...	...	1	3	4	3	5	8
90	95
95	100	1	1	...
100	105
Unknown
Totals...	...	81	65	146	...	...	81	65	146	...	...	75	89	164	811	956	1,767
Mean age	...	49	45	47	...	...	49	45	47	...	...	52	62	57	45	49	47
DARENTH ASYLUM.																		
Under 5 years
From 5 and under 10 years
10	15	37	28	65	...	...	37	28	65	...	...	1	2	3	80	60	140
15	20	22	30	52	1	...	23	30	53	...	...	5	4	9	173	123	296
20	25	11	10	21	...	...	11	10	21	...	...	8	5	13	253	139	392
25	30	5	...	5	...	...	5	...	5	...	...	9	6	15	166	98	264
30	35	...	1	1	...	...	...	1	1	1	...	2	1	3	143	82	225
35	40	1	...	1	...	...	1	...	1	...	...	2	1	3	110	79	189
40	45	1	3	4	...	...	1	3	4	...	...	2	...	2	53	64	117
45	50	1	...	1	...	...	1	...	1	1	...	...	2	...	18	47	65
50	55	...	1	1	...	...	...	1	1	...	...	3	...	3	16	36	52
55	60	...	...	...	...	...	...	...	...	...	...	...	...	...	15	32	47
60	65	2	2	4	...	...	2	2	4	1	...	2	1	3	12	31	43
65	70	...	3	3	...	...	...	3	3	...	...	...	...	...	9	36	45
70	75	...	4	4	...	...	...	4	4	...	...	...	...	...	7	25	32
75	80	3	1	4	1	...	4	1	5	...	...	2	2	4	9	25	34
80	85	...	3	3	...	...	...	3	3	...	...	...	3	3	4	17	21
85	90	...	4	4	...	...	...	4	4	...	...	2	1	3	1	14	15
90	95	...	...	...	...	...	...	...	...	...	...	...	3	3	2	3	5
95	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
100	105	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	...	83	90	173	2	...	85	90	175	3	...	38	31	69	1,072	913	1,985	
Mean age	...	15	23	19	42	...	16	23	20	43	...	31	39	34	23	32	27	
ROCHESTER HOUSE ASYLUM.																		
Under 5 years
From 5 and under 10 years	...	...	...	13	4	17	13	4	17	...	...	...	...	...	13	4	17
10	15	...	...	...	28	23	51	28	23	51	...	...	...	...	27	23	50
15	20	...	...	...	...	17	17	...	17	17	...	...	...	...	...	17	17
20	25	...	...	...	...	10	10	...	10	10	...	...	...	...	...	10	10
25	30	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
30	35	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
35	40	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
40	45	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
45	50	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
50	55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55	60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
60	65	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
65	70	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
70	75	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
75	80	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
80	85	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
85	90	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
90	95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
95	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
100	105	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	...	...	...	41	54	95	41	54	95	...	...	...	...	...	40	54	94
Mean age	...	...	...	10	15	13	10	15	13	...	...	...	...	...	10	15	13

* Including transfers from

Recovered, and Died during 1901, and of those Remaining on the 31st December, 1901.

XI. in reports previous to 1900.)

AGES	ADMISSIONS.						TOTAL ADMISSIONS.			RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DECEMBER, 1901.			
	From Parishes and Unions.*			From other Asylums of the Board.			M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	M.	F.	TL.	
	M.	F.	TL.	M.	F.	TL.													
CATERHAM ASYLUM.																			
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" 10 "	15	...	...	...	...	...	8	13	21	...	...	...	...	...	...	17	21	38
" 15 "	20	8	13	21	...	...	8	13	21	...	...	...	...	...	...	71	47	118
" 20 "	25	5	5	10	...	...	3	4	7	2	2	3	2	5	60	59	119	
" 25 "	30	2	4	7	...	...	5	5	10	...	...	2	1	3	65	94	159	
" 30 "	35	5	5	10	...	...	7	4	11	...	...	4	1	5	91	76	167	
" 35 "	40	7	4	11	...	...	4	5	9	...	...	6	2	8	99	101	200	
" 40 "	45	4	5	9	...	...	4	4	8	...	1	1	6	2	100	122	222	
" 45 "	50	4	4	8	...	...	4	2	6	...	...	3	3	6	102	93	195	
" 50 "	55	4	2	6	...	...	3	4	7	...	1	1	5	5	79	106	185	
" 55 "	60	3	4	7	...	1	4	6	10	...	...	5	4	9	63	103	166	
" 60 "	65	4	6	10	...	...	3	12	15	...	...	6	6	12	62	90	152	
" 65 "	70	3	12	15	...	...	2	...	2	...	...	5	10	15	41	64	105	
" 70 "	75	2	...	2	...	...	2	...	2	...	...	6	9	15	26	46	72	
" 75 "	80	2	...	2	...	...	...	...	...	...	...	1	2	3	1	14	15	
" 80 "	85	...	...	...	...	...	...	...	...	...	...	1	3	4	6	1	7	
" 85 "	90	...	...	...	...	...	...	...	...	...	...	...	...	...	2	5	7	
" 90 "	95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" 95 "	100	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	3	
" 100 "	105	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	...	54	64	118	...	1	1	54	65	119	2	1	3	57	52	109	886	1,044	1,930
Mean age	...	42	42	42	...	59	59	42	43	42	27	49	38	54	65	59	47	50	48
SUMMARY.																			
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
From 5 and under 10 years	...	37	28	65	13	4	17	50	32	82	1	2	3	93	64	157
" 10 "	15	22	30	52	29	23	52	51	53	104	5	4	9	200	146	346
" 15 "	20	31	37	68	...	17	17	31	54	85	10	5	15	297	204	501
" 20 "	25	17	8	25	...	10	10	17	18	35	17	10	27	312	208	520
" 25 "	30	6	15	21	...	...	...	6	15	21	3	3	8	5	13	295	229	524
" 30 "	35	9	9	18	...	...	...	9	9	18	...	...	9	3	12	244	247	491
" 35 "	40	13	10	23	...	...	...	13	10	23	...	...	10	5	15	214	207	421
" 40 "	45	11	6	17	...	...	...	11	6	17	1	1	15	13	28	204	237	441
" 45 "	50	6	7	13	...	...	...	6	7	13	...	1	14	5	19	204	256	460
" 50 "	55	11	2	13	...	...	...	11	2	13	...	...	13	7	20	193	225	418
" 55 "	60	8	8	16	...	1	1	8	9	17	1	1	13	14	27	152	224	376	
" 60 "	65	13	13	26	...	...	...	13	13	26	...	...	10	15	25	131	232	363
" 65 "	70	11	20	31	...	...	...	11	20	31	...	...	16	13	29	109	185	294
" 70 "	75	13	14	27	1	...	1	14	14	28	...	...	13	26	39	89	146	235
" 75 "	80	7	8	15	...	...	...	7	8	15	...	...	10	22	32	49	98	147
" 80 "	85	2	4	6	...	...	...	2	4	6	...	...	4	13	17	8	40	48
" 85 "	90	1	...	1	...	...	...	1	...	1	...	...	2	9	11	11	9	20
" 90 "	95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	7	9
" 95 "	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
" 100 "	105	1	1	1	2	3
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	...	218	219	437	43	55	98	261	274	535	5	1	6	170	172	342	2,809	2,967	5,776
Mean age	...	34	35	35	11	16	14	31	31	31	37	49	40	48	59	53	37	44	40

asylums not under the Board.

TABLE IX.—*Condition as to Marriage of those*
(Included in Table XIII.)

LEAVESDEN ASYLUM.															
Condition as to Marriage.	Admissions.						Total Admissions.	Recoveries.			Deaths.				
	From Parishes and Unions.*			From other Asylums of Board.											
	Males.	Females.	Total.	Males.	Females.	Total.		Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Single	40	38	78	...	...	...	40	38	78	...	...	...	37	47	84
Married	23	7	30	...	...	...	23	7	30	...	...	...	15	13	28
Widowed	18	18	36	...	...	...	18	18	36	...	...	...	8	18	26
Unknown ... ..	...	2	2	...	...	...	...	2	2	...	...	...	15	11	26
Total	81	65	146	...	...	...	81	65	146	...	...	...	75	89	164
CATERHAM ASYLUM.															
Single	28	39	67	...	...	...	28	39	67	2	...	2	19	12	31
Married	17	13	30	...	1	1	17	14	31	...	1	1	15	11	26
Widowed	9	12	21	...	...	...	9	12	21	...	...	...	8	12	20
Unknown ... ..	...	...	...	...	...	...	...	...	...	...	...	...	15	17	32
Total	54	64	118	...	1	1	54	65	119	2	1	3	57	52	109
DARENTH ASYLUM.															
Single	77	71	148	1	...	1	78	71	149	2	...	2	30	21	51
Married	4	8	12	...	...	...	4	8	12	1	...	1	3	2	5
Widowed	1	10	11	1	...	1	2	10	12	...	...	...	2	2	4
Unknown	1	1	2	...	...	...	1	1	2	...	...	...	3	6	9
Total	83	90	173	2	...	2	85	90	175	3	...	3	38	31	69

* Including transfers from

Admitted, Recovered, and Died during 1901.

(in reports previous to 1900.)

ROCHESTER HOUSE ASYLUM.

Condition as to Marriage.	Admissions.						Total Admissions.			Recoveries.			Deaths.		
	From Parishes and Unions.*			From other Asylums of Board.			Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
	Males.	Females.	Total.	Males.	Females.	Total.									
Single				41	54	95	41	54	95	...	...	...	...	...	...
Married
Widowed
Unknown
Total				41	54	95	41	54	95	...	...	...	...	...	...

SUMMARY.

Single	145	148	293	42	54	96	187	202	389	4	...	4	86	80	166
Married	44	28	72	...	1	1	44	29	73	1	1	2	33	26	59
Widowed	28	40	68	1	...	1	29	40	69	...	...	...	18	32	50
Unknown	1	3	4	...	...	...	1	3	4	...	...	...	33	34	67
Total	218	219	437	43	55	98	261	274	535	5	1	6	170	172	342

TABLE X.—Probable causes of Insanity

(Table VI. in

CAUSES OF INSANITY.	LEAVESDEN ASYLUM.									CATERHAM ASYLUM.													
	Number of instances in which each cause was assigned.									Number of instances in which each cause was assigned.													
	Number of Cases. Admissions—Males, 81 ; Females, 65 ; Total, 146.									Number of cases. Admissions—Males, 54 ; Females, 65 ; Total, 119.													
	As predisposing cause.			As exciting cause.			As predisposing or exciting, where these could not be distinguished.			Total.	As predisposing cause.			As exciting cause.			As predisposing or exciting, where these could not be distinguished.			Total.			
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.		
MORAL—																							
Domestic trouble (including loss of relatives and friends)																							
			1	3	4				1	3	4	2	2	4	2	3				5	5		
Mental anxiety and worry (not included under the above head) and overwork																							
3	3	6							3	3	6				2	2				2	2		
Fright and nervous shock																							
												1	1	2						1	1		
PHYSICAL—																							
Intemperance in drink																							
			2	1	3				2	1	3	2	3	5	6	5	11			8	8	16	
Venereal disease																							
												3	3	6						3	3		
Self-abuse, sexual																							
														6	6					6	6		
Sunstroke																							
			1	1	2				1	1	2				1	1				1	1		
Accident or injury																							
			1	1	2				1	1	2	3	1	4						3	1	4	
Puberty and adolescence																							
			1	1	2				1	1	2												
Change of life																							
			1	1	2				1	1	2												
Fevers																							
														1	1					1	1		
Old age																							
			15	20	35				15	20	35				6	10	16			6	10	16	
Other bodily diseases or disorders																							
			18	4	22				18	4	22												
Previous attacks... ..																							
												7	7	14						7	7		
Hereditary influences ascertained (direct and collateral)																							
			4	9	13				4	9	13	7	11	18						7	11	18	
Congenital defect, ascertained																							
			12	17	29				12	17	29	14	11	25						14	11	25	
Epilepsy																							
														9	9					9	9		
Unknown																							
																		12	14	26	12	14	26

NOTE.—With reference to the distinction between "predisposing" and "exciting" causes, it must be understood The figures in the total column represent the entire number of instances in which the several causes (either alone or in the number of patients admitted is Transfers from other asylums are

TABLE XI.—Form of Mental Disorder in the Admissions, Recoveries, (Includes tables IV. and

FORM OF MENTAL DISORDER.	LEAVESDEN ASYLUM.									CATERHAM ASYLUM.															
	Admissions.			Recoveries.			Deaths.			Remaining in Asylum.			Admissions.			Recoveries.			Deaths.			Remaining in Asylum.			
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	
CONGENITAL OR INFANTILE MENTAL DEFICIENCY—																									
Congenital—(a) with epilepsy ...	3	13	16	...	...	...	8	9	17	85	118	203	7	10	17	...	...	...	14	7	21	19	32	51
(b) without epilepsy	14	12	26	...	...	...	13	14	27	321	301	622	13	17	30	...	...	...	6	5	11	320	314	634
Epilepsy acquired ...	10	3	13	...	...	...	16	8	24	63	94	157	5	2	7	...	...	...	...	...	...	5	2	7
General paralysis of the insane ...	8	1	9	...	...	...	4	3	7	11	7	18	4	2	6	...	...	...	7	...	7	7	4	11
MANIA—																									
Acute ...	2	...	2	12	3	15
Chronic ...	3	2	5	...	...	...	4	...	4	65	88	153	7	8	15	...	...	...	...	...	...	155	98	253
Recurrent ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	54	17	71
A potù ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
Senile ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	6
MELANCHOLIA—																									
Acute ...	2	2	4	2	2	4
Chronic ...	...	...	...	...	...	...	...	...	...	9	5	14	2	...	2	2	1	3	...	1	1	...	42	42
Recurrent
Senile ...	...	1	1	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	4	4
DEMENTIA—																									
Primary
Secondary ...	18	12	30	...	...	...	19	30	58	168	307	475	12	25	37	...	...	...	16	15	31	256	440	696
Senile ...	10	17	36	...	...	...	10	16	26	64	26	90	4	1	5	...	...	...	14	24	38	70	83	153
Organic (i.e., from tumours, coarse brain disease, &c.) ...	2	2	4	...	...	...	1	...	1	11	4	15	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	81	65	146	...	...	...	75	89	164	811	956	1,767	54	65	119	2	1	3	57	52	109	886	1,044	1,930

and Deaths of the Year 1901, and of Inmates on 31st December, 1901.

V. in reports previous to 1900.)

DARENTH ASYLUM.									ROCHESTER HOUSE ASYLUM.									SUMMARY.																	
Ad-missions.			Recov-eries.			Deaths.			Remaining in Asylum.			Admis-sions.			Recov-eries.			Deaths.			Remaining in Asylum.			Ad-missions.			Recov-eries.			Deaths.			Remaining in Asylums.		
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
25	21	46	...	...	...	9	12	21	375	234	609	9	11	20	...	...	...	9	11	20	44	55	99	...	...	...	31	28	59	488	395	883
49	47	96	...	...	...	18	6	24	618	453	1,071	32	43	75	...	...	...	31	43	74	108	119	227	...	...	...	37	25	62	1,290	1,111	2,401
...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	15	5	20	...	...	...	17	8	25	68	96	164
...	2	2	...	...	...	3	3	6	2	2	4	...	...	...	...	...	...	...	...	...	12	5	17	...	...	...	14	6	20	20	13	33
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	2	...	...	...	...	...	...	12	3	15
2	2	4	...	...	...	1	...	1	10	67	77	...	...	...	...	...	...	...	...	12	12	24	...	...	...	5	...	5	230	253	483	
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	54	17	71
...	...	...	1	...	1	...	...	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	2	2	4	
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	6	6
1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	2	5	...	...	...	...	...	...	2	2	4
1	1	2	...	...	...	...	...	...	2	11	13	...	...	...	...	...	...	...	...	...	3	1	4	2	1	3	...	1	1	11	58	69
...	...	2	2	...	...	...	...	...	3	...	3	...	...	...	...	...	...	...	...	...	...	...	2	...	2	...	...	...	3	...	3	
...	...	...	...	...	...	...	...	...	3	...	3	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	3	5	8	
...	6	6	...	...	...	...	...	...	20	30	50	...	...	...	...	...	...	...	...	...	...	6	6	...	...	...	...	...	20	30	50	
4	...	4	...	...	...	...	...	...	16	81	97	...	...	...	...	...	...	...	...	...	34	37	71	...	...	...	35	54	89	440	828	1,268
2	11	13	...	...	...	6	10	16	20	35	55	...	...	...	...	...	...	...	...	...	25	29	54	...	...	...	30	50	80	154	144	298
1	...	1	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	3	2	5	...	...	...	1	...	1	12	4	16
85	90	175	3	...	3	38	31	69	1,072	913	1,985	41	54	95	...	...	...	40	54	94	261	274	535	5	1	6	170	172	342	2,809	2,967	5,776

TABLE XII.—*Station or Occupation of Patients admitted during 1901.*
(Included in Table XIII. in reports previous to 1900).

LEAVESDEN ASYLUM.											
	M.	F.		M.	F.		M.	F.		M.	F.
Army pensioner	1	...	Decorator	1	...	Nurses	...	2	Stickmaker	1	...
Baker	1	...	Embroidress	1	...	Packer	1	...	Tailor	1	...
Bookfolder	1	...	Harness maker	1	...	Porters	4	...	Teacher	1	...
Bricklayer	1	...	Hawkers	2	1	Printer	1	...	Tea cooper	1	...
Cabinet maker	1	...	Housewife	1	...	Retired major	1	...	Tennis bat maker	1	...
Cabman	1	...	Insurance agent	1	...	Road sweeper	1	...	Undertaker	1	...
Carman	1	...	Labourers	21	...	Scaffolder	1	...	Waiter	1	...
Charwomen	6	...	Laundresses	3	...	Servants	5	...	Warehouseman	1	...
Cigar maker	1	...	Lighterman	1	...	Sempstresses	3	...	Waterman	1	...
Clerk	1	...	Mantle maker	1	...	Ship's fireman	1	...	Nil	19	39
Collector	1	...	Messenger	1	...	Shoeblocks	2	...	Unknown	1	1
Costermongers	2	...	Moulder	1	...	Skinner	1	...	Total	81	65
CATERHAM ASYLUM.											
Artist	1	...	Clerk	1	...	Laundress	1	...	Servants	12	...
Baker	1	...	Coachman	1	...	Machinist	1	...	Shirt maker	1	...
Boot repairer	1	...	Cooks	1	2	Masons	2	...	Shoeblock	1	...
Blacksmith	1	...	Dressmaker	1	...	Needlewoman	1	...	Shop assistant	1	...
Blind maker	1	...	Factory girl	1	...	Ostler	1	...	Stewardess	1	...
(venetian)	1	...	Fitter	1	...	Packer	1	...	Tailoress	1	...
Canvasser	1	...	Hairdresser	1	...	Picture frame	1	...	Tailors	2	...
Carman	1	...	Hawkers	1	1	maker	1	...	Twine spinner	1	...
Carpenter	1	...	Housemaid	1	1	Porter	1	...	No occupation	19	30
Carver (wood)	1	...	Housewives	4	...	Polisher (French)	1	...	Unknown	...	2
Charwomen	4	...	Labourers	7	...	Scrubber	1	...	Total	54	64
DARENTH ASYLUM.											
Carman	1	...	Domestic work'rs	3	...	Nurse	1	...	Servant	1	...
Charwomen	3	...	Housekeeper	1	...	Printers	2	...	Tailor	1	...
Clerk	1	...	Labourers	3	...	Sailor	1	...	Unknown	73	80
Decorator	1	...	Needlewoman	1	...				Total	83	90
ROCHESTER HOUSE ASYLUM.											
Imbeciles.											
SUMMARY.											
Army pensioner	1	...	Cooks	1	2	Masons	2	...	Ship's fireman	1	...
Artist	1	...	Costermongers	2	...	Messenger	1	...	Shoeblocks	3	...
Bakers	2	...	Decorators	2	...	Moulder	1	...	Shop assistant	1	...
Blacksmith	1	...	Domestic work'rs	3	...	Needlewomen	2	...	Skinner	1	...
Blind maker	1	...	Dressmaker	1	...	Nurses	3	...	Stewardess	1	...
(venetian)	1	...	Embroidress	1	...	Ostler	1	...	Stick maker	1	...
Bookfolder	1	...	Factory girl	1	...	Packers	2	...	Tailors	4	...
Boot repairer	1	...	Fitter	1	...	Picture frame	1	...	Tailoress	1	...
Bricklayer	1	...	Hairdresser	1	...	maker	1	...	Teacher	1	...
Cabinet maker	1	...	Harness maker	1	...	Polisher (French)	1	...	Tea cooper	1	...
Cabman	1	...	Hawkers	3	2	Porters	5	...	Tennis bat maker	1	...
Canvasser	1	...	Housemaid	1	...	Printers	3	...	Twine spinner	1	...
Carmen	3	...	Housekeeper	1	...	Retired major	1	...	Undertaker	1	...
Carpenter	1	...	Housewives	5	...	Road sweeper	1	...	Waiter	1	...
Carver (wood)	1	...	Insurance agent	1	...	Sailor	1	...	Warehouseman	1	...
Charwomen	13	...	Labourers	31	...	Scaffolder	1	...	Waterman	1	...
Cigar maker	1	...	Laundresses	4	...	Scrubber	1	...	No occupation	38	65
Clerks	3	...	Lighterman	1	...	Sempstresses	3	...	Unknown	74	82
Coachman	1	...	Machinist	1	...	Servants	18	...	Total	218	219
Collector	1	...	Mantle maker	1	...	Shirt maker	1	...			

NOTE.—Transfers from other asylums of the Board are not included in this table.

TABLE XIII.—Table of Heredity in Patients admitted in 1901.

DEGREE.	LEAVESDEN ASYLUM.			CATERHAM ASYLUM.			DARENTH ASYLUM.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
I. DIRECT—									
Paternal	4	3	7	1	2	3	1	2	3
Maternal	2	...	2	4	1	5	1	2	3
Grandparents	2	...	2	1	1	2	...	...	...
II. COLLATERAL—									
Brothers or sisters	4	7	11	...	5	5	2	2	4
Paternal uncles or aunts ... ..	...	2	2	...	1	1	3	1	4
Maternal " " ... ..	...	...	...	...	...	...	1	...	1
Maternal or paternal uncles or aunts ... ..	...	...	...	1	...	1	...	...	...
Paternal grandparents... ..	...	1	1	...	...	...	1	2	3
Maternal " " ... ..	...	...	...	...	...	...	1	3	4
Cousins ... ..	...	2	2	...	1	1	...	...	...
III. REMOTE—									
Undefined ... ..	...	...	...	...	...	...	2	5	7
Total	12	15	27	7	11	18	12	17	29
Total number of admissions	81	65	146	54	64	118	83	90	173
Number in which causes were assigned	28	11	39	42	51	93	18	24	42
Percentage of heredity on admissions	14·8	23·08	18·49	12·96	17·19	15·25	14·46	18·89	16·76

ROCHESTER HOUSE ASYLUM.				SUMMARY.				
DEGREE.	Males.	Females.	Total.	DEGREE.	Males.	Females.	Total.	
I. DIRECT—				I. DIRECT—				
Paternal	} Heredity conditions not known.			Paternal	6	7	13	
Maternal		Maternal	7	3	10			
Grandparents		Grandparents	3	1	4			
II. COLLATERAL—		II. COLLATERAL—						
Brothers or sisters		Brothers or sisters	6	14	20			
Paternal uncles or aunts		Paternal uncles or aunts	3	4	7			
Maternal " "		Maternal " "	1	...	1			
Maternal or paternal uncles or aunts		Maternal or paternal uncles or aunts... ..	1	...	1			
Paternal grandparents... ..		Paternal grandparents	1	3	4			
Maternal " "		Maternal " "	1	3	4			
Cousins	Cousins ... ..	...	3	3			
III. REMOTE—				III. REMOTE—				
Undefined	Undefined	2	5	7				
Total	Total	31	43	74				
Total number of admissions	Total number of admissions... ..	218	219	437				
Number in which causes were assigned	Number in which causes were assigned	88	86	174				
Percentage of heredity on admissions	Percentage of heredity on admission	14·22	19·63	16·93				

iii. APPENDIX III.—CHILDREN'S HOMES.

(Statistical Table detached from the Annual Report of the Children's Committee in Vol. I.)
STATISTICAL STATEMENT, 1901.

HOMES.	Description and Name.	Date of Opening.	NUMBER OF CHILDREN																							
			Remaining on 1st January, 1901.		Admitted direct from the Guardians during the Year.		Transferred from other Homes under the Board during the Year.		Discharged to the Guardians during the Year.		Transferred to other Homes under the Board during the Year.		Died during the Year.		Remaining on 31st December, 1901.		Total Number of Children admitted from opening of Home to 31st December, 1901.									
			Boys.	Girls.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.									
<i>I.—Ringworm.</i>																										
	Bridge School, Witham	12 February, 1901	...	...	91	92	183	2	2	4	22	17	39	...	...	...	71	77	148	93	94	187		
<i>II.—Convalescents.</i>																										
	S. Anne's Home, Herne Bay	26 December, 1897	65	58	123	100	57	157	221	23	89	73	162	20	20	2	4	6	76	39	115	359	690			
	East Cliff House, Margate	26 June, 1898	12	28	40	21	80	101	36	36	20	54	74	36	2	38	1	1	13	51	64	162	225			
<i>III.—Defective Children.</i>																										
	Lloyd House, Pentonville	16 January, 1899	...	...	...	3	3	20	20	20	...	3	3	20	20	...	...	...	...	20	20	...	26	26
	12, Lloyd Street, Pentonville	18 October, 1901	...	...	...	6	6	...	...	...	...	...	...	...	...	...	...	...	...	6	6	...	6	6
	Elm Grove, Peckham, No. 16	25 January, 1901	...	...	...	...	...	14	14	14	...	...	...	...	...	...	...	...	14	...	14	14	...	14
	Kingwood Road, Fulham, Nos. 60, 62, and 64	17 September, 1900	13	...	13	24	...	24	...	...	2	...	2	14	14	...	...	...	21	...	21	37	...	37
	TOTALS		90	106	196	236	238	474	54	43	97	133	147	280	50	42	92	2	5	7	195	193	388	665	679	1344

iv. APPENDIX IV.—TRAINING SHIP "EXMOUTH."

(Statistical tables detached from the Training Ship "Exmouth" Committee's Annual Report in Vol. I.)

TABLE I.—BOYS ADMITTED AND DISCHARGED.

YEAR	1876	1877	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	TOTALS.
Admitted	194	494	188	210	280	226	340	350	326	267	374	241	301	329	290	223	322	290	307	278	347	325	341	341	423	413	8,028
Discharged to Royal Navy	1	6	1	8	72	85	155	141	95	128	114	95	87	104	108	80	83	102	133	163	137	129	123	149	115	151	2,574
Discharged to Mercantile Marine, of whom 40 were enrolled in Royal Naval Reserve	53	19	126	115	105	107	109	96	186	91	43	55	36	171	134	75	69	90	87	96	109	112	112	135	145	146	2,749
Discharged to Army as Musicians	9	11	9	31	17	27	46	74	61	43	56	18	56	56	48	42	66	28	26	37	49	28	52	93	93	56	1,050
Discharged to situations, of whom 8 subsequently went to sea	1	...	2	...	3	...	...	...	2	...	...	...	...	...	...	1	...	...	1	...	1	...	...	1	...	1	13
Discharged to Unions by order of respective Boards of Guardians and Committee	21	23	47	30	61	43	27	33	52	39	49	44	45	44	36	18	51	34	54	41	51	29	30	29	39	31	1,010
Boys died	...	...	2	1	...	4	1	...	2	2	5	1	2	1	1	...	1	3	2	1	3	2	1	1	1	2	30
Totals	85	59	187	185	258	296	338	344	318	303	327	293	293	376	327	225	270	257	303	338	350	390	397	373	398	387	7,441

Total number of boys discharged ... 7,441
 Remaining under training 31st December, 1901 ... 587
 Total ... 8,028

The number of boys discharged during the last 18 years averages 317 per year.

TABLE II.

Number of boys admitted from each of the metropolitan unions and parishes and from country unions during 1901 and during the whole time the ship has been established.

Year ending Dec. 31st, 1901.	Union or Parish.	From Mar. 31st, 1876, to Dec. 31st, 1901.	Year ending Dec. 31st, 1901.	Union or Parish.	From Mar. 31st, 1876, to Dec. 31st, 1901.
	Number of boys in the ship when it was taken over from the managers of the Forest Gate School District	12	Bro. } 301 for. }	Brought forward	7,737
	<i>Metropolitan Unions.</i>				
1	City of London	118	1	St. Albans	3
15	Fulham	269	—	Martley	3
20	Greenwich	418	—	Worcester	22
21	Hackney	279	—	Brentford	9
9	Holborn	260	2	Richmond	12
4	Hammersmith	12	—	Gateshead	1
25	Lewisham	642	1	Bicester	1
5	Mile End	196	—	Hendon	1
14	Poplar	391	—	Hambleton	1
2	St. George's-in-the-East	126	5	Epsom	9
6	St. George's Union	272	—	Leeds	1
—	St. Giles, Bloomsbury	39	1	Dewsbury	3
23	St. Giles, Camberwell	424	9	Watford	16
1	St. John, Hampstead	31	—	Warwick	1
7	St. Leonard, Shoreditch	144	10	Croydon	16
—	St. Luke, Chelsea	150	—	Haslingden	1
10	St. Mary, Islington	247	7	Eastbourne	4
2	St. Mary Abbots, Kensington	190	4	Isle of Thanet	19
3	St. Mary, Lambeth	436	—	Maidstone	20
4	St. Marylebone	494	4	Gravesend	4
1	St. Mary, Paddington	142	4	Steyning	8
15	St. Matthew, Bethnal Green	205	27	West Ham	79
16	St. Olave's	284	4	Chelmsford	7
14	St. Pancras	453	—	Newbury	—
12	Southwark	428	—	Kettering	2
5	Stepney	107	1	Reigate	1
—	Strand	32	—	Chippenham	2
25	Wandsworth and Clapham	238	1	Westhampnett	3
1	Westminster	56	—	Dorking	2
1	Whitechapel	153	—	Banbury	1
7	Woolwich	325	9	Thakeham	2
	<i>Country Unions.</i>		1	Derby	11
12	Willesden	14	—	Cuckfield	1
—	Stockport	2	1	Brighton	1
2	Bromley	14	1	Orsett	2
2	Bedford	20	1	Hemel Hempstead	1
6	Strood	44	1	Wilton	1
—	Medway	21	1	Portsmouth	1
10	Kingston	40	1	Sculcoats	1
	Carried forward	7,737	3	Horsham	3
Car. } 301 for. }			2	Great Yarmouth	2
			2	Maldon	2
			3	Guildford	3
			7	Colchester	7
			1	Nottingham	1
				Total	8,028
			Total 413		

Admissions from country unions commenced only in the latter part of 1892.

TABLE III.—BOYS SHIPPED FROM THE SHIPPING HOME.

Year.	Number Shipped.	Year.	Number Shipped.	Year.	Number Shipped.	Year.	Number Shipped.
1876	53	Bro. for... ..	730	Bro. for... ..	1,573	Bro. for... ..	2,211
1877	19	1884	106	1891	75	1898	112
1878	126	1885	91	1892	69	1899	135
1879	115	1886	107	1893	90	1900	145
1880	105	1887	93	1894	87	1901	146
1881	107	1888	141	1895	96		
1882	109	1889	171	1896	109		
1883	96	1890	134	1897	112		
Car. for... ..	730	Car. for... ..	1,573	Car. for... ..	2,211	TOTAL	2,749

TABLE IV.—SPECIAL GOOD CONDUCT AND ABILITY PRIZE LIST.—Prize Day, 23rd June, 1901.

Order of Merit.	NAME.	No. on Ship's Books.	No. on Watch Bill.	UNION OR PARISH.	RANK.	PRIZE.	KINDLY GIVEN BY	QUALIFICATIONS.
1	E. Carr ...	6485	415	Whitechapel	Chief Petty Officer ...	Silver Watch ("Brewer Prize")	Sir E. Galsworthy, J.P.	Selected by the officers of the ship. This little fellow has been on board longer than any other boy; he is the best boy in the ship, and a smart active captain of division
2	O. Oldfield ...	6975	477	Woolwich ...	Ditto	Silver Watch (Most Useful Boy)	R. Strong, Esq., J.P.	Is the most useful boy in the ship. He is a thoroughly good all-round sailor boy. He is now promoted to be the captain's coxswain
3	A. Smith ...	6718	116	Bedford ...	1st Class Petty Officer	Silver Watch (Best Boy in School)	A Member of the Board	A smart, intelligent, good lad, and is most trustworthy
4	W. Edey ...	6725	31	St. Pancras ...	Chief Petty Officer ...	Silver Watch (Best Leading Gunn'r)	Geoffrey Drage, Esq., Chairman of Com'ttee	The best gunner in the ship, and a first-rate sub-instructor. His chum got the same prize last year
5	A. Reid ...	6810	407	Mile End ...	Ditto	Silver Medal ...	The Managers ...	An exemplary chief petty officer, and sergeant of the band; he fills a most important post with great credit
6	E. Barton ...	6807	523	Mile End ...	Ditto	Ditto	Ditto	A very good captain of division; always clean and tidy
7	J. Cuthbert ...	6549	82	Bethnal Green	Ditto	Ditto	Ditto	An excellent chief petty officer. He won the watch last year as leading gunner
8	A. Watson ...	6680	149	Eastbourne...	Ditto	Ditto	Ditto	A very good captain of division, and a thoroughly good gymnast
9	G. Hardwick ...	7272	231	Islington ...	Ditto	Ditto	Ditto	Good chief petty officer, and captain of his division
10	W. Edey ...	6725	31	St. Pancras...	Ditto	Ditto	Ditto	An excellent, hardworking, and steady chief petty officer
11	F. Barber ...	7200	138	Hackney ...	1st Class Petty Officer	Ditto	Ditto	A most useful and trustworthy petty officer, and a good boy all round
12	W. A. Baker ...	7060	105	Poplar ...	Chief Petty Officer ...	Ditto	Ditto	Won his chief petty officer rating in a hard competition in signalling
13	C. Eames ...	6722	172	St. Pancras ...	Ditto	Ditto	Ditto	A smart captain of division, and a steady hardworking chief petty officer
14	F. Adams ...	7348	349	Wandsworth	Ditto	Ditto	Ditto	A very good chief petty officer, and while sick berth attendant was very kind and attentive to the sick boys
15	A. J. Henry ...	7385	579	Greenwich ...	Ditto	Ditto	Ditto	An excellent, steady, and hardworking chief petty officer
16	R. G. Boulter...	7050	22	St. George's	1st Class Petty Officer	Ditto	Ditto	A reliable, industrious, and clean gold badge boy
17	A. Reid ...	6810	409	Mile End ...	Chief Petty Officer ...	Silver Watch (Popular Boy)	From Capt. Brown's Legacy	Selected by his shipmates, and thoroughly deserves it

TABLE V.—CERTIFICATES OF MERIT.

The undermentioned boys were honourably mentioned in the following order of merit for good conduct and ability in various ways.

These would have been awarded prizes next to those who have received medals if there had been sufficient, but the number has been properly limited.

These lads had the honour of being presented with a certificate of merit for conduct and ability.

No. on Ship's Books.	Name.	No. on Watch Bill.	Destination.	No. on Ship's Books.	Name.	No. on Watch Bill.	Destination.
6791	W. Ehm ...	286	Still on board.	7290	S. Anslow ..	551	Still on board.
6776	S. Dunbar ...	290	Royal Navy.	7201	A. Thomas ...	182	"
6681	H. Waples ...	152	M. Marine.	7224	W. Plumridge ...	169	Royal Navy.
6889	R. J. Roberts ...	483	"	7238	E. Hurley ...	131	"
6948	J. Blackburn ...	356	Army.	7291	H. Towzell ...	504	M. Marine.
6883	H. Baker ...	306	M. Marine.	7351	T. Targett ..	52	Still on board.
6998	A. Molineaux ...	258	"	7170	J. A. McCarthy ...	381	Royal Navy.
6829	J. He... ..	250	Still on board.	7378	T. Cagney ...	277	"
6985	A. Cross ...	217	"	7308	T. Woodnut ...	503	Still on board.
6972	J. Want ...	469	"	7312	T. Cripps ...	328	Friends.
6768	E. Wellard ...	161	"	7304	A. Archer ...	372	Still on board.
7254	A. Burberry ...	465	"	7428	W. J. White ...	259	M. Marine.
7277	A. Anscombe ...	586	"	7440	J. Shuter ...	77	Royal Navy.
7175	H. Brown ...	249	"	7367	G. Wilson ...	234	Still on board.
7042	C. Smith ...	230	"	7370	W. Wilcox ...	338	Royal Navy.
7080	O. Roberts ...	383	M. Marine.	7341	F. Chitty ...	494	M. Marine.
7184	C. A. Kiss ...	80	Friends.	7416	F. Clarke ...	134	Still on board.
7163	C. Sawle ...	412	Still on board.	7438	H. Nicholson ...	49	M. Marine.
7132	S. Buckley ...	232	"	7515	A. Saunders ...	204	"
7181	G. Gentry ...	395	Friends.	7644	B. Norman ...	203	Still on board.
7031	A. Johnson ...	473	M. Marine.	7645	J. Hassall ...	242	Royal Navy.
7100	T. Illing ...	185	"				

TABLE VI.

The boys discharged to the army since 25th March, 1876, joined the undermentioned regiments as band boys, viz. :—

1 to the Royal Horse Artillery.	1 to the 19th Hussars.	15 to the Welsh Fusiliers, Royal.
24 " Royal Artillery.	9 " 20th Hussars.	32 " Welsh Regiment.
1 " Royal Engineers.	2 " 21st Hussars.	1 " West Riding Regiment.
6 " Dragoon Guards.	8 " Grenadier Guards.	6 " East Lancashire Regiment.
1 " 3rd Hussars.	4 " Coldstream Guards.	5 " Loyal North Lancashire Regiment.
1 " 4th Hussars.	1 " Scots Guards.	17 " South Lancashire Regiment.
2 " 5th Lancers.	20 " Argyle and Sutherland Highlanders.	8 " Lancashire Regiment, Royal.
1 " 11th Hussars.	7 " Northumberland Fusiliers.	7 " Leicester Regiment.
11 " Berkshire Regiment, Royal.	13 " Oxfordshire Light Infantry.	4 " Leinster Regiment.
18 " Border Regiment.	17 " Rifle Brigade.	4 " Lincolnshire Regiment.
13 " Cheshire Regiment.	21 " Royal Fusiliers.	3 " Liverpool Regiment.
44 " Connaught Rangers.	3 " Royal Highlanders.	67 " Manchester Regiment.
21 " Derbyshire Regiment.	1 " Royal Marine Light Infantry.	14 " Middlesex Regiment.
2 " Devonshire Regiment.	40 " Scots, Royal (Lothian Regiment).	2 " Munster Fusiliers, Royal.
9 " Dorsetshire Regiment.	21 " Scots Fusiliers, Royal.	6 " Cameron Highlanders.
32 " Dublin Fusiliers, Royal.	7 " Scottish Rifles.	11 " Northamptonshire Regiment.
7 " Duke of Cornwall's Light Infantry.	2 " Seaforth Highlanders.	6 " Wiltshire Regiment.
14 " Durham Light Infantry.	8 " Shropshire Light Infantry.	9 " Worcester Regiment.
34 " Essex Regiment.	29 " Somersetshire Light Infantry.	21 " York & Lancaster Regiment.
5 " Gloucestershire Regiment.	1 " Staffordshire Regiment, North.	31 " Yorkshire Light Infantry.
12 " Gordon Highlanders.	16 " Staffordshire Regiment, South.	9 " Yorkshire Regiment.
5 " Highland Light Infantry.	23 " Suffolk Regiment.	13 " East Yorkshire Regiment.
7 " Inniskilling Fusiliers, Royal.	7 " Surrey Regiment, Royal West.	8 " West Yorkshire Regiment.
21 " Irish Fusiliers, Royal.	25 " Sussex Regiment, Royal.	1 " Army Hospital Corps.
10 " Irish Rifles, Royal.	16 " South Wales Borderers.	11 " Royal Army Medical Corps.
9 " Kent Regiment, East.	35 " Warwickshire Regiment, Royal.	14 " Surrey Regiment, East.
5 " Kent Regiment, Royal West.		5 " Bedford Regiment.
5 " King's Own Scottish Borderers.		
21 " King's Royal Rifle Corps.		
46 " Lancashire Fusiliers.		
1 " 13th Hussars.		
		1,056 Total.

TABLE VII.—SCHOOL PRIZE LIST.

Standard or Class.	No. on Ship's Books.	Name.	No. on Watch Bill.	Prize.	Union or Parish.	Destination.
VI.	6802	C. Stygall	222	s. d. 5 0	Wandsworth	Royal Navy.
"	7566	H. Cannon	421	5 0	Lewisham	Still on board.
"	6995	G. Banfield... ..	164	3 0	Strand	"
"	7575	W. Warner	283	3 0	Eastbourne... ..	"
"	7595	F. Dawson	476	2 0	Wandsworth	"
"	7676	F. Murrey	163	2 0	St. Olave's	"
"	7737	R. Macgregor	254	1 0	Kingston	"
"	7713	W. Huggett	557	1 0	Steyping	"
V.	7282	C. Bowler	337	5 0	Wandsworth	"
"	7260	F. Barber	138	5 0	Hackney	"
"	7442	F. Lloyd	25	3 0	Lewisham	Royal Navy.
"	7146	W. Brooks	436	3 0	Strood	"
"	7641	C. Newington	405	2 0	Isle of Thanet	Still on board.
"	7572	H. Woolley... ..	484	2 0	Fulham	"
"	7725	T. Potter	237	1 0	Derby	"
"	7592	A. Topliffe	366	1 0	Holborn	"
Passed out of Standard IV.	7470	H. Hooper	455	5 0	Hackney	Royal Navy.
"	7549	J. Cuthbert	82	5 0	Bethnal Green	"
"	6810	A. Reid	409	5 0	Mile End	M. Marine.
"	6800	W. Dady	190	5 0	Wandsworth	Royal Navy.
"	7561	G. Fysh	78	5 0	"	"
"	6718	A. Smith	116	3 0	Bedford	M. Marine.
"	7229	G. Ardouin... ..	300	3 0	St. Marylebone	Still on board.
"	6791	W. Ehm	286	3 0	Lewisham	"
"	7013	F. Pye	59	3 0	Paddington	Royal Navy.
"	7370	W. Wilcox	338	3 0	Kensington... ..	"
"	7060	W. Baker	105	2 0	Poplar	Still on board.
"	7002	J. Bald... ..	401	2 0	Wandsworth	Royal Navy.
"	6976	O. Oldfield	477	2 0	Woolwich	M. Marine.
"	7297	S. Osborne	96	2 0	Camberwell	Royal Navy.
"	6680	A. Watson	149	2 0	Eastbourne... ..	"
"	6776	S. Dunbar	290	1 0	Woolwich	"
"	7106	R. Bailey	594	1 0	St. George's, E... ..	"
"	7450	A. Spiceley... ..	596	1 0	Hackney	Still on board.
"	6722	C. Eames	172	1 0	St. Pancras... ..	M. Marine.
"	7300	J. Lloyd	180	1 0	Camberwell	Still on board.
IV.	7383	T. Medhurst	119	5 0	Lewisham	Army.
"	7423	W. Wallace... ..	270	5 0	Lambeth	Still on board.
"	7418	A. Smith	71	5 0	Holborn	Royal Navy.
"	7360	C. Sanderson	206	5 0	Hampstead... ..	"
"	6967	W. Bass	319	3 0	St. Marylebone	Still on board.
"	6945	G. Beddingham	88	3 0	St. Saviour's	Royal Navy.
"	7510	F. Higgins	497	3 0	St. Marylebone	"
"	7542	E. Averley	46	3 0	Shoreditch	"
"	7457	J. Grindley... ..	57	2 0	Camberwell	Still on board.
"	7650	W. Wheeler	202	2 0	Wandsworth	"
"	7431	E. Gaines	197	2 0	Lambeth	"
"	7528	A. Northcott	548	2 0	Lewisham	"
"	7065	T. Shrewbridge... ..	155	1 6	Maidstone	"
"	7430	W. Warr	120	1 6	Bedford	Royal Navy.
"	7367	F. Morgan	135	1 6	Isle of Thanet	M. Marine.
"	6685	F. Elliott	66	1 6	Greenwich	"
III.	7165	F. Brookshoof	391	4 6	West Ham	Still on board.
"	7312	T. Cripps	328	4 6	Hammersmith	Friends.
"	7434	J. Moyinham	47	3 0	Greenwich	Still on board.
"	7422	G. Riches	418	3 0	West Ham	"
"	7435	W. Pope	529	2 0	Lambeth	"
"	7503	H. Arnott	542	2 0	St. Pancras... ..	"
"	7345	R. Thatcher	439	1 0	Paddington	"
"	7520	A. Sinnett	62	1 0	West Ham	"
II.	7440	J. Shuter	77	4 0	Bethnal Green	Royal Navy
"	7517	B. Bennett	294	4 0	West Ham	"
"	7339	W. Turner	235	3 0	Wandsworth	"
"	7834	F. Moule	520	3 0	Camberwell	M. Marine.
"	7112	J. Lambert... ..	33	2 0	Greenwich	Still on board.
"	7361	B. Hunter	166	2 0	West Ham	Royal Navy.
"	7473	W. Arthur	413	1 0	St. Olave's	Still on board.
"	7346	T. Hunt	110	1 0	Paddington	"
I.	6762	W. Fern	113	3 6	City of London... ..	M. Marine.
"	7371	A. Bushell	174	3 6	St. Saviour's	Still on board.
"	6970	E. Young	317	2 6	Woolwich	M. Marine.
"	7439	D. Magodrick	142	2 6	Bethnal Green	Still on board.
"	7051	D. Edgington	187	1 0	St. Pancras... ..	"
"	7227	F. Lang	206	1 0	Lambeth	"

TABLE VIII.—BAND COMPETITION.

Name, &c.	Prize.	No. on Ship's Books.	Union or Parish.	Destination.
For best reading and playing at sight—				
489. E. Mallory	10 0	7179	Holborn	Army.
401. H. Wilkerson	5 0	7108	West Ham	Royal Navy.
561. G. Timms	2 6	6804	Wandsworth	"
For best general musical knowledge—				
150. E. Hobbs	10 0	7331	Holborn	Royal Navy.
134. F. Clark	5 0	7416	St. Saviour's	Still on board.
S. P. West... ..	2 6	7280	Mile End	Royal Navy.
For best solo performers—				
409. A. Reid... ..	10 0	6819	Mile End	M. Marine.
18. G. Davey	5 0	7023	Richmond	Royal Navy.
516. C. Warren	2 6	7068	St. George's	"
For best progress in 2nd Class Band—				
441. C. Butler	5 0	7296	Stepney	Army.
294. B. Bennett	3 6	7517	West Ham	Royal Navy.
188. C. Bennett	2 0	7436	Fulham	Still on board.
466. H. Boshier	1 6	7203	Whitechapel	Royal Navy.
For quickest progress in 3rd Class Band—				
331. A. Johnson	5 0	7031	St. Saviour's	Still on board.
354. F. Steadman	3 6	7221	Strood	"
55. J. Funnell	2 0	7483	Greenwich	Army.
129. W. Warr	1 6	7439	Bedford	Royal Navy.
Most efficient in Bugle Band—				
447. E. Turner	5 0	6743	St. Pancras	Still on board.
213. W. Barrett	3 0	7334	Holborn	Army.
250. J. Ife	2 0	6826	Fulham	Still on board.
475. J. Carter	1 6	6829	Steyning	"

TABLE IX.—SWIMMING COMPETITION AND PRIZE LIST.

No. on Ship's Books.	Name.	No. on Watch Bill.	Union or Parish.	Lengths.	Distance swum in one hour.	Destination.
6791	W. Ehm	286	Lewisham	128	1½ miles 360 yards	Still on board.
7115	G. F. Brown	393	Fulham	112	1½ " 40 "	"
7756	D. Nicholls	560	Holborn	112	1½ " 40 "	M. Marine.
7583	H. Allen	297	Mile End... ..	106	1 mile 369 yards	Still on board.
6957	W. Bass	319	St. Marylebone	103	1 " 300 "	"
7422	G. Riches	418	West Ham	100	1 " 240 "	"
6485	E. Carr	415	Whitechapel	98	1 " 200 "	M. Marine.
7341	F. Chitty	494	Kingston	96	1 " 160 "	"
7454	J. Gilend	453	Poplar	95	1 " 140 "	Still on board.
7430	W. Warr	120	Bedford	94	1 " 120 "	Royal Navy.
7413	J. Warricker	502	St. Saviour's	92	1 " 80 "	Still on board.
7273	G. Westlake	53	Islington	92	1 " 80 "	"
7765	W. Woodman	136	Lewisham	90	1 " 40 "	"
6993	R. Pool	178	Greenwich	88	1 "	Royal Navy.
7028	J. Dwyer	122	City of London	88	1 "	Still on Board.
7778	C. Lovegrove	269	Fulham	84	¾ " 360 yards	Union.

This year the prizes were awarded to the boys who swam the longest distance in one hour, and the following is the list of prize winners:—

1st Prize	... W. Ehm	Silver Watch, presented by Ship Committee.
2nd "	... G. F. Brown	Silver Medal, presented by Mr. Joseph Walton, Medallist.
3rd "	... D. Nicholls	} Allowed by Committee.
4th "	... H. Allen	
5th "	... W. Bass	
6th "	... G. Riches	
7th "	... E. Carr	

Number of boys who could not swim, 1st January, 1901 80
 Number of boys admitted in 1901 413

Total ... 493

TABLE X.—GYMNASTIC COMPETITION AND PRIZE LIST.

No. on Ship's Books.	Name.	No. on Watch Bill.	Union or Parish.	No. of Marks obtained.	Prizes.	Destination.
7181	G. Gentry	395	Wandsworth	73	Silver watch* ...	Friends.
7100	T. Illing	185	St. Olave's	68	15s.	Mercantile Marine.
7304	A. Archer	372	Greenwich	68	10s.	Still on board.
7101	J. Butler	430	St. Olave's	65	7s. 6d.	Royal Navy.
7330	E. Jackson	65	Holborn	63	5s.	Still on board.
7083	R. Beard	446	Camberwell	62	2s. 6d.	"

* Kindly given by James Brown, Esq.

TABLE XI.—AMBULANCE COMPETITION AND PRIZE LIST.

		s. d.		s. d.	
Re-examination ...	(Walter Edey)	5 0	First examination ...	(Frederick Barber)	2 6
"	(Albert Watson)	5 0	"	(Edward Hurley)	2 6
First examination ...	(William A. Baker)	4 0	"	(Arthur Stockwell)	2 0
"	(Albert John Henry)	4 0	"	(Alfred Reid)	2 0
"	(James Butler)	3 6	"	(Arthur S. Roberts)	2 0
"	(Oliver Oldfield)	3 6	"	(William J. Davis)	4 0

TABLE XII.—PARTICULARS OF OLD BOYS WHO HAVE VISITED THE "EXMOUTH" AND OF OTHERS OF WHOM INFORMATION HAS BEEN OBTAINED DURING 1901.

No.	Name.	No. on Ship's Books.	Union or Parish.	Date when heard of, or visited ship.	Reported by	Remarks.
1	P. Cripps... ..	5024	Camberwell	5 Jan.	Visited ship. ...	Doing very well in the army as a bandsman.
2	F. Phillips	5553	Kensington	6 "	"	Doing very well in the mercantile marine.
3	J. Smallbone	5873	"	9 "	"	Doing very well in royal navy as a bluejacket.
4	F. Kenioard	7185	Lambeth	10 "	"	Doing very well in the army as a band boy.
5	F. Balm	6806	Mile End	10 "	"	
6	F. Green	6560	Hackney	20 "	"	Doing very well in mercantile marine.
7	H. Aldrick	6563	Islington	23 "	"	
8	L. Rowatt	6371	Kensington	24 "	"	Doing very well in the mercantile marine, "Yarrowonga."
9	V. Sparrow	6637	St. George's	30 "	"	Doing very well in mercantile marine.
10	V. Pratt	3188	Mile End... ..	2 Feb.	"	Doing very well; getting a fair living on shore.
11	T. Bevan	6442	Bethnal Green	3 "	"	Doing very well in mercantile marine.
12	W. Gibson	6248	Maidstone	16 "	"	
13	G. Twitchell	6143	Southwark	16 "	"	Doing very well in army as a handboy.
14	G. Hoperoft	6240	Lambeth	16 "	"	Doing very well on shore.
15	W. Hall	6671	St. George's	17 "	"	Doing very well in royal navy as domestic.
16	J. Tucker	5700	Woolwich	17 "	"	Doing very well working in Woolwich Arsenal.
17	H. Threader	5054	"	25 "	"	Doing very well in royal navy as a bluejacket.
18	J. Slade	6493	Whitechapel	4 Mar.	"	Doing very well in the army as bugler.
19	J. Moore	5140	Fulham	9 "	"	Doing very well in s.s. "Orizaba."
20	J. Field	5731	St. Marylebone	9 "	"	
21	G. Willshire	5516	Bedford	10 "	"	Doing very well in mercantile marine.
22	J. Holland	6714	Strood	20 "	"	Doing very well in the s.s. "Montana."
23	W. Mills	7113	Greenwich	21 "	"	Doing very well in army as a band boy.
24	J. Slade	6493	Whitechapel	21 "	"	
25	A. Walters	5827	Strand	24 "	"	Doing very well in mercantile marine.
26	G. Willshire	5516	Bedford	24 "	"	
27	A. Stiff	5795	Strood	24 "	"	Doing very well in royal navy as a bluejacket.
28	H. Hopkins	4724	Lewisham	30 "	"	
29	T. Perry	4342	Mile End	3 Apl.	"	Doing very well in mercantile marine.
30	E. Driscoll	5479	St. George's	5 "	"	Doing very well in army as a bugler; just home from the front.
31	W. Hall	6671	"	5 "	"	Doing very well in navy as a domestic.
32	J. Barrow	3922	St. Marylebone	5 "	"	Doing very well in mercantile marine.
33	F. Leon	6322	Medway	5 "	"	
34	R. Lawler	5943	Woolwich	5 "	"	Doing very well in royal navy as a signalman.
35	T. Rawson	5925	Westminster	7 "	"	Doing very well in Royal Artillery.
36	W. Scrivens	5206	Poplar	8 "	"	Doing very well in candle factory.
37	W. Johnson	5475	Lambeth	8 "	"	Doing very well as a porter.
38	E. Driscoll	5479	St. George's	8 "	"	Doing well in the army as a bugler.
39	W. Street	6764	Epsom	8 "	"	Doing very well in the army as a band boy.
40	J. H. Treble	6230	Lambeth	8 "	"	Doing very well in royal navy as domestic.
41	G. Willsher	5516	Bedford	8 "	"	Doing very well on shore as a waiter.
42	B. Carter	5846	Fulham	8 "	"	Doing very well in navy as a bluejacket.
43	C. Lowe	7045	Lewisham	8 "	"	Doing very well in draper's shop.
4	W. Kitson	6417	Holborn	8 "	"	Doing very well in army as a band boy.

No.	Name.	No. on Ship's Books.	Union or Parish.	Date when heard of, or visited ship.	Reported by	Remarks.
45	P. Bowers ...	4898	St. Pancras ...	8 Apl.	Visited ship ...	Doing very well on shore as a grocer.
46	A. Hofenan ...	4409	Whitechapel ...	8 "	"	Doing very well on shore as a stoker.
47	G. Hutchinson ...	958	Mile End ...	8 "	"	Doing very well in a coffee shop.
48	E. Stoddart ...	6334	Hackney ...	8 "	"	Doing very well in royal navy as a domestic.
49	J. Stygall ...	6184	Wandsworth ...	8 "	"	Doing very well on shore in a laundry.
50	E. Deering ...	4294	Islington ...	8 "	"	Doing very well on shore as a bookbinder.
51	A. Shillam ...	5710	Southwark ...	8 "	"	Doing very well on shore as a valet.
52	F. Ellins ...	4929	Lewisham ...	8 "	"	Doing very well on shore as a plumber.
53	J. Rolfe ...	6368	Wandsworth ...	8 "	"	Doing very well on shore as a baker.
54	D. Thorne ...	6460	St. Pancras ...	8 "	"	Doing very well on shore as a musician.
55	C. Ward ...	4725	St. Marylebone ...	8 "	"	Doing very well in the army as a band boy.
56	J. Hansen ...	7156	Stepney ...	8 "	"	
57	W. Mills ...	7113	Greenwich ...	8 "	"	Doing very well in royal navy as a bluejacket.
58	J. Knopp... ..	7018	West Ham ...	8 "	"	
59	T. Fellows ...	5015	Camberwell ...	8 "	"	Doing very well on shore as an engineer.
60	J. Wale ...	4250	City of London ...	8 "	"	
61	F. Clarke ...	5743	Stepney ...	8 "	"	Doing very well in the army as a band boy.
62	S. Hallet ...	6228	St. Pancras ...	10 "	"	Doing very well in royal navy as a domestic.
63	C. Back ...	6358	St. Saviour's ...	14 "	"	Doing very well on shore as a waiter.
64	T. Thorne ...	6462	St. Pancras ...	14 "	"	
65	W. Hall ...	6209	Camberwell ...	16 "	"	Doing very well in mercantile marine, s.s. "Marquette."
66	J. Hall ...	5900	Mile End ...	17 "	"	Doing very well indeed in the royal navy as bluejacket.
67	M. Denison ...	4235	Lambeth ...	17 "	"	Doing very well on shore as a clerk.
68	C. Marriott ...	5122	"	21 "	"	Doing very well on shore as a carman.
69	W. Baldwin ...	6861	Kensington ...	21 "	"	Doing very well on shore as a waiter.
70	J. Tucker ...	5700	Woolwich ...	21 "	"	Doing very well on shore as a waiter in Woolwich Arsenal.
71	S. Tomlinson ...	6543	Bethnal Green ...	22 "	"	Doing very well in mercantile marine, s.s. "Galeka."
72	J. Dolan ...	5164	Chelsea ...	23 "	"	Doing very well in royal navy as domestic.
73	C. Gregory ...	6616	St. George's ...	24 "	"	
74	W. Vaus ...	6660	Bethnal Green ...	29 "	"	Doing very well in mercantile marine.
75	E. Ong ...	6326	Fulham ...	3 May	"	
76	G. Gourrist ...	Old	"Goliath" hoy ...	5 "	"	Doing very well in army as sergeant.
77	W. Bulton ...	5204	Camberwell ...	13 "	"	Doing well in army.
78	R. Lawler ...	5943	Woolwich ...	14 "	"	Doing very well in royal navy as signalman.
79	S. Lowman ...	7501	Poplar ...	15 "	"	Doing very well in the mercantile marine, "Minnehaha."
80	A. Etherington ...	6150	Lewisham ...	16 "	"	Doing very well on shore as waiter.
81	W. Baldwin ...	6861	Kensington ...	19 "	"	
82	J. Webb ...	6043	Holborn ...	19 "	"	Doing very well in the army, just home from South Africa.
83	H. Parnell ...	3811	Woolwich ...	21 "	"	
84	H. Dove ...	5767	Bethnal Green ...	21 "	"	Doing very well in royal navy as domestic.
85	R. Stead ...	6399	Greenwich ...	27 "	"	Doing very well in electric cable work.
86	W. Garrett ...	5899	St. George's, E. ...	27 "	"	Doing very well as a gas stoker.
87	H. Vaughan ...	6410	St. Pancras ...	27 "	"	Doing very well in wax factory.
88	J. Green ...	6560	Hackney ...	27 "	"	Doing very well as a carman.
89	J. Heath ...	5716	Lewisham ...	27 "	"	Doing well on shore at a tin works.
90	F. Box ...	6647	St. George's ...	27 "	"	Doing very well on shore as a messenger boy.
91	C. Atchinson ...	5768	Bethnal Green ...	27 "	"	Doing very well in mercantile marine.
92	W. South ...	5855	St. Saviour's ...	27 "	"	
93	J. Clark ...	5210	Holborn ...	27 "	"	Doing very well in royal navy as a bluejacket.
94	F. Berry ...	5801	Camberwell ...	27 "	"	Doing very well on shore in mineral works.
95	A. Bradley ...	5164	Woolwich ...	27 "	"	Doing very well on shore as a labourer.
96	Thompson ...	3618	"	2 Jun.	"	Doing very well in royal navy as a bluejacket.
97	G. Cobb ...	6559	Kingston... ..	2 "	"	Doing very well in mercantile marine as bugler.
98	W. Aldred ...	3326	Southwark ...	2 "	"	Doing very well in royal navy, 2nd class petty officer.
99	E. Skelton ...	5927	Medway ...	5 "	"	Doing very well in royal navy as ordinary seaman.
100	J. Green ...	5989	St. Marylebone ...	9 "	"	Doing very well in army as band boy.
101	S. Lowman ...	7501	Poplar ...	13 "	"	Doing very well in mercantile marine as bugler.
102	R. Miles ...	5866	Hackney ...	15 "	"	Doing very well in royal navy as bluejacket.
103	F. Liston... ..	5605	Poplar ...	19 "	"	
104	J. Goodman ...	6232	Hackney ...	23 "	"	Doing very well in mercantile marine.
105	J. Gardener ...	5754	"	23 "	"	Doing very well in royal navy as bluejacket.
106	J. Moore ...	5140	Fulham ...	24 "	"	Doing very well in mercantile marine, s.s. "Orizaba."
107	W. Williams ...	6577	Bloomsbury ...	30 "	"	Doing very well in royal navy as domestic.
108	D. Thorn... ..	6460	St. Pancras ...	30 "	"	Doing very well in mercantile marine.
109	S. Alston... ..	5890	Lambeth ...	2 July	"	
110	J. Pitfield ...	6530	St. Pancras ...	3 "	"	Doing very well in the royal navy as band boy.
111	S. Osborn ...	7290	Camberwell ...	3 "	"	Doing very well in royal navy as bluejacket.
112	A. Davis ...	6163	Holborn ...	4 "	"	Doing very well in royal navy as band boy.
113	S. F. Davis ...	6678	City of London ...	5 "	"	
114	A. Morton ...	6830	Lambeth ...	7 "	"	Doing very well in mercantile marine.

No.	Name.	No. on Ship's Books.	Union or Parish.	Date when heard of, or visited ship.	Reported by	Remarks.
115	J. Tyrrell ...	5986	Lewisham ...	7 July	Visited ship ...	Doing very well in mercantile marine.
116	G. Palmer ...	2101	St. Marylebone ...	7 "		Doing very well on shore as engineer.
117	P. Richards ...	7294	West Ham ...	8 "		Doing very well in royal navy as bandboy.
118	G. May ...	6129	St. Pancras ...	9 "		
119	S. Bryant ...	6525	Paddington ...	9 "		Doing very well in royal navy as bluejacket.
120	R. Wright ...	6312	St. George's ...	9 "		
121	A. Stiff ...	5795	Strood ...	10 "		Doing very well in mercantile marine.
122	W. Holmwood ...	5762	Southwark ...	11 "		Doing very well on shore as a carman.
123	V. Sparrow ...	6637	St. George's ...	11 "		Doing very well in mercantile marine.
124	W. J. Startup ...	7125	Lewisham ...	12 "		Doing very well in royal navy as band boy.
125	F. Stears ...	6385	Mile End ...	12 "		Doing very well in the army.
126	T. Smith ...	6054	Bromley ...	12 "		Doing very well in the royal navy.
127	R. Matten ...	4438	Lewisham ...	13 "		Doing very well in royal navy as a band boy.
128	F. Monk ...	7048	West Ham ...	14 "		
129	R. Lawler ...	5943	Woolwich ...	14 "	Doing very well in royal navy as signalman.	
130	H. Moore ...	7020	West Ham ...	14 "	Doing very well in royal navy as bluejacket.	
131	A. Peterkin ...	2142	St. Pancras ...	15 "		
132	T. Bevan ...	6663	Bethnal Green ...	15 "	Doing very well in mercantile marine.	
133	C. Armstrong ...	7245	"	15 "		
134	W. South ...	5855	St. Saviour's ...	17 "	Doing very well in mercantile marine, s.s. "Basil."	
135	H. J. Targett ...	5816	Holborn ...	17 "		
136	G. Shelsher ...	1028	Bethnal Green ...	20 "	Doing very well in royal navy as bluejacket.	
137	S. Watson ...	7212	Lambeth ...	21 "		
138	W. Walsh ...	5850	Poplar ...	26 "	Doing very well in the army.	
139	A. Ibberson ...	5720	Kensington ...	27 "	Doing very well in mercantile marine as a bugler.	
140	A. Dow ...	6688	St. Olave's ...	28 "	Doing very well in the army as band boy.	
141	J. Lacey ...	6359	St. Saviour's ...	28 "	Doing very well in mercantile marine as ordinary seaman.	
142	E. Bazell ...	7316	Fulham ...	30 "	Doing very well in mercantile marine as bugler.	
143	F. Higgs ...	6960	Lambeth ...	3 Aug.	Doing very well in the army as band boy.	
144	J. Smith ...	5685	"	4 "	Doing very well on shore as electrician.	
145	R. Britton ...	6773	Paddington ...	4 "	Doing very well in army as band boy.	
146	J. Norton ...	6345	Holborn ...	4 "	Doing very well in royal navy as domestic.	
147	J. Williams ...	4963	Bromley ...	5 "	Doing very well on shore as butcher.	
148	F. Mayes ...	6742	Shoreditch ...	5 "	Doing very well on shore as waiter.	
149	J. Smith ...	5685	Lambeth ...	5 "	Doing very well on shore as electrician.	
150	J. Green ...	6560	Hackney ...	5 "	Doing very well on shore as carman.	
151	S. Poole ...	5705	Camberwell ...	5 "	Doing very well on shore as plumber.	
152	G. Wilkinson ...	6120	St. Pancras ...	5 "	Doing very well on shore as servant.	
153	E. Boniface ...	6992	Greenwich ...	5 "	Doing very well on shore as bricklayer.	
154	H. Varnham ...	6410	St. Pancras ...	5 "	Doing very well on shore as fruiterer.	
155	W. Lygo ...	5098	St. Saviour's ...	5 "	Doing very well on shore working in a rubber factory.	
156	H. Trebbie ...	6230	Lambeth ...	5 "	Doing very well in royal navy as domestic.	
157	J. Cross ...	5408	St. Saviour's ...	5 "	Doing very well on shore as waiter.	
158	R. Stead ...	6309	Greenwich ...	5 "	Doing very well on shore in candle factory.	
159	J. Norton ...	6345	Holborn ...	5 "	Doing very well in royal navy as domestic.	
160	A. Smith ...	5976	Hackney ...	5 "	Doing very well on shore as engineer's assistant.	
161	J. Dempsey ...	5115	Woolwich ...	5 "	Doing very well on shore as a barber.	
162	A. Smith ...	4014	Lewisham ...	6 "	Doing very well in the army, Welsh Regiment.	
163	A. Pywell ...	4949	"	18 "	Doing very in royal navy, 2nd class petty officer.	
164	W. Reeve ...	7411	Wandsworth ...	18 "	Doing very well in royal navy as domestic.	
165	A. Shield ...	5136	Bethnal Green ...	18 "	Doing very well in royal navy as bluejacket.	
166	J. Norfield ...	5492	Lambeth ...	18 "		
167	G. Bull ...	6909	Poplar ...	18 "	Doing very well in mercantile marine as ordinary seaman.	
168	— Bettis ...	Old "G	oliath" Boy ...	21 "	Doing very well on shore as a clerk.	
169	J. Wale ...	4250	City of London ...	21 "		
170	L. Bravery ...	5464	Fulham ...	22 "	Doing very well in mercantile marine.	
171	W. Hinton ...	6564	Hammersmith ...	25 "		
172	G. Hearne ...	6685	Westminster ...	25 "	Doing very well on shore as a tailor.	
173	F. Elliott ...	6685	Greenwich ...	25 "	Doing very well in mercantile marine.	
174	W. Raynard ...	4331	"	30 "	Doing very well in royal navy as bluejacket.	
175	A. Ibberson ...	5720	Kensington ...	31 "	Doing very well in mercantile marine.	
176	T. Perry ...	4342	Mile End ...	1 Sep.		
177	W. Hall ...	6671	St. George's ...	1 "	Doing very well in royal navy as domestic.	
178	T. Rawson ...	5925	Westminster ...	1 "		
179	W. Moreley ...	6113	Chelsea ...	1 "	Doing very well in the army.	
180	C. Olden ...	4345	Kensington ...	2 "		
181	S. Steward ...	6534	Lewisham ...	2 "	Doing very well in royal navy as a band boy.	
182	C. Allen ...	5190	Southwark ...	2 "		
183	C. Simmons ...	6123	St. Pancras ...	4 "	Doing very well in royal navy as domestic.	
184	J. Hoffman ...	5828	Strand ...	8 "		
185	T. Bishop ...	6284	Southwark ...	8 "	Doing very well in royal navy as a band boy.	
186	F. Box ...	6647	St. George's ...	8 "	Doing very well on shore as a messenger.	
187	A. Pywell ...	4949	Lewisham ...	15 "	Doing very well in royal navy as a bluejacket.	

No.	Name.	No. on Ship's Books.	Union or Parish.	Date when heard of, or visited ship.	Reported by	Remarks.
188	G. Pywell ...	4749	Greenwich ...	15 Sep.	Visited ship ...	Doing very well in royal navy as a bluejacket.
189	J. H. K. M. Allen	7313	Bloomsbury ...	17 "		Doing very well in mercantile marine.
190	T. Gibbs ...	6740	St. George's ...	18 "		Doing very well in mercantile marine.
191	J. Seddon ...	5022	Southwark ...	20 "		Doing very well in royal navy.
192	R. James ...	5935	Lewisham ...	21 "		Doing very well in mercantile marine.
193	E. Keen ...	6441	Bethnal Green	22 "		Doing very well on shore as a labourer.
194	S. Smith ...	6162	Holborn ...	22 "		Doing very well.
195	A. Allen ...	2267	St. Olave's ...	3 Oct.		Doing very well in royal navy as bluejacket.
196	A. West ...	6247	Wandsworth ...	3 "		Doing very well in royal navy as signalman.
197	R. Lawler ...	4943	Woolwich ...	5 "		Doing very well in royal navy as bluejacket.
198	R. Want ...	6818	Greenwich ...	5 "		Doing very well in royal navy as domestic.
199	W. Williams ...	6577	Bloomsbury ...	13 "		Doing very well indeed in mercantile marine.
200	G. Williams ...	4963	Bromley ...	13 "		Doing very well in royal navy as bluejacket.
201	J. H. Field ...	5731	St. Marylebone	14 "		Doing very well in royal navy as bluejacket.
202	E. J. Pike ...	3906	Woolwich ...	14 "		Doing very well in mercantile marine.
203	— Scarr ...	Old "G	ollath " Boy ...	15 "		Doing very well indeed in mercantile marine.
204	H. Roberts ...	5670	Southwark ...	19 "		Doing very well in royal navy as bluejacket.
205	F. Coker ...	5570	Brentford ...	27 "		Doing very well in mercantile marine.
206	W. Lilley ...	6139	Southwark ...	27 "		Doing very well indeed in royal navy as bluejacket.
207	H. Hawkes ...	1207	Chelsea ...	31 "		Doing very well in the army as a band boy.
208	W. Ryder ...	4936	St. Pancras ...	5 Nov.		Doing very well indeed in the royal navy as warrant officer.
209	J. Spain ...	6849	Maidstone ...	22 "		Doing very well in army as a bandsman.
210	A. Stevens ...	6142	Southwark ...	25 "		Doing very well in mercantile marine.
211	H. J. Targett ...	5816	Holborn ...	25 "		Doing very well in mercantile marine.
212	T. Penny ...	4342	Mill End ...	27 "		Doing very well on shore as a carman.
213	W. Pearton ...	4515	Fulham ...	1 Dec.	Doing very well indeed in the royal navy.	
214	E. Carr ...	6485	Whitechapel ...	1 "	Doing very well indeed in mercantile marine.	
215	H. Chapman ...	4307	St. Pancras ...	16 "	Doing very well in the army as a bandsman.	
216	G. Fysh ...	6561	Wandsworth ...	21 "	Doing very well in royal navy as a domestic.	
217	F. Hammond ...	6515	Camberwell ...	23 "	Doing very well in mercantile marine as ordinary seaman.	
218	W. Bushnell ...	7057	" ...	23 "	Doing very well in the army as a bandboy.	
219	C. Beddingham	6944	Southwark ...	23 "	Doing very well in royal navy as a bandboy.	
220	G. Beddingham	6945	" ...	23 "	Doing very well indeed in royal navy as a bluejacket.	
221	S. Gould ...	5499	St. Olave's ...	24 "	Doing very well indeed in royal navy as a bluejacket.	
222	S. Stuart ...	6534	Lewisham ...	27 "	Doing very well in royal navy as a domestic.	
223	H. Brock ...	6473	City of London	27 "	Doing very well indeed in royal navy as a bluejacket.	
224	J. Watson ...	6378	Lewisham ...	27 "	Doing very well indeed in royal navy as a bluejacket.	
225	R. Jenns ...	5935	" ...	30 "	Doing very well indeed in royal navy as a bluejacket.	

MEDICAL SUPPLEMENT

TO THE

REPORT OF THE STATISTICAL COMMITTEE

FOR THE

YEAR 1901.

EDITED BY

F. M. TURNER, M.D.,

AND

H. E. CUFF, M.D., F.R.C.S.

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COMPLICATIONS AND CO-EXISTENT INFECTIOUS DISEASES, 1901.

The following tables are compiled from cases completed during 1901:—

TABLE I.—*Incidence of Complications amongst 14,143 cases of Scarlet Fever completed during 1901.*

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain.	Grove.	South-Eastern.	Park.	Brook.	Northern.	Gore Farm.	Total.	Percentage Incidence.
Total cases ...	181	2,097	2,050	1,469	1,136	2,245	144	919	1,065	1,337	Convalescent cases. 3,729 1,156		14,143	...
Otitis ...	28	288	211	185	190	191	33	131	371	153	125	44	1,950	13.78
Albuminuria*	26	88	100	79	104	268	8	34	86	118	73	8	992	7.01
Adenitis (of convalescence)†	15	99	126	59	133	163	10	74	206	66	62	15	1,028	7.26
Suppurative adenitis (included in above)...	10	57	14	21	26	35	...	21	48	26	10	...	268	1.89
Rheumatism ...	3	125	37	30	84	90	2	26	30	54	12	12	505	3.53
Nephritis ...	5	119	66	29	61	49	7	56	107	54	11	2	560	4.00
Tonsillitis ...	9	53	5	13	46	8	...	5	25	7	49	25	245	1.73
Stomatitis ...	...	18	3	11	21	15	1	8	5	4	12	...	98	0.69
Broncho-pneumonia ...	...	4	16	25	11	14	1	8	28	6	3	...	116	0.82
Bronchitis ...	2	21	7	12	19	18	...	12	21	13	2	4	131	0.93
Abscess (other than mastoid or glandular)...	9	12	11	7	13	10	1	8	25	22	4	27	149	1.05
Mastoid abscess‡	1	10	5	7	6	9	5	7	17	5	1	3	76	0.53
Ophthalmia ...	3	20	5	11	20	12	...	1	17	15	6	14	124	0.88
Relapse of disease	...	14	11	21	15	23	1	9	3	18	30	9	154	1.09
Pneumonia ...	1	18	5	2	5	2	3	...	6	6	3	...	51	0.36
Endocarditis ...	...	18	1	9	1	6	2	...	53	24	1	1	116	0.82
Cervical cellulitis ...	1	4	1	4	4	4	...	9	4	1	...	...	32	0.23
Laryngitis ...	1	4	...	...	1	1	2	3	4	1	2	1	20	0.14
Pleurisy ...	...	2	3	...	3	4	...	2	1	1	1	...	17	0.12
Corneal ulcer ...	...	2	...	...	...	1	1	1	4	...	1	...	10	0.07
Pericarditis ...	...	4	...	...	2	2	...	...	3	4	1	1	17	0.12
Empyema ...	...	3	...	2	1	1	...	2	...	...	1	...	10	0.07
Pyæmia ...	...	2	...	...	...	...	1	3	3	1	...	...	10	0.07
Meningitis ...	...	...	...	...	2	1	...	3	2	2	...	...	10	0.07
Diphtheria ...	6	20	6	29	5	47	9	17	44	1	109	75	382	2.70
Chickenpox ...	1	21	65	29	26	30	...	10	...	1	33	17	233	1.65
Measles ...	9	25	14	9	6	16	1	28	30	15	...	...	153	1.08
Rötheln ...	...	22	12	15	12	20	...	...	10	...	17	9	117	0.83
Whooping cough	...	11	15	17	4	5	...	...	...	...	10	1	68	0.44
Mumps ...	...	3	...	...	...	...	1	...	...	...	...	...	4	0.03
Erysipelas ...	...	1	1	1	...	1	...	...	1	2	...	1	8	0.06
Tuberculosis ...	...	2	2	1	3	...	...	...	...	...	...	...	8	0.06
Enteric fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...

* Albuminuria excludes cases of nephritis which are returned separately. All other cases are included in which albuminuria was observed, even if only on one occasion.
 † Adenitis of convalescence excludes adenitis occurring in the acute stage of the disease
 ‡ Mastoid abscess includes all cases of suppuration in or about the mastoid
 § Specific infectious diseases co-existent on admission are returned on Table IV

TABLE II.—Incidence of Complications amongst 7,690 cases of Diphtheria completed during 1901.

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain.	Grove.	South-Eastern.	Park.	Brook.	Northern.	Gore Farm.	Total.	Percentage Incidence.
Total cases	1,484	355	894	743	493	97	1,227	740	845	812	Convalescent cases. 593 88		7,690	...
Albuminuria*	756	90	208	211	95	32	282	195	38	315	4	2	2,228	29·00
Paralysis	203	41	102	123	44	29	101	179	102	211	18	...	1,153	15·00
Relapse of disease	33	3	5	5	33	4	23	15	7	23	1	10	162	2·11
Broncho-pneumonia	14	2	6	6	10	...	5	7	18	2	...	3	73	0·95
Otitis	175	9	37	38	32	5	26	37	47	37	4	4	451	5·87
Pneumonia	11	2	...	2	1	...	3	5	1	1	...	...	26	0·34
Nephritis	3	2	7	3	2	...	7	10	4	1	...	...	39	0·51
Scarlet fever	53	10	16	17	29	15	37	40	36	13	23	14	303	3·94
Chickenpox	18	1	18	8	5	3	10	5	...	2	5	3	78	1·01
Measles	14	...	...	...	10	...	7	12	7	4	...	7	61	0·79
Whooping cough	2	...	9	5	6	...	2	1	...	1	...	9	35	0·45
Rötheln	1	...	...	2	...	...	...	1	8	...	...	...	12	0·16
Tuberculosis ... ..	...	...	1	...	3	...	...	...	...	...	...	...	4	0·05
Enteric fever ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Erysipelas ... ..	...	...	...	1	...	...	...	...	...	...	...	...	1	0·01
<i>Complications referable to Antitoxic Serum amongst 6,495 cases of Diphtheria treated with it.</i>														
Total cases	1,449	296	629	732	352	85	986	643	600	723	...	...	6,495	...
Rash	607	85	118	320	176	46	657	230	161	432	...	1	2,833	43·6
Joint-pains	56	9	13	34	32	5	76	15	8	57	...	...	305	4·7
Abscess	4	2	5	2	5	2	4	6	2	13	...	...	45	0·7

TABLE III.—Incidence of Complications amongst 1,336 cases of Enteric Fever completed during 1901.

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Park.	Brook.	Total.	Percentage Incidence.
Total cases	165	31	246	134	73	227	108	168	190	1,336	...
Relapse of disease	21	1	5	6	8	35	11	23	22	132	9·90
Hæmorrhage	7	1	21	10	9	15	10	7	25	105	7·86
Abscesses	15	2	...	1	3	15	7	10	13	69	5·16
Perforation	3	1	...	...	...	5	6	7	4	37	2·77
Pneumonia	4	1	...	4	3	1	3	3	7	33	2·47
Peritonitis (non-perforative)	3	...	...	2	1	...	...	1	...	12	0·90
Periostitis	2	...	...	2	1	2	...	2	4	16	1·20
Pleurisy	1	...	...	2	...	6	4	1	1	15	1·12
Phlebitis	3	1	...	5	...	7	4	1	4	27	2·02
Dementia (post-febrile) ... ..	...	...	...	...	...	...	...	4	1	9	0·67
Broncho-pneumonia ... ..	...	...	...	6	...	...	1	1	2	13	0·97
Parotitis	2	...	1	...	1	3	1	3	1	12	0·90
Laryngitis ... ..	...	...	...	...	...	...	...	...	...	...	...
Scarlet fever ... ..	...	...	...	...	...	...	2	...	1	3	0·22
Diphtheria ... ..	...	...	...	...	...	...	...	...	...	...	...

* Albuminuria excludes cases of nephritis which are returned separately, but includes all other cases in which albuminuria was observed, even if only on one occasion.

TABLE IV.—Number of Cases in which two separate Infectious Diseases were co-existent at the time of admission during 1901.

CO-EXISTENT INFECTIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain.	Grove.	South-Eastern.	Park.	Brook.	Total.
Scarlet fever and diphtheria	35	8	14	13	22	11	2	20	22	17	164
Scarlet fever and chickenpox	3	9	8	7	8	8	...	3	3	11	60
Scarlet fever and whooping cough	...	15	7	6	4	17	...	3	11	9	71
Scarlet fever and measles	2	4	1	3	3	...	...	3	17	4	37
Scarlet fever and tuberculosis	...	...	...	...	2	...	...	...	3	5	10
Scarlet fever and r6theln	...	...	1	1	2	...	...	...	4	...	8
Scarlet fever and enteric fever	...	...	1	...	...	...	...	...	3	2	6
Scarlet fever and mumps	...	...	...	...	...	...	...	...	...	...	...
Diphtheria and measles	15	2	...	2	6	...	2	13	17	4	61
Diphtheria and chickenpox	4	...	...	1	...	...	2	5	3	5	20
Diphtheria and whooping cough	3	...	8	3	1	...	8	8	2	3	36
Diphtheria and tuberculosis	...	...	...	...	1	...	1	...	4	1	7
Diphtheria and enteric fever	...	...	...	...	...	...	...	1	1	...	2
Diphtheria and r6theln	...	...	...	...	...	...	...	...	2	...	2
Diphtheria and mumps	...	...	...	...	...	...	...	...	...	...	...
Enteric fever and tuberculosis	...	...	...	...	...	...	...	...	...	...	...
Enteric fever and whooping cough	...	...	...	...	...	...	...	...	...	...	...
Total ... ..	...	...	...	...	...	...	...	...	...	...	484
Total number of scarlet fever, diphtheria, and enteric fever cases admitted	...	...	...	...	...	...	...	...	...	...	23,310
Percentage in which two diseases were present	...	...	...	...	...	...	...	...	...	...	2.07

NOTE.—In the preparation of the general tables cases of mixed infection are in each instance returned under the head of the first-mentioned of the two diseases in the above list. Thus, cases suffering from both scarlet fever and diphtheria are returned under scarlet fever.

POST-SCARLATINAL DIPHTHERIA, 1901.

The following tables have been compiled from cases completed during the year 1901 :—

EASTERN HOSPITAL.—TABLE I.

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	L. L.	F	2 1/2	Courage	Jan. 27/01	Feb. 10/01	10	Laryngeal	R ...	Antitoxin.
2	N. P.	F	2	"	May 18 "	June 12 "	22	Faucial & Laryngeal	... *D	"
3	P.O.K.	F	8	Fortitude	" 6 "	July 1 "	54	Faucial and Nasal	R ...	"
4	C. F.	F	5	Courage	July 26 "	Sept. 4 "	38	Nasal	R ...	No antitoxin.
5	D. P.	F	9	"	Aug. 25 "	" 6 "	11	Faucial and Nasal	R ...	Antitoxin.
6	A. M.	M	6	"	July 25 "	" 8 "	39	" "	R ..	No antitoxin.

* Death in this case was due to measles.

NORTH-EASTERN HOSPITAL.—TABLE II.

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	K. H.	M	11	20	Nov. 8/00	Nov. 26/00	14	Faucial ...	R ...	No antitoxin.
2	A. L.	M	7	20	" 16 "	Dec. 7 "	18	" ...	R ...	"
3	H. S.	M	8	13	" 12 "	Jan. 1/01	49	" ...	R ...	Antitoxin.
4	P. W.	M	5	13	" 28 "	" 17 "	47	" ...	R ...	No antitoxin.
5	C. P.	F	5	11	Dec. 2 "	Feb. 3 "	60	Faucial & Laryngeal	R ...	Antitoxin.
6	F. H.	F	3	11	" 12 "	" 7 "	55	Faucial ...	R ...	No antitoxin.
7	F. C.	F	4	11	" 8 "	" 9 "	59	" ...	R ...	"
8	F. H.	F	4	11	" 6 "	" 12 "	63	" ...	R ...	Antitoxin.
9	E. T.	F	8	23	Feb. 1/01	Mar. 11 "	35	Nasal ...	R ...	No antitoxin.
10	A. G.	M	7	19	Jan. 13 "	" 16 "	50	" ...	R ...	"
11	H. L.	M	8	15	" 12 "	Apr. 2 "	77	Faucial ...	R ...	Antitoxin.
12	F. R.	M	6	15	May 13 "	June 4 "	20	Nasal ...	R ...	No antitoxin.
13	A. S.	F	9	9	" 21 "	" 1 "	7	" ...	R ...	"
14	A. S.	M	1	23	June 8 "	July 6 "	23	Faucial ...	*D	Antitoxin.
15	A. C.	M	2	13	" 22 "	" 29 "	34	" ...	R ...	"
16	G. A.	M	5	13	July 16 "	Sept. 25 "	70	" ...	R ...	No antitoxin.
17	S. H.	M	3	13	" 10 "	" 21 "	72	" ...	R ...	Antitoxin.
18	A. H.	M	5	13	Sept. 11 "	Nov. 14 "	63	" ...	R ...	"
19	L. B.	F	7	3	Oct. 9 "	" 10 "	31	" ...	R ...	"
20	W. F.	M	5	14	Nov. 3 "	" 17 "	11	" ...	R ...	"

NORTH-WESTERN HOSPITAL.—TABLE III.

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	A. M.	M	4	6	Jan. 12/01	Feb. 13/01	27	Laryngeal & Faucial	R ...	Antitoxin.
2	C. A. R.	M	12	3	Feb. 21 "	Mar. 6 "	9	Laryngeal ...	R ...	"
3	H. W.	M	3 $\frac{1}{2}$	F	Mar. 10 "	" 18 "	6	Faucial ...	D ...	"
4	E. B.	F	4 $\frac{1}{2}$	C	May 4 "	May 28 "	21	" ...	D ...	"
5	R. L.	M	5	A	June 14 "	June 18 "	4	" ...	R ...	"
6	J. S.	F	3	1	" 28 "	Aug. 15 "	45	" ...	R ...	"
7	A. S.	F	6 $\frac{1}{2}$	C	" 27 "	July 13 "	2	Nasal ...	D ...	"
8	F. M.	M	3	4	Aug. 3 "	Sept. 2 "	27	Laryngeal ...	D ...	"
9	A. L. S.	F	9	C	" 16 "	Aug. 21 "	8	Faucial ...	R ...	"
10	G. M.	M	2 $\frac{1}{2}$	D	" 21 "	Nov. 5 "	75	" ...	R ...	"
11	A. C.	F	6	F	" 17 "	Oct. 28 "	56	Faucial, Nasal, and Laryngeal	R ...	"
12	P. K.	M	2 $\frac{1}{2}$	D	Sept. 7 "	" 30 "	51	Faucial and Nasal	R ...	"
13	T. S.	M	7	7	" 20 "	Sept. 28 "	7	Faucial ...	R ...	"

WESTERN HOSPITAL.—TABLE IV.

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	D. B.	F	2	9	Nov. 9/00	Dec. 29/00	39	Faucial and Nasal...	R ...	Antitoxin.
2	M. C.	F	20	12	" 7 "	Nov. 25 "	15	Faucial ...	R ...	"
3	D. H.	F	9	9	" 24 "	" 30 "	4	Faucial and Nasal ...	R ...	"
4	R. H.	F	3 $\frac{1}{2}$	9	" 23 "	Dec. 27 "	31	Faucial ...	R ...	"
5	L. B.	F	3 $\frac{1}{2}$	9	" 29 "	Jan. 5/01	37	Faucial & Laryngeal	D ...	"
6	M. M.	F	2	9	" 29 "	Dec. 15/00	13	Faucial ...	R ...	"
7	M. S.	F	9	9	" 29 "	" 16 "	16	" ...	R ...	"
8	M. B.	F	5	9	Dec. 3 "	" 29 "	25	" ...	R ...	"
9	A. H.	M	1 $\frac{1}{2}$	9	" 3 "	" 27 "	23	" ...	R ...	"
10	E. L.	M	6	8	" 4 "	Feb. 23/01	78	" ...	R ...	"
11	F. H.	F	7	9	" 11 "	" 10 "	60	" ...	R ...	"
12	M. F.	F	12	9	Jan. 17/01	Mar. 17 "	58	" ...	R ...	"
13	A. B.	M	7	8	" 21 "	" 15 "	52	" ...	R ...	"
14	D. H.	F	3	9	" 22 "	" 30 "	65	" ...	R ...	"
15	H. F.	M	8	8	Feb. 9 "	" 28 "	44	Faucial and Nasal...	R ...	"
16	R. W.	F	4	4	Mar. 9 "	" 20 "	8	Faucial ...	R ...	"
17	R. M.	M	7	10	Apr. 23 "	May 3 "	6	" ...	R ...	"
18	P. H.	M	7	10	May 8 "	June 8 "	28	" ...	R ...	"
19	E. D.	F	6	3	June 10 "	" 18 "	4	" ...	R ...	"
20	M. F.	M	1 $\frac{1}{2}$	3	July 19 "	Sept. 18 "	58	" ...	R ...	"
21	J. B.	M	2	4	Sept. 14 "	Nov. 14 "	61	" ...	R ...	"

* Died of lobar pneumonia a month after onset of diphtheria.

SOUTH-WESTERN HOSPITAL.—TABLE V.

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*	M. S.	M	1 $\frac{1}{2}$	E 1	Dec. 18/00	Jan. 12/01	21	Nasal and Laryngeal	... D	Antitoxin.
2	H. K.	F	21	F 1	Mar. 3/01	Mar. 18 "	13	Faucial & Laryngeal	R ...	No antitoxin.
3†	F. D.	M	5	C 1	June 26 "	July 12 "	16	Faucial	... D	Antitoxin.
4	E. C.	M	7	C 2	July 9 "	Sept. 17 "	68	"	R ...	No antitoxin.
5	N. S.	F	1 $\frac{1}{2}$	F 2	Oct. 20 "	Nov. 7 "	18	"	R ...	Antitoxin.

FOUNTAIN HOSPITAL.—TABLE VI.

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	D. S.	F	6	3	Oct. 15/00	Nov. 20/00	36	Faucial	R ...	Antitoxin.
2	M. H.	F	7	4	Nov. 7 "	Dec. 14 "	37	"	R ...	No antitoxin.
3	E. L. C.	F	3	3	" 7 "	Nov. 28 "	21	Nasal	R ...	Antitoxin.
4	W. E. J.	F	2	3	Oct. 28 "	Dec. 2 "	35	"	R ...	"
5	C. T.	M	3	3	Nov. 3 "	" 30 "	55	"	R ...	No antitoxin.
6	M. J. W.	F	8	7	" 24 "	" 10 "	14	Faucial	R ...	Antitoxin.
7	S. W.	F	2	4	" 12 "	" 20 "	36	Nasal	R ...	No antitoxin.
8	M. E. S.	F	6	4	" 8 "	" 22 "	44	"	R ...	Antitoxin.
9	L. A. V.	F	3	2	" 24 "	Jan. 7/01	41	"	R ...	"
10	P. H.	M	6	6	Dec. 11 "	Dec. 29/00	15	"	R ...	No antitoxin.
11	M. A. C.	F	12	7	Feb. 17/01	Mar. 7/01	17	"	D†	Antitoxin.
12	F. M. H.	F	5	7	Jan. 27 "	Feb. 28 "	30	"	R ...	"
13	H. W.	M	2	6	Dec. 5/00	" 18 "	73	"	R ...	"
14	B. S.	F	8	7	Jan. 22/01	Mar. 21 "	58	Faucial	R ...	"
15	A. C.	M	2	6	" 5 "	Feb. 7 "	34	Nasal	R ...	"
16	D. M.	F	5	2	Feb. 8 "	Apr. 16 "	67	"	R ...	No antitoxin.
17	A. G. G.	F	8	2	Nov. 28/00	" 14 "	155	Faucial	R ...	Antitoxin.
18	W. B.	F	5	2	Jan. 27/01	May 9 "	101	Nasal	R ...	No antitoxin.
19	J. C.	M	7	10	Mar. 11 "	" 7 "	57	Faucial	R ...	Antitoxin.
20	G. W.	M	9	10	Feb. 27 "	Apr. 30 "	59	"	R ...	"
21	E. T.	F	7	2	Mar. 23 "	" 17 "	24	Nasal	R ...	No antitoxin.
22	H. E. V.	M	3	3	May 5 "	June 15 "	39	"	R ...	"
23	M. G. S.	M	4	6	Feb. 2 "	May 3 "	87	"	R ...	"
24	D. O.	F	3	6	May 13 "	June 10 "	26	"	R ...	Antitoxin.
25	S. J. G.	M	3	3	" 1 "	" 11 "	40	"	R ...	No antitoxin.
26	W. G.	F	2	6	" 28 "	" 12 "	15	"	R ...	"
27	F. R.	F	9	6	Aug. 7 "	Aug. 29 "	22	Faucial	R ...	Antitoxin.
28	E. G. H.	F	5	3	" 29 "	Sept. 30 "	30	Nasal	R ...	No antitoxin.
29	B. J.	M	3	15	June 15 "	Aug. 23 "	65	"	R ...	"
30	A. G.	M	3	14	" 7 "	Sept. 28 "	110	Faucial	R ...	Antitoxin.
31	E. H. C.	F	14	2	Sept. 16 "	Nov. 20 "	65	Nasal and Faucial	D	"
32	A. R. J.	F	5	4	Aug. 30 "	Oct. 10 "	40	Nasal	R ...	No antitoxin.
33	M. R.	F	7	6	" 30 "	Sept. 18 "	19	"	R ...	"
34	E. G. R.	F	3	3	" 21 "	Oct. 7 "	47	"	R ...	"
35	L. M. T.	F	10	6	" 29 "	" 12 "	40	Faucial	R ...	Antitoxin.
36	S. F. W.	M	4	4	Sept. 28 "	Nov. 11 "	43	Nasal	R ...	No antitoxin.
37	E. M. H.	F	12	4	Aug. 27 "	Oct. 18 "	48	Faucial	R ...	"
38	L. M. R.	F	5	3	Sept. 30 "	" 31 "	17	Nasal	R ...	"
39	M. B.	F	1	3	Nov. 1 "	Nov. 9 "	2	"	R ...	"
40	E. P. M. B.	F	1	4	Sept. 29 "	" 16 "	44	"	R ...	"
41	H. A.	M	2	3	" 24 "	" 7 "	41	"	R ...	"
42	E. S.	F	11	7	" 9 "	" 27 "	16	Faucia	R ...	"
43	V. W.	M	2	4	Oct. 16 "	" 1 "	16	Nasal	R ...	"
44	N. D.	F	2	4	" 14 "	" 3 "	16	"	R ...	"
45	A. G. C.	F	7	4	Sept. 4 "	" 11 "	67	"	R ...	"
46	M. D.	F	12	6	Oct. 27 "	" 26 "	26	Faucial	R ...	"
47	W. E. H.	F	3	7	" 24 "	Dec. 1 "	25	Laryngeal	R ...	Antitoxin.

GROVE HOSPITAL.—TABLE VII.

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	W. C.	M	3	9 B	Aug. 27/00	Nov. 16/00	81	Faucial	R ...	Antitoxin.
2	S. G.	F	6	9B	Oct. 17 "	" 15 "	27	Faucial and Nasal	R ...	"
3	G. M.	F	3	9 B	" 18 "	" 13 "	21	Faucial	R ...	"
4	M. D.	F	7	9 B	Nov. 16 "	Dec. 5 "	16	"	R ...	"
5	A. B.	F	5	9 B	" 25 "	" 15 "	19	Faucial & Laryngeal	R ...	"
6	A. H.	F	6	11 B	Dec. 7 "	Feb. 13/01	60	Faucial and Nasal	R ...	"
7	W. C.	M	2	11 B	" 17 "	Jan. 8 "	20	Faucial	R ...	"
8	A. H.	F	2	7 B	" 20 "	Feb. 3 "	41	Laryngeal	R ...	"
9	D. F.	M	5	9 B	Jan. 3/01	" 25 "	47	Faucial and Nasal	R ...	"

* Died of pre-existing broncho-pneumonia the day after onset of diphtheria.
 † Died of scarlatinal nephritis. ‡ Death due to chorea.

SOUTH-EASTERN HOSPITAL.—TABLE VIII.

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	C. W.	F	6	9	Sept. 24/00	Oct. 7/00	12	Faucial	R ...	No antitoxin.
2	E. C.	F	2	10	Oct. 24 "	Nov. 28 "	35	"	R ...	"
2	F. W.	M	2	9	Sept. 29 "	Oct. 22 "	18	Faucial & Laryngeal	R ...	Antitoxin.
4	L. C.	M	5	9	Oct. 19 "	Nov. 18 "	29	Faucial	R ...	"
5	L. M.	M	1½	9	" 10 "	" 11 "	30	Nasal and Faucial	R ...	"
6	L. S.	F	5	9	Nov. 8 "	Dec. 28 "	49	Faucial, Nasal, and Laryngeal	R ...	"
7	C. G.	M	3	9	" 24 "	Jan. 7/01	44	Faucial	R ...	"
8	R. S.	F	3	11	" 4 "	Dec. 28/00	45	Faucial and Nasal	R ...	"
9	S. G.	F	3	9	" 23 "	Jan. 7/01	42	"	R ...	No antitoxin.
10	M. S.	F	9	10	Dec. 27 "	" 24 "	26	Faucial	R ...	Antitoxin.
11	B. K.	F	2	11	Oct. 24 "	Dec. 29/00	59	Faucial and Nasal	R ...	"
12	C. B.	M	4	11	Dec. 1 "	" 28 "	27	"	R ...	"
13	E. G.	F	11	11	Jan. 21/01	Feb. 22/01	28	Faucial	R ...	"
14	H. B.	M	2	16	Feb. 21 "	Mar. 26 "	29	Laryngeal	R ...	"
15	E. F.	F	3	11	Dec. 2/00	Jan. 2 "	31	Faucial	R ...	"
16	F. G.	M	6	17	July 23/01	Aug. 8 "	15	"	R ...	"

PARK HOSPITAL.—TABLE IX.

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	M. Y.	F	8	G 1	Nov. 12/00	Dec. 14/00	30	Faucial	R ...	Antitoxin.
2	A. E.	M	4	D 1	" 15 "	" 12 "	24	"	R ...	"
3	V. C.	M	7	D 1	Dec. 19 "	Jan. 26/01	35	"	R ...	"
4	E. G.	F	7	G 1	" 26 "	" 5 "	8	"	D	"
5	E. H.	F	2	E 1	" 27 "	" 25 "	27	Nasal	R ...	No antitoxin.
6*	L. M.	M	2	E 1	" 3 "	" 23 "	18	Faucial	D	Antitoxin.
7	W. A.	M	8	C 1	Jan. 10/01	" 28 "	17	"	R ...	"
8	L. C.	F	2	E 1	" 15 "	Feb. 20 "	32	Faucial and Nasal	R ...	"
9	J. L.	M	23	D 1	" 3 "	" 18 "	37	Faucial	R ...	No antitoxin.
10	B. B.	M	4	C 1	" 12 "	" 12 "	30	"	R ...	Antitoxin.
11	E. B.	F	3	E 1	" 17 "	" 20 "	29	"	R ...	"
12	H. E.	M	7	C 1	" 13 "	" 16 "	22	"	R ...	No antitoxin.
13†	C. R.	F	10	H 1	Feb. 11 "	Mar. 1 "	15	"	D	"
14	H. J.	M	8	D 1	" 20 "	Apr. 15 "	53	Nasal and Faucial	R ...	Antitoxin.
15	F. G.	M	7	D 1	Mar. 24 "	" 27 "	33	Faucial	R ...	No antitoxin.
16	E. P.	F	3	M	" 17 "	May 6 "	49	"	R ...	"
17‡	P. J.	M	2	E 1	" 30 "	" 2 "	32	Laryngeal	D	"
18	W. P.	M	3	H	Apr. 13 "	" 16 "	30	Faucial	R ...	"
19§	F. C.	M	2	M	" 17 "	" 22 "	33	"	D	Antitoxin.
20	L. G.	M	7	C 1	" 20 "	" 23 "	32	Laryngeal	R ...	"
21||	J. H.	F	2	E 1	May 5 "	" 28 "	22	Faucial	D	"
22	W. L.	M	5	C 1	" 9 "	June 8 "	24	Laryngeal	D	No antitoxin.
23	F. S.	F	4	E	Apr. 9 "	July 14 "	94	Faucial & Laryngeal	R ...	"
24	E. O.	F	1½	E	June 20 "	" 29 "	39	Laryngeal	R ...	Antitoxin.
25	F. H.	M	6	D 1	" 28 "	" 20 "	17	Nasal and Laryngeal	D	No antitoxin.
26	E. T.	F	12	H 1	July 7 "	" 30 "	22	Faucial	R ...	"
27	E. G.	F	4	E	" 11 "	Aug. 24 "	43	Faucial & Laryngeal	R ...	Antitoxin.
28	W. H.	M	1	E	" 30 "	" 23 "	23	Faucial	R ...	"
29	G. B.	M	2	G 1	" 24 "	Sept. 16 "	54	"	R ...	"
30	G. M.	F	3	H 1	" 28 "	" 1 "	33	Laryngeal & Faucial	R ...	"
31	F. W.	M	3	E	Aug. 14 "	" 20 "	34	Faucial	R ...	No antitoxin.
32**	L. G.	M	2	E	" 16 "	" 1 "	15	Nasal	D	"
33	A. A.	F	4	E 1	July 29 "	" 20 "	32	Faucial and Nasal	R ...	Antitoxin.
34	L. H.	M	2	E	Aug. 29 "	Oct. 2 "	32	"	R ...	No antitoxin.
35	W. S.	M	3	B 1	Sept. 10 "	" 3 "	22	"	R ...	"
36	O. T.	F	3	A	" 11 "	" 6 "	24	"	R ...	Antitoxin.
37	G. J.	F	19	H 1	" 21 "	" 30 "	35	Faucial	R ...	"
38	W. T.	M	3	A 1	" 25 "	" 1 "	5	Faucial and Nasal	R ...	No antitoxin.
39	C. S.	M	7	B 1	" 27 "	" 11 "	14	Faucial	R ...	"
40	D. B.	M	4	B 1	Oct. 1 "	Nov. 27 "	56	Faucial & Laryngeal	R ...	Antitoxin.
41	C. W.	M	4	B 1	" 6 "	" 5 "	27	Laryngeal	R ...	No antitoxin.
42	G. C.	F	6	H 1	" 8 "	" 3 "	25	Faucial & Laryngeal	R ...	Antitoxin.
43	L. H.	M	5	C 1	" 10 "	Dec. 1 "	50	Faucial	R ...	"
44††	A. C.	F	4	A 1	Nov. 18 "	" 3 "	12	"	D	"

* A case of severe scarlatinal nephritis.

† Death from scarlatinal nephritis six weeks later.

‡ Measles rash 1st May. Laryngeal obstruction and tracheotomy 2nd May. Died from toxæmia on 3rd May. No faucial diphtheria.

§ Measles rash 16th May. Faucial diphtheria 22nd May. Death from broncho-pneumonia two days afterwards.

|| Measles rash 24th May. Faucial diphtheria 28th May. Death on following day from toxæmia.

** Death from broncho-pneumonia five weeks after onset of fibrinous rhinitis.

†† Complicated by enteric fever.

BROOK HOSPITAL.—TABLE X.

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	F. S.	M	7	E 1	Oct. 4/00	Nov. 24/00	48	Faucial	R ...	Antitoxin.	
2	N. M.	F	6	A 1	Nov. 30 "	Jan. 24/01	53	Nasal	R ...	"	
3	A. C.	F	12	B 1	" 22 "	" 18 "	25	Faucial	R ...	"	
4	H. B.	M	4	B 1	Dec. 23 "	" 25 "	31	Laryngeal & Faucial	R ...	"	
5	H. W.	M	1 1/2	N 2	Jan. 22/01	Mar. 15 "	48	Nasal	R ...	"	
6	S. S.	F	33	D 2	Feb. 13 "	" 17 "	29	Faucial	R ...	"	
7	W. N.	M	1 1/2	C 2	Nov. 19/00	" 5 "	103	Nasal	R ...	No antitoxin.	
8	E. H.	M	6	D 2	Dec. 20 "	" 7 "	63	Faucial	R ...	Antitoxin.	
9	V. W.	F	9	D 2	Jan. 8/01	" 5 "	54	"	R ...	"	
10*	A. H.	M	1 1/2	A 1	Mar. 31 "	Apr. 15 "	13	Laryngeal and Con-junctival	... D	"	
11	M. S.	F	13	A 1 sp	Dec. 30/00	Mar. 5 "	62	Faucial	R ...	"	
12	E. C.	F	4	C 2	May 3/01	June 17 "	43	"	R ...	"	
13	J. M.	M	3	B 2	Sept. 25 "	Oct. 13 "	15	Nasal	R ...	"	
14	F. H.	F	4	D 1	" 29 "	" 30 "	22	"	R ...	No antitoxin.	
15	A. B.	M	4	D 1	Oct. 6 "	Nov. 13 "	14	"	R ...	Antitoxin.	

NORTHERN HOSPITAL.—TABLE XI.

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	V. V.	F	3	5	Aug. 4/00	Oct. 17/00	50	Faucial	R ...	Antitoxin.	
2	R. H.	F	5	17	Sept. 16 "	" 31 "	Day of admission	"	R ...	"	
3	E. P.	F	13	3	" 29 "	Nov. 12 "	31	"	R ...	"	
4	D. D.	M	6	7	July 31 "	" 28 "	53	"	R ...	"	
5	M. R.	F	12	5	Oct. 25 "	Dec. 2 "	12	"	R ...	"	
6	A. B.	M	14	25	" 4 "	" 6 "	42	"	R ...	"	
7	P. W.	F	11	8	" 24 "	" 8 "	44	"	R ...	"	
8	M. C.	F	4	2	Sept. 26 "	" 15 "	52	"	R ...	"	
9	C. H.	M	5	7	Oct. 18 "	" 15 "	7	"	R ...	"	
10	E. D.	F	15	5	" 27 "	" 20 "	30	"	R ...	"	
11	E. D.	F	4	17	" 18 "	" 22 "	7	"	R ...	"	
12	P. S.	F	16	2	" 19 "	" 27 "	54	"	R ...	"	
13	L. R.	F	...	8	Nov. 5 "	Jan. 1/01	2	"	R ...	"	
14	F. B.	M	14	25	" 5 "	" 3 "	34	"	R ...	"	
15	P. B.	M	5	2	Oct. 7 "	" 4 "	13	"	R ...	"	
16	A. P.	F	14	17	Nov. 13 "	" 4 "	21	"	R ...	"	
17	K. A.	F	7	17	" 6 "	" 5 "	22	"	R ...	"	
18	H. H.	F	17	2	Dec. 6 "	" 9 "	9	"	R ...	"	
19	O. R.	F	7	17	" 2 "	" 11 "	10	"	R ...	"	
20	E. B.	F	4	17	Nov. 7 "	" 12 "	10	"	R ...	"	
21	M. J.	F	10	3	Dec. 10 "	" 11 "	14	"	R ...	"	
22	H. F.	M	5	2	Nov. 26 "	" 12 "	32	Laryngeal	R ...	"	
23	R. R.	F	3	19	" 27 "	" 14 "	32	Faucial	R ...	"	
24	F. B.	F	7	19	" 6 "	" 16 "	25	"	R ...	"	
25	L. J.	F	13	8	Oct. 30 "	" 21 "	23	"	R ...	"	
26	V. G.	F	7	3	Dec. 8 "	" 22 "	20	"	R ...	"	
27	E. S.	F	8	3	" 21 "	" 24 "	9	"	R ...	"	
28	G. F.	F	4	19	" 7 "	" 27 "	42	"	R ...	"	
29	R. A.	F	10	17	Nov. 6 "	" 27 "	43	"	R ...	"	
30	M. F.	F	6	19	Dec. 6 "	" 31 "	16	Faucial & Laryngeal	R ...	"	
31	H. P.	F	5	19	" 5 "	" 31 "	29	Faucial	R ...	No antitoxin.	
32	M. W.	F	9	19	" 11 "	Feb. 5 "	25	"	R ...	Antitoxin.	
33	M. M.	F	11	1	Jan. 12/01	" 22 "	10	"	R ...	"	
34	S. C.	M	6	8	" 25 "	Apr. 9 "	35	"	R ...	"	
35	E. W.	F	7	17	Feb. 10 "	" 16 "	14	"	R ...	"	
36	M. T.	F	5	17	Dec. 24/00	" 18 "	32	"	R ...	"	
37	E. P.	F	6	Isol.	Nov. 4 "	" 28 "	43	"	R ...	"	
38	A. H.	F	10	8	Mar. 18/01	May 24 "	23	"	R ...	"	
39	C. A.	F	4	17	Apr. 21 "	" 27 "	4	Faucial & Laryngeal	... D	"	
40	F.W.G.G	M	3	8	Mar. 26 "	June 1 "	31	Laryngeal	R ...	"	
41	L. B.	F	6	1	Apr. 24 "	" 4 "	30	Faucial	R ...	"	
42	G. F.	F	5 1/2	1	" 1 "	" 13 "	9	"	R ...	"	
43	R. G.	F	5	6	May 20 "	" 18 "	5	"	R ...	"	
44	D. W.	F	16	17	Apr. 29 "	" 19 "	33	"	R ...	"	

* Tracheotomy.

NORTHERN HOSPITAL — TABLE XI.—*continued.*

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.
45	P. A.	F	6	8	Apr. 30/01	June 19/01	14	Faucial	R	Antitoxin.
46	L. A.	F	6	19	" 27 "	" 25 "	33	"	R	"
47	A. P.	F	12	7	May 6 "	July 7 "	30	"	R	"
48	D. V.	F	6	7	" 25 "	" 12 "	31	"	R	"
49	H. W.	M	4	7	" 24 "	" 12 "	31	"	R	"
50	D. W.	F	4	2	Mar. 31 "	" 14 "	53	"	R	"
51	A. W.	F	3	2	" 12 "	" 17 "	71	"	R	"
52	H. B.	M	4	2	May 29 "	" 18 "	13	"	R	"
53	C. F. N.	M	6	2	June 8 "	" 18 "	13	"	R	"
54	P. G.	M	15	9	" 3 "	" 19 "	17	"	R	"
55	C. E.	M	13	9	" 20 "	" 19 "	Day of Admission	"	R	"
56	G. M.	F	3	2	" 21 "	" 19 "	11	"	R	"
57	E. C.	F	6	6	" 11 "	" 20 "	37	"	R	"
58	A. J.	F	9	6	" 14 "	" 20 "	8	"	R	"
59	S. R.	M	7	25	May 13 "	" 20 "	51	"	R	"
60	E. P.	F	6	6	June 21 "	" 24 "	7	"	R	"
61	S. P.	F	5	6	" 11 "	" 26 "	22	"	R	"
62	F. T.	M	4	20	Apr. 21 "	" 28 "	59	"	R	"
63	M. B.	F	6	20	May 10 "	" 31 "	62	"	R	"
64	E. H.	F	2½	6	June 3 "	" 31 "	27	"	R	"
65	H. L.	M	6	6	July 16 "	Aug. 1 "	2	"	R	"
66	A. S.	F	6	3	May 17 "	" 1 "	14	"	R	"
67	F. W.	M	3	6	July 12 "	" 2 "	3	"	R	"
68	W. D.	M	4	2	May 23 "	" 4 "	26	Faucial & Laryngeal	R	"
69	C. J.	M	5	6	" 16 "	" 5 "	53	Faucial	R	"
70	L. C.	F	16	2	" 19 "	" 6 "	36	"	R	No antitoxin.
71	D. M.	M	2	19	" 22 "	" 9 "	34	"	R	Antitoxin.
72	A. K.	F	4	19	" 12 "	" 10 "	80	"	R	"
73	E. F.	F	7	3	June 3 "	" 11 "	36	"	R	"
74	G. H.	M	4	8	July 2 "	" 16 "	37	Laryngeal	R	"
75	W. B.	M	5	6	" 20 "	" 17 "	7	Faucial	R	"
76	P. L.	F	4	6	" 2 "	" 20 "	20	"	R	"
77	C. M.	F	8	6	June 11 "	" 21 "	34	"	R	"
78	F. V.	M	4	6	July 31 "	" 29 "	19	"	R	"
79	A. M. T.	F	15	2	" 16 "	Sept. 7 "	35	"	R	"
80	J. S.	F	7	19	June 12 "	" 10 "	76	"	R	"
81	G. M.	M	3½	3	Aug. 1 "	" 13 "	24	"	R	"
82	R. P.	F	11	6	July 14 "	" 22 "	11	"	R	"
83	G. B.	M	5	4	Aug. 7 "	" 29 "	23	"	R	"
84	M. M.	F	5	6	Sept. 8 "	Oct. 2 "	6	"	R	"
85	J. M.	F	6	17	Aug. 28 "	" 3 "	6	"	R	"
86	F. H.	F	17	17	Sept. 8 "	" 5 "	7	"	R	"
87	D. F.	F	9	17	June 5 "	" 6 "	64	"	R	"
88	C. R.	F	10	4	July 15 "	" 8 "	29	"	R	No antitoxin.
89	G. A.	M	4	4	Aug. 9 "	" 8 "	28	"	R	Antitoxin.
90	E. C.	F	13	17	Sept. 2 "	" 10 "	5	"	R	"
91	S. B.	F	9	17	" 9 "	" 11 "	4	"	R	"
92	M. B. J.	F	16	17	" 23 "	" 11 "	10	"	R	No antitoxin.
93	E. P.	F	5	17	Aug. 1 "	" 14 "	60	Laryngeal	R	Antitoxin.
94	D. W.	F	12	17	Sept. 8 "	" 14 "	11	Faucial	R	"
95	H. R.	M	4	2	Aug. 8 "	" 19 "	24	"	R	"
96	L. T.	F	21	17	Sept. 5 "	" 20 "	16	"	R	"
97	E. G.	F	10	17	" 25 "	" 20 "	5	"	R	"
98	W. W.	M	5	8	Aug. 24 "	" 21 "	14	"	R	"
99	G. C.	M	3	19	July 2 "	" 23 "	28	Laryngeal	R	"
100	I. F.	F	6	6	Aug. 23 "	" 25 "	23	Faucial	R	"
101	W. F.	M	3	17	Sept. 8 "	" 26 "	14	"	R	"
102	M. W.	F	4	5	" 10 "	" 27 "	12	Laryngeal	R	"
103	M. J.	F	8	4	" 18 "	" 28 "	23	Faucial	R	"
104	N. C.	F	14	4	Oct. 1 "	" 29 "	10	"	R	"
105	L. H.	F	9	19	Sept. 15 "	Nov. 1 "	17	"	R	"
106	A. S.	M	4	6	" 4 "	" 3 "	19	"	R	"
107	M. K.	F	27	12	Aug. 25 "	" 6 "	35	"	R	"
108	H. A. S.	M	5	19	Sept. 6 "	" 7 "	34	"	R	"
109	L. B.	F	4½	7	" 27 "	" 14 "	20	"	R	"

GORE FARM HOSPITAL.—TABLE XII.

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	F. W.	M	26	H	Oct. 9/00	Nov. 18/00	18	Faucial	R	Antitoxin.
2	W. C.	M	12	K	Sept. 24	" 21	35	"	R	"
3	F. G. W.	M	18	J	" 17	" 24	12	"	R	"
4	E. F. S.	F	13	E	Oct. 11	" 22	30	"	R	"
5	A. H.	F	3	E	" 11	" 24	31	"	R	"
6	F. L.	F	3	F	Sept. 5	" 18	74	"	R	"
7	T. F.	M	13	I	Oct. 4	" 24	23	"	R	"
8	F. W.	F	6	E	" 4	Dec. 4	41	"	R	"
9	M. B.	F	6	M	" 8	Nov. 28	19	"	R	"
10	A. E. C.	M	4	J	" 8	" 26	14	"	R	"
11	S. B.	M	16	H	Sept. 27	" 30	11	"	R	"
12	S. S.	M	4	L	" 28	" 21	19	Faucial & Laryngeal	R	"
13	E. G. A.	F	13	C	" 7	" 10	31	Faucial	R	"
14	F. M. F.	F	4	M	Oct. 2	" 23	16	"	R	"
15	F. M.	M	5	I	July 30	Sept. 28	31	"	R	"
16	C. P.	M	3	O	Oct. 12	Nov. 19	20	Faucial and Nasal...	R	"
17	N. H.	F	4	B	Aug. 15	" 18	58	Faucial	R	"
18	A. S.	M	4	K	Sept. 20	" 20	19	Faucial & Laryngeal	R	"
19	A. C.	F	15	F	Oct. 15	" 22	5	Faucial	R	"
20	S. J. H.	M	12	L	Sept. 14	" 6	25	"	R	"
21	F. L.	M	5	M	" 4	" 23	13	"	R	"
22	M. R.	M	4	L	" 25	" 12	27	Faucial & Laryngeal	R	"
23	G. R.	F	8	F	" 25	" 2	20	Faucial	R	"
24	A. D.	M	6	M	Nov. 6	" 26	9	"	R	"
25	J. A. C.	M	12	H	Oct. 1	" 28	35	"	R	"
26	A. L. S.	F	7	M	" 24	Dec. 3	21	"	R	"
27	B. M. B.	F	5	M	Sept. 29	" 3	31	"	R	"
28	W. H.	M	16	I	Oct. 10	" 19	47	"	R	"
29	D. A.	F	5	P	Aug. 9	" 16	67	Faucial and Nasal...	R	"
30	J. E. H.	F	5	E	Oct. 13	Nov. 21	28	Faucial	R	"
31	E. P. H.	F	7	M	Nov. 5	Dec. 9	11	"	R	"
32	W. H.	M	5	L	Oct. 14	" 21	16	"	R	"
33	W. J.	M	5	L	" 4	Nov. 10	8	"	R	"
34	G. D. C.	F	8	C	Sept. 28	" 20	18	"	R	"
35	J. E. B.	M	9	J	Oct. 31	Jan. 7/01	34	"	R	"
36	W. J. F.	M	10	I	" 18	Dec. 27/00	23	"	R	"
37	A. M. W.	F	4	M	" 16	Nov. 23	16	"	R	"
38	G. B.	F	7	F	Aug. 10	" 16	74	"	R	"
39	G. U.	F	4	N	Oct. 8	" 27	18	Nasal	R	"
40	G. S.	M	3	C	" 17	" 29	14	Laryngeal	R	"
41	F. S.	F	6	B	" 5	Dec. 18	39	Faucial	R	"
42	J. J. V.	M	4	J	" 9	Jan. 5/01	54	"	R	"
43	A. C.	M	3	J	Dec. 15	" 13	2	"	R	"
44	E. F.	F	4	M	Oct. 22	Dec. 8/00	30	"	R	"
45	A. M. S.	F	24	M	Dec. 6	Jan. 30/01	27	"	R	"
46	R. T.	F	3	E	Nov. 13	" 8	27	"	R	"
47	V. S.	F	4	C	Dec. 18	" 28	11	Faucial and Nasal...	R	"
48	A. N.	F	5	M	Sept. 21	Dec. 3/00	24	Laryngeal (Trachy.)	R	"
49	E. M. S.	F	6	M	Nov. 29	Jan. 26/01	28	Faucial	R	"
50	T. J. F.	M	4	M	Dec. 3	" 14	24	Faucial & Laryngeal	R	"
51	A. N.	F	3	C	Oct. 26	Nov. 28/00	11	Faucial, Nasal, and Laryngeal	R	"
52	R. W.	F	6	B	Nov. 2	Jan. 29/01	67	Faucial	R	"
53	F. E. W.	F	10	B	Oct. 24	" 2	47	"	R	"
54	H. D.	M	5	L	Jan. 16/01	Mar. 12	1	"	R	"
55	M. P.	F	3	F	Nov. 17/00	Jan. 19	30	Faucial and Nasal...	R	"
56	V. H.	F	2	B	Jan. 18/01	Feb. 28	14	Faucial	R	"
57	N. E. B.	F	10	M	Oct. 15/00	Dec. 10/00	31	"	R	"
58	L. S.	F	8	C	Feb. 21/01	Mar. 18/01	12	"	R	"
59	I. W.	F	3	C	" 1	Apr. 5	38	"	R	"
60	F. W.	F	4	C	Dec. 5/00	Mar. 11	45	"	R	"
61	P. J. M.	M	4	B	" 31	Feb. 22	53	"	R	"
62	G. S.	M	5	B	" 29	Mar. 4	63	"	R	"
63	E. S.	F	7	C	" 24	" 1	43	"	R	"
64	J. S.	M	12	H	" 20	Jan. 21	23	"	R	"
65	W. H.	M	10	H	Nov. 23	Feb. 27	78	"	R	"
66	C. J. R.	M	5	K	" 21	Jan. 14	15	Faucial and Nasal...	R	"
67	L. G.	F	4	D	June 30/01	Apr. 18	29	Faucial	R	"
68	M. K.	F	13	E	" 30	Aug. 16	23	"	R	"
69	A. R.	F	12	E	" 19	" 21	33	"	R	"
70	W. H.	M	5	E	July 18	" 18	5	"	R	"
71	E. N.	F	2	E	June 2	" 6	18	Faucial and Nasal...	R	"
72	L. G.	F	5	D	" 29	" 20	31	Ocular	R	"
73	A. W.	F	6	D	" 14	" 18	26	Faucial	R	"
74	W. N.	F	4	M	July 29	" 27	4	Nasal	R	No antitoxin.
75	M. S.	F	5	E	Aug. 8	Sept. 25	27	Faucial	R	Antitoxin.

TABLE XIII.—Number of Cases of Laryngeal and Non-Laryngeal Cases of Post-Scarlatinal Diphtheria at each Hospital.

	Eastern.		North-Eastern.		North-Western.		Western.		South-Western.		Fountain.		Grove.		South-Eastern.		Park.		Brook.		Northern.		Gore Farm.		Total.		Mortality per cent.
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Faucial and Nasal Cases.	Males	1	0	13	1	5	1	7	0	2	1	14	0	5	0	4	0	20	3	6	0	27	0	20	0	131	6
	Females	3	0	6	0	4	2	13	0	1	0	32	2	5	0	8	0	13	4	7	0	73	0	44	0	209	8
	Total	4	0	19	1	9	3	20	0	3	1	46	2	8	0	12	0	33	7	13	0	100	0	73	0	340	14
	Mortality per cent.	0		5.26		33.3		4.34		33.3		0		0		0		21.2		0		0		0		4.11		4.11
Laryngeal Cases.	Males	0	0	0	0	3	1	0	0	1	1	0	0	0	0	3	0	6	3	2	1	5	0	2	0	22	6
	Females	2	1	1	0	1	0	1	1	1	0	1	0	1	0	1	0	5	0	0	0	4	1	0	0	18	3
	Total	2	1	1	0	4	1	1	1	2	1	1	0	1	0	4	0	11	3	2	1	9	1	2	0	40	9
	Mortality per cent.	50.0		0		25.0		100.0		50.0		0		0		0		27.2		50.0		11.1		0		22.5		22.5
All Cases.	Males	1	0	13	1	8	2	7	0	3	2	14	0	3	0	7	0	26	6	8	1	32	0	31	0	153	12
	Females	5	1	7	0	5	2	14	1	2	0	33	2	6	0	9	0	18	4	7	0	77	1	44	0	227	11
	Total	6	1	20	1	13	4	21	1	5	2	47	2	9	0	16	0	44	10	15	1	109	1	75	0	380	23
	Mortality per cent.	16.6		5.0		30.76		4.76		40.0		4.25		0		0		22.7		6.6		0		0		6.05	

**SUMMARY OF THE ANTITOXIN TREATMENT OF
DIPHThERIA DURING 1901.**

TABLE I.—*All forms of Diphtheria.*

HOSPITAL.	Cases treated with Antitoxin.			All Cases; both those treated with Antitoxin and those not.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Eastern... ..	1,449	148	10·2	1,484	149	10·0
North-Eastern ...	296	60	20·3	355	64	18·1
North-Western ...	629	111	17·6	894	122	13·6
Western	739	86	13·0	743	86	12·9
South-Western ...	353	41	11·6	493	42	8·5
Fountain	85	1	1·2	97	1	1·0
Grove	985	90	9·1	1,054	91	8·6
South-Eastern... ..	640	89	13·9	740	90	12·2
Park	600	113	18·8	840	116	13·8
Brook	723	78	10·7	812	88	10·8
Total	6,499	817	12·57	7,512	849	11·31

TABLE II.—*Laryngeal Cases.*

HOSPITAL.	Cases treated with Antitoxin.			All Cases; both those treated with Antitoxin and those not.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Eastern... ..	161	32	19·8	162	33	20·4
North-Eastern ...	29	7	24·1	30	8	26·7
North-Western ...	77	23	29·9	81	25	30·9
Western	98	22	22·4	101	27	26·7
South-Western ...	66	12	18·8	67	12	17·9
Fountain	6	0	0·0	6	0	0·0
Grove	75	16	21·3	76	17	22·3
South-Eastern ...	114	23	20·2	117	23	19·7
Park	66	14	21·2	67	14	20·9
Brook	61	10	16·3	61	10	16·3
Total	753	159	21·1	768	169	22·0

TABLE III.—*Tracheotomy Cases.*

HOSPITAL.	Cases treated with Antitoxin.			All Cases; both those treated with Antitoxin and those not.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Eastern	64	22	34.3	65	23	35.3
North-Eastern ..	14	5	35.7	14	5	35.7
North-Western ...	36	8	22.2	36	8	22.2
Western	41	15	36.6	44	18	40.9
South-Western ..	34	8	23.5	34	8	23.5
Fountain	5	0	0.0	5	0	0.0
Grove	42	14	33.3	42	14	33.3
South-Eastern ...	66*	19	28.8	66*	19	28.8
Park	26	10	38.4	27	10	37.0
Brook	39	10	25.6	39	10	25.6
Total	367	111	30.2	372	115	30.9

STATISTICS OF TRACHEOTOMIES, 1901.

The following table gives the number of cases of tracheotomy done at each year of life under 10 years of age, also the number of deaths at each year. The figures are compiled from returns sent from all the hospitals except the Brook, and include only cases completed during 1901, *i.e.*, cases operated on during 1901, but still in hospital at the end of the year are not included, while cases operated on during 1900, but discharged during 1901 are included.

TABLE I.—*Number of Cases and Deaths at different Ages of all Cases of Tracheotomy performed for Primary Diphtheria completed during 1901.*

Ages.	Cases.	Deaths.	Percentage Mortality.
Under 1	18	13	72.2
1 to 2	57	22	38.6
2 ,, 3	65	20	30.8
3 ,, 4	60	20	33.3
4 ,, 5	57	16	28.1
5 ,, 6	25	6	24.0
6 ,, 7	16	3	18.7
7 ,, 8	4	1	25.0
8 ,, 9	1	0	...
9 ,, 10	1	0	...
Over 10	3	1	33.3
Total	307	102	33.2

Cases operated on before admission have not been included in this table.

* Of these cases 19 were admitted from the London Hospital after tracheotomy had been performed. One of these died.

In comparing this table with similar tables for 1895 and 1896, the first two years in which antitoxin was used (see annual reports 1895, p. 131, and 1896, p. 185), it will be noticed that the mortality has improved as a whole and at all the age periods. In all three tables there is a marked decrease in mortality as the age advances during the first few years of life, and a rise after the age of 10 years. In all, the greatest difference occurs between the age periods "under 1" and "between 1 and 2," with a lesser drop from "between 1 and 2" to "between 2 and 3." Between 3 and 7 the death rate is less variable.

For purposes of comparison the two tables below are added, which give the number of cases and deaths for tracheotomies performed on cases of diphtheria secondary to scarlet fever, measles, or other disease, and on tracheotomies performed on non-diphtheria cases—chiefly septic scarlet fever or measles. In both the latter the prognosis is unfavourable. The numbers for the separate age periods are too small to give percentages of any value.

TABLE II.—*Number of Cases and Deaths at different Ages of all Cases of Tracheotomy performed for Secondary Diphtheria completed during 1901.*

Ages.	Cases.	Deaths.
Under 1 ... ..	...	..
1 to 2	3	0
2 ,, 3	3	2
3 ,, 4	6	3
4 ,, 5	4	1
5 ,, 6	3	2
6 ,, 7 ... ..	...	...
7 ,, 8 ... ..	...	...
8 ,, 9 ... ..	...	...
9 ,, 10 ... ..	...	...
Over 10 ... ..	...	...
Total	19	8

Percentage mortality, 42.1.

TABLE III.—*Number of Cases and Deaths at different Ages of all Cases of Tracheotomy performed for other disease than Diphtheria completed during 1901.*

Ages.	Cases.	Deaths.
Under 1	1	0
1 to 2	5	5
2 ,, 3	7	4
3 ,, 4	5	2
4 ,, 5	2	2
5 ,, 6	1	1
6 ,, 7	1	1
7 ,, 10 ... ..	...	...
Over 10	2	2
Total	24	17

Percentage mortality, 70.8.

SUMMARY OF LAPAROTOMIES FOR PERFORATION IN ENTERIC FEVER PERFORMED DURING 1901.

Hospital at which Operation was performed.	Sex.	Age.	Period of Illness.	Length of time between Perforation and Operation.	Condition of Abdomen.	Nature of Operation.	Result.	Remarks.
Eastern	M	33	31st day	11½ hours ...	General, non-offensive peritonitis	Perforation closed with Lembert's sutures; no irrigation; no drainage tube inserted	Death, 32 hours after operation	Some delay in finding perforation owing to presence of an old band extending from tip of vermiform appendix to small intestine; death due to cardiac failure.
North-Eastern ...	F	27	52nd day of illness and 16th day of relapse	4 hours	General peritonitis with turbid fluid	Perforation stitched to abdominal wall as base of ulcer was so thick and indurated that inversion of its edges was impossible	Death, 60 hours after operation	Improved considerably during the first 24 hours after operation.
South-Western ...	F	21	16th day	6 hours	General peritonitis with turbid fluid and gas	Perforation closed; abdominal cavity flushed with hot saline solution	Death, 12 hours later	Patient was very ill at the time of perforation.
South-Western ...	M	74	24th day	12 hours	Abdominal cavity contained gas; peritoneum injected; no fecal odour; no fluid present	Perforation closed with Lembert's sutures, and drainage tube inserted	Death, 11 hours after operation	No other perforation found; <i>post-mortem</i> .
Grove	M	25	35th day	36 hours	General peritonitis ...	Intestine closed by suturing; drainage tube inserted	Death, 64 hours after operation	—
Grove	M	30	27th day	60 hours	General peritonitis ...	Drainage tube inserted	Death, 12 hours after operation	—
Grove	M	12	20th day	24 hours	General peritonitis ...	Intestine closed by suturing; drainage tube inserted	Death, 96 hours afterwards	—
South-Eastern ...	M	29	15th day	22½ hours ...	General peritonitis with turbid fluid	Gut closed with sutures; abdomen irrigated	Death, 54 days after operation	—
Park	M	25	Beginning of 2nd week	20 hours	Abdomen contained gas and turbid fluid	Perforation sutured; irrigation; drainage	Death, 18 hours afterwards	Patient much exhausted before operation.
Park	M	28	20th day	25 hours	Contained gas and semi-purulent fluid	No perforation found; patient's condition not permitting more than a very brief search	Death, shortly afterwards	—

INTUBATION AT THE PARK HOSPITAL.

(By the Assistant Medical Officers.)

The statistics of intubation at this hospital during 1901 are here given in tabular form, including for the sake of completeness one or two cases admitted during the previous year. The operation, as will be seen, has been performed both for diphtheritic and non-diphtheritic forms of laryngeal stenosis, with a total mortality of 15·8 per cent. If case No. 17, where intubation was performed merely as a palliative measure, be omitted, this is lowered to 13·4 per cent. In eight cases it subsequently became necessary to perform tracheotomy; of these patients two died, and in two others (Nos. 4 and 25) there was considerable difficulty in dispensing with the canula, though both ultimately left the hospital quite well. The figures in the column relating to the number of days of aphonia after removal of the tube are necessarily somewhat unreliable. In most of the backward cases, Nos. 10, 11, 23, and 24, there was marked local and general paralysis, so that the laryngeal condition may reasonably also be attributed to this cause. In two, however (Nos. 23 and 24), the epiglottis and upper laryngeal aperture, as seen laryngoscopically some weeks after the operation, were acutely inflamed and swollen, though the introduction of the tube had not presented exceptional difficulties. On the other hand, in another case (No. 17), where the tube was removed and re-inserted five times owing to recurrent dyspnoea, voice returned almost immediately when the condition passed off. Vomiting during the operation occurred twice. There was no case of syncope.

The patients were placed in the recumbent or vertical position, the latter being most often used. O'Dwyer's tubes were employed, and the thread left attached; in two or three instances it was bitten through by the teeth, but no inconvenience appeared to be caused by its presence. As a rule the operation was not performed immediately on admission, the order of treatment in a case of purely laryngeal diphtheria being first an enema, then antitoxin, then after an interval intubation if it were indicated, and finally tracheotomy. In three of the fatal cases the larynx was carefully examined after death, and in two it showed signs of superficial ulceration where the tube had lain, in one case very slight; both would certainly soon have healed if the patients had lived. The incidence of broncho-pneumonia may be gathered from the table. All the patients were, of course, fed by the rectum or by nasal tube whenever necessary.

Number of Case.	Disease.	Age.	Sex.	Site of Disease.	Bacteriological Examination.	Day of Disease: Antitoxin.	Day of Disease: Intubation.	Duration of Intubation.	Total Number of		Paralysis.	Results.	Remarks.	
									Injections.	Number of Days.				
1	Measles	4	M	L	—	NA	1	Days. 15	1	1	Yes	...	R	Rash appeared after intubation.
2	Diphtheria	3	M	L	0	2	2	2	3	10	...	...	R	Tracheotomy.
3	Diphtheria	6	F	LF	0	5	7	3	3	12	...	...	R	Tracheotomy.
4	Diphtheria	3	M	L	+	2	2	3	3	28	Yes	...	R	Tracheotomy; relapse.
5	Diphtheria	4	F	L	+	3	3	1-25	1	2	...	...	R	
6	Diphtheria	5	F	L	0	5	6	2-25	1	1	Yes	...	R	
7	Diphtheria	12	M	L	0	2	2	3	2	3	...	...	R	
8	Diphtheria	4	F	LF	0	2	3	1	1	5	...	...	R	
9	Diphtheria	5	F	L	0	2	2	1-5	1	1	...	...	R	Someretraction afterwards.
10	Diphtheria	1	M	FL	+	2	3	3	3	55	Yes	Yes	R	Tracheotomy.
11	Diphtheria	2	F	FL	+	3	4	5-5	4	34	Yes	Yes	R	Tracheotomy.
12	Diphtheria	5	F	L	0	4	4	1-5	3	0	Yes	...	D	Tracheotomy; extension; casts.
13	Diphtheria	3	F	L	+	2	3	7	5	1	...	...	R	Vomiting during operation.
14	Diphtheria	12	M	L	0	1	1	5-5	1	18	Yes	...	R	
15	Diphtheria	2	F	LF	0	2	2	6	3	0	Yes	...	D	Death from bron.-pneu.; 8th day.
16	Diphtheria	3½	M	L	+	4	4	2	1	1	...	...	R	
17	Diphtheria	3½	M	LFN	0	2	2	2 hrs.	1	0	Yes	...	D	Death from syncope.
18	Diphtheria	2½	F	LF	+	3	3	2-5	1	12	...	...	R	Much oedema of epiglottis.
19	Diphtheria	2½	F	L	0	4	5	2	1	1	...	...	R	Membrane expelled during operation.
20	P.-Scar. Diphtheria	4	M	L	+	1	1	1	1	4	...	...	R	
21	Diphtheria	3	F	L	0	4	5	3	1	4	...	Yes	R	Glottic spasm during operation.
22	Diphtheria	3½	M	L	0	5	5	1-5	1	9	...	...	R	
23	Diphtheria	3	F	LF	+	2	3	1	1	60	...	Yes	R	
24	Diphtheria	1½	F	LN	0	2	2	3-5	1	30	...	Yes	R	
25	Measles and Diph.	3	M	L	+	9	8	3	2	34	Yes	...	R	Tracheotomy; laryngeal spasm.
26	Scar. Fever, Measles (?) Diphtheria	2½	M	L	0	NA	1	1	2	0	Yes	...	D	Tracheotomy.
27	Influenza... ..	2	F	L	—	1	1	2	1	0	Yes	...	D	Death, 8th day; old pleurisy + bron.-pneu.
28	Diphtheria	3	M	LF	0	9	9	2	1	7	...	...	R	
29	Diphtheria	6	F	LN	0	7	7	2	1	1	...	...	R	
30	Diphtheria	2	F	LFN	+	1	2	2-2	1	1	...	...	R	Much laryngeal oedema.

A CASE OF ULCERATION AND PERFORATION OF THE GALL-BLADDER IN TYPHOID FEVER.

(By E. W. GOODALL, M.D., Medical Superintendent, Eastern Hospital.)

The patient in this case was a girl, aged 7 years, who was admitted to the Eastern Fever Hospital on November 28th, 1900. It was stated that she had been quite well on November 22nd, and was taken ill the next day. When she arrived at the hospital she was complaining of pain in the abdomen, and it was found then that the abdomen was somewhat hard and resistant in the right hypochondrium. The child lay on her back with her legs drawn up; her temperature was 103.2° Fahr., pulse 112, small, and respiration 36. The face wore an expression of pain; the breathing was thoracic. The heart and lungs were normal. The spleen was slightly enlarged. The hepatic dulness was normal

as regards its upper limit; but below it extended to the level of the umbilicus, reaching the median line of the abdomen on the left, while on the right it ascended and was lost a finger's breadth below the last rib behind. Besides the resistance mentioned above, there was pain and tenderness over the liver, with a suspicion of œdema. The liver surface was smooth and its lower and inner edge was sharp and easily defined. The abdomen was considerably distended; upon its surface were a few rose-coloured papules. The tongue was clean, except for some creamy fur towards the tip. The urine was bile-stained, but not albuminous.

During the following night the patient vomited a little undigested milk. A glycerine enema produced a light-coloured, semi-formed stool.

November 30th.—The child had a great deal of pain in the right hypochondrium to-day. She was very restless, and at times her mind wandered.

December 2nd.—There was discharge from the left ear.

December 3rd.—A 1 per cent. dilution of the blood-serum reacted positively with typhoid bacilli. I examined the patient and found that the hepatic dulness did not extend so far below the costal margin as it did on admission; the abdomen was more distended. I could not make out the gall-bladder, nor any local swelling of the liver. I thought the case was one of typhoid fever, with inflammation about the gall-bladder. To-day the right ear began to discharge.

December 4th.—The abdomen was more distended; the lower margin of hepatic dulness extended to just below the edge of the ribs, and the liver could not now be felt. There was still much pain as before, and it appeared to be paroxysmal.

December 7th.—Abdomen was less distended. There was dulness over the right side of the chest behind, from the inferior angle of the scapula downwards. An exploring needle was inserted in two places just behind and below the scapular angle, but with negative results.

December 8th.—At 1.45 p.m. the patient had a severe rigor. I saw the child immediately after the rigor, and could not make out any fresh signs.

December 10th.—I made the following note: "The nurse states that since the rigor the child has been very different from what she was before, quiet, and hardly crying at all. Before, the stools were light and semi-formed, now they are light and loose. The abdomen is less distended, and not tense; the hepatic dulness goes down to nearly the level of the umbilicus, but I cannot feel the liver. Above, the dulness does not go higher than normal. Behind, the dulness on the right side does not go so high as it did. There are no adventitious sounds in the lungs, save an occasional *râle*; there is some deficiency of entry of air into the right base; this was present before in the dull area."

December 13th.—The child seemed in great pain again, especially over the right hypochondrium. The hepatic dulness reached as low as the umbilicus, but deep palpation excited pain, so nothing could be felt.

December 14th.—The patient was much worse. The pulse could not be felt at the wrist. The head was markedly and rigidly retracted, a symptom that had existed since the previous morning. The pupils were widely dilated, probably owing to applications containing belladonna to the abdomen. The patient was quite sensible when spoken to. "Both yesterday and to-day there has been a

"suspicion of a thrill on percussing the dull area in the hepatic region, which is as much as it was on December 10th. The knees are still drawn up. The abdomen is not so full and rigid as it was. The charge nurse of the ward states that the otorrhœa did not last more than two days." The patient died at 1.50 a.m. on December 15th.

From admission till December 5th the temperature was usually above 101° Fahr., and was only once below 100°. It fell to 98° on the morning of December 6th, and to normal during the evening and night of December 7th; after that date it was usually above 102°, and on four occasions was above 104°. The urine contained bile. The bowels were moved two or three times a day.

A *post-mortem* examination was made by myself at noon on December 15th. The following are the notes:—

On opening the abdomen an irregular cavity was found in its upper part. This cavity was bounded: in front, by the abdominal wall; below, by the great omentum; behind, by the great omentum, stomach, and liver; and above, by the liver. The cavity was quite shut off from the rest of the abdominal cavity by recent adhesions; these adhesions were not thick or tough, and there was no semblance of a pyogenic membrane. There were many minute hæmorrhages into the peritoneum of the abdominal wall forming the front boundary of the cavity. The cavity was full of turbid, bile-coloured fluid, with shreds of mucus and lymph. The cavity having been accidentally opened in reflecting the skin of the abdomen, the fluid welled up through the hole as though it was under some tension. The cavity extended across the upper part of the abdomen, but was largest in size below the liver. It did not reach quite across to the left side of the abdomen. It dipped backwards in little pouches. The lower front edge of the liver was distinctly pushed backwards by the fluid.

On subsequently removing the abdominal viscera, the gall-bladder was found to be perforated in three places. On opening the gall-bladder there were found inside it 15 to 20 ulcers, the largest about three-quarters of an inch in diameter, the smallest the size of a pin's head. The three largest had perforated and it looked as if the whole floor of each ulcer had fallen out. To the edge of the largest, the remains of the sloughing base still adhered. The ulcers showed greenish-black, thin sloughs, in some places consisting of nearly the whole thickness of the wall of the gall-bladder. The rest of the mucous membrane was very red and injected, but otherwise healthy. A little inspissated mucus was found in the gall-bladder; but no stones either there or in the cavity outside. Bile-ducts and portal veins normal. There was no peritonitis elsewhere. Liver very fatty and larger than normal. Pancreas very tough and hard. Spleen not large and quite firm. Kidneys, stomach, adrenals, and bladder, normal.

There was distinct, though slight, ulceration of the small intestine. The surface of the edge of the ileo-cæcal valve which looks towards the small intestine was ulcerated, though not deeply. In fact, the ulceration was healing. There was irregular, healing ulceration within one and a half inches of the valve in the small intestine, with a good deal of slate-coloured discoloration. Six inches above the valve was a small, shallow, clean-cut ulcer without any slough, with a small one almost touching it. Six inches higher up was a similar ulcer, single; and about two inches above that two similar ulcers close together. The Peyer's patches were

large in size, but not unusually prominent. There were no sloughs in any of the ulcers. The mesenteric glands were only slightly enlarged.

The large intestine and vermiform appendix were normal.

The heart and lungs were normal. The mark of the exploring needle was still to be made out in the right ninth intercostal space. There was no pleurisy or fluid.

On opening the skull and removing the dura matter, it was plain that there was lepto-meningitis. There was excess of subdural fluid, which was turbid. The whole of the pia mater was thickened and had a gelatinous appearance, especially along the longitudinal fissure, at the posterior part of which was, on each side, some lymph, and even pus. There was a thick collection of lymph and pus over a space about one inch in diameter on the under surface of the cerebellum. There was no thrombosis. The spinal cord was not examined, but there was no particular deposit of lymph or pus on the temporal bones or the temporo-sphenoidal lobe.

The left middle ear, with the mastoid antrum and cells, was full of pus; the ossicles were present. On the right side there was thick mucus in the middle ear, but none in the antrum and cells.

Though during the 10 years I have been at Homerton I have seen a considerable number of autopsies in typhoid fever, I have met with lesions of the gall-bladder on two occasions only; one case, in which there was suppuration in the wall of the organ with perforation, I related at a meeting of the Hunterian Society on March 8th, 1899; the other is the present case.

SOME EFFECTS OF ANTITOXIC SERUM ON ASSIMILATION OF FOOD.

(By H. W. L. BARLOW, M.D., Assistant Medical Officer, Park Hospital.)

Increased dosage of antitoxin renders the bye effects of the serum in which it is contained worthy of notice, though the exact nature of the body producing them is still matter of speculation. Dr. Brodie has shown that ethereal and alcoholic extracts of dried antitoxic serum contain a substance which possesses irritating properties, but, judging from the varying severity of the secondary effects observed and the latent period preceding them, it would appear more likely that the active agent is produced after injection within the body itself.

Current opinion on the correct dosage of antitoxin has varied from time to time. 20,000 units within the first 24 hours of treatment were recommended in the *British Medical Journal* in 1900. Dr. Osler, in 1901, recommends repeated doses (4,000 to 70,000 units in all) until an effect is produced. In either case the quantity of serum used as a vehicle is considerable, and in what follows it is attempted to ascertain the effect of this upon the digestive system of the patient, the other well-known results of serum injection lying outside the scope of this note.

The urinary nitrogenous excretion of a male adult of 70 to 75 kilos weight was examined after serum injection on two occasions, and the main results plotted out to form the curves shown. The nitrogen intake could not, unfortunately, be measured; it was, however, tolerably constant from day to day during the first portion of the observations made, which were conducted mainly on a liquid diet, with fish, bread, and pudding; and was increased during the second portion, where a mixed meat diet was taken of higher nitrogen value: the change is indicated by a black line on the chart.

The total nitrogen was accurately determined by Kjeldahl's method, the uric acid less accurately by that of Hopkins, and the urea approximately only by hypobromite of soda. The chlorine and phosphoric acid were estimated volumetrically by silver nitrate and uranium acetate, and in some cases the sulphuric acid was determined.

In addition, the white and red blood count, blood pressure, hæmoglobin content, pulse, and temperature were observed twice daily. With the exception of the white blood count, these results are not represented. They indicate a slight degree of permanent anæmia present before the injections were made, but otherwise show no departure from the normal, and thus tend to confirm the previous observations of Billings, Lloyd, and others, according to which antitoxic serum has little or no effect upon the contents or walls of the vascular system.

It will be seen that analyses could not be carried out immediately after the first antitoxin injection, and were rendered useless after the second by the occurrence of a small alveolar abscess, whose existence was not suspected until too late. The occurrence of the customary rise in the nitrogenous output during its development, coupled with the leucocytosis and corresponding increase in uric acid, served, however, to show that the system was in normal working order.

The first injection of antitoxin was given a week after a slight diphtheritic infection of a wound on the left index finger; the lesion was of a trifling nature, and could not possibly influence the results. A rash appeared in due course seven days afterwards, and when it had disappeared a second larger injection was made, which was again followed by a more persistent rash—like the first, an urticaria.

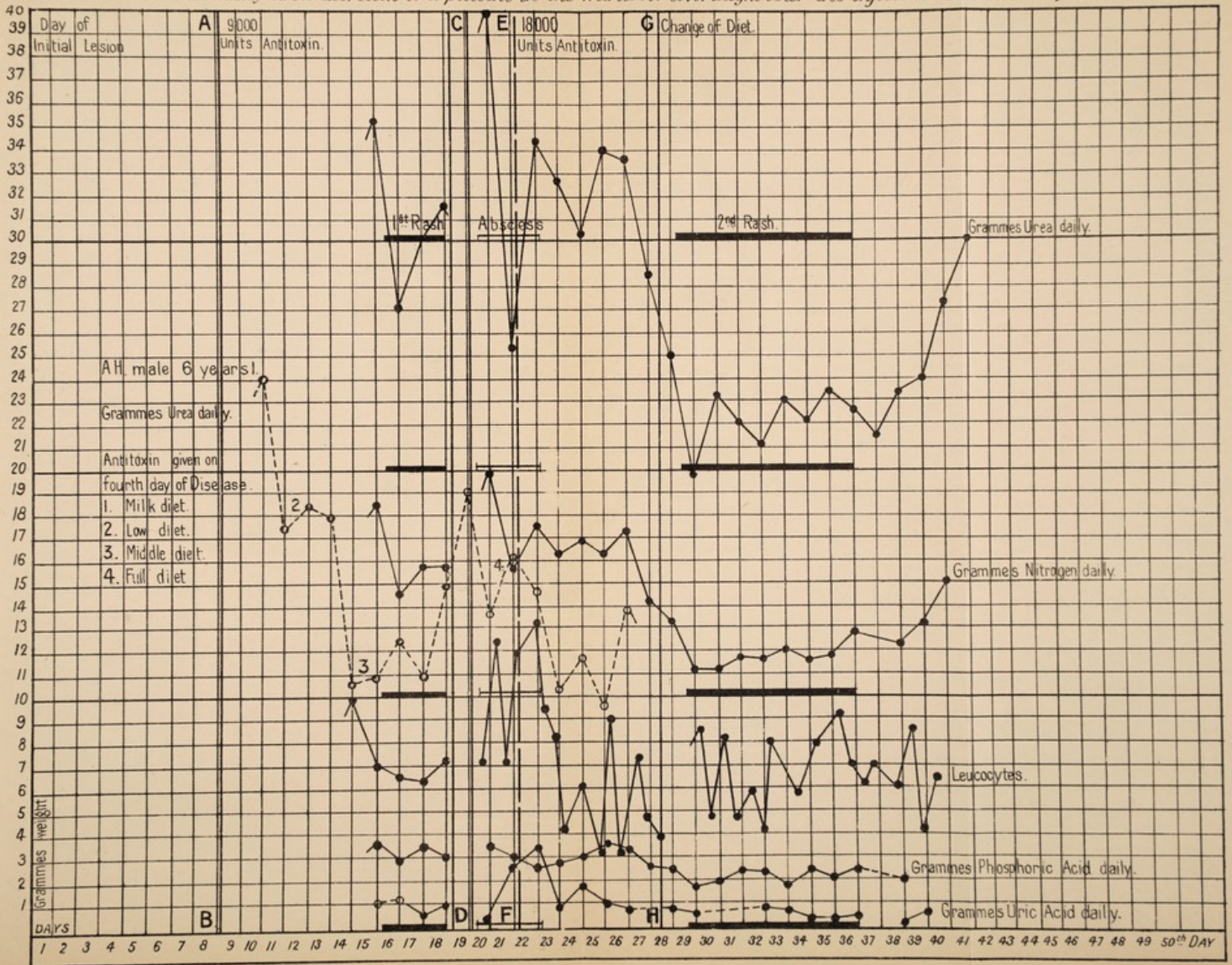
The results obtained are more marked during the second rash period than the first. They show that in this individual case there was a diminished nitrogen output during the exhibition of the rash, and this was more marked the second time than the first, although the intake was then higher. The urea is chiefly affected, but the uric and phosphoric acid excretions are also slightly diminished. Definite information regarding the output immediately following injection is wanting, for reasons given above, but from the general trend of the curves it would appear to be slightly above normal. The most likely explanation of these facts lies in defective absorption. The occurrence of a definite change in the mucous membrane of the alimentary canal strictly analogous to the cutaneous rash is perhaps doubtful, but, so far as a single case is any guide, a temporary impairment of function would appear to take place. The total amount of antitoxin injected was 27,000 units, corresponding to a dose of 6,000 to 9,000 units in a child of less weight.

The demonstration of changes similar to these in patients suffering from diphtheria is attended with considerable difficulties. For various reasons it is

METROPOLITAN ASYLUMS BOARD.

CURVES SHOWING EXCRETION OF VARIOUS SUBSTANCES AFTER ANTITOXIN INJECTION.

The lines A.B., E.F. mark the dates of antitoxin injections: C.D. represents an interval between two sets of analyses, and G.H. a change in diet. The dotted line shows the daily urea excretion of a patient in the wards for a fortnight after the injection of antitoxin.



impossible to ensure very accurate measurement, and the urea therefore has been alone determined in those cases—some seven or eight in number—which have been hitherto examined. The changes in diet from day to day and the metabolic changes due to disease constitute two further obstacles to the inquiry. The latter, speaking in general terms, are of a nature opposed to the change produced by antitoxic serum. Thus Noel Paton and Dunlop concluded that in dogs there was no diminished absorption after injection of diphtheria toxin, but, on the other hand, the nitrogen output was increased, the increase, however, falling chiefly on other compounds than urea. Bearing these facts in mind, it is not perhaps surprising to find that the curves of daily urea output usually present but slight evidence of the influence of antitoxic serum. Notwithstanding increased feeding, a depression frequently occurs in the second week, which is possibly the effect of serum (one such curve is inserted in the chart). It should be stated that in those cases where a rash appeared it was never severe or long-continued. In the one selected above there was no obvious rash at all. In three out of eight, all of whom had rashes, the urea curve gave no definite indications of a change, but the number of observations is clearly too small to found a definite statement upon.

Clinically, there is one symptom—vomiting—which might be taken as evidence of digestive derangement if it were not common in diphtheria from other causes. I find that 155 out of 675 cases of diphtheria vomited at one time or another during their stay in hospital. The frequency with which vomiting accompanies a serum rash, and is therefore probably produced by the same cause, is difficult to estimate. The average day of disease on which the rash appeared, irrespective of that on which antitoxin was given, was, in 193 cases, the eleventh. The rash, therefore, falls within the period during which cardiac vomiting is most common; in fact, their concurrence is not infrequently observed, but, as this may be mere coincidence, such instances must be excluded from consideration.

Having regard only to those cases where the co-existing vomiting and rash were practically the only symptoms, and rejecting those at all doubtful in respect of the kind of rash or for other reasons, I find that vomiting accompanied a serum rash in 9 out of 451 cases of genuine diphtheria treated with antitoxin. Four of these patients subsequently developed, after intervals of varying length, typical attacks of cardiac vomiting, but the remainder did not vomit again during their stay in hospital.

Exceptionally in delicate children both vomiting and rash appear shortly after injection. Thus, in a girl, aged five years, who had twice previously suffered from diphtheria, probably treated with antitoxin, and was now admitted as a relapsed case, injection of 9,000 units caused in 3 hours a typical brilliant urticaria, and in 5½ hours vomiting, which lasted 4 hours, and then passed completely away without any further recurrence.

Finally, Dr. Sims Woodhead, commenting on the table on page 68 of his report on antitoxin, which deals with the comparative occurrence of complications in non-diphtheritic cases treated with and without antitoxic serum, notices the increased percentage of vomiting without suggesting any definite explanation. The increased occurrence of albuminuria is probably, as he says, to be explained by certain of the doubtful cases being in reality scarlet fever, but the proportionate increase in vomiting is greater than this, which would not be the case in that

disease. It seems likely, therefore, that it is due, at least in part, to the serum used. The actual numbers are, in percentages of the total number of cases:—

			Cases treated with Antitoxin.		Without Antitoxin.
1895—Albuminuria	..	..	27·4	..	13·2
Vomiting	..	..	8·9	..	3·7
1896—Albuminuria	..	..	33·09	..	15·8
Vomiting	..	..	15·8	..	5·6

The diarrhœa which sometimes accompanies the rash appears in the cases examined to be an event of greater rarity than the vomiting, and is certainly of less importance; it has therefore not been specially noticed. The balance of evidence points, it will be seen, to some derangement of the absorptive function as a direct consequence of serum injection. This, of course, by no means militates against the employment of antitoxic serum in any case of diphtheria, for, even in the best marked instances, its ill-effects are apparently less pernicious than those of an alveolar abscess, and exert less influence on the body metabolism.

RARE FORMS OF PURPURA IN DIPHTHERIA.

(By H. W. L. BARLOW, M.D., Assistant Medical Officer, Park Hospital.)

The two following cases may be fitly compared with the two somewhat similar ones communicated to the *Lancet*, in 1901, by Drs. Goodall and Buckley, from the Eastern and South-Eastern Hospitals respectively.

I. A. E., female, aged 5 years. Admitted to the Park Hospital June 22nd, 1901.

Previous history.—Measles and whooping cough in infancy; since then healthy until three months ago, when she was noticed by parents to be ailing. About a week before admission, according to parents' statement, bruises appeared on the skin for which there was no history of injury to account.

On admission there were numerous subcutaneous hæmorrhages of varying age on the arms and legs, as a rule, purplish in colour; the throat and tongue were foul, there was membrane on both tonsils, but no rash. Pulse feeble and quick.

June 22nd.—Retching slightly, face of earthy pallor, throat dry, membrane indefinite, much swelling and œdema. Pulse variable, at first rather slow, then at 5 p.m. 180, and still rapid in evening. Slight pyrexia, no albumen, restlessness, thirst, and occasional vomiting at night.

June 24th.—Distinct right facial paralysis came on about 1 p.m.

June 25th.—Uses left hand more than right. A bruise has appeared on the sacrum; heart regular, sounds clear. Culture shows Klebs-Lœffler bacillus.

June 26th.—Persistent facial paralysis. Fauces clean. Low, musical, systolic bruit at apex; slight cardiac dilatation, action regular. No fresh hæmorrhages.

June 27th.—Throat clean, old hæmorrhages fading, none fresh. Facial paralysis continues.

July 1st.—Paralysis and bruises as before. Throat clean. Carious tooth and swollen face on left side.

July 3rd.—Facial paralysis still very marked. Pulse regular.

July 6th.—Lower lip pouting, pallid features. Pulse regular.

July 9th.—Morose and cross; no definite pain. Small hæmatoma over left trochanter, painful on pressure. Some pain referred to right side of face and ear. Gums bleed slightly; no other evidence of scurvy. Will eat nothing but milk, jam, bread and butter. Abdomen full, hyper-sensitive; joints normal.

July 10th.—Fresh hæmatoma on forehead.

July 11th.—Child began to vomit brownish fluid about 2 a.m., and continued to do so at intervals subsequently. A black stool was passed after an enema. Gums bled freely; a fresh crop of hæmorrhagic spots appeared on skin of abdomen; there was free bleeding from one finger, and the spleen became much enlarged, its lower end projecting through the abdominal wall. Between the attacks of vomiting the pulse was good.

The child became comatose, and died at 8.15 a.m.

Autopsy.—Twenty-four hours after death. There was a small patch of recent pleurisy, lungs and heart normal. A hæmorrhage extended under the pelvic peritoneum posteriorly; there was a hæmorrhagic infiltration of the bronchial and mesenteric lymphatic glands, and a large hæmorrhage into the ventricles of the brain, originating apparently from a vessel in the velum, from which it extended forwards into the lateral and backwards into the fourth ventricles, disorganising parts of the pons and corpus striatum. There were two other smaller hæmorrhages in the brain substance, one in the white matter of each hemisphere. There were no hæmorrhages in the serous membranes or stomach. The liver was a little fibrous; the spleen very much enlarged and friable, without definite hæmorrhages into its substance. The kidneys were pale, with whitish areas projecting beyond the general level of the surface; microscopically, they showed an intense interstitial nephritis, with much round-celled infiltration, though no albumen could be detected before death.

II. E. J., male, aged 4 years. Admitted October 29th, 1901, on the third day of a severe attack of diphtheria. After the throat had cleaned, cardiac vomiting commenced on *November 5th*, and continued severely till *November 11th*, when it gradually ceased under the influence of opium and strophanthus, recurring from time to time until the 15th. During all this time rectal feeding was practised. The heart was dilated, the mouth was dry, the tongue furred, and there was very great emaciation with general paresis.

On *November 21st*, a rash of subcutaneous purpuric spots appeared on the front of the chest, not on the back. They slowly increased in number during the week following, but remained confined to the chest and chiefly appeared over the ribs and clavicles, none being found at points of pressure. There was no bleeding or sponginess of the gums, but fresh milk and later raw beef juice were given by mouth as much as possible. They had, however, to be discontinued owing to further vomiting.

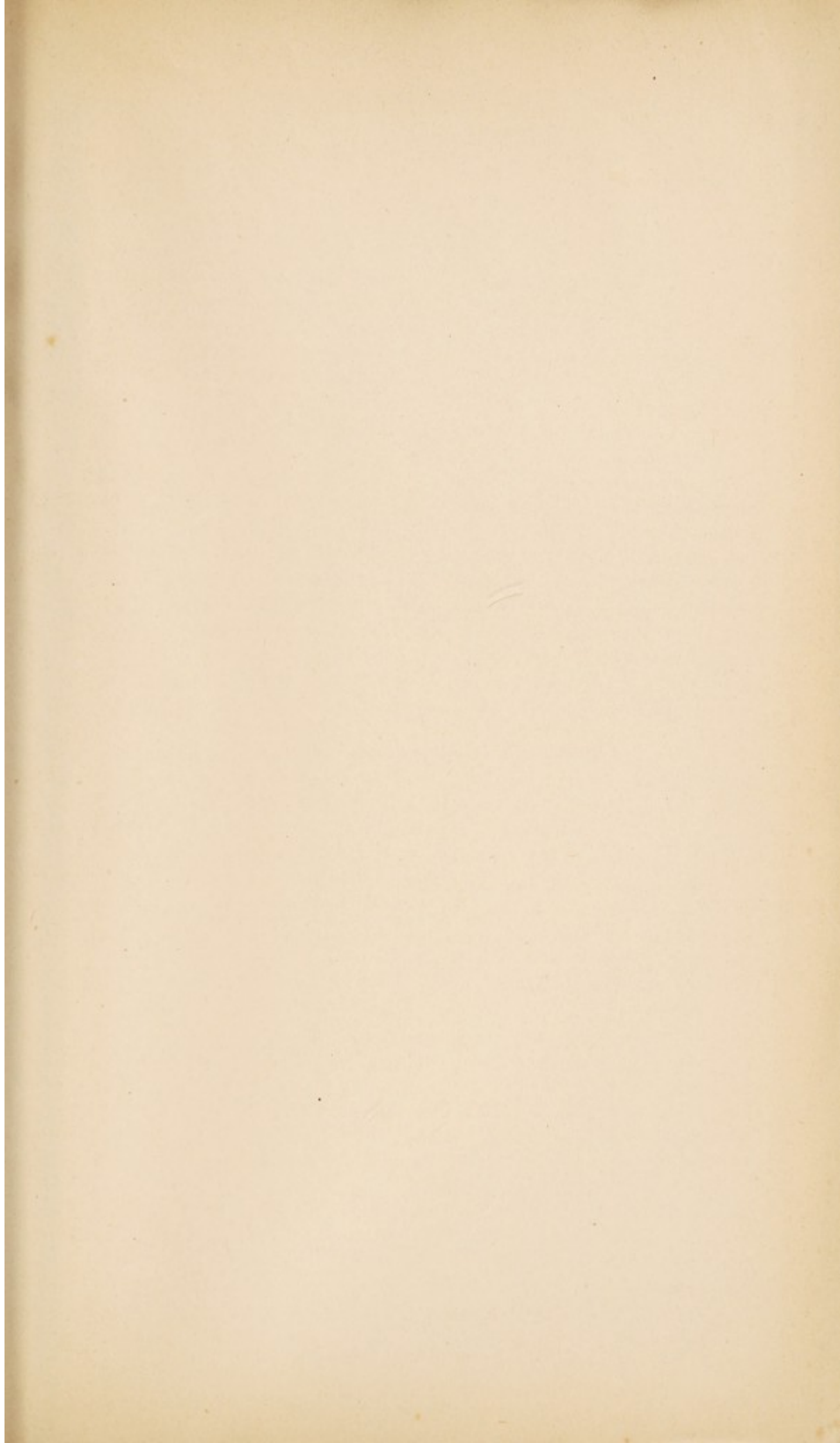
On *December 6th*, slight hæmaturia occurred; the purpuric spots had then considerably increased in numbers and involved the skin of the abdomen, skin over left sterno-mastoid, that on arms, thighs, back of wrists, and front of knees and ankles, but not the buttocks or back; they were very small, the largest about two or three millimetres across, and faded slowly from day to day.

Death occurred on the morning of *December 11th* from increasing weakness and diaphragmatic paralysis. The temperature was subnormal during the purpuric eruption. There were no traces of albumen except on November 23rd.

Autopsy.—Brain not examined. The phrenics, anterior crural, vagi, and probably many other nerves showed the typical segmental degeneration described by Martin. There were no subserous hæmorrhages. The stomach contained a little dark-coloured fluid, but showed no submucous hæmorrhages. The colon was full, the small intestine empty, the sigmoid ballooned and thinned. The lungs showed some basal œdema. The muscular tissue of the heart was pale and flabby; microscopically, it showed some cloudy swelling, no definite fatty degeneration. The spleen was small and firm, showing no hæmorrhages; the kidneys and suprarenals were congested, but otherwise normal, both microscopically and to the naked eye. Microscopic examination of the stomach, sigmoid, and small intestine yielded negative results; the liver alone of all the organs showed a perilobular, fatty degeneration. The bladder contained some eight ounces of urine, which was free from albumen.

It is a little difficult to classify these two cases. In many points they do not resemble the two first mentioned. The first was probably purpura hæmorrhagica complicated by mild diphtheria, though the kidney condition suggests the possibility that both may have followed a previous unnoticed attack of scarlet fever. The purpura in the second case was most likely of scorbutic origin, related to the bleeding from gums and mouth sometimes seen in paralytic cases maintained on rectal feeding. Neither appears to have been allied to the ordinary hæmorrhagic diphtheria in which the purpuric rash appears on an average on the fifth or sixth day of disease, and the stomach wall is almost always affected. In Dr. Goodall's case, again, the purpura was complicated by an erythematous rash, probably an effect of antitoxin, which is not involved in the cases here reported. It was not given in the former case, for, though a provisional diagnosis of hæmorrhagic diphtheria was at first made, it was soon seen to be inadequate, and in the latter the purpura appeared at a later period than is usual for an antitoxin rash. It is unfortunate that, owing to an oversight, in neither case was the blood microscopically examined.

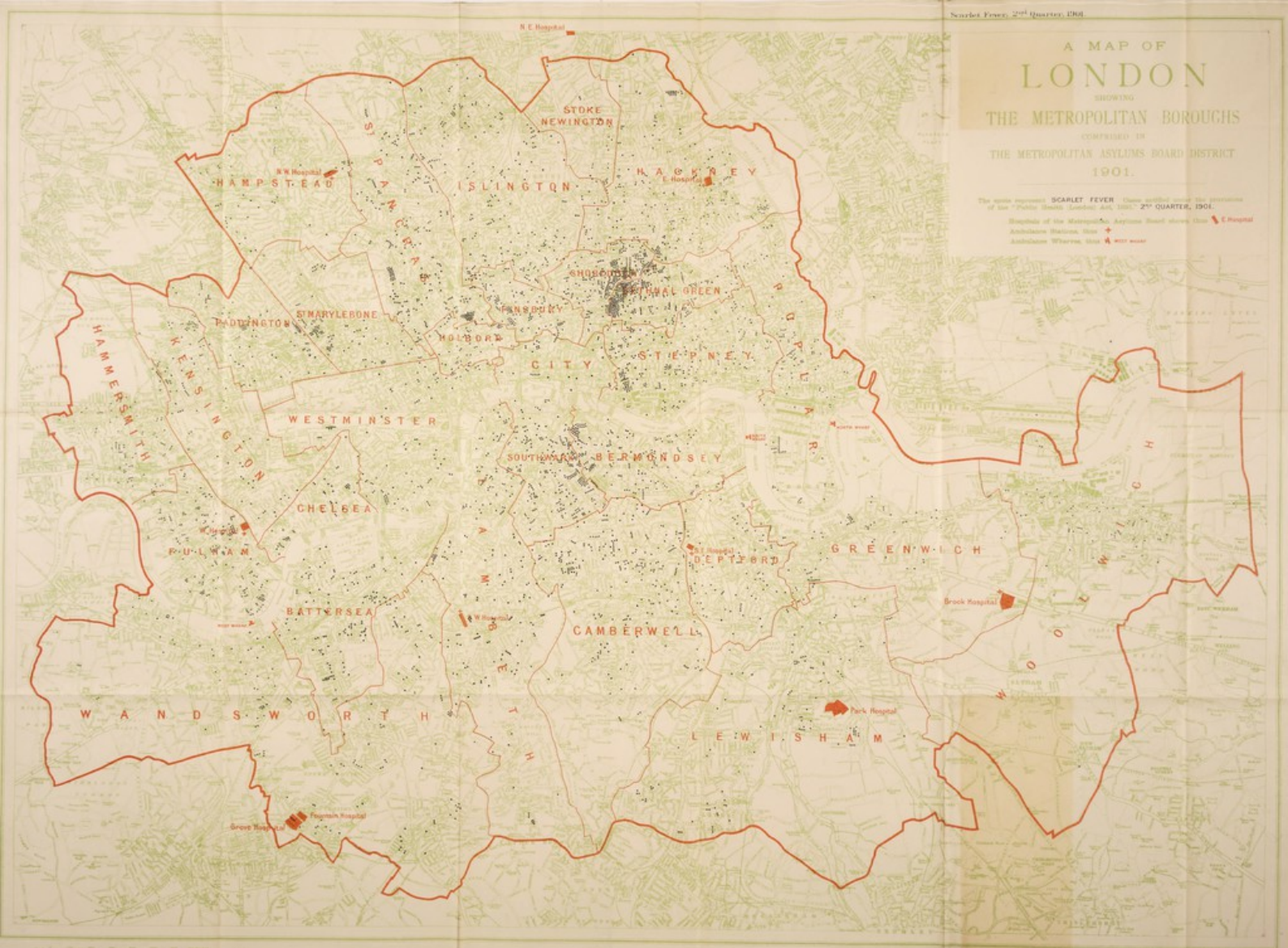
END OF VOL. II



Scarlet Fever, 2nd Quarter, 1901

A MAP OF
LONDON
SHOWING
THE METROPOLITAN BOROUGHS
CONTAINED IN
THE METROPOLITAN ASYLUMS BOARD DISTRICT
1901.

The spots represent SCARLET FEVER cases notified under the provisions of the Public Health (London) Act, 1900, 2nd QUARTER, 1901.
Boundaries of the Metropolitan Asylums Board shown in red
Asylum Stations, blue +
Asylums Wherein, blue & with name



Scarlet Fever, 3rd Quarter, 1901.

A MAP OF LONDON

SHOWING
THE METROPOLITAN BOROUGHES
COMPRISED IN
THE METROPOLITAN ASYLUMS BOARD DISTRICT
1901.

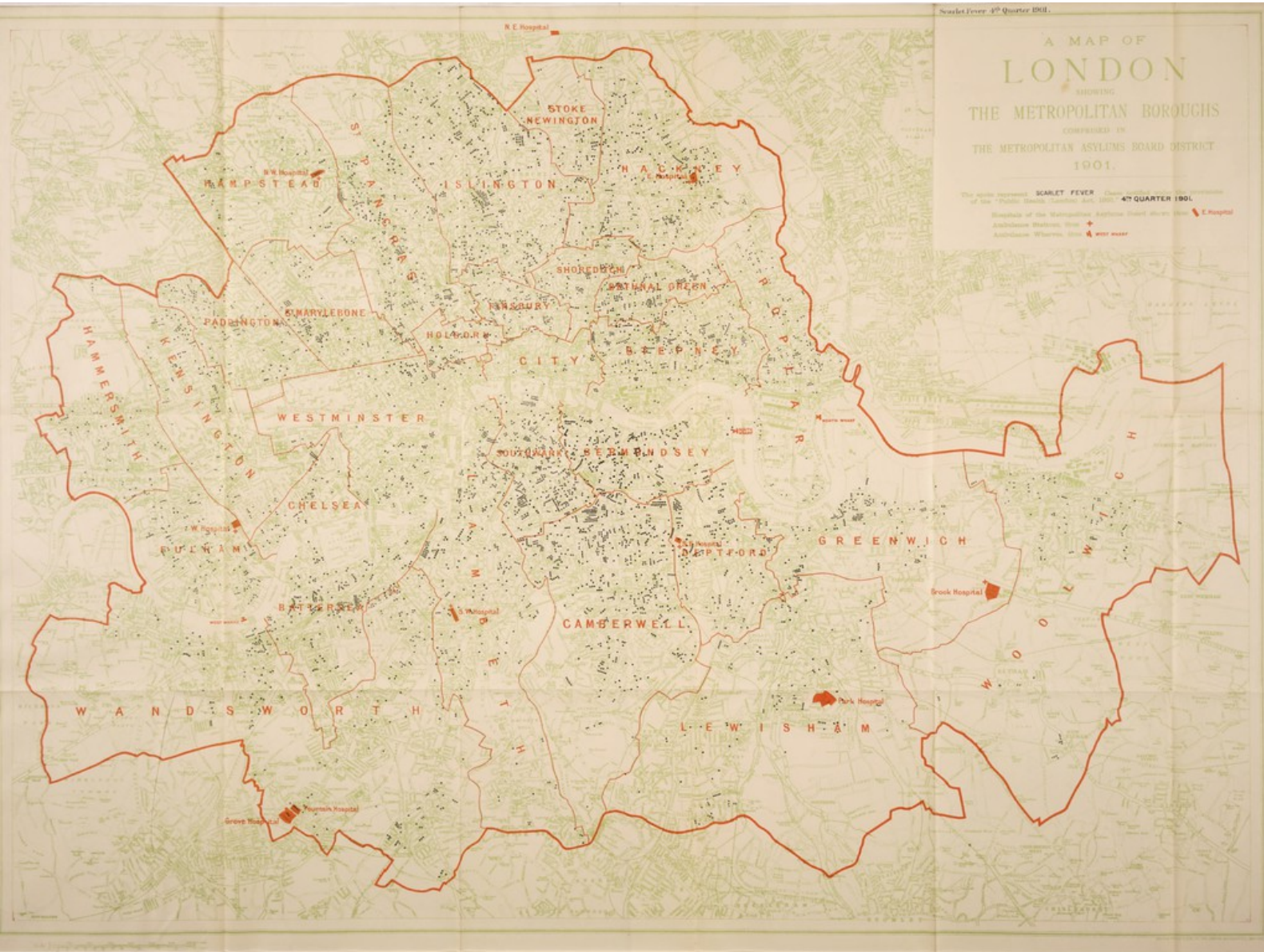
The spots represent SCARLET FEVER Cases notified under the provisions of the "Public Health (London) Act, 1891," 3rd QUARTER 1901.
Boundaries of the Metropolitan Asylum Board District. Hospital
Asylum Stations.
Asylum Wharves.



Scarlet Fever 4th Quarter 1901.

A MAP OF
LONDON
SHOWING
THE METROPOLITAN BOROUGHES
COMPRISED IN
THE METROPOLITAN ASYLUMS BOARD DISTRICT
1901.

The whole of the SCARLET FEVER cases notified under the provisions of the Public Health (London) Act, 1891, 4th QUARTER 1901.
Headquarters of the Metropolitan Asylums Board shown by the L Hospital.
Asylum Stations, the Asylum Wharves, and other water.



Diphtheria, 17 Six Months, 1901.

A MAP OF
LONDON
SHOWING
THE METROPOLITAN BOROUGHS
COMPRISED IN
THE METROPOLITAN ASYLUMS BOARD DISTRICT
1901.

The spots represent DIPHThERIA Cases notified under the provisions
of the "Public Health Act, 1901," in SIX MONTHS, 1901.
Hospitals of the Metropolitan Asylums Board shown thus: N.E. Hospital
Aldershot Hospital, etc. +
Aldershot Hospital, etc. +
Aldershot Hospital, etc. +



Printed & Entered, 1901.

A MAP OF
LONDON
SHOWING
THE METROPOLITAN BOROUGHES
COMPRISED IN
THE METROPOLITAN ASYLUMS BOARD DISTRICT
1901.

The map represents **TYPHUS & ENTERIC FEVER** cases notified under the provisions of the Public Health Act, 1875.
Boundary of the Metropolitan Asylum Board shown thus  Hospital
Ambulance Station, thus  Ambulance Station, thus  Ambulance Station



