

## **Annual report for the year 1906 : (9th year of issue) / Metropolitan Asylums Board.**

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METROPOLITAN ASYLUMS BOARD.

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# ANNUAL REPORT

FOR THE YEAR

1906.

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PRICE 5/-

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# ANNUAL REPORT

FOR THE YEAR

1906.

(9th YEAR OF ISSUE.)

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

1907.

*BIBLIOGRAPHICAL NOTE.*—Before the year 1886 no regular annual record of the work of the Board was published. (In the year 1871, however, and again in the years 1876 and 1877, the Chairman of the Board issued a report of the nature of an annual report, with some statistics.) For the years between 1886 and 1897, both inclusive, the Chairman of the Board issued an annual report and the Statistical Committee also issued a report, each separately. These reports may, together, be taken as the reports of the Board for those years.

For the year 1898, and for subsequent years, an annual report of the Board, and so called, has been issued, consisting of a summary of the work of the Board for the year, the reports of the several standing committees, and the report of the Statistical Committee. The reports for the four years, 1898, 1899, 1900, and 1901 were issued in two volumes: vol. I. containing the report of the Board and the reports of the standing committees, except that of the Statistical Committee, which itself formed vol. II. The report for the year 1902 commenced a new series in one volume, bound in cloth and furnished with an index. The reports are sold to the public at 5s. a copy, in one volume or two as the case may be.

The separate reports of the Chairman of the Board above referred to and the first report of the Statistical Committee (1886) were of foolscap size; all the remainder are of the size of this volume.

In the report for 1888 a spot map showing smallpox admissions was included. In the report for 1889 spot maps showing admissions of all diseases to the Board's hospitals were included. In the report for 1890 were included spot maps of notifications also. In the reports for 1891 to 1902 spot maps of notifications but not of admissions were included. In the reports for 1903 to 1905, spot maps of notifications of smallpox and typhus cases only are included.

The following reports are nearly or wholly out of print:—The reports issued in 1871, 1876, and 1877. The report of the Statistical Committee for 1886. The report of the Board (two vols.) for 1900. (For this year—1900—however, all those parts of the report which referred to infectious diseases have been collected and separately printed, and copies may still be obtained. For the years 1899 and 1900 a somewhat similar collection was made as regards the imbecile asylums, and copies may still be obtained.)

From the years of the opening of the several institutions to 1885, annual reports of the medical superintendents, with statistics, and, in some cases, reports by the committees of management, were issued separately, and copies of many of them may still be had.

The annual reports of the Captain-Superintendent and Committee of the Training Ship "Exmouth" may be obtained in a separate form from 1877; the reports of the Children's Committee from 1898; the reports of the Ambulance Committee from 1884 to 1897; and the reports of the Finance Committee from 1900.



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LIST OF MEMBERS OF THE BOARD, SHOWING THE COMMITTEES ON WHICH EACH WAS SERVING AT THE CLOSE OF THE YEAR.

MANAGERS ELECTED BY THE SEVERAL METROPOLITAN BOARDS OF GUARDIANS.

UNION OR PARISH.	NAME OF MANAGER	ADDRESS.	COMMITTEES (AS AT END OF 1906).
Bermondsey	Eccroyd, W. H.	64, Bermondsey Street, Bermondsey, S.E.	Asylums, Contract, Works.
Bethnal Green	Barnard, A. P.	309, Hackney Road, N.E.	Hospitals.
Bloomsbury	Smith, Prof. W. R., M.D., J.F.	5, Pump Court, Temple, E.C.	Hospitals, Statistical.
Camberwell	Brown, R.	32, East Dulwich Road, S.E.	Asylums, Children's, Contract.
Chelsea	Sayer, S.	302, Southbank Street, Camberwell, S.E.	Asylums, Children's, Ambulance.
City of London	Morrison, Rev. W. D., LL.D.	2, Embankment Gardens, Chelsea, S.W.	Finance.
"	Croger, T. R.	114, Wood Street, E.C.	Statistical.
"	Cross, W. Mann	1, Change Alley, Lombard Street, E.C.	Finance, Ambulance, Statistical.
"	Lile, J. H.	4, Ludgate Circus, E.C.	Hospitals, Children's, Contract, Works.
"	Marr, Rev. J. F.	7, The Crescent, Minories, E.C.	Hospitals.
"	Monckton, A.	189, Upper Thames Street, E.C.	Children's.
Fulham	Thomas, Charles	" Priory View," 46, Upper Richmond Road, East Sheen	Children's, " Exmouth."
Greenwich	Oldman, F. J.	85, Arbutnot Road, New Cross, S.E.	Asylums, Children's, Works.
Hackney	Bates, Thomas	67, Clifden Road, Lower Clapton, N.E.	Hospitals, Children's.
"	Beurle, W. L.	Linden House, 331 Victoria Park Road, N.E.	Hospitals, Children's, " Exmouth."
Hammersmith	Pope, Rev. G. W.	155, Holland Road, Kensington, W.	Hospitals, Ambulance.
Hampstead	Shedfield, Col. Frank	" Palaspai," Daleham Gardens, Hampstead, N.W.	Hospitals, Asylums, Statistical.
Holborn	Baker, Miss I. M.	37, Brooke Street, Holborn, E.C.	Hospitals, Children's.
"	Edwards, J. H.	10, Osbaldeston Road, Stoke Newington, N.	Hospitals, Children's.
Islington	Elliot, G. S.	14, Upper Street, Islington, N.	Children's.
"	Lambert, Samuel	125, Barnsbury Road, N.	Hospitals, Asylums, Contract, " Exmouth."
"	Varley, Miss Amelia	82, Newington Green Road, Islington, N.	Hospitals, Children's.
Kensington	Simpson, E. Palgrave	6, Durham Villas, Phillimore Gardens, W.	Asylums, Statistical.
"	Webb, Colonel R. F., D.L., J.P.	6, West Cromwell Road, South Kensington, S.W.	Finance, Asylums, Works.
"	Wilde, Miss M. J.	84, Lexham Gardens, W.	Asylums, Children's.
Lambeth	Bowers, R. W.	8, Albert Square, Clapham Road, S.W.	Children's, Contract, Statistical.
"	Barridge, Alfred	" Saxonsure," 46, Herne Hill, S.E.	Hospitals, Asylums, Ambulance, Contract, Works.
"	Clark, Arthur	" Lynton," Crane's Park, Surbiton	Asylums, Children's, Works.
Lewisham	Huggett, A.	29, Loampit Vale, Lewisham, S.E.	Hospitals, Asylums, Statistical.
Mile End Old Town	Hirst, Rowland	237, Mile End Road, E.	Ambulance.
Paddington	Cole, S. J.	" Fernleigh," 123, Fernhead Road, W.	Hospitals, " Exmouth."
"	Gell, H. W., M.B.	24, Palace Court, W.	Asylums, Children's, Ambulance, " Exmouth."
Poplar	McCarthy, J. T.	41, Canton Street, Poplar, E.	Hospitals, Children's.
St. George's	Bramston, Miss Georgina	39, Greycoat Gardens, Victoria Street, S.W.	Finance, Hospitals, Children's, Contract.
"	Farmer, Col. G. L. M.	4, Lowndes Street, S.W.	Finance, Children's, Ambulance, Statistical.
"	Lattman-Johnson, Henry	17, Rutland Gate, S.W.	Finance, Hospitals, Asylums.
"	Walden, R. W.	" Bella Vista," Upper Warlingham	Asylums, Children's, Statistical.

MANAGERS ELECTED BY THE SEVERAL METROPOLITAN BOARDS OF GUARDIANS—continued.

UNION OR PARISH.	NAME OF MANAGER.	ADDRESS.	COMMITTEES (AS AT END OF 1906).
St. George-in-the-East	Martineau, P. M., J.P., D.L., LL.B. ( <i>Vice-Chairman of the Board</i> )	"Littleworth," Esher, Surrey	<i>Ex-officio member of all committees.</i>
St. Marylebone	Browne, Elliott S., L.R.C.S.I., L.R.C.P.I.	5, Cavendish Mansions, Langham Street, W.	Hospitals, Children's, Statistical.
"	Dennis, Walter	Ifield House, Carshalton, Surrey	Hospitals, Children's.
"	White, Edward, J.P.	20, Upper Berkeley Street, W.	Children's, Contract, Works.
St. Pancras	Boden, Anthony	34, Maitland Park Villas, N.W.	Hospitals, Asylums, Works.
"	Thornley, Joseph, J.P.	53, Camden Square, N.W.	Hospitals, Children's, Works.
"	Wetenhall, W. J., J.P.	8, Maitland Park Villas, N.W.	Asylums, Children's.
Shoreditch	Wakeling, E. J.	145, New North Road, Hoxton, N.	Children's, "Exmouth."
Southwark	Cornell, Thomas	63, Borough Road, S.E.	Asylums, Children's, Ambulance, "Exmouth."
"	Neville, William	33, Trinity Square, Borough, S.E.	Finance, Hospitals, Asylums, Contract.
Stepney	Mills, F. C., J.P.	294, Burdett Road, E.	"Exmouth."
Strand	Jaxone, H. L. D'Arcy	16-17, Green Street, Leicester Square, W.C.	Hospitals, Children's, Works.
Wandsworth	Lower, J.	125, Suggden Road, Lavender Hill, S.W.	Asylums, Children's.
"	Penfold, William F.	Burwood House, Upper Tooting, S.W.	Asylums, Children's.
"	Sullivan, A.	"Sunnydene," St. Nicholas Road, Balham, S.W.	Hospitals, Ambulance, Works.
Westminster	Lyon, H. Thomson	34, St. James's Street, S.W.	"
Whitchapel	Brown, James, J.P.	5, Kent Terrace, Regent's Park, N.W.	"
Woolwich	Graham, Lieut.-Col. W. J. B., V.D.	"Whitehouse Villa," Woodlands, Old Charlton, Kent	Asylums, Contract, Works.

MANAGERS NOMINATED BY THE LOCAL GOVERNMENT BOARD.

NAME OF MANAGER.	ADDRESS.	COMMITTEES (AS AT END OF 1906).
Crooks, William, M.P.	81, Gough Street, Poplar, E.	Children's.
Donerale, The Right Hon. The Viscount	91, Victoria Street, Westminster, S.W.	Hospitals, Ambulance, Statistical.
Drage, Geoffrey	29, Cadogan Square, S.W.	"Exmouth."
Goldie, Colonel J.	41, Charleville Road, West Kensington, W.	Hospitals, Asylums, "Exmouth."
Helby, J. T.	"Glengarriff," Cobham, Surrey	Finance, Hospitals, Asylums, Ambulance, Works.
Hensley, Sir Robert M., J.P.	"Glendon House," Putney, S.W.	Finance, Asylums.
Hunt, Jackson, J.P.	23, Montagu Square, W.	Finance, Hospitals, Ambulance.
Inderwick, Miss E. F.	8, Warwick Square, S.W.	Hospitals, Statistical.
Meinertzhagen, E. L., J.P.	4, Cheyne Walk, Chelsea, S.W.	Hospitals.
Portman, Berkeley	22, Tedworth Gardens, Chelsea, S.W.	Finance.
Ritchie, Gerald	39, Cheyne Walk, Chelsea, S.W.	Hospitals, Children's.
Rolfe, Vice-Admiral E. N., C.B.	167, Victoria Street, Westminster, S.W.	Asylums, "Exmouth," Works.
Scovell, A. C., J.P. ( <i>Chairman of the Board</i> )	8, Primrose Mansions, Battersea Park, S.W.	<i>Ex-officio member of all committees.</i>
Sprankling, Rev. James	St. George's Cathedral House, Southwark, S.E.	Hospitals, Children's, Works.
Stanley, Hon. Maude A.	32, Smith Square, Westminster, S.W.	Children's.
Strong, Richard, J.P.	"Helstonleigh," Champion Park, Camberwell, S.E.	Hospitals, Asylums, Statistical.
Vallance, W., J.P.	55, Tressillian Road, St. John's, S.E.	Finance, Asylums, Children's, "Exmouth."



## METROPOLITAN ASYLUMS BOARD.

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### ANNUAL REPORT OF THE BOARD FOR THE YEAR 1906.

#### INTRODUCTION.

**Board of  
manage-  
ment.**

Towards the close of the year the Managers received with profound regret the resignation of Sir Edwin Henry Galsworthy, J.P., D.L. For a period of nearly 40 years, during 20 of which he filled with conspicuous ability the position of Chairman of the Board, Sir Edwin was intimately associated with the work of the Managers, and they cordially recognise that the success which has attended their efforts towards the amelioration of the condition of the infectious sick and the afflicted poor of the metropolis has been largely due to his wide knowledge of affairs and to his skilful guidance during his prolonged occupancy of the chair.

During the past 12 months the Managers have had to lament the removal from their ranks by death of Mr. W. B. Cochran, the second chairman of the Children's Committee; of Mr. R. M. Flood, representative of the Lewisham Union; of Mr. J. G. White, one of the representatives of the City of London Union; and of Dr. J. R. Hill, whose services to the Board as chairman both of the Asylums Committee and of

the Hospitals Committee will be long and gratefully remembered. Mr. F. Purchase, one of the representatives of St. Pancras, resigned his seat on account of failing health.

To fill these vacancies Mr. Gerald Ritchie and Mr. Berkeley Portman were nominated as Managers by the Local Government Board, whilst Mr. Alfred Huggett (Lewisham), Mr. W. J. Wetenhall, J.P. (St. Pancras), and the Rev. J. F. Marr (City of London), were appointed by their respective boards of guardians.

The work of the Board during 1906 will be chiefly memorable for the success which has attended the efforts of the Managers and of the several standing committees to consolidate and harmonise the regulations which have from time to time been adopted by the Board, and the strict observance of which experience has shown to be so essential to the maintenance of sound and economical administration.

The results of the policy thus consistently pursued during the years which have elapsed since the creation of central committees in 1899 are evident in almost every branch of the Board's work, and it is a matter for congratulation that, in spite of the fact that the average daily number of inmates and officers maintained in the institutions under the Managers' control during 1906 was considerably in excess of the number maintained during any previous year, the net expenditure during the year ended at Michaelmas, 1906, viz., £1,032,707, was only £20,603 over and above that of the previous 12 months, nearly one half of which was due to an increase in the amount of interest on and repayment of loans.

The only branches of the Board's work that failed to show a decreased expenditure were the fever hospital and land ambulance services, and in these cases the increase when compared with the expenditure of the previous 12 months was only at the rate of 8 per cent., although the average number of patients under treatment, viz., 4,096 in 1906, as against 3,396 in 1905, showed an increase of approximately 20 per cent.

In all other branches of the Board's work the expenditure showed an appreciable, and in some instances a substantial, decrease, and when it is borne in mind that the economy thus effected has gone hand in hand with increased efficiency of administration, the Managers have every reason to be satisfied with the results of their year's work.

Of the expenditure on the general account, 63 per cent. was in respect of the infectious hospitals and ambulance services, 26 per cent. in respect of the asylums, whilst the remaining 11 per cent. was expended on the several schools and homes for children.

During the year ended at Michaelmas, 1906, the amount borrowed



by the Managers was only £64,320. this being the lowest amount borrowed by the Board in any one year since 1892. On the other hand, no less than £206,544 was repaid during the same period, this being the highest amount repaid in any one year in the history of the Board. The indebtedness of the Board at the end of the year was therefore decreased by the substantial sum of £142,224, a result which the Managers may regard with more than ordinary satisfaction in view of the fact that the Board's indebtedness had shown an increasing figure annually since 1892.

In this connection it will be of interest to the Managers to be reminded that during the 39 years which have elapsed since the creation of the Board they have raised on loan for the purposes of the district £5,606,799, of which £2,190,801 has been repaid, so that the Board's net indebtedness at the end of the financial year on the loan account was £3,415,998.

As the result of suggestions put forward as far back as July, 1900, the Local Government Board on the 19th April last issued an order to amend and improve the system of payment of accounts by the Managers. Under the terms of this order the appointment of a personal treasurer has been revived and the office conferred upon the present accountant, who, in accordance with the provisions of such order, has been directed to keep his account at the head office of the London and County Banking Co., Ltd., and to provide a guarantee in the sum of £10,000. There is every reason to believe that the system thus inaugurated will be a great advance on the previous one in security and efficiency.

Amongst other matters discussed in the annual report of the Finance Committee (p. 97) may be mentioned the recovery, where possible, of cost of maintenance of infectious patients—a proposal upon which the Committee reported adversely; the maintenance of a sufficiently substantial working bank balance to meet current liabilities, and the consolidation of the regulations governing the subordinate staff wages scales in all branches of the Board's service; whilst in the same report interesting statistics will be found relating to the superannuation of officers, the revaluation of their emoluments for superannuation and other purposes, the assessment of the Board's properties, and other matters.

**Royal Commission on the Poor Laws and Relief of Distress.** On the 23rd July last the Chairman of the Board and the Clerk to the Board gave evidence before this Commission as to the work of the Metropolitan Asylums Board and the gradual growth of its duties and responsibilities since its establishment in 1867 up to the present time.

Their evidence dealt, *inter alia*, with the constitution and composition

of the Board of Management and the extent of its operations, and explained in detail the reforms which have been effected and the improvements made from time to time in the organisation of its work, the control of its finances, and the administration of its institutions.

**Proposed  
sanatoria  
for con-  
sumptives.**

At the beginning of 1906 the Managers were still awaiting an authoritative expression from the Local Government Board on the question of the provision by the Metropolitan Asylums Board of hospital accommodation for consumptive patients, and it was not until the 22nd March last that they received a communication from the Local Government Board in which they stated that the information before them did "not appear to afford sufficient justification for the very heavy outlay which would be involved in the proposal." The wisdom of this decision can hardly be questioned when regard is had to the uncertainty which still prevails as to the probable number and class of patients who would require hospital treatment; to the great prospective cost to the ratepayers of the metropolis for providing such accommodation; and to the anticipated difficulty of inducing persons suffering from phthisis to submit themselves voluntarily to hospital treatment during the early stages of the disease, when such treatment would prove of most benefit to them. Another objection which has been urged in connection with the provision by the metropolis alone of hospital accommodation for consumptives is that unless the charge for the erection, equipment, and maintenance of such hospitals were made a national one, and unless similar provision were simultaneously made in the provinces, persons afflicted with phthisis would flock to London from all parts of the country, with results which might be prejudicial to the metropolis. These considerations point to the conclusion that the question is one which concerns not only the metropolis, but the country at large, and is, moreover, of such magnitude in itself and of such importance to the community generally as to demand the serious consideration of the Government before it can be effectually dealt with.

**Infectious  
hospitals.**

(a) Fever and  
diphtheria.

During 1906, 26,004 patients were admitted into the fever hospitals of the Board, 1,237 died, and 24,060 were discharged.

There were 4,931 cases under treatment at the end of the year.

The admissions show an increase of 2,150 over those of 1905, and are in excess of the highest number hitherto admitted into the Board's fever hospitals during any one year.

Fever was very prevalent in the metropolis during the late summer and autumn, the highest number of patients under treatment at any one time

having been reached on the 20th November, when 5,498 patients found accommodation in the several hospitals of the Board, this number being only 212 less than the highest number the Board have previously been called upon to accommodate at any one time, viz., 5,710 on the 21st November, 1899.

The re-opening on the 2nd July of the South-Eastern Hospital at New Cross, after reconstruction, was of great assistance to the Managers in meeting the increased pressure on their accommodation during the autumn, the removal of a patient in not a single instance having been refused or unduly delayed.

A notable feature in connection with the hospital treatment of fever patients during the year has been the increased use which has been made of the convalescent hospitals. During the height of the epidemic, viz., in the month of November last, the average daily number of convalescent scarlet fever patients under treatment was 1,627, as against 1,489 during the corresponding month of 1905. In December the average daily number was 1,606 in 1906, as against 1,292 in 1905; whilst taking the average of the monthly averages of the year the numbers in the Northern and Gore Farm Hospitals during 1906 as compared with 1905 were as 1,112 to 772.

Other matters of interest to which attention is directed by the Hospitals Committee in their annual report (p. 1) are the appointment of a medical investigator to advise upon various subjects connected with the infectious hospital service and other matters; the discharge of recovered patients from convalescent hospitals; the adoption of a scheme involving the erection of stables at Belmont and new central laboratories at Peckham in connection with the preparation of diphtheria antitoxin and bacteriological work; the decision to admit membranous croup, whether diphtheritic in nature or not, to the hospitals of the Board; and the experiment of providing additional isolation accommodation by means of cubicle wards at the North-Eastern and South-Western Hospitals.

Exceptional immunity from smallpox for the fourth consecutive  
 (b) Smallpox. year has again been enjoyed by the metropolis, only 27 patients, the last of whom left on the 7th August, having been under treatment during the whole year.

The ambulances of the Board removed to hospital during 1906  
**Ambulance** 25,893 fever and 24 smallpox patients; 405 persons suffering  
**service.** from dangerous infectious disorders to other places than the Managers' hospitals; and 424 medical and surgical cases to general hospitals and other places.

In addition to the above cases, 734 imbeciles, 318 children suffering from ophthalmia, 58 from ringworm, and 271 defective and other children were conveyed to and from the Board's institutions.

The mileage run by the vehicles engaged in the above removals, in the transfer of patients from one institution to another, and in other work was 388,265, and was greater than in any previous year with the exception of the year 1902.

In their annual report (p. 90) the Ambulance Committee advert to the progress made during the year in the substitution of motor for horse traction for ambulance purposes, and again call attention to the facilities offered by the Board to the public for obtaining ambulances at all hours of the day and night.

**Asylums.** During 1906 there were 874 admissions into the imbecile asylums of the Board, 669 deaths, and 117 discharges, leaving 6,678 patients under treatment at the end of the year, of whom 5,818 were adults and 860 children under 15 years of age.

The need of additional infirmary accommodation for adults, which has been the source of considerable anxiety to the Managers for the past few years, was met to some extent in April last by reducing the liberal air space which had previously been allowed for each patient at the Tooting Bec Asylum and thus increasing the accommodation at this institution by 105 beds. The completion of the two new blocks now in course of erection at this asylum will still further augment the accommodation for infirmary cases at the Board's disposal by 207 beds.

A somewhat serious outbreak of enteric fever at Belmont Asylum in June last was the subject of a special enquiry by the Managers, and also by one of the medical inspectors of the Local Government Board, whose conclusions, as embodied in his official report on the subject, are set forth in the Asylums Committee's report (p. 20).

In the annual report of the medical superintendent of Darent Asylum (p. 255) will be found interesting particulars as to the work carried on by the patients in the several workshops, needlerooms, &c., in the industrial section of this asylum where 492 male and 337 female patients are now employed in a manner which is at once beneficial to the patients and remunerative to the institution.

**Children's department.** In the annual report of the Children's Committee (p. 31) will be found both a retrospect of the conditions which obtained in the metropolis amongst poor law children prior to 1897, and a survey of the policy pursued and the work accomplished by the Board in the  
(i.) General.

discharge of the duties then entrusted to them of segregating in separate institutions for curative and educational treatment the metropolitan poor law children suffering from ringworm, ophthalmia, and other infirmities, both physical and mental.

From this report it will be observed that whilst during the past few years there has been a progressive increase in the total number of metropolitan poor law children in receipt of indoor relief, there has not been any corresponding increase in the class of children for whom the Managers have been called upon to provide accommodation, but, on the contrary, a marked decrease.

This decrease is especially noticeable in the case of children suffering from ringworm, and, in a less marked degree, in the numbers suffering from ophthalmia, the consequence being that the amount of accommodation provided by the Managers after careful enquiry 10 years ago is now more than sufficient for the immediate needs of the metropolis. Reference to the report of the Children's Committee will show that the Managers' action in providing the accommodation they did was fully justified; and there can be no doubt that the prompt isolation in separate schools, as and when they have arisen, of cases of ringworm and ophthalmia, and the skilful treatment accorded them when there—and not any over estimate of the probable requirements of the metropolis—are responsible for the decrease which has taken place during the past three years, and which there is every reason to anticipate will be continued.

(ii.) Ophthalmia schools. The total number of patients under treatment in the ophthalmia schools of the Board at the end of 1906 was 500, of whom 284 were in the White Oak School, Swanley, and 216 in the High Wood School at Brentwood. The total admissions to these two schools, viz., 451, showed a slight increase over the numbers admitted during 1905, this being mainly attributable to the admission of a number of boys from the Training Ship Exmouth.

As provision had been made by the Board for the accommodation of 720 children, with a potential increase to 800, it will at once be seen that the Managers now possess a large margin of accommodation for the treatment of children suffering from ophthalmia.

In his report upon the work of the ophthalmia schools during 1906, Dr. Collins calls attention to the fact "that the steady diminution in the number of trachoma cases admitted to the ophthalmia schools would seem to indicate that their establishment and the facilities which they afford for the early isolation of such cases is tending to check the spread of that disease." In this connection, he points out that, during the past year, several children have been admitted with advanced trachoma who had been

resident in their parish schools for some years, and whose eye affection had long escaped detection, and he suggests that many unsuspected cases might be discovered in the poor law schools if systematic examination of the eyes of all the children in the schools were made periodically by skilled observers. This suggestion seems to deserve early consideration.

(iii.) Ringworm schools. The steady decline in the number of ringworm cases under treatment in the schools provided by the Managers at Sutton and Witham during the past three years, viz., from 569 to 339, enabled the Managers to close the latter of these two schools as a ringworm institution, and thus to save on the treatment of this disease an expenditure of £5,000 per annum on establishment charges. This satisfactory result is attributable to two causes, viz., (a) prompt isolation, and (b) the introduction of the X-ray system in the treatment of the disease.

In his annual report, Dr. Colcott Fox, the Board's dermatologist, points out that the adoption of this system of treatment has brought about a revolution in the treatment of ringworm, and that its advantage "over the older method is that it is expeditious, and hence economical, certain when carried out by an expert, and painless."

No fewer than 375 children have now been discharged cured by the X-ray method of treatment.

(iv.) Seaside homes. The alterations carried out at the home at Millfield on lines recommended by Sir William Broadbent, Bart., M.D., with a view to its better utilisation for the open-air treatment of early cases of pulmonary phthisis have now been completed and, according to the report of the medical officer of the home, have materially contributed to the facilities for the treatment of patients suffering from this disease.

Beyond an outbreak of scarlet fever at S. Anne's Home towards the end of the year, and the decision to provide at East Cliff House further facilities for dealing with cases of tubercular bones and glands, many of which require operative treatment, there is nothing special to report in connection with the Managers' Seaside Homes.

During the year there were 777 direct admissions into these homes, 10 deaths, and 739 discharges, leaving 335 cases under treatment at the end of the year.

(v.) Homes for the mentally defective. The abandonment of the Bridge School as an institution for the treatment of ringworm cases enabled the Managers to open this school in June last as a working home for male feeble-minded cases, and at the end of the year 63 cases were under treatment therein.

A working colony for feeble-minded girls is located temporarily in

some of the cottages on the High Wood School estate which are not now required for ophthalmia cases.

The treatment of the feeble-minded and defective in the smaller homes in London has been continued during the year. At the end of the year 182 cases remained under treatment in the institutions for feeble-minded.

The report of the Children's Committee (p. 31) deals at considerable length with the difficulties attending the classification and treatment of feeble-minded male patients; the steps taken by them to obtain a modification of the regulations "to allow of classification not strictly by age, but in accordance with the circumstances of each case," and the results which, so far, have attended their efforts in this direction.

(vi.) Other defective cases. Attention is also called by the Committee to the need of some special provision for children who are (a) blind, (b) deaf or dumb, (c) epileptics, both sane and feeble-minded, and (d) grossly deficient morally, and several typical instances are given of cases for whom the Managers have from time to time been asked by Boards of Guardians to make provision. A report upon certain cases of the types thus indicated has already been transmitted to the Local Government Board, and they have been requested to advise the Managers as to what steps (if any) should be taken for dealing with them pending the report of the Royal Commission which was appointed in 1905 to consider the existing methods of dealing with idiots and epileptics, and with imbecile, feeble-minded and defective persons not certifiable under the lunacy laws.

(vii.) Remand homes. In discussing the work done in the three homes which have been established by the Managers in the metropolis for the more effectual separation of juvenile offenders when on remand, the Children's Committee call attention to the fact that many improvements in the method of treating juvenile offenders are still desirable, not the least important of which is that the remand homes should be made available for the period between arrest and appearance in court, and that the maximum time of remand allowed should be extended beyond the present period of one week.

The number of children admitted into these homes during 1906 was 2,026, of whom 1,714 were boys and 312 were girls.

**Training ship Exmouth.** The work of training boys for the Royal Navy and Mercantile Marine on board the new vessel, which was recently built for the Board for the accommodation of 600 boys and the necessary staff of officers at a total cost £62,497, continues to make satisfactory progress.

The Local Government Board have recently sanctioned the retention on board the Exmouth of a limited number of boys up to an age not exceeding 17 years 3 months. This arrangement will enable the Committee to effect entries in both classes from which boys are now recruited for seamen in the Royal Navy.

During 1906, 279 boys were admitted on board the Exmouth, and 281 were discharged, of whom 58 entered the Royal Navy and 115 the Mercantile Marine.

**Works committee.** Reference to the annual report of the Works Committee (p. 144) will show that works to the approximate value of £72,180 were carried out during 1906 under the supervision of the Engineer-in-chief, of which sum £63,892 was expended on works carried out by contract, and the remainder on works executed by direct labour.

Plans for the adaptation of the remaining buildings of the Belmont Asylum for the accommodation of 523 imbecile patients and the necessary staff, at an estimated cost of between £90,000 and £100,000, were approved by the Managers in May last, and were still under the consideration of the Local Government Board at the end of the year.

Amongst other matters dealt with in the annual report of the Works Committee are the completion of the reconstruction works at the South-Eastern Hospital, on which the Local Government Board have sanctioned an expenditure of £135,200; the completion of the Southern Hospital buildings, on which an expenditure of £284,312 has been sanctioned; the erection of antitoxin stables at Belmont, and the proposed erection of a new boiler house, workshops, &c., at the North-Eastern Hospital, and a bacteriological laboratory and new central stores at Peckham Rye.

**Contract committee.** During 1906, 761 separate contracts were entered into by the Board upon the recommendation of this Committee, for the supply of provisions, necessaries, &c., to the total approximate value of £279,000.

Interesting details will be found in the Committee's report (p. 157) with regard to the work carried out in the central needlerooms, and upon the steps taken and the arrangements made by them for (i.) supplemental and emergency supplies of stores goods, (ii.) the supply of miscellaneous articles not included in current contracts, and (iii.) the purchase of certain articles, such as coal direct from the collieries, and tea and coffee through brokers on the open market.

**Head office Staff.** The only change of importance in connection with the Managers' Head Office staff (the numerical strength of which remains as at



the end of 1905), has been an increase in the number of 1st class clerks from 8 to 9, and a corresponding decrease in the number of 2nd class clerks.

**Officers and Staff.** The total number of officers and staff in the employment of the Board on the 31st December, 1906, was as follows:—

	Permanent.	Temporary.
Head Office ... ..	117	12
Asylums ... ..	1,284	62
Fever Hospitals* ... ..	3,192	38
Smallpox Hospitals (including River Ambulance Service) ... ..	126	11
Land Ambulance Service ... ..	179	2
Children's Homes and Schools ... ..	381	14
Exmouth (Training Ship) ... ..	44	6
Stores and Needlerooms ... ..	15	8
Total ... ..	<u>5,338</u>	<u>153</u>

\* Including bacteriological laboratories.

During the year 2,135 officers and servants were appointed and 1,954 left the service, showing an increase of 181; 22 were superannuated.

A statement is appended showing the several institutions under the Board's control, their location, acreage, and accommodation.

(Signed) AUGUSTUS C. SCOVELL,  
*Chairman of the Board.*

(Signed) T. DUNCOMBE MANN,  
*Clerk to the Board.*

OFFICE OF THE BOARD,  
EMBANKMENT, LONDON, E.C.  
10th April, 1907.

No.	Name of Institution.	Where Situate.
<b>Imbecile Asylums.</b>		
1	Tooting Bec Asylum and Children's Receiving } Home ... ..	Tooting, S.W. ... ..
2	Leavesden Asylum ... ..	King's Langley, Herts ... ..
3	Caterham " ... ..	Caterham, Surrey ... ..
4	Darenth Training School and Industrial Colony	Dartford, Kent ... ..
5	Belmont Asylum ... ..	Sutton, Surrey ... ..
<b>Fever Hospitals.</b>		
6	Eastern Hospital ... ..	The Grove, Homerton, N.E. ... ..
7	North-Eastern Hospital ... ..	St. Ann's Road, South Tottenham, N. ... ..
8	North-Western " ... ..	Lawn Road, Hampstead, N.W. ... ..
9	Western " ... ..	Seagrave Road, Fulham, S.W. ... ..
10	South-Western " ... ..	Landor Road, Stockwell, S.W. ... ..
11	Fountain " ... ..	Tooting Grove, Tooting Graveney, S.W. ... ..
12	Grove " ... ..	Tooting Grove, Tooting Graveney, S.W. ... ..
13	South-Eastern " ... ..	Avonley Road, New Cross, S.E. ... ..
14	Park " ... ..	Hither Green, Lewisham, S.E. ... ..
15	Brook " ... ..	Shooters Hill, Kent ... ..
16	Northern " (for Convalescing Patients)	Winchmore Hill, N. ... ..
17	Gore Farm Upper " ( " )	Dartford, Kent ... ..
18	" Lower " ( " )	
18	Southern " ( " )	Carshalton, Surrey ... ..
<b>Smallpox Hospitals.</b>		
19	Joyce Green Hospital ... ..	Dartford, Kent ... ..
20	Orchard Hospital ... ..	" " ... ..
21	Long Reach Hospital ... ..	" " ... ..
<b>Training Ship "Exmouth"</b>		
22	Infirmary ... ..	Moored off Grays, Essex ... ..
	Shipping Home ... ..	Sherfield House, Grays, Essex ... ..
		24, Stainsby Road, Limehouse ... ..
<b>Schools and Homes for Children.</b>		
<i>Ringworm Schools.</i>		
23	The Downs School ... ..	Sutton, Surrey ... ..
<i>Ophthalmia Schools.</i>		
24	High Wood School* ... ..	Brentwood, Essex ... ..
25	White Oak " ... ..	Swanley, Kent ... ..
<i>Seaside Homes.</i>		
26	S. Anne's Home ... ..	Herne Bay, Kent ... ..
27	East Cliff House ... ..	Margate, Kent ... ..
28	Millfield... ..	Rustington, near Littlehampton ... ..
<i>Homes for Defectives.</i>		
29	Lloyd House .. ..	11, Lloyd Street, Pentonville, W.C. ... ..
	12, Lloyd Street ... ..	Pentonville, W.C. ... ..
30	16, Elm Grove ... ..	Peckham, S.E. ... ..
31	60, 62, 64, Kingwood Road... ..	Fulham, S.W. ... ..
32	81, Earlsfield Road ... ..	Wandsworth, S.W. ... ..
33	Surrey House, 66, St. Ann's Hill	" " ... ..
34	Bridge School ... ..	Witham, Essex ... ..
<i>Remand Children's Homes.</i>		
35	70, 72, 74, Pentonville Road ... ..	Pentonville Road, N. ... ..
36	203, 205, Harrow Road ... ..	Paddington, W. ... ..
37	36, 37, 38, Camberwell Green ... ..	Camberwell Green, S.E. ... ..
<b>Ambulance Stations.</b>		
38	Eastern Ambulance Station ... ..	Brooksby's Walk, Homerton, N.E. ... ..
39	North-Western " ... ..	Lawn Road, Hampstead, N.W. ... ..
40	Western " ... ..	Seagrave Road, Fulham, S.W. ... ..
41	Mead " ... ..	Carnwathe Road, Fulham, S.W. ... ..
42	South-Western " ... ..	Landor Road, Stockwell, S.W. ... ..
43	South-Eastern " ... ..	New Cross Road, S.E. ... ..
44	Brook " ... ..	Shooters Hill, Kent ... ..
45	Tooting Bec " ... ..	Tooting, S.W. ... ..
<b>Wharves, Piers, and Steamers.</b>		
46	North Wharf... ..	Managers' Street, Blackwall, E. ... ..
47	South " ... ..	Trinity Street, Rotherhithe, S.E. ... ..
48	West " ... ..	Carnwathe Rd., nr. Wandsworth Bridge, S.W. ... ..
—	Five Ambulance Steamers... ..	... ..
<b>Contract Department.</b>		
49	Central Stores ... ..	Mermaid Court, Borough, S.E. ... ..
	Temporary Central Needleroom ... ..	67, Newcomen Street, S.E. ... ..
50	Diphtheria, Antitoxin, & Bacteriological } Establishment ... ..	Sutton, Surrey ... ..

\* At this school certain buildings have been temporarily set apart for the accommodation of defective patients of ages

under the Board's control, or in course of erection.

No.	Date of Opening.	Acreage.	Accommodation.
1	January 19th, 1903	22 a. ... ..	891 beds.
2	October, 1870	137 a. ... ..	1,877 ,,
3	" " "	154 a. 1 r. 32 p. ... ..	1,943 ,,
4	November, 1878	164 a. 1 r. 0 p. ... ..	1,994 ,,
5	July 5th, 1905	93 a. ... ..	336 ,, (portion only)
			<b>7,041</b>
6	February 1st, 1871	9 a. ... ..	368 ,,
7	October 8th, 1892	33 a. 0 r. 6 p. ... ..	678 ,,
8	January 25th, 1870	12 a. 0 r. 1 p. ... ..	460 ,,
9	March 10th, 1877	13 a. 2 r. 35 p. ... ..	452 ,,
10	January 31st, 1871	8 a. 1 r. 20 p. ... ..	345 ,,
11	October, 1893	10 a. 2 r. 19 p. ... ..	402 ,,
12	August 17th, 1899	22 a. 3 r. 3 p. ... ..	518 ,,
13	March 17th, 1877 (re-opened 2nd July, 1906)	10 a. 2 r. 0 p. ... ..	488 ,,
14	November 8th, 1897	19 a. 1 r. 6 p. ... ..	548 ,,
15	August 31st, 1896	29 a. 1 r. 2 p. ... ..	568 ,,
16	September 25th, 1887	35 a. 2 r. 38 p. ... ..	738 ,,
17	October, 1890	160 a. 0 r. 16 p. ... ..	961 ,,
	Erected, 1902		850 ,,
18	Erected, 1906		136 a. 0 r. 0 p. ... ..
			<b>8,176</b>
19	December 28th, 1903	315 a. 0 r. 0 p. ... ..	940 ,,
20	Erected spring, 1902	Part of Joyce Green estate	800 ,,
21	February 27th, 1902	8 a. 1 r. 0 p. ... ..	300 ,,
			<b>2,040</b>
22	March, 1876	...	600 boys.
	" " "	2 a. 3 r. 21 p. ... ..	46 beds.
	January, 1878	8 a. 1 r. 0 p. ... ..	9 boys.
			<b>655</b>
23	February 26th, 1903	19 a. 1 r. 24 p. ... ..	420 children.
24	July, 1904	28 a. ... ..	300 ,,
25	March 20th, 1903	49 a. ... ..	300 ,,
26	December 26th, 1897	2 a. 3 r. 0 p. ... ..	134 beds.
27	June 26th, 1898	1 a. 2 r. 0 p. ... ..	130 ,,
28	April 6th, 1904	5 a. 2 r. 0 p. ... ..	100 ,,
29	January 16th, 1899	...	20 girls.
	October 18th, 1901	...	8 ,,
30	January 25th, 1901	...	14 boys.
31	September 17th, 1900	...	22 ,,
32	July 7th, 1903	...	10 girls.
33	December 11th, 1903	...	16 boys.
34	February 12th, 1901	7 a. 1 r. 0 p. ... ..	150 children.
35	January 1st, 1902	...	40 boys, 15 girls.
36	January 1st, 1902	...	45 boys.
37	January 1st, 1902	...	40 boys, 10 girls.
			<b>1,784</b>
38	June 20th, 1885	The areas of these sites are included in those of the adjoining hospitals (see above).	...
39	September 1st, 1897		...
40	July 9th, 1884		...
41	April, 1902	On part of the West Wharf site	...
42	May 2nd, 1898	The areas of these sites are included in those of the adjoining hospitals (see above).	...
43	October 1st, 1883		...
44	August 18th, 1896		...
45	Erected 1903	Included in site of asylum	...
46	Purchased November, 1883	— 2 r. 0 p. ... ..	9 beds.
47	" September, 1883	2 a. 1 r. 0 p. ... ..	24 ,,
48	" January, 1885	2 a. 2 r. 10 p. ... ..	...
—	October, 1884, to March, 1902	...	About 170 beds.
49	July, 1896	...	...
	September, 1901	...	...
50	In course of erection	Part of Belmont Estate	...

from about 16 to 21 years.



ANNUAL REPORT HOSPITALS COMMITTEE, 1906.

ANNUAL REPORT OF THE HOSPITALS COMMITTEE FOR 1906.

4th March, 1907.

We submit our annual report for the year 1906.

**Chairman and vice-chairman.** We re-elected Mr. J. T. Helby to be our chairman, and on the 22nd March, we elected Mr. Walter Dennis to be our vice-chairman, *vice* Mr. F. Purchase, who had resigned his membership of the Board.

**Meetings.** During the year we have held 21 meetings. The sub-committees have held 319 meetings.

**Principal officers.** The changes in the *personnel* have been as follow :—Dr. Rundle, Acting Medical Superintendent, Gore Farm Hospital, left the Board's service in February, having obtained another appointment. Since his departure the duties of Medical Superintendent of the Gore Farm Hospital have been discharged by Dr. A. F. Cameron, the Senior Assistant Medical Officer there. At the end of the year, the post of Medical Superintendent had not been filled.

Miss M. Jones, who had been acting as temporary Matron of the Gore Farm Hospital since February, 1901, was appointed as a permanent Matron in the hospitals service. She remains on duty at Gore Farm Hospital.

Canon J. H. Browne, Chaplain of the South-Western Hospital, resigned, and the Rev. W. H. Longsdon was appointed in his place.

Dr. Cuff relinquished his post of Medical Superintendent of the North-Eastern Hospital to take up the permanent position of Medical Investigator, and Dr. Frederic Thomson, who was discharging Medical Superintendent's duties at the Fountain Hospital, was transferred to the North-Eastern Hospital in succession to Dr. Cuff.

Dr. Turner returned to the South-Eastern Hospital on the 1st May to prepare it for re-opening, and Mr. Essery, the Steward, returned on the 21st March from Gore Farm Hospital, where he had been engaged as Acting Steward.

**Assistant medical officers and students.** During the year 15 assistant medical officers joined the Board's service, and 16 left.

14 assistant medical officers were employed temporarily at various times.

312 students (26 of whom were women) received clinical instruction at ten of the fever hospitals.

During the year 3 gentlemen and 1 lady were employed as clinical assistants ; clinical assistants receive no salary, but are allowed lodging and rations.

Dr. Bruce, Medical Superintendent of the Western Hospital, with our permission, succeeded Dr. Caiger as Clinical Instructor in fevers under the Army Medical Service.

**Medical investigator** In August the Board, upon our recommendation, decided to make the position of Medical Investigator a permanent appointment, and Dr. Cuff, with the approval of the Local Government Board, was (as already stated) appointed to this position. The Local Government Board have not yet issued their Order defining the duties of the office. However, those performed by Dr. Cuff since he commenced this work have fully justified the appointment. Among his many duties the following may be mentioned : the preparation of reports on (a) the use of glass cubicles in the treatment of infectious disease ; (b) the fittings, fixtures, and furniture required to equip the Southern Hospital, and the accommodation for female staff thereat ; (c) the methods which determine the selection of patients for transfer from the acute to convalescent hospitals, and the amount of convalescent accommodation required under the present system of transferring ; (d) the sterilization of milk, and the best form of milk sterilizer for use in the Board's hospitals.

Dr. Cuff has also visited outside institutions not under the control of the Board (not only poor law but several others) for the purpose, as far as possible, of obtaining information as to the character and probable extent of outbreaks of infectious disease, to assist us in determining, as regards distribution of patients, the demands likely to be made upon the Board's accommodation. On all occasions his visits have been welcomed and appreciated and have been mutually advantageous. A special case may be mentioned, which was that of a serious outbreak of diphtheria at the Duke of York's School, Chelsea, at the close of the year, where, by his timely visit and conference with the medical officer in charge, the necessity of admitting 109 boys to the Board's hospitals was avoided.

The services of Dr. Cuff have also been made use of in connection with outbreaks of infectious disease at some of the Board's institutions under the control of other committees.

**Hospitals.** The South-Eastern Hospital was re-opened after reconstruction on 2nd July.

On the completion of the Southern Convalescent Hospital, the Works Committee intimated that they were prepared to hand it over. Upon this, the Board appointed a special committee to consider and report as to the best use to which the hospital could be put. This special committee had not, at the close of the year, made their report.

**Utilization of hospitals.** In our last annual report we alluded to the recommendation of the medical superintendents (which was adopted) that as far as practicable all convalescing patients should be transferred from the acute to the convalescent hospitals, and it will be remembered that the Upper Hospital, at Gore Farm, Dartford, was re-opened for scarlet fever convalescents in July, 1905.

In connection with the whole question of the utilization of the Board's hospitals we considered and reported to the Board upon the course to be followed in the future as regards convalescent provision from the point of view of the policy of transferring patients from the acute to the convalescent hospitals. This was a matter of considerable importance, as it covered the whole ground of the Board's policy in relation to the isolation of patients sent to hospital. Briefly put, the adopted scheme embodied the following principles, viz. :—

- (i.) The use, to the fullest extent practicable, of the convalescent hospitals.
- (ii.) The use, until further orders, of the Upper Gore Farm Hospital as part of the Board's permanent provision for convalescing fever patients in conjunction with the Lower Gore Farm Hospital, if and when the latter should be required.
- (iii.) The joint working of the Grove and Fountain Hospitals under the general supervision of the medical superintendent of the Grove Hospital.
- (iv.) The contraction, during periods of low prevalence of fever, of the accommodation for acute cases, subject to ready means of expansion of the arrangements as pressure develops.

We may mention here that the policy of transferring patients to the convalescent hospitals has been largely put into operation by the medical superintendents during the past year.

**Patients—Fever and diphtheria.** The number of patients remaining under treatment on the 1st January 1906, was 4,224, viz. :—

3,471 scarlet fever.  
565 diphtheria.  
73 enteric.

The highest number under treatment at one time during the year was on the 20th November, when 5,498 patients were in the several hospitals. This was 251 in excess of the maximum of 5,247 reached in 1905, but 212 less than the highest number the Board have ever had under treatment at one time, viz.:—5,710 on 21st November, 1899. Although the total number in 1906 was higher than in 1905, the number of scarlet fever cases was less. The increase was almost entirely due to diphtheria.

The pressure on the Board's accommodation was very great, but, as was the case last year, no application for the removal of a patient was refused or even unduly delayed.

The following tables show the percentage of admissions to notifications of infectious disease for the year 1906, and rates of mortality :—

(1) *Percentage of Admissions to Notifications for 1906.*

Scarlet fever	..	..	..	..	..	88·5
Diphtheria	..	..	..	..	..	79·7
Enteric fever	..	..	..	..	..	55·1

(2) *Rates of Mortality.*

Scarlet fever	..	..	..	..	..	2·9
Diphtheria	..	..	..	..	..	8·8
Enteric fever	..	..	..	..	..	16·0

**New system of direct discharge of recovered patients from convalescent hospitals.** We have before alluded to the trial of a new system of direct discharge of recovered patients from the convalescent hospitals. By this system the patients are conveyed from the hospitals either direct to their homes or to a central discharge station, the latter course being the one which has chiefly been adopted. The results of the experiment were satisfactory, and upon this being reported to the Board, we were empowered to continue that system until further orders, the Ambulance Committee being instructed to afford us all necessary facilities, and while we have not yet had the advantage of the use of motor omnibuses to any great extent, our experience is that the new system is distinctly preferable to the old.

**Preparation of diphtheria antitoxin and bacteriological work.** Schemes for the erection of new stables, with the necessary adjuncts, on the Board's land at Belmont, and new central laboratories on the site belonging to the Board at Peckham Rye, have been approved during the year, and forwarded to the Local Government Board.

The plans of the stables received the Local Government Board's sanction, and the buildings were rapidly approaching completion at the end of the year. The scheme for the provision of new laboratories has not yet, however, been approved, and a letter from the Local Government Board on the subject is under consideration. In the meantime, pending the completion of a scheme for permanent laboratory provision, the Local Government Board have approved of arrangements being entered into with the Royal Colleges of Physicians and Surgeons for the continuance of the Board's tenancy of the present accommodation at the Examination Hall on the Embankment for a further period, the tenancy being terminable by three months' notice on either side.

**Membranous croup.** Hitherto it had been the practice to admit cases of membranous croup to the Board's hospitals only when such cases were certified to be diphtheritic in nature; but, having regard to the unanimous opinion of the medical superintendents, it was decided that cases certified without qualification to be membranous croup should in future be admitted.

**Isolation accommodation by means of cubicle wards.** During the past year much consideration has been given to the subject of the isolation of patients in the Board's hospitals by means of cubicles; and the Board, upon receiving from us, on the 17th February, a full report on the whole subject, in which was contained a report by Dr. Cuff, Medical Investigator, approved of a general scheme for all hospitals, and in particular sanctioned as an experiment the conversion into cubicles of two wards at the South-Western Hospital. The structural work at this hospital was completed at the end of the year, and the cubicles will be in use during 1907. A description of this special isolation in respect of the South-Western Hospital is given by Dr. Caiger, Medical Superintendent, in his annual report. The results of the working of the system will be awaited with much interest.

In this connection, it may be mentioned, that at the North-Eastern Hospital some temporary wards have been adapted with the same object. These have been working for some months, and an interesting report on the system and its results



during the short period it has been in operation has been made by Dr. W. T. G. Pugh, the Acting Medical Superintendent, who controlled the arrangements. His report is appended (p. 6).

**Smallpox.** At the end of 1905 there were no smallpox patients under treatment, and the year has been singularly free from the disease, the highest number under treatment at one time being 13—in June.

The last smallpox patient was admitted on the 23rd June, and the last left on 7th August. Since then the hospitals have been empty.

**Smallpox hospitals.** Joyce Green Hospital was re-opened in October, upon the completion of the works that had been in progress there.

As an additional precaution against the possibility of spreading infection the Board, with the sanction of the Local Government Board, approved of the establishment at Joyce Green Hospital of a second gate (with a gatekeeper's cottage) opening on to the road near Southfield House, and the erection near this gate of a goods reception station, the road between this second gate and the present gate being fenced in on both sides so as to form a neutral zone. Under this new scheme all goods for the hospital will be delivered at this station, and will subsequently be conveyed to the stores by the hospital staff. By this means it will not be necessary for persons delivering goods to approach the precincts of the hospital.

The Local Government Board have also approved of the erection of 16 cottages at Joyce Green for married members of the staff. Some of these cottages were intended to accommodate members of the farm staff. As, however, the scheme of farming operations was under review at the end of the year, it is possible that the erection of this number of cottages may not be necessary.

**Conclusion.** We have again pleasure in acknowledging the continued and valuable assistance afforded us by the medical superintendents and other officers.

(Signed) J. T. HELBY,  
*Chairman.*

## ANNUAL REPORT,

### APPENDIX.

Report by Dr. W. T. G. PUGH (formerly Acting Medical Superintendent, North-Eastern Hospital).

At the North-Eastern Hospital the wooden wards do not possess the separation rooms which are provided at the ends of the permanent wards in most of the managers' institutions, and the hospital was thus seriously deficient in isolation accommodation, especially single-bedded rooms. It was suggested that this should be remedied by converting various disused staff blocks into isolation wards.

Before giving details as to the structure and working of these wards, it may be well to discuss briefly the mode of conveyance of infection in those diseases (scarlet fever, diphtheria, measles, rotheln, mumps, and whooping cough) which, singly or in combination or in doubtful form have been treated in them.

#### CONVEYANCE OF INFECTION.

(1) For the infection of these diseases to be transmitted, mere proximity does not suffice. It is becoming generally believed that infective material, secretions issuing from the mouth, nose, or ear of a patient, must be actually conveyed to a susceptible person's mucous membrane, generally the lining membrane of mouth or nose, either directly by coughing or sneezing, or indirectly by articles smeared with infective discharges, by food infected by these or by the contaminated hands or clothing of the attendant.

(2) The several diseases differ greatly in the readiness with which they are transmitted, and this readiness bears a close relation to the degree of secretion or discharge which occurs.

(3) Children differ in their susceptibility to these diseases; some are insusceptible naturally and others are protected by previous attack.

The first of these points suggests the lines that should be followed to prevent interchange of infection, while the second and third explain why inevitable imperfections in the isolation are not more frequently productive of ill-result.

#### *Prevention of interchange of infection.*

Infection may thus be conveyed from one patient to another—

- (a) By personal contact of the patients.
- (b) By means of such articles as spatulæ, nozzles, thermometer, toys, and eating and drinking utensils.
- (c) By the hands and clothing of the attendant.

In the administration of cubicle wards there is no difficulty in preventing infection by (a) and (b), but the risk of conveyance by (c) is less readily eliminated. The changing of overalls and the sterilising of the hands, although theoretically feasible and proper, are found in actual practice to be, the former onerous, the latter difficult. Over one-third of the patients are under 5 years of age, and require frequent attention; a nurse cannot attend so readily to her charges if she has constantly to change her overall, while almost incessant washing of the hands is

naturally objected to, especially in cold weather. It is important, therefore, to reduce the requirement for overalls and washing of hands to the minimum which is absolutely essential.

(1) *The washing of hands.*—In the case of infectious disease without discharge it is probable that the nurse's fingers are not very frequently infected, and the object will be attained if she adopts the precaution of washing her hands before and after they are brought in contact with the patient's mouth, as in syringing throat or cleaning teeth, or with his nose, as when douching it or wiping it, or after touching his handkerchief. In the case of patients with discharges, *e.g.*, septic scarlet fever or measles, on the other hand, the fingers of the attendant are being constantly contaminated with infection-carrying material. Without the utmost care it is impossible by mere washing of the hands to secure that this infection is entirely removed, and it is unlikely that a nurse will for long periods maintain in this respect the thoroughness which is requisite, while a momentary lapse may undo the precautions of weeks. It is advisable, therefore, to assume that her hands may be at times in some degree infectious, and to adopt as additional precautions (2) and (3). Rubber gloves were given a prolonged trial, but were regarded as unsatisfactory, and their use has been discontinued.

(2) *Nurses should* be forbidden to place their fingers in the mouth of a patient, except under very special circumstances and after special precautions.

(3) *Cases should be classified*—

(a) Doubtful cases of scarlet fever without discharge should have cubicle wards reserved for them.

(b) The conditions which are most productive of secretion, and therefore especially lead to an infectious condition of the nurses' hands, should also have wards reserved for them. Thus, no child unprotected by previous attack should be admitted into a room-ward, one of the rooms of which is occupied by a patient who is suffering from measles, alone or in combination with other disease. The same rule should apply to septic scarlet fever and chickenpox, although in these diseases, since susceptibility is less universal, cross-infection is less likely to occur.

(4) *Overalls.*—The question of conveyance by the attendant's clothes appears almost insignificant as compared with the danger of her hands. In the throat treatment of cases with discharges, however, her apron and sleeves occasionally become smeared with secretions which may afterwards be brought in contact with the mucous membrane of other children who are being similarly treated, and it would therefore seem advisable that separate overalls should be worn in attending to such patients. In the case of patients who do not need such attention, however (the majority of cases of doubtful diagnosis belong to this category), such danger practically does not exist. Save from patients with discharge, the risk of infection by the clothes of the third person is, I think, very small. With the object of testing this point no overalls have been used in the cubicle wards during the year. In the room-wards overalls (open behind and secured by two buttons) are being used in attending to all cases with discharges.

*Rules made for the working of the cubicle and room wards*

The nurse should wash her hands before and after they have been in contact with the patient's mouth (syringing throat, or cleaning teeth), or with his nose (douching or wiping it), or with discharge from ear or abscess; also after touching a handkerchief or wet square.

Patients should be bathed in the *bathroom* twice a week. A separate bath-blanket, with bath-towel, soap, and flannel, is to be kept in each cubicle. The bath is to be well flushed out before each filling.

Except in the case of the older children, patients are not to be taken to the *lavatory*, but are to be attended to in the cubicle.

No interchange of *toys or papers* between the cubicles is allowed.

A clinical *thermometer* is to be kept in each cubicle.

There is to be one *medicine-spoon* for each patient, to be sterilised after each use.

*Toothbrushes* will be ordered by the medical officer where required. The finger is not to be placed in a mouth for any purpose.

The *enamelled tooth-mugs, eating and drinking utensils* will be collected and washed and sterilised in the sterilising room.

*Treatment*.—Each patient on throat, nose or ear treatment is to have a *treatment-towel*, which is to be kept in the cubicle. The *ball-syringes* are to be kept in the cubicles; when treatment is discontinued, the syringes are to be filled with formalin 1-250, and put to stand in the same lotion for two hours. *Nozzles* are to be collected, washed and sterilised after each round of treatment. Each patient who is being douched is to have a separate *douch-can*, which is to be marked on strapping with the number of the cubicle; when the treatment is discontinued, the tubing is to be washed and placed in formalin solution.

A *discharged patient* is to be bathed in the evening before leaving hospital, and is to have clean sheets and pillow case after bath.

*When a patient has left a cubicle*.—Toys, books, &c., are to be sent to be baked or burned. Toothbrush and flannel are to be destroyed. Combs and brush are to be well washed, then dipped in lysol and allowed to dry. Bath-blanket is to be baked or washed. The floor is to be scrubbed; the lower part of the partition and walls, the partition-windows and their frames, the dwarf-doors, locker and chair are to be washed with soap and water. Pillow, bolster, blankets and counterpane are to be baked. The mattress is not to be baked unless this is ordered. Sheets, pillow-cases, and towels are to be sent to the laundry. Personal clothing is to be sent to the laundry; boots and slippers to be cleaned and sent to be fumigated.

*Disinfection.*

Knives, forks, spoons and the enamelled ware are collected after each meal, and washed and sterilised in a room, fitted with troughs and a steam-jacketed "vegetable boiler" removed from the old kitchen. Here are dealt with the eating utensils of the isolation and special wards (14 wards containing 166 beds).

Boots, slippers and straw-hats are fumigated with sulphur in a disused galvanised iron water tank.

For other articles of clothing, &c., requiring sterilisation, the Washington Lyons disinfectant is used.

**THE NEW ISOLATION ACCOMMODATION.**

- (1) Ward for acute septic scarlet fever.
- (2) Room-wards.
- (3) Cubicle wards.

*Ward for acute septic scarlet fever.*

Ward 31 (opened 6th January, 1905) was formerly a curtain-dormitory; it has accommodation for 10 patients. In the intervals between the beds on one side only are placed 4 wash-basins, fitted with pedal-action sprays. The more septic cases are kept on this side, being moved to the other side of the ward when they improve and to a convalescent septic ward at a still later period. The pedal-action spray, which was devised by Mr. Savage, the hospital engineer, is of very simple construction, and is connected with the cold-water pipe only, the water being rendered tepid by allowing the pipe to run along the steam-heating pipes. It has the advantage that there is no tap to be handled with soiled fingers, and the hands can be washed in a running stream of continuously clean water. The ward is kept well staffed and fitted with every nursing convenience, and the removal to it of all the severe septic cases has, apart from other considerations, much relieved the work in the general scarlet wards. The special rules for this ward are that the eating and drinking utensils are sterilised, the nurse washes her hands whenever they become contaminated with discharge, and patients are not allowed up in the acute ward.

From 6th January, 1905, to 6th September, 1906, 260 cases were treated in the septic ward, and the severity of the type may be realised from the mortality, 69 cases ending fatally.

During this period only once was the ward infected with secondary disease, namely, from a child who was found to be suffering from scarlet fever and diphtheria, 2 children acquired the diphtheria bacillus, without, however, clinical evidence of this.

No advantage would, in my opinion, result from the treatment of these cases in cubicles, owing to the impossibility of securing that the nurses' hands, so constantly being infected, are sterilised in passing from patient to patient.

*Room-wards.*

Ward 29 (opened 15th June, 1904) has 4 two-bedded rooms and 1 four-bedded room, and Ward 30 (opened 6th September, 1904) 6 two-bedded rooms. These rooms were formerly used for administrative purposes.

The wooden partitions extend to the ceiling, and into each is let, at a height of  $2\frac{1}{2}$  feet from the floor, a glass frame measuring  $4\frac{1}{2}$  feet by 10 feet, with 12 panels of stout glass. The advantage of the glass partition is undoubted; the patient is relieved of the sense of isolation, and the nurse is able much more efficiently to supervise her charges. The doors are dwarf, about  $3\frac{1}{4}$  feet high, and are closed only when the patient is up; they open on to a common passage in which are several open windows, the rooms, which are situated on one side only of the passage, being thus efficiently ventilated. Pedal-action spray basins are now being placed in each room; up to the present ordinary hand basins have been provided, the

used water being emptied into slop-pails and replenished from ewers as often as is thought necessary by the nurse.

The preparation of exact statistics as to the nature of the cases treated in these wards would involve much labour. Up to September, 1906, there had been treated 810 patients, suffering from the following diseases, singly, combined, or in doubtful form:—Scarlet fever, diphtheria, measles, rotheln, mumps, and whooping cough; also erysipelas, scabies, and ringworm. The results have been on the whole surprisingly good, for it has been seldom that disease has been transmitted. The only pronounced exception has been measles. It was found to be risky to place a child not protected by previous attack in a ward, in some of the rooms of which acute cases of measles were being treated. For this reason Ward 29 is now used for the treatment of measles in its various combinations, and no patients are admitted into its other rooms unless already protected from this disease; since this system has been adopted no transmission of measles has occurred. There has been no cross-infection of diphtheria, rotheln, mumps, erysipelas, scabies, or ringworm. In one case a child acquired whooping cough, apparently by conveyance from an adjoining room. In one instance infection with scarlet fever occurred from a septic case of this disease.

It may be mentioned that chicken pox in its combinations is treated in a four-roomed ward (Ward 25), and that as far as possible only patients who have previously had this disease are admitted into the other rooms.

#### *Cubicle wards.*

Ward 7 (opened 6th September, 1905), Ward 8 (opened 25th September, 1905), and Ward 33 (opened 14th April, 1906) contain in all 34 cubicles. These wards were formerly cubicle-dormitories.

The cubicles open into a passage running up the centre of the ward. Each has a floor-space of 150 square feet. The dwarf doors are only kept shut when the patient is up; they are so placed that the door of one cubicle is not opposite that of another cubicle. The wooden partitions between adjacent cubicles are 7 feet high, and into each is inserted a glass frame, similar to, but smaller than, those of the room-wards.

The furniture consists of bedstead, locker, and chair, with a small shelf for holding thermometer, toothpowder pot, ball-syringe, bowl, &c., and a rail for bath blanket and towel, both fixed to the wall. The cubicles of Wards 7 and 8 are fitted with hand basins with pedal-action sprays; but in Ward 33 only ordinary hand basins, ewers, and slop-pails are provided.

Separate exercising courts have been arranged by dividing the interval between adjacent wards by wire fencing into four spaces, each separated from the next by an interval of 3 yards. Thus 4 of the 12 patients in each ward can be out of doors at the same time, and this has been found to suffice.

With regard to nursing staff, Wards 8 and 33, being adjacent, are worked together, with 1 charge nurse, 2 first assistants and 1 second assistant on day duty, no relief being given on off-duty days. A first assistant is in charge of each at night. Ward 7 works in conjunction with the negative ward and is similarly staffed.

**STATISTICS OF CASES TREATED IN THE CUBICLE WARDS.**

These wards have been used for the isolation of—

- (1) Simple scarlet fever.
- (2) Scarlet fever patients who have been exposed to the infection of some other disease.
- (3) Combined diseases (occasionally).
- (4) Various contagious diseases (occasionally).
- (5) Cases in which the diagnosis of scarlet fever was doubtful.

*Simple scarlet fever.*

It was originally intended to reserve one of the cubicle wards for the treatment of simple scarlet fever, with a view to determining whether this method of treatment would diminish the number of "return cases." The urgent need of accommodation for the isolation of doubtful cases led to this experiment being abandoned when only 18 cases had been completed, too small a number for any conclusion to be drawn.

These patients were discharged after an average detention of 42 days, and no return cases followed.

As regards their condition on discharge, 5 were peeling on hands and feet, and 9 on soles only, while in 4 cases the nose was slightly damp.

During the stay in hospital, 4 had had albuminuria, 3 clear rhinorrhœa, 1 otorrhœa, and 1 adenitis.

*Scarlet fever patients exposed to a second infectious disease.*

A. *Before admission.*—A small proportion of patients are admitted with a history of exposure to another disease at home; 4 such cases were isolated in cubicles.

Two of these were known to have been exposed to chickenpox; they developed this disease on the fifth and sixth day of isolation respectively and were transferred to the chickenpox ward. There were 5 children in the cubicle ward unprotected by previous attack, but no secondary cases occurred.

One who had been exposed to measles, and 1 whose sister had diphtheria were similarly isolated, but did not develop the diseases.

B. *After admission.*—It not infrequently happens that a patient admitted into a general ward with scarlet fever is at the same time passing through the incubation stage of another infectious disease, symptoms of which may not show themselves until several days after the child has entered hospital. Sometimes only a small proportion of those susceptible to the disease thus introduced are infected by the primary case, and the secondary cases when they occur infect some of those who escaped at the first exposure. To prevent these tertiary cases, it was suggested that those children, exposed to the primary case, who were not protected by previous attack should be isolated in cubicles during the period when secondary cases were liable to occur.

- (a) 9 children who had been thus exposed to measles in Ward 6, and who were stated by the parent to be unprotected, were so treated. 1 secondary case occurred and was removed as soon as diagnosed; no tertiary cases followed.

- (b) 5 patients who under similar circumstances were exposed to measles in Ward 15 were isolated in cubicles. 1 secondary case and no tertiary cases occurred.
- (c) 10 children were received who had been exposed in Ward 13 to measles; 7 had not had measles, in the other 3 the history was doubtful. 4 secondary cases occurred and 1 which was probably tertiary.
- (d) 8 unprotected children, exposed to measles in Ward 17, were placed in cubicles. 5 secondary cases and no tertiary ones followed.
- (e) 8 children, exposed in Ward 22 to chickenpox, and unprotected by previous attack, were also isolated. 1 secondary case only occurred, no tertiary ones.

*Combined diseases and various contagious diseases.*

These cases were treated in the cubicle wards owing to temporary lack of other isolation accommodation.

They included diphtheria occurring in a child stated to be recovering from measles; 2 cases of rotheln in the convalescent stage of scarlet fever (1 of these subsequently developed chickenpox, the source of which could not be traced); 1 case of scarlet fever and diphtheria (this child developed what was regarded as a relapse of scarlet fever). Also, a case of erysipelas, 1 of scabies, 2 of Vincent's disease, and 1 of rotheln.

In no instance did infection spread to other patients in the ward.

*Cases in which the diagnosis of scarlet fever was doubtful.*

The patients were classified at the time of discharge under the following headings, which thus represent the final diagnosis arrived at—

- (a) Scarlet fever (definite).
- (b) Probably scarlet fever.
- (c) Probably negative.
- (d) Negative (*i.e.*, not an infectious disease).
- (e) Infectious diseases other than scarlet fever.

(In these statistics, which deal with cases completed on 6th September, 1906, the average number of days' stay is given.)

(A) *Cases admitted certified scarlet fever—*

- (1) There were *admitted directly from the receiving room* 135 doubtful cases.
  - (a) 46 proved scarlet fever; they were transferred to a scarlet fever ward after an average period of observation of 7.5 days (18 after one day).
  - (b) 13 were probably scarlet fever; 12 were discharged to their homes after an isolation of 36.7 days; 1 developed on the twelfth day what was considered to be probably a relapse of scarlet fever.
  - (c) 15 were probably negative; they were discharged after an average detention of 36.2 days.
  - (d) 55 cases were negative: 4 died, 17 were transferred to a negative ward after 17.3 days, and 34 were discharged after 25.4 days.



(e) 4 proved to be measles, and were transferred to the measles ward after 2·2 days.

1 was enteric fever, and was sent to the enteric ward after 8 days.

1 was diphtheria, and was transferred to a diphtheria ward after 2 days.

(2) There were *received from the scarlet fever wards* 75 cases, in which doubt had arisen as to the correctness of the diagnosis under which they had been admitted.

(a) 15 proved scarlet fever; 11 of these (received after 5·5 days) were returned to the scarlet fever wards after 11·7 days' observation; 4 (received after 24·7 days) were discharged after 32·5 days.

(b) 25 (received after 18·1 days) were probably scarlet fever; they were discharged after 24·5 days' isolation.

(c) 16 were probably negative; 1 died; 14 (received after 10·7 days) were discharged after 23·3 days. 1 developed scarlet fever after 37 days in the cubicle.

(d) 17 were negative; 1 died; 4 (received after 1·2 days) were transferred to the negative ward after 10·7 days' observation; 12 (received after 6·9 days) were discharged after 22·0 days' detention.

(e) 2 proved diphtheria and were discharged after 40·5 days' isolation.

(B) *Cases admitted erroneously certified diphtheria—*

Patients received certified diphtheria are as a matter of routine placed in separation rooms until the diagnosis is confirmed bacteriologically. Among the many cases erroneously certified diphtheria, 38 were, after about 2 days in the separation room, transferred to cubicles, because they exhibited in some degree symptoms suggestive of scarlet fever.

(a) 6 proved scarlet fever.

(b) 8 were probably scarlet fever.

(c) 7 were probably negative.

(d) 17 were negative.

(c) *Patients from diphtheria wards possibly developing scarlet fever—*

Some diphtheria patients were isolated owing to their having developed indefinite signs of scarlet fever in the diphtheria wards.

(a) 2 were scarlet fever.

(c) 4 were probably negative.

**SUMMARY OF 254 DOUBTFUL CASES TREATED IN CUBICLES.**

(a) 69 proved scarlet fever.

(b) 46 were probably scarlet fever. 1 developed a probable relapse.

(c) 42 were probably negative. 1 developed scarlet fever.

(d) 89 were negative. None developed scarlet fever.

(e) 8 were other infectious diseases. None developed scarlet fever.

**RETURN CASES.**

During the period under observation 138 patients were discharged to their homes from the cubicle wards.

- (a) 22 were scarlet fever. No return cases followed.
- (b) 39 were probably scarlet fever. Return cases occurred in 2 instances, 14 and 20 days respectively after the discharge of patients, who had been isolated for 44 and 32 days respectively.
- (c) 29 were probably negative. No return cases followed.
- (d) 46 were negative. 1 (isolated 21 days) became associated with a return case which occurred 8 days after the discharge. On investigation it was clear that the discharged patient had not been the source of infection.
- (e) 2 were cases of diphtheria. No return cases occurred.

#### IN CONCLUSION.

(1) No advantage is likely to result from the treatment in cubicles of cases of acute septic scarlet fever, which are conveniently treated in an open ward fitted with hand-basins.

(2) For the isolation of doubtful cases cubicle wards are of the utmost value, and the need for a considerable increase in this class of accommodation at this hospital is urgent. As far as possible all cases in which the diagnosis appeared doubtful were admitted into cubicles, but on many occasions the accommodation proved inadequate, with the result that it was necessary to admit into the scarlet fever wards patients in whom the evidence of this disease was not altogether conclusive.

(3) For the isolation of measles and chickenpox, room-wards are, I think, advisable. For other diseases the cubicle, which presents undoubted advantages as regards ventilation, appears to suffice. Classification of cases is essential, however, to obtain the best results by cubicle and room isolation. In other words, a considerable number of these wards is necessary.

(4) Cubicle wards have not been found very extravagant in staff. Two of these wards, being adjacent, are worked together, with 1 charge nurse, 2 first assistants, and 1 second assistant on day duty, no relief being given on off-duty days. A first assistant is in charge of each at night. There are 24 beds in these two wards.

(5) The limitation in the use of overalls and in the washing of hands, indicated in the early part of this report, has not been attended with serious consequences, as can be seen from the summary given above.

(6) Association with return cases, although somewhat remote, occurred in 3 instances where the patient had been treated throughout in a cubicle.

(Signed) W. T. GORDON PUGH.

21st November, 1906.

ANNUAL REPORT OF THE ASYLUMS COMMITTEE FOR THE  
YEAR 1906.

11th February, 1907.

**Description of admissions.** No change in the general description of the patients admitted can be recorded; consequently the Managers are still faced with the difficulty, to which we have previously referred, of dealing with the increasing numbers of aged and infirm persons who now form the bulk of the population of the Board's five asylums, the largest of which (those at Leavesden, Caterham, and Darenth) were originally constructed for the accommodation of able-bodied patients.

**Additional infirmary accommodation.** The great need which existed in the early part of the year for additional infirmary accommodation was rendered less pressing in April, by reason of the addition of 105 beds at Tooting Bec Infirmary Asylum. This was achieved by reducing the very liberal cubic space which had been allowed for each patient in that institution. The only cost incurred in the matter was in respect of the purchase of additional bedsteads and for general equipment.

We look forward to additional relief being obtained in the course of a few months upon the completion of two new blocks for patients at Tooting Bec Asylum, which will further augment the infirmary accommodation by 207 beds. These extra beds will, we trust, be sufficient to meet requirements.

**Applications for admission and actual admissions.** 941 applications for the admission of patients were dealt with, and the actual admissions totalled 874. Of the latter number, 157 were children and 208 were over 70 years of age. Upwards of 200 patients were admitted from asylums under the control of the London County Council, many of whom did not pass through Tooting Bec Asylum, but were taken direct to Caterham or Leavesden.

Of the 208 patients admitted over 70 years of age, 86 were between 70 and 75, 69 were between 75 and 80, 38 were between 80 and 85, 12 were between 85 and 90,

and 3 were over 90 years. If the sending of so many senile cases were curtailed, there is little doubt that the accommodation (7,248 beds) which the Managers will, in the course of the present year possess, would be sufficient for a considerable time.

**Transfers.** 743 transfers were effected, the details of which are shown in the following statement:—

	Males.	Females.	Total.
(a) From TOOTING BEC:			
To Caterham .. .. .	57	41	98
To Leavesden .. .. .	88	69	157
To Darenth (over 16 years)	51	18	69
Do. (under 16 years)	88	76	164
To Belmont .. .. .	26	—	26
Total .. .. .	<u>310</u>	<u>204</u>	<u>514</u>
(b) From CATERHAM:			
To Tooting Bec .. .. .	—	1	1
(c) From LEAVESDEN:			
To Caterham .. .. .	—	1	1
(d) From DARENTH:			
To Belmont (over 16 years)	148*	—	148
Do. (under 16 years)	9	—	9
To Leavesden .. .. .	—	9	9
Total .. .. .	<u>157</u>	<u>9</u>	<u>166</u>
(e) From BELMONT:			
To Darenth (Gore Farm annexe)			
(over 16 years) .. .. .	60	—	60
To Darenth (under 16 years)	1	—	1
Total .. .. .	<u>61</u>	<u>—</u>	<u>61</u>
Grand total of transfers			
for 1906 .. .. .	<u>528</u>	<u>215</u>	<u>743</u>

\* 58 of these from Gore Farm annexe.

**Development of policy.**

The Managers' policy, which has for its object the better classification of the imbecile patients transferred to the Managers' care, and the training of all those, especially children, who are capable of improvement, continues to develop as satisfactorily as can be expected, having regard to all the circumstances. The removal from Darenth to Belmont of a further considerable number of unimprovable adults was effected, their places being taken by 69 improvable adult patients from Tooting Bec and 164 child patients (*i.e.*, those less than 16 years of age), about one-half of whom were considered to be improvable.

**Darenth Asylum—Dentist.**

The experiment of employing a dentist at Darenth having proved advantageous, the appointment has been extended until the end of the year 1907. The medical superintendent has expressed the opinion that the results obtained have been very satisfactory, and that the general health of the children has improved.

**Darenth Asylum—Workshops.** A revised scheme for the provision of improved workshop accommodation has been approved by the Local Government Board, the carrying out of which will greatly facilitate industrial work at Darenth, which, despite many drawbacks, continues to be carried on at that institution as satisfactorily as can be expected under present conditions.

In this connection, we would draw particular attention to the very interesting account of the industrial occupations which are being carried on at Darenth as set forth in the annual report of the Medical Superintendent of the Asylum.

**X-ray treatment for ringworm.** A new departure of a minor character was commenced by the sending of cases of ringworm temporarily from Darenth to Belmont in order that they might undergo the X-ray treatment, under the supervision of the dermatologist employed at the adjacent Downs School, where children suffering from ringworm are treated. This arrangement has not been sufficiently long in operation for us to form any conclusion as to its advantages or otherwise.

**Belmont Asylum—Enteric fever.** The occurrence of enteric fever amongst several of the patients at Belmont Asylum towards the middle of the year occasioned considerable anxiety. The outbreak was investigated by Dr. Monckton Copeman, Local Government Board Inspector, and suggestions made by him for checking the spread of the disease were promptly carried out. In his official report to the Local Government Board, Dr. Copeman, in dealing with the question of the cause of the outbreak, summed up his conclusions as follows :—

“ Under these circumstances, and in view of the facts detailed above, tending to eliminate all the more generally accepted methods of infection, it cannot, I think, be regarded as other than a reasonable hypothesis that enteric fever was originally introduced into the Belmont Asylum in the person of one or more patients, transferred originally from the Darenth or Tooting Bec Asylums,\* who were in reality suffering from the disease, although, in the absence of marked symptoms, the fact passed unrecognised at the time.

“ Admitting the probability of infection having been introduced in the manner suggested, the further spread of the disease from patient to patient will find sufficient explanation in their continued propinquity by day and by night, especially when the filthy personal habits of the inmates are taken into consideration. The special incidence of the disease in certain wards may perhaps be regarded as consequent in the first instance on infection of a plurality of patients in these particular wards during the period preceding recognition of the true nature of the disease.

\* “ As regards Tooting Bec Asylum, the Clerk to the Metropolitan Asylums Board informs me that ‘ there has been no suspicion of enteric fever since its opening in January, 1903.’ ”

**Leavesden Asylum—Iron bridges between blocks.** The proposal to provide at Leavesden Asylum iron bridges similar to those which many years ago were constructed at Caterham Asylum has been abandoned as the result of a letter from the Local Government Board, who took exception to the very great expense which the provision of the bridges would have necessitated.

**Leavesden Asylum—Increased accommodation.** Owing mainly to the decreasing number of active tubercular cases at Leavesden Asylum, it has been possible to increase the accommodation for patients from 1,804 beds to 1,877 beds.

The ordinary normal accommodation of the asylum was considerably reduced in the year 1900 owing to the prevalence of tuberculosis there.

**Leavesden Asylum—Female officers sleeping out.** The experiment to which we referred in our last annual report of allowing female members of the Leavesden Asylum staff to sleep away from the asylum has proved a success, and has not only been the means of avoiding the provision of additional staff accommodation, but has enabled certain rooms hitherto occupied by staff to be allocated to patients. This new departure has been found beneficial to the institution and to the officers themselves, who are thereby enabled to get completely away from their depressing environment.

**Lunacy Commissioners' reports.** All the asylums were visited by the Commissioners in Lunacy in the course of the year, and the reports of such visits, copies of which came to the Managers through the Local Government Board, were again of a very satisfactory nature.

Copies of such reports are appended.

**Annual inspection of asylums.** All the asylums, with the exception of Belmont, were inspected by us as usual, and general satisfaction was expressed on each occasion.

**Control of stores.** To enable a closer supervision to be made of the deliveries of stores at the several asylums, especially early in the morning, we have given instructions that the steward or a responsible deputy shall personally be in attendance at the stores daily at 7 a.m.

**Condemned articles.** We have passed a resolution as follows:—"That it be a standing reference to all members nominated to make interim visits to inspect all articles condemned since the date of the preceding interim visit, and that no articles be disposed of until they have been so inspected."

**Other matters.** The following other matters which have been dealt with may be specially mentioned:—

- (a) The fixing of the number of artisan staff to be employed at the several asylums.
- (b) The question of the provision of additional messroom and sleeping accommodation for male staff at Caterham Asylum (estimated cost, £2,500).
- (c) The laying out of the remaining two male airing courts at Caterham Asylum at a cost of about £240.
- (d) The rearrangement of the general bathrooms at Caterham Asylum (estimated cost £750 to £800).
- (e) The revision of the uniform scale for subordinate staff.
- (f) The replacement of the old-fashioned fire grates in the wards of Leavesden Asylum by grates constructed on the modern slow combustion principle, at an estimated cost of £308. This scheme has been adopted in preference to the much more expensive proposal to remodel the hot water

heating apparatus. It is confidently anticipated from results so far obtained that not only will the warming be sufficient, but that considerable economy will result in the cost of coal.

- (g) The question of obtaining a supply of electricity for Tooting Bec Asylum from an outside company in preference to continuing to generate it on the asylum premises.

**Principal Officers.**

Several changes have occurred among the principal officers in the asylums service during the year. Miss Hoatson, after 31 years' service mainly spent at Darenth Asylum as head schoolmistress, retired on a superannuation allowance in August. She was succeeded by Miss Hargreaves, who holds the office of headmistress and matron of the training school under the approved scheme for the future working of the asylum. Miss Hargreaves, who has been in the Board's service since April, 1901, held the office of head schoolmistress and matron of Rochester House until the closing of that institution in June, 1905.

Miss Penney, matron of the Industrial Colony, Darenth Asylum, retired through ill-health, in November, after 17 years' service. Miss J. Ferrier was appointed as her successor.

Mr. Taylor, steward of Leavesden Asylum, and Mr. Schilling, steward of Caterham Asylum, also retired owing to ill-health, after 15 and 12 years' service respectively. Their successors have not yet been appointed.

Dr. Sherlock who has been in charge of Belmont Asylum since its opening in July, 1905, with the status of a senior assistant medical officer was, in May last, promoted to the rank of acting medical superintendent with an augmented salary.

**Meetings.**

22 meetings were held by us during the year, and our several sub-committees met on 138 occasions, making a total of 160 meetings. Interim visits were also made as usual to the several institutions, and special visits were made from time to time by the chairmen of institution sub-committees.

**Appendices.**

In addition to the Lunacy Commissioners' reports above referred to, we append, as usual, the annual reports of the several medical superintendents.

**Death of Dr. Hill.**

It was with feelings of deep regret that we heard of the death in October of our highly esteemed colleague, Dr. Hill, who had been a most helpful member of the Asylums Committee since its first appointment in 1899 and was its first chairman for three years. Dr. Hill, by reason of his special knowledge and experience in connection with asylum work, was able to render invaluable services to the Managers in connection with the asylums branch of their work, and his presence has been greatly missed.

Signed on behalf of the Asylums Committee,

R. STRONG,  
*Chairman.*

## APPENDIX I.

REPORTS OF COMMISSIONERS IN LUNACY ON VISITS TO  
ASYLUMS DURING THE YEAR 1906.

## A—BELMONT ASYLUM.

## REPORT OF DR. F. NEEDHAM.

Lunacy Commission,  
66, Victoria Street, S.W.,  
7th June, 1906.

On the 2nd instant I paid the first official visit of a Commissioner in Lunacy to this asylum, which was opened for the reception of patients on July 5th, 1905, the building having been previously known as the South Metropolitan District Schools, and sold to the Metropolitan Asylums Board for £103,691.

The whole building, which is pleasantly situated at Belmont, near Sutton, will, when adapted, it is expected, provide accommodation for about 900 patients. At present the accommodation is limited to 336, and I found there only 284, all of them being males, of the so-called unimprovable class.

The institution is in charge of Dr. Sherlock, the Medical Superintendent, who was formerly Assistant Medical Officer at Darenth; Mrs. Williams, who was Matron at the same asylum, occupying a similar position here.

Plans for the adaptation of the rest of the building are now being considered by the Local Government Board. That already effected has been well carried out, and the accommodation is distinctly good.

Well arranged new sanitary blocks on approved principles have been built out from the wards, and these contain convenient and well-equipped bath rooms, lavatories, and w.c.'s, the only defect of the last being the unprotected looped pipes and bars over the doors, which, even in an asylum of this type should be made secure against possible suicidal attempts.

The day rooms are of good size and comfortable, and the dormitories bright, well ventilated and fitted with suitable furniture, beds and bedding, which were in good order throughout. There were, however, no under blankets, between the waterproofs and the lower sheets on the beds. All the rooms are heated by properly protected steam pipes and lighted by electricity.

No pictures, or ornaments, have yet been provided, and there were no simple books or illustrated papers, and but few toys or games to be seen about. I hope these important things will not be excluded from this asylum, where even if the patients are labelled unimprovable, it will be found, as elsewhere, that within certain limits they are not really so, but susceptible of improvement from their surroundings.

The patients are classified in four divisions, each containing three wards, and they are in charge of 37 attendants, and a head and a deputy head attendant,



the last of these acting also as bathing officer and being continuously present at the weekly and other bathing of the patients. 6 of the attendants are on night duty, and are supervised by a head night attendant, who visits all the wards in succession during the night. 3 attendants have been discharged, one of them for roughly handling patients.

The airing courts are dull and very unsuitable for their purpose, consisting of walled in, stonepaved courts. An endeavour will, I hope, be made to provide suitable exercising gardens elsewhere, and to restrict the use of these courts within the narrowest possible limits.

The arrangements for the exercise, attendance at Divine Service and entertainments and employment of the patients appear to be generally satisfactory. Most of the latter are necessarily unable to be employed, but endeavour will be made to provide suitable means of employment for such as are found capable of any form or degree of it. Many are, of course, of degraded habits, and will require continuous and persevering training.

Religious services are held on Sundays in the chapel by the chaplain, who also visits the wards daily. About 120 of the patients are present at the services, and at the entertainments, of which, however, there have been only three since the opening of the asylum nearly a year since.

Since that date 323 patients have been admitted: 201 from Gore Farm and the rest from Darenth and Tooting Bec; 1 has been discharged, and 38 have died, all from natural causes, 23 per cent. from phthisis, 22 per cent. from pneumonia, and 13 per cent. from epilepsy. In the very creditable proportion of 87 per cent. of the deaths post mortem examinations were made, a bed sore being present in only one case.

There has been no inquest, no serious casualty, and no seclusion or restraint. The maintenance charge per week is 6s. 2d.

I found the patients quiet and free from excitement, and generally in a satisfactory state as respects their dress and personal cleanliness and tidiness. 9 of them suffering from ordinary ailments were confined to bed, one with a bed sore. There were in addition confined to bed 40 patients who were distributed between a ground floor dormitory and the isolation hospital, and were the subjects of enteric fever, the last case of which had occurred two days previously. The cases, which were preceded between October and April by 11 of dysentery, all originated in May, the cause being still undiscovered.

The drainage has been completely renewed. The water supply, now from a public source, but until recently from wells, has been analysed, but declared to be, if not the first quality, at least not pathogenic. The milk, not above suspicion as regards its source, seems to have been exonerated by the absence from the list of typhoid patients of those who were almost exclusively on milk diet.

The Medical Officer of Health has been in consultation with Dr. Sherlock on the subject. It is obvious that, whatever the cause, it is one of common origin and confined to patients, for hitherto none of the staff have been attacked, and it will be for the Metropolitan Asylums Board to take such steps as shall lead to its discovery and removal.

Meanwhile Dr. Sherlock has no resident medical colleague, and the ordinary

male staff of the asylum are nursing the invalids without assistance. That this is being done as efficiently as possible under the difficult circumstances, and the general state of the asylum in these early days of its administration, gives assurance that Dr. Sherlock is fully justifying his appointment as Medical Superintendent.

(Signed) F. NEEDHAM,  
*Commissioner in Lunacy.*

### B—CATERHAM ASYLUM.

REPORT OF DR. E. MARRIOTT COOKE AND MR. G. HAROLD URMSON.

Lunacy Commission,  
66, Victoria Street, S.W.,  
[No date.]

On the 1st instant we visited the Metropolitan District Asylum at Caterham and inspected all its wards, offices and premises.

We saw all the patients, 1,841 in number, viz. :—829 males and 1,012 females, conversed with a considerable number of them, and gave to all an opportunity of stating their grievances. These, however, were not numerous, and chiefly related to the detention of those by whom they were preferred; none of them seemed to call for further action on our part.

With but few exceptions the patients were orderly in their behaviour, and we were generally satisfied with their personal condition and with the state of their clothing. We thought that the appearance presented by the children and cripples in female C3 ward was particularly creditable, but in female B ward, which contained 151 patients, 132 of whom were epileptics, and in some of the other larger wards, male E for example, which like it were considerably overcrowded, some of the patients were not so tidy.

The number of aged and infirm patients at this asylum still continues to increase; thereby adding more and more to the work of the attendants and nurses and to that of most of the higher officials. 9 per cent. of the patients habitually wet their bedding, and 22 per cent are epileptics.

It was satisfactory to find that, notwithstanding the large number of feeble and helpless cases under care, only 21 men and 24 women were confined to bed, and that but few of them were suffering from illness of an acute type. A female patient had developed chicken pox that morning, and a nurse was isolated for an attack of German measles. The sick appeared to be well attended to.

At the end of January and beginning of February of this year, there was a severe epidemic of influenza and pneumonia with a high mortality rate, and there had been 2 cases of enteric fever and 1 of erysipelas since the visit of our colleagues on 15th February, 1905.

Since that date the changes among the patients had been as follows :—

	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
Admitted .. .. .	88	100	188
Discharged .. .. .	31	6	37
Of whom had recovered	5	1	6
Died .. .. .	101	125	226

The asylum is supposed to provide accommodation for 1,943 patients, and upon this calculation there were 102 vacancies, but having regard to the overcrowding already referred to, the calculation, in our judgment, is placed too high.

The 212 deaths were all the result of natural causes, which, in the satisfactory proportion of nearly 94 per cent., were verified by post mortem examination. On 3 per cent. of the bodies of those who died, bedsores existed, and of the total deaths, 22 per cent. were due either to pneumonia or bronchitis.

3 inquests were held, a verdict of "Death from natural causes" being returned in each instance. One patient had sustained a fracture of the neck of the thigh bone and another a fracture of a rib; both injuries were occasioned by accidental falls and do not appear to have contributed to the deaths of the patients.

The only other serious casualties had been the fracture of the neck of a thigh bone of a restless old woman caused through her falling out of bed, and the injury to the finger of another woman who was struck by a fellow patient with a knife at the dinner table. The finger had to be amputated, and the patient, owing to her interfering with the dressings, had to be restrained by a long sleeved jacket on 23 occasions for a total of 537 hours. This was the only instance of mechanical restraint, but 15 women are reported as having been secluded on 33 occasions and for 72 hours in all.

The maintenance charge for the patients is 9s. 0½d. per head per week.

We find from the returns furnished to us that during the year 1905, on the average 16 per cent. of the patients attended the weekly religious services; that 25 per cent. were present at the weekly entertainments, and that 39 per cent., or 46 per cent. of the men and 33 per cent. of the women, were daily usefully employed. For the Roman Catholics a priest, who is remunerated, holds a service every Sunday afternoon and celebrates Mass once a month.

The wards and dormitories continue to be maintained in very good order, and cleanliness prevailed everywhere. Some of the mackintosh sheets are poor, other wise the bedding is in a satisfactory state. A little more attention is needed in some of the wards in making up the beds.

The male airing courts have been greatly improved, the ground having been laid out and planted with shrubs and flowers, and the paths tar paved.

Other improvements comprise the provision of a new store room for milk in connection with the general kitchens; of a cycle house for the use of the female staff; and of modern stoneware sinks, with proper wastes, in the kitchens of female A infirmary wards.

Something should be done to improve the ventilation of the chapel; the tile floors in some of the lavatories (in male B1 ward for example) are in places much worn, and the female general bath room might with advantage be altered so as to provide more dressing room accommodation.

All so-called non-poisonous disinfectants, such as Jeyes' fluid, should, as a matter of precaution, be kept in locked cupboards.

We saw an excellent dinner of bacon and potatoes served during our visit, and we noticed that the minced meat and other diet for the sick were carefully prepared; the plates, however, in some of the wards had not been properly warmed.

We were present at a practice of the Fire Brigade, when there was a good supply and pressure of water.

As to the staff, there are 65 male and 67 female attendants for day duty, and 11 male and 13 female attendants for night duty. The proportion of day attendants to patients on the male side is 1 to 13; but on the female side, where the staff of day nurses is rather weak, having regard to what has been said above as to the helplessness of many of the patients, it is only 1 to 16.

Of the total attendants, 19 per cent. of the men and 28 per cent. of the women have been engaged within a year; but 36 per cent. of the men and 20 per cent. of the women can count over 5 years' service.

A male attendant has been discharged for intemperance, and a nurse for striking a patient.

The condition of the asylum reflected credit upon Dr. Campbell, who has the assistance of three Assistant Medical Officers.

(Signed) E. MARRIOTT COOKE,  
G. HAROLD URMSON,  
*Commissioners in Lunacy.*

## C—DARENTH ASYLUM.

REPORT OF DR. NEEDHAM.

Lunacy Commission,  
66, Victoria Street, S.W.,  
6th June, 1906.

On the 1st instant I paid an official visit to this institution, and am able to speak very favourably of the general condition in which I found it, and of the evidences of good administration which came under my observation. The day rooms throughout were well ventilated, bright, with inexpensive but effective decoration and ornaments, and adequately supplied with comfortable furniture. The dormitories were clean, and the beds and bedding in excellent order. There were, however, no blankets between the waterproofs and the sheets. The kitchens and several of the corridors had been recently re-painted. The exits from wards 6 on the female and 8 on the male side have been improved, as suggested by my colleagues, by the provision of new fire doors.

As all the admissions now undergo quarantine at Tooting Bec, the old admission ward has been turned into an isolation block for eye and head cases, while the needleroom has become a brush-making shop for girls.

The patients everywhere seemed contented and looked well-cared for. They were suitably dressed and clean and tidy in person—those of the more helpless and troublesome class as well as the higher grade imbeciles who now form a not inconsiderable and an increasing proportion of the inmates.

The numbers resident were 1,910, of whom 977 were males and 933 females, and 457 of these were distributed in the schools, 418 in the pavilions, and 1,035 in the main asylum, the pavilions still containing the helpless and unimprovable.

I was surprised to learn that as many as upwards of 600 of the inmates under 16 years of age are detained without the certificate and order required by Section 24 of the Lunacy Act, 1890.

The general health appeared to be good, 16 males and 23 females only being confined to bed, none of them suffering from a bedsore.

Work was proceeding briskly in the shops, several at least of which are less suitable than could be desired for their purpose, and which are scattered about the buildings in a very inconvenient way, and there could be no doubt of the interest generally taken in the work by the inmates, or of its influence in increasing their happiness and promoting such a measure of mental and physical development as is possible in the circumstances.

319 children were undergoing tuition in school, the instruction taking the form of both mental and manual exercise, and showing obviously good results.

I saw a substantial dinner of boiled bacon, two vegetables and bread neatly served in the hall, where I afterwards witnessed an excellent drill display by 27 of the older male patients. About 50 of the males and double that number of the females are drilled regularly twice a week, the males by an old Army attendant, and the females by a professional Swedish drill teacher from London, who gives her services gratuitously.

During the winter, in addition to the weekly dance, there are 10 paid varied entertainments, at which there is always a good and enthusiastic attendance. The chapel services also attract a considerable proportion of the inmates, Church of England and Roman Catholic ministers respectively officiating.

A fire brigade drill is held once a fortnight, and a fireman is on duty at night to attach the force pump to the mains at once if necessary.

The arrangements for outdoor exercise continue to be adequate and satisfactory, and a not undue proportion of the patients are altogether confined to the inner grounds.

Since the last visit by Commissioners, 402 patients have been admitted, 238 discharged or removed, and 111 have died, all of them from natural causes, of which the principal have been phthisis in 35 per cent., pneumonia in 24 per cent., and epilepsy in 14 per cent.; enteric fever being responsible for 2 and erysipelas for 1 of the remaining deaths.

In only 50 per cent. were post mortem examinations made, but the returns indicate that in no instance was there a bedsore. 1 inquest was held in the case of a male patient who died from broncho-pneumonia. Since March of last year

there have been 20 cases of scarlet fever, 5 of erysipelas, and 9 of enteric fever, the origin of which was unable to be ascertained, but no cases of any other form of zymotic disease.

Injuries have been sustained by 2 male and 5 female patients, all of whom fractured or dislocated their bones in accidental falls.

I was glad to notice an entire absence of mechanical restraint during my visit to the wards, and the records show that in the last year it has only been employed once, and for a day, for surgical reasons.

The staff of attendants and nurses seems to be of sufficient strength. 6 have been discharged for misconduct, which in 3 took the form of violence to patients, for which dismissal appears to have been regarded as adequate punishment.

Dr. Rotherham, who continues to discharge his duties with energy and ability, now has the assistance of 3 medical colleagues.

(Signed) F. NEEDHAM,  
*Commissioner in Lunacy.*

#### D—LEAVESDEN ASYLUM.

REPORT OF DR. S. COUPLAND AND MR. L. L. SHADWELL.

Lunacy Commission,  
66, Victoria Street, S.W.,  
16th June, 1906.

Having on the 9th instant paid a visit to the Metropolitan District Asylum at Leavesden, we desire to record our satisfaction at the condition in which we found all parts of the building and at the evidence presented to us of the care bestowed upon its inmates, of whom on the day of our visit there were in residence 827 male and 945 female patients. A considerable proportion of them are old and feeble, and should the numbers of this class increase it may become necessary still further to increase the infirmary accommodation, which at present is afforded in 4 of the blocks on each side. Of these infirmary wards 2 in block I on the female side and two in block 2 on the male side are set apart for the reception of patients suffering from tuberculous affections.

The wards and dormitories are kept in very good order, and we observed that the ventilation of some of them has been improved by the substitution for some of the windows of new ones of better type. Another improvement in connection with the infirmary wards which has been carried out in blocks 1 and 2, and is, we understand, to be extended to the other blocks, is the construction of an additional doorway in the ground floor ward, permitting direct access to the airing courts, so as to enable infirm people to be moved out, without the necessity of descending steps. Owing to their numbers it is not possible to restrict the infirm

to this floor, so that much care is needed in conveying them to the upper floors of the blocks. The beds and bedding were in excellent condition. In the wards and day rooms books on open shelves are kept for the entertainment of the inmates.

At the time of our visit 32 of the male patients and 59 of the female were in bed, many of these suffering from senile debility. The inmates of the phthisis wards numbered 83 on the male side and 48 on the female, most of whom, together with the majority of the other patients, were in the pleasant and well-shaded airing courts. In court No. 5 there is an admirable shelter affording protection from wind and rain, and a similar one is projected for No. 3 court. The patients appeared to us happy and contented. We gave them full opportunity of conversation with us, and received no complaints. Their dress and personal condition were satisfactory.

The dinner which was served during our visit consisted of stew, suet pudding, and potatoes. The allowance was liberal, and the meal appeared to be appreciated.

Since the visit paid by our colleagues in November last, there have been admitted 96 patients, and 22 have been discharged. There have been 76 deaths. These changes leave on the books the names of 1,772 patients, and, on the basis of the return made to our Board, there is vacant accommodation for 62, or 15 males and 47 females.

Nearly 22 per cent. of the patients suffer from epilepsy, and it may be added that not only they but all patients sleep under supervision, there being a night nurse or attendant to every dormitory.

We learnt that 26.5 per cent. attend the Church of England services. There are 187 Roman Catholics, for whom there is a Roman Catholic religious instructor, who is a paid member of the staff, and who conducts weekly services. A Jewish rabbi attends occasionally to minister to the 41 Hebrew patients.

It is stated that 600 of the patients, or between 34 and 35 per cent., are usefully employed; about 22 per cent. attend the associated indoor entertainments, whilst 45 per cent. are enabled to share in outdoor entertainments. On the afternoon of our visit a large number were taken to witness a cricket match, music being provided by the asylum band.

Nearly 33 per cent. of the deaths were due to tuberculous disease and 11.9 per cent. to decay. Post mortem examinations were made in all cases, with the exception of 4, to which objection was taken; the proportion of such examinations to the total deaths was therefore 94.7 per cent. In only 3 cases did bedsores exist at the time of death.

There have been 2 inquests. In each case the cause of death was primarily accidental, 1 being from natural causes accelerated by a fracture of the thigh accidentally sustained, the other from broncho-pneumonia and abscess due to the patient having swallowed a stone and other foreign bodies.

There has not been any zymotic disease since the last visit, but fracture of bones, exclusive of the fatal case above mentioned, amounted to 10 in number and were caused in the majority by falls, 3 of which were in epileptic fits. In 3 cases the injury was due to attacks by fellow patients.

There has been no employment of mechanical restraint or seclusion. 4 attendants have been discharged for misconduct, 1 of them for incompetence and for being rough with the patients.

The staff is maintained of adequate strength, and it may be mentioned that the female infirmary blocks are supervised by 3 superintendent trained nurses.

As regards structural improvements, besides the completion of the conversion of wards and dormitories into infirmary wards in blocks 7 and 8 and alteration of windows for improved ventilation, new radiators have been fixed in the laundry, where also some minor improvements have been made. A new boiler has been fixed in the Nurses' Home, and two new gas ovens erected in the kitchen.

The works now in progress include the formation of a new recreation ground of 8 acres, and a new sewage scheme on the new land. Two additional airing court shelters are to be erected, and the work of entirely cleaning and redecorating the institution is in hand.

During our inspection we were struck by the inconvenient and objectionable situation of the rooms used for the storage of meat and milk. These adjoin the kitchen, and are also exposed to damp from steam. There is no provision for cold storage. We think it would be well if attention were paid to these important adjuncts, with a view to their being entirely reconstructed in a more suitable place.

In the absence of Dr. Elkins, who was taking his vacation, we were accompanied at our visit by the senior assistant medical officer, Dr. Ellerton, who afforded us every information.

(Signed)                   SIDNEY COUPLAND,  
L. L. SHADWELL,  
*Commissioners in Lunacy.*

### E—TOOTING BEC ASYLUM.

DR. S. COUPLAND AND MR. L. L. SHADWELL.

Lunacy Commission,

66, Victoria Street, S.W.,

17th November, 1906.

We paid our customary annual visit to the Tooting Bec Asylum on the 8th instant, and can report very favourably of the condition of the buildings, and the care bestowed upon the inmates. The wards, which are arranged on a very systematic plan, are maintained in a high state of cleanliness and order, and we were struck by their bright and cheerful appearance as well as by the manner in which they are thoroughly ventilated. All of the wards were more or less fully occupied, with the exception of No. 3 Probation Ward on the male side, which only contained 1 patient, who had recently undergone a severe surgical operation. The female wards were nearly full, there being only 6 vacant beds, notwithstanding that the numbers in each ward have been raised to 34, an increase in beds, which, owing to the liberal space originally assigned, has not involved overcrowding. On the male side there were as many as 69 vacancies. Two new blocks are in course of erection to accommodate 105 male and 102 female patients respectively.



Since the visit paid by our colleagues on the 20th May, 1905, there have been admitted 872 adults and 229 children. There have been discharged or removed 519 of the former and 224 of the latter, nearly all of these being transferred to other district asylums, for which Tooting Bec Asylum acts as a kind of reception house, only senile cases being permanently retained. 1 adult and 1 child were discharged as being "not insane," whilst 11 adults and 1 child were discharged "recovered." The deaths during the period amounted to 301, 5 of them being children.

These changes left on the asylum books—*Adults*, males, 312; females, 468; and *Children*, males, 12; females, 6; all of whom were resident in the Asylum at the time of our visit. We saw them all except 8 of the children who left for Darenth whilst we were in the building. Of the adults, 29 men and 63 women were in bed, most of whom were suffering from the debility of old age, but 2 of the females were under treatment for fracture of the thigh. Only 1 patient had a bedsore. No patient was suffering from dysentery, and only 2 or 3 from phthisis, a satisfactory fact which is deserving of record.

The patients were neatly dressed, and, with hardly an exception, contented and cheerful. No one made any complaint of treatment, and several expressed themselves gratified with the care bestowed on them. It was noticeable, however, that comparatively few of the women were occupied in knitting or otherwise, and there did not seem to be as much provision for the entertainment of either sex in the matter of suitable literature, table games, etc, as is desirable. It may be true that very many of the class of patients in such an institution as this are not capable of much mental effort, but mere monotony with little or no external distraction is calculated to increase this habitude.

During our visit we saw the dinner served in several wards. It consisted of meat pie, and for the more feeble of beef-tea and custard pudding. The fare was sufficient and of good quality, and seemed to be appreciated.

Of the adult patients in residence 67 suffer from epilepsy. No one is regarded as suicidal, but a wise precaution has been taken to enclose by an open iron frame the recesses where brooms and other accessories are kept for the use of the probation wards. All fresh admissions are received into these wards, whence the younger patients are drafted to other asylums. It should be added that a nurse or attendant is on night duty in every ward, the percentage of epileptics to the total number of inmates at the close of 1905 being 10, and of general paralytics 1.5. The return of wetted beds is high, namely, 19 per cent.; but the nature of the cases under treatment sufficiently explains this. The bedding is kept in excellent order.

Religious services are at present held in the wards, but a hall is being erected which will be utilised for this as well as other purposes. The average attendance at such services last year was only 16 per cent. of the total number of inmates. There are 76 patients of the Roman Catholic faith, and they are ministered to by a paid instructor. The Jewish patients are visited by a rabbi, whose services are honorary.

The area occupied by the Asylum is relatively small, considering the size of the buildings, so that the amount of space utilised for outdoor exercise is limited, and practically all the inmates are confined for such exercise within it. The fine

summer of this year enabled a large number to spend most of the day in these grounds, which are well shaded by trees, and the seating accommodation therein for both sexes has been increased.

Of the deaths which have occurred since the last visit nearly 55 per cent. are ascribed to senile decay, 10 per cent. to bronchitis and pneumonia, 3 per cent. to phthisis, and 3.3 per cent. to general paralysis. Post-mortem examinations were made in 290 cases, or the high proportion of 96 per cent. Bedsores existed at death in 8.5 per cent.

14 inquests have been held, verdicts of "accidental death" being recorded in 6, and of "death from natural causes" in 6, the remaining ones being both cases of death from pneumonia and senile decay, associated in one of them with broken ribs.

No epidemic disease has occurred amongst the patients, but a nurse has suffered from scarlet fever, and an attendant from typhoid.

14 of the patients have sustained fractures of bones not ending fatally; nearly all of which were due to accidental falls, 10 being fractures of the femur, 1 of which occurred spontaneously.

There has been no employment of mechanical restraint, but 2 patients have been secluded on three occasions for a total of 10 $\frac{3}{4}$  hours.

As regards the staff, we learn that 105 are employed on day duty and 31 on night duty, there being in all 50 male attendants and 86 nurses, giving a proportion of 1 attendant to 8 patients and 1 nurse to 6 patients. 8 attendants have been discharged for misconduct, 6 of these for being asleep on night duty. 1 nurse has also been discharged. The accommodation for the staff is well planned and satisfactory; some additions are being made to it on the female side.

(Signed)

SIDNEY COUPLAND,

L. L. SHADWELL,

*Commissioners in Lunacy.*

ANNUAL REPORT OF THE CHILDREN'S COMMITTEE FOR THE  
YEAR 1906.

I.—GENERAL.

**The  
Committee's  
work.**

1. We submit to the Board our ninth annual report for the year 1906 on the care and treatment of the following special classes of poor law children, viz.:—

- (a) Children suffering from ophthalmia or other contagious disease of the eye ;
- (b) Children suffering from contagious disease of the skin or scalp ;
- (c) Children requiring either special treatment during convalescence or the benefit of seaside air, including children suffering from tubercular disease of bones, joints, or glands, and pulmonary tuberculosis ;
- (d) Children who, by reason of defect of intellect or physical infirmity, cannot properly be trained in association with children in ordinary schools ;
- (e) Juvenile offenders on remand.

Provision has now been made for these classes of children in two ophthalmia schools, one ringworm school, three homes at the seaside, eight homes for mentally deficient, and three remand homes. The total accommodation of these homes is for 1,783 children, and the staff ordinarily employed numbers 450.

In this report, except for a few general observations, each class of child is dealt with in a separate section.

**Arrange-  
ment of  
work.**

2. A visiting sub-committee is formed for each school and home, or in the case of the small London homes, for groups of homes. Matters of general importance are passed on to a central sub-committee (the Special Purposes and Finance Sub-Committee), which also reviews all questions of finance and accommodation. Lastly, the work of all the sub-committees is submitted to us. By an arrangement for adding one member to each

sub-committee from a monthly rota, every member is afforded an opportunity of becoming acquainted with each branch of the work, and with institutions of each class.

**Meetings.** 3. The steady progress in our work has naturally entailed a corresponding increase in the time and attention required from members. We held 21 meetings, and in addition our various sub-committees held 279 meetings, of which 60 were at the Office of the Board and the remainder away from that centre. These numbers show an increase of 30 per cent. on the number of meetings held four years ago.

**Accommodation.** 4. In those branches of work dealing with contagious diseases in children, *i.e.*, ophthalmia and ringworm, it is satisfactory to report a marked diminution in the number of ringworm children under treatment. There would also have been a slight further diminution in the ophthalmia cases but for the occurrence of an epidemic of mild ophthalmia on the training ship Exmouth. The isolation and special treatment of these children was the outcome of Departmental Committee on metropolitan poor law schools in 1896, and brought into operation by the Metropolitan Asylums Board under an order of the Local Government Board issued in April, 1897. That this policy will be fully justified and eventually crowned with success cannot seriously be doubted.

The fact that the whole of the Board's accommodation for these classes of children is not now being utilised for its original purpose, owing to a diminution in the number of cases requiring treatment, upon which the Board in particular, and the Metropolis in general, are to be congratulated, and to other causes, leads to inquiries as to the circumstances under which the existing accommodation came to be provided. We have, therefore, dealt briefly with the subject in the appropriate sections of this report.

**Proportion of Poor Law children dealt with.** 5. On the general question of the total accommodation for poor law children which the Board has been called upon to provide, it is interesting to note that at the time of the enquiry of the Departmental Committee there were 17,807 children receiving indoor relief from the metropolitan boards of guardians, excluding those relieved as insane or as casual paupers, and it was estimated that special provision under the terms of the Local Government Board Order referred to would be required for some 2,000 of these. The numbers under treatment by the Board since the time the provision contemplated for each class has been made have been—

On 1st January, 1905	..	..	..	1,501
1st January, 1906	..	..	..	1,465
1st January, 1907	..	..	..	1,374

The numbers of metropolitan children receiving relief as above-mentioned were as follows :—

1st January, 1905	..	..	..	19,839
1st January, 1906*	..	..	..	20,069

\* The return for 1st January, 1907, was not available at the date of publication of this report.

The explanation of the difference between the estimate of 1897 and the actual numbers of the last three years is given in detail later in this report.

**Educational work.** 6. While it is well to emphasise the importance of special treatment for these children from the point of view of accommodation, isolation, and medical care, we have never concealed our view that no less important is the education of the children. In each of the larger establishments separate elementary schools are provided, while at the seaside homes certificated teachers where possible carry on the education of those children whose health permits this to be done. No effort has been spared to render the teaching as efficient as that in public elementary schools. We mentioned last year that the inspection of poor law schools had been transferred from the Local Government Board to the Education Department, and while there can be no doubt as to the value of the work of the poor law educational inspectors, this change must be of assistance in co-ordinating the educational work in poor law and public elementary schools. There have always been difficulties to be faced in this connection, even in ordinary poor law schools. The association of the ordinary child attending a public elementary school with its parents and friends in the outside world, stimulates a vitality which cannot be expected in the same degree in children whose life is confined to a poor law school. At the same time, appointments in these institutions generally remote from populous centres are not so attractive to the teaching profession as those in the ordinary day schools.

In the institutions under our control, too, the necessity for special medical attention to the children interrupts their attendance at school, and the more or less temporary period for which the children are under the teacher's care renders their instruction a matter of more than ordinary difficulty. We believe, however, that the educational work in these institutions has been maintained at an efficient level.

**Use of homes and schools.** 7. Last year we reported at some length, as we have had occasion to do before, on the subject of the use made by guardians of the homes and schools provided by the Metropolitan Asylums Board, and we are glad to add now that these reports appear to have borne fruit.

We pointed out what has not been generally recognised, that by the financial adjustments now made in connection with poor law administration the total cost of these institutions is equalised throughout the metropolis and is practically paid by the guardians in proportion to their rateable value. The expenditure of a particular board is, therefore, for all practical purposes unaffected by the number of children they may send to these special institutions. This will no doubt be more fully realised when the Board are enabled to raise all their estimated requirements from the unions by contribution orders based on rateable value.

It has been obvious from our previous reports that in speaking of the desirability of the guardians making the largest possible use of the Board's homes and schools we have referred to those children for whose maintenance the guardians would in any case be responsible, and that we have not wished an appreciation of the financial principles we have mentioned to involve a wholesale increase in the number of children requiring indoor relief.

**Other uses of institutions.** 8. So clear has this been that in our last report we devoted a paragraph to the mention of proposals for the utilisation of the accommodation not required by the metropolitan guardians.

In the first place, there have been agreements with boards of guardians outside the metropolis for the reception of children chargeable to those boards into the vacant places so long as these remained available.

We also raised the question of the possibility of the reception of children whose friends or relations might be able to pay the whole or part of the cost of their maintenance. It is an apparent hardship that persons who are in any degree above the class which can secure relief from the guardians of the poor have the greatest difficulty in securing, even for payment, advantages which are provided by these institutions for poor law children.

**Expenditure.** 9. The gross expenditure out of general account on the children's homes and schools, which has risen steadily year by year until it reached the sum of £63,065 in 1905, has for the first time shown a decrease, and amounted to £61,799 for the year 1906. This is principally owing to the closing of Bridge School, Witham, as a ringworm institution. The rate of maintenance, which has been remarkably steady for some time, was last year fractionally less, while the rate of other charges, in consequence of a reduction in numbers, has slightly increased. The total amount borrowed on loan in respect of the children's work is £427,198, of which £357,382 was outstanding at Michaelmas last.

**Chairman and Vice-Chairman.** 10. We re-elected Mr. T. Cornell as our Chairman for a third term of office, and Dr. Elliott S. Browne as our Vice-Chairman for the second time. The previous Chairmen of the Committee were Messrs. G. S. Elliott, W. Crooks, M.P., and W. B. Cochran.

**Changes in Committee.** 11. We have had to deplore the death of Mr. W. B. Cochran, formerly a representative of the Lambeth Guardians, and latterly a member nominated by the Local Government Board. Mr. Cochran was always an active member of the Committee and was its Vice-Chairman for the three years ended May, 1903, and Chairman for the following year.

We also regretted the resignation of Mr. Purchase, a member of the Committee for over eight years.

The two vacancies on the Committee were filled by the appointment of Mr. W. H. Ecroyd and Mr. Gerald Ritchie.

**Representatives.** 12. During the year our Chairman and Vice-Chairman were appointed to represent the Board on the General Organising Committee of the Second International Congress on School Hygiene, and on the British Committee for the Fourth International Congress on the Welfare and Protection of Children. Our Chairman was also appointed to represent the Managers on a deputation to the Home Secretary with reference to the treatment of juvenile offenders.

## II.—OPHTHALMIA SCHOOLS.

**Incidence  
of  
Ophthalmia.**

13. The fact that the number of cases of ophthalmic children under treatment in the schools of the Board has never yet approached the number for whom accommodation has been provided, is naturally a matter for congratulation, but it affords no ground for any assumption that the provision made by the Board was not fully justified. This provision took the form of two institutions on the cottage home principle, with accommodation for 360 children each. The buildings have been so arranged on the respective sites that additional cottages for 40 children could be built at each school, and the provision of this extra accommodation would involve no addition to the educational and administrative portions of the buildings.

The actual accommodation is therefore for 720 children with a potential increase to 800.

In practice, owing to the exigencies of classification of the various forms of the disease, it has been found desirable to regard the normal accommodation of each school as 300 beds, or a total of 600, but in times of pressure, or for other purposes the original accommodation could doubtless be restored.

In 1897, at the instance of the Local Government Board, Mr. Sydney Stephenson, M.B., F.R.C.S., conducted an enquiry into the ophthalmic condition of the poor law children of the metropolis, and submitted to the Board a report on the subject. He pointed out that from 8th June, 1893, to 10th October, 1896, the Managers of the Central London School District received no fewer than 1,081 patients from 13 unions or school districts alone.

As the result of his detailed investigation and examination of 17,000 children, Mr. Stephenson found that there were 973 requiring isolation. The return supplied by the Local Government Board to us in 1897, and other independent computations, showed the existence of between 950 and 1,000 of these cases, while the returns made direct to the Metropolitan Asylums Board by the medical officers of the district and separate schools, workhouses, infirmaries, and sick asylums, gave 715 children, excluding over 200 inmates of the temporary ophthalmic school at Hanwell. The provision of accommodation for 600 to 720 children can in no way, therefore, be considered to have exceeded that dictated by a careful consideration of the needs of the metropolis.

The total number of cases under treatment during the last three years has averaged about 480. It is probable that this number by no means exhausts the ophthalmic children requiring isolation in the metropolitan poor law institutions. Those remaining fall, it may be concluded, under the following classes, viz.:— children under three years of age who are not at present received; children whose admission to the special schools is delayed by some temporary circumstances, or who are retained in the institutions of the union or parish; and cases which remain undetected.

On this last point, Mr. Stephenson expressed strong views in his report. It seemed to him that, in order to eradicate ophthalmia from poor law schools, it was essential that from time to time an examination should be made of every child somewhat on the lines adopted during the enquiry of 1897. Such an inspection, he thought, should be carried out only by a medical man with a good knowledge of eye

diseases, and in order to fix and maintain a proper standard, it should be conducted by a single individual. He pointed out that while acute ophthalmia could be readily detected, the diagnosis of certain chronic forms, particularly trachoma, was by no means so simple a matter, and that the latter often called for considerable knowledge, which it was too much to expect would be possessed by every medical man. He found that the standard adopted by the medical officers in the schools differed in nearly every instance. Mr. Stephenson spoke with the experience gained from the very complete enquiry he had just concluded. He quoted (*inter alia*) the case of a lad suffering from ophthalmia, banded backwards and forwards between an infirmary and a school for nearly a year owing to differences of opinion between the medical officers concerned. During this time this lad had communicated the disease to nine other children. Speaking generally, our experience has been to the same effect. The Board's ophthalmic surgeon, who refers to the subject in his annual report, has settled cases in which differences have occurred, and our own records of admissions and discharges present other instances of such differences of opinion.

**Period of detention.**

14. The average stay in the ophthalmia schools of the first 100 cases admitted by the Board in 1903 was 18·23 months, and of the last 100 cases discharged prior to the close of this year was 7·4 months. The stay of a child in one of these schools is obviously determined largely by the form of ophthalmia from which the child suffers.

Dealing with trachoma only we find that taking 100 cases recently discharged cured of this form of the disease the average period of detention was 17·73 months, as follows:—

Period.	Number.
1 to 12 months ... ..	29
12 to 24 ,, ... ..	48
24 to 36 ,, ... ..	19
36 to 48 ,, ... ..	4
	<hr/>
	100

Mr. Stephenson in his report, while foreshadowing a great reduction in the period of detention consequent upon the adoption of improved methods, and particularly those of a surgical nature, quoted the following analysis of 100 trachoma cases at the Hanwell Ophthalmic School, viz.:—

**Average Period of Detention, 31·91 Months.**

Period.	Number.
1 to 12 months ... ..	6
12 to 24 ,, ... ..	42
24 to 36 ,, ... ..	21
36 to 48 ,, ... ..	13
48 to 60 ,, ... ..	8
60 to 72 ,, ... ..	5
72 to 84 ,, ... ..	3
84 to 96 ,, ... ..	1
96 to 132 ,, ... ..	1
	<hr/>
	100



The cases instanced in the first table do not include any in which the treatment was begun at Hanwell and completed at White Oak School, but it should be mentioned that there are still a few cases originally transferred from Hanwell remaining uncured at White Oak School.

**Medical administration.** 15. We reconsidered the arrangements for the medical administration of the ophthalmia schools in consequence of the number of children received at High Wood School approximating to the number dealt with at White Oak School, and on our recommendation the Board arranged for the ophthalmic surgeon to visit each school twice in three weeks, and required the assistant medical officers to devote half of each day to the work of the respective schools.

16. Particulars of the work of the two schools, together with statistics of the cases treated, will be found in the report of the ophthalmic surgeon, Mr. E. Treacher Collins, F.R.C.S. (Appendix II).

**High Wood School.** (a) Infants' baths. 17. Owing to the increase in the number of infants admitted, it was found desirable to provide further facilities for the bathing of these infants in the cottages at High Wood School. The bathing arrangements previously existing consisted entirely of sprays, and to these have now been added a small bath in each cottage, in which infants can be bathed in running water.

(b) Feeble-minded cases. 18. It will be remembered that the Board have temporarily used part of the accommodation at High Wood School for the accommodation of elder feeble-minded cases, and have thereby saved an expenditure which would otherwise have been necessary. The work in connection with these cases is dealt with in the section of this report relating to defective children.

(c) Chaplain. 19. The Rev. B. Steinmetz, M.A., resigned his appointment as chaplain of the School, and was succeeded by the Rev. C. F. Newton, M.A., Vicar of Brentwood.

**White Oak School.** (a) Training of elder children. 20. A large proportion of the elder children suffering from ophthalmia, including the earliest cases admitted, have been accommodated at White Oak School, and as the stay of some of these children has been prolonged, they have been trained in various branches of industrial work in order that they might be qualified on leaving the institution to obtain suitable employment. Some of the elder boys have been trained under the gardener, and have secured certificates from the Royal Horticultural Society. Picture-framing has been another occupation carried out at the School, and a large order for one of the Board's hospitals has recently been satisfactorily executed.

b) Greenhouse. 21. A large greenhouse has been provided at the School at a cost of £80. It was anticipated that the purchase of a considerable quantity of bedding-out plants each spring would be thereby rendered unnecessary, that a greenhouse would afford occupation for the gardener and the boys under him when

it was too wet to work in the grounds, and also that it would increase the possibility of obtaining situations for some of the boys as gardeners, on leaving the School.

(c) *Works.* 22. The roads and paths of the School have for some time past been in an unsatisfactory condition, and the Board have, on the advice of the Engineer-in-Chief, approved of the main roads being re-gravelled and the smaller paths round the cottages being tar-paved. It has been decided to have the School repainted externally next spring, and various minor defects in connection with the pumps, rain-water filter, roofs and telephones and fire alarms have received attention.

### III.—RINGWORM SCHOOLS.

**Incidence  
of  
ringworm.**

23. In the case of ringworm children, unlike that dealt with in the last section, the accommodation provided by the Board proved at the outset to be insufficient. The return of children suffering from contagious disease of the skin and scalp supplied to the Board by the medical officers of the Guardians showed 532 so suffering, while the Local Government Board returns of the same time gave 368 suffering from ringworm alone. It was therefore decided to accommodate these children in the former girls' school, at Banstead Road, Sutton, of the South Metropolitan School District. This institution (now known as The Downs School) accommodates 420 children suffering from ringworm. Pending the adaptation of the school at Sutton, another part of the property acquired from the South Metropolitan School District Board—the institution at Witham—was opened temporarily as Bridge School, with accommodation for 160 ringworm cases. Subsequently, when The Downs School came to be opened, it was found that the total accommodation of 580 beds in the two institutions would be required for some time, and it was not till the year now under notice that it was found possible to close Bridge School as a ringworm institution.

That its closing became possible at all may be ascribed to the introduction into the Board's schools of the method of treatment of ringworm by X-rays. A complete apparatus for the treatment of ringworm by X-rays was installed at The Downs School last year on the advice of the dermatologist, Dr. Colcott Fox, but this step was not taken until the method of treatment in question had had a prolonged and successful trial elsewhere, and had, in the opinion of those qualified to judge, passed beyond the region of experiment. The results which had already been obtained in the Paris Municipal Schools had been most satisfactory. The average stay in these institutions, which had formerly been 18 months, was reduced to 3½ months, including the time necessary for the growth of new hair. During the first six months of 1903 at the Paris schools only 57 children were cured; during the first six months in 1904, 134 were cured, and among the cases successfully treated by the X-rays were over 100 which had resisted all other treatment. In order that no effort should be lacking to secure the best results from the treatment we appointed Dr. M. D. Sale-Barker, head of the light department at Westminster Hospital, where the largest number of cases in England have been treated by the method in question, as assistant to the dermatologist to carry out the new treatment.

It is satisfactory to find that, with remarkably few exceptions, having regard to the large number of cases dealt with, the treatment has been uniformly successful. Apart from the advantages of the treatment itself over the old tedious and painful methods of dealing with the disease, the time necessary for a cure has been greatly shortened. The first result of the introduction of this treatment, as has already been mentioned, was that the Managers were enabled to close Bridge School, the expenditure on which institution alone was over £5,000 per annum, excluding charges in respect of the purchase of the building and central expenses.

The numbers of cases remaining under treatment year by year have been as follow :—

Remaining on 1st January, 1904	..	..	..	554
„ „ 1st January, 1905	..	..	..	569
„ „ 1st January, 1906	..	..	..	538
„ „ 1st January, 1907	..	..	..	339

**Period of detention.** 24. Taking the average period of detention of the first 100 children admitted by the Board to Bridge School, Witham, after its opening on the 12th February, 1901, we find this amounts to 19 months, as follows :—

Period.	Number.
1 to 12 months ... ..	43
12 to 24 „ ... ..	29
24 to 36 „ ... ..	14
36 to 48 „ ... ..	11
48 to 60 „ ... ..	1
60 to 72 „ ... ..	1
Over 72 „ ... ..	1
	100

The average period of detention of 100 cases treated by X-rays only was 5·73 months, as follows :—

Period.	Number.
1 to 2 months ... ..	3
2 to 4 „ ... ..	17
4 to 6 „ ... ..	48
6 to 8 „ ... ..	20
8 to 10 „ ... ..	5
10 to 12 „ ... ..	3
12 to 14 „ ... ..	2
14 to 16 „ ... ..	1
16 to 18 „ ... ..	1
	100

Owing to the demand made on the apparatus, which has now been enlarged, many cases had to wait some time before being treated, and if the period of detention for the 100 cases recorded in the foregoing table is taken from the date in which the treatment was begun it averaged only 4.49 months.

**Nursing staff.** 25. The introduction of this treatment, too, has enabled us to lessen the cost of The Downs School by a reduction and re-arrangement of the nursing staff, involving an economy of £204 per annum.

**Electric lighting.** 26. The very defective condition of the gas lighting of this school, together with the necessity of providing additional electric current in consequence of the increasing demand on the X-ray apparatus, led us to consider the question of lighting the school by electricity, and the Board on our recommendation decided to take this course. We expected to gain by the change a saving of £25 per annum on the light bill, 20 per cent. better light, purer air, greater cleanliness and less expenditure on cleaning and painting work and the saving of expenditure on the renewal of accumulators for the X-ray apparatus, and on running the laundry machinery on Saturdays and after hours on other days to generate electric current.

27. A report on the statistics of the ringworm cases under treatment prepared by the dermatologist, Dr. Colcott Fox, will be found in Appendix III.

#### IV.—SEASIDE HOMES.

**Millfield tuberculous cases.** 28. The work of adapting the Millfield Home, Rustington, near Littlehampton, for the open-air treatment of early cases of pulmonary tuberculosis, or more properly for use as a sanatorium for the treatment of cases of disease of the lungs, on lines recommended by Sir William Broadbent, Bart., M.D., who visited the home and reported on the subject, has been completed. This work included the provision of a sun-room between two of the four blocks, which is being used as a schoolroom for those children whose education can be continued, and the provision of new verandahs, eight feet wide, projecting from the dormitories on the first floor of two of the blocks. By the permanent placing of beds on these new verandahs the accommodation of the home will be enlarged by 18 beds.

**S. Anne's Home.** 29. The work of this home, where ordinary non-tubercular convalescent cases, together with certain cases of physically defective children, are received, has proceeded without incident during the year, except for the regrettable occurrence of an outbreak of scarlet fever towards the end of the year. It was very difficult to trace the cause, as the first case, which occurred on October 13th, was that of a boy who had been admitted in June.

We have received the resignation, on his removal from Herne Bay, of the Rev. T. B. Watkins, M.A., who has held the post of chaplain to the home for 12 years, and steps will be taken to fill the vacancy in the new year.

**East Cliff House.** 30. Under the present arrangement for the allocation of cases amongst the three seaside homes, East Cliff House accommodates all cases of tubercular bones and glands, including many cases requiring operative treatment

and we have considered the question of making further provision for dealing with these cases. During the twelve months ended Michaelmas, 1906, 48 operations were conducted at the home, of which 22 may be described as major operations, including excisions of the hip joint and of the knee joint and cases of large spinal abscesses. We have now decided to provide a new room for operations by the partitioning off and fitting up of a portion of one of the wards of the east block of the new buildings.

**General.** 31. The reports of the medical officers of the three seaside homes on the work of the homes during the past year will be found in Appendix IV.

#### V.—HOMES FOR DEFECTIVES.

**Numbers dealt with.** 32. A calculation of the number of mentally and physically defective children in the metropolitan poor law schools has never been unattended with difficulty. In 1892 a committee was appointed by the British Association for the Advance of Science to conduct an inquiry with regard to the feeble-minded. Dr. Warner, who conducted the inquiry, stated his opinion that out of the 9,831 children in the metropolitan poor law schools, 2 per cent. were mentally dull, and that there were 211 children who, on account of their physical and mental condition, required special care and training. The returns of defective children supplied to us by the guardians showed a total of 252, about half that number being feeble-minded, and the remainder cases of physical infirmity. A careful examination of these returns showed that the number of cases which would eventually come under the Board's care was a matter of much doubt. The necessary accommodation has therefore been provided gradually. The present total accommodation for mentally defective cases alone is 282, and there were remaining in the Board's care on the 31st December, 1906, 182 cases. The vacancies exist almost entirely in the Bridge Industrial Home, at Witham—the former ringworm school converted into a working home for male feeble-minded cases—which was opened last June and is steadily filling up. The working colony for feeble-minded girls is located, temporarily, in some of the cottages on the High Wood School estate not required for ophthalmia cases. Until these two colonies were established the Board were unable to receive all the cases whose admission was required by the guardians, and it may be noted that so far the provision of these two working colonies has not involved any expenditure on building.

The foregoing statement of cases dealt with refers only to the mentally defective, and no account has been taken of the physically defective cases. Some of these cases have been received at S. Anne's Home, Herne Bay, or if they have been tubercular cases, at East Cliff House, Margate, and this appears to have met present needs.

33. The work of the small homes in London has been continued without variation during the past year. Particulars will be found in the reports of the Medical Officer (Appendix V.).

**Industrial  
Home for  
Male Cases.**

34. Last year we reported on the steps taken to provide a working colony for male feeble-minded cases. In response to the Board's representations, the Local Government Board had stated that it would be well to defer any extended scheme until the Royal Commission on the Care of the Feeble-minded had reported, and they suggested that as far as possible existing accommodation should be utilised. The diminution in the number of cases of ringworm under treatment, to which reference has already been made, enabled us to close Bridge School in March, and, the sanction of the Local Government Board having been obtained, the institution was re-opened in June, under the name of the Bridge Industrial Home, as a working home for feeble-minded cases.

Under the original sanction of the Local Government Board cases could be admitted to the home either (a) over 16 years of age if transferred from the London homes or (b) under 16 years of age, if they were either unlikely to improve any more in the subjects taught at the special schools of the London County Council, or to improve so little as to make their retention in the small homes in London no longer advantageous. Cases under 16 were to be kept separate from those over that age.

Subsequently we pointed out to the Local Government Board that these conditions restricted the use of the home, and prevented us from dealing with all the cases awaiting admission, and the requirements were then modified to allow of the admission of cases from 10 years of age and upwards on a simple medical certificate to the effect that the cases were suitable for the home.

We also found that a strict line drawn at the age of 16 did not allow of a proper classification of cases, and that there were many lads under 16, who, by habits and physical development, should be removed from the younger cases and housed with those over 16. We obtained a modification of the regulations to allow of classification not strictly by age, but in accordance with the circumstances of each case.

The institution was formerly a workhouse, and has seen several changes. It consists of an extensive range of buildings on a site of  $7\frac{1}{4}$  acres, and includes a small detached modern infirmary. It provided for 160 ringworm children, and the accommodation would probably not be very much less for feeble-minded cases.

In resident charge was placed a superintendent, with duties including the supervision of the work of the industrial trainers. Provision was made for the younger cases by the appointment of a teacher-attendant qualified to give suitable elementary school instruction. The remaining male staff consists of industrial trainers, each qualified to undertake some special branch of training.

The wife of the superintendent acts as housekeeper, and carries out the laundry work, cooking and domestic work, with the assistance of one female helper and the inmates.

Up to the present, and as a tentative arrangement, the physical ailments of the inmates have been attended to by a local medical practitioner, and a medical officer who has certified the cases in London for admission, has also visited the home monthly in connection with the mental work. These arrangements will be reviewed in the light of the experience gained at the termination of the first year.

At the outset some 40 boys were admitted, and at the end of the year the number had increased to 63.

It is obvious that starting with a small number, which increased but slowly, and with work which was in an experimental stage, we found it necessary, if the expenditure of the home was to be kept within reasonable bounds, to proceed with caution. The occupations provided have been farming and bootmaking. In addition the whole of the laundry work of the home has been done by the inmates with one helper, and they have assisted in the kitchen and carried out the domestic work. The boot repairs for this home, for High Wood School, and most of the London homes have been done here, and surgical and other boots have been made. Large quantities of garden produce have been supplied to High Wood School.

We have done what is possible to brighten the life of the home and to provide suitable and healthy recreation for the inmates. A large open-air swimming bath is in course of construction, and the work is being carried out by the inmates under a general mechanic. We are also taking steps to form a brass band.

While not overlooking the difficulties which have to be faced in inaugurating a home of this type, we are satisfied with the results so far achieved, and hope that increasing numbers will justify us in the further development of the work of the home.

Our experience is that for a large number of males of this class work on the land is the most suitable, and produces the best results. One of our difficulties is therefore the limited site available at Witham, and the question of meeting this difficulty will require consideration early in the new year.

**Industrial home for female cases.** 35. The small temporary colony for female cases at High Wood School has been extended, and by enclosing in all six cottages and a small staff block, it has been possible to form a small self-contained home. Here, too, an increased number has enabled us to strengthen the staff, and to appoint a female superintendent to organise and supervise the industrial training.

The work done here includes the making of stockings, hearthrugs, slip mats, dish cloths, etc. The girls are also engaged in laundry work, basket making, and re-seating cane chairs, and all their clothing is made in the colony.

**Other defective cases** 36. We have considered the question of dealing with defective children for whom no provision has yet been made. The Local Government Board order under which the Managers deal with these children specifies those "who, by reason of defect of intellect or physical infirmity, cannot properly be trained in association with children in ordinary schools." The Managers have already provided for those mentally defective cases which are free from such further complications as deafness, blindness, epilepsy, or moral defect requiring separate treatment, and for those cases of simple physical defect not complicated with mental or moral defect, which are received at the seaside homes.

There remain the following classes for whom no special provision has been made :—

- (a) Blind.
- (b) Deaf and (or) dumb.
- (c) Epileptics—(i.) sane, (ii.) feeble-minded.
- (d) Grossly morally deficient, or with habits requiring entirely separate treatment, and any combinations of the foregoing with or without feeble-mindedness.

With regard to blind, deaf, and dumb children, the Managers submitted to the Local Government Board in 1902 proposals for dealing with these cases, but the Board replied that "looking to the very small number of cases involved, it would be more convenient that the several boards of guardians should themselves deal with the children in the manner indicated (*i.e.*, by boarding out)."

We may quote the following as typical examples of the cases for whom we have been asked to make provision :—

T. W.	...	m, 7	...	Mentally defective and dumb.
A. E. M.	...	f, 13	...	Ditto.
A. E. G. S.	...	m, 16	...	Mentally defective, deaf, and dumb.
D. B.	...	f, 15	...	General physical development defective, speech ditto, mental powers below normal, paralysis of left leg and hand, epileptic.
W. M.	...	m, 16	...	Deaf, nearly dumb, nearly blind.
A. B.	...	m, 14	...	Slightly mentally deficient, old hip disease, blind in one eye.
J. B.	...	m, 12	...	Daily and nightly incontinence of fæces, not yielding to any treatment whatever, unable even in day time to look after himself.
H. S.	...	m, 12	...	Most dirty in his habits.
S. W.	...	m, 13	...	Reported dirty habits, both morally and physically, guilty of filthy and mischievous acts of depravity.
J. F.	...	m, 11	...	Spiteful, callous, and dangerous, criminal instincts, dangerous associate of smaller children, does not know right from wrong, morally insane.

Some similar cases have occasionally been discharged from the homes for feeble-minded on account of the obvious inadvisability of keeping them in contact with children who have no such defects.

The Managers, on our recommendation, decided to submit a report on cases such as the foregoing, to the Local Government Board, and to ask that Board to advise what steps, if any, should be taken towards dealing with these cases, pending the appearance of the report of the Royal Commission *re* Feeble-minded, and any consequent changes thereon.

**Epileptics.** 37. Another and a very deserving class for which special provision is required is the epileptic, both sane and feeble-minded. The need for separate provision for epileptics is now so generally recognised that it is unnecessary to set forth the reasons for it at length. Public institutions are slowly supplementing the wholly inadequate accommodation previously existing, which was dependent on voluntary efforts both for its inception and maintenance. It is generally agreed that the lot of the sane epileptic child is an even harder one than that of the insane, as, unless specially treated, the sane epileptic child grows up in idleness and ignorance, a burden on those in whose care he is, and an unfit companion for those with whom he is forced to associate. In the absence of such special treatment sane epileptics must inevitably and rapidly deteriorate. It has been found, on the other hand, that association in a colony, so far from being harmful, awakens sympathy one for another, and the training and occupation provided arouse hopes and aspirations in the patient which bring about development and improvement not otherwise possible.

The returns which the guardians submitted to us showed 32 sane epileptic



children under the age of 16, but while the returns are as stated, it appeared probable that if accommodation were provided there would be, as time goes on, a great increase in the number of applications for admission.

Meantime it appeared to us that an inexpensive beginning might be made in providing for these children by utilising the detached infirmary at Bridge Industrial Home, which has already been mentioned.

The Managers, on our recommendation, submitted a report and proposal to this effect to the Local Government Board, but that Board replied that they did not consider it desirable to add to the divisions of classification at this home at present.

**Royal Com-  
mission on  
Feeble-  
minded.** 38. We have referred to the Royal Commission with regard to the feeble-minded now sitting. This is the Commission appointed in 1905, "to consider the existing methods of dealing with idiots "and epileptics, and with imbecile, feeble-minded, or defective persons "not certified under the Lunacy Laws; and in view of the hardship or danger "resulting to such persons and the community by insufficient provision for "their care, training, and control, to report as to the amendments in the law or "other measures which should be adopted in the matter, due regard being had to "the expense involved in any such proposals, and to the best means of securing "economy therein."

The Board's evidence was submitted to the Commission in 1905, but a recent extension of the terms of reference which has brought the work of the Lunacy Commissioners within the scope of the inquiry must prolong the time before the report of the Commissioners can be made.

There is undoubtedly room for a well-considered scheme for dealing with these classes on practical lines which would reduce to uniformity under one authority in one area the differences in standard and method which now prevail.

A question which must receive attention is that of public provision being made available for the detention in suitable institutions of idiots, epileptics, imbeciles, and feeble-minded of all classes, and not only as at present of those chargeable to the guardians of the poor, subject to arrangements for payment in cases of patients whose circumstances allow of it.

If the full benefits of the detention of these cases are to be secured for the community, it should be, generally speaking, compulsory and permanent, subject to periodical medical examination and certification, and to the absence of ability of relations to provide satisfactory private detention.

The question of securing a nearer approach to a uniform standard of medical examination and certification is one of great importance, and this would be facilitated by placing this duty under the control of a central authority who would command expert assistance.

In view of the closing terms of the reference to the Royal Commission with regard to the expense involved in their proposals and the best means of securing economy therein, we may expect the type of institution of the future to receive full consideration.

Small homes have been very much on their trial during the last few years. They were undoubtedly started when it was believed that the minute and detailed

care and training exercised in them would lead to a large proportion of the inmates being discharged to take their places in the world. This view is no longer prevalent, and it is recognised that for the majority permanent detention is necessary. While the part which these homes have played in the treatment and improvement especially of the younger cases must be admitted, it cannot be overlooked that they are costly, and that large colonies, especially those built on the small block or cottage system, are more economical, offer the only chance of making the inmates to any extent self-supporting, provide excellent opportunities for classification, can be better supervised, and can be situated in the country, without to any extent diminishing the advantages of home life.

The report of the Royal Commission on these questions will be awaited with the greatest interest by all those who share in the work of caring for the imbecile and defective classes.

#### VI.—REMAND HOMES.

##### Statistics.

39. We submit (Appendix VI.) statistical tables concerning the children received during the past year into the Remand Homes.

##### Treatment of juvenile offenders.

40. From year to year since the opening of the Remand Homes we have dealt in our annual reports with the question of the improvements which should be made in the method of dealing with juvenile offenders. The subject received renewed attention towards the end of the year under notice by the appointment, on the 8th December, of our Chairman to represent the Managers on a deputation to the Home Secretary. This deputation was convened by the Committee on Wage-earning Children, and in addition to representatives of that Committee and of the Board, it included representatives of the London County Council Education Committee, the International Congress on the Welfare of Children, the Howard Association, the State Children's Association, the Romilly Society, and the National Union of Teachers. It was anticipated that the deputation would wait upon the Home Secretary early in 1907,\* and it may be of interest to briefly recapitulate the part which the Board have taken in this question, and the views which have been expressed by them as the results of their experience.

The three Remand Homes established in London were provided by the Managers under an order of the Local Government Board, dated April 2nd, 1897,

\* The deputation waited on the Home Secretary on the 24th January, 1907. It was introduced by Mr. A. A. Allen, M.P., and its case was put forward by Mr. A. J. Shephard, Chairman of the London County Council Education Committee, Mr. Courtney Lord, of the Children's Court, Birmingham, and Mr. Cornell, Chairman of the Children's Committee of the Metropolitan Asylums Board. It may be noted that the points advanced by the deputation included those which the Board brought forward as the result of their experience so long ago as 1903, and which they have continued to advance ever since. These points included the establishment of Remand Homes in all large towns; the prohibition of the detention of boys and girls under 16 in the police-station cells or workhouse; the institution, if possible, at the Remand Homes, of special courts for children, particularly in London and other large towns; the appointment of special magistrates to deal with youthful offenders under 16 years; and the passing of a measure enabling the court to release the offender on probation without proceeding to conviction, and providing for the appointment of probation officers who should have the care of such children. The Home Secretary, in reply, expressed his general agreement with the objects of the deputation. He agreed that, generally speaking, delinquent children were not in any sense real criminals, that the first consideration when those children got into trouble ought to be the welfare of the child and its character, and that the offence should occupy a secondary position as far as possible. He was entirely in sympathy with the work of Remand Homes, and while unable to speak definitely on matters of detail, he stated that he hoped to introduce the Probation Officers Bill next session, possibly with additions which would deal with other phases of prison detention, and make the bill of considerably larger scope.

for children who had up till then been remanded to the workhouse. The circumstances under which the homes were established and opened are set forth fully in our annual report for 1901. After steps had been taken to acquire suitable premises for the purpose of the Remand Homes, it was found that there was a legal difficulty in the way of the homes being used by the magistrates, who held themselves bound by the wording of the Acts relating to the subject to remand children to the workhouse. As the result of several conferences on this question between the Managers, and the Magistrates and the Local Government Board, the Youthful Offenders Act, 1901, was passed, and this Act came into operation on January 1st, 1902, on which date the Remand Homes were opened.

At the end of that year we began to sum up the results of the experience of the working of the homes. It had already become apparent that the homes were fulfilling a very useful purpose, since the children who were received into them were kept free from an acquaintance with the workhouse, where generally no separate provision could be made for them, and where their companions in many cases were adult and undesirable inmates. In the Remand Homes, on the other hand, special attention was paid to the children, and their education was carried on, as far as possible, during their short stay.

Experience showed us, however, that many improvements in the method of treating juvenile offenders remained to be made. In the first place the Youthful Offenders Act, 1901, enacted that "A court of summary jurisdiction on remanding . . . any child or young person may . . . remand or commit him into "the custody of any fit person named in the commitment who is willing to "receive him." The Act was therefore optional both as to the provision of Remand Homes and as to the sending of juvenile offenders to them, and while the great bulk of children on remand have been sent to the homes, instances have occurred from time to time where these children have found their way to the workhouse. Another great defect in the Act was that the homes were only available for children after their first appearance before a magistrate, and accordingly children were generally lodged in the police court cells for the first night after arrest, or for a week-end if arrested on Saturday. During 1905, for instance, 37 children under 10 years of age, 86 between 10 and 13 years, and 293 between 13 and 16 years slept in police stations prior to admission to the Remand Homes. It seemed obvious that much of the advantage of removing these children from the workhouse was nullified if their first night or two after arrest were passed in a police cell. Thirdly, we came to the conclusion that provision should be made for hearing cases of children apart from those of adults, and for separating them entirely from the ordinary police court. Fourthly, it appeared that magistrates or justices should be enabled to extend the period of remand beyond the week at present allowed, when circumstances required such a course.

In March, 1904, these views were submitted by the Board to the then Home Secretary, and he was requested to receive a deputation on the subject. A reply was received, however, to the effect that the Managers' proposals would appear to involve legislation which the exigencies of public business would not allow to be introduced during that session.

In November, 1904, a conference on the subject was convened by the Committee on Wage-earning Children, and our Chairman and Vice-chairman

represented the Board at this conference, which was attended by representatives of almost every body, public and voluntary, dealing with children. As a result of a full discussion on the subject, resolutions were adopted on the initiative of the Managers' representatives to the effect that it was desirable (a) that legislation should be promoted to make Section 4 (1) of the Youthful Offenders Act, 1901, by which children can be sent to Remand Homes, obligatory; (b) that the Remand Homes should be made available for the period between arrest and appearance in court, and that the maximum time of remand allowed should be extended beyond the period of one week; (c) that any legislation to be promoted should make provision, as a compulsory measure, for the treatment of children now liable to be brought to police courts in places separate and apart from the court for adult cases.

In each annual report since this time we have emphasised the need for these various reforms, many of which, it may be added, have long since been adopted in some of the Colonies and the United States, as well as in some of the leading provincial towns.

In 1905 a further advance was made by the issue by the Home Secretary of a series of regulations with regard to the time of hearing children's cases, and the separation of children from adult offenders while at the police court. These regulations were quoted in our last annual report.

**Numbers received.** 41. The number of remands during 1906 was 3,118. This includes separate remands of the same child. This repetition of remands rendered the statistics available for the formation of an opinion as to the accommodation required less satisfactory than they would otherwise have been, and in providing 150 beds the Board accepted the computations of those best qualified to judge.

The actual number of children passing through the homes in 1906 was 2,026.

**General.** 42. The general conduct of the children on remand is good. There is not much change in the character of cases admitted. They are often received in a ragged and filthy condition, and the great improvement shown after even a week's stay in a remand home, when the child has been cleaned and decently clothed, is frequently the subject of favourable comment by the magistrates.

The superintendent of the Camberwell Green Home reports a marked diminution in the number of children charged from houses of ill fame. The same officer puts forward some interesting views as to the cause of so many young children being charged with petty larceny. From his conversations with the children he attributes this to the increased facilities for children to obtain entry to a music hall for the sum of twopence. Boys appear to be allowed into some halls at any age so long as they have this sum, which, he finds, they will do almost anything to obtain. He also finds that amongst elder lads the desire to get the fourpence required for admission to common lodging houses is an incentive to begging and theft. It is pleasing to note that our superintendents do their utmost to assist and help forward the many children who pass through the

homes and who need a helping and guiding hand, and they have received some most satisfactory letters from these children when they are making progress in the world.

(Signed) T. CORNELL,  
*Chairman.*

#### APPENDICES.

- I. Particulars of homes and schools.
- II. Ophthalmia schools—ophthalmic surgeon's report.
- III. Ringworm schools—dermatologist's report.
- IV. Seaside homes—reports of the medical officers of S. Anne's Home, East Cliff House, and Millfield.
- V. Homes for defective children—medical officer's reports.
- VI. Remand homes—statistical tables.
- VII. Return of cases admitted from the several unions and parishes.
- VIII. General statistical statement.
- IX. Financial statement.

#### APPENDIX I.

(This Appendix is omitted from this volume, as the various particulars given in it are included in the Appendix to the Introduction on page xx.)

**APPENDIX II.**  
**OPHTHALMIA SCHOOLS.**

REPORT OF THE VISITING OPHTHALMIC SURGEON (MR. E. TREACHER COLLINS, F.R.C.S.).

*January, 1907.*

*WHITE OAK SCHOOL, SWANLEY.*

There were 249 children left in the school at the end of 1905.

During the year 1906, 270\* children have been admitted.

The affections of the eyes from which these children were suffering may be classified as follows:—

Trachoma	..	..	..	..	..	..	..	56 cases
Follicular conjunctivitis	..	..	..	..	..	..	..	27 "
Acute mucopurulent conjunctivitis	..	..	..	..	..	..	..	29 "
Chronic conjunctivitis	..	..	..	..	..	..	..	139 "
Phlyctenular ophthalmia	..	..	..	..	..	..	..	9 "
Lachrymal obstruction	..	..	..	..	..	..	..	3 "
Marginal blepharitis	..	..	..	..	..	..	..	7 "

210 children have been discharged cured:—

Trachoma	..	..	..	..	..	..	..	64 cases.
Follicular conjunctivitis	..	..	..	..	..	..	..	11 "
Acute mucopurulent conjunctivitis	..	..	..	..	..	..	..	20 "
Chronic conjunctivitis	..	..	..	..	..	..	..	96 "
Phlyctenular ophthalmia	..	..	..	..	..	..	..	8 "
Marginal blepharitis	..	..	..	..	..	..	..	11 "

20 children have been removed by order of the guardians before they were cured.

4 children absconded.

1 child died of pneumonic phthisis.

7 children who had been discharged cured were re-admitted with a recurrence of the eye disease for which they were previously treated.

284 children were left in the school at the end of the year.

Many of the small children were admitted in an exceedingly debilitated condition; after a short sojourn at the school they increased considerably in weight, and manifested a marked improvement in their general condition.

The only infectious malady occurring during the year has been measles, of which there have been 4 cases.

*HIGH WOOD SCHOOL, BRENTWOOD.*

There were 223 children left in the school at the end of the year 1905.

During the year 1906, 182\* children have been admitted.

The affections of the eyes from which these children were suffering may be classified as follows:—

Trachoma	..	..	..	..	..	..	..	59 cases.
Follicular conjunctivitis	..	..	..	..	..	..	..	14 "
Acute mucopurulent conjunctivitis	..	..	..	..	..	..	..	39 "
Chronic conjunctivitis	..	..	..	..	..	..	..	59 "
Phlyctenular ophthalmia	..	..	..	..	..	..	..	5 "
Lachrymal obstruction	..	..	..	..	..	..	..	1 case.
Marginal blepharitis	..	..	..	..	..	..	..	5 cases.

173 children were discharged cured:—

Trachoma	..	..	..	..	..	..	..	39 cases.
Follicular conjunctivitis	..	..	..	..	..	..	..	20 "
Acute mucopurulent conjunctivitis	..	..	..	..	..	..	..	36 "
Chronic conjunctivitis	..	..	..	..	..	..	..	71 "
Phlyctenular ophthalmia	..	..	..	..	..	..	..	4 "
Marginal blepharitis	..	..	..	..	..	..	..	3 "

\* Not reckoning transfers of chargeability.

15 children have been removed by order of the guardians before they were cured.

1 child suffering from meningitis secondary to disease of the middle ear was removed to the Charing Cross Hospital for operation, and died there.

6 children who had been discharged cured were re-admitted with a recurrence of the eye disease for which they had been previously treated.

216 children were left in the school at the end of the year.

In June, at about the same time, there were outbreaks of measles and mumps; there being 8 cases of the former and 3 of the latter. All the children made a good recovery.

The following table shows the number of trachomatous and non-trachomatous cases admitted into each of the schools from the different parishes and unions:—

PARISH OR UNION.	NON-TRACHOMA.		TRACHOMA.		TOTAL.	
	White Oak School.	High Wood School.	White Oak School.	High Wood School.	White Oak School.	High Wood School.
Bermondsey .. .. .	18	9	8	4	26	13
Bethnal Green .. .. .	9	5	2	1	11	6
Bloomsbury .. .. .	—	1	1	—	1	1
Camberwell .. .. .	6	1	2	—	8	1
Chelsea .. .. .	1	—	—	1	1	1
Fulham .. .. .	5	4	1	1	6	5
George's, St. .. .. .	1	—	2	2	3	2
George, St., in-the-East ..	—	—	—	—	—	—
Greenwich .. .. .	11	1	4	—	15	1
Hackney .. .. .	—	9	—	8	—	17
Hammersmith .. .. .	3	2	—	2	3	4
Holborn .. .. .	—	—	2	—	2	—
Islington .. .. .	6	4	1	—	7	4
Kensington .. .. .	13	2	3	2	16	4
Lambeth .. .. .	6	6	—	4	6	10
Lewisham .. .. .	3	—	—	—	3	—
London, City of .. .. .	—	—	1	—	1	—
Marylebone, St. .. .. .	1	2	1	—	2	2
Mile End Old Town .. .. .	2	2	1	—	3	2
Paddington .. .. .	1	1	—	—	1	1
Pancras, St. .. .. .	1	2	2	—	3	2
Poplar .. .. .	17	9	2	1	19	10
Shoreditch .. .. .	1	1	2	5	3	6
Southwark .. .. .	40	34	7	17	47	51
Stepney .. .. .	12	6	2	1	14	7
Strand .. .. .	1	—	2	—	3	—
Wandsworth .. .. .	53	18	1	6	54	24
Whitechapel .. .. .	—	5	1	1	1	6
Woolwich .. .. .	3	2	4	1	7	3
London County Council ..	—	—	1	—	1	—
*Chesterfield .. .. .	—	—	1	—	1	—
*Croydon .. .. .	1	—	—	—	1	—
Edmonton .. .. .	—	—	1	1	1	1
*Hendon .. .. .	1	—	—	—	1	—
*Leicester .. .. .	1	—	—	—	1	—
*Nottingham .. .. .	1	—	—	—	1	—
*Watford .. .. .	1	—	—	—	1	—
West Ham .. .. .	—	—	2	—	2	—
*Yarmouth, Great .. .. .	1	—	—	—	1	—
Total .. .. .	220	126	57	58	277	184
	346		115		461	

N.B.—The figures in this table include seven transfers of chargeability and two boys who absconded and returned.

\* From the training ship Exmouth.

It is now possible to compare the total admissions to the two schools during the last three years. They are as follow :—

1904 ...	Non-trachoma, 316 ...	Trachoma, 200 ...	Total, 516
1905 ...	„ 288 ...	„ 141 ...	„ 428
1906 ...	„ 339 ...	„ 113 ...	„ 452

The increase in the number of admissions of non-trachomatous cases during the past year is mainly attributable to two causes, the admission of a number of boys from the training ship Exmouth to the White Oak School, and the admission of a number of small children from The Downs School, Sutton, to High Wood School.

In August on account of an outbreak of ophthalmia being reported on the training ship Exmouth, I visited the ship, inspected all the boys' eyes, and selected those showing any signs of contagious eye affections for transfer and treatment at the White Oak School. In all 39 cases were admitted from the "Exmouth," most of them suffering from chronic conjunctivitis, a few from trachoma; by the end of the year 23 had been returned cured.

In September 15 children under treatment for ringworm at The Downs School contracted acute mucopurulent ophthalmia, due to the Koch-Week's bacillus, and were transferred to High Wood School; by the end of the year 12 of these had been returned cured of their eye affection.

One of the nurses who was looking after these children at The Downs School infected one of her eyes; she was for a time transferred to the ophthalmia school for treatment and cured there.

A nurse at the High Wood School, under whose charge these children were placed, also infected one of her eyes, but was at once treated and rapidly got well.

The steady diminution in the number of trachoma cases admitted to the ophthalmia schools would seem to indicate that their establishment, and the facilities which they afford for the early isolation of such cases, is tending to check the spread of that disease. In connection with this matter it is well to mention, that during the last year several children have been admitted with advanced trachoma who had been resident in their parish schools for some years. Presumably the character of the eye affection from which they were suffering must for a long time have escaped detection. This being so, it is highly probable that many unsuspected cases of early trachoma might be discovered in the poor law schools if systematic examinations of the eyes of all the children were made periodically by skilled observers.

(Signed) E. TREACHER COLLINS.

### APPENDIX III.

#### RINGWORM SCHOOLS.

REPORT OF THE DERMATOLOGIST (Dr. T. COLCOTT FOX).

*January, 1907.*

#### BRIDGE SCHOOL, WITHAM, ESSEX.

On December 31st, 1905, there were left in this school under treatment 127 children (77 boys and 50 girls). Between this date and March 22nd, 1906, 70 cases



(42 boys and 28 girls) were discharged to the guardians, and 10 cases (4 boys and 6 girls) were transferred to The Downs School for X-ray treatment. On March 23rd, 1906, the remaining 47 cases (31 boys and 16 girls) were transferred to The Downs School at Sutton, as it was found to be possible by the more rapid method of cure by X-rays to deal with all the children in the one school.

*THE DOWNS SCHOOL, SUTTON, SURREY.*

On December 31st, 1905, there were 411 cases left in this school under treatment, and during the year 1906 the admissions numbered 705\* (366 boys and 349 girls) as set forth in the subjoined tables. These admissions include the 57 uncured cases sent on from Bridge School, and a few cases counted twice over because readmitted after being sent to the Ophthalmic School at Brentwood, or after being taken out by request of the guardians. Of these 1,116 cases, no less than 718 were discharged cured, 35 were removed at the request of the guardians, 22 were transferred to the Ophthalmic Hospital at Brentwood on account of eye troubles, and 2 children died, 1 of heart disease and pneumonia and 1 of tuberculous meningitis. On December 31st, 1906, there remained in the school 339 children.

TABLE SHOWING THE CASES FROM EACH PARISH OR UNION.

PARISH OR UNION.	Microsporium Ringworm.	Trichophyton Ringworm.	Favus.	Undetermined.†	Total.
Bermondsey ...	16	—	—	3	19
Bethnal Green ...	30	5	—	4	39
Camberwell ...	31	3	—	3	37
Chelsea ...	4	—	—	1	5
Edmonton ...	16	2	—	—	18
Fulham ...	16	1	—	4	21
S. George's W. ...	4	1	—	—	5
S. George's E. ...	3	1	4	3	11
Greenwich ...	29	4	—	8	41
Hackney ...	41	13	—	2	56
Hammersmith ...	1	—	—	—	1
Holborn ...	19	3	—	4	26
Islington ...	32	4	—	4	40
Kensington... ..	8	—	—	3	11
Lambeth ...	57	4	—	10	71
Lewisham ...	22	2	—	3	27
London, City of .	3	1	—	2	6
London County Cl.	1	7	—	2	10
Marylebone, St. .	8	—	—	—	8
Mile End ...	15	4	—	3	22
Paddington ...	13	3	1	2	19
Pancras, St. ...	39	8	—	2	49
Poplar ...	24	8	—	4	36
Shoreditch ...	19	4	—	7	31
Southwark ...	43	6	—	5	53
Stepney ...	7	1	—	4	12
Strand ...	1	—	—	—	1
Wandsworth ...	13	4	—	5	22
Whitechapel ...	2	—	—	—	2
Woolwich ...	9	—	—	1	10
West Ham ...	—	1	—	1	2
Totals ...	526	90	5	90	711

\* Excluding cases of transfer of chargeability.

† By "Undetermined" is to be understood cases in which ringworm could not be found when first examined, generally because there was none, or the evidence was obliterated by treatment.

N.B.—The figures in this table include six changes of chargeability.

Table showing the age at which children were admitted :—

Age in Years.	Microsporium Ringworm.	Trichophyton Ringworm.	Favus.	Undetermined.	Total.
3	107	5	1	18	131
4	72	4	...	7	83
5	67	8	...	12	87
6	77	7	...	7	91
7	65	7	2	9	83
8	51	7	...	9	67
9	34	12	2	8	56
10	19	14	...	5	38
11	19	8	...	8	35
12	5	11	...	4	20
13	2	1	...	2	5
14	3	4	...	...	7
15	...	1	...	...	1
16	...	1	...	...	1
	521	90	5	89	705

The proportion of infants admitted has been increasing since the opening of the schools, and the increase is very striking in this table, for the proportion is about half more than before.

*X-ray Treatment.*—In last year's report I mentioned that the application of the X-rays to the first batch of children treated after the instalment was not satisfactory. Since then I can say it has been, in the hands of Dr. Sale-Barker, a complete success, and a proof of the revolution this method has brought about in the treatment of ringworm. The only slight check experienced was due to the wearing out of the accumulators which supplied the electricity. They began to show signs of weakness after about nine months' use and finally became very unsatisfactory. We have recently obtained our electrical supply from the main, and now again everything is in first-rate working order, and, indeed, an improvement on the former arrangement. The advantage of this treatment in such an institution over the older method is that it is *expeditious* and hence economical, *certain* when carried out by an expert, and *painless*.

We have discharged cured by this method 375 cases, and about 30 others had been treated who were transferred elsewhere and taken out, so that we may put the number of children cured of their ringworm by the X-ray method in 1906 as 400.

(Signed) T. COLCOTT FOX.

**APPENDIX IV.**  
**SEASIDE HOMES.**

*(a) S. ANNE'S HOME, HERNE BAY.*

REPORT OF THE MEDICAL OFFICER (DR. C. K. BOWES).

*February, 1907.*

I beg to submit the following report on the work done at S. Anne's Home during the year 1906.

There were in the Home at the end of 1905	..	114	children.
Admitted during the year 1906	.. ..	379	,,
Discharged " " "	.. ..	370	,,
Died in the Home " "	.. ..	6	,,
Remaining in the Home at the end of 1906	..	117	,,

Most of the cases admitted were medical cases, a few only being convalescent after surgical treatment before admission. Only 1 surgical operation was performed during the year, namely, for necrosis, with marked benefit to the child.

Of the 6 children who died, 3 died of heart disease, 1 of consumption, 1 of tubercular meningitis, and 1 of bronchiectasis.

There was, I regret to say, an outbreak of scarlet fever in the Home in October last, which assumed a most serious character in December, when 8 cases occurred between December 19th and 31st. Of these 8 cases, 4 were of a most malignant type, and they all 4 died. These deaths are not included in the figures given above, as the children had been discharged from the Home to Sea Street Isolation Cottages.

We had one most interesting case in the Home during the year. An infant, age five, was admitted from Poplar on April 4th. He was transferred to The Downs School on June 5th, and while there his general health was very unsatisfactory, and I had some correspondence with Dr. Rice about him. He was re-admitted here on July 25th, and I found a marked alteration in him. He got steadily worse, and it was soon evident that he had cerebro-spinal meningitis, but not in its most acute form. He was acutely ill for several weeks, but eventually got much better, and was able to walk about again when he contracted malignant scarlet fever and died.

(Signed) C. K. BOWES, M.D.

*(b) EAST CLIFF HOUSE, MARGATE.*

REPORT OF THE MEDICAL OFFICER (MR. W. G. SUTCLIFFE, F.R.C.S.).

The number of children admitted during the year, including those present on January 1st, 1906, is 445, being a slight increase on previous years. There would be no difficulty in coping with a much larger number of temporary cases in addition to the more serious cases of surgical tuberculous disease for whom the committee have provided special accommodation. The verandah, facing south, and fitted with 35 beds, is in constant use winter and summer, and of the 130 children in the home, an average of 85 are affected with some form of surgical tubercle. Spinal

disease, hip and knee joint disease, and similar affections of the upper extremities have been treated in considerable numbers, while a large number of tuberculous glands have subsided without operative treatment.

The number of operations performed under anaesthetics during the year is 55; of these there were one amputation at the hip joint, 3 excisions of the hip joint, a re-amputation of leg, 4 cases of glands of neck and 1 of axillary glands, the remainder consisting of tuberculous abscesses in connection with the spine or joints, the removal of tonsils and adenoids and other minor operations. The appointment by the committee of a dental surgeon (Mr. Blomfield) has relieved the medical officer of much responsibility and added considerably to the advantages obtainable by the children.

(Signed) W. G. SUTCLIFFE, F.R.C.S.

(c) *MILLFIELD, RUSTINGTON.*

REPORT OF THE MEDICAL OFFICER (MR. C. E. LAST, M.R.C.S., L.R.C.P.).

I beg to submit the following report for the information of the Children's Committee.

During the year 1906 there have been 81 admissions, 57 discharges, and 1 death, and 88 children remain under treatment.

Of the admissions, 4 have been readmitted from The Downs School (1 child twice).

Of the 57 discharges, 37 may be taken as satisfactory considering the purposes of the home, and of the remaining 20, 5 were discharged over-age (2 of whom were approaching a satisfactory condition and the other 3, although much improved, were not suitable for discharge), 5 were removed at the request of guardians or parents (2 of whom were most unsuitable for premature discharge), 4 were transferred to the Downs School (1 child twice), 3 were sent for special treatment elsewhere (1 case of tuberculous disease of the knee, 1 of ophthalmia, and 1 of suppurating glands of the neck), 2 were returned as hopelessly incurable and not likely to benefit, and 1 as not suffering from pulmonary tuberculosis.

Of the 88 cases remaining in the home, over 20 will be ready for discharge as the coming spring advances.

The general progress of the children is being maintained, and there has been little or no intercurrent disease.

The epidemic of ringworm from which we have suffered has apparently died out, there having been no case since July.

The new balconies which have been erected for out-door sleeping have been in constant use since March; they accommodate 18 beds, and materially contribute to the facilities for the treatment of pulmonary tuberculosis.

The children rapidly become accustomed to sleeping in the open, and do not appear in any way to suffer from this apparent exposure, the balconies only being closed for extreme stress of weather.

(Signed) CECIL E. LAST,  
*Medical Officer.*

*December, 1906.*

## APPENDIX V.

## HOMES FOR DEFECTIVES.

## REPORTS OF MEDICAL OFFICER (MISS R. TURNER, M.R.C.S., L.R.C.P.).

*(a) LLOYD HOUSE, AND 12, LLOYD STREET.*

During the year 1906 there have been many changes at the Lloyd House Home, a large number of the girls having passed on to the Industrial Colony at High Wood School, Brentwood, and many younger ones having come in their place.

**Medical.** There was, I am sorry to say, much illness in this Home at the beginning of the year. There were at that time 4 cases of measles, 3 being followed by bronchial pneumonia of a severe form. It was found necessary to remove these 3 children to their Infirmaries. 2 of them have since returned quite recovered, but the third subsequently developed tubercular trouble of the lung and is still away.

It has been found necessary to remove enlarged tonsils and adenoids in 4 cases; 1 girl had an aural polypus which had to be operated on; 2 others had whitlows, and in one case the removal of the nail was found to be necessary; 1 case of pleurisy occurred, and 1 of one-sided nasal discharge suggestive of diphtheria. From cultures made from the swab from this case, positive results were obtained and the patient was sent to the Eastern Hospital, Homerton. She was subsequently returned, however, as not suffering from diphtheria, as the Hospital Authorities failed to get positive results from cultures made by them.

Again this year the Home has suffered severely in the matter of ringworm. There have been 4 cases of tinea circinata and 4 of tinea tonsurans. The later cases were removed to Sutton, and all but 1 have since returned from there quite cured.

**Mental.** As said above, there have been many changes among the children, and this fact cannot be overlooked when one is considering the standard of mental capacity of the present inmates of this Home.

All the girls who have been any length of time in the Home show most satisfactory improvement, but as most of those who had been long here have lately been sent on to the Industrial Colony at Brentwood, the majority of the girls at present in the Home are newcomers, with whom the slow and often disheartening work of training has only just begun. It is too early to report any very definite results in the case of these girls. The staff, however, in dealing with the newcomers, show the same untiring zeal and patience which have borne such good fruit in the case of the older girls.

**Admissions and discharges.** In the course of the year 15 new girls have been admitted and 15 have been discharged. Of the latter, 1 was sent to the Earlsfield Road Home in place of 1 transferred from there, 2 were certified as imbeciles and sent to Tooting Bec Asylum, the remaining 12 have been transferred to the Industrial Colony at Brentwood.

The children continue to have drill and to receive pocket money every week, and the same beneficial results attend the practice as before.

(Signed) R. TURNER.

December, 1906.

(b) 16, *ELM GROVE, PECKHAM.*

I beg to submit to the Committee the following report on the health and mental condition of the boys in the Peckham Home during the year 1906.

**Medical.** I am sorry to have to report one very sad occurrence. I refer to the case of the boy who was found dead in his bed. Post-mortem results showed that death was due to syncope following on a fit.

With this unfortunate exception there is nothing to report of a serious character ; the general health of the boys has been exceptionally good and there has been little illness. In the early part of the year, 1 boy, who had been admitted only a few days previously, had a rather sharp attack of bronchitis, but his recovery was uninterrupted. 1 of the older boys who has been in the Home for some time had an epileptic fit, but up to the present he has had no recurrence of this trouble.

2 boys have suffered from ringworm ; 1 had ringworm of the body first, subsequently having a patch of ringworm of the scalp ; in the second case there was ringworm of the head only. Both boys were sent to The Downs School and have since returned cured.

**Mental.** As in the other Homes, so in the Peckham Home, there have been a great many changes during the year, the greater number of the old boys having been sent on to Bridge Industrial Home or elsewhere, and new ones having come in their place. It is therefore too early at present to note any great improvement in the majority of cases, but there is every likelihood of the new boys benefiting by the training to the same extent as those who preceded them, and in the case of the older boys who are still here a very satisfactory and sustained progress is noticeable.

**Admissions and discharges.** During the year 11 boys have been admitted to the Home, 1 of whom was an unsuitable case, his principal infirmity being deafness. 11 boys have been discharged, the new boy mentioned above as unsuitable was returned to his Union, 4 were sent to Fulham in place of 4 who were sent here from that Home, 1 was sent to Surrey House, and 3 to the Colony at Witham, 1 who was considered sufficiently improved was discharged to the Training Ship Exmouth, and 1 having been certified as imbecile was sent to Tooting Bec Asylum.

Of the boy sent to the "Exmouth" I have recently received a satisfactory report from the Captain-Superintendent of the Ship. He considers him well-conducted and up to the average in intelligence, and thinks him likely to do well.

**Drill.** Instruction in drill has been systematically given to the boys during the year, and the beneficial results of this are well seen in the bearing of the older boys as compared with that of the newcomers.

**Pocket money.** The giving of pocket money to the boys in this Home was discontinued in the time of the late House-mother, as she was under the impression that the practice did not produce the desired effect. But I think, as I have said in former reports, that the success of this plan must depend in a large degree upon

the principles adopted in the distribution of the money, which must be really earned and not given indiscriminately. The present House-mother is very anxious to have at her command this additional means of encouraging the children and stimulating them to fresh efforts of obedience and industry.

(Signed) R. TURNER.

December, 1906.

(c) 60, 62, and 64, KINGWOOD ROAD, FULHAM.

**Medical.** I am much pleased to have to report that during the year 1906 there has been very little illness at the Fulham Home and none of a serious character. Enlarged tonsils and adenoids have been removed in 1 case, 1 boy has been circumcised and another vaccinated. There has been 1 slight case of erysipelas of the cheek and another of herpes. 1 boy recently admitted has had several epileptic fits.

**Mental.** The Colony at Witham having been opened recently, some of the older boys from this Home, as from the others, have been sent there and their places taken by new boys. All of those sent on had been for some time in the Home and were beginning to show very good results of the careful training they had received. Of the new boys who have taken their place very little can be expected at present, but there is every reason to hope that they will respond to the care they are receiving. Of the boys at present in the Home, those who have been there for any length of time are, I am glad to say, making satisfactory progress.

**Eyes.** 1 boy has had his eyes tested and he has been ordered to wear glasses.

**Admissions and discharges.** During the year, 15 new boys have been admitted to the Home and 9 have been discharged. 4 of the latter are boys who have been sent to Peckham, in place of 4 boys who have come from there, and are here included in the 15 admissions. 1 boy has been transferred to Surrey House and 4 others to the Bridge Industrial Home at Witham.

**General remarks.** All the arrangements made in this Home for encouraging the children and stimulating their intelligence continue to work well and to produce the best possible results. Weekly instruction in drill continues to be given and the children still receive pocket money. One boy who when he first came was particularly bad at drilling and was most insubordinate, even refusing to take part in certain exercises and stamping and shaking his fist at the Sergeant, now drills very satisfactorily and even ventures to criticise the performances of newcomers who are less capable than himself!

**Conclusion.** I should like before closing this report to say how much I feel that the great improvement made by so many of the boys who have been in this home is in very large part due to the wholesome influence and the unflagging efforts of Mrs. Turner, the former Matron. But while very much regretting her loss, we may, I think, be congratulated on having an able successor, one under whom there is every prospect of the excellent standard of work of this Home being maintained.

(Signed) R. TURNER.

December, 1906.

*(d) 81, EARLSFIELD ROAD, WANDSWORTH.*

**Medical.** During the year 1906 the health of the children in the Earlsfield Road Home has, I am glad to say, been most satisfactory. There has been 1 case of whitlow, where it was found necessary to remove the nail; 2 girls had tinea tonsurans; they were sent to The Downs School, and have not, up to the present, returned from there. There was also 1 case of tinea circinata, which soon yielded to treatment. During December 3 girls had slight attacks of influenza.

**Mental.** Most of these girls show definite improvement in their mental condition, which is most encouraging. They all appear generally brighter and more responsive in manner, and many faulty habits have been cured. To give an instance, one girl who used to be very spiteful, and bit and kicked the others, is now said to be one of the best behaved. In one particular, which is perhaps one of the most certain indications of deficiency in a child's mental and moral condition—I refer to nocturnal incontinence—there has been very great improvement in the case of every girl in the Home. One instance especially is noteworthy. At first practically every night nocturnal incontinence occurred in this case, but now for more than two years the girl has been absolutely clean in her habits.

**Admissions and discharges.** Four girls in all have been admitted to the Home during the year, one of whom was only placed here temporarily, before being transferred to Lloyd House, a girl from Lloyd House being sent here in her stead. The latter also is included in the 4 admissions.

Including the case transferred to Lloyd House, there have been altogether 5 discharges. 3 girls were discharged to Tooting Bec Asylum certified as improvable imbeciles, and 1 has been transferred to the Brentwood Industrial Colony.

The piano continues to add much interest and brightness to the home-life of the girls.

**General remarks.** I should like again to mention what I have urged before, that these girls should have drill from a thoroughly competent instructor. It is evident to even a casual observer how unfavourably they compare in smartness and deportment with those children in our other Homes who have had the advantage of regular drill. But the drill would not only improve their physique, but also advance their mental improvement very considerably.

(Signed) R. TURNER.

December, 1906.

*(e) SURREY HOUSE, WANDSWORTH.*

The Surrey House Home first came under my care in June, 1906. Many changes were then in progress there, as it had been decided to appropriate the Home to the use of younger boys instead of older ones, who were to be sent on to the Industrial Colony at Witham.



**Report on  
older boys  
in Home in  
June.**

**Medical.**

At this time I saw professionally some of the boys who were to pass out of my hands, and on examination I found that the following cases required attention:—1 boy had very enlarged tonsils and adenoids, which required removing, and another had bad lateral curvature, which was caused by one leg being  $2\frac{1}{2}$  inches shorter than the other. The boy's knee had been run over some years before, and the injury then caused to the head of the bone had prevented normal growth. To compensate the shortening and so obviate the lateral curvature a suitable surgical boot was necessary. It was also found that the eyesight of 3 of the boys required to be tested. All the above matters have received attention with good results.

**Mental.**

On examining the boys mentally I found 2 of them so much improved that I advised their removal to the Training Ship Exmouth. One of them was transferred as advised, and an encouraging report from the Captain-Superintendent of the Training Ship has recently come to hand. The second boy could not be sent, as his parents wished his return, and he was therefore discharged to them. This, I think, is a matter for much regret, for although the boy was so much improved that I thought it highly undesirable that he should remain longer with children who are deficient, yet, on the other hand, I equally did not desire that he should return to his home, where he is sure to find those influences still at work which had helped to cause his defect. A course of strict discipline was, in my opinion, necessary in order that he should remain permanently at the level of mental improvement at which I found him in June; still more necessary was it if he was to attain the fullest mental development of which he was capable.

**A typical  
family  
history.**

It will be interesting to follow his case in the future, and see whether his mental condition improves or deteriorates. Personally, I am strongly of opinion that deterioration will take place, his being a typical case of bad family history. The family history is as follows: *Father* had phthisis and was insane; *paternal grandfather* died of phthisis; *paternal grandmother* is in an asylum with mania and religious fancies; *mother* was laid up for four months before the boy's birth with spasmodic paralysis, and afterwards lost the use of her legs for some months; *maternal grandmother* died of consumption; 10 *brothers and sisters* (9 living) have all, with one exception, suffered from some nervous trouble. To give particulars of the last in order of age: No. 1 (brother) is strong. No. 2 (sister) had meningitis, and for the last few years has had fits, evidently of an epileptic character. She also suffers from frequent swellings of the knee-joint, which are probably tubercular in origin. No. 3 (brother) suffered as a child from severe headaches. No. 4 (brother) had a severe nervous illness, nature unknown. No. 5 (brother) had meningitis, and is paralysed. He is mentally dull, and at 17 years of age could not spell "cat." No. 6 (the boy whose history is in question) has had chorea. No. 7 (sister) has had meningitis, is very irritable, and subject to headaches. No. 8 (sister) had paralysis, and was for two months in a hospital for nervous diseases. No. 10 (brother, who died) was paralysed in the legs.

This is one of those cases which suggest most forcibly the advisability of having the control of children of this mental condition for a fairly long period,

**Report on  
younger  
boys  
admitted  
subse-  
quently.**

**Medical.**

In July the younger boys were admitted who were to remain in my care. My report on the health of these children includes, unfortunately, a heavy list of illnesses. One boy, of delicate constitution, had several abscesses, which necessitated many incisions, and he did not recover until he had had a thorough change at the sea-side. One boy had a slight attack of impetigo contagiosa. Another has had several fits. There were 2 cases of slight accidents. Both boys fell on the arm, but in neither case was the injury severe.

The most serious cases of illness came in September, when there was an outbreak of diphtheria in the Home. There were in all 5 cases, 3 being boys and 2 members of the staff. One of the boys had nasal diphtheria, and this case gave most anxiety, as heart complications supervened. Of the 2 members of the staff attacked—the cook-general and the helper engaged temporarily in her place—the latter had no clinical signs, but as the bacteriological culture gave positive results, it was necessary to certify the case.

In December 1 boy developed a slight attack of scarlet fever, and was sent to the Grove Hospital. He has not yet returned.

**Admissions  
and  
discharges.**

Since June 19 new boys have been admitted to this Home and 3 have been discharged. One of the latter has gone on to the Industrial Colony at Witham. Another, who was suffering from hip disease, and who was backward rather than deficient, has been sent to S. Anne's Home, Herne Bay. The third boy, as he suffered from fits, was returned to his guardians as an unsuitable case.

As the boys have been so short a time under training at the Home, and as that training has been so much interfered with by sickness, very much progress cannot of course, be expected; but the prognostication is very favourable. It is to be hoped that we shall be more fortunate in the matter of health in the coming year, and that at its close there will be a more satisfactory report to lay before the Committee.

(Signed) R. TURNER.

December 1906.

(f) *BRIDGE INDUSTRIAL HOME, WITHAM.*

In June of this year, 1906, the Industrial Colony for feeble-minded boys was opened at Witham, the nucleus of the new colony being formed by older boys from the various smaller homes of the Metropolitan Asylums Board for children of this class in London, together with boys over the school age, who were sent from various London parishes by the Poor Law Guardians of those districts.

**Manual  
occupations  
and trades.**

At the present time there are about 60 boys in the Colony who are being trained in several branches of manual occupations and trades. These include bootmaking, repairing of clothes, gardening, housework, and odd jobs. Taking the boys as a whole they seem interested in the work on which they are engaged and are making progress generally, but the branch in which the most satisfactory progress is being made is in the bootmaking shop, where

skilled instruction is being given in a thoroughly methodical manner. Under this instruction several boys are becoming quite expert, one boy especially, who is able to cut out uppers and to handsew boots, and has even assisted in the making of surgical boots. So encouraging are the results in this department, and so well has it illustrated the possibility of teaching these children a trade when the instruction is given by a specially-trained instructor, and on methodical lines, that it is to be hoped that very shortly the boys may be taught other trades under the same conditions. What little *tailoring* is at present being taught is in the form of the repairing of clothes, and that practically to one boy only—a cripple—and the staff being limited, very little supervision can be given even in this. I think it would be a great advantage if, before long, a skilled instructor could be found for this branch also—if a new resident cannot be appointed, some local tailor for a small consideration might be found to give instruction daily. For boys who are slightly defective physically, this work is specially appropriate, and there are several such boys under our care. The only boy at present at work at tailoring is, as said before, a cripple; he is being taught to repair clothes and has learnt most successfully to put in good patches. But there seems no reason why, with a proper instructor, the Colony should not be able in a short time to supply clothes to all its members, and even to supply some of the smaller London homes as well, as is partially done already by the bootmaking department with boots. I should like to suggest also that the boys of the Colony have definite instruction in laundry work and in baking. The arrangements of the home afford every facility for both these branches of work to be carried on there.

**School instruction.** I am glad to say that in accordance with a suggestion which I made some time ago, the boys' training now includes instruction in the ordinary school subjects, although we have not had the benefit of this arrangement for long, and even in this short time there have been interruptions. Still the plan seems to have had satisfactory results, as many of the boys show improvement in their mental attainments, and appear to have benefited mentally in a general way besides.

Unfortunately by a rule which was in force to prevent boys under 16 from mixing with boys over that age, the younger children have been debarred from attending classes in technical instruction. This is a great drawback, and it is to be hoped that the rule will shortly be modified. It is a great hindrance, for it is important that manual employment should accompany school instruction from the first, as it provides variety, and is also itself an important means of developing the intelligence. Valuable time is being lost, for as the boys are very slow at the best, the sooner their training begins the better it will be, and the sooner we may hope to see results; also—and this is much to be regretted—some of the boys who had formerly attended special schools in London, and were beginning to benefit by their training in these subjects (as for instance many coming from the Fulham Home had done), have lost all or most of what they had with so much difficulty acquired. It is most important to bear in mind that age is of less importance in classifying these cases than the mental capacity of the individuals. A boy of 13 may have more aptitude for learning a trade than a more feeble-minded adult. Each case must be considered *per se*.

**Recreations.** As recreations the boys have flag drill, ordinary drill, gymnastics, and games. These physical exercises have done very much for the general training of the children, both physically and mentally. Some of the boys have attained a good deal of proficiency in them.

The flag drill is a very happy idea for these boys; it was introduced by the industrial trainer. The object of this drill is to signal messages, the letters of the alphabet being represented by movements of the arm and body, and for the performance of its complicated actions, concentration of the mind and skill and rapidity of movement are needed. It is evident that this is invaluable, as training for the boys of the Colony; it teaches them to spell, and at the same time it teaches them to translate their thought into action rapidly and dexterously.

The boys as a whole show an encouraging improvement in ordinary drill. I think everything should be done to stimulate their interest in this. I have suggested—and I think it worth while to repeat the suggestion—that before long the best drillers should be formed into a corps, the members of which should enjoy special privileges and wear, if not a uniform, at least a distinctive cap and badge. All the boys would have an equally good chance of becoming members of this corps, and the emulation it would excite would be most beneficial to the whole Colony.

It is very important for a variety of reasons that these boys should be worked as hard as possible physically. At present little has been done in gymnastics; it would be a good thing if more could be done in this direction in future, especially as the apparatus is at hand for use. But the time has been short since the Colony was started, and it is hardly to be expected that everything can be got into working order at once.

I may mention that the boys are at present at work in digging the foundations of an open-air swimming bath. This happy idea originated with the superintendent. The bath will be of the greatest value from the point of view both of recreation and health.

It is desirable to put as much interest and variety as possible into the boys' lives, and most of all is it important to encourage a spirit of general sociability and interest in the common pastimes, and I think that this object would be furthered by starting a band. These boys are quick in learning to play instruments. Some advantages of the plan would be that the children's mental improvement would be advanced and a means introduced for brightening the home-life and making the drill more attractive. I have made inquiries and find that an instructor could be found locally and that his charges would be very small (2s. an hour). Two of the staff can play, one the cornet and the other the flute to a slight extent, and, although not capable of instructing the boys at their present stage of knowledge, they could participate in the lessons and would soon be able to teach their respective instruments. Such instruments as would be required to start with would be quite inexpensive.

**Mental.** From experience I find that it is of the first importance that the tasks given to these deficient children should suit their special capabilities. It is only in this way that the best results can be got from each individual child, his faculties gradually trained, and his progress from easier to work of a more difficult character ensured. With this in view, the first thing to be done

in dealing with numbers of defective children is to classify them carefully according to their mental capabilities and find work suitable and congenial for each class. The number in the Colony is already large, and will in the near future be much larger, if then it is desired to prevent the waste of precious time and to ensure continuous progress, I think what is more particularly wanted to be done is in this direction—namely, that of classification of the boys. First let a greater variety of manual occupations be systematically taught, as I have already suggested, and then it will be possible to make a finer distinction among the boys, and so waste of time will be prevented. To illustrate what I mean—on my visits to Witham I have seen boys capable of learning a trade, wasting their time at trifling jobs which less intelligent children could do equally well, and with advantage to themselves. A better classification of the workers and a better adaptation of work to the capabilities of each class is greatly needed.

On account of this lack of organisation some of the less capable boys have not improved as much as could be wished, and even some of the most capable have been kept back. Only where the instruction is really methodical and thorough—in the bootmaking shop, for instance—has the progress of the boys been thoroughly satisfactory, but I hope that in the coming year, if a few alterations can be introduced, this condition of things will be rectified.

Unfortunately there is another factor which is operative in preventing improvement in this colony.

**Moral.** Owing to moral depravity, many boys have not improved as they should, and several have actually deteriorated and suffered physically from the results. In the coming year this matter will have to be dealt with vigorously. Want of moral tone is one of the gravest sources of anxiety when the numbers in a home are large, and it is imperative that the supervision should be adequate night and day. It has not been sufficient in the past.

It is obviously a less expensive plan to deal with older boys in large numbers, and with sufficient supervision it should be quite a workable arrangement. But while they are young and specially impressionable, and character and habits are forming, there can be no doubt that it is infinitely to be preferred that feeble-minded children should be trained in small homes under women. Nothing, in my opinion, can replace the valuable work of these homes. In a small number each child can receive incessant individual care and supervision, and immoral tendencies can be coped with more easily. I have also found from experience that the influence of women with young boys has the most beneficial results. This truth is well illustrated by the members of this colony, as, other things being equal, those who have done best here are without doubt the boys who come from the small homes and who have been longest in them. These are more docile, mentally the most promising, and morally they exhibit better instincts.

This, of course, is only as it should be, but such a happy demonstration of the results of special training encourages one to hope that the authorities will be induced to bring defective children under treatment at a much earlier age than at present. I have in former reports frequently expressed the opinion (which I still hold) that the best results will only be obtained with feeble-minded children if they can be placed under treatment at an early age—preferably from two to three years old. Seven

years of age is far too old to commence special training of this kind. By that time a child has not only formed habits of mental indifference which he will with difficulty unlearn, but also the most valuable years of training have been lost. By the age of seven a normal child has learnt to walk and talk, has acquired a variety of social habits, such as dressing itself, cleanliness and good manners, including those of the table, and in many cases reading and writing. The first seven years of life are the period of imitation and of very active brain growth, and if the training and environment are not suitable during this time, the loss can with difficulty be made good.

I feel that it will be desirable in conclusion to summarise the suggestions made at various points in this report, as I consider some of them to be of the greatest urgency.

Looking back on the past half-year, one cannot but be somewhat disappointed with the results, for I do not think some of the children have improved, either mentally or physically, as they should have done in the time. There are, of course, many difficulties in starting an institution of this kind, and it is impossible to get everything into working order at once, but with the commencement of the New Year I feel that the time has now come to consider the introduction of certain improvements, which are of such paramount importance that, if they should be neglected, not only shall we fail to get the best results from the Industrial Colony, but grave dangers even may arise, especially as the numbers increase.

(1) *The children should be classified according to mental ability, and not according to age*, and to be able to do this a sufficiency of appropriate work must be forthcoming for every grade of capability among them.

(2) *Instruction in a greater variety of trades is required.* Only a comparatively small number of boys can be taught efficiently in the boot-shop at a time, and the rest should have equally methodical instruction in other branches. Arrangements could be made for giving methodical, expert instruction in tailoring, laundry work and baking and other useful trades, such as brushmaking, tinwork, &c., with little extra expense, and there would still remain house work and odd jobs for those for whom work requiring less concentration of attention is better suited.

(3) *Instruction should be given by an expert instructor, and in a thoroughly methodical manner.* In technical branches this is essential. The instructor should be able to make his boys quite proficient in their work. The importance of this cannot be too much insisted on. The work as at present arranged is desultory, and does not fulfil its object. As expense is a consideration, local instructors might be found to come for a few hours each day for a small sum.

(4) *A certain amount of instruction in the ordinary school subjects should be given to all who can benefit by it*, and not as at present to the younger boys only. Without a certain amount of mental exercise the mind is apt to become inert. Manual work alone is not sufficient; the mental exertion required in the study of such subjects as are ordinarily taught in schools is necessary for brain development. At the same time there is no need to spend too much time over them. As one schoolmaster cannot deal satisfactorily with a large number of feeble-minded children at the same time, as individual attention is essential for such cases, it would be advisable to arrange for the boys to receive instruction, a small number at a time, the time to be proportioned to the children's needs—for the younger boys

a longer time, for the older ones less. Another object would be served by this arrangement, as by alternating the classes in this way a larger number of boys would have the opportunity of taking their turn in the workshops. A little organisation is all that is needed for such a plan to work smoothly and well. In the department of school instruction it seems to me that the best teacher will be one who has had experience—if not training—in dealing with children of this kind. The first qualification required in this teacher is that he shall understand and be capable of adapting himself to the peculiar needs of these feeble-minded boys, who in many respects are so entirely unlike children of average intelligence.

(5) *More supervision is required both night and day* for reasons already discussed, which are of the greatest importance. Hence the resident staff should be increased, as the supervision, especially at night, is quite inadequate, falling mainly on the industrial trainer. If it is found possible to increase the staff, it would be desirable to choose a man capable of giving instruction in a suitable trade.

(6) *The home-life must be made varied and bright*, and for this I suggest the institution of drill corps and band, because these things are likely to promote a spirit of sociability and brightness.

(Signed) R. TURNER.

December, 1906.

(g) *COLONY FOR ELDER FEEBLE-MINDED GIRLS AT HIGH WOOD SCHOOL, BRENTWOOD.*

The Industrial Colony at Brentwood was opened for girls only, in June, 1906, when the boys were removed from there to Witham and the number of girls was gradually increased. There are at the present time 36 girls under care here, most of them being older girls sent on from our London Homes for Feeble-minded Girls, though a few have been sent here direct from London Unions.

**Cottage  
Home  
system.**

The High Wood School is particularly well adapted for the purposes of an Industrial Colony as it consists of a number of cottages for residence of inmates and other buildings for their common use. Owing to the small number of girls at present in the Home only 6 cottages are needed for their use, but in the future, with increased numbers, if it should be necessary to appropriate more of the houses for the use of the feeble-minded, we should have an arrangement which could scarcely be improved upon. It would combine the advantages of small Homes with those of a large one, that is to say, while the girls would live, small numbers together, in separate cottages, each household under the special care of a member of the staff, and so receive the individual attention essential in these cases, they would on the other hand all meet together both for work and play and so enjoy the bright varied life full of interest and emulation which are the peculiar advantages of life in a large community. This arrangement, however, cannot be carried out in its entirety at present.

**Occupations.**

The girls are already engaged in a large variety of manual occupations. These include laundry work, stocking-knitting by machine, weaving of huckaback towels on the loom, rug-making, artificial flower making, basket work and chair caning, as well as housework, cooking, sewing, knitting, and crocheting.

Many of the girls have attained great proficiency in their work; one is specially clever at stocking-knitting and can turn out several pairs in the day; others are excellent at rug-making; at chair-caning, which was introduced only recently, some of the children are already quite expert. Not much has been done with the loom at present, but more might be done in this direction with great advantage, and a variety of materials woven instead of only towelling.

The girls at this Colony do not only their own washing, but also that of Lloyd House. It will be seen, therefore, that the quantity of work done in this department is quite considerable and it is on the whole most creditably performed.

**Instruction in school subjects suggested.** The ordinary school subjects are not taught in the Colony at present, but I should strongly advise that a change be made in this direction, not so much with a view to what the girls may acquire of those subjects, but rather as a means of developing their mental faculties. Exercise is as indispensable for mental development as for the development of a muscle, and for this purpose experience shows that the ordinary school subjects are best. It is a matter of common experience that when people are kept at manual work—even if varied—the work when once mastered becomes more or less mechanical and the mind has so little exercise that there is no chance of the highest development of which the individual is capable being reached. It is important to prevent this stagnation, especially in early youth, when the brain is at the stage of most active growth, and by adopting a certain course of instruction in school subjects the danger may be avoided.

**Drill.** Drill has lately been introduced into the Home, and although at present it is too early to report any definite results, there seems every likelihood that it will prove as great a means of development, mental and physical, in this Home, as it has in others.

**Mental improvement.** The general improvement in the girls under care in the Colony is very encouraging, and there is every reason to hope that the improvement will be maintained. It is, I think, not too much to hope that a large proportion of the girls here will, with suitable care, become self-supporting.

(Signed) R. TURNER.

December, 1906.

## APPENDIX VI.

### REMAND HOMES.

(a) Table showing number of children admitted during the year 1906 to each home:—

HOME.	Boys.	Girls.	Total.
Camberwell Green ... ..	633	119	752
Harrow Road ... ..	349	.	349
Pentonville Road ... ..	732	193	925
Total ... ..	1,714	312	2,026



(b) Table showing ages of the children admitted during the year 1906.

AGE IN YEARS.	Camberwell Green.	Harrow Road.	Pentonville Road.	Total
1 ... ..	2	...	...	2
2 ... ..	3	2	3	8
3 ... ..	9	1	3	13
4 ... ..	12	5	9	26
5 ... ..	15	1	14	30
6 ... ..	17	6	16	39
7 ... ..	37	8	28	73
8 ... ..	40	18	56	114
9 ... ..	66	21	58	145
10 ... ..	58	29	86	173
11 ... ..	74	41	117	232
12 ... ..	91	41	112	244
13 ... ..	122	53	112	287
14 ... ..	84	53	129	266
15 ... ..	94	34	110	238
16 ... ..	25	24	54	103
17 ... ..	2	9	16	27
18 ... ..	1	1	1	3
19 ... ..	...	1	...	1
20 ... ..	...	1	1	2
Total ... ..	752	349	925	2,026

(c) Table showing periods for which children were remanded during 1906.

NUMBER OF DAYS.	Number of Children at Camberwell Green.	Number of Children at Harrow Road.	Number of Children at Pentonville Road.	Total.
1 ... ..	5	..	26	31
2 ... ..	22	15	10	47
3 .. ...	7	4	30	41
4 ... ..	13	3	57	73
5 ... ..	16	2	12	30
6 ... ..	11	5	63	79
7 ... ..	31	4	62	97
8 ... ..	378	156	294	828
9 ... ..	95	56	93	244
10 ... ..	22	16	31	69
11 ... ..	6	3	23	32
12 ... ..	6	3	10	19
13 .. ...	7	3	16	26
14 ... ..	11	4	17	32
15 ... ..	68	41	86	195
16 .. ...	26	21	25	72
17 ... ..	3	4	14	21
18 ... ..	...	1	6	7
19 ... ..	3	...	4	7
20 ... ..	1	...	3	4
21 ... ..	1	...	3	4
22 ... ..	7	...	12	19
23 ... ..	3	2	4	9
24 ... ..	1	2	3	6
25 ... ..	...	...	2	2
26 ... ..	...	...	1	1
27 ... ..	3	...	2	5
28 ... ..	...	...	5	5
29 ... ..	3	...	5	8
30 ... ..	2	2	...	4
31 ... ..	1	...	2	3
36 ... ..	...	1	1	2
37 ... ..	...	1	...	1
38 ... ..	...	...	1	1
42 ... ..	...	...	1	1
46 ... ..	...	...	1	1
Total ... ..	752	349	925	2,026



(f) Table showing the result of the last appearance of the children before the magistrate during 1906:—

RESULT.	Camberwell Green.	Harrow Road.	Pentonville Road.	Total.
Discharged to homes ... ..	272	88	307	667
Birched ... ..	8	11	19	38
Fined or bound over ... ..	53	50	103	206
Taken by police court missionary ... ..	28	17	...	45
Sent to reformatory or industrial training ships	39	29	80	148
Sent to reformatory or industrial or truant schools ... ..	309	138	348	795
Returned to schools ... ..	...	...	...	...
Sent to workhouses and various homes ... ..	24	10	46	80
Sent to prison ... ..	5	3	18	26
Committed to the sessions ... ..	...	1	...	1
Foreigners sent back to their countries ... ..	1	1	3	5
Sent to infirmaries ... ..	...	...	...	...
Result unknown ... ..	13	...	...	13
Sent back to navy... ..	...	1	...	1
Absconded from and returned to her situation	..	...	1	1
Total ... ..	752	349	925	2,026

(g) Table showing the religious persuasion of the children admitted during 1906:—

RELIGIOUS PERSUASION.	Camberwell Green.	Harrow Road.	Pentonville Road.	Total.
Church of England ... ..	624	272	697	1,593
Roman Catholics ... ..	116	72	152	340
Wesleyans ... ..	7	...	2	9
Baptists ... ..	4	...	2	6
Nonconformists ... ..	1	...	...	1
Presbyterians ... ..	...	...	5	5
Methodists ... ..	...	...	...	...
Jews ... ..	...	5	67	72
Not known ... ..	...	...	...	...
Total ... ..	752	349	925	2,026

(h) Table showing clothing given away during 1906 to children requiring it either in consequence of their not having sufficient on admission or of their own clothing having to be destroyed:—

ARTICLES.	Camberwell Green.	Harrow Road.	Pentonville Road.	Total.
Complete outfits ... ..	24	...	64	88
Coats... ..	15	21	50	86
Vests ... ..	6	13	17	30
Trousers ... ..	13	12	36	61
Braces ... ..	4	...	...	4
Shirts ... ..	25	19	64	108
Socks and stockings ... ..	61	17	105	183
Neckerchiefs ... ..	16	...	...	16
Frocks ... ..	4	...	2	6
Articles of girls' underclothing ... ..	13	...	25	38
Girls' jackets ... ..	7	...	...	7
Hats and caps ... ..	8	...	8	16
Boots and shoes ... ..	58	21	99	178

(i) Table showing the number of children who slept in police-station cells prior to admission to the homes during 1906:—

AGES.	Camberwell Green.	Harrow Road.	Pentonville Road.	Total.
Under 10 years ... ..	16	14	...	30
Between 10 and 13 years ... ..	47	37	23	107
Over 13 years ... ..	78	57	46	181
Total ... ..	141	108	69	318

## APPENDIX VII.

Statement of cases admitted and discharged at the Homes and Schools during 1906, arranged under the respective Parishes and Unions.

PARISH OR UNION.	Ophthalmia.				Ringworm.				Convalescents.				Defectives.			
	Remaining on 31st Dec., 1905.	Admitted during 1906.	Discharged and Died during 1906.	Remaining on 31st Dec., 1906.	Remaining on 31st Dec., 1905.	Admitted during 1906.	Discharged and Died during 1906.	Remaining on 31st Dec., 1906.	Remaining on 31st Dec., 1905.	Admitted during 1906.	Discharged and Died during 1906.	Remaining on 31st Dec., 1906.	Remaining on 31st Dec., 1905.	Admitted during 1906.	Discharged and Died during 1906.	Remaining on 31st Dec., 1906.
Bermondsey	38	39	35	42	14	17	25	6	5	21	13	13	3	8	3	8
Bethnal Green	30	17	24	23	23	38	49	12	12	57	49	20	17	6	3	21
Bloomsbury	2	2	1	3	4	...	4	...	2	4	4	2	2	...	...	2
Camberwell	13	9	14	8	32	33	48	17	1	27	22	6	3	5	2	6
Chelsea	1	2	...	3	10	4	13	1	2	10	5	7	3	...	...	3
Fulham	8	11	9	10	7	20	20	7	16	26	26	16	3	...	...	3
George's, St.	6	5	3	8	5	5	5	5	8	24	24	8	3	...	...	3
George, St., in-the-East	11	...	6	5	3	11	10	4	9	8	11	6	...	3	...	3
Greenwich	27	16	19	24	18	40	45	13	12	33	33	12	7	3	...	9
Hackney	39	17	27	29	64	47	77	34	24	43	47	20	7	5	2	10
Hammersmith	1	7	2	6	9	...	7	2	7	20	14	13	...	3	...	3
Hampstead	...	...	...	...	...	...	...	...	1	10	6	5	4	...	1	3
Holborn	9	2	7	4	31	25	45	11	1	7	7	1	4	...	...	3
Islington	12	11	11	12	23	35	41	17	14	41	45	10	16	11	...	4
Kensington	5	20	14	11	13	11	21	3	6	29	21	14	2	...	...	22
Lambeth	13	16	14	15	32	68	62	38	21	36	32	25	1	1	...	3
Lewisham	1	3	2	2	30	23	35	18	1	...	1	...	...	1	...	2
London, City of	2	1	2	1	8	5	9	4	...	2	2	...	...	1	...	1
Marylebone, St.	2	4	3	3	24	5	24	5	5	41	40	6	9	3	...	3
Mile End Old Town	4	5	5	4	8	21	19	10	6	3	9	...	2	1	...	11
Paddington	5	2	4	3	8	19	22	5	14	42	33	23	1	2	...	8
Pancras, St.	28	5	12	21	44	45	62	27	18	31	34	15	4	3	...	3
Poplar	32	29	24	37	15	31	30	16	27	59	59	27	2	2	...	4
Shoreditch	14	9	14	9	22	27	31	18	13	27	30	10	5	3	...	4
Southwark	47	98	64	81	19	50	42	27	17	31	30	18	6	6	...	8
Stepney	32	21	25	28	9	11	16	4	25	28	45	8	1	1	...	8
Strand	1	3	1	3	4	1	4	1	2	8	4	6	1	2	...	1
Wandsworth	38	78	59	57	23	20	34	9	31	78	73	36	11	1	...	3
Westminster	...	...	4	...	...	...	...	...	1	6	5	2	...	1	...	11
Whitechapel	6	7	4	9	1	2	3	...	3	12	12	3	3	1	...	1
Woolwich	9	10	8	11	16	10	20	6	3	2	2	3	...	3	...	5
School Authority for London	...	1	1	...	...	10	9	1	...	...	...	...	...	...	...	5
Extra Metropolitan	36	11	18	29	19	20	21	18	...	...	...	...	...	...	...	...
Total	472	461	433	505	538	654	853	339	307	766	738	335	120	94	32	182

Transfers between the Homes and Schools (except between those of the same class, and in the case of defectives, the transfers to and from the Seaside Homes for the summer holidays), are included in this table. Transfers of chargeability are also included in the table.

GENERAL STATEMENT OF CHILDREN AT HOMES AND SCHOOLS, 1906.

Description and Name.	Total accommodation.	Date of Opening.	NUMBER OF CHILDREN.																							
			Remaining on 1st January, 1906.			Admissions.			Discharges.			Died during the Year.			Remaining on 31st Dec., 1906.			Total Number of Children admitted from opening of Home to 31st December, 1906.								
			Boys.	Girls.	Total.	Direct from Unions or Parishes.	From other institutions of the Board.	Total.	Direct to Unions or Parishes.	To other institutions of the Board.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.						
<i>I.—Ophthalmia.</i>																										
White Oak School, Swanley ...	300	22 March, 1903 ..	143	106	249	124	107	231	30	2	41	116	93	209	27	27	54	163	121	783	627	1,410				
High Wood School, Brentwood ..	240	26 July, 1904 ..	91	132	223	82	70	152	17	13	30	75	86	161	16	28	44	247	90	117	298	341	639			
<i>II.—Ringworm.</i>																										
Bridge School, Witham ...	160	12 February, 1901 ..	77	50	127	289	296	585	64	56	120	42	28	70	35	22	57	247	155	184	339	326	673			
The Downs School, Sutton ...	420	26 February, 1903 ..	174	237	411	289	296	585	64	56	120	341	373	714	31	30	61	247	155	184	339	1,124	2,259			
<i>III.—Seaside.</i>																										
S. Anne's Home, Herne Bay ...	134	26 December, 1897 ..	74	40	114	253	71	304	74	1	75	216	84	300	65	5	70	247	96	21	117	616	1,979			
East Cliff House, Margate ...	120	26 June, 1898 ..	49	79	128	99	168	267	5	45	50	84	163	247	16	49	65	247	51	7	130	577	1,693			
(Additional buildings, 13 Sept., 1901)																										
Millfield, Rustrington ...	100	6 April, 1904 ..	32	33	65	42	35	77	4	4	4	25	25	52	1	4	5	52	46	42	88	155	129	284		
<i>IV.—Defective Children.</i>																										
Lloyd House, Pentonville ...	20	16 January, 1899)	...	26	26	...	17	17	...	36	36	...	3	3	...	50	50	3	...	26	26	...	87	187		
Lloyd Street, Pentonville, No. 12	8	18 October, 1901)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Elm Grove, Peckham, No. 16 ...	13	25 January, 1901	13	...	13	9	...	9	19	...	19	2	...	2	25	...	25	2	13	...	13	46	...	146		
Kingwood Road, Fulham, Nos. 60, 62, and 64 ...	22	17 Sept., 1900 ...	20	...	20	9	...	9	27	...	27	1	...	1	33	...	33	1	22	...	22	75	...	175		
Earlsfield Road, Wandsworth, No. 81 ...	10	7 July, 1903 ...	...	8	8	...	3	3	...	12	12	...	...	...	...	16	16	...	...	7	7	...	18	118		
Surrey House, St. Ann's Hill, Wandsworth ...	16	11 December, 1903	16	...	16	18	...	18	21	...	21	2	...	2	38	...	38	...	15	...	15	56	...	156		
High Wood School, Brentwood ...	60	7 Nov., 1904 ...	20	17	37	...	6	6	...	14	14	...	1	1	21	...	20	...	...	36	3	39	21	37	58	
Temporary: for Females only.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Bridge Industrial Home, Witham	...	6 June, 1906 ...	...	...	...	19	...	19	45	...	45	...	...	...	...	...	...	...	63	...	63	64	...	64		
<i>V.—Removal Homes.</i>																										
Pentonville Road, Nos. 70, 72, and 74 ...	55	1 January, 1902	15	4	19	1,060	342	1,402*	...	...	...	1,072	34	1,415*	...	...	...	...	3	3	6	4,554	1,123	5,677		
Harrow Road, Nos. 203 and 205 ...	45	Do.	2	...	2	536	...	536*	...	...	...	534	...	534*	...	...	...	...	4	...	4	2,191	...	2,191		
Camberwell Green, Nos. 35, 37, and 38 ...	50	Do.	8	...	8	918	212	1,130*	...	...	...	921	209	1,130*	...	...	...	...	5	3	8	3,791	767	4,558		
TOTALS ...	...	...	734	732	1,466	3,438	1,327	4,765	311	183	494	3,433	1,408	4,841	207	188	495	8	7	15	735	639	1,374	15,444	6,314	21,758

\* Cases remained more than once are regarded as fresh admissions and discharges for the purposes of this return.

† Deducting 549 children transferred from one home to another, the total number of cases admitted is found to be 21,209.

‡ Excluding re-admissions of feeble-minded children on return from Seaside Homes after summer holidays.

ANNUAL REPORT OF THE COMMITTEE OF MANAGEMENT OF THE  
TRAINING SHIP EXMOUTH FOR 1906.

**New ship.** 1. We submit our thirty-first annual report on the work of the Exmouth for the year 1906.

2. The ship's company is now well established on board the new ship, which was delivered at Grays on June 12th, 1905. It is gratifying to find from the final statement of accounts that the total cost of the new ship is £62,497, or £1,852 less than the final estimate of cost which we submitted to the Board. For the sum mentioned the ratepayers have acquired a property providing accommodation at a very low cost per head for the maintenance and training of 600 boys. Full details of the Board's policy with regard to the ship, together with particulars of the vessel will be found in our annual reports for 1903 and 1904.

**Annual inspection and prize distribution.** 3. The annual inspection of the ship by the Board was held on the 30th June. The Right Hon. the Earl of Stamford, who was accompanied by the Countess of Stamford, kindly distributed the prizes. Lord Stamford, in whom we were glad to welcome a past member of the Board, spoke some helpful words of advice to the boys, and subsequently addressed the members of the Board and the visitors on the work of the ship.

4. We have again to thank the donors named in the appendices for presenting special prizes to the boys.

**Central Poor Law Conference.** 5. On the 20th February over 400 members of the Central Poor Law Conference inspected the ship and witnessed a performance of the various drills and gymnastic exercises by the boys. The members were much impressed with their visit, and subsequently presented a handsome silver challenge shield, as a memento of it, to be held annually by the best division in marksmanship.

**Sub-target and miniature rifle range.** 6. In order to keep the instruction on board thoroughly up-to-date we have provided a sub-target and miniature rifle range, the former being a new apparatus for instruction in rifle firing and marksmanship.

**New  
Infirmery  
and playing  
field.**

7. After some delay the Board, in December, obtained possession of the infirmery and playing field which has been purchased from the London County Council, and which was formerly used in connection with the training ship Shaftesbury. We hope to remove from the old infirmery early in the new year, when steps will be taken to dispose of the latter building. The new playing field of over 6 acres will be a great acquisition in connection with the sports and outdoor games of the boys.

**Committee  
meetings.**

8. In order that the primary purpose of our meeting on board, viz., inspection of the ship and the instructions and exercises, might be the better fulfilled, our fortnightly meetings are now held alternately at the office of the Board and on the ship. We found that the bulk of the routine business could be transacted at the head office, and we were in this way enabled to reserve the meeting on board practically for inspection only.

**Retention  
of boys over  
16 years of  
age.**

9. The Local Government Board have now sanctioned the retention on board of a number of boys, limited to 40, until they reach an age not exceeding 17 years and 3 months. As we pointed out last year there are two sources from which boys are recruited for seamen in the Royal Navy.

- (a) Boys between the ages of  $15\frac{9}{12}$  and  $16\frac{3}{12}$  who enter the harbour training ships ;
- (b) Youths who can enter at  $16\frac{3}{12}$  up to  $17\frac{9}{12}$  and at once undergo a course in the sea-going training ships.

The entries under (a) of boys up to 16 years of age were limited, and we shall be able to effect entries under this class up to the maximum limit of age, and also under Class (b).

**Health.**

10. The health of the ship's company has on the whole been good, but we had to cope in the summer with an outbreak of mild ophthalmia. The ship was visited and the boys inspected by the Board's ophthalmic surgeon, and by the prompt measures taken, and the removal of the boys affected to one of the Board's ophthalmic schools for treatment, the outbreak was soon suppressed.

**National  
service for  
seafarers.**

11. The Exmouth was represented by a contingent of boys and officers at this service, which was held at St. Paul's Cathedral on the 10th October.

**Admiralty  
inspection.**

12. The report by the Inspecting Captain, after the usual annual inspection on behalf of the Admiralty, included the following remarks, viz. :—

Condition of ship—very clean and in good condition.  
Physical condition of boys very good. They appear very smart in all their exercises.  
The Exmouth is a very fine new vessel . . . she is thoroughly fitted up.  
The ship was remarkably clean and well kept.  
The boys were smart, clean, and happy looking.  
The establishment was, in my opinion, in a high state of efficiency.

**Successes of Exmouth boys.** 13. At the Christmas examination at the Royal Naval Barracks, Shotley, the Exmouth boys succeeded in gaining no fewer than 11 of the 44 prizes offered. The number of boys in the establishment is about 1,000, of whom only 24 were Exmouth boys. They were, therefore, 2·4 per cent. of the total number at the barracks, and obtained 25 per cent. of the prizes.

**Officers.**

14. Lieutenant L. Menzies, R.N., has been appointed by the Board to fill the vacant post of Chief Officer.

We much regret to record the death of the Rev. F. Haslock, who had filled the post of Chaplain with zeal and devotion to the interests of the boys for 15 years. In his stead the Board have appointed the Rev. A. H. W. Scally, M.A., Vicar of Grays.

**Visitors' records.**

15. We quote the following records made by visitors during the past year :—

*(1) Guardians of the Strood Union (27th June, 1906) :—*

A Committee of Guardians from the Strood Union visited the Exmouth and witnessed the drill and gymnastic performances. They were much impressed by the precision with which the various movements were executed, which reflect the greatest credit upon the Captain-Superintendent and the other officers of the ship. The Committee were especially pleased with the gun drill and signalling. They were also much impressed with the cleanliness and discipline which prevailed throughout the ship.

*(2) Guardians of the Fulham Union (10th July, 1906) :—*

We have this day visited the Exmouth and interviewed the children chargeable to us. We are pleased with the condition of the ship and all we have seen.

*(3) Guardians of the Richmond Union (25th July, 1906) :—*

The under-mentioned Guardians of the Richmond (Surrey) Union visited the vessel to-day, and are well satisfied with all they have seen. We consider our boys are having a splendid training, and are well cared for in every respect. Our entire visit was very instructive and interesting.

*(4) Guardians of the Croydon Union (29th August, 1906) :—*

We desire to express our satisfaction and pleasure at the result of our visit. We found the boys in good health and apparently very contented and cheerful. We examined the Croydon boys chargeable, and we are perfectly satisfied that they are well done by. The condition of cleanliness of the ship was very marked, and our thanks are also due to the Captain and officers for their courtesy and attention.

*(5) Guardians of Camberwell Parish (29th August, 1906) :—*

We have this day visited the ship, and are very gratified with all we have seen. We think the boys went through their drill in an excellent manner. We feel sure the Captain has the welfare of the boys at heart and is well backed up by the officers.

*(6) Guardians of Watford Union (12th September, 1906) :—*

Being a deputation from the Watford Union we have this day visited the Exmouth, and are delighted with all the arrangements of the ship. We were pleased to see the remarkable progress made by the boys from our Union, and are much indebted to the Captain for his courtesy in receiving us.



(7) *Guardians from West Ham Union (2nd October, 1906):—*

We have visited the Exmouth, and are well pleased with everything we have seen, and also with the well-cared-for look of our boys.

(8) *Guardians of Camberwell Parish (17th October, 1906):—*

Visited the Exmouth and thoroughly inspected all parts of the ship, seeing the boys under normal conditions at the various duties and exercises. We were greatly impressed with the thoroughness of all parts of the training, and feel that if the advantages offered by the Exmouth were better known more parents would be desirous to send their boys. The training on the Exmouth is worth a great deal and must fit the boys for their future career. The control of the ship is in good hands.

(9) *Guardians of Kingston-on-Thames Union (27th October, 1906):—*

In renewing old associations we have been extremely gratified with all we have seen on board this excellent ship and the splendid condition and perfect control of our boys.

**Cost per head.** 16. The cost per head per day for maintenance and clothing for the two half-years ending Lady Day and Michaelmas, 1906, was 7·18d. and 7·65d. respectively, and the cost including all charges (except outfits for boys going to sea and repayments of amounts raised on loan) 1s. 6½d. and 1s. 8½d. respectively.

**Appendices.** 18. We append the annual report of the Captain-Superintendent and the usual statistical tables.

(Signed) W. VALLANCE,  
Chairman.

## APPENDIX I.

## ANNUAL REPORT OF THE CAPTAIN-SUPERINTENDENT FOR 1906.

*To the Committee of the Training Ship Exmouth.*

GENTLEMEN,

I beg to submit my report for 1906.

Table I. shows the admissions and discharges in 1906, as well as in previous years.

Table II. shows the number of boys admitted from each of the metropolitan parishes and unions and country unions in 1906, and also during the time the ship has been established.

Table III. shows the number of boys shipped each year at Liverpool, and from the Shipping Home at Limehouse, to the mercantile marine. During the past year 76 boys were assisted to get another ship a second time. Many of these lads left the sea thinking they could do better on shore, but getting tired of it, applied to go to sea again. The remainder lost their berths through the ship being laid up and trade being bad.

**Seaman-ship.** The steering models have been altered and brought up-to-date. These models give the boys practical lessons in steering when the weather is too wet to use the boats with steering wheels.

The launches fitted with platforms for heaving the lead, and the platform specially fitted to the ship, have constantly been in use, thus giving the boys a thorough practical knowledge of the most important duties of a seaman before going to the brigantine.

Boat pulling and sailing have also been frequently practised, the former being carried out daily, weather permitting, by the watch at seamanship and gunnery.

The signal class, under a retired yeomen of signals from the Royal Navy, has done remarkably well in all systems of signals. There are at present no fewer than 222 boys who have gained the coveted cross-flags.

The riggers class, that is boys who have passed out of all instructions, have been busily engaged in making gear for the ship, kit-bags for the boys going to the mercantile marine, and sails for the brigantine and boats. This has not only effected a saving in expense, but also proved a useful instruction to the boys.

No fewer than 400 boys have passed out of helm, lead, and compass instruction.

The numbers given below are those in the various classes of seamanship :—

Riggers' class	..	..	..	..	157
1st class	..	..	..	..	38
2nd „	..	..	..	..	27
3rd „	..	..	..	..	60
4th „	..	..	..	..	100
5th „	..	..	..	..	44
Band ..	..	..	..	..	152

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578

The cruising of the brigantine "Steadfast" was continuous from April to October. 220 boys were practically trained, and 40 of the band boys who did not go on mid-summer leave were sent out for a fortnight's cruise. The mates are employed during the winter months when the brigantine is laid up, instructing the boys in knotting and splicing.

**Gunnery.** The boys were admirably instructed in this department, the drills being short and frequent. The closest touch has been kept with the naval alterations in all drills, so that with the means at our disposal the boys are kept thoroughly up-to-date. There is every probability of the Admiralty lending us a quick-firing gun, which will enable us to increase the knowledge of the boys in this department.

A sub-target has been purchased to practise the boys at aiming, and also some small rifles, and as soon as the range is completed at Westfield House regular classes will be formed for rifle practice.

The numbers given below are those in the various classes in gunnery :—

Leading gunners	..	..	..	..	89
1st class	..	..	..	..	80
2nd „	..	..	..	..	88
3rd „	..	..	..	..	87
4th „	..	..	..	..	82
Band ..	..	..	..	..	152
					<hr/>
					578
					<hr/>

**Ambulance.** The band boys have been instructed by Dr. Partridge and his partner in first aid to injured persons. The examiner appointed by the St. John Ambulance Association was Dr. M. Coates. 33 boys passed the examination and were awarded the certificate.

**Gymnastics.** The additional instructor appointed last year has enabled this drill to be greatly extended, and has much improved the physique of the boys. The usual examination was held by Mr. James Harvies, Associate of British College of Physical Education. In his report to me he says :—

On my visit to judge the gymnastics on board your training ship "Exmouth," on June 12th I am pleased to state that I found the boys' physical condition above the average of ordinary school boys of the same age. They did good work and in very good style on the whole.

Taking into consideration that the senior instructor has charge of the swimming class and the junior teaches boat-pulling, this is a most gratifying report.

**School.** Mr. A. F. Butler, H.M. School Inspector, paid his annual visit to the ship, and had three days' examination of all the boys under examination. His report is as follows :—

I inspected the "Exmouth" on February 22nd, and was much pleased with all I saw. The new ship gives ample opportunity for the very thorough training the boys receive. Seamanship, exercises, and drill were done with great keenness by the boys, and the time available for school work is well occupied.

He also visited the ship at other periods. The lads were examined in drawing, and were awarded "Excellent" for the thirteenth year in succession. Very good progress has been made. Boys in the higher standards have, during the night school, been taught the elementary parts of magnetism and electricity.

Boys passing out of Standard IV. and showing promise have been promoted to Standard V., instead of being passed out of school as heretofore.

**Band.** The band have done extremely well. The first class band are taught to play both wind and string instruments. The very greatest care is taken of the instruments, which are in admirable order. Each boy keeps the same instrument the whole time he is in the band, and is responsible for its cleanliness and efficiency. The very small repairs necessary testify to the efficiency of these arrangements.

Every opportunity has been taken of landing the boys at the recreation field, which has not only improved their health, but has also taught them to play on the march. The first class band have half an hour's exercise in gymnastics every morning, which has greatly improved their physique.

The various classes were put through a stiff examination by Mr. Lidiard, chief bandmaster of the Royal Naval School of Music. His report to me is as follows:—

I have the honour to submit my report of the examination of the bands of the ship under your command, which was held by me on June 5th and 6th.

The special band maintains a good standard, and, although changes have necessarily taken place in the *personnel*, the playing is quite equal to the performance of last year and very satisfactory.

The performance of a selection by the first class band was very creditable, and a piece played by the boys on stringed instruments I was pleased to request should be repeated, and it was played without the aid of any wind instruments. It afforded me facility in judging the progress made, which for young boys is very good. The general progress in elementary theory and copying music is also satisfactory.

The second class band is making good progress in elementary work and in playing of scales. I am pleased to find these boys are instructed in the playing of scales, as the practical work done now lays the foundation for making good performers when they are advanced to the first class band.

The examination of the third class band consisted of questions on the elements of music. These boys were very keen and quick in their replies, and it was a pleasure to find that the competition for awards so close as to necessitate my writing additional questions on the blackboard to enable a final decision being made.

The first class bugle band proved very good in the playing of marches, good time being kept by the drums, and the playing of a march whilst on the "double" around the upper deck was well sustained. On the individual test the knowledge of the various calls was very good throughout.

The second class bugle band consists of some very promising boys, and they played together very creditably, the general progress being quite satisfactory.

It is very creditable to find the instruments in such a clean and well-kept condition. With young boys having constant use of their instruments it certainly must take great care and supervision to keep the various articles in such a good and serviceable state.

The general result of this examination is very satisfactory, and I have no suggestions to make that I consider would be any improvement on the present routine of instruction. The band-room is situated in the best possible place for a ship, the light and air being a great contrast to the band-room conditions of the last ship.

**swimming.** No fewer than 283 boys have been taught to swim this year.

**Tailoring.** The following is a list of work done in the tailor's shop this year :—

- 300 serge jumpers altered to fit.
- 200 serge jumpers repaired.
- 334 serge trousers altered to fit.
- 428 striped shirts re-taped.
- 249 serge trousers repaired.
- 183 flannels repaired.
- 1248 gold badges made.
- 10 pilot jackets repaired.

**Cooking.** Good progress is being made in this department, and our boys have secured some excellent billets.

**Domestics.** The training of domestics has been most thoroughly carried out. I am pleased to say I have received some most excellent reports of our domestic lads.

**Dentist's report.** The Surgeon-Dentist, Mr. E. Keen, M.R.C.S., L.D.S., in his report to me says :—

I have paid my usual visits to the ship in the mornings, and have done my operations in the afternoons at the infirmary. The result of this has been that I have inspected all the boys three times in the year instead of twice as heretofore. I find I have performed—

Stoppings.	Extractions.		Scalings.
	Permanent.	Temporary.	
466	49	195	52

The general condition of the boys' teeth is quite up to the average.

**Health.** Dr. Partridge, the Medical Officer, reports :—

There have been 966 admissions to the Infirmary during the year, the greater number of these being cases of mild character and short duration. The average stay in hospital was six days.

One death occurred through acute pneumonia in a boy with a family history of tubercular disease. A few other serious cases have occurred, and three boys have been operated upon at the London Hospital—one for hernia, one for varicose veins, and one for peri-cæcal abscess.

Thirty-two operations of a minor character were performed at the Infirmary, principally to render boys eligible for the service.

During the continuous hot weather of August and September an outbreak of ophthalmia occurred, necessitating the removal of 32 boys to White Oak School, Swanley, for treatment. The slight cases were treated at the Infirmary.

Two classes were prepared for the Junior St. John Ambulance examination, and three-quarters of the boys succeeded in passing the examination and obtaining the certificate.

**General remarks.** The conduct of the boys has been generally very good. The resignation of Captain J. Finchette, Shipping Officer at Liverpool, who did such excellent work, was much regretted; but his successor, Captain T. M. Mathias, has done extremely well.

The long winter evenings have been enlivened by some excellent performances by both the officers and boys. The boys have been given the usual signal instruction and the magic lantern entertainments.

The annual Confirmation was held on June 13th by the Lord Bishop of Barking. The excellent behaviour of the boys shows how carefully they had been prepared.

Our annual prize day was held on board on June 30th. The Earl of Stamford was accompanied by the Countess of Stamford, who distributed the prizes, and His Lordship subsequently addressed the boys.

There have been few changes in the staff. The chief officer having resigned through ill-health, Lieutenant L. Menzies, retired from the Royal Navy, was appointed to fill the vacancy, and his services have greatly conduced to the efficiency of the ship.

The Central Poor Law Conference visited the ship on February 20th and witnessed the boys at drill. They subsequently presented a challenge shield for the best division at marksmanship.

On June 5th, the Right Hon. John Burns, President of the Local Government Board, paid an unexpected visit to the ship, and expressed his approval.

The inspection of the ship by Captain C. H. Dare, M.V.O., R.N., took place on December 4th. His report is as follows :—

The "Exmouth" is a very fine new vessel, built by Vickers-Maxim as a training ship. She is thoroughly fitted up.

At the time of my inspection she was undergoing refit. The ship was remarkably clean and well kept. The boys were smart, clean, and happy looking. They were drilling with a muzzle-loading 7-pounder field-gun. It would be an improvement if they were given a 12-pounder 8 cwt. breech-loading gun.

The establishment was, in my opinion, in a high state of efficiency.

The death of the Rev. F. Haslock, our beloved Chaplain, on October 4th, cast a gloom over the whole of the ship. He will be very much missed by everyone on board. The Rev. A. H. W. Seally, Vicar of Grays, was appointed to fill the vacancy on December 27th.

Owing to the increase in the standard for entry into the Royal Navy, the numbers show a decrease when compared with those entered in former years. They have, however, been very thoroughly trained, as 24 "Exmouth" boys, out of nearly 1,100 borne at the Royal Naval Barracks at Shotley, took one-quarter of the prizes offered. There were 44 prizes for competition, and those gained by our boys were as follow :—First for general efficiency; first, second, and third for seamanship; second and third in gunnery; first for best kits, boys, first class; first and fourth for best kits, boys, second class; third in school; and third in essays.

I cannot close this report without a word of praise for all the officers who have worked so hard to obtain such excellent results and to perfect the boys in all branches of their education.

I also beg to thank you, gentlemen, for the very great support you have given me during the past year.

I have the honour to be,

Gentlemen,

Your obedient servant,

REGINALD B. COLMORE

*Captain R.N. (Retired) and  
Captain-Superintendent*

APPENDIX II.  
TABLE I.—BOYS ADMITTED AND DISCHARGED—1876 TO 1906.

YEAR	1876	1877	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	1906	TOTALS.										
Admitted ...	194	494	188	210	289	226	348	350	326	267	374	241	301	329	290	223	322	290	307	278	347	325	341	423	413	329	223	294	277	279	9,430	
Discharged to Royal Navy ...	1	3	1	8	72	85	155	141	95	128	114	95	87	104	108	89	83	102	133	163	137	129	123	149	115	151	116	42	103	96	58	2,989
Discharged to Mercantile Marine ...	53	19	126	115	105	107	109	96	106	91	107	93	141	171	134	75	69	90	87	96	109	112	112	135	145	146	112	93	105	123	115	3,297
Discharged to Army as Musicians ...	9	11	9	31	17	27	46	74	61	43	55	36	18	56	48	42	66	28	26	37	49	28	32	58	93	56	101	51	17	12	39	1,976
Discharged to Situations ...	1	...	2	...	3	...	...	...	...	2	...	...	...	...	...	1	...	...	1	...	1	...	...	1	...	1	...	...	...	...	14	
Discharged to Unions by order of Guardians & Committee, absconded, &c. ...	21	23	47	30	61	43	27	33	52	39	49	44	45	44	36	18	51	34	54	41	51	29	39	29	39	31	50	47	30	25	69	1,231
Boys died ...	...	...	2	1	...	4	1	...	2	2	5	1	2	1	1	...	1	3	2	1	3	2	1	1	1	2	2	1	2	...	1	45
Totals ...	85	59	187	185	258	206	338	344	318	303	330	269	223	376	327	225	270	257	303	358	350	300	307	373	393	387	381	234	258	256	282	8,852

Total number of boys discharged ... 8,852  
Remaining under training 31st December, 1906 ... 578

Total ... 9,430

NOTE.—The numbers of metropolitan and extra-metropolitan boys respectively for the year 1906, were as follow, viz. :—

Admitted—Metropolitan ...	182	Remaining 31st December—Metropolitan ...	380
Extra-metropolitan ...	97	Extra-metropolitan ...	198
	<u>279</u>		<u>578</u>

## ANNUAL REPORT,

TABLE II.

Number of boys admitted from each of the metropolitan unions, and from country unions during 1906 and during the whole time the ship has been established.

Year ending Dec. 31st, 1906.	Parish.	From Mar. 31st, 1876, to Dec. 31st, 1906.	Year ending Dec. 31st, 1906.	Parish or Union.	From Mar. 31st, 1876, to Dec. 31st, 1906.
	Number of boys in the ship when it was taken over by the managers ... ..	12	Bro. } 205 for. }	Brought forward	8,814
	<i>Metropolitan Unions.</i>				
	Bermondsey ... ..	301		Ely ... ..	1
20	Bethnal Green ... ..	256		Epsom ... ..	10
1	Bloomsbury ... ..	42	3	Eton ... ..	1
31	Camberwell ... ..	517	1	Foleshill ... ..	1
2	Chelsea ... ..	162	3	Gateshead ... ..	1
2	City of London ... ..	128		Gravesend ... ..	10
4	Fulham ... ..	290	1	Great Yarmouth ... ..	9
11	Greenwich ... ..	451		Guildford ... ..	8
3	Hackney ... ..	322	1	Hambledon ... ..	2
	Hammersmith ... ..	18	1	Hartley Wintney ... ..	1
	Hampstead ... ..	33	1	Haslingden ... ..	1
4	Holborn ... ..	295	1	Hastings ... ..	1
7	Islington ... ..	298		Hemel Hempstead ... ..	3
8	Kensington ... ..	209		Hendon ... ..	7
8	Lambeth ... ..	478	3	Hitchin ... ..	2
7	Lewisham ... ..	695	2	Horsham ... ..	6
5	Mile End ... ..	242	13	Ipswich ... ..	1
4	Paddington ... ..	148		Isle of Thanet ... ..	43
6	Poplar ... ..	424	5	Kettering ... ..	11
1	St. George's-in-the-East ... ..	128		Kingston ... ..	78
	St. George's-in-the-West ... ..	288	1	Leeds ... ..	2
3	St. Marylebone ... ..	521	1	Leicester ... ..	9
6	St. Pancras ... ..	490		Leigh ... ..	1
4	Shoreditch ... ..	155		Lewes ... ..	3
14	Southwark ... ..	493	3	Maidstone ... ..	29
3	Stepney ... ..	112		Maldon ... ..	2
1	Strand ... ..	38	4	Martley ... ..	3
8	Wandsworth ... ..	435	1	Medway ... ..	27
2	Westminster ... ..	66	2	Newbury ... ..	1
3	Whitechapel ... ..	180	4	Newcastle-under-Lyne ... ..	4
14	Woolwich ... ..	383	1	Newhaven ... ..	1
	<i>Country Unions.</i>			Norwich ... ..	6
1	Aston ... ..	2		Nottingham ... ..	15
	Banbury ... ..	4	3	Orsett ... ..	16
	Basford ... ..	1		Oxford ... ..	2
	Bath ... ..	1	1	Portsmouth ... ..	2
	Bedford ... ..	20	1	Reigate ... ..	10
1	Bedwelty ... ..	1		Richmond ... ..	16
	Bicester ... ..	3		Romford ... ..	1
	Birmingham ... ..	2		Royston ... ..	1
1	Brentford ... ..	13		St. Albans ... ..	3
	Brighton ... ..	4	1	Sculcoats ... ..	1
	Bromley ... ..	20		Seisdon ... ..	1
	Cheadle ... ..	1		Steyning ... ..	14
2	Chelmsford ... ..	10		Stockport ... ..	14
1	Chertsey ... ..	1		Stow ... ..	4
4	Chesterfield ... ..	19		Strood ... ..	58
	Chippenham ... ..	2	4	Thakeham ... ..	2
3	Colchester ... ..	15		Truro ... ..	1
5	Croydon ... ..	46	5	Warwick ... ..	1
	Cuckfield ... ..	2		Watford ... ..	28
1	Derby ... ..	20	2	Wellingborough ... ..	2
	Dewsbury ... ..	3		West Ham ... ..	154
	Dorking ... ..	4		Westhampnett ... ..	3
4	Eastbourne ... ..	9	2	Willesden ... ..	36
	East Retford ... ..	1	3	Wilton ... ..	5
				Windsor ... ..	5
				Worcester ... ..	83
				Worksop ... ..	3
Car. } 205 frd. }	Carried forward	8,814	Total 279	Total ... ..	9,430

TABLE III.—BOYS SHIPPED INTO THE MERCANTILE MARINE.

Year.	Number Shipped.	Year.	Number Shipped.	Year.	Number Shipped.	Year.	Number Shipped.
1876 ... ..	53	Bro. for... ..	836	Bro. for... ..	1,717	Bro. for... ..	2,603
1877 ... ..	19	1885 ... ..	91	1893 ... ..	90	1901 ... ..	146
1878 ... ..	126	1886 ... ..	107	1894 ... ..	87	1902 ... ..	112
1879 ... ..	115	1887 ... ..	93	1895 ... ..	96	1903 ... ..	93
1880 ... ..	105	1888 ... ..	141	1896 ... ..	109	1904 ... ..	105
1881 ... ..	107	1889 ... ..	171	1897 ... ..	112	1905 ... ..	123
1882 ... ..	109	1890 ... ..	134	1898 ... ..	112	1906 ... ..	115
1883 ... ..	96	1891 ... ..	75	1899 ... ..	135		
1884 ... ..	106	1892 ... ..	69	1900 ... ..	145		
Car. for.	836	Car. for... ..	1,717	Car. for... ..	2,603	TOTAL ... ..	3,297



TABLE IV.—PRIZE LIST FOR SPECIAL GOOD CONDUCT AND ABILITY, 1906.

No. on Ship's Books.	No. on Watch Bill.	Name.	Parish.	Rank.	Prize.	Given by	Remarks.	Destination.
8783	18	H. Coombes ( <i>Best Boy in School</i> )	Mile End ( <i>in School</i> )	Chief Petty Officer	Silver Watch	Mr. W. Vallance, J.P. ...	A very clever and thoroughly deserving boy. Sets a very good example to others.	Mercantile Marine.
8489	533	F. Jordan ( <i>Best Boy in Lowest Standard in School</i> )	Camberwell	—	Ditto	Mr. C. Thomas ...	By close attention has made great progress in school work, and is of excellent character.	Returned to friends
8864	29	E. Gillard ( <i>Popular Boy</i> )	Southwark	Chief Petty Officer	Ditto	Captain Brown's Legacy Fund	Elected by his shipmates. A very clean, smart boy.	Still on board.
8908	472	J. Hair's ( <i>Best Boy in Brigantine</i> )	City of London	Ditto	Ditto	Vice-Admiral E. N. Rolfe, C.B.	A very smart, intelligent, and thoroughly deserving boy. Has done remarkably well in Brigantine.	Royal Navy.
8585	227	W. Henderson ( <i>Best Boy in Cooking</i> )	Wandsworth	—	Ditto	Mrs. Verburgh ...	A very good cook-boy of excellent character. Has cooked for officers and Brigantine's crew.	Mercantile Marine.
8566	78	Daniels, W. ( <i>Special Good Conduct and ability</i> )	Southwark	Chief Petty Officer	Silver Watch	Sir R. Hensley, J.P., late Chairman of the Board	A thoroughly good, deserving boy, clean, smart, intelligent, and thoroughly trustworthy. Sets an excellent example to other lads.	Still on board.
8592	574	Bailey, T. ( <i>First Boy in Gun Drill</i> )	Bromley	Chief Petty Officer	Ditto	Mr. Geoffrey Drage ...	Clean, smart boy, very good at all drills.	Royal Navy.
8746	30	C. Moore ...	Poplar ...	Ditto.	Silver Medal ...	The Managers ...	An excellent chief petty officer, good at instructions. Captain of division.	Ditto.
8819	2	W. Hoy ...	Lewisham ...	Ditto	Ditto	Ditto	A very steady and reliable captain of division.	Mercantile Marine.
8981	154	A. King ...	Woolwich ...	Ditto	Ditto	Ditto	A very good lad, smart and attentive to his work.	Royal Navy.
8852	170	W. Harris ...	St. George's ...	Ditto	Ditto	Ditto	An excellent lad, very quiet in his manners, but firm.	Ditto.
8616	219	T. Webb ...	Islington ...	Ditto	Ditto	Ditto	A very good boy, and has done remarkably well.	Mercantile Marine.
8540	268	G. Budd ...	Camberwell ...	Ditto	Ditto	Ditto	Very good lad, smart, intelligent, and most promising.	Ditto.
9039	378	J. Easeman ...	Wandsworth	Ditto	Ditto	Ditto	A very good chief petty officer boy; shows an excellent example. Over two years in ship, and never been punished.	Still on board.
7862	349	F. Gunnings ...	Woolwich ...	Ditto	Ditto	Ditto	Acting sergeant of band, excellent disposition, always cheerful, clean, and respectful in manners.	Royal Navy.
8798	441	P. Mills ...	St. Marylebone	Ditto	Ditto	Ditto	A very good, steady lad, of excellent character.	Still on board.
8896	444	A. Parry ...	Camberwell ...	Ditto	Ditto	Ditto	Very smart lad. Pulls an excellent oar and can handle a boat very well.	Ditto.
8777	543	W. Cullen ...	Orsett ...	Ditto	Ditto	Ditto	A young boy, but extremely promising. Takes charge of all parties going across London. Very trustworthy and intelligent.	Ditto.
8337	522	P. Salmon ...	Woolwich ...	Ditto	Ditto	Ditto	A very reliable captain of division. Hard-working boy and thoroughly trustworthy.	Ditto.

TABLE V.—BOYS WHO HAVE GAINED CERTIFICATES OF MERIT.

No. on Ship's Book.	No. on Watch Bill.	Name.	Parish or Union.	Destination.
9004	504	Burgess, T.	Orsett	Still on board.
9204	509	Castle, H.	Wandsworth	"
8843	573	Rawlinson, P.	Islington	"
9041	596	Hood, C.	Holborn	"
8646	526	McCabe, W.	Bethnal Green	"
8829	577	Wightman, G.	Wandsworth	Royal Navy.
8706	585	Reeves, T.	Hackney	Still on board.
8417	549	Booth, C.	Croydon	"
9021	550	Harris, W.	Kensington	Mercantile Marine.
8630	73	Arnold, H.	Lambeth	Still on board.
8991	81	Robinson, A.	West Ham	"
8934	66	Collett, G.	Kensington	"
8948	91	Conway, G.	Lambeth	"
8947	83	Porter, H.	"	"
8664	21	Skarratt, W.	Stockport	Mercantile Marine.
9116	23	Stevens, W.	Lambeth	Still on board.
8752	28	Newman, H.	Hackney	"
8851	5	Palmer, A.	"	"
8984	106	Lowe, A.	Chesterfield	"
8949	168	Rawlingson, A.	Lambeth	"
8911	126	Ambrose, F.	Stow	"
8901	161	Russell, S.	Bromley	Royal Navy.
9007	135	Davis, A.	Hackney	"
9147	193	Gibson, T.	Camberwell	Still on board.
8926	198	Scrivener, F.	Bromley	"
8933	153	Cooper, G.	Strood	"
7877	132	Skinner, H.	Bermondsey	Mercantile Marine.
8534	212	Sharp, A.	Wandsworth	Still on board.
8748	262	Langridge, A.	Poplar	Royal Navy.
8814	242	Ball, E.	West Ham	Still on board.
8568	202	Sinclair, C.	Southwark	Mercantile Marine.
8794	215	Duxberry, H.	St. Marylebone	"
8696	299	Steadman, W.	Southwark	"
8530	240	Richardson, F.	Mile End	Royal Navy.
9173	205	Tyler, W.	City of London	Still on board.
8581	298	Child, S.	Southwark	"
8559	453	Longhurst, G.	Lewisham	Army.
8496	421	Digby, F.	West Ham	"
9047	429	Daniels, H.	"	Still on board.
8969	416	Anderson, E.	Bermondsey	"
9194	446	Smith, P.	West Ham	Royal Navy.
8667	469	Sewell, W.	Watford	Still on board.
8962	455	Shave, D.	Westminster	"
9169	415	Presents, W.	Norwich	"
9075	437	Wheatley, H.	Derby	"
9113	338	Law, J.	Lewisham	"
8834	361	Jenkins, G.	Hackney	Royal Navy.
8372	351	Stanton, H.	Camberwell	Still on board.
8918	337	Soper, W.	Islington	"
8733	357	Moye, F.	Shoreditch	"
8876	341	Rothwell, F.	Isle of Thanet	"
8953	389	Bennett, W.	Lambeth	"
8926	336	Bailey, R.	Camberwell	Army.
9020	344	Hawker, C.	Woolwich	Still on board.

TABLE VI.—BOYS DISCHARGED TO ARMY FROM 1876 TO 1906.

1 to the Royal Horse Artillery.	9 to the 20th Hussars.	8 to the Loyal North Lancashire Regiment.
6 " Royal Artillery.	2 " 21st Hussars.	17 " South Lancashire Regiment.
2 " Royal Engineers.	8 " Grenadier Guards.	8 " Lancashire Regiment.
1 " 3rd Hussars.	4 " Coldstream Guards.	8 " Leicester Regiment.
1 " 4th Hussars.	1 " Scots Guards.	4 " Leinster Regiment.
2 " 5th Lancers.	21 " Argyle and Sutherland Highlanders.	4 " Lincolnshire Regiment.
1 " 11th Hussars.	13 " Oxfordshire Light Infantry.	3 " Liverpool Regiment.
31 " Berkshire Regiment.	7 " Northumberland Fusiliers.	86 " Manchester Regiment.
18 " Border Regiment.	17 " Rifle Brigade.	14 " Middlesex Regiment.
18 " Cheshire Regiment.	21 " Royal Fusiliers.	2 " Munster Fusiliers.
55 " Connaught Rangers.	3 " Royal Highlanders.	6 " Cameron Highlanders.
21 " Derbyshire Regiment.	1 " Royal Marine Light Infantry.	17 " Northamptonshire Regiment.
2 " Devonshire Regiment.	40 " Royal Scots (Lothian Regiment).	6 " Wiltshire Regiment.
9 " Dorsetshire Regiment.	26 " Scots Fusiliers.	17 " Worcester Regiment.
10 " Dublin Fusiliers.	13 " Scottish Rifles.	23 " York & Lancaster Regiment.
7 " Duke of Cornwall's Light Infantry.	2 " Seaforth Highlanders.	42 " Yorkshire Light Infantry.
20 " Durham Light Infantry.	8 " Shropshire Light Infantry.	10 " Yorkshire Regiment.
37 " Essex Regiment.	32 " Somersetshire Light Infantry.	23 " East Yorkshire Regiment.
5 " Gloucestershire Regiment.	1 " Staffordshire Regt. (North).	1 " Army Hospital Corps.
13 " Highland Light Infantry.	29 " Staffordshire Regt. (South).	11 " Army Medical Corps.
5 " Gordon Highlanders.	26 " Suffolk Regiment.	14 " East Surrey Regiment.
9 " Inniskilling Fusiliers.	7 " Surrey Regiment.	5 " Bedford Regiment.
23 " Irish Fusiliers.	30 " Sussex Regiment.	2 " 18th Hussars.
13 " Irish Rifles.	16 " South Wales Borderers.	3 " "The Queen's" Regiment.
9 " East Kent Regiment.	46 " Royal Warwick Regiment.	8 " West Yorkshire Regiment.
5 " Kent Regiment.	15 " Welsh Fusiliers.	4 " Cameronian Regiment.
5 " King's Own Scottish Borderers.	36 " Welsh Regiment.	19 " Dragoon Guards.
27 " King's Royal Rifles.	1 " West Riding Regiment.	
53 " Lancashire Fusiliers.	12 " East Lancashire Regiment.	
1 " 13th Hussars.		1,223 Total.
1 " 9th Hussars		

TRAINING SHIP EXMOUTH COMMITTEE, 1906.

TABLE VII.—SCHOOL PRIZE LIST.

School Standard.	Order.	No. on Ship's Books.	No. on Watch Bill.	Name.	Parish or Union.	Prize.	Destination.
VII.	1st	9020	344	Hawker, C. ... ..	Woolwich ... ..	s. d. 5 0	Still on board.
	2nd	9014	538	Crafts, A. ... ..	Bethnal Green... ..	3 0	"
	3rd	9186	326	Ball, F. ... ..	Camberwell ... ..	2 0	"
		8752	28	Newman, H. ... ..	Hackney ... ..	2 0	"
		9192	290	Clarke, F. ... ..	Woolwich ... ..	2 0	"
VI.	1st	8797	131	Weiss, G. ... ..	St. Marylebone ... ..	5 0	Swanley School.
		8852	170	Harris, W. ... ..	St. George's ... ..	5 0	Royal Navy.
	2nd	8851	5	Palmer, A. ... ..	Hackney ... ..	4 0	Still on board.
		9043	132	Skinner, H. ... ..	Bernmondsey ... ..	4 0	"
	3rd	8936	523	Watson, F. ... ..	Lewisham ... ..	2 6	"
		9151	74	Clive, W. ... ..	Croydon ... ..	2 6	"
4th	8963	255	Mills, H. ... ..	Woolwich ... ..	1 6	"	
	7877	40	Kemp, J. ... ..	Stockport ... ..	1 6	"	
V.	1st	8808	221	Hopson, J. ... ..	West Ham ... ..	5 0	Still on board.
		8804	410	Nichols, G. ... ..	" ... ..	5 0	Army.
	2nd	8798	441	Mills, P. ... ..	St. Marylebone ... ..	4 0	Still on board.
		9090	104	MacKenzie, W. ... ..	Southwark ... ..	4 0	"
	3rd	9091	147	Carlton, H. ... ..	" ... ..	2 6	"
		9162	334	Clegg, E. ... ..	Camberwell ... ..	2 6	"
	4th	9111	247	Baskerville, J. ... ..	Lambeth ... ..	1 6	"
		8942	134	Dominick, R. ... ..	Whitechapel ... ..	1 6	"
IV.	1st	8998	25	Pavitt, W. ... ..	Wandsworth ... ..	5 0	Royal Navy.
		8959	376	Hunt, W. ... ..	Camberwell ... ..	5 0	"
	2nd	9032	179	Weston, D. ... ..	Bethnal Green... ..	3 0	Still on board.
		8976	72	Quartermain, F. ... ..	Wandsworth ... ..	3 0	"
	3rd	8995	435	Chisholm, J. ... ..	Richmond... ..	2 0	"
		8819	2	Hoy, W. ... ..	Lewisham ... ..	2 0	Mercantile Mar.
	4th	9183	3	Blake, E. ... ..	Camberwell ... ..	1 0	Still on board.
		9004	504	Burgess, T. ... ..	Orsett ... ..	1 0	"
IIIA.	1st	9167	225	Bridger, J. ... ..	Willesden ... ..	4 0	Still on board.
		9005	514	Burgess, G. ... ..	Orsett ... ..	4 0	"
	2nd	9129	565	Bliss, W. ... ..	Camberwell ... ..	3 0	"
		9194	446	Smith, P. ... ..	West Ham ... ..	3 0	"
	3rd	9013	355	Grant, W. ... ..	St. Marylebone ... ..	2 0	"
		8931	154	King, A. ... ..	Woolwich ... ..	2 0	Royal Navy.
4th	9096	371	Boyce, G. ... ..	Mile End ... ..	1 0	"	
	9156	10	Holder, B. ... ..	Croydon ... ..	1 0	Still on board.	
IIIB.	1st	9074	317	Peat, T. ... ..	Derby ... ..	4 0	Still on board.
		9076	572	Smith, J. ... ..	" ... ..	4 0	"
	2nd	8962	455	Shave, D. ... ..	Westminster ... ..	3 0	"
		9056	56	Twyman, P. ... ..	Isle of Thanet ... ..	3 0	"
	3rd	9069	477	Morris, G. ... ..	Lewisham ... ..	2 0	"
		9042	160	Meehan, J. ... ..	Stockport ... ..	2 0	"
	4th	8399	43	Bolton, R. ... ..	West Ham ... ..	1 0	Army.
		8945	474	Griffith, E. ... ..	Lewisham ... ..	1 0	Still on board.
II.	1st	8953	389	Bennett, W. ... ..	Lambeth ... ..	3 0	Still on board.
		9066	190	Ballard, T. ... ..	Mile End ... ..	3 0	"
	2nd	8489	533	Jordon, F. ... ..	Camberwell ... ..	2 0	"
		8766	118	Clayton, W. ... ..	Orsett ... ..	2 0	"
	3rd	9023	179	Maynard, A. ... ..	Wandsworth ... ..	1 0	"
	9036	24	Pratt, W. ... ..	St. Marylebone ... ..	1 0	"	

TABLE VIII.—PASSED OUT BOYS' PRIZE LIST.

No. on Ship's Books.	No. on Watch Bill.	Name.	Parish or Union.	Prize.	Destination.
8733	153	Cooper, G. ... ..	Strood ... ..	s. d. 4 0	Still on board.
8777	543	Cullen, W. ... ..	Dorset ... ..	4 0	"
8537	414	Atkins, G. ... ..	Watford ... ..	4 0	"
8496	431	Digby, E. ... ..	West Ham ... ..	4 0	Army.
8908	472	Haines, J. ... ..	City of London ... ..	4 0	Royal Navy.
8783	18	Coombes, H. ... ..	Mile End ... ..	3 0	Mercantile Marine.
8901	161	Russell, S. ... ..	Bromley ... ..	3 0	Royal Navy.
8937	103	Theobald, T. ... ..	Wandsworth ... ..	3 0	"
8876	341	Rothwell, J. ... ..	Isle of Thanet. ... ..	3 0	Still on board.
8583	547	Holland, J. ... ..	Wandsworth ... ..	3 0	"
8630	73	Arnold, H. ... ..	Lambeth ... ..	3 0	"
9033	230	Agutta, E. ... ..	Camberwell ... ..	2 0	Mercantile Marine.
8511	567	Bull, F. ... ..	Kingston ... ..	2 0	Royal Navy.
8869	194	Ford, W. ... ..	Southwark ... ..	2 0	Still on board.
8845	174	Koch, M. ... ..	Islington ... ..	2 0	"
8652	378	Twitchett, W. ... ..	Strood ... ..	2 0	Mercantile Marine.
7948	101	Saunders, T. ... ..	Camberwell ... ..	2 0	"
8458	309	Townsend, A. ... ..	Chelmsford ... ..	1 0	Royal Navy.
8708	98	Petch, H. ... ..	Bethnal Green ... ..	1 0	Still on board.
7863	349	Gunnings, F. ... ..	Woolwich ... ..	1 0	Royal Navy.
8645	539	Ritchie, A. ... ..	Whitechapel ... ..	1 0	Still on board.
8534	212	Sharp, A. ... ..	Wandsworth ... ..	1 0	Mercantile Marine.
8895	480	Soames, E. ... ..	Lambeth ... ..	1 0	Still on board.

TABLE IX.—BAND PRIZE LIST.

No. on Ship's Books.	No. on Watch Bill.	Name.	Parish or Union.	Prize.	Destination.
<b>1ST CLASS BAND.</b>					
<i>For Best Playing and Reading at Sight—</i>				s. d.	
8570	580	Guerin, W. ... ..	Holborn ... ..	10 0	Still on board.
8929	324	Foskett, A. ... ..	" ... ..	5 0	Royal Navy.
8234	155	Bridges, F. ... ..	West Ham ... ..	2 6	Still on board.
<i>For Best Soloists—</i>					
8584	76	Wightman, W. ... ..	Wandsworth ... ..	10 0	Still on board.
8314	266	Bennett, W. ... ..	Southwark ... ..	5 0	M. Marine.
8837	62	Humphreys, G. ... ..	Wandsworth ... ..	2 6	Still on board.
<i>For the Most Advanced in General Knowledge—</i>					
7863	349	Gunnings, F. ... ..	Woolwich ... ..	10 0	Royal Navy.
8408	47	Maukin, G. ... ..	Greenwich ... ..	5 0	Still on board.
8838	192	Nimmo, J. ... ..	Wandsworth ... ..	2 6	"
<b>2ND CLASS BAND.</b>					
<i>For Best General Progress—</i>					
8984	106	Lowe, W. ... ..	Chesterfield ... ..	5 0	Still on board.
8804	410	Nichols, G. ... ..	West Ham ... ..	3 6	"
8654	396	Hall, A. ... ..	Poplar ... ..	2 0	"
8769	325	Clayton, H. ... ..	Richmond ... ..	1 6	"
<b>3RD CLASS BAND.</b>					
<i>For Best General Progress—</i>					
8932	255	Mills, H. ... ..	Woolwich ... ..	5 0	Still on board.
8890	444	Parry, A. ... ..	Lewisham ... ..	3 6	"
9116	23	Stevens, W. ... ..	Lambeth ... ..	2 0	"
8789	17	Rose, H. ... ..	Wandsworth ... ..	1 6	M. Marine.
<b>BUGLE BAND.</b>					
<i>For the Most Efficient—</i>					
8566	78	Daniels, W. ... ..	Southwark ... ..	5 0	Still on board.
8581	298	Childs, S. ... ..	" ... ..	3 0	M. Marine.
8315	432	Smith, G. ... ..	" ... ..	2 0	"
8494	253	Arnold, F. ... ..	West Ham ... ..	1 6	Still on board.
<i>For the Best Kept Instrument—</i>					
8562	466	Grice, T. ... ..	Southwark ... ..	5 6	Royal Navy.
8589	391	Cooper, W. ... ..	Hackney ... ..	3 0	Army.
8627	166	Butler, A. ... ..	Lambeth ... ..	2 0	Still on board.
8895	480	Soames, E. ... ..	" ... ..	2 0	"

TABLE X.—SWIMMING PRIZE LIST.

No. on Ship's Books.	No. on Watch Bill.	Name.	Parish or Union.	Prize.	Given by	Destination.
9207	94	Dornan, A. ...	Woolwich ...	Silver Watch	Mr. Lambert ... ..	Still on board.
8883	328	Akers, F. ...	Aston ... ..	Silver Medal	The Managers ... ..	"
8764	534	Lewis, C. ...	Shoreditch ...	12s. ... ..	" ... ..	"
8616	219	Webb, T. ...	Islington ...	10s. ... ..	" ... ..	M. Marine.
8570	580	Guerin, W. ...	Holborn ... ..	8s. ... ..	" ... ..	Still on board
8773	265	Civill, A. ...	Orsett ... ..	7s. ... ..	" ... ..	"
8969	416	Anderson, E.	Bermondsey	2s. ... ..	" ... ..	"

TABLE XI.—GYMNASTIC PRIZE LIST.

No. on Ship's Book.	No. on Watch Bill.	Name.	Parish or Union.	Prize.	Given by	Destination.
8331	245	Whitehouse, T.	Kingston ...	Silver Watch	The Managers ... ..	Army.
8655	159	Moorhouse, C.	Lambeth ...	15s. ... ..	Capt. Brown's Legacy Fund...	Still on board
8720	187	Fox, J. ... ..	Islington ...	10s. ... ..	" ... ..	"
8302	548	Davis, W. ...	Bethnal Gr'n	7s. 6d. ...	" ... ..	Army.
8537	414	Atkins, G. ...	Watford ...	5s. ... ..	" ... ..	Still on board.
9237	557	Crutch, E. ...	Holborn ...	2s. 6d. ...	" ... ..	"

TABLE XII.—ST. JOHN AMBULANCE.—PRIZES AND CERTIFICATES.

No. on Ship's Books.	No. on Watch Bill.	Name.	Parish or Union.	Prize.	Destination.
8789	17	Rose, H. ... ..	Wandsworth ... ..	Certificate and 5s. ...	Still on board.
8938	289	Vernall, J. ... ..	Worcester ... ..	" 5s. ...	"
8932	255	Mills, H. ... ..	Woolwich ... ..	" 4s. ...	"
8809	379	Dipple, A. ... ..	West Ham ... ..	" 4s. ...	"
8966	327	Wheeler, R. ... ..	City of London ... ..	" 4s. ...	"
8769	325	Clayton, H. ... ..	Richmond ... ..	" 3s. ...	"
9116	23	Stevens, W. ... ..	Lambeth ... ..	" 3s. ...	"
9118	39	Cramp, E. ... ..	Greenwich ... ..	" 2s. ...	"
9061	388	Robson, T. ... ..	Mile End ... ..	" 2s. ...	"
8334	79	Hawkins, J. ... ..	Holborn ... ..	" 2s. ...	Royal Navy.
8811	561	Dipple, S. ... ..	Mile End ... ..	" 2s. ...	Still on board.
8765	46	Sawdy, A. ... ..	Orsett ... ..	" 1s. ...	"
8879	243	Fisher, T. ... ..	Greenwich ... ..	" 1s. ...	"
8822	583	Goldup, A. ... ..	Lewisham ... ..	" 1s. ...	M. Marine.
9007	135	Davis, A. ... ..	Hackney ... ..	" 1s. ...	Royal Navy.

TABLE XIII.—SIGNAL PRIZE LIST.

No on Ship's Books.	No. on Watch Bill.	Name.	Parish or Union.	Rank.	Prize.	Given by.	Destination.
8617	201	Long, G.	Islington	Chief Petty Officer	Silver Watch	The Captain-Supt.	Mercantile Marine.
8233	4	Brown, W.	West Ham	Petty Officer ...	Silver Medal	The Managers	Still on board.
8458	309	Townsend, A.	Chelmsford	—	6s.	"	Royal Navy.
8003	395	Harwood, E.	Bermondsey	—	5s.	"	Still on board.
8663	571	Day, F.	Bromley	—	3s.	"	Royal Navy.

TABLE XIV.—LIST OF OLD BOYS WHO HAVE VISITED THE SHIP OR WRITTEN TO THE CAPTAIN-SUPERINTENDENT DURING 1906.

Omitted from this volume.

## ANNUAL REPORT OF THE AMBULANCE COMMITTEE FOR 1906.

18th March, 1907.

We submit our report on the work of the ambulance service of the Board for the year 1906.

**Utilisation of motor traction for ambulance purposes.** Further progress has been made during the year in the substitution of motor for horse traction for ambulance purposes. In our last annual report we stated that a motor ambulance had been delivered at the close of the year. This vehicle was built for the Managers by Messrs. James & Browne. Up to the end of 1906 it had made 1,080 journeys and travelled 12,645 miles at a cost for fuel, repairs, &c., of £141 7s. 1d. The station superintendent estimated that the cost of running the same mileage by horses would have been about £350, exclusive of men's wages.

Towards the end of the year two motor omnibuses for the transport of patients were built for the Managers by Messrs. Dennis Bros., of Guildford, and a motor ambulance by Mr. A. R. Garnett, of 181, Piccadilly, W.

Three motor omnibuses and two motor ambulances were placed at the South-Western ambulance station at the end of the year. A motor pit (for use in examining and repairing the motors) has been constructed and a motor workshop with electrically-driven lathe and other necessary tools has been provided. The electric current has been laid on to a part of the station to supply portable electric hand lamps, as these are essential for the proper examination and adjustment of the motor engines.

**Facilities for obtaining ambulances at all hours of the day and night.** We have continued to keep the Ambulance Department at the Chief Office open till 11 p.m. each day. Between that hour and 9 a.m. the ambulance stations are switched on to the public telephone exchanges. Thus, by making use of the telephone, persons may obtain an ambulance at any hour of the day or night.

**Proposed extension of the service to the conveyance of non-infectious cases.**

No formal authority for the extension of the ambulance service to the conveyance of non-infectious cases has yet been conferred on the Managers; but a much larger number of persons than in the previous year availed themselves of the facilities afforded by us for the hire of ambulances.

**Removals.**  
*To the Managers' hospitals.*

On reference to appendix I. A (p. 210) it will be seen that the total number of fever patients removed to the Managers' hospitals during the year was 25,893 (23,736).\* The removals of smallpox patients numbered 33 (80).

**Patients conveyed to other places than the Managers' hospitals.**

Under the powers conferred by section 79 (3) of the "Public Health (London) Act, 1891," 405 (423) persons suffering from dangerous infectious disorders were conveyed in the Managers' ambulances to other places than the Managers' hospitals during the year 1906. Of these 81 (110) were stated to have measles, 29 (38) scarlet fever, 30 (29) enteric fever, 10 (18) diphtheria, 228 (200) erysipelas, 10 (8) puerperal fever, and 13 (5) chickenpox; also 1 (5) smallpox contact, 2 (2) diphtheria contacts, and 1 scarlet fever contact. In addition, 424 (134) non-infectious cases (medical and surgical) were conveyed to general hospitals and other places.

The total sum received by the Managers during 1906 for the conveyance of persons to other places than the Board's own institutions was £223 11s. (£109 12s.), of which £11 7s. 6d. (£10 5s.) was in respect of the service of nurses, and £169 15s. (£49 9s.), or an average of 8s. a case, was for the conveyance of non-infectious cases. A large number of infectious cases were conveyed gratuitously owing to the want of means of the patients.

**Conveyance of imbeciles and children.**

In addition to the above-mentioned removals, 734 (684) imbeciles, 318 (306) children suffering from ophthalmia, 58 from ringworm, 271 (314) defective and other children have been conveyed to their several institutions during the year, making, with the medical and surgical cases before referred to, a total of 1,807 (1,439) non-infectious cases.

**Total removals.**

The aggregate removals during the year, including the transferring of patients from one institution to another, numbered 50,306 (46,093), and the mileage run by the vehicles was 388,265 (334,446). The number of removals and the mileage run were greater than in any previous year, with the exception of the mileage of the year 1902.

**Nurses' journeys.**

The journeys made by nurses numbered 27,228, and the sum credited to the hospitals for their services amounted to £3,403 10s.

**Conveyance of stores.**

Large quantities of goods and stores (including 195,600 (191,450) bundles of wood) have been conveyed from one institution to another. By judicious arrangements for the work to be carried out at times when the falling off in the demands for the conveyance of infectious patients left some of the men and horses at liberty, it has been done without the employment of additional staff, and, therefore, practically without expense to the Managers.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

**Work of Ambulance stations.**

Tables A and B (see pp. 210 and 212) show the work performed by the ambulance stations during the past year.

The following table briefly summarises the year's work of each station :—

STATION.	Number of Removals.	Number of Journeys.	Miles Run by Vehicles.
Eastern ... ..	9,540 ( <i>12,338</i> )*	6,856 ( <i>7,041</i> )	73,425 ( <i>70,512</i> )
North-Western ... ..	6,495 ( <i>7,195</i> )	4,403 ( <i>4,255</i> )	49,073 ( <i>39,732</i> )
Western . . . . .	8,076 ( <i>7,120</i> )	5,588 ( <i>4,560</i> )	63,266 ( <i>45,483</i> )
Mead (non-infectious work vehicles only used, horses and men supplied by the Western Station)	1,037 ( <i>1,247</i> )	288 ( <i>387</i> )	9,011 ( <i>10,688</i> )
South-Western ... ..	11,527 ( <i>9,354</i> )	6,038 ( <i>6,059</i> )	81,399 ( <i>79,157</i> )
South-Eastern (re-opened) ... ..	2,470 (Closed)	2,598 (Closed)	25,416 (Closed)
Brook ... ..	11,161 ( <i>8,839</i> )	6,843 ( <i>6,624</i> )	86,675 ( <i>88,874</i> )
Totals ... ..	50,306 ( <i>46,093</i> )	32,614 ( <i>28,926</i> )	388,265 ( <i>334,446</i> )

The following table shows (a) the greatest number of patients removed to hospital in a single day by each station ; and (b) the heaviest week's work of each station :—

STATION.	(a) Greatest number of patients removed to Board's hospitals in one day.		(b) Heaviest week's work.		
	Date.	Number.	Week ended	Removals (including transfers, &c.).	Mileage travelled.
Eastern... ..	Sep. 15	42 ( <i>32</i> )	July 21	230 ( <i>331</i> )	2,033 ( <i>2,053</i> )
North-Western ... ..	Oct. 15	27 ( <i>21</i> )	Oct. 20	218 ( <i>219</i> )	1,762 ( <i>1,374</i> )
Western ... ..	Nov. 17	34 ( <i>28</i> )	„ 6	276 ( <i>227</i> )	2,059 ( <i>1,473</i> )
South-Western ... ..	June 12	25 ( <i>41</i> )	„ 27	335 ( <i>331</i> )	2,861 ( <i>2,853</i> )
South-Eastern ... ..	Oct. 9	30 (—)	„ 8	151 (—)	1,590 (—)
Brook ... ..	„ 16	30 ( <i>40</i> )	„ 20	315 ( <i>228</i> )	2,210 ( <i>3,388</i> )

The average lengths of the journeys from the respective ambulance stations were as follows :—

STATION.	Removals from Home.		Transfers.	Average of every kind of Journey.
	Miles.		Miles.	Miles.
	Smallpox.	Fever.		
Eastern ... ..	16.1 ( <i>16.7</i> )*	9.9 ( <i>8.5</i> )	21.4 ( <i>22.2</i> )	10.8 ( <i>10.0</i> )
North-Western ... ..	22.5 ( <i>24.0</i> )	10.1 ( <i>7.7</i> )	22.2 ( <i>20.9</i> )	11.1 ( <i>9.3</i> )
Western ... ..	— ( <i>19.1</i> )	9.5 ( <i>8.5</i> )	34.4 ( <i>27.1</i> )	11.3 ( <i>9.9</i> )
South-Western ... ..	— (—)	10.1 ( <i>10.6</i> )	43.9 ( <i>34.9</i> )	13.5 ( <i>14.0</i> )
South-Eastern ... ..	— (closed)	9.2 (—)	31.6 (—)	10.6 (—)
Brook ... ..	17.4 ( <i>16.6</i> )	10.6 ( <i>12.2</i> )	32.1 ( <i>29.7</i> )	12.6 ( <i>13.3</i> )

\* Italic figures in brackets throughout are the corresponding figures for 1905.



**Ambulance stations.** The ambulance stations have continued to be maintained in a satisfactory state of repair, the minor repairs and painting having been executed by the staff.

**Staff.** The health of the staff has not been so well maintained as in former years.

The following table shows the number of staff off duty through illness during the year :—

STATION.	Number off Duty.	Total days off Duty.
Eastern ... ..	11 ( <i>5</i> )	104 ( <i>100</i> )
North-Western ... ..	6 ( <i>6</i> )	241 ( <i>44</i> )
Western ... ..	10 ( <i>9</i> )	241 ( <i>130</i> )
Mead ... ..	1 ( <i>1</i> ) (1 diphtheria)	21 ( <i>13</i> )
South-Western ... ..	7 ( <i>11</i> )	58 ( <i>298</i> )
South-Eastern ... ..	6 (—)	42 (—)
Brook ... ..	9 ( <i>7</i> )	66 ( <i>98</i> )
	50 ( <i>39</i> )	773 ( <i>683</i> )

There were 24 (*11*) resignations, 18 (*9*) discharges, and 57 (*33*) appointments to the staff during the year. Also one death—Mr. James Blake—the superintendent of the Brook Ambulance Station, who had been in the service for 14 years.

(Signed) H. THOMSON LYON,  
*Chairman.*

\* Italic figures in brackets throughout are the corresponding figures for 1905.

ANNUAL REPORT FOR 1906 OF THE COMMITTEE FOR  
GENERAL PURPOSES.*25th February, 1907.***Proposed  
sanatoria  
for con-  
sumptives.**

In our last annual report we adverted to the fact that we were still awaiting an authoritative expression of opinion from the Local Government Board on the question of the provision by the Managers of hospital accommodation for consumptive patients, in support of which an influential deputation from the Metropolitan Branch of the Incorporated Society of Medical Officers of Health, the National Association for the Prevention of Consumption, the Royal Institute of Public Health, and other bodies had waited upon the Managers in February, 1905. It will be remembered that in the memorial which this deputation presented to the Managers it was proposed (*a*) that an order of the Local Government Board should "be obtained to make Section 5 of the Metropolitan Poor Act, 1867, applicable to the case of 'poor persons' suffering from pulmonary phthisis (consumption); and, if necessary, (*b*) that an Act be obtained to make the provisions of Section 80 of the Public Health (London) Act, 1891, applicable to pulmonary phthisis (consumption), as if such disease were therein mentioned as well as 'fever or smallpox or diphtheria.'"

With the object of ascertaining, in the first instance, the views of the several Metropolitan, City, and Borough Councils, Boards of Guardians, and Sick Asylum Districts, and the administrative bodies of the Hospitals for Consumptives in the Metropolis upon this most important subject, we forwarded to these authorities a copy of the memorial together with a copy of the speeches delivered in support thereof. The replies received showed that of the 65 authorities consulted 19 were wholly favourable to the objects of the memorial, 9 were favourable if the cost were made a national charge, and 14 were unfavourable. The replies of the remaining 23 authorities were more or less indefinite.

After again considering the whole question, the Managers, in February last, decided to forward to the Local Government Board a copy of the memorial above referred to, together with a copy of a further memorial which had been addressed to them by Sir William Broadbent, Bart., and which embodied his views upon the

whole question of the prevention of tuberculosis—views which differed in some essentials from those set forth in the memorial from the Medical Officers of Health. The Local Government Board were at the same time informed that, having regard to the uncertainty which prevailed as to the probable number of patients who would come under the schemes referred to in the memorial, and of the great prospective cost to the ratepayers of the Metropolis, the Managers would be glad to receive the judgment of the Local Government Board upon the prayer of the memorialists.

To this communication the Local Government Board, in a letter dated 22nd March, replied that they had carefully considered the subject, but that the information before them did “not appear to afford sufficient justification for the very heavy outlay which would be involved in the proposal.”

**Paying patients.** We reported to the Board in March last that, after due consideration of a motion which had previously been submitted to the Managers, and which proposed to ask the Local Government Board “to sanction the admission of paying patients to the hospitals, asylums, and schools and homes under the control of the Managers,” we were not prepared to advise them to affirm the principle which the adoption of this motion would imply. The Managers adopted this view, and decided to take no further action in the matter.

**Medical consultations.** The Local Government Board having, in a letter dated 17th March last, enquired whether any arrangement had been made by the Managers whereby the advice of any of their experienced medical officers might be available for consultation purposes as occasion arose, instead of calling in an outside consultant, we ascertained that during the 10 years immediately preceding this enquiry the total sum which the Managers had been called upon to pay in this connection had amounted to only 161 guineas, of which 102 were in respect of patients and 59 in respect of officers. We did not, therefore, think that sufficient cause had been shown to justify the issue of any regulation or instruction which might have the effect of limiting the discretion of the Managers’ medical officers in any surgical or special case in which a second opinion might be necessary.

**Revision of Standing Orders.** On the 4th August last the Managers, on our recommendation, decided on the revision of certain of their Standing Orders which needed modification in consequence of the issue by the Local Government Board of an Order, dated 19th April, 1906, regulating and defining the method of making payments and the duties of Accountant and Treasurer. They also decided to revise certain other Standing Orders having reference to the office and powers of chairmen and vice-chairmen of committees, the powers of central committees, and other matters.

**Outbreak of enteric fever at Belmont Asylum.** In consequence of a serious outbreak of enteric fever at Belmont Asylum in June last, we were instructed by the Managers to enquire into the circumstances attending this outbreak, and as to the steps taken from time to time to cope with the same. After due consideration of the facts we came to the conclusion that all reasonable and proper steps had been taken for dealing with the situation, a conclusion which, subsequently,

was emphatically endorsed by Dr. Monckton Copeman, the Medical Inspector appointed by the Local Government Board to investigate the outbreak and to report to them thereon.

**Head Office staff.** Towards the close of the year the Managers, on our recommendation, decided to increase the number of 1st class clerks on the Head Office staff from 8 to 9 (at the same time decreasing the number of 2nd class clerks from 15 to 14), and to promote Messrs. F. A. Kelly, C. H. Carpenter, and H. F. Hayes to the rank of 1st class clerks. These promotions, and the promotion during the earlier part of the year of Messrs. H. W. Howe, W. L. Burrow, and C. A. How to be 2nd class clerks, are the only changes of importance which have taken place in the Head Office staff, the numerical strength of which remains as at the end of 1905.

**Miss Hoatson's appointment.** The proposed termination of the appointment of Miss Hoatson (for more than 30 years Head Schoolmistress at the Darenth Asylum) in consequence of the decision of the Managers to place the schools in charge of one officer who should be both matron and head schoolmistress, was the subject of a report which we submitted to the Board on the 17th February last, and in which we advised that, having regard to the nature of Miss Hoatson's duties the length of her service, and the fact that her retirement from the service would be compulsory, a pension of £160 per annum should be awarded to her in pursuance of Sections 28 & 59 of 30 Vic., cap. 6, and Section 41 of 39 & 40 Vic., cap. 61.

The Local Government Board, however, in a letter dated 11th May, intimated, with regret, that they were unable to give effect to the contemplated arrangement as they were advised that the enactments referred to did not apply so as to enable them to award compensation in the manner suggested.

Miss Hoatson's subsequent resignation on account of ill-health, under the Poor Law Officers' Superannuation Act, 1896, enabled the Managers to award her the retiring pension which we had previously recommended.

(Signed) JAMES BROWN,  
*Chairman.*

## ANNUAL REPORT OF THE FINANCE COMMITTEE FOR 1906.

*January, 1907.*

**Generally.** The policy of the Finance Committee of strengthening the control of the Managers over their finances has been steadily pursued during the past year, and one of the chief features of the year has been the issue by the Local Government Board of an Order improving the method of payment of accounts, which we first refer to.

**L. G. B. Orders.** Last year we reported that a draft of an Order had been received from the Local Government Board in response to suggestions first put forward in July, 1900, to amend and improve the system of payment of accounts. We pointed out that the provisions of this draft Order differed fundamentally from the original proposals, in that it would, *inter alia*, revive the office of a personal Treasurer, suspended in 1872; and we indicated the lines upon which the Managers could accept the Order, and in it give effect to their own wishes.

An amended draft Order, which practically incorporated our suggestions, was forwarded in March of this year, and the formal Order was issued by the Local Government Board on the 19th April last.

In accordance with the provisions of the Order and the scheme approved by the Managers, the Accountant was appointed also Treasurer, was directed to keep his account at the Head Office of the London and County Banking Company, Limited, on the existing terms and conditions, and was required to provide a guarantee in the sum of £10,000.

The new system has now been in operation for some eight months, and the experience thus gained has confirmed our anticipations that it would be a great advance in security and efficiency on the previous one; whilst we have no doubt that the Managers appreciate the relief afforded by their release from the obligation to affix signatures to every cheque drawn.

(ii.) Statutory Financial Statement. A draft of an Order to amend the form of Statutory Financial Statement was forwarded by the Local Government Board for the observations of the Managers, who, upon our recommendation, informed the Board that they had no observations to offer thereon.

**Sanctions to borrow not fully exercised.** The Local Government Board having proposed to rescind so much of their Orders sanctioning the raising of loans which had not been fully exercised, and which were not likely to be required, we informed them that we were entirely in accord with their suggestion ; but as the Orders which they proposed to cancel only dated back to 1893, we suggested that the rescinding Order should be extended to include *all* such unexercised sanctions as from the inception of the Metropolitan Asylums Board. On the issue of such an Order only sanctions to borrow in respect of current works or purposes will remain in force.

**Expenditure.** To a communication received from one of the Metropolitan Boards of Guardians protesting against the "large and increasing expenditure of the Managers," and asking if there were "any means of reducing it in the future," we, in reply, reminded the Guardians that in recent years the responsibilities and duties of the Managers had been considerably extended and added to, and informed them that we were satisfied that the expenditure, the whole of which came under our immediate purview, was laid out in the best interests of the inmates of the Managers' institutions and of the Metropolis. We also reminded the Guardians of the fact that a very large share of the total expenditure was in connection with the infectious services, and that the absence of reliable data as to the incidence of infectious disease made it impossible for the Managers materially to reduce their preparations for dealing with any reasonable number of patients at short notice ; and that we were satisfied that the Managers would lay themselves open to severe criticism if they were found wanting in the discharge of their obvious duty of maintaining suitable and proper accommodation and transport facilities for the reception and treatment of infectious cases. We concluded by stating that, as in the past, every endeavour would be made in discharging the onerous duties entrusted to the Managers to keep the expenditure at the lowest possible amount compatible with efficiency, but that, in view of all the circumstances, there did not appear to be any hope of any considerable reduction in the expenditure in the near future.

**Recovery of cost of maintenance of patients.** During the year we reported to the Managers unfavourably upon a proposal which was put forward by one of the Metropolitan Boards of Guardians that the Managers should take such steps as might be necessary to enable them to recover the cost of maintenance of patients where possible. We pointed out that in our opinion it would not be in the interests of the Metropolis if the suggestion were adopted, and drew attention to the fact that prior to the passing of the Public Health (London) Act, 1891, the Metropolitan Boards of Guardians had power to recover the cost of maintenance in regard to all non-pauper cases received at the Managers' hospitals, and that in practice it was found impossible to so recover ; and, further, that since an infectious patient is isolated not merely for his own benefit but for that of the community, it would appear to be a retrograde step to reintroduce any measure which might tend to discourage the use of the Managers' hospitals. We also expressed the opinion

that in any case it would be preferable to await the findings of the Royal Commission on Poor Law which was then sitting.

**Half-yearly estimates of expenditure.** In framing the half-yearly estimates of expenditure on current account for the half-year ending Michaelmas, 1906, we again gave effect to the settled policy of maintaining a standard balance of about £100,000 (which includes the value of unissued stocks), and the Managers, with the full facts before them, reaffirmed the principle. We emphasised the necessity for this balance in our report to the Managers, which report, being of permanent interest, we reproduce in the appendix.

**Estimates of cost of works.** Thirteen estimates of cost of works have been submitted by the several standing committees (through the Finance Committee) to the Managers during the past year, totalling £52,912. The question of raising the necessary funds has been considered by us in each case, and our views have been submitted to and approved by the Managers.

In several cases of expenditure in excess of the amount sanctioned we have investigated the reasons therefor, and reported thereon to the Managers, and, where necessary, to the Local Government Board.

**Superannuation.** Under the provisions of the Superannuation Acts, 17 persons have been granted superannuation allowances during the year ended Michaelmas, 1906 (amounting to £853 per annum); whilst three persons in receipt of pensions amounting to £99 per annum have died during the year; leaving the number in receipt of pensions (amounting to £7,539 per annum) at Michaelmas, 1906, at 157.

(i.) **Statistics.** Three recommendations for the addition of years to the actual period of service of officers have been remitted to and considered by us during the year. In two cases the circumstances were such as, in our opinion, warranted us in endorsing the recommendations, and these were subsequently approved by the Managers and by the Local Government Board. In the other case, however, we were unable to concur in the proposal.

(ii.) **Addition of years.** Five applications for gratuities for loss of office have been submitted to us during the year. In two of the cases the applicants did not, in our opinion, establish their claim; whilst in the other three cases we concurred in the proposals. The gratuities, which were approved by the Local Government Board, amounted to £205.

(iii.) **Gratuities in respect of loss of office.** As in previous years, several persons on leaving the service of the Managers have made application for the return of their contributions, and when necessary, such applications have been submitted to and dealt with by us. In two cases the relatives of deceased officers applied for the return of the contributions, but as we were advised that the Managers had no legal authority to refund the money to the relatives, their requests could not be acceded to.

(iv.) **Return of contributions.** As mentioned in our last year's report, we felt it incumbent upon us, in view of the Local Government Board's awards on the appeals of certain officers against the valuation placed upon their emoluments by the Managers, to review the whole of the values attached for superannuation purposes to the emoluments of the Managers' employees.

(v.) **Valuation of emoluments.**

We found the problem an intricate and difficult one, complicated as it was by the numerous classes and grades of employees and by the diversity of the emoluments attaching to the several offices, coupled with the varying degrees in which such emoluments were enjoyed at different institutions.

In April we submitted a comprehensive scheme (which was adopted by the Managers and substituted for that previously in force) based upon the broad principles of (a) the classification of the officers into a few groups, and (b) the valuation of every emolument or variation of an emolument, with particular reference to the group.

Whilst there are, and must in any scheme be, a few extreme cases which it is a little difficult to reconcile, we are satisfied that the general idea as carried out in the scheme adopted will work out more justly than any other method of solving the problem. The scheme, undoubtedly, has the merit of being elastic in application (which, in our opinion, is essential to meet the varying conditions) and is simple in working.

For full details of the scheme and the series of resolutions which brought it into operation, reference should be made to the Board Minutes, Vol. 40, p. 115.

(vi.) "Contracting-out" under the amending Act of 1897. Our attention was drawn by certain officers concerned to a reported decision of the Local Government Board that officers "contracting-out" as nurses or attendants on the sick or insane within the meaning of the Act of 1897 would, on subsequent appointment to other positions, come within the provisions of the Act of 1896. The Local Government Board, whose views it became necessary to ascertain, stated in effect that as at present advised they would decide that "contracting-out" under the Act of 1897 becomes inoperative on the appointment of the officer to a position other than that of nurse or attendant on the sick or insane, and in these circumstances the provisions of the 1896 Act have been applied to certain of the matrons, assistant matrons, and housekeepers whose service under the Managers fell within the expression of opinion of the Local Government Board.

**Assessments.**

(i.) New and altered.

The South-Eastern Hospital and Ambulance Station (rateable value £6,600); and Leavesden Asylum Cottages (£231) and Sewerage Farm (£200) have been brought into rating during the year, whilst the rateable value of Millfield has been increased by £40, consequent upon the alterations effected. It was only found necessary to lodge an objection against the assessment of the Leavesden Asylum Sewerage Farm, and the rateable value was, after the hearing, reduced by £50 (25 per cent.) to £150.

(ii.) Temporary reductions.

The temporary reduction of the assessment of the Joyce Green Hospital by one-half (from £11,790 to £5,895 rateable value) during the execution of works of painting, &c., by way of completion of the hospital, was continued by the Assessment Committee for a further half-year to Lady Day, 1906 (one complete year in all), only upon strong representation being made to them; and the nominal assessments of the South-Eastern Hospital and Ambulance Station (£200) ceased as on the 29th September, by reason of re-occupation of the reconstructed premises. The reduced assessment of the West Wharf and Mead Ambulance Station has been continued.

These temporary reductions have again resulted in the substantial relief in rates of £2,983 during the year to Michaelmas, 1906.



(iii.) Sewers Rate, Dartford. The appeal to Quarter Sessions against the assessment of the Joyce Green Hospital for purposes of the Sewers Rate by the Commissioners of Sewers was decided against the Board, and the assessment of the Board's property within the jurisdiction of the Commissioners, for this purpose, stands at £14,604 10s.

**Subordinate staff wages scales: Consolidation of regulations.** A step in the direction of uniformity of administration was effected by the consolidating regulations governing the subordinate staff wages scales for all the Managers' services, which came into force at Lady Day last. Alterations in matters of principle, apart from the necessary reconciling of details, were few; and, wherever possible, the special features relating to each class of institution were retained.

**Checking of books of account, &c.** After an experimental period extending over the past year we have authorised the examination of the books of account of accounting officers (with the exception, for the present, of the Receipt and Payment Books) being conducted by the Accountant monthly, in lieu of fortnightly as heretofore, subject to occasional additional examinations being conducted at interim periods at short notice. The result of this change, whilst not impairing the efficiency of the checking, will be to effect a substantial reduction in the expenditure on conveying books to and from the Head Office. At the same time, such an examination will shorten the period during which the books are withdrawn from the custody of the accounting officers.

Several other cognate matters have had our attention during the year, including the amalgamation of the books of account of the Steward of the Fountain and Grove Hospitals; the placing of the records of repairs to buildings and furniture at the ambulance stations upon a correct basis; and the prescribing of regulations in connection with the collection of amounts due to the Board.

**Miscellaneous.** The insurance of the ambulance steamers, wharves, "Exmouth," and brigantine, with their contents and boats, was considered by us, and an offer from one of the leading insurance companies—the lowest received from several firms of the highest standing invited to quote—was accepted, with the result that a saving of £331 (30 per cent.) in the premium payable, as compared with the premium paid in the previous year, was effected.

(ii.) Travelling Clerk's reports. The routine visits of inspection and inquiry of this officer have been continued during the past year. His reports have been submitted to us periodically for consideration, and action has been taken thereon when necessary.

**Abstract of accounts and financial tables.** Statement of the year's income and expenditure, balance-sheet, and financial and statistical tables are appended hereto.

(Signed) JACKSON HUNT,  
Chairman.

## APPENDIX I.

## EXTRACT FROM THE REPORT OF FINANCE COMMITTEE TO THE BOARD (30TH JANUARY, 1906), IN SUBMITTING ESTIMATES FOR HALF-YEAR ENDING MICHAELMAS, 1906.

. . . . The amount to be expended, and the amount to be raised, must necessarily have close relation, and it is interesting to note that during the five years ended Michaelmas, 1905, the adjustment of expenditure and income has been very close, the net amount expended being £4,946,522 as compared with £4,941,845 raised from the parishes and unions, an amount expended in excess of amount raised of only £4,677 (averaging £935 per annum), or less than 2s. per £100. This quinquennial period opened with a working balance of £114,177, which was considerably drawn upon during the smallpox epidemic year of 1901-2 (thereby avoiding the necessity of the parishes and unions being called upon for supplementary contributions), but as reported in February, 1904, owing to the seasonal rise in fever not having taken place in the summer of 1903, and to the consequential saving effected by the Managers seizing the opportunity to close several hospitals, the balances accumulated, and when submitting the estimates on the last few occasions we have recommended the Board to call on the parishes and unions for sums considerably below the amounts required, drawing on the balances for the differences. The extent to which this has been effected will be seen from the following figures :—

<i>Half-year ended.</i>	<i>Actual net expenditure.</i>	<i>Precepts levied.</i>
	£	£
Michaelmas, 1904 ... ..	495,752	462,524
Lady Day, 1905 ... ..	487,768	447,158
Michaelmas, 1905 ... ..	524,335	491,149
	<u>£1,507,855</u>	<u>£1,400,831</u>
Amount drawn from balances	<u>£107,024</u>	

In consequence of the part utilisation of the balances the working balance as at Michaelmas last, as anticipated, again became normal, amounting to £109,500, as against the estimate made in the previous June of £110,000.

The estimates for the half-year ending Lady Day, 1906, were framed with the view of maintaining the working balance at about £100,000, but on the estimates being considered by the Managers the amount to be raised from the parishes and unions in such half-year was reduced by the sum of £40,000, thereby virtually reducing the working balance to about £60,000.

The effect of the reduction will not be fully seen until after the end of the current half-year, but we have felt it necessary to again carefully consider the question of the amount of the working balance which the Managers should, in our opinion, retain.

We think it will be useful to summarise here the purport of the reply submitted to the Board at their meeting on the 15th April last, which at our direction was sent to a communication received from the Hackney Guardians in which they drew

attention to the large working cash balance and inquired whether the same could not be reduced to £50,000. We stated that :—

- (i) Whilst for many years past it had been the practice to retain, as nearly as could be foreseen, the working balance at about £100,000, such balance was not a *cash* balance, as it included the value of unissued stocks on hand at the Central Stores and at the various institutions ;
- (ii) The actual cash balance in the bank fluctuated from time to time, more particularly in accordance with the payments in on account of the precepts, which were so arranged that the liabilities falling due for payment could be met promptly ;
- (iii) This sum, (£100,000), represented only about five weeks' expenditure, and helped to bridge over the period between the close of one half-year and the receipts from the precepts for the ensuing half-year, the necessary payments during this period being temporarily met out of the balances ;
- (iv) A factor which should not, in our opinion, be lost sight of, was that in some cases the Guardians did not pay their precepts promptly ;
- (v) In framing the estimates at the end of each subsequent half-year, the principle of retaining about £100,000 had been given effect to ;
- (vi) In view of all the circumstances and of the liability of the district to epidemics, such as the smallpox epidemic of 1901-2, we felt that in the interests of the Metropolis it would not be advisable to reduce the working balance below £100,000 ;
- (vii) The Managers would not retain in their hands more than was absolutely necessary to carry on the work of the Board with efficiency.

Considerable misunderstanding appears to exist in regard to this working balance, which, as stated above, is not a *cash* balance, and the following explanatory statement (also printed on the back of the estimates) showing the composition of the balance, £109,500, as at Michaelmas, 1905—the date on which the accounts were last made up—will, we think, help to clear away this misconception.

EXPLANATORY STATEMENT *re* BALANCE ON GENERAL ACCOUNT AS ON  
30TH SEPTEMBER, 1905, £109,500.

	£
Balance in favour of Parishes and Unions ... ..	109,500
Value of unissued goods at Central Stores and at the various institutions, including unissued railway tickets and postage stamps ... ..	102,940
<hr/>	
Available cash balance, after allowing for payment of all sums due to or by the Board on General Account as at Michaelmas, 1905 ... ..	6,560
	<hr/>

Made up as follows :—		£
Cash in bank as per pass book, less unrepresented cheques... ..		76,466
Cash in hands of accounting officers ... ..		5,126
Cash in hands of brokers on account of purchase of tea ... ..		1,200
Amounts due from extra metropolitan authorities for maintenance and treatment of patients and other sundry debtors ... ..		6,226
Expenditure of a capital nature, payable out of loan moneys, but temporarily paid out of General Account ... ..		4,179
		<hr/>
		93,197
<i>Less</i> Tradesmen's accounts and other amounts	£	
due ... ..	82,201	
Legacy and interest, unapplied balances...	105	
Medical students' fees, unapplied balance	4,331	
	<hr/>	86,637
		<hr/>
		£6,560
		<hr/>

It will be noted that even with a balance of £109,500 there was only £6,560 in *cash* available after discharging all current liabilities, practically the whole amount being represented by the stock on hand. We have used every endeavour to reduce stocks to a minimum consistent with the requirements of the several services, and submitted an important report and recommendations to the Board nearly two years ago with this end in view, the working of which, in co-operation with the Standing Committees, has resulted in a very considerable reduction to the present figure. Every institution opened, and there have been many in the last few years, means a permanent addition to the total value of stock to be carried.

We would further add that if, as is the case, it has in the past been considered desirable to maintain a working balance of about £100,000, the expansion of the work and the extension of the responsibilities of the Board in the last decade render the recognition of the principle much more imperative now, particularly in view of the fact that a large portion of the Board's expenditure is in connection with infectious disease, the incidence of which it is impossible to estimate in advance.

We need hardly remind the Managers of the impossibility of carrying on any business of the magnitude of that of the Board's work without sufficient working capital, and we should be failing in our duty if we omitted to point out the difficult position the Managers might be placed in if owing to shortness of cash they were unable to meet their liabilities promptly, or, in the alternative, arranged for a bank overdraft, which the District Auditor might take exception to as an unauthorised borrowing, apart from any action that the Local Government Board might deem it necessary to take.

In view of the absolute necessity of having liquid resources available, and in view of all the other facts, we are unable to undertake the responsibility of advising the Board to reduce the working balance below the figure at which it has been approximately maintained for many years past of £100,000. We have settled the estimates accordingly. . . . .

## APPENDIX II.—FINANCIAL STATISTICS OF THE DISTRICT.

**NOTE.**—Unless otherwise stated the following statistics relate to the financial year ended Michaelmas, 1906.

The Metropolitan Asylum District is coterminous with that of the Metropolitan Unions and Parishes, *i.e.*, the Metropolis, excluding the Inns of Court (Inner and Middle Temples, Gray's Inn, and Lincoln's Inn), which during the continuance of certain payments are extra parochial.

The enumerated population of the District, according to the Census of 1901, is 4,536,541.

The rateable value of the District was £43,395,049 on the 6th April, 1906, being an increase of £1,828,278 (4·4 per cent.) during the year.

The produce of one penny in the £ on the rateable value of the District at Michaelmas, 1906, represents £180,736.

The precepts levied by the Managers on the constituent parishes and unions of the District for the year work out at 6½d. in the £, and the average for the past five years was 6½d. in the £.

The total expenditure for the year has been £1,167,605 (Loan £112,305 and General £1,055,300), and the average for the past five years £1,403,384 (Loan £357,295 and General £1,046,089).

The estimated expenditure on current account for the year was £1,087,736, and the actual amount expended £1,055,300, as against the year's income of £1,084,514.

The rateable value of the Board's property is £153,226, and the amount of the rates paid last year was £48,744, of which £24,905 is payable to Metropolitan authorities, and £23,839 to Provincial authorities.

The borrowing powers are limited to ½th of the rateable value of the District.

The sanctions to borrow received in the year amounted to £15,630.

The amount borrowed during the year was £64,320. The amount repaid was £206,544, and the amount outstanding at Michaelmas, 1906, was £3,415,998.

The total amount borrowed to Michaelmas, 1906, is £5,606,799, and the total amount of loans repaid, £2,190,801.

The amount of loans at Michaelmas, 1906, works out at £7·87 for every £100 of rateable value.

The amount of loans at Michaelmas, 1906, per head of the Census population is £0·75.

The rates of interest payable on loans vary from 2½ per cent. to 4 per cent., and the average rate of interest at Michaelmas, 1906, is £3½ per cent., as against an average rate of 3¼ per cent. for the two previous years. The rate of interest on loans taken up during the year was £3½ per cent., an increase of nearly ½ per cent. over the rate prevailing at the end of the previous year.

The number of institutions belonging to the Board is 51, including 1 in course of erection.

The number of persons maintained by the Managers, on the last day of the year ended Michaelmas, 1906, was—

Permanent staff (excluding Head Office and Stores)	5,117
Inmates ... ..	12,948
Total ... ..	18,065

The average daily number of inmates maintained was in—

1902 ... ..	11,709
1903 ... ..	10,749
1904 ... ..	11,004
1905 ... ..	12,074
1906 ... ..	12,627

The number of persons in receipt of superannuation allowances at the end of the year was 157, and the superannuation payments amounted to £7,098.

The percentage deductions from the pay of the staff under the Poor Law Officers' Superannuation Act, 1896, during the year amounted to £5,236, exclusive of £1,246 special repayment consequent on increased valuation of emoluments.

Dr.

Year 1904-1905.	Expenditure.		£	£
£	<b>To Direct Charges:—</b>			
	<b>Maintenance</b> of boys, patients, and children (including provisions, necessaries and clothing supplied to and funerals of inmates) ... ..		123,237	
122,526				
	<b>Other direct charges</b> (including clothing for discharged patients, expenses of boys going to sea and of children to and from Homes, and certification of imbeciles) ... ..		1,287	
1,360				
<b>123,886</b>				<b>124,524</b>
	<b>Common Charges:—</b>			
	<b>Maintenance of officers and servants—</b>	£		
57,276	Salaries of principal officers ... ..	59,111		
132,076	Salaries and wages of subordinate officers... ..	141,431		
87,398	Provisions ... ..	93,139		
2,471	Necessaries ... ..	2,357		
8,830	Uniforms and sundries ... ..	8,246		
<b>288,051</b>			<b>304,284</b>	
	<b>Buildings and establishment—</b>			
9,023	Contract works and materials ... ..	10,940		
27,624	Wages ... ..	28,739		
	<b>Furniture, &amp;c.—</b>			
10,315	Furniture, &c. ... ..	11,166		
9,344	Bedding, linen, &c. ... ..	9,194		
2,434	Earthenware ... ..	2,349		
1,817	Hardware ... ..	1,642		
87,698	Heating, lighting, and cleansing ... ..	90,442		
<b>148,255</b>			<b>154,472</b>	
<b>50,472</b>	<b>Rates, insurance, &amp;c.</b> ... ..		53,117	
	<b>Miscellaneous expenses—</b>			
7,518	Medicines and medical and surgical appliances ... ..	6,989		
9,781	Stationery, postage, and office expenses ... ..	10,045		
8,530	Other charges—travelling, horse hire, and Managers' expenses, &c. ... ..	10,100		
<b>25,829</b>			<b>27,134</b>	
	<b>Expenditure of a special character—</b>			
68,103	Buildings ... ..	50,211		
7,348	Furniture, &c. ... ..	8,135		
<b>75,451</b>			<b>58,346</b>	
<b>324,753</b>	<b>Sundry general expenses</b> (repayment of and interest on loans, legal expenses, pensions, notification fees, &c.) ... ..		333,423	
				<b>930,770</b>
<b>1,036,697</b>	<b>Total expenditure</b> (for details see pp. 108-115) ... ..			<b>1,055,300</b>
...	<b>Balance</b> carried down, being income in excess of expenditure for year ... ..			<b>29,214</b>
<b>£1,036,697</b>				<b>£1,084,514</b>

To Balance on current account on 29th September, 1906, carried to balance sheet (p. 116) ... £138,714

**£138,714**

**Expenditure Account**

1905, to 29th September, 1906.

Cr.

<b>Income.</b>		Year 1904-1905.
By Contributions from Parishes and Unions in the Metropolitan Asylum District :—	£	£
In respect of Direct Charges ... ..	127,700	126,900
„ Common Charges (assessed according to rateable value) ... ..	934,221	811,407
	<b>1,061,921</b>	<b>938,307</b>
<b>Amounts paid by Local Authorities outside the Metropolitan Asylum District :—</b>		
For maintenance of patients in hospitals, &c. ... ..	4,300	6,409
„ boys on Exmouth ... ..	2,267	4,471
	<b>6,567</b>	<b>10,880</b>
<b>Interest allowed on balances in hands of bankers, &amp;c. ... ..</b>	<b>4,776</b>	<b>3,754</b>
<b>Sundry receipts:—</b>		
Rents of buildings and land ... ..	671	136
Sale of ambulance vehicles and sundry receipts ... ..	614	392
Sale of p.s. " Conservator " ... ..	—	83
Value of furniture, &c., stocks brought into account during year	2,665	4,490
Superannuation contributions (including contributions £1246 on increased valuation of emoluments) ... ..	6,477	4,858
Sale of engineering plant, scrap metal, &c. ... ..	823	...
	<b>11,250</b>	<b>9,959</b>
<b>Balance carried down, being expenditure in excess of income for year ... ..</b>	<b>...</b>	<b>73,797</b>

HEADS OF EXPENDITURE.					
1904-1905.			1905-1906		
Amount.	Rate in the £.		Amount.	Rate in the £.	
£	d.		£	d.	
209,375	1·21	Imbeciles ... ..	200,604	1·11	
397,893	1·89	Infectious sick—			
30,296	0·17	Fever ... ..	351,408	1·94	
		Smallpox ... ..	26,712	0·15	
		Ambulance service—			
24,234	0·14	Land ... ..	27,679	0·16	
9,271	0·05	River (including wharves) ... ..	7,224	0·04	
18,246	0·11	Boys on training ship ... ..	17,765	0·10	
63,065	0·36	Children of various classes ... ..	61,799	0·34	
		General expenses (including repayment of and interest on loans, printing, &c., and Head Office salaries and expenses) ... ..	362,109	2·00	
<b>354,317</b>	2·05		<b>£1,055,300</b>	<b>5·84</b>	
<b>£1,036,697</b>	<b>5·98</b>		<b>£1,084,514</b>	<b>£1,036,697</b>	

(For details, see pp. 108-115.)

By Balance brought down, being income in excess of expenditure for year ... ..	£29,214
„ Balance on current account on 30th September, 1905, brought forward ... ..	109,500
	<b>£138,714</b>

## APPENDIX IV.—Details of Revenue Expenditure for the Year

(Figures for the year 1904—1905 are inserted in

INSTITUTIONS.	DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the								
	MAINTENANCE OF INMATES	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.					BUILDINGS AND FURNITURE.			
				Salaries of Principal Officers.	Salaries and Wages of Subordinate Officers.	Provisions.	Necessaries.	Uniforms and Sundries.	Contract Works and Materials.	Wages.	Furniture, &c.	Bedding, Linen, &c.
<b>Hospitals :—</b>	£	£	£	£	£	£	£	£	£	£	£	£
Eastern ... ..	2,913	...	2,913	2,300	5,322	3,792	166	390	436	1,095	570	376
	2,858	...	2,858	2,280	5,431	3,925	274	409	669	1,034	536	390
North-Eastern ... ..	4,261	3	4,264	2,327	7,285	6,002	137	511	132	1,155	489	713
	4,375	4	4,379	2,427	7,110	5,652	138	610	93	1,364	504	630
North-Western ... ..	2,968	...	2,968	2,199	6,051	4,544	87	472	460	1,154	414	385
	3,199	1	3,200	2,302	5,857	4,785	73	526	260	964	489	357
Western ... ..	3,593	...	3,593	2,341	6,421	5,555	111	428	394	1,357	568	255
	3,479	...	3,479	2,234	6,105	5,065	106	459	518	1,382	560	365
South-Western ... ..	2,792	3	2,795	2,237	4,703	3,949	72	331	472	1,320	284	373
	3,070	...	3,070	2,230	4,703	3,727	80	405	306	1,299	287	487
Fountain ... ..	2,073	...	2,073	1,843	4,176	3,227	94	273	198	778	360	326
	2,629	...	2,629	1,649	4,050	3,135	81	372	205	804	336	193
Grove ... ..	3,662	...	3,662	2,135	7,301	5,361	149	393	495	1,573	397	408
	3,734	...	3,734	2,005	7,093	5,172	138	506	251	1,483	384	626
South-Eastern ... ..	688	...	688	821	1,467	1,105	31	155	80	435	12	...
	...	...	...	297	204	75	9	15	2	170	73	...
Park ... ..	3,456	...	3,456	2,172	6,146	4,627	111	398	621	1,834	328	318
	4,369	...	4,369	2,252	6,403	4,640	87	479	538	1,836	293	288
Brook ... ..	4,222	...	4,222	2,410	7,185	6,112	131	483	493	1,796	526	674
	4,414	...	4,414	2,451	7,111	6,002	168	518	393	1,789	554	593
Northern ... ..	6,448	4	6,452	2,074	6,609	5,228	125	401	380	1,765	406	328
	6,594	...	6,594	2,042	6,322	4,930	112	432	581	1,718	425	290
Southern ... ..	...	...	...	...	...	...	...	...	3	21	...	...
	...	...	...	...	...	...	...	...	...	...	...	...
Gore Farm ... ..	6,587	2	6,589	1,632	6,725	4,765	88	268	402	1,121	437	106
	995	...	995	319	1,033	698	12	68	206	312	201	26
Smallpox ... ..	53	5	58	1,437	2,621	2,289	137	158	543	1,351	450	206
	211	3	214	1,630	2,942	2,651	118	250	109	1,395	611	258
<b>Totals carried forward</b>	<b>43,716</b>	<b>17</b>	<b>43,733</b>	<b>25,928</b>	<b>72,012</b>	<b>56,556</b>	<b>1,439</b>	<b>4,661</b>	<b>5,109</b>	<b>16,755</b>	<b>5,241</b>	<b>4,471</b>
<i>Totals for Year 1904-5 carried forward</i> ...	<i>39,927</i>	<i>8</i>	<i>39,935</i>	<i>24,118</i>	<i>64,364</i>	<i>50,458</i>	<i>1,396</i>	<i>5,049</i>	<i>4,131</i>	<i>15,550</i>	<i>5,253</i>	<i>4,563</i>

The Bacteriological Laboratories, Central Stores, and Central Needleroom expenditure is charged to the several establishments.



## from 1st October, 1905, to 29th September, 1906.

(Italics under the figures for the year 1905—1906.)

Several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.												
ESTABLISHMENT.			RATES, RENT, TAXES, AND INSUR- ANCE.	Drugs and Medical and Surgical Appli- ances.	MISCELLANEOUS.		EXPENDITURE OF A SPECIAL CHARACTER.		GENERAL EX- PENSES.	Total Common Charges.	TOTAL EXPEN- DITURE FOR YEAR 1905/1906	Total Expendi- ture for Year 1904-1905.
&c.	Heating, Lighting, and Cleansing (in- cluding Water).	Station- ery, Postage, and Office Ex- penses.			Travel- ling, Horse Hire, and Man- agers' Ex- penses, &c.	Build- ings.	Furni- ture, &c.					
Earth- ware.	Hard- ware.											
£	£	£	£	£	£	£	£	£	£	£	£	£
117	81	3,325	1,512	446	290	41	3,986	79	...	24,324	27,237	...
126	97	3,425	1,415	816	272	41	2,767	58	...	23,965	...	26,823
174	79	4,670	3,203	738	303	50	3,058	397	...	31,423	35,687	...
187	82	4,586	3,230	872	297	51	2,496	266	...	30,595	...	34,974
102	89	4,171	1,937	367	251	32	1,024	...	...	23,739	26,707	...
105	79	4,045	1,956	398	240	32	4,355	...	...	26,823	...	30,023
82	82	4,698	2,616	949	308	32	2,673	129	...	28,999	32,592	...
113	73	4,651	2,425	828	266	30	3,431	94	...	28,705	...	32,184
118	64	4,724	1,800	471	238	33	836	66	...	22,091	24,886	...
139	64	4,667	1,846	631	220	35	2,008	71	...	23,205	...	26,275
84	70	4,135	1,245	194	200	26	2,589	330	...	20,148	22,221	...
87	100	3,905	1,261	165	201	48	662	30	...	17,285	...	19,914
176	48	5,540	3,013	797	309	41	2,596	...	...	30,732	34,394	...
177	40	5,488	3,063	932	311	35	4,250	113	...	32,067	...	35,801
...	...	972	117	120	138	81	978	2,656	...	9,168	9,856	...
...	...	74	138	...	4	5	...	...	...	1,066	...	1,066
116	71	4,833	3,057	288	235	104	2,453	834	...	28,546	32,002	...
117	60	5,190	2,908	367	279	98	3,514	15	...	29,364	...	33,733
130	82	6,159	3,667	725	304	131	2,592	157	...	33,757	37,979	...
146	113	6,735	3,867	712	313	81	6,650	23	...	38,219	...	42,633
102	62	4,349	2,603	222	364	174	752	...	...	25,944	32,396	...
106	104	4,335	2,750	273	350	178	2,750	55	...	27,763	...	34,347
...	...	124	32	...	...	...	1,917	...	...	2,097	2,097	...
...	...	...	...	...	...	...	...	...	...	...	...	...
118	114	3,923	2,870	188	424	441	3,006	131	...	26,765	33,354	...
19	54	504	1,877	17	114	321	3,282	62	...	9,125	...	10,120
19	21	4,807	4,918	26	92	1,036	5,972	571	...	26,654	26,712	...
40	62	4,869	3,475	76	106	445	10,259	795	...	30,082	...	30,296
338	863	56,430	32,590	5,531	3,456	2,225	34,432	5,350	...	334,387	378,120	...
362	928	52,465	30,211	6,087	2,973	1,400	46,424	1,582	...	318,254	...	358,189

to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.

## APPENDIX IV.—Details of Revenue Expenditure for Year

(Figures for the year 1904—1905 are inserted in

INSTITUTIONS.	DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the								
	MAINTENANCE OF INMATES	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.					BUILDINGS AND			
				Salaries of Principal Officers.	Salaries and Wages of Subordinate Officers.	Provisions.	Necessaries.	Uniforms and Sundries.	Contract Works and Materials.	Wages.	Furniture, &c.	
	£	£	£	£	£	£	£	£	£	£	£	£
Amounts brought forward ...	43,716	17	43,733	25,928	72,012	56,556	1,439	4,661	5,109	16,755	5,241	4,472
Amounts brought forward	39,927	8	39,935	24,118	64,364	50,458	1,396	5,049	4,131	15,550	5,253	4,502
<b>Ambulance Service:—</b>												
Eastern Station ...	...	...	...	...	2,574	762	...	118	142	...	164	20
...	...	...	...	...	2,511	760	...	129	60	...	115	26
North-Western Station	...	...	...	...	1,783	630	...	82	76	...	119	16
...	...	...	...	...	1,849	612	...	76	22	...	128	5
Western Station ...	...	...	...	...	1,955	665	...	85	85	...	120	14
...	...	...	...	...	1,917	647	...	88	44	...	98	12
South-Western Station	...	...	...	...	2,145	713	...	158	52	...	153	24
...	...	...	...	...	2,078	591	...	110	29	...	118	16
South-Eastern Station	...	...	...	...	492	229	...	45	79	...	127	15
...	...	...	...	...	171	66	...	3	11	...	2	...
Brook Station ...	...	...	...	...	2,457	900	...	107	61	...	148	6
...	...	...	...	...	2,288	797	...	119	47	...	79	18
Mead Station ...	...	...	...	...	349	41	...	1	35	...	60	...
...	...	...	...	...	438	44	...	35	...	...	76	...
Tooting Bec Station ...	...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...	...	...	...	...
River Service ...	...	...	...	209	2,913	331	66	92	161	...	70	142
...	...	...	...	355	3,640	385	84	92	241	...	105	42
<b>Totals ...</b>	...	...	...	209	14,668	4,271	66	688	691	...	961	233
<b>Totals for Year 1904-5...</b>	...	...	...	355	14,892	3,902	84	652	454	...	721	112
<b>Asylums:—</b>												
Leavesden ...	16,403	48	16,451	2,118	9,847	4,961	69	400	632	2,174	1,009	1,412
...	17,045	81	17,126	2,139	8,716	4,719	87	605	500	1,960	890	1,643
Caterham ...	18,170	20	18,190	2,195	8,071	5,226	60	465	642	2,081	968	746
...	18,845	19	18,864	2,141	7,741	5,180	55	542	402	2,102	1,004	833
Darenth ...	14,724	50	14,774	2,526	10,865	6,303	123	512	1,506	2,507	717	1,056
...	15,365	44	15,409	2,413	10,860	6,708	130	501	745	2,661	604	1,073
Tooting Bec ...	6,975	86	7,061	1,879	7,784	5,535	102	500	440	1,750	407	398
...	6,976	101	7,077	1,769	7,405	5,603	141	464	615	1,851	375	174
Rochester House ...	...	...	...	18	...	4	1	...	...	...	...	...
...	786	16	802	416	580	310	56	27	8	115	12	13
Belmont ...	3,223	3	3,226	566	2,593	1,523	20	169	82	684	302	84
...	816	...	816	288	628	342	8	33	61	224	36	...
Gore Farm ...	...	...	...	...	...	...	...	...	...	...	...	...
...	1,455	2	1,457	664	1,499	1,011	34	113	139	329	46	23
<b>Totals ...</b>	59,495	207	59,702	9,302	39,160	23,552	375	2,106	3,302	9,196	3,403	3,688
<b>Totals for Year 1904-5...</b>	61,288	263	61,551	9,830	37,429	23,873	511	2,285	2,470	9,242	2,967	3,763
Amounts carried forward	103,211	224	103,435	35,439	125,840	84,379	1,880	7,455	9,102	25,951	9,605	8,396
Amounts carried forward	101,215	271	101,486	34,303	116,685	78,233	1,991	7,986	7,055	24,792	8,941	8,388

The Bacteriological Laboratories, Central Stores, and Central Needlework expenditure is charged to the several establishments.

from 1st October, 1905, to 29th September, 1906 (continued).

Italics under the figures for the year 1905—1906.)

Several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.

ESTABLISHMENT.			RATES, RENT, TAXES, AND INSURANCE.	Drugs and Medical and Surgical Appliances.	MISCELLANEOUS.		EXPENDITURE OF A SPECIAL CHARACTER.		GENERAL EXPENSES.	Total Common Charges.	TOTAL EXPENDITURE FOR YEAR 1905/1906	Total Expenditure for Year 1904-1905.
&c.	Heating, Lighting, and Cleansing (including Water).	Stationery, Postage, and Office Expenses.			Traveling, Horse Hire, and Managers' Expenses, &c.	Buildings.	Furniture, &c.					
Earth-ware.	Hard-ware.											
£	£	£	£	£	£	£	£	£	£	£	£	£
338	863	56,430	32,590	5,531	3,456	2,225	34,432	5,350	...	334,387	378,120	...
362	928	52,465	30,211	6,087	2,973	1,400	46,424	1,582	...	318,254	...	358,189
3	5	257	215	...	52	1,004	21	...	...	5,337	5,337	...
3	5	258	191	...	35	858	283	...	...	5,234	...	5,234
3	3	202	188	...	30	651	...	35	...	3,812	3,812	...
1	6	214	180	...	31	612	...	...	...	3,738	...	3,738
4	3	267	292	...	30	676	185	...	...	4,381	4,381	...
3	2	260	271	...	30	568	...	25	...	3,964	...	3,964
7	5	448	196	...	42	858	54	1,334	...	6,189	6,189	...
4	4	320	191	...	31	794	28	468	...	4,776	...	4,776
4	6	103	20	...	29	149	15	17	...	1,332	1,332	...
...	...	51	19	...	1	13	130	...	...	467	...	467
5	3	312	243	...	32	1,357	...	40	...	5,671	5,671	...
4	5	303	249	...	29	910	...	54	...	4,899	...	4,899
...	...	53	254	...	1	82	40	25	...	941	941	...
...	...	60	249	...	2	98	...	154	...	1,156	...	1,156
...	...	...	...	...	...	...	16	...	...	16	16	...
...	...	...	...	...	...	...	...	...	...	...	...	...
12	3	827	1,160	3	26	40	1,134	35	...	7,224	7,224	...
16	17	1,126	1,564	12	37	34	1,506	14	...	9,271	...	9,271
38	28	2,469	2,568	3	242	4,817	1,465	1,486	...	34,903	34,903	...
31	39	2,592	2,914	12	196	3,887	1,947	715	...	33,505	...	33,505
225	138	5,169	1,430	185	327	422	1,375	...	...	31,952	48,403	...
249	150	4,965	1,268	172	319	392	5,137	814	...	34,730	...	51,856
206	162	5,255	1,900	191	298	196	929	...	...	29,591	47,781	...
212	225	5,326	1,724	148	312	190	1,588	216	...	29,939	...	48,803
176	120	6,330	3,607	118	361	376	1,925	48	...	39,170	53,944	...
226	86	6,593	2,923	107	336	395	5,156	...	...	41,516	...	56,925
147	68	4,597	3,360	209	265	63	907	199	...	28,607	35,668	...
144	48	4,762	3,400	174	280	63	1,698	578	...	29,548	...	36,625
...	...	...	3	...	...	...	...	...	...	26	26	...
7	2	290	230	36	33	39	...	83	...	2,255	...	3,057
32	22	1,409	725	60	103	101	2,578	502	...	11,556	14,782	...
...	...	290	245	45	132	62	369	981	...	3,744	...	4,560
...	...	...	...	...	...	...	...	...	...	...	...	...
15	30	1,393	595	17	43	70	65	...	...	6,092	...	7,549
786	510	22,760	11,025	763	1,354	1,158	7,714	749	...	140,902	200,604	...
853	541	23,619	10,385	699	1,455	1,211	14,013	2,672	...	147,824	...	209,375
1,162	1,401	81,659	46,183	6,297	5,052	8,200	43,611	7,585	...	510,192	613,627	...
246	1,508	78,676	43,510	6,798	4,624	6,498	62,384	4,969	...	499,583	...	601,069

which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.

## APPENDIX IV.—Details of Revenue Expenditure for Year

(Figures for the year 1904—1905 are inserted in

INSTITUTIONS.	DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the								
	MAINTENANCE OF INMATES	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.					BUILDINGS AND			
				Salaries of Principal Officers.	Salaries and Wages of Subordinate Officers.	Provisions.	Necessaries.	Uniforms and Sundries.	Contract Works and Materials.	Wages.	Furniture, &c.	Furniture, &c.
£	£	£	£	£	£	£	£	£	£	£	£	£
Amounts brought forward ...	103,211	224	103,435	35,439	125,840	84,379	1,880	7,455	9,102	25,951	9,605	8,397
Amounts brought forward	101,215	271	101,486	34,303	116,685	78,233	1,991	7,986	7,055	24,792	8,941	8,386
<b>Children's Homes and Schools:—</b>												
High Wood ... ..	2,558	31	2,589	529	2,632	1,529	32	72	194	509	185	45
	2,616	34	2,650	427	2,297	1,407	28	116	246	413	93	79
White Oak ... ..	2,450	76	2,526	641	2,541	1,281	33	83	208	520	221	137
	2,488	49	2,537	744	2,573	1,361	32	64	276	684	161	63
Bridge ... ..	623	33	656	266	660	329	5	1	82	158	32	36
	1,189	42	1,231	373	1,225	698	17	39	39	172	57	53
The Downs ... ..	3,448	24	3,472	876	2,985	1,915	50	86	246	474	132	186
	3,581	21	3,602	622	2,838	1,890	42	114	234	413	186	183
S. Anne's ... ..	999	88	1,087	262	823	499	20	15	85	139	111	58
	1,198	100	1,298	250	777	548	25	31	150	139	96	103
East Cliff ... ..	1,007	143	1,150	204	738	625	20	34	57	122	80	58
	1,139	121	1,260	191	663	636	20	25	74	118	76	95
Millfield ... ..	1,145	51	1,196	216	556	568	13	34	83	162	91	38
	1,046	41	1,087	203	512	512	5	46	45	134	70	22
Lloyd Street ... ..	281	...	281	49	127	107	17	3	23	...	27	24
	268	...	268	35	125	113	21	...	49	7	11	16
Elm Grove ... ..	114	...	114	29	87	59	7	1	9	...	5	...
	113	...	113	32	91	69	6	...	13	...	10	...
Kingwood Road ... ..	226	...	226	29	127	78	17	2	7	...	3	...
	236	...	236	29	125	82	18	...	7	3	6	13
Earlsfield Road ... ..	103	...	103	27	51	40	6	1	3	...	3	...
	103	...	103	26	59	49	7	...	6	...	4	13
Surrey House ... ..	217	...	217	27	80	63	11	1	39	...	2	...
	252	...	252	25	62	47	9	...	14	...	11	13
Pentonville Road ... ..	213	24	237	...	230	142	17	15	42	...	30	13
	207	22	229	...	197	175	29	8	69	3	26	13
Harrow Road ... ..	89	4	93	...	174	86	10	12	29	...	9	...
	86	4	90	...	170	89	11	13	15	1	4	...
Camberwell Green ... ..	134	11	145	...	245	127	10	12	18	1	9	...
	132	5	137	...	239	133	15	12	30	...	13	...
Totals ... ..	13,607	485	14,092	3,155	12,056	7,448	268	372	1,125	2,085	940	600
Totals for year 1904-5...	14,654	439	15,093	2,957	11,945	7,791	276	468	1,267	2,987	824	677
Amounts carried forward	116,818	709	117,527	38,594	137,896	91,827	2,148	7,827	10,227	28,036	10,545	9,000
Amounts carried forward	115,899	710	116,609	37,260	128,630	86,024	2,267	8,454	8,322	26,879	9,765	9,069

The Bacteriological Laboratories, Central Stores, and Central Needlework expenditure is charged to the several establishments

from 1st October, 1905, to 29th September, 1906 (continued).

italics under the figures for the year 1905-1906.)

several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.												TOTAL EXPENDITURE FOR YEAR 1905/1906	Total Expenditure for Year 1904-1905
ESTABLISHMENT.			RATES, RENT, TAXES, AND INSURANCE.	Drugs and Medical and Surgical Appliances.	MISCELLANEOUS.		EXPENDITURE OF A SPECIAL CHARACTER.		GENERAL EXPENSES.	Total Common Charges.			
&c.	Heating, Lighting, and Cleansing (including Water).				Stationery, Postage, and Office Expenses.	Traveling, Horse Hire, and Managers' Expenses, &c.	Buildings.	Furniture, &c.					
Earth-ware.	Hard-ware.												
£	£	£	£	£	£	£	£	£	£	£	£	£	
2,162	1,401	81,659	46,183	6,297	5,052	8,200	43,611	7,585	...	510,192	613,627	...	
2,246	1,508	78,676	43,510	6,798	4,624	6,498	62,384	4,969	...	499,583	...	601,069	
32	20	1,390	979	92	115	181	923	118	...	9,575	12,164	...	
31	33	1,517	968	117	137	190	768	1,492	...	10,359	...	13,009	
43	21	1,434	1,302	157	68	114	1,304	...	...	10,108	12,634	...	
46	22	1,464	1,409	126	96	115	714	179	...	10,129	...	12,666	
2	6	371	121	14	44	124	96	105	...	2,452	3,108	...	
7	14	564	135	32	51	120	231	8	...	3,839	...	5,070	
40	35	1,428	1,142	188	94	87	184	120	...	10,262	13,734	...	
40	41	1,369	1,122	194	83	75	1,322	212	...	10,978	...	14,580	
11	18	451	184	53	65	89	135	12	...	3,027	4,114	...	
15	14	516	197	57	64	83	187	72	...	3,322	...	4,520	
11	17	364	202	106	43	85	90	10	...	2,863	4,013	...	
14	22	335	200	119	47	109	16	4	...	2,768	...	4,028	
17	17	386	70	13	67	140	2,816	77	...	5,364	6,560	...	
14	24	366	75	15	57	134	166	10	...	2,415	...	3,502	
3	3	102	78	14	8	33	77	...	...	695	976	...	
3	5	102	78	16	6	29	86	...	...	696	...	964	
...	...	41	34	2	3	9	...	...	...	291	405	...	
1	2	52	30	3	4	8	90	16	...	423	...	536	
...	3	69	29	4	7	12	...	...	...	395	621	...	
...	...	70	27	4	6	12	5	...	...	412	...	648	
1	...	32	13	2	6	7	...	...	...	193	296	...	
...	1	34	13	3	3	5	...	4	...	205	...	309	
2	1	58	21	5	5	13	40	...	...	370	587	...	
...	2	71	20	7	6	7	6	...	...	301	...	553	
2	2	119	287	2	11	13	98	...	...	1,025	1,262	...	
2	3	91	284	...	9	9	28	...	...	935	...	1,164	
1	1	61	64	...	13	4	8	...	...	478	571	...	
1	2	71	63	...	8	6	108	...	...	555	...	655	
1	1	86	72	...	9	5	9	...	...	609	754	...	
...	...	96	65	...	9	6	5	...	...	624	...	761	
166	145	6,392	4,598	652	558	916	5,780	442	...	47,707	61,799	...	
174	185	6,718	4,686	693	586	908	3,732	1,997	...	47,972	...	63,065	
328	1,546	88,051	50,781	6,949	5,610	9,116	49,391	8,027	...	557,899	675,426	...	
420	1,693	85,394	48,195	7,491	5,210	7,406	66,116	6,966	...	547,555	...	664,134	

to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.

## APPENDIX IV.—Details of Revenue Expenditure for the Year

(Figures for the year 1904—1905 are inserted in

INSTITUTIONS.	DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the								
	MAINTENANCE OF INMATES	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.					BUILDINGS AND			
				Salaries of Principal Officers.	Salaries and Wages of Subordinate Officers.	Provisions.	Necessaries.	Uniforms and Sundries.	Contract Works and Materials.	Wages.	Furniture, &c.	Bedding, Linen, &c.
£	£	£	£	£	£	£	£	£	£	£	£	£
Amounts brought forward ...	116,818	709	117,527	38,594	137,896	91,827	2,148	7,827	10,227	28,036	10,545	9,000
Amounts Brought forw'rd	115,869	710	116,579	37,260	128,630	86,024	2,267	8,454	8,322	26,879	9,765	9,062
Training Ship ...	6,419	578	6,997	1,781	1,914	1,312	209	250	535	703	445	191
Totals for Year 1904-5...	6,657	650	7,307	1,710	1,894	1,374	204	234	463	745	411	271
Premises at Peckham ...	...	...	...	...	...	...	...	...	17	...	...	...
Totals for Year 1904-5...	...	...	...	...	...	...	...	...	...	...	...	...
General Expenses:—												
Office of the Board ...	...	...	...	18,736	1,621	...	...	169	161	...	176	3
	...	...	...	18,306	1,552	...	...	142	238	...	139	11
Samples and Analysing	...	...	...	...	...	...	...	...	...	...	...	...
Telephones ... ..	...	...	...	...	...	...	...	...	...	...	...	...
Plague Accommodation, expenses, re ...	...	...	...	...	...	...	...	...	...	...	...	...
Milan Exhibition...	...	...	...	...	...	...	...	...	...	...	...	...
Loans—												
Instalments Repaid	...	...	...	...	...	...	...	...	...	...	...	...
Interest on ... ..	...	...	...	...	...	...	...	...	...	...	...	...
Legal Expenses ... ..	...	...	...	...	...	...	...	...	...	...	...	...
Superannuation allowances & compensation	...	...	...	...	...	...	...	...	...	...	...	...
Repayment of Notification fees ...	...	...	...	...	...	...	...	...	...	...	...	...
Totals ... ..	...	...	...	18,736	1,621	...	...	169	161	...	176	3
Totals for Year 1904-5...	...	...	...	18,306	1,552	...	...	142	238	...	139	11
Grand Totals for Year 1905/1906	123,237	1,287	124,524	59,111	141,431	93,139	2,357	8,246	10,940	28,739	11,166	9,194
Grand Totals for Year 1904-1905 ...	122,526	1,360	123,886	57,276	132,076	87,398	2,471	8,830	9,023	27,624	10,315	9,342

The Bacteriological Laboratories, Central Stores, and Central Needleroom expenditure is charged to the several establishments

FINANCE COMMITTEE, 1906.

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from 1st October, 1905, to 29th September, 1906 (continued).

Italics under the figures for the year 1905-1906.)

several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.

ESTABLISHMENT.			RATES, RENT, TAXES, AND INSUR- ANCE.	Drugs and Medical and Surgical Appli- ances.	MISCELLANEOUS.		EXPENDITURE OF A SPECIAL CHARACTER.		GENERAL EX- PENSES.	Total Common Charges.	TOTAL EXPENDI- TURE FOR YEAR 1905/1906	Total Expendi- ture for Year 1904-1905.
&c.	Heating, Lighting, and Cleansing (in- cluding Water).	Station- ery, Postage, and Office Ex- penses.			Travel- ing, Horse Hire, and Man- agers' Ex- penses, &c.	Build- ings.	Furni- ture, &c.					
Earth- enware.	Hard- ware.											
£	£	£	£	£	£	£	£	£	£	£	£	£
2,328	1,546	88,051	50,781	6,949	5,610	9,116	49,391	8,027	...	557,899	675,426	...
<i>2,420</i>	<i>1,693</i>	<i>85,394</i>	<i>48,196</i>	<i>7,491</i>	<i>5,210</i>	<i>7,406</i>	<i>66,116</i>	<i>6,966</i>	...	<i>547,555</i>	...	<i>664,134</i>
19	94	1,758	621	40	185	317	329	65	...	10,768	17,765	...
14	122	<i>1,684</i>	<i>635</i>	27	<i>157</i>	<i>524</i>	<i>241</i>	<i>229</i>	...	<i>10,939</i>	...	<i>18,246</i>
...	...	...	1	...	...	...	365	...	...	383	383	...
...	...	...	...	...	...	...	<i>814</i>	...	...	<i>814</i>	...	<i>814</i>
2	2	633	676	...	4,250	399	126	43	...	26,997	26,997	...
...	2	<i>620</i>	<i>663</i>	...	<i>4,414</i>	<i>486</i>	<i>817</i>	<i>108</i>	...	<i>27,498</i>	...	<i>27,498</i>
...	...	...	...	...	...	268	...	...	...	268	268	...
...	...	...	...	...	...	<i>114</i>	...	...	...	<i>114</i>	...	<i>114</i>
...	...	...	1,038	...	...	...	...	...	...	1,038	1,038	...
...	...	...	<i>978</i>	...	...	...	...	...	...	<i>978</i>	...	<i>978</i>
...	...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	<i>115</i>	<i>45</i>	...	<i>160</i>	...	<i>160</i>
...	...	...	...	...	...	...	...	...	102	102	102	...
...	...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...	206,544	206,544	206,544	...
...	...	...	...	...	...	...	...	...	<i>196,474</i>	<i>196,474</i>	...	<i>196,474</i>
...	...	...	...	...	...	...	...	...	114,910	114,910	114,910	...
...	...	...	...	...	...	...	...	...	<i>116,640</i>	<i>116,640</i>	...	<i>116,640</i>
...	...	...	...	...	...	...	...	...	762	762	762	...
...	...	...	...	...	...	...	...	...	<i>1,112</i>	<i>1,112</i>	...	<i>1,112</i>
...	...	...	...	...	...	...	...	...	7,303	7,303	7,303	...
...	...	...	...	...	...	...	...	...	<i>6,896</i>	<i>6,896</i>	...	<i>6,896</i>
...	...	...	...	...	...	...	...	...	3,802	3,802	3,802	...
...	...	...	...	...	...	...	...	...	<i>3,631</i>	<i>3,631</i>	...	<i>3,631</i>
2	2	633	1,714	...	4,250	667	126	43	333,423	361,726	361,726	...
...	2	<i>620</i>	<i>1,641</i>	...	<i>4,414</i>	<i>600</i>	<i>932</i>	<i>153</i>	<i>324,753</i>	<i>353,503</i>	...	<i>353,503</i>
2,349	1,642	90,442	53,117	6,989	10,045	10,100	50,211	8,135	333,423	930,776	1,055,300	...
<i>2,434</i>	<i>1,817</i>	<i>87,698</i>	<i>50,472</i>	<i>7,518</i>	<i>9,781</i>	<i>8,530</i>	<i>68,103</i>	<i>7,348</i>	<i>324,753</i>	<i>912,811</i>	...	<i>1,036,697</i>

to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.

**LIABILITIES.**  
**LOAN ACCOUNT.**

	Loans.	£	£
Loans outstanding Michaelmas, 1905 ... ..		3,558,222	
„ received during the year ... ..		64,320	
		3,622,542	
Less instalments of loans repaid during year ... ..		206,544	
<b>Loans outstanding Michaelmas, 1906 ... ..</b>			<b>3,415,998</b>
London County Council ... ..		£3,227,490	
Public Works Loan Commissioners .. ..		188,508	
		£3,415,998	
(For details, see statement, p. 139.)			
<b>Excess of Assets.</b>			
Instalments of loans repaid ... ..		2,190,801	
Expenditure in excess of amounts authorised to be borrowed paid out of current account, and sundry receipts ... ..		*167,213	
		2,358,014	
	Total on Loan Account ... ..		<b>£5,774,012</b>

**GENERAL ACCOUNT.**

	£																								
<b>Suspense Adjustment Account.</b>																									
Expenditure of a capital nature awaiting adjustment ... ..	214																								
Amounts in respect of ex-metropolitan authorities for maintenance and treatment of patients to be credited to Parishes and Unions when received ... ..	6,273																								
<b>Sundry Creditors.</b>																									
Tradesmen's accounts and other amounts owing ... ..	77,932																								
<b>Legacies.</b>																									
Captain Brown's legacy to the training ship (£119), less legal expenses ... ..	£115																								
William Thomas Ferguson's legacy to the Homerton Smallpox Hospital (£100), and accumulated income ... ..	£168																								
Add interest unapplied ... ..	1																								
	169																								
George Dryden's legacy to the Stockwell Smallpox Hospital (£100), less books purchased for Hospital Ships (£25) ... ..	75																								
Add interest unapplied ... ..	5																								
	80																								
George Cook's legacy to Darenth Asylum (£100), less legal expenses ... ..	73																								
Add interest unapplied ... ..	2																								
	75																								
Mrs. M. E. Bates' legacy to the Eastern Hospital (£100) less books purchased for Eastern Hospital (£6) ... ..	94																								
Add interest unapplied ... ..	1																								
	95																								
	534																								
<b>Students' Fees for Clinical Instruction.</b>																									
	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"></th> <th style="text-align: center;">Total at Michaelmas, 1905.</th> <th style="text-align: center;">Year to Michaelmas, 1906.</th> <th style="text-align: center;">Total at Michaelmas, 1906.</th> </tr> </thead> <tbody> <tr> <td>Amounts received from students ... ..</td> <td style="text-align: right;">£16,776</td> <td style="text-align: right;">£1,043</td> <td style="text-align: right;">£17,819</td> </tr> <tr> <td>Less amounts paid to medical superintendents for clinical instruction ... ..</td> <td style="text-align: right;">9,945</td> <td style="text-align: right;">476</td> <td style="text-align: right;">10,421</td> </tr> <tr> <td></td> <td style="text-align: right; border-top: 1px solid black;">£6,831</td> <td style="text-align: right; border-top: 1px solid black;">£567</td> <td style="text-align: right; border-top: 1px solid black;">7,398</td> </tr> <tr> <td>Less amount transferred in reduction of capital outlay as estimated cost of provision of buildings for instruction (Park Hospital, £1,750, and Grove Hospital, £750) ... ..</td> <td></td> <td></td> <td style="text-align: right;">2,500</td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: right; border-top: 1px solid black;">4,898</td> </tr> </tbody> </table>		Total at Michaelmas, 1905.	Year to Michaelmas, 1906.	Total at Michaelmas, 1906.	Amounts received from students ... ..	£16,776	£1,043	£17,819	Less amounts paid to medical superintendents for clinical instruction ... ..	9,945	476	10,421		£6,831	£567	7,398	Less amount transferred in reduction of capital outlay as estimated cost of provision of buildings for instruction (Park Hospital, £1,750, and Grove Hospital, £750) ... ..			2,500				4,898
	Total at Michaelmas, 1905.	Year to Michaelmas, 1906.	Total at Michaelmas, 1906.																						
Amounts received from students ... ..	£16,776	£1,043	£17,819																						
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	£6,831	£567	7,398																						
Less amount transferred in reduction of capital outlay as estimated cost of provision of buildings for instruction (Park Hospital, £1,750, and Grove Hospital, £750) ... ..			2,500																						
			4,898																						
<b>Balance on Current Account.</b>																									
Net balance in favour of Parishes and Unions in the District (including outstanding contributions) ... ..	136,714																								
	Total on General Account ... ..																								
	<b>£228,565</b>																								
	<b>Grand Total ... ..</b>																								
	<b>£6,002,577</b>																								

\* In addition to these figures, large amounts of expenditure of a capital nature amounting to



at 29th September, 1906.

**PROPERTY, ASSETS AND CAPITAL OUTLAY.  
LOAN ACCOUNT.**

Capital Outlay.	£	£
Land, buildings, fittings, and furniture (original cost) ... ..		=5,723,057
(For details, see statement, p. 118.)		

Cash (Loan Account).	£	£
London and County Banking Company, Limited—		
Balance in their hands ... ..	51,053	
Less unrepresented cheques ... ..	98	
	50,955	

Total on Loan Account ... .. £5,774,012

**GENERAL ACCOUNT.**

Stock.	£
Goods at central stores and at the various institutions, including unused railway tickets and postage stamps ...	89,827

Sundry Debtors.	£
Parishes and Unions in the District ... ..	£3,100
Extra-Metropolitan Authorities and other sundry debtors ...	6,484
	9,584

**Legacies (Investment Accounts).**

Brown's legacy—£104 14s., 3½ per cent. stock, London County Council (Metropolitan Board of Works) (at cost)...	£115	
Ferguson's legacy—£173 17s. 2d., consols (at cost) ... ..	168	
Dryden's legacy—£75 18s. 4d. consols (at cost) ... ..	75	
Cook's legacy—£75 18s. 4d. consols (at cost) ... ..	73	
Bates's legacy—£100, 3 per cent. stock, London County Council (at cost) ... ..	94	
	525	

**Cash (General Account).**

London and County Banking Company, Limited—		
Balance in their hands ... ..	£128,298	
Less unrepresented cheques... ..	5,701	
	122,597	
Accounting officers—balances in their hands ... ..	2,841	
Less sum due to an accounting officer ... ..	4	
	2,837	
Cheques drawn in advance for payments for Lady Day, 1907, half-year ... ..	3,195	
	128,629	

Total on General Account ... .. £228,565

Grand Total ... .. £6,002,577

not less than £400,000 have from time to time been defrayed out of the current rates.

MORRIS HEYES, A.C.A.,  
Accountant to the Board.

## APPENDIX VI.—Details of Expenditure in respect of Capital Outlay.

INSTITUTION.	Expenditure at 30th September, 1905.		Expenditure in year to 29th September, 1906.		Total Expenditure at 29th September, 1906.		
	Land.	Buildings, &c.	Land.	Buildings, &c.	Land.	Buildings, &c.	TOTAL.
<b>Asylums—</b>	£	£	£	£	£	£	£
Leavesden ... ..	16,506	208,083	2,943	2,337	19,449	210,420	229,869
Caterham ... ..	14,965	214,390	...	...	14,965	214,390	229,355
Darenth ... ..	16,148	339,087	...	...	16,148	339,087	355,235
Tooting Bec ... ..	27,682	271,544	...	166	27,682	271,710	299,392
Clapton ... ..	...	2,551	...	...	...	2,551	2,551
Belmont ... ..	...	122,737	...	6,886	...	129,623	129,623
<b>TOTALS FOR ASYLUMS</b> ... ..	<b>75,301</b>	<b>1,158,392</b>	<b>2,943</b>	<b>9,389</b>	<b>78,244</b>	<b>1,167,781</b>	<b>1,246,025</b>
<b>Hospitals—</b>							
Eastern ... ..	29,826	93,924	...	...	29,826	93,924	123,750
North Eastern ... ..	25,673	150,149	...	...	25,673	150,149	175,822
North Western ... ..	28,845	142,619	...	...	28,845	142,619	171,464
Western ... ..	29,488	199,911	...	...	29,488	199,911	229,399
South Western ... ..	16,781	151,236	...	...	16,781	151,236	168,017
Fountain ... ..	12,376	{ 143,232 }	...	...	12,376	{ 143,232 }	428,053
Grove ... ..	12,318	{ 272,445 }	...	...	12,318	{ 272,445 }	264,338
South Eastern ... ..	22,750	186,991	...	65,029	22,750	252,020	276,802
Park ... ..	16,610	254,043	...	...	16,610	254,043	321,838
Brook ... ..	13,747	305,228	...	...	13,747	305,228	197,890
Northern ... ..	15,853	184,143	...	...	15,853	184,143	239,755
Southern ... ..	19,699	189,063	...	94,239	19,699	223,902	203,094
Gore Farm (Upper) ... ..	...	183,395	...	...	...	183,395	176,900
Do. (Lower) ... ..	...	176,900	...	...	...	176,900	47,538
Smallpox—Hospital Ships ... ..	33,979	47,538	...	...	33,979	47,538	66,373
Do. Long Reach ... ..	...	66,373	...	...	...	66,373	115,542
Do. Orchard ... ..	...	115,542	...	...	...	115,542	357,106
Do. Joyce Green ... ..	31,657	352,205	...	4,901	31,657	357,106	388,763
<b>TOTALS FOR HOSPITALS</b> ... ..	<b>309,611</b>	<b>3,215,597</b>	...	<b>104,169</b>	<b>309,611</b>	<b>3,319,766</b>	<b>3,629,377</b>
<b>Land Ambulance Stations—</b>							
Eastern ... ..	...	2,675	...	...	...	2,675	2,675
North Western ... ..	5,100	15,442	...	...	5,100	15,442	20,542
Western ... ..	...	4,111	...	...	...	4,111	4,111
South Western ... ..	2,172	13,976	...	...	2,172	13,976	16,148
South Eastern ... ..	...	1,625	...	...	...	1,625	16,448
Brook ... ..	...	16,448	...	...	...	16,448	34,949
Mead ... ..	...	34,949	...	...	...	34,949	1,567
Tooting Bec ... ..	...	1,567	...	...	...	1,567	...
<b>TOTALS FOR LAND AMBULANCE SERVICE</b> ... ..	<b>7,272</b>	<b>90,793</b>	...	...	<b>7,272</b>	<b>90,793</b>	<b>98,065</b>
<b>River Ambulance Service—</b>							
South Wharf ... ..	13,119	34,447	...	...	13,119	34,447	47,566
North Wharf ... ..	3,558	7,404	...	...	3,558	7,404	10,962
West Wharf ... ..	5,652	8,906	...	...	5,652	8,906	14,558
Steamers ... ..	...	40,988	...	...	...	40,988	40,988
<b>TOTALS FOR RIVER AMBULANCE SERVICE</b> ... ..	<b>22,329</b>	<b>91,745</b>	...	...	<b>22,329</b>	<b>91,745</b>	<b>114,074</b>
<b>Training Ship "Exmouth"</b> ... ..	...	<b>91,654</b>	...	<b>1,303</b>	...	<b>92,357</b>	<b>92,357</b>
<b>Children's Homes and Schools—</b>							
High Wood ... ..	2,300	102,823	...	1,363	2,300	104,186	106,486
White Oak ... ..	5,300	127,204	...	...	5,300	127,204	132,504
Bridge ... ..	...	11,059	...	...	...	11,059	99,922
The Downs ... ..	...	99,922	...	...	...	99,922	16,037
St. Anne's ... ..	...	16,037	...	...	...	16,037	17,419
East Cliff ... ..	...	17,419	...	...	...	17,419	27,042
Millfield ... ..	850	26,192	...	...	850	26,192	650
Lloyd House ... ..	...	650	...	...	...	650	1,000
Elm Grove ... ..	...	1,000	...	...	...	1,000	1,480
Kingwood Road ... ..	...	1,480	...	...	...	1,480	690
Earlsfield Road ... ..	...	690	...	...	...	690	1,050
Surrey House ... ..	...	1,050	...	...	...	1,050	3,534
Pentonville Road ... ..	...	3,534	...	...	...	3,534	3,715
Harrow Road ... ..	...	3,715	...	...	...	3,715	5,196
Camberwell Green ... ..	...	5,196	...	...	...	5,196	...
<b>TOTALS FOR CHILDREN'S HOMES AND SCHOOLS</b> ... ..	<b>8,450</b>	<b>417,971</b>	...	<b>1,363</b>	<b>8,450</b>	<b>419,334</b>	<b>427,784</b>
<b>Central Stores</b> ... ..	<b>4,250</b>	<b>16</b>	...	...	<b>4,250</b>	<b>16</b>	<b>4,266</b>
<b>Office of the Board</b> ... ..	<b>53,700</b>	<b>57,409</b>	...	...	<b>53,700</b>	<b>57,409</b>	<b>111,109</b>
<b>GRAND TOTALS</b> ... ..	<b>£ 480,913</b>	<b>5,122,977</b>	<b>2,943</b>	<b>116,224</b>	<b>483,856</b>	<b>5,239,201</b>	<b>5,723,057</b>

NOTE.—The expenditure under "Land," includes in certain instances premises acquired with the site, but where the buildings are utilised for the purpose for which the capital outlay has been incurred, the expenditure on the purchase is inserted under the head of "Buildings, &c."

APPENDIX VII.—Statement showing the Expenditure out of Loans Account, the Loans raised, repaid, outstanding, increase or decrease, and the average rate per cent. for interest on Loans raised and Loans outstanding—each year from 1867 to 1906.

No. of Year.	Year ended Michaelmas.	EXPENDITURE OUT OF LOANS ACCOUNT								LOANS.				Rate per Cent. for Interest.	
		Asylums.	Hospitals.	Ambulance Service.	Training Ship "Exmouth."	Children's Homes and Schools.	Offices of the Board.	Central Stores.	Total.	Raised.	Repaid.	Outstanding at end of each year.	Increase each year. Decrease marked —	Average on Loans raised.	Average on Loans outstanding at end of each year.
1	1867	£	£	£	£	£	£	£	£	£	£	£	£	£	£
2	1868	16,345	16,254	...	...	...	...	32,599	42,100	...	42,100	42,100	3.87	...	
3	1869	81,139	32,016	...	...	...	...	113,155	127,106	2,438	166,768	124,668	3.87	...	
4	1870	143,959	88,827	...	...	...	...	232,786	290,794	9,000	448,562	281,794	3.87	...	
5	1871	48,594	77,786	...	...	...	...	126,380	40,000	...	492,333	43,771	3.93	...	
6	1872	9,673	8,674	...	...	...	...	18,347	29,473	17,198	504,608	12,275	3.87	...	
7	1873	17,504	11,087	...	...	...	...	28,591	23,797	9,270	519,136	14,528	3.87	...	
8	1874	3,678	1,331	...	...	...	...	5,009	7,800	9,425	517,510	— 1,626	3.87	...	
9	1875	21,247	845	...	...	...	...	22,092	38,930	9,996	546,333	28,823	3.92	...	
10	1876	20,608	5,488	...	2,570	...	...	28,666	50,000	...	596,333	50,000	3.75	...	
11	1877	15,333	89,558	...	19,765	...	...	124,656	100,000	24,841	671,492	75,159	3.75	...	
12	1878	61,133	7,418	...	36	...	...	68,587	46,575	15,156	702,910	31,418	3.75	...	
13	1879	57,533	5,200	...	...	...	...	62,733	100,000	18,319	784,591	81,681	3.75	...	
14	1880	59,404	5,467	...	...	...	...	64,871	42,650	18,494	808,748	24,157	4.17	...	
15	1881	30,615	1,264	...	...	...	...	31,879	28,950	20,146	817,551	8,803	4.14	...	
16	1882	6,552	11,000	...	...	...	...	17,552	25,300	1,426	841,425	23,874	3.50	...	
17	1883	16,638	23,226	4,379	...	...	...	44,243	12,030	47,910	805,545	— 35,880	3.50	...	
18	1884	5,834	90,516	29,793	613	...	...	126,756	105,350	27,685	883,210	77,665	3.50	...	
19	1885	11,722	80,870	11,037	1,178	...	...	104,807	179,541	29,636	1,033,114	149,904	3.50	...	
20	1886	21,656	53,834	9,571	2,877	...	...	87,938	102,809	38,434	1,097,490	64,376	3.50	...	
21	1887	33,269	4,603	232	35	...	...	38,139	10,973	41,251	1,067,212	— 30,278	3.50	...	
22	1888	18,167	9,634	75	19	...	...	27,895	52,939	40,024	1,080,127	12,915	3.50	...	
23	1889	1,920	45,341	...	...	...	...	47,261	12,892	42,085	1,050,935	— 29,192	3.50	...	
24	1890	1,299	12,841	...	...	...	...	14,140	10,400	43,220	1,018,115	— 32,820	3.50	...	
25	1891	1,057	197	...	...	...	...	1,254	5,050	43,007	980,157	— 37,958	3.50	...	
26	1892	6,237	36,098	2,382	...	...	...	44,717	16,644	43,262	953,539	— 26,618	3.50	...	
27	1893	346	54,222	1,439	...	...	...	56,007	95,295	45,643	1,003,191	49,652	3.50	...	
28	1894	27,339	161,415	10,417	...	...	...	199,171	175,366	45,564	1,132,993	129,802	3.43	...	
29	1895	8,364	374,124	12,550	...	...	...	395,038	485,928	55,077	1,563,844	430,851	3.00	...	
30	1896	2,143	294,669	29,214	...	...	...	326,026	262,198	84,051	1,741,992	178,148	2.77	...	
31	1897	11,610	399,252	19,139	2,770	...	...	432,771	392,096	94,436	2,039,651	297,659	2.75	...	
32	1898	9,287	178,282	6,915	...	31,650	56,675	282,809	283,036	108,668	2,214,019	174,368	2.78	...	
33	1899	485	120,490	854	...	4,980	30,861	157,670	164,881	117,158	2,261,742	47,723	2.75	...	
34	1900	35,513	88,325	...	...	3,790	14,633	142,261	183,012	123,872	2,320,882	59,140	3.07	3.17	
35	1901	88,495	132,465	545	515	40,901	3,934	266,855	294,756	102,945	2,512,693	191,811	3.50	3.20	
36	1902	106,045	554,035	51,294	...	196,465	3,750	911,589	748,050	110,322	3,150,422	637,729	3.50	3.25	
37	1903	151,645	85,346	500	...	94,652	607	4,250	337,000	519,124	166,353	3,503,193	352,771	3.37	3.25
38	1904	19,804	117,138	1,419	12,138	43,149	349	...	193,997	226,280	*184,881	3,544,592	41,399	3.62	3.25
39	1905	35,428	139,374	206	46,024	10,551	...	...	231,583	210,354	‡196,724	3,558,222	13,630	3.48	3.25
40	1906	10,348	99,294	...	1,303	1,360	...	...	112,305	64,320	206,544	3,415,998	— 142,224	3.75	3.33
Totals	...	£121,7968	3,517,806	191,961	89,843	427,498	110,809	4,250	5,560,135	5,606,799	121,9461	...	...	...	...

\* Includes £1,253, an extraordinary repayment of principal.

‡ Includes £250, an extraordinary repayment of principal.

† Includes £3,660 repaid to the Public Works Loans Board during the years 1869-70, and subsequently raised again as loan from the Metropolitan Board of Works.

NOTE.—The figures of expenditure for 1906 are subject to alteration on adjustments as between Loan and General Accounts.

APPENDIX VIII.—Statement showing the Current Account Expenditure  
(excluding Loan Charges), Loan Charges and Total Net Expenditure

No. of Year.	Year ended Michaelmas.	No. of Institutions open.	* CURRENT ACCOUNT EXPENDITURE, EXCLUDING LOAN CHARGES.											Total.
			Asylums.	Hospitals.	Ambulance Service.	Training Ship "Exmouth."	Children's Homes and Schools.	General Expenses.					Total.	
								Office of the Board.	Legal Expenses.	Superannuation Allowances.	Repayment of Notification Fees.	Other General Expenses.		
£	£	£	£	£	£	£	£	£	£	£	£	£	£	
1	1867	...	...	...	...	...	...	...	...	...	...	...	...	...
2	1868	...	132	13	...	...	...	2,394	...	...	...	...	2,394	2,530
3	1869	...	638	835	...	...	...	1,940	22	...	...	...	1,971	3,444
4	1870	3	1,226	5,473	...	...	...	1,915	61	...	...	...	1,976	8,675
5	1871	5	59,204	48,905	...	...	...	2,946	135	...	...	...	3,081	111,190
6	1872	5	74,800	39,826	...	...	...	3,089	1,227	...	...	...	4,316	119,032
7	1873	5	86,462	20,862	...	...	...	3,032	1,022	...	...	...	4,054	111,378
8	1874	5	91,722	21,680	...	...	...	2,866	450	...	...	...	3,316	116,718
9	1875	6	99,294	28,203	...	...	...	3,743	317	...	...	...	4,060	131,557
10	1876	7	108,165	26,972	...	3,573	...	3,653	290	...	...	...	3,943	142,653
11	§1877	10	106,775	83,703	...	12,388	...	4,543	380	...	...	...	4,923	207,789
12	1878	9	107,328	74,565	...	20,115	...	4,742	1,954	...	...	...	6,696	208,704
13	1879	9	107,564	57,449	...	19,616	...	5,107	5,128	...	...	...	10,235	194,864
14	1880	10	114,153	59,041	...	19,767	...	4,766	2,026	...	...	...	6,792	199,758
15	†1881	10	150,222	159,322	...	21,079	...	5,485	1,660	...	...	...	7,145	337,768
16	†1882	11	160,693	149,266	7,916	23,368	...	6,101	5,799	...	...	...	11,900	353,148
17	†1883	12	161,651	132,138	10,579	22,142	...	6,691	3,334	...	...	...	10,025	336,535
18	†1884	15	154,032	259,367	41,098	23,547	...	7,758	18,352	...	...	...	26,110	504,154
19	†1885	16	160,235	215,789	33,032	21,699	...	9,695	9,121	...	...	...	18,816	449,571
20	1886	14	124,032	67,432	15,856	18,431	...	9,737	4,050	...	...	...	13,787	239,538
21	1887	15	125,119	65,184	10,985	18,642	...	11,546	1,749	...	...	...	13,295	233,225
22	1888	16	123,081	139,869	12,417	17,350	...	11,174	350	...	...	...	11,524	304,241
23	1889	16	130,218	89,809	16,300	19,390	...	9,295	254	185	...	737	10,471	266,188
24	1890	16	129,724	112,437	12,368	18,823	...	10,283	817	423	1,852	755	14,130	287,482
25	1891	17	137,782	135,446	11,080	19,100	...	11,161	1,123	790	3,421	821	17,316	320,724
26	1892	18	144,386	210,890	16,059	19,732	...	12,617	571	937	3,300	828	18,253	409,320
27	1893	19	145,302	285,653	25,361	20,296	...	15,784	614	1,012	5,278	1,040	23,728	500,340
28	1894	19	140,866	270,586	27,430	21,414	...	17,699	1,543	1,122	8,189	1,055	29,608	489,904
29	1895	19	148,439	233,926	26,746	22,029	...	13,090	1,274	1,335	3,487	2,260	21,446	452,580
30	1896	22	139,455	271,093	28,246	18,616	...	16,584	456	1,460	5,413	3,326	27,239	484,649
31	1897	25	133,924	294,664	30,406	18,176	...	16,701	675	1,640	5,636	5,768	30,420	507,590
32	1898	28	140,135	319,069	30,739	18,857	4,530	17,063	578	2,034	5,347	2,416	27,438	540,768
33	1899	30	151,994	340,016	28,754	23,177	6,920	17,726	1,105	2,448	4,287	1,244	26,810	577,671
34	1900	30	165,209	376,662	31,241	19,449	8,553	22,715	1,595	2,790	4,812	2,294	34,206	635,320
35	1901	36	177,312	400,025	32,334	21,658	16,859	25,623	4,605	3,201	3,781	2,401	39,611	687,799
36	1902	39	176,842	489,591	60,418	18,872	25,207	25,918	810	4,355	7,016	1,248	39,347	810,277
37	1903	41	193,884	504,473	43,495	18,503	45,253	26,538	760	4,924	6,471	1,429	40,122	845,730
38	1904	44	211,224	344,451	36,053	17,711	53,875	28,230	625	5,466	3,980	1,750	40,051	703,365
39	1905	47	209,375	358,189	33,505	18,246	63,065	27,498	1,112	6,896	3,631	2,066	41,203	723,583
40	1906	46	200,604	378,120	34,903	17,765	61,799	26,997	762	7,303	3,802	1,791	40,655	733,846

\* These figures, particularly during recent years, include expenditure of a special character which is of a semi-capital nature.

§ Hampstead Hospital, during this year, was used for both imbeciles and infectious sick, and an approximate amount in respect of the large expenditure under Asylums during each of these years is accounted for by the fact that it has been found impossible to

† The rate in the £ is calculated on the basis of the rateable values in force at Michaelmas each year.

NOTES.—The gross amount of salaries and wages (which include the contributions of the Staff to the Superannuation Fund) are charged to the Central Stores, Central Needle-rooms and Bacteriological Laboratories expenditure is charged to the several

the year ended Michaelmas, 1899.

In considering this table regard should be had to the great increase in the Board's work, especially in recent years.

(excluding Loan Charges), Current Account Receipts, Net Expenditure met out of Rates, and Rate in the £ from 1867 to 1906.

CURRENT ACCOUNT RECEIPTS.					NET EXPENDITURE EXCLUDING LOAN CHARGES.		LOAN CHARGES.				TOTAL NET EXPENDITURE MET OUT OF RATES.		No. of Institutions open.	Year ended Michaelmas.	No. of Year.
Maintenance of Patients.	Interest on Balances.	Superannuation Contributions.	Sundry other Receipts.	Total.	Amount.	Rate in the £.	Interest.	Repayment.	Total.	Rate in the £.	Amount.	Rate in the £.			
£	£	£	£	£	£	d.	£	£	£	d.	£	d.			
...	...	...	...	...	...	...	...	...	...	...	...	...	...	1867	1
...	...	...	...	...	2,539	03	...	...	...	...	2,539	03	...	1868	2
...	...	...	...	...	3,444	05	2,502	2,438	4,940	006	8,384	11	...	1869	3
...	...	...	...	...	8,675	12	17,917	9,000	26,917	036	35,502	48	3	1870	4
...	...	...	...	...	111,190	134	13,837	...	13,837	017	125,027	151	5	1871	5
...	...	...	1,905	1,905	117,127	142	24,402	17,198	41,600	050	158,727	192	5	1872	6
...	1,190	...	...	1,190	110,188	133	20,292	9,270	29,562	036	139,750	169	5	1873	7
...	...	...	1,789	1,789	114,929	135	20,342	9,425	29,767	035	144,696	170	5	1874	8
...	1,000	...	1,673	2,673	128,884	149	20,540	9,996	30,536	035	159,420	184	6	1875	9
...	1,000	...	1,775	2,775	139,878	146	15,908	...	15,908	016	155,786	162	7	1876	10
...	...	...	2,000	2,000	205,789	211	30,498	24,841	55,339	057	261,128	268	10	1877	11
...	1,000	...	2,852	3,852	204,852	210	27,340	15,156	42,496	044	247,348	254	9	1878	12
...	1,500	...	3,819	5,319	189,545	191	29,230	18,319	47,549	048	237,094	239	9	1879	13
...	1,500	...	3,817	5,317	194,436	191	30,091	18,494	48,585	048	243,021	239	10	1880	14
...	1,000	...	3,553	4,553	333,215	320	31,862	20,146	52,008	050	385,223	370	10	1881	15
...	...	...	6,662	6,662	346,481	304	24,226	1,426	25,652	023	372,133	327	11	1882	16
...	...	...	4,253	4,253	332,282	287	39,518	47,910	87,428	075	419,710	362	12	1883	17
...	...	...	3,967	3,967	500,187	424	32,983	27,685	60,668	052	560,855	476	15	1884	18
...	...	...	3,947	3,947	445,624	371	36,193	29,636	65,829	055	511,453	426	16	1885	19
...	...	...	4,528	4,528	235,010	192	38,539	38,434	76,973	063	311,983	255	14	1886	20
...	2,094	...	10,880	12,974	220,251	174	40,952	41,251	82,203	065	302,454	239	15	1887	21
...	650	...	...	650	303,591	238	39,939	40,024	79,963	063	383,554	301	16	1888	22
...	2,086	...	3,943	6,029	260,159	202	40,164	42,085	82,249	064	342,408	266	16	1889	23
26	1,778	...	1,003	2,807	284,675	217	39,051	43,220	82,271	063	366,946	280	16	1890	24
...	890	...	109	999	319,725	244	37,596	43,007	80,603	062	400,328	306	17	1891	25
...	341	...	40	381	408,939	299	36,395	43,262	79,657	058	488,596	357	18	1892	26
228	...	...	41	269	500,071	359	37,156	45,643	82,799	059	582,870	418	19	1893	27
142	...	...	202	344	489,560	349	39,747	45,564	85,311	060	574,871	409	19	1894	28
376	...	...	1,171	3,547	449,039	317	46,312	55,077	101,389	071	550,428	388	19	1895	29
164	...	...	...	3,164	481,485	324	56,422	84,051	140,473	095	621,958	419	22	1896	30
375	754	...	...	3,629	503,961	337	63,367	94,436	157,803	105	661,764	442	25	1897	31
327	1,454	...	...	4,081	536,687	354	69,692	108,668	178,360	118	715,047	472	28	1898	32
384	1,906	...	421	5,411	572,260	373	71,955	117,158	189,113	124	761,373	497	30	1899	33
319	3,448	...	...	10,467	624,853	401	73,274	123,872	197,146	127	821,999	528	30	1900	34
737	3,600	...	...	13,337	674,462	408	76,863	102,945	179,808	109	854,270	517	36	1901	35
303	993	...	...	17,896	792,381	475	92,521	110,322	202,843	122	995,224	597	39	1902	36
425	1,743	...	3,976	14,144	831,586	493	111,047	166,353	277,400	164	1,108,986	657	41	1903	37
434	4,943	4,530	6,390	24,297	679,068	397	115,215	183,618	298,833	175	977,901	572	44	1904	38
380	3,754	4,858	5,101	24,593	698,990	403	116,640	196,474	313,114	181	1,012,104	584	47	1905	39
367	4,776	6,477	4,773	22,593	711,253	394	114,910	206,544	321,454	178	1,032,707	571	46	1906	40

Common Charges thereof has been allocated under Asylums and Hospitals.  
 approximately divide the Darent Asylum expenditure on imbeciles from the Darent Camps expenditure on smallpox patients.  
 orted for the years ended Michaelmas, 1904-6, but such contributions are deducted from the expenditure for the years 1897-1903.  
 titutions to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads from

APPENDIX IX.—Statement showing the Rateable Value of the District, produce of 1d. rate in the £, rates in the £, and amounts of Precepts from 1867 to 1906.

No. of Year	Year ended Michaelmas.	Rateable Value of the Asylum District at Michaelmas of each Year.	Produce of 1d. rate in the £ on the rateable values at Michaelmas of each year.	PRECEPTS.						Year ended Michaelmas.	No. of Year.
				Amount in the £ worked out as a Metropolitan Rate.*			Amount raised.				
				Common Charges.	Direct Charges.	Total.	Common Charges.	Direct Charges.	Total.		
£	£	d.	d.	d.	£	£	£				
1	1867	16,024,891	66,770	...	...	...	...	...	...	1867	1
2	1868	16,852,680	70,219	0·12	...	0·12	8,346	...	8,346	1868	2
3	1869	17,564,237	73,184	0·12	...	0·12	8,777	...	8,777	1869	3
4	1870	17,802,258	74,176	0·50	...	0·50	40,317	636	40,953	1870	4
5	1871	19,812,058	82,550	0·75	0·35	1·10	99,199	31,400	130,599	1871	5
6	1872	19,812,058	82,550	0·75	1·30	2·05	61,912	111,290	173,202	1872	6
7	1873	19,812,058	82,550	1·00	0·50	1·50	83,768	42,590	126,358	1873	7
8	1874	20,391,125	84,963	1·00	0·70	1·70	84,964	60,820	145,784	1874	8
9	1875	20,713,749	86,307	1·00	0·70	1·70	86,356	61,040	147,396	1875	9
10	1876	23,035,324	95,980	1·50	0·55	2·05	138,209	51,980	190,189	1876	10
11	1877	23,367,824	97,365	1·50	0·80	2·30	145,380	79,180	224,560	1877	11
12	1878	23,367,824	97,365	1·75	0·85	2·60	170,390	81,970	252,360	1878	12
13	1879	23,848,222	99,367	1·75	0·88	2·63	173,893	88,080	261,973	1879	13
14	1880	24,388,802	101,620	1·75	0·66	2·41	177,835	67,500	245,335	1880	14
15	1881	25,012,087	104,217	1·75	0·77	2·52	182,380	81,400	263,780	1881	15
16	1882	27,313,146	113,804	3·00	1·10	4·10	341,414	124,700	466,114	1882	16
17	1883	27,771,967	115,716	2·75	1·20	3·95	318,678	118,500	437,178	1883	17
18	1884	28,284,594	117,852	2·75	1·10	3·85	324,301	130,000	454,301	1884	18
19	1885	28,819,345	120,080	3·75	1·33	5·08	450,302	157,700	608,002	1885	19
20	1886	29,289,747	122,040	3·00	0·50	3·50	366,122	61,600	427,722	1886	20
21	1887	30,305,986	126,274	1·25	0·57	1·82	158,026	72,720	230,746	1887	21
22	1888	30,618,304	127,576	2·25	0·83	3·08	287,142	104,520	391,662	1888	22
23	1889	30,898,854	128,745	2·00	0·60	2·60	257,496	77,500	334,996	1889	23
24	1890	31,362,718	130,677	2·12	0·60	2·72	277,045	74,000	351,045	1890	24
25	1891	31,362,718	130,677	2·12	0·71	2·83	277,699	99,600	377,299	1891	25
26	1892	32,863,615	136,931	2·25	0·66	2·91	308,073	98,150	406,223	1892	26
27	1893	33,405,572	139,190	3·62	0·86	4·48	396,134	122,400	518,534	1893	27
28	1894	33,680,160	140,334	4·00	0·86	4·86	559,077	129,850	688,927	1894	28
29	1895	33,994,217	141,642	3·00	0·86	3·86	421,065	122,630	543,695	1895	29
30	1896	35,608,442	148,368	3·25	0·83	4·08	430,340	114,800	575,140	1896	30
31	1897	35,886,590	149,527	3·75	0·83	4·58	556,303	131,000	687,303	1897	31
32	1898	36,361,174	151,505	4·25	0·80	5·05	635,394	125,350	760,744	1898	32
33	1899	36,795,824	153,316	4·25	0·80	5·05	643,826	120,000	763,826	1899	33
34	1900	37,333,656	155,556	4·50	0·83	5·33	689,922	129,000	818,922	1900	34
35	1901	39,678,072	165,325	4·62	0·83	5·45	719,466	133,000	852,466	1901	35
36	1902	40,005,723	166,690	5·25	1·00	6·25	868,052	170,300	1,038,352	1902	36
37	1903	40,528,588	168,969	5·75	1·00	6·75	959,135	156,800	1,115,935	1903	37
38	1904	40,998,185	170,875	5·12	0·77	5·89	865,385	131,400	996,785	1904	38
39	1905	41,566,771	173,195	4·75	0·74	5·49	811,407	126,900	938,307	1905	39
40	1906	43,376,568	180,736	5·39	0·74	6·13	934,221	127,700	1,061,921	1906	40

\* The rates in the £ of the precepts raised are calculated on the basis of the rateable values in force at the time the estimates of expenditure were approved and adopted.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c., and amount Outstanding, at 29th September, 1906.

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
<b>Central Stores.</b>		£	Years.	£		£	£ s. d.
1903 Apr. 23	Purchase of Nos. 155 and 157, Peckham Rye ...	4,250	40	4,250	1903	3 <sup>7</sup> / <sub>16</sub>	3,931 0 0
	Carried to Summary at end	£4,250	£	4,250		£	3,931 0 0
<b>Leavesden Asylum.</b>							
1868 Jan. 8	Purchase of land ...	7,600	60	7,600	1870	3 <sup>7</sup> / <sub>8</sub>	2,913 6 8
1868 May 22	Buildings, furnishing, &c. ...	128,000	60	128,000	1870	3 <sup>7</sup> / <sub>8</sub>	49,066 13 4
1870 Jan. 21	Buildings and furniture (additional) ...	8,000	60	8,000	1870	3 <sup>7</sup> / <sub>8</sub>	3,066 13 4
1871 Mar. 16	Furniture ...	1,000	59	1,000	1871	3 <sup>7</sup> / <sub>8</sub>	389 0 0
1871 May 17	Clerk's house ...	750	59	750	1871	3 <sup>7</sup> / <sub>8</sub>	282 0 0
1872 Jan. 22	Additional accommodation	6,000	58	6,000	1872	3 <sup>7</sup> / <sub>8</sub>	2,313 0 0
1873 Mar. 25	Additional accommodation (infirmary) ...	3,000	56	3,000	1874	3 <sup>7</sup> / <sub>8</sub>	1,212 0 0
1875 Apr. 8	Additional accommodation	13,000	55	13,000	1875	3 <sup>7</sup> / <sub>8</sub>	5,389 0 0
	Purchase of property (Hall)	1,750	55	1,750	1875	3 <sup>7</sup> / <sub>8</sub>	789 0 0
1880 July 30	Purchase of additional land	750	49	750	1880	3 <sup>7</sup> / <sub>8</sub>	352 4 0
1881 Sep. 5	Enlargement of gasworks	2,200	15	2,200	1881	3 <sup>7</sup> / <sub>8</sub>	Repaid.
1883 May 29	Fireproof staircases, dormitories, &c. ...	2,500	15	2,500	1883	3 <sup>7</sup> / <sub>8</sub>	Repaid.
1884 Dec. 15	Drainage works ...	540	Part	360	1886	3 <sup>7</sup> / <sub>8</sub>	67 15 10
	Heating dormitories ...		15	180	1886	3 <sup>7</sup> / <sub>8</sub>	33 17 6
1885 July 3	Enlargement of laundry ...	565	and	565	1886	3 <sup>7</sup> / <sub>8</sub>	106 8 4
1885 Aug. 21	Heating blocks ...	748	part	747	1886	3 <sup>7</sup> / <sub>8</sub>	140 14 2
1886 Apr. 20	Day rooms and dormitories	1,130	30	1,130	1886	3 <sup>7</sup> / <sub>8</sub>	212 17 6
1887 Mar. 24	Water supply ...	500	10	500	1887	3 <sup>7</sup> / <sub>8</sub>	Repaid.
1891 Oct. 28	Recreation hall ...	5,844	30	5,844	1892	3 <sup>7</sup> / <sub>8</sub>	2,116 16 0
1900 July 11	Mortuary ...	710	30	710	1902	3 <sup>7</sup> / <sub>8</sub>	615 6 8
1900 Nov. 12	Water-softening apparatus	2,386	5	2,386	1901	3 <sup>7</sup> / <sub>8</sub>	Repaid.
1901 Jan. 10	Sanitary annexes & fittings	1,429	15	1,429	1902	3 <sup>7</sup> / <sub>8</sub>	1,047 13 4
1901 Jan. 14	Drainage and disposal of sewage ...	1,020	15	1,020	1902	3 <sup>7</sup> / <sub>8</sub>	748 0 0
1901 June 12	Alterations and additions to laundry ...	7,450	15	3,400	1902	3 <sup>7</sup> / <sub>8</sub>	2,493 6 8
			10	3,100	1902	3 <sup>7</sup> / <sub>8</sub>	1,860 0 0
			10	680	1903	3 <sup>7</sup> / <sub>8</sub>	476 0 0
1901 June 17	Isolation hospital ...	2,200	30	2,200	1903	3 <sup>7</sup> / <sub>8</sub>	1,980 0 0
1902 Apr. 7	Sanitary annexes and fittings (additional) ...	520	15	520	1904	3 <sup>7</sup> / <sub>8</sub>	450 13 4
1902 July 15	Cottages for married attendants ...	5,730	30	5,730	1903	3 <sup>7</sup> / <sub>16</sub>	5,157 0 0
1902 Aug. 20	Hair-picking building and boot room ...	1,838	20	1,820	1903	3 <sup>7</sup> / <sub>8</sub>	1,547 0 0
1903 Feb. 10	Female attendants' home	8,500	30	7,000	1903	3 <sup>7</sup> / <sub>8</sub>	6,300 0 0
1903 Mar. 24	Sanitary annexes (balance)	1,428	15	1,114	1904	3 <sup>7</sup> / <sub>8</sub>	968 8 0
1904 Mar. 16	Cottages for married attendants (additional) ...	1,100	30	1,100	1905	3 <sup>7</sup> / <sub>8</sub>	1,063 6 8
1904 Dec. 16	Purchase of additional land	5,650	50	5,628	1905	3 <sup>7</sup> / <sub>8</sub>	5,513 11 4
1905 Sep. 9	Sewage disposal works ...	3,000	15	3,000	1906	3 <sup>7</sup> / <sub>8</sub>	3,000 0 0
	Ditto (additional) ...	670	...	...	...	...	...
	Carried to Summary at end	£227,508	£	224,713		£	102,671 12 8
<b>Caterham Asylum.</b>							
1868 Jan. 28	Purchase of land ...	6,000	60	6,000	1870	3 <sup>7</sup> / <sub>8</sub>	2,300 0 0
1868 June 22	Buildings, furniture, &c. ...	129,000	60	129,000	1870	3 <sup>7</sup> / <sub>8</sub>	49,450 0 0
1870 Jan. 21	Additional buildings, furniture, &c. ...	7,000	60	7,000	1870	3 <sup>7</sup> / <sub>8</sub>	2,683 6 8
1871 Feb. 20	Formation of roads ...	1,000	59	1,000	1871	3 <sup>7</sup> / <sub>8</sub>	389 0 0
1871 Mar. 25	Purchase of bedding ...	1,000	59	1,000	1871	3 <sup>7</sup> / <sub>8</sub>	388 0 0
1871 Oct. 4	Completing, fitting up, and furnishing ...	1,700	58	1,700	1872	3 <sup>7</sup> / <sub>8</sub>	623 0 0
	Carried forward ...	£145,700	£	145,700		£	55,833 6 8

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
<b>Caterham Asylum</b> (continued).		£	Years.	£		£	£ s. d.
1871 Nov. 8	Brought forward ...	145,700		145,700			55,833 6 8
	Completing (further on account) ...	500	58	500	1872	3 $\frac{7}{8}$ %	187 0 0
1872 Mar. 21	Laundry machinery ...	700	58	303	1872	3 $\frac{7}{8}$ %	129 0 0
			57	397	1872	3 $\frac{7}{8}$ %	159 0 0
1872 Sep. 4	Recreation hall, &c. ...	13,000	57	13,000	1872	3 $\frac{7}{8}$ %	5,233 0 0
1873 July 1	Additions ...	3,700	56	3,700	1874	3 $\frac{7}{8}$ %	1,515 0 0
1875 Apr. 8	Additional buildings ...	16,000	55	16,000	1875	3 $\frac{3}{4}$ %	6,723 0 0
1875 July 12	Additions ...	1,500	52	1,500	1876	3 $\frac{3}{4}$ %	657 0 0
1877 Aug. 15	New boiler ...	1,000	15	1,000	1878	3 $\frac{3}{4}$ %	Repaid.
1878 Apr. 18	Coal store, &c. ...	*473	51	*473	1878	3 $\frac{3}{4}$ %	*217 17 11
1881 Dec. 22	Purchase of additional land	6,643	59	6,600	1882	3 $\frac{1}{2}$ %	3,912 0 0
1883 Mar. 20	Ditto ditto	2,080	28-58	2,080	1883	3 $\frac{1}{2}$ %	1,252 11 6
1885 July 28	Additional warming appliances and fire-escape facilities ...	7,530	10-15	7,529	1886	3 $\frac{1}{2}$ %	1,094 0 0
			30				
1896 Mar. 7	Reconstruction of drainage	8,700	15	7,450	1898	2 $\frac{3}{4}$ %	3,476 13 4
1896 Aug. 7	Isolation infirmary ...	5,147	30	4,800	1898	2 $\frac{3}{4}$ %	3,520 0 0
1897 Aug. 4	Attendants' home ...	*5,548	30	*5,548	1898	2 $\frac{3}{4}$ %	*4,068 8 4
1900 Aug. 29	Alterations to laundry ...	4,311	20	4,311	1902	3 $\frac{3}{8}$ %	3,447 0 0
1901 Dec. 31	Ditto (additional) ...	1,160	20	1,160	1902	3 $\frac{3}{8}$ %	928 0 0
1902 June 5	Additional sanitary annexes ...	2,800	15	2,800	1903	3 $\frac{1}{8}$ %	2,240 0 0
1902 Aug. 25	Additional staff accommodation ...	3,790	15	2,500	1903	3 $\frac{7}{8}$ %	2,000 0 0
				200	1904	3 $\frac{3}{8}$ %	173 6 8
1903 Dec. 11	Additional sanitary annexes (additional) ...	450	15	...	...	...	...
	Carried to Summary at end	£230,732	£	227,551		£	96,766 4 5
<b>Darenth Asylum and Schools.</b>							
1875 May 12	Purchase of land ...	9,300	55	8,180	1875	3 $\frac{3}{4}$ %	3,383 0 0
			52	1,120	1876	3 $\frac{3}{4}$ %	488 0 0
1875 Aug. 13	Ditto ...	450	52	450	1876	3 $\frac{3}{4}$ %	179 0 0
			54	50,000	1876	3 $\frac{3}{4}$ %	21,298 0 0
1876 Mar. 25	School buildings ...	75,000	52	14,000	1876	3 $\frac{3}{4}$ %	5,879 0 0
			20	11,000	1876	3 $\frac{3}{4}$ %	Repaid.
1878 Apr. 4	Gasworks, &c. ...	14,500	15	14,500	1878	3 $\frac{3}{4}$ %	Repaid.
1878 June 24	Asylum buildings ...	52,500	51	29,380	1878	3 $\frac{3}{4}$ %	13,222 0 0
			50	23,120	1879	3 $\frac{3}{4}$ %	10,172 16 0
			50	4,430	1879	3 $\frac{3}{4}$ %	1,949 4 0
			49	228	1880	3 $\frac{3}{4}$ %	107 2 0
1878 Oct. 31	School buildings, &c. ...	13,824	20	2,800	1879	3 $\frac{3}{4}$ %	Repaid.
			15	4,500	1879	3 $\frac{3}{4}$ %	Repaid.
			15	1,800	1879	4 $\frac{1}{2}$ %	Repaid.
1879 Jan. 2	Asylum buildings ...	7,500	50	7,500	1879	3 $\frac{3}{4}$ %	3,300 0 0
1879 Mar. 10	Purchase of additional land	6,322	49	6,322	1880	3 $\frac{3}{4}$ %	2,957 13 3
1879 Aug. 20	Additional expenditure ...	22,650	15	22,650	1880	4 $\frac{1}{2}$ %	Repaid.
1879 Dec. 12	Furniture ...	9,000	15	9,000	1881	4 $\frac{1}{2}$ %	Repaid.
1880 Aug. 12	Additional works ...	3,500	15	1,600	1880	4 $\frac{1}{2}$ %	Repaid.
				1,900	1881	4 $\frac{1}{2}$ %	Repaid.
1880 Dec. 17	Infirmarys ...	15,000	49	13,000	1880	3 $\frac{3}{4}$ %	6,091 16 0
			15	2,000	1880	4 $\frac{1}{2}$ %	Repaid.
1881 Nov. 10	Ditto ...	5,500	15	5,500	1881	3 $\frac{1}{2}$ %	Repaid.
1882 Oct. 27	Cottages for officers ...	2,200	28-58	2,200	1883	3 $\frac{1}{2}$ %	1,324 18 11
1883 Feb. 21	Fitting up infirmarys ...	2,200	5	2,200	1883	3 $\frac{1}{2}$ %	Repaid.
1883 Mar. 16	Recreation hall ...	5,550	58	5,550	1883	3 $\frac{1}{2}$ %	3,342 9 7
	Carried forward ...	£244,996	£	244,930		£	73,694 19 9

\* Less amounts of unexpended balance of loans authorised to be applied towards defraying cost of certain works, see Table A, p. 137.



## APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &amp;c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
	<b>Darenth Asylum and Schools (continued).</b>	£	Years.	£		£	£ s. d.
	Brought forward ...	244,996		244,930			73,694 19 9
1884 Apr. 9	Extension of gas and water works ...	5,783	30	4,500	1884	3½	1,200 0 0
			30	200	1884	3½	53 6 8
			15	600	1884	3½	Repaid.
			5	483	1884	3½	Repaid.
1884 Oct. 16	Extension of water supply	530	15	530	1885	3½	Repaid.
1885 Dec. 16	Water softening ...	3,075	10	2,698	1886	3½	Repaid.
			30	377	1886	3½	125 11 8
1886 May 18	Extension of buildings ...	64,700	30	62,000	1886	3½	20,660 0 0
1886 Sep. 9	Softening and increasing water supply ...	309	15	309	1886	3½	Repaid.
1887 Mar. 14	Ditto ditto	300	15	300	1887	3½	Repaid.
1888 July 2	Fitting up and furnishing additional buildings ...	4,500	10	4,500	1889	3½	Repaid.
1894 Aug. 14	Female staff recreation room, &c. ...	7,950	20	7,950	1894	3½	3,180 0 0
1895 May 15	Fire-escape staircases ...	*651	15	*651	1896	2½	*216 17 3
1896 Apr. 23	Female staff recreation room, &c. ...	1,331	20	1,330	1896	2½	665 0 0
1903 Feb. 10	Female attendants' home	9,000	30	...	...	...	...
	Carried to Summary at end	£343,125	£	334,058		£	99,795 15 4
	<b>Tooting Bec Asylum.</b>						
1894 May 1	Purchase of site and premises ...	27,000	50	27,000	1894	3½	20,520 0 0
				75,000	1900	3½	60,000 0 0
				75,000	1900	3½	60,000 0 0
1900 Feb. 19	Buildings, fittings, &c. ...	229,090	30	50,000	1902	3½	43,333 6 8
				29,090	1902	3½	25,211 3 4
				8,500	1903	3½	6,800 0 0
		18,100	15	5,300	1904	3½	4,593 6 8
				2,898	1905	3½	2,704 16 0
1901 July 20	Receiving home for children	15,550	30	13,970	1903	3½	12,573 0 0
1902 Dec. 22	Furniture and equipment	13,240	10	13,240	1903	3½	9,268 0 0
1904 Dec. 27	Additional buildings ...	36,250	30	10,000	1906	3½	10,000 0 0
	Carried to Summary at end	£339,230	£	309,998		£	255,003 12 8
	<b>Clapton Asylum.</b>						
1875 July 12	Furnishing ...	2,500	20	2,500	1877	3½	Repaid.
	Carried to Summary at end	£2,500	£	2,500			...
	<b>Belmont Asylum.</b>						
1900 Jan. 20	Purchase of premises ...	103,800	25	103,750	1902	3½	87,150 0 0
1904 June 21	Adaptation of premises and drainage works ...	15,900	10	15,900	1905	3½	14,310 0 0
1904 Aug. 26	Ditto (additional) ...	1,730	10	1,730	1905	3½	1,557 0 0
1905 Feb. 15	Electric lighting and provision of telephones and fire alarms ...	6,450	10	2,000	1905	3½	1,800 0 0
			10	4,000	1905	3½	3,600 0 0
1906 Jan. 13	Furnishing and equipment	4,180	5	4,180	1906	3½	4,180 0 0
	Carried to Summary at end	£132,060	£	131,560		£	112,597 0 0

\* Less amount of unexpended balance of loan authorised to be applied towards defraying cost of certain work, see Table A, p. 137.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c.,  
and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable	Balance of Principal Outstanding 29th September, 1906.
<b>Eastern Hospital.</b>		£	Years.	£		£	£ s. d.
1868 Apr. 23	Purchase of land ... ..	12,500	60	12,500	1870	3½	4,791 13 4
1869 June 16	Buildings, furniture, &c....	56,760	60	56,760	1870	3½	21,758 0 0
1870 July 9	Ditto ditto ... ..	* ...	59	* ...	1871	3½	" ...
1871 Apr. 5	Completion of erection, &c.	8,000	59	7,950	1871	4	3,126 0 0
1871 Dec. 2	Coal stores, &c. ... ..	1,570	58	50	1871	3½	14 0 0
1875 May 13	Additions ... ..	*6,978	52	1,570	1872	3½	800 0 0
1878 Nov. 20	Mortuary ... ..	* ...	50	*6,978	1876	3½	*2,961 11 2
1883 July 13	Purchase of land, &c. ...	17,090	58	* ...	1879	3½	" ...
1884 July 23	Purchase of leasehold interest in 75, Brooksby Walk, Homerton ... ..	250	56	17,090	1883	3½	10,305 0 0
1894 May 19	Heating four enteric wards	600	5	250	1885	3½	155 18 9
1894 Aug. 4	Additional accommodation	13,150	30	600	1894	3½	Repaid.
1896 May 4	Ditto ditto	1,650	20	13,150	1894	3½	7,890 0 0
1898 Aug. 3	Workshops and isolation pavilion ... ..	2,925	25	1,227	1898	2½	736 4 0
1902 Aug. 25	Additional fire exits ... ..	710	15	2,852	1899	2½	2,054 0 0
1903 Nov. 14	Alterations to laundry ...	850	15	710	1904	3½	615 6 8
1904 June 10	Ditto (additional) ...	457	15	850	1904	3½	736 13 4
				360	1905	3½	336 0 0
	Carried to Summary at end	£123,490		£ 122,897			£ 56,280 7 3
<b>North-Eastern Hospital.</b>							
1892 Aug. 11	Purchase of site ... ..	12,000	50	12,000	1893	3½	8,880 0 0
1893 June 30	Purchase of additional land and premises ... ..	6,500	50	4,000	1893	3½	2,960 0 0
			50	2,500	1893	3½	1,850 0 0
1893 Nov. 1	Ditto ditto	6,000	50	6,000	1894	3½	4,560 0 0
1894 Mar. 22	Purchase of leases of two cottages adjoining ... ..	500	50	500	1894	3½	380 0 0
1896 May 4	Boundary wall and fencing	2,821	25	2,820	1896	2½	1,692 0 0
1897 May 21	Medical superintendent's house ... ..	2,304	30	2,155	1899	2½	1,648 13 4
1898 Nov. 9	Constructing permanent hospital ... ..	126,850	15	13,200	1899	2½	6,600 0 0
			30	50,225	1899	2½	37,655 0 0
			30	63,425	1899	2½	47,363 0 0
1899 Dec. 12	Erection of laundry ... ..	10,251	30	10,251	1901	3½	8,541 7 2
1899 Dec. 12	Fittings for ditto, and construction of rain-water reservoir ... ..	4,550	15	4,550	1901	3½	3,033 6 8
1902 June 25	Erection of laundry, &c. (additional) ... ..	523	15	521	1902	3½	381 17 4
1902 Oct. 4	Furniture for additional buildings ... ..	3,000	5	3,000	1902	3½	600 0 0
	Carried to Summary at end	£175,299		£ 175,147			£ 126,145 4 6
<b>North-Western Hospital.</b>							
1868 Feb. 13	Purchase of land ... ..	16,000	60	16,000	1870	3½	6,133 6 8
1868 Aug. 24	Boundary walls ... ..	1,606	60	1,606	1870	3½	615 12 8
1870 Jan. 21	Buildings ... ..	8,000	60	6,654	1870	3½	2,550 14 0
			59	1,346	1871	3½	519 0 0
1871 Feb. 3	Additions to buildings ...	12,500	59	12,500	1871	3½	4,880 0 0
1871 June 7	Medical superintendent's house ... ..	1,300	59	1,300	1871	3½	508 0 0
1872 Mar. 6	Engineering works ... ..	*625	58	*625	1872	3½	*217 0 3
	Carried forward ...	£40,031		£ 40,031			£ 15,423 13 7

\* Less amounts of unexpended balance of loans authorised to be applied towards defraying cost of certain works, see Table A, p. 137.

## APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &amp;c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
<b>North-Western Hospital (continued).</b>							
	Brought forward ...	40,031		40,031			15,423 13 7
1883 Dec. 22	Purchase of land & premises	13,000	57	13,000	1884	3½	7,978 4 7
1884 June 23	Boundary wall ...	2,700	30	2,700	1885	3½	810 0 0
1884 Aug. 14	Enlargement of medical superintendent's house	350	30	320	1885	3½	96 0 0
1891 Dec. 23	Additional laundry accommodation ...	2,650	15	2,650	1892	3½	176 13 4
1892 Oct. 6	Administrative block of buildings ...	30,050	30	25,550	1893	3½	14,478 6 8
1894 Apr. 6	Reconstruction of patients' laundry and erection of disinfecting house ...	1,133	15	1,130	1894	3½	226 0 0
1895 May 15	Additional ward pavilions	54,805	30	54,805	1895	2½	33,175 6 8
1895 June 10	Mains and wires for electric lighting ...	2,000	10	2,000	1896	2½	Repaid.
1895 July 31	Administrative block (additional expenditure) ...	10,000	25	10,000	1896	2½	6,000 0 0
1896 Mar. 27	Workshops ...	627	20	572	1896	2½	286 0 0
1897 Feb. 23	Additional staff accommodation ...	*9,779	30	*9,753	1898	2½	*7,151 19 6
1897 Dec. 30	Gate-porter's lodge ...	554	30	550	1898	2½	403 6 8
1900 July 31	Mains and wires for electric lighting (additional) ...	1,280	10	†1,200	†	†	†495 3 3
	Carried to Summary at end	£168,959	£	168,761		£	87,300 14 3
<b>Western Hospital.</b>							
1871 May 4	Purchase of site ...	12,000	59	12,000	1871	3½	4,689 0 0
1872 Mar. 27	Boundary walls ...	2,000	58	2,000	1872	3½	783 0 0
1876 May 11	Provision of administrative accommodation ...	10,000	52	925	1876	3½	384 0 0
			52	9,075	1877	3½	3,850 0 0
			52	15,925	1877	3½	6,736 0 0
1877 Jan. 11	Buildings and furniture ...	32,000	52	11,075	1877	3½	4,891 0 0
			20	5,000	1877	3½	Repaid.
1877 July 17	Boundary wall ...	600	51	600	1878	3½	264 0 0
1879 July 28	Alterations and additions	5,250	49	5,250	1880	3½	2,464 3 3
1883 June 7	Ditto ditto	2,250	30	2,250	1883	3½	525 0 0
1884 Feb. 9	Ditto ditto	850	30	380	1885	3½	114 0 0
1885 Jan. 30	Medical superintendent's house and other additions, &c. ...	13,580	15-30	4,300	1886	3½	1,198 2 6
1886 June 19	Alterations and additions	2,300	20	2,300	1886	3½	Repaid.
1891 Jan. 31	Further accommodation for staff ...	5,050	20	5,050	1891	3½	1,262 10 0
1891 July 22	Purchase of additional land	8,150	50	8,150	1892	3½	5,868 0 0
1892 May 26	Additional buildings ...	43,025	30	36,325	1892	3½	19,373 6 8
			15	6,700	1892	3½	446 13 4
1893 July 6	Additional staff accommodation ...	3,450	20	3,360	1894	3½	1,344 0 0
1894 Aug. 18	Purchase of land (additional)	10,000	50	10,000	1894	3½	7,600 0 0
1895 July 1	Alterations and additions	8,490	25	8,490	1896	2½	5,094 0 0
1895 Dec. 6	Additional buildings (further on account) ...	13,230	30	8,570	1896	2½	5,713 6 8
1896 Oct. 26	Diphtheria isolation and staff blocks ...	53,858	15	4,660	1896	2½	1,553 6 8
			30	(50,000	1897	2½	35,000 0 0
				1,350	1901	3½	1,125 0 0
1897 Feb. 3	Additional b'ldngs (bal'nce)	1,074	30	1,073	1897	2½	751 2 0
1897 May 6	Tar-paving & fencing work	2,322	5	2,103	1899	2½	Repaid.
1897 Dec. 27	Engineering works, &c. ...	5,663	15	5,600	1898	2½	2,613 6 8
1900 Jan. 18	Furniture for new buildings	2,929	5	†2,639	†	†	†1,088 15 3
	Carried to Summary at end	£238,071	£	225,150		£	114,731 13 0

\* Less amounts of unexpended balance of loans authorised to be applied towards defraying cost of certain works, see Table A, p. 137.

† Amount of unexpended balances applied as per Table B, p. 138

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years	£		£	£ s. d.
<b>South-Western Hospital.</b>							
1868 July 13	Purchase of land ... ..	15,000	60	15,000	1870	3½	5,750 0 0
1868 Aug. 10	Ditto ... ..	500	60	500	1870	3½	191 13 4
1869 June 5	Buildings, fitting up, &c.	65,380	60	65,380	1870	3½	25,062 6 8
1870 July 9	Ditto ditto	* ...	59	* ...	1871	3½	* ...
1871 Apr. 5	Completion of erection, &c.	10,000	59	10,000	1871	4	3,880 0 0
1871 July 13	Purchase of tents ... ..	1,600	59	1,600	1871	3½	628 0 0
1878 Aug. 8	Alterations and additions	1,550	50	1,550	1879	3½	682 0 0
1879 Feb. 12	Provision of water tanks...	400	49	400	1880	3½	187 15 6
1879 June 17	Pavilion for typhus fever...	6,000	49	6,000	1880	3½	2,816 6 0
1881 Jan. 5	Additional accommodation	700	15	700	1881	4½	Repaid.
1884 Jan. 29	Purchase of adjoining land	1,300	57	1,300	1884	3½	797 17 1
1884 May 3	Entrance gates, &c. ... ..	2,000	15	365	1885	3½	Repaid.
			30	1,540	1885	3½	462 0 0
1892 Nov. 7	Additional staff accom- modation ... ..	6,420	20	6,420	1893	3½	2,247 0 0
1894 Dec. 29	Alterations and additions	26,976	30	26,976	1895	2½	14,013 12 0
1896 June 19	Ditto ditto	5,230	20	5,230	1897	2½	2,876 10 0
1896 Sep. 7	Ditto ditto	792	20	792	1899	2½	514 16 0
1897 Dec. 27	Pavilion and reconstruction of drains ... ..	*16,846	25	*16,765	1898	2½	*11,400 10 3
1899 Jan. 16	Alterations and additions	2,351	20	2,351	1899	2½	1,522 4 0
1902 July 7	Additional fire exits ... ..	570	5	570	1904	3½	342 0 0
	Carried to Summary at end	£163,615		£ 163,439			£ 73,374 10 10
<b>Fountain Hospital.</b>							
1893 Aug. 11	Purchase of site ... ..	10,500	50	10,500	1894	3½	7,980 0 0
1893 Oct. 30	Purchase of land ... ..	1,550	50	1,506	1894	3½	1,140 0 0
1895 July 19	Temporary hospital and provision of fittings ...	128,818	5	128,347	1895	2½	Repaid.
1903 Dec. 1	Fire-resisting works, } alterations, &c. ... }	15,000	5	14,000	1904	3½	8,400 0 0
			5	750	1905	3½	600 0 0
	Carried to Summary at end	£155,868		£ 155,103			£ 18,120 0 0
<b>Grove Hospital.</b>							
1896 Oct. 7	Erection, fitting up, and furnishing ... ..	255,116	30	100,000	1897	2½	70,000 0 0
			30	100,000	1897	2½	70,000 0 0
			15	50,000	1897	2½	20,000 0 0
			30	5,116	1901	3½	4,263 6 8
1903 Apr. 23	Ditto	16,199	30	8,450	1903	3½	7,605 0 0
			15	7,540	1903	3½	6,031 0 0
	Carried to Summary at end	£271,315		£ 271,106			£ 177,899 6 8
<b>South-Eastern Hospital.</b>							
1872 May 10	Purchase of site... ..	10,400	57	10,400	1872	3½	4,199 0 0
1873 Aug. 25	Boundary walls and gates	1,100	56	1,100	1874	3½	470 0 0
1876 May 11	Administrative accommo- dation ... ..	10,000	52	10,000	1877	3½	4,234 0 0
			52	15,000	1877	3½	6,322 0 0
1877 Jan. 11	Buildings and furniture ...	39,000	52	19,000	1877	3½	8,403 0 0
			20	5,000	1877	3½	Repaid.
1878 Oct. 10	Alterations and additions	4,800	50	4,800	1879	3½	2,112 0 0
1883 June 18	Purchase of additional land	2,200	58	2,200	1883	3½	1,326 0 0
1884 May 14	Alterations and additions for separation of cases ...	13,100	15	2,270	1885	3½	Repaid.
			30	10,830	1885	3½	3,249 0 0
	Carried forward ...	£80,600		£ 80,600			£ 30,315 0 0

\* Less amount of unexpended balance of loans authorised to be applied towards defraying cost of certain works, see Table A, p. 137.

## APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &amp;c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years	£		£	£ s. d.
<b>South-Eastern Hospital (continued).</b>							
1893 Nov. 7	Brought forward ...	80,600		80,600			30,315 0 0
1894 Mar. 15	Additional staff accommodation ...	14,200	30	14,200	1894	3½	8,520 0 0
1895 Dec. 17	Laundry buildings, machinery, and fittings ...	8,950	20	8,950	1894	3½	3,580 0 0
1896 Mar. 31	Laundry buildings (additional expenditure) ...	1,772	20	1,772	1896	2½	886 0 0
1898 Nov. 30	Additional pavilions and workshops ...	21,350	30	21,350	1896	2¾	14,233 6 8
1898 Nov. 30	Improvement of heating arrangements ...	8,832	15	8,832	1899	2¾	4,702 0 0
1902 May 23	Ditto (additional) ...	3,281	15	3,280	1902	3½	2,403 2 8
1904 Jan. 9	Reconstruction of hospital	135,200	20	39,500	1904	3½	35,550 0 0
			20	49,022	1905	3½	46,570 12 0
			20	35,000	1906	3¾	35,000 0 0
Carried to Summary at end		£274,185		£ 262,506			£ 181,760 1 4
<b>Park Hospital.</b>							
1893 June 29	Purchase of site ...	22,500	50	22,500	1893	3½	16,650 0 0
1896 Feb. 29	Erection, fitting up, and furnishing ...	251,939	30	100,000	1896	2¾	66,666 13 4
			30	100,000	1896	2¾	66,666 13 4
			15	46,000	1896	2¾	15,333 6 8
			30	5,939	1901	3½	4,948 11 0
Carried to Summary at end		£274,439		£ 274,439			£ 170,265 4 4
<b>Brook Hospital.</b>							
1894 Jan. 18	Purchase of site ...	16,200	50	16,095	1894	3½	12,232 4 0
1894 Aug. 16	Erection of hospital ...	200,000	30	100,000	1894	3½	60,000 0 0
			15	75,000	1895	3½	47,500 0 0
1898 Dec. 2	Erection of hospital and fitting up, &c. ...	101,456	15	25,000	1895	3½	6,666 13 4
			15	14,456	1899	2¾	7,226 0 0
			30	87,000	1899	2¾	65,250 0 0
Carried to Summary at end		£317,656		£ 317,551			£ 198,874 17 4
<b>Northern Hospital.</b>							
1884 Jan. 25	Purchase of land ...	13,870	57	13,580	1884	3½	8,334 2 9
1884 Apr. 21	Fencing part of site ...	1,146	15	1,146	1884	3½	Repaid.
1884 Sep. 12	Entrance gates ...	2,300	30	2,075	1885	3½	622 10 0
1884 Nov. 19	Erection of hospital ...	84,500	30	71,347	1885	3½	21,402 0 0
			10	11,150	1885	3½	Repaid.
			5	880	1885	3½	Repaid.
1884 Nov. 19	Roads ...	3,360	5	3,000	1885	3½	Repaid.
1885 Dec. 7	Drainage works ...	1,503	30	1,503	1886	3½	500 11 8
1886 July 10	Laying out grounds, &c. ...	3,580	10	3,580	1886	3½	Repaid.
1886 Nov. 18	Erection of hospital ...	1,831	10	1,830	1887	3½	Repaid.
1889 Mar. 23	Additional pavilions and other works, &c. ...	11,500	30	9,900	1889	3½	4,290 0 0
			15	500	1889	3½	Repaid.
1892 Aug. 24	Extension of administrative buildings ...	10,855	30	10,855	1893	3½	6,151 3 4
1893 Nov. 3	Medical superintendent's house ...	*1,716	30	*1,711	1894	3½	*1,026 10 6
1894 June 30	Extension of additional administrative buildings ...	1,655	30	1,650	1894	3½	990 0 0
1894 Dec. 6	Double pavilion and alteration to laundries ...	22,350	30	22,350	1895	2¾	13,724 3 4
Carried forward ...		£160,166		£ 157,057			£ 57,041 1 7

\* Less amount of unexpended balance of loan authorised to be applied towards defraying cost of certain work, see Table A, p. 137.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c.,  
and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
<b>Northern Hospital</b> (continued).							
1896 July 31	Brought forward ...	160,166		157,057			57,041 1 7
	Double pavilion and alteration to laundries (additional expenditure) ...	1,891	25	1,890	1896	2 $\frac{3}{4}$	1,134 0 0
1896 Nov. 30	Isolation block ...	3,200	30	3,200	1898	2 $\frac{3}{4}$	2,346 13 4
1898 Mar. 5	Nurses' home, &c. ...	19,500	30	18,000	1898	2 $\frac{3}{4}$	13,200 0 0
				†1,500	†		†618 19 3
1899 June 16	Electric lighting plant ...	11,832	10	11,000	1899	2 $\frac{3}{4}$	3,300 0 0
				832	1901	3 $\frac{1}{2}$	415 1 3
1901 Feb. 21	Furniture for nurses' home	1,000	5	1,000	1901	3 $\frac{1}{2}$	Repaid.
	Carried to Summary at end	£197,589	£	194,479		£	78,055 15 5
<b>Southern Hospital.</b>							
1897 Mar. 27	Purchase of site ...	14,430	50	14,273	1897	2 $\frac{3}{4}$	11,702 16 6
1899 Feb. 8	Redemption of tithe rent charge ...	922	25	922	1899	2 $\frac{3}{4}$	663 17 6
				25,000	1902	3 $\frac{3}{8}$	21,666 13 4
				50,000	1903	3 $\frac{7}{8}$	45,000 0 0
1901 Dec. 5	Buildings, fittings, &c. ...	284,312	30	75,000	1904	3 $\frac{3}{8}$	70,000 0 0
				40,000	1905	3 $\frac{3}{8}$	38,666 13 4
				40,000	1905	3 $\frac{3}{8}$	38,666 13 4
	Carried to Summary at end	£299,664	£	245,195		£	226,366 14 0
<b>Gore Farm (Upper) Hospital.</b>							
1883 June 22	Purchase of site ...	13,175	58	13,175	1883	3 $\frac{1}{2}$	7,954 0 0
1883 Oct. 25	Purchase of additional land	125	57	125	1883	3 $\frac{1}{2}$	76 13 10
1884 Apr. 23	Boundary walls ...	1,148	30	1,148	1884	3 $\frac{1}{2}$	306 2 8
1884 May 2	Ditto ...	332	30	332	1884	3 $\frac{1}{2}$	88 10 8
1884 June 19	Purchase of additional land and premises ...	2,500	57	2,500	1884	3 $\frac{1}{2}$	1,531 4 9
1884 July 10	Purchase of additional land	1,100	57	1,100	1884	3 $\frac{1}{2}$	673 15 3
1888 Apr. 19	Convalescent smallpox hospital ...	63,392	20	50,000	1888	3 $\frac{1}{2}$	5,000 0 0
			20	8,392	1889	3 $\frac{1}{2}$	1,258 16 0
1893 Nov. 17	Additional accommodation	30,507	30	30,500	1894	3 $\frac{1}{2}$	18,300 0 0
1896 June 22	Staff blocks, laundry, &c.	32,120	25	32,120	1897	2 $\frac{3}{4}$	20,556 16 0
1897 Dec. 27	Enlargement of rain-water reservoir ...	1,655	20	1,596	1898	2 $\frac{7}{8}$	957 12 0
1902 Feb. 14	Additional buildings ...	39,500	10	24,000	1902	3 $\frac{3}{8}$	14,400 0 0
				15,500	1902	3 $\frac{3}{8}$	9,300 0 0
	Carried to Summary at end	£185,554	£	180,488		£	80,403 11 2
<b>Gore Farm (Lower) Hospital.</b>							
1902 Feb. 14	Buildings, fittings, &c. ...	134,500	10	134,500	1902	3 $\frac{3}{8}$	80,700 0 0
1903 Mar. 13	Ditto ditto ...	500	10	500	1903	3 $\frac{3}{8}$	350 0 0
	Carried to Summary at end	£135,000	£	135,000		£	81,050 0 0

† Amount of unexpended balances applied as per Table B, p. 128.

## APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &amp;c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
<b>Smallpox Hospitals. Ships.</b>							
1881 Nov. 10	Fitting up and furnishing "Atlas" & "Endymion"	11,000	5	11,000	1881	3½	Repaid.
1883 June 15	Purchase of "Castalia" ...	5,500	15	5,500	1883	3½	Repaid.
1883 Aug. 16	Purchase of land ...	1,000	57	1,000	1883	3½	613 19 10
1883 Sep. 25	Alterations to "Castalia"	12,000	10	12,000	1883	3½	Repaid.
1883 Dec. 11	Administrative buildings	8,800	30	4,000	1884	3½	1,066 13 4
	Construction of pier ...		30	4,800	1884	3½	1,280 0 0
1883 Dec. 28	Land for roadway, &c. ...	500	57	500	1884	3½	306 17 0
1884 Feb. 18	Machinery and fittings at administrative buildings	1,800	15	1,800	1884	3½	Repaid.
1884 Feb. 29	"Castalia" — ventilating, heating, and mooring ...	7,025	10	7,024	1885	3½	Repaid.
1884 May 27	Construction of gangway to connect "Castalia" and "Endymion" ...	*1,427	10	*578	1885	3½	*Repaid.
1884 June 23	Additional administrative buildings ...	1,108	15	258	1885	3½	Repaid.
	Fences ...		15	542	1885	3½	Repaid.
	Additional administrative buildings ...		30	250	1885	3½	75 0 0
1884 Oct. 1	Construction of roadway ...	2,025	30	1,975	1885	3½	586 10 0
1884 Oct. 16	Additional expenditure, alterations to "Castalia"	1,630	10	1,630	1886	3½	Repaid.
1885 June 13	Purchase of "Atlas" ...	14,900	20	8,400	1885	3½	Repaid.
	Purchase of "Endymion" ...		20	6,500	1885	3½	Repaid.
1885 July 27	Additional administrative buildings ...	6,800	30	6,528	1886	3½	1,818 17 6
	Carried to Summary at end	£75,515	£	74,285		£	5,747 17 8
<b>Smallpox Hospitals. Long Reach.</b>							
1902 Feb. 14	Buildings, fittings, &c. ...	57,000	10	57,000	1902	3¾	34,200 0 0
1903 Mar. 23	Pier head buildings ...	2,940	30	2,700	1903	3¾	2,430 0 0
1904 Mar. 26	Pontoon and landing stage	8,288	10	7,800	1904	3¾	6,238 0 0
			10	488	1905	3¾	439 8 0
	Carried to Summary at end	£68,228	£	67,988		£	43,307 8 0
<b>Smallpox Hospitals. Orchard.</b>							
1902 Feb. 14	Buildings, fittings, &c. ...	69,000	10	69,000	1902	3¾	41,400 0 0
1903 Mar. 13	Ditto ditto ...	54,000	10	54,000	1903	3¾	37,800 0 0
	Carried to Summary at end	£123,000	£	123,000		£	79,200 0 0
<b>Smallpox Hospitals. Joyce Green.</b>							
1894 Aug. 23	Purchase of site ...	22,500	50	22,350	1894	3½	16,986 0 0
1896 July 25	Construction of tramway ...	5,250	20	5,200	1898	2¾	3,120 0 0
1896 Nov. 9	Boundary fence ...	1,450	20	1,450	1898	2¾	870 0 0
1899 Feb. 8	Redemption of tithe-rent charges ...	3,175	25	2,945	1899	2¾	2,111 2 6
	Redemption of land tax ...		30	230	1899	2¾	176 6 8
1899 Aug. 31	Purchase of additional land	1,440	50	1,440	1901	3½	1,296 0 0
	Carried forward ...	£33,815	£	33,615		£	24,559 9 2

\* Less amount of unexpended balance of loan authorised to be applied towards defraying cost of certain work, see Table A, p. 137.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c.,  
and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
	<b>Smallpox Hospitals.</b>						
	<b>Joyce Green (continued).</b>						
	Brought forward ...	33,815		33,615			24,559 9 2
1900 Apr. 30	Buildings, fittings, &c. ...	246,000	30	100,000	1901	3½	83,333 6 8
				75,000	1902	3½	65,000 0 0
				71,000	1902	3½	61,532 17 4
		11,100	15	11,100	1904	3½	9,620 0 0
				21,000	1902	3½	18,199 17 4
1902 Jan. 13	Buildings (additional) ...	79,468	30	50,000	1902	3½	43,332 8 0
				6,500	1904	3½	6,070 0 0
				1,968	1905	3½	1,902 8 0
1905 Jan. 9	Internal painting ...	7,000	5	7,000	1905	3½	5,600 0 0
	Carried to Summary at end	£377,383	£	377,183		£	319,150 6 6
	<b>Belmont Stables.</b>						
1906 Apr. 24	Erection of stables and other buildings ...	5,280	20	5,280	1906	3½	5,280 0 0
	Carried to Summary at end	£5,280	£	5,280		£	5,280 0 0
	<b>Eastern Ambulance Station.</b>						
1895 Sep. 11	Nurses' quarters, &c. ...	2,645	30	2,645	1896	2¾	1,763 6 8
	Carried to Summary at end	£2,645	£	2,645		£	1,763 6 8
	<b>North-Western Ambulance Station.</b>						
1895 June 28	Purchase of part of site ...	925	30	925	1896	2¾	616 13 4
1896 May 30	Purchase of remainder of site ...	3,907	30	3,907	1896	2¾	2,604 13 4
1896 June 13	Erection of station ...	15,422	30	15,422	1896	2¾	10,281 6 8
	Carried to Summary at end	£20,254	£	20,254		£	13,502 13 4
	<b>Western Ambulance Station.</b>						
1892 Mar. 30	Reconstruction and enlargement of station ...	3,800	20	3,800	1892	3½	1,140 0 0
	Carried to Summary at end	£3,800	£	3,800		£	1,140 0 0
	<b>South-Western Ambulance Station.</b>						
1895 Sep. 30	Purchase of lease of site ...	2,000	50	2,000	1896	2¾	1,600 0 0
1897 Feb. 3	Erection of station ...	*14,290	30	*13,976	1897	2¾	*9,783 9 1
	Carried to Summary at end	£16,290	£	15,976		£	11,383 9 1
	<b>South-Eastern Ambulance Station.</b>						
1904 Jan. 1	Additional accommodation for nurses ...	1,900	20	1,800	1904	3½	1,620 0 0
	Carried to Summary at end	£1,900	£	1,800		£	1,620 0 0
	<b>Brook Ambulance Station.</b>						
1894 Nov. 27	Erection of station ...	*16,408	30	*16,408	1896	2¾	*10,938 7 0
	Carried to Summary at end	£16,408	£	16,408		£	10,938 7 0

\* Less amounts of unexpended balance of loans authorised to be applied towards defraying cost of certain works, see Table A, p. 137.



## APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &amp;c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
1903 Mar. 13	<b>Mead Ambulance Station.</b> Erection of station ... ..	28,500	10	28,500	1903	3½	19,950 0 0
	Carried to Summary at end	£28,500	£	28,500		£	19,950 0 0
1901 Sept. 28	<b>Tooting Bec Ambulance Station.</b> Erection of station ... ..	1,983	30	1,567	1905	3½	1,514 15 4
	Carried to Summary at end	£1,983	£	1,567		£	1,514 15 4
	<b>South Wharf.</b>						
1883 Nov. 21	Purchase of wharf ... ..	13,000	57	13,000	1883	3½	7,978 6 4
1884 Jan. 21	Construction of pier ... ..	4,400	30	4,400	1884	3½	1,173 6 8
1893 Aug. 29	Shelters for patients... ..	1,737	5	1,737	1894	3½	Repaid.
1894 June 8	Ditto ... ..	271	5	263	1894	3½	Repaid.
1895 Aug. 22	Staff quarters ... ..	8,181	30	8,181	1896	2½	5,454 0 0
1898 Mar. 26	Smallpox shelter ... ..	919	5	875	1899	2½	Repaid.
1901 Mar. 1	Male staff quarters ... ..	7,331	30	3,807	1901	3½	3,172 1 10
				3,524	1902	3½	3,054 2 0
1903 Mar. 13	Receiving and isolation wards, staff quarters, &c.	8,110	10	8,110	1903	3½	5,677 0 0
	Carried to Summary at end	£43,949	£	43,897		£	26,508 16 10
	<b>North Wharf.</b>						
1884 Jan. 21	Purchase of wharf ... ..	6,500	57	3,500	1884	3½	2,147 18 7
	Construction of pier ... ..		30	3,000	1884	3½	800 0 0
1884 Aug. 28	Construction of roadway... ..	410	15	60	1885	3½	Repaid.
			30	350	1885	3½	105 0 0
1885 June 26	Fencing, paving, &c. ... ..	515	10-15	515	1886	3½	134 12 6
1885 July 2	Piermaster's house and other buildings ... ..	1,340	30	1,340	1886	3½	350 7 6
1903 Mar. 13	Detention shelter, staff change rooms, &c. ... ..	790	10	790	1903	3½	553 0 0
	Carried to Summary at end	£9,555	£	9,555		£	4,090 18 7
	<b>West Wharf.</b>						
1884 Apr. 26	Purchase of wharf ... ..	4,500	56	4,500	1885	3½	2,807 4 6
1884 Nov. 14	Ditto ... ..	1,000	56	1,000	1885	3½	623 16 9
1885 Aug. 24	Construction of pier ... ..	2,500	30	2,500	1886	3½	833 6 8
1885 Dec. 16	Construction of river walling and other works	6,207	30	5,947	1886	3½	1,980 16 8
			10	260	1886	3½	Repaid.
	Carried to Summary at end	£14,207	£	14,207		£	6,245 4 7
	<b>River Ambulance Steamers.</b>						
1883 June 22	"Red Cross"—Construction, fitting up, &c. ... ..	4,630	15	4,630	1883	3½	Repaid.
1884 Mar. 22	"Maltese Cross"—Construction, fitting up, &c. ... ..	5,500	10	5,500	1885	3½	Repaid.
1884 May 27	"Albert Victor"—Purchase money ... ..	3,150	10	3,150	1885	3½	Repaid.
	Carried forward ... ..	£13,280	£	13,280			Repaid.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
	<b>River Ambulance Steamers (continued).</b>	£	Years.	£		£	£ s. d.
	Brought forward ...	13,280		13,280			Repaid.
1884 June 16	"Maltese Cross"—Fitting up, &c. (balance) ...	360	10	360	1885	3½	Repaid.
1884 Sep. 1	"Marguerite"—Purchase money ...	1,075	10	1,075	1885	3½	Repaid.
1894 Mar. 12	"Geneva Cross"—Construction, fitting up, &c.	9,750	15	9,750	1894	3½	1,950 0 0
1895 Feb. 12			15	1,230	1896	2½	410 0 0
1896 Sep. 8	"White Cross"—Construction, fitting up, &c. ...	2,042	15	2,042	1897	2¾	395 5 2
1903 Mar. 13	"Red Cross"—Purchase money ...	8,100	10	8,100	1903	3¾	5,670 0 0
	Carried to Summary at end	£35,837	£	35,837		£	8,425 5 2
	<b>Training Ship "Exmouth."</b>						
1876 July 13	Fitting up ship ...	16,000	20	14,000	1876	3¾	Repaid.
1876 Dec. 6	Purchase of brigantine ...	2,000	20	2,000	1877	3¾	Repaid.
1877 July 17	Fitting up ship (additional)	4,000	15	3,000	1878	3¾	Repaid.
	Erection of causeway ...		51	1,000	1878	3¾	466 0 0
1884 June 24	Construction of swimming bath and boat-house ...	2,700	15	2,700	1886	3½	Repaid.
1885 July 1	Installation of electric light	1,664	10	1,664	1886	3½	Repaid.
1886 Apr. 14	Construction of swimming bath, &c. ...	729	10	729	1886	3½	Repaid.
1897 Feb. 22	Purchase of Sherfield House and grounds at Grays ...	2,870	30	2,770	1897	2¾	1,939 0 0
1901 Apr. 25	Purchase of lease of Shipping Home, 24, Stainsby Road... ..	515	10	515	1901	3½	256 18 9
1904 May 31	Building new ship ...	63,000	30	30,000	1904	3½	28,000 0 0
1905 Apr. 22	Ditto (additional)...	1,350	30	33,000	1905	3½	31,900 0 0
1906 July 23	Purchase of lands and premises situate at Grays ...	5,500	30	1,350	1905	3½	1,305 0 0
	Carried to Summary at end	£100,228	£	100,228		£	69,366 18 9
	<b>High Wood School.</b>						
1898 Jan. 20	Purchase of site... ..	2,350	50	2,300	1898	2¾	1,932 0 0
	Buildings, furniture, &c.	100,820	30	25,000	1901	3½	20,833 6 8
			30	25,000	1902	3¾	21,666 13 4
1900 Feb. 17			30	35,000	1902	3¾	30,332 16 0
			15	15,000	1904	3¾	13,000 0 0
			15	1,200	1905	3½	1,120 0 0
			15	1,360	1906	3¾	1,360 0 0
1904 Jan. 27	Furnishing and equipment	1,617	5	1,617	1904	3¾	970 4 0
	Carried to Summary at end	£124,787	£	106,477		£	91,215 0 0
	<b>White Oak School.</b>						
1898 May 19	Purchase of site... ..	5,125	50	5,050	1899	3½	4,093 0 0
	Buildings ... ..	125,694	30	25,000	1901	3½	20,833 6 8
			30	25,000	1902	3¾	21,666 13 4
1901 Mar. 23			30	60,000	1902	3¾	51,998 16 0
			30	8,694	1903	3½	7,821 0 0
			15	1,000	1904	3¾	866 13 4
1903 July 29	Furniture and equipment	8,500	10	7,500	1904	3¾	5,998 0 0
	Carried to Summary at end	£139,319	£	132,244		£	113,277 9 4

## APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &amp;c., and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
<b>Bridge Industrial Home.</b>							
1900 Jan. 20	Purchase of premises ...	11,000	25	11,000	1901	3½	8,800 0 0
	Carried to Summary at end	£11,000	£	11,000		£	8,800 0 0
<b>The Downs School.</b>							
1900 Jan. 20	Purchase of premises ...	88,200	25	88,200	1902	3½	74,088 0 0
1902 Aug. 4	Laundry and fittings ...	13,650	15	3,000	1903	3½	7,568 0 0
	Carried to Summary at end	£101,850	£	99,800		£	2,400 0 0
<b>S. Anne's Home.</b>							
1897 Dec. 16	Purchase of home ...	17,100	25	16,000	1898	2½	10,880 0 0
	Carried to Summary at end	£17,100	£	16,000		£	10,880 0 0
<b>East Cliff House.</b>							
1898 Apr. 16	Purchase of house ...	9,450	30	8,300	1898	2½	6,086 13 4
1900 July 28	Extension of premises ...	9,020	30	9,020	1901	3½	7,516 13 4
	Carried to Summary at end	£18,470	£	17,320		£	13,603 6 8
<b>Millfield.</b>							
1899 Aug. 31	Purchase of site ...	850	50	850	1901	3½	765 0 0
			30	10,000	1902	3½	8,666 13 4
1901 Feb. 23	Buildings ...	20,500	30	9,600	1903	3½	8,640 0 0
			15	150	1904	3½	130 0 0
			15	393	1905	3½	366 16 0
1902 Nov. 4	Drainage and sewage works	698	30	698	1904	3½	648 16 0
1903 Oct. 7	Buildings ...	3,468	25	3,468	1904	3½	3,192 16 0
1904 Jan. 27	Furnishing and equipment	1,883	5	1,883	1904	3½	1,129 16 0
	Carried to Summary at end	£27,399	£	27,042		£	23,539 17 4
<b>Lloyd House.</b>							
1899 Aug. 31	Purchase of leasehold interest ...	650	12	†650	†	†	†268 4 3
	Carried to Summary at end	£650	£	650		£	268 4 3
<b>Elm Grove.</b>							
1899 May 4	Purchase of No. 16, Elm Grove ...	1,050	40	1,000	1899	3	825 0 0
	Carried to Summary at end	£1,050	£	1,000		£	825 0 0

† Amount of unexpended balances applied as per Table B, p. 138.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c.,  
and amount Outstanding, at 29th September, 1906 (continued).

Date of Sanction.	Purpose.	Amount Sanctioned	Period Sanctioned for.	Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Balance of Principal Outstanding 29th September, 1906.
		£	Years.	£		£	£ s. d.
<b>Kingwood Road Home.</b>							
1900 Feb. 13	Purchase of Nos. 60, 62, and 64, Kingwood Road	1,480	35	†1,480	†	†	†610 14 2
	Carried to Summary at end	£1,480	£	1,480		£	610 14 2
<b>Earlsfield Road.</b>							
1902 Jan. 7	Purchase of No. 81 ... ..	690	40	690	1902	3½	618 0 0
	Carried to Summary at end	£690	£	690		£	618 0 0
<b>Surrey House.</b>							
1902 Nov. 20	Purchase of No. 66, S. Ann's Hill ... ..	1,050	30	1,050	1903	3½	945 0 0
	Carried to Summary at end	£1,050	£	1,050		£	945 0 0
<b>Pentonville Road.</b>							
1900 Mar. 19	Purchase of leasehold interests of Nos. 70, 72, and 74 ... ..	1,500	30	†1,500	†	†	†618 19 3
1901 Dec. 21	Adaptation ... ..	2,037	10	2,034	1902	3½	1,220 8 0
	Carried to Summary at end	£3,537	£	3,534		£	1,839 7 3
<b>Harrow Road.</b>							
1901 Aug. 1	Purchase of leasehold and occupier's interests of Nos. 203 and 205 ... ..	2,900	40	2,815	1902	3½	2,531 0 0
1902 Mar. 11	Adaptation ... ..	960	10	900	1902	3½	540 0 0
	Carried to Summary at end	£3,860	£	3,715		£	3,071 0 0
<b>Camberwell Green.</b>							
1899 May 17	Purchase of No. 37, Camberwell Green... ..	1,280	36	1,230	1899	3	990 16 8
1899 Sep. 26	Purchase of Nos. 36 and 38, Camberwell Green... ..	2,250	36	2,250	1899	3	1,812 10 0
1901 Dec. 21	Adaptation ... ..	1,716	10	1,716	1902	3½	1,029 12 0
	Carried to Summary at end	£5,246	£	5,196		£	3,832 18 8
<b>Office of the Board.</b>							
1897 Aug. 24	Purchase of site... ..	53,250	50	53,000	1897	2½	43,456 3 6
1898 Feb. 23	Construction of foundations	3,400	30	3,400	1898	2½	2,493 6 8
1898 Mar. 31	Buildings ... ..	40,000	30	40,000	1898	2½	29,333 6 8
1901 Feb. 21	Redemption of land tax ...	700	50	700	1901	3½	630 0 0
1901 Apr. 27	Buildings ... ..	11,000	30	11,000	1901	3½	9,166 13 4
1902 Dec. 9	Expenses re and cost of closing railway tunnel ventilator... ..	3,209	50	3,200	1903	3½	3,008 0 0
	Carried to Summary at end	£111,559	£	111,300		£	88,087 10 2

† Amount of unexpended balances applied as per Table B, p. 128.

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c., and amount Outstanding, at 29th September, 1906 (continued).

Unexpended Balances of Loans.

Table A.

Date of Sanction.	Purpose.	Amount Sanctioned.	Period Sanctioned for.	Unexpended balance of Amount Borrowed.	Year Borrowed.	Rate per cent. of Interest payable.	Amount of Unexpended Balance.	
							Principal Repaid.	Principal Outstanding 29th September, 1906.
	CATERHAM ASYLUM.	£	Yrs.	£ s. d.		£	£ s. d.	£ s. d.
1878 Apr. 18	Coal store, &c. ... ..	47	51	46 15 5	1878	3 $\frac{3}{4}$	25 13 4	21 2 1
1897 Aug. 4	Attendants' home ... ..	242	30	242 3 0	1898	2 $\frac{3}{4}$	64 11 4	177 11 8
	DARENTH ASYLUM.							
1895 May 15	Fire escape staircases ...	44	15	44 7 9	1896	2 $\frac{3}{8}$	29 11 8	14 16 1
	EASTERN HOSPITAL.							
1870 July 9	Buildings, furniture ... ..	3,102	59	3,102 0 0	1871	3 $\frac{7}{8}$	1,889 10 0	1,212 10 0
1875 May 13	Additions ... ..	27	52	26 18 10	1876	3 $\frac{3}{4}$	15 10 0	11 8 10
1878 Nov. 20	Mortuary ... ..	1,300	50	1,300 0 0	1879	3 $\frac{3}{4}$	728 0 0	572 0 0
	NORTH-WESTERN HOSPITAL							
1872 Mar. 6	Engineering work ... ..	75	58	75 0 11	1872	3 $\frac{7}{8}$	44 1 2	30 19 9
1897 Feb. 23	Additional staff accommodation ... ..	147	30	147 5 10	1898	2 $\frac{3}{4}$	39 5 4	108 0 6
	SOUTH-WESTERN HOSPITAL.							
1870 July 9	Buildings, fitting up, &c.	3,102	59	3,102 0 0	1871	3 $\frac{7}{8}$	1,889 10 0	1,212 10 0
1897 Dec. 27	Pavilion and reconstruction of drains ... ..	235	25	234 11 1	1898	2 $\frac{3}{4}$	75 1 4	159 9 9
	NORTHERN HOSPITAL.							
1893 Nov. 3	Medical superintendent's house ... ..	59	30	59 2 6	1894	3 $\frac{1}{2}$	23 13 0	35 9 6
	HOSPITAL SHIPS.							
1884 May 27	Construction of gangway to connect "Castalia" and "Endymion" ...	373	10	372 9 2	1885	3 $\frac{1}{2}$	372 9 2	Repaid.
	SOUTH-WESTERN AMBULANCE STATION.							
1897 Feb. 3	Erection ... ..	24	30	23 12 8	1897	2 $\frac{3}{4}$	7 1 9	16 10 11
	BROOK AMBULANCE STATION.							
1894 Nov. 27	Erection ... ..	192	30	192 8 10	1896	2 $\frac{7}{8}$	64 2 6	128 6 4
	Totals ... ..	8,969		8,968 16 0			5,268 0 7	3,700 15 5

APPENDIX X.—Statement of Sanctions to Borrow, amount Borrowed, &c., and amount Outstanding, at 29th September, 1906 (*continued*).

Unexpended Balances of Loans (*continued*).

Table B.

Application of amounts to the undermentioned purposes authorised by letter of the Local Government Board, dated 20th July, 1903.

Date of Sanction.	Purpose to which unexpended balances applied.	Amount Sanctioned.	Period Sanctioned for.	Amount not borrowed, but met by the application of unexpended balances as per Table A.	Amount of unexpended balance as per Table A, allocated proportionately as under.	
					Principal repaid.	Principal outstanding 29th September, 1906.
		£	Years.	£ s. d.	£ s. d.	£ s. d.
1900 July 31	NORTH-WESTERN HOSPITAL. Mains and wires for electric lighting (additional)... ..	1,280	10	1,200 0 0	704 16 9	495 3 3
1900 Jan. 18	WESTERN HOSPITAL. Furniture for new buildings	2,929	5	2,638 16 0	1,550 0 9	1,088 15 3
1898 Mar. 5	NORTHERN HOSPITAL. Nurses' home, &c. ... ..	1,500	30	1,500 0 0	881 0 9	618 19 3
1899 Aug. 31	LLOYD HOUSE. Purchase of leasehold interest	650	12	650 0 0	381 15 9	268 4 3
1900 Feb. 13	KINGWOOD ROAD. Purchase of Nos. 60, 62, & 64, Kingwood Road... ..	1,480	35	1,480 0 0	869 5 10	610 14 2
1900 Mar. 19	PENTONVILLE ROAD. Purchase of leasehold interests of Nos. 70, 72, & 74, Pentonville Road ... ..	1,500	30	1,500 0 0	881 0 9	618 19 3
	Totals ... ..	9,339		8,968 16 0	5,268 0 7	3,700 15 5

## APPENDIX XI.—Summary of Sanctions to Borrow, amount Borrowed, and amount Outstanding 29th September, 1906.

INSTITUTION.	Amount Sanctioned.	Amount Borrowed.	Balance of Principal Outstanding 29th Sept., 1906.		
	£	£	£	s.	d.
Central Stores (Land and premises at Peckham) ...	4,250	4,250	3,931	0	0
<b>Asylums—</b>					
Leavesden ... ..	227,508	224,713	102,671	12	8
Caterham ... ..	230,732	227,551	96,766	4	5
Darenth ... ..	343,125	334,058	99,795	15	4
Tooting Bec ... ..	339,230	309,998	255,003	12	8
Clapton ... ..	2,500	2,500	...	...	...
Belmont ... ..	132,000	131,560	112,597	0	0
<b>TOTALS FOR ASYLUMS ... ..</b>	<b>1,275,155</b>	<b>1,230,380</b>	<b>666,834</b>	<b>5</b>	<b>1</b>
<b>Hospitals—</b>					
Eastern ... ..	123,490	122,897	56,280	7	3
North-Eastern ... ..	175,299	175,147	123,145	4	6
North-Western ... ..	168,959	168,761	87,300	14	3
Western ... ..	238,071	225,150	114,731	13	0
South-Western ... ..	163,615	163,439	73,374	10	10
Fountain ... ..	155,868	155,103	18,120	0	0
Grove ... ..	271,315	271,106	177,899	6	8
South-Eastern ... ..	274,185	262,506	181,760	1	4
Park ... ..	274,439	274,439	170,285	4	4
Brook ... ..	317,656	317,551	198,874	17	4
Northern ... ..	197,589	194,479	78,055	15	5
Southern ... ..	299,664	245,195	226,366	14	0
Gore Farm (Upper) ... ..	185,554	189,488	80,403	11	2
Do. (Lower) ... ..	135,000	135,000	81,050	0	0
Smallpox—Hospital Ships ... ..	75,515	74,285	5,747	17	8
Do. Long Reach (Temporary) ... ..	68,228	67,958	43,307	8	0
Do. Orchard ... ..	123,000	123,000	79,200	0	0
Do. Joyce Green ... ..	377,383	377,183	319,150	6	6
<b>TOTALS FOR HOSPITALS ... ..</b>	<b>3,624,830</b>	<b>3,533,717</b>	<b>2,118,033</b>	<b>12</b>	<b>3</b>
<b>Belmont Stables ... ..</b>	<b>5,280</b>	<b>5,280</b>	<b>5,280</b>	<b>0</b>	<b>0</b>
<b>Land Ambulance Stations—</b>					
Eastern ... ..	2,645	2,645	1,763	6	8
North-Western ... ..	20,254	20,254	13,502	13	4
Western ... ..	3,800	3,800	1,140	0	0
South-Western ... ..	16,290	15,976	11,333	9	1
South-Eastern ... ..	1,900	1,800	1,620	0	0
Brook ... ..	16,408	16,408	10,938	7	0
Mead ... ..	28,500	28,500	19,950	0	0
Tooting Bec ... ..	1,983	1,567	1,514	15	4
<b>TOTALS FOR LAND AMBULANCE SERVICE ... ..</b>	<b>91,780</b>	<b>90,950</b>	<b>61,812</b>	<b>11</b>	<b>5</b>
<b>River Ambulance Service—</b>					
South Wharf ... ..	43,949	43,897	26,508	16	10
North Wharf ... ..	9,555	9,555	4,090	18	7
West Wharf ... ..	14,207	14,207	6,245	4	7
Steamers ... ..	35,837	35,837	8,425	5	2
<b>TOTALS FOR RIVER AMBULANCE SERVICE ... ..</b>	<b>103,548</b>	<b>103,496</b>	<b>45,270</b>	<b>5</b>	<b>2</b>
<b>Training Ship "Exmouth" ... ..</b>	<b>100,328</b>	<b>100,228</b>	<b>69,366</b>	<b>18</b>	<b>9</b>
<b>Children's Homes and Schools—</b>					
High Wood School ... ..	124,787	106,477	91,215	0	0
White Oak School ... ..	139,319	132,244	113,277	9	4
Bridge Industrial Home ... ..	11,000	11,000	8,800	0	0
The Downs School ... ..	101,850	99,800	84,056	0	0
S. Anne's Home ... ..	17,100	16,000	10,880	0	0
East Cliff House ... ..	18,470	17,320	13,603	6	8
Millfield ... ..	27,399	27,042	23,539	17	4
Lloyd Street ... ..	650	650	268	4	3
Elm Grove ... ..	1,050	1,000	825	0	0
Kingwood Road ... ..	1,480	1,480	610	14	2
Earlsfield Road ... ..	690	690	618	0	0
Surrey House ... ..	1,950	1,050	945	0	0
Pentonville Road ... ..	3,537	3,534	1,839	7	3
Harrow Road ... ..	3,860	3,715	3,071	0	0
Camberwell Green ... ..	5,246	5,196	3,832	18	8
<b>TOTALS FOR CHILDREN'S HOMES ... ..</b>	<b>457,488</b>	<b>427,198</b>	<b>357,381</b>	<b>17</b>	<b>8</b>
<b>Office of the Board ... ..</b>	<b>111,559</b>	<b>111,300</b>	<b>88,087</b>	<b>10</b>	<b>2</b>
<b>GRAND TOTALS ... ..</b>	<b>£ 5,774,218</b>	<b>5,606,799</b>	<b>3,415,998</b>	<b>0</b>	<b>6</b>

APPENDIX XII.—**Sanctions to Borrow not exercised 29th September, 1906.**

	£	£
Total amount sanctioned to be borrowed, as per Summary... ..	5,774,218	
<i>Less</i> total amount borrowed ... ..	5,606,799	
	<u>167,419</u>	
<i>Less</i> Balances of sanctions to borrow not likely to be required ...	74,059	
		93,360
Leaving unexercised and unexhausted sanctions to borrow as under :—		
	£	
Leavesden Asylum ... .. Sewage disposal works (additional)	670	
Tooting Bec Asylum ... .. Additional buildings ... ..	26,250	
Belmont Asylum ... .. Electric lighting and telephones ...	450	
South-Eastern Hospital ... .. Reconstruction of hospital... ..	11,678	
Southern Hospital ... .. Buildings, fittings, &c. ... ..	54,312	
		<u>£93,360</u>



## APPENDIX XIII.—Interest on Loans.

The average rate of interest per cent. per annum payable on the principal of loans outstanding 29th September, 1906, amounting to £3,415,998, is  $3\frac{1}{3}$ . The following table shows particulars of the amount borrowed, the amount repaid, and the amount outstanding at the various rates payable:—

Amount Borrowed.	Amount Repaid.	Amount Outstanding.	Rate per cent. per annum of Interest payable.
£	£	£	£
1,060,472	361,715	698,757	$2\frac{3}{4}$
372,699	218,291	154,408	$2\frac{1}{8}$
4,480	852	3,628	3
285,830	114,271	171,559	$3\frac{1}{8}$
5,050	957	4,093	$3\frac{1}{4}$
100,000	1,742	98,258	$3\frac{1}{2}$
1,147,790	260,227	887,563	$3\frac{3}{8}$
119,384	15,864	103,520	$3\frac{7}{8}$
1,141,965	558,521	583,444	$3\frac{1}{2}$
336,634	33,041	303,593	$3\frac{5}{8}$
392,845	214,275	178,570	$3\frac{3}{4}$
543,120	337,805	205,315	$3\frac{7}{8}$
38,930	22,646	16,284	$3\frac{11}{16}$
17,950	10,944	7,006	4
39,650	39,650	...	$4\frac{1}{2}$
<b>Total</b> £5,606,799	<b>£2,190,801</b>	<b>£3,415,998</b>	Average rate on outstanding loans } <b><math>3\frac{1}{3}</math></b>

APPENDIX XIV.—Statement of the Total Days' Maintenance, average number Special Expenditure and Head Office and Central

INSTITUTIONS.	Total number of days' maintenance.					Average number of inmates.				
	1906	1905	1904	1903	1902	1906	1905	1904	1903	1902
<b>Asylums (Imbecile)—</b>										
Leavesden ... ..	646,906	646,154	634,123	638,834	643,351	1,777	1,775	1,742	1,755	1,767
Caterham ... ..	685,937	702,171	705,311	701,556	702,795	1,884	1,929	1,938	1,927	1,931
Darenth ... ..	702,606	685,036	706,071	709,214	722,343	1,930	1,882	1,940	1,948	1,984
Tooting Bec ... ..	280,323	270,502	268,100	148,430	...	770	743	736	408	...
Rochester House ... ..	...	28,385	49,302	52,249	42,517	...	78	135	144	117
Belmont ... ..	90,472	18,172	...	...	...	249	50	...	...	...
Gore Farm ... ..	...	62,162	6,440	...	...	...	171	18	...	...
<b>TOTALS AND AVERAGES ... ..</b>	<b>2,406,244</b>	<b>2,412,582</b>	<b>2,369,347</b>	<b>2,250,283</b>	<b>2,111,006</b>	<b>6,610</b>	<b>6,628</b>	<b>6,509</b>	<b>6,182</b>	<b>5,799</b>
<b>Hospitals (Fever)—</b>										
Eastern ... ..	105,372	101,384	95,551	74,871	86,945	289	278	262	206	230
North-Eastern ... ..	159,981	159,141	122,413	116,304	174,980	440	437	336	319	481
North-Western ... ..	118,188	104,442	95,533	110,989	161,448	325	287	262	305	444
Western ... ..	120,600	102,730	90,430	118,367	134,471	331	282	248	325	309
South-Western ... ..	99,688	100,838	77,911	97,145	108,938	274	277	214	267	299
Fountain ... ..	66,927	72,770	...	69,538	137,766	184	200	...	191	378
Grove ... ..	116,970	114,861	78,816	107,990	90,423	321	316	217	297	248
South-Eastern ... ..	20,790	...	23,490	79,370	97,419	57	...	65	218	268
Park ... ..	104,168	126,542	107,099	105,192	148,198	286	348	294	289	407
Brook ... ..	142,069	141,254	130,918	134,523	162,472	392	388	360	369	446
Northern ... ..	190,804	189,837	144,900	129,243	176,724	524	522	398	355	486
Gore Farm ... ..	226,676	22,348	...	...	298	623	61	...	...	1
London General Hospitals (in respect of M.A.B. enteric cases)	...	...	...	1,308	3,933	...	...	...	4	11
<b>TOTALS AND AVERAGES ... ..</b>	<b>1,472,733</b>	<b>1,236,147</b>	<b>967,061</b>	<b>1,144,840</b>	<b>1,484,015</b>	<b>4,046</b>	<b>3,396</b>	<b>2,656</b>	<b>3,145</b>	<b>4,077</b>
<b>Hospitals (Smallpox)—</b>										
Hospital Ships, Long Reach, and Joyce Green ... ..	949	3,172	19,551	12,461	95,643	3	9	53	34	263
Gore Farm ... ..	...	...	...	...	202,001	...	...	...	...	555
<b>TOTALS AND AVERAGES ... ..</b>	<b>949</b>	<b>3,172</b>	<b>19,551</b>	<b>12,461</b>	<b>297,644</b>	<b>3</b>	<b>9</b>	<b>53</b>	<b>34</b>	<b>818</b>
<b>Homes and Schools (Children)—</b>										
High Wood ... ..	91,975	86,061	5,073	...	...	253	236	14	...	...
White Oak ... ..	88,058	95,755	119,834	57,786	...	242	263	329	159	...
Bridge ... ..	23,298	50,248	55,764	57,085	55,481	64	155	153	157	152
The Downs ... ..	142,625	145,132	146,968	78,293	...	392	399	404	215	...
S. Anne's ... ..	43,807	45,362	40,429	41,513	42,222	120	125	111	114	116
East Cliff ... ..	41,632	45,293	35,867	32,875	29,468	114	124	99	90	81
Millfield ... ..	26,942	22,940	6,518	...	...	74	63	18	...	...
Lloyd Street ... ..	9,114	8,179	8,556	8,052	8,839	25	22	23	22	24
Elm Grove ... ..	4,588	4,531	4,256	4,628	4,576	13	12	12	13	13
Kingwood Road ... ..	7,385	7,198	7,297	6,667	7,245	20	20	20	18	20
Earlsfield Road ... ..	3,306	3,150	2,789	336	...	9	9	8	1	...
Surrey House ... ..	5,408	5,347	4,020	...	...	15	15	11	...	...
Pentonville Road ... ..	9,421	8,726	8,914	9,304	5,594	26	24	24	26	15
Harrow Road ... ..	3,443	3,272	3,355	4,190	2,740	9	9	9	11	8
Camberwell Green ... ..	7,440	6,628	7,263	7,141	5,394	21	18	20	20	15
<b>TOTALS AND AVERAGES ... ..</b>	<b>508,442</b>	<b>543,822</b>	<b>456,903</b>	<b>307,870</b>	<b>161,559</b>	<b>1,397</b>	<b>1,494</b>	<b>1,255</b>	<b>846</b>	<b>444</b>
Training Ship (Boys) ... ..	207,894	199,225	193,350	197,012	207,837	571	547	531	542	571
<b>Grand Totals ... ..</b>	<b>4,596,262</b>	<b>4,394,948</b>	<b>4,006,212</b>	<b>3,912,466</b>	<b>4,262,061</b>	<b>12,627</b>	<b>12,074</b>	<b>11,004</b>	<b>10,749</b>	<b>11,709</b>



## ANNUAL REPORT OF THE WORKS COMMITTEE FOR 1906.

1st January, 1907.

**Engineer-in-  
chief's  
Department**(i.) Cost of  
works carried  
out during  
1906.

During the past twelve months works to the approximate value of £72,180 have been carried out under the supervision of the Engineer-in-chief. Of this amount, £48,849 represents the value of engineering works and repairs (exclusive of the cost of repairs to the approximate value of £15,000, carried out by the staffs at the various institutions), and £23,331 the value of building works and repairs, of which £13,626 was for cleaning and painting works. Of the total amount thus expended, £63,892 represented the value of works carried out by contract, and the balance that of works carried out by direct labour.

(ii.) Head Office  
staff.

No change of importance has taken place during the year in the *personnel* of the staff in the Engineer-in-chief's department at the head office, the numerical strength (25) and constitution of which still remain as at the end of 1905.

**Proposed  
Central  
Stores.**

In our last annual report we stated that the planning and erecting on a modified scale of new central stores and needleroom, on land acquired for the purpose at Peckham Rye, had been placed in the hands of Messrs. T. W. Aldwinckle & Son, architects.

On the 3rd March last the Contract Committee submitted to the Board revised plans which had been prepared under our directions by the architects, and which provided for a considerable reduction in (a) the floor area of the stores, and (b) the proposed accommodation in the needleroom. These plans were duly adopted and forwarded to the Local Government Board, who have recently stated that they will be prepared to approve of the plans subject to the reconsideration by the Managers of certain details. Subsequently, however, a question was raised as to the necessity for a new central needleroom of the capacity proposed, and pending the settlement of this question the erection both of this needleroom and of the central stores remains in abeyance.

## IMBECILE ASYLUMS.

**Leavesden Asylum.**

Female attendants' home and cottages for married attendants—  
Cost on completion.

On the 3rd March last we reported to the Board that the total cost on completion of this home, which provides accommodation for 42 members of the staff, had been £6,206 3s. 11d., or £2,293 16s. 1d. less than the amount (£8,500) sanctioned by the Local Government Board, a result which was mainly due to the fact that the amount of the accepted tender was £1,000 below the architects' estimate; the omission of a portion of the proposed connecting corridor, and other economies accounting for the balance of the difference between the estimated and actual expenditure.

On the same date we reported that the 22 cottages for married attendants which had been erected at Tanner's Hill in the neighbourhood of the asylum, in accordance with plans prepared by the Engineer-in-chief, had been carried out at a total cost of £6,637 2s. 6d., or £37 2s. 6d. in excess of the contract sum; the total amount sanctioned by the Local Government Board and expended by the Managers in respect of the erection of these cottages having been £6,830.

**Caterham Asylum.**

Upholsterers' shop.

As far back as the 10th January, 1903, the Managers, upon the recommendation of the Asylums Committee, approved of a proposal to provide at this asylum upholsterers', shoemakers', and tailors' shops of an improved character, and we were instructed to deal with the matter. Circumstances having, in the meantime, arisen which in the opinion of the Asylums Committee rendered the provision of shoemakers' and tailors' shops unnecessary, we submitted to the Board, on the 17th March last, a plan prepared by the Engineer-in-chief for the erection of an upholsterers' shop at an estimated cost of £1,450. The Managers, however, declined to approve the plan, as they were not satisfied that a new building was necessary.

**Darenth Asylum.**

(i.) Alterations and additions to laundry.

In August and September last the Managers accepted tenders, amounting in value to £4,201 3s. 8d., for certain building and engineering works necessary for the adaptation of the two laundries at this asylum to the requirements of the patients and staff of the whole institution, under the scheme now in force for training patients.

(ii.) Work-shops.

The Local Government Board having declined to sanction the erection of new workshops for staff-artisans and working patients, and for a new fire station, in accordance with plans which had previously been submitted to them, and having stated that they would not be prepared to sanction an expenditure of more than £3,500 on the scheme, modified plans fulfilling the Local Government Board's requirements and suggestions were submitted to and approved by the Managers in October last, and have since received the Local Government Board's sanction.

**Tooting Bec Asylum.**

Additional buildings.

In June last (after it had been decided, with the Local Government Board's concurrence, to abandon the proposed supplementary male staff block, and to increase slightly the proposed additional female staff accommodation) the Managers accepted the tender of Messrs. J. Garrett & Son

for the erection at this asylum of two additional infirmary blocks, a supplementary staff block, and a recreation hall, in accordance with plans prepared by the Engineer-in-chief, at the sum of £31,295.

The satisfactory progress which had been made with the erection of these buildings at the close of the year affords every reason for the belief that they will be available for the reception of patients in August or September next.

**Belmont Asylum.**

(i.) Adaptation of remaining buildings.

On the 26th May last we submitted to the Board sketch plans which had been prepared by Messrs. Thomas Dinwiddy & Sons, architects, for the adaptation of the remaining portion (formerly known as the boys' school section) of the buildings at this asylum for the accommodation of 523 imbecile male patients and the necessary staff. In the preparation of these plans the following main principles had been observed, viz.: (i.) the utilisation of as many of the existing buildings as are reasonably suitable; (ii.) the limitation as much as possible of the erection of new buildings; and (iii.) the retention of all old buildings, the demolition of which is at present unnecessary. The cost of this modified scheme (which was in substitution of a more extensive scheme, of which plans had previously been submitted to us by Messrs. Dinwiddy) is estimated approximately at £69,500, exclusive of the cost of machinery and engineering works, estimated by the Engineer-in-chief at £22,600.

Plans of this modified scheme were still before the Local Government Board at the end of the year.

(ii.) Architects' commission in respect of partially abandoned scheme.

The partial abandonment of the scheme previously prepared by the architects, and estimated to cost £126,959, exclusive of machinery and engineering works, and the necessity of remunerating the architects for preparing the rejected plans were the cause of considerable correspondence, extending over a period of several months, between the Works Committee and the architects, who eventually agreed, with the approval of the Board, to accept the sum of £1,750 in full discharge of their claim.

(iii.) Adaptation of infants' school section. Cost of completion.

The total expenditure incurred in the adaptation of the first portion (*i.e.*, the late infants' school) of this asylum was £19,355 15s. 4d., or £1,725 15s. 4d. in excess of the amount sanctioned by the Local Government Board. This excess was largely due to the character of the work involved, it being difficult to specify definitely, at the time the specification was prepared, the exact nature of the alterations and other works which would have to be carried out, more particularly in regard to the drainage and gas and water mains and pipes. This portion of the buildings accommodates 336 patients.

### INFECTIOUS HOSPITALS AND RIVER AMBULANCE SERVICE.

**South-Eastern Hospital.**

(i) Completion of reconstruction works.

The works involved in the reconstruction of this hospital (on which the Local Government Board have sanctioned an expenditure of £135,200), in accordance with the plans prepared by Messrs. T. W. Aldwinckle & Son, architects, were practically completed in July last, when the hospital was re-opened for the reception of patients.

(ii.) **Additional boiler power.** During the early part of the year the Managers accepted tenders, amounting in value to £3,529 (exclusive of the cost, estimated at £570, of the necessary alterations to the boiler house) for the provision and fixing of three multi-tubular boilers, with settings and mechanical stokers, together with the necessary fittings, &c. The installation of this type of boiler was rendered necessary by the fact that under the new conditions which the reconstruction of the hospital and the alterations in the system of heating the wards had created the whole of the heating and hot water supplies of the hospital had to be dealt with from a central point, whilst the wards, instead of being heated as they formerly were, partly by radiators and partly by open fireplaces, had to rely entirely upon the radiators for their heating.

It is estimated by the Engineer-in-chief that the substitution of these three multi-tubular boilers for the four existing Lancashire boilers will effect a total saving on the hospital coal bill of about £1,200 per annum.

**Southern Hospital.** Towards the close of the year we were enabled to report that the work of erecting the various buildings at this hospital had been satisfactorily completed by the contractors, Messrs. W. Johnson & Co.

Completion of works.  
(i.) Main contract.

(ii.) **Subsidiary contracts.** In addition to the main contract, the completion of the following subsidiary contracts, which had been carried out under the supervision of the Engineer-in-chief, was also reported during the year, viz.: (a) Laundry machinery and kitchen fittings by Messrs. T. Potter & Sons, at a total cost of £3,292 12s. 8d., against the contract sum of £3,249; and (b) Electric light installation, telephones, and fire alarms by Messrs. Buchanan & Curwen, at a total cost of £8,523 18s. 3d. (including the lighting of the entrance road at a cost of £180 15s., which was not contemplated, or provided for, in the contract), as against the contract sum of £8,400.

(iii.) **Roads and paths.** When the roads and paths at this hospital were originally planned a system of tramways for the distribution of food and supplies to the various buildings was contemplated, and provision was made for the construction of these tramways in Mr. T. Adams' contract for the formation of roads and paths. Unforeseen difficulties having, however, subsequently presented themselves, we decided to abandon the construction of the proposed tramway lines, the saving thus effected being estimated by the architects at about £1,700.

**North-Eastern Hospital.**  
Proposed new boiler-house, workshops, coal storage, &c.

To meet the wishes of the Local Government Board, who had raised objections on the ground of expense to the scheme previously submitted to them, we arranged for the preparation of a revised scheme for the erection of a new boiler-house, coal stores and workshops at this hospital at a reduced cost of £14,100; but, in consequence of the Local Government Board's representations that (in their opinion) there was no immediate necessity for the proposed new workshops; that the suggested arrangement of the boiler-house and also that of the coal store and other auxiliary buildings could be considerably improved; and that the experience of another winter should be awaited before any further installation was proceeded with; we

instructed the Engineer-in-chief to reconsider the scheme in the light of these criticisms, and hope shortly to be in a position to submit to the Managers plans of a modified scheme at a cost of about £12,000.

**North-Western Hospital.** On the 27th October last the Managers accepted the tender of Messrs. J. Simpson & Co. for carrying out works for the utilisation of exhaust steam under the Warren-Webster system at this hospital, at a total cost of £534, with a guaranteed saving of £68 per annum. In addition to the monetary saving thus set forth, it is anticipated that about 6,000 gallons weekly of distilled water, which previously ran to waste, will be retained, and, by reducing the cost of cleaning, will be of great benefit to the steam boilers.

**South-Western Hospital.** In July last the Managers accepted the tender of Messrs. T. J. Hawkins & Co. for converting two wards at this hospital into cubicles for isolation purposes at a cost of £1,562 3s., these works forming part of a general scheme of isolation in infectious wards at the Board's hospitals, as detailed in a report which the Hospitals Committee had previously submitted to the Board. The works were completed and the two wards were handed over to the hospital authorities on the 31st December.

**Antitoxic serum.** In February last the Managers approved a plan prepared by Messrs. T. W. Aldwinckle & Son, architects, for the erection, at an estimated cost of £4,600, of stables and other buildings at Belmont, in connection with the production of antitoxic serum, and on the 4th August last they accepted the tender of Messrs. J. & W. Drake for the erection of the necessary buildings at a cost of £4,912 10s. The total amount sanctioned by the Local Government Board, in respect of these buildings, including architects' and quantity surveyors' charges, clerk of works' salary, contingencies, &c., was £5,280.

**(ii.) Laboratory at Peckham.** In June last the Managers, upon our recommendation, approved plans which had been prepared by Messrs. T. W. Aldwinckle & Son, architects, upon instructions from the Hospitals Committee for the provision of diphtheria antitoxin and bacteriological laboratories on the Board's property at Peckham Rye, at an estimated cost of £7,090, exclusive of certain necessary internal fittings. The Local Government Board have, however, since raised certain objections to the scheme for the erection of these buildings at Peckham, and these objections are now under the consideration of the Hospitals Committee.

**Joyce Green Hospital.** Plans prepared by Messrs. Treadwell & Martin, architects, for the erection on the Joyce Green Hospital estate of 16 staff cottages, and for the provision of a goods reception station and a gate porter's lodge in connection therewith, at an estimated cost of £6,500, were approved by the Managers in July last, and after correspondence with the Local Government Board received their sanction towards the end of the year.

**Gore Farm Hospital.** Messrs. Dawson & Co.'s contract for heating with hot water 19 of the patients' blocks at this hospital was completed in July last at a cost of £4,334 14s. 6d. It is anticipated that these heating arrangements will not only result in the staff of porters being reduced from 12 to 3, but in a considerable annual saving in the cost of fuel.



**Minor works.** Among the more important of the minor works for which tenders were accepted during 1906 in connection with the infectious hospitals and river ambulance service may be instanced (i.) relaying certain floors at the Eastern Hospital (£209 10s.); (ii.) provision of a filter to the rain-water reservoir at the North-Eastern Hospital (£397); (iii.) conversion of architect's old office into staff cubicles at the Fountain Hospital (£275); (iv.) road repairs at Joyce Green Hospital (£1,396); (v.) woodwork and other kitchen fittings at the Southern Hospital (£320); (vi.) dry-docking pontoon (£297) and repairs to pier brow (£563 13s.) at Long Reach; and (vii.) repairs to pontoon at West Wharf (£275).

#### INSTITUTIONS FOR CHILDREN.

**High Wood School.** In March last we were enabled to report that the total cost on completion of this school, which was opened for the reception of patients in July, 1904, had been £105,507 15s. 8d., of which £91,911 10s. 2d. was for the buildings and works in connection therewith (including the making of roads and paths and laying out of grounds), and the balance for architects', landscape architects' and quantity surveyors' charges, clerks of works' wages, &c. The amount sanctioned by the Local Government Board in respect of the erection and equipment of the school was £123,420, so that the actual expenditure incurred was £17,912 4s. 4d. less than the estimated expenditure.

**The Downs School.** In August last the Managers accepted the tender of Messrs. Dargue, Griffiths, & Co. for the installation of wiring for electric lighting purposes at this school, in accordance with the plans and specification prepared by the Engineer-in-chief, at a cost of £2,407, and these works were approaching completion at the end of the year.

**East Cliff House.** The necessity for the provision of additional staff accommodation at this home having been established we submitted to the Board March last plans which had been prepared by the Engineer-in-chief for the provision of this accommodation at an estimated cost (including all charges) of £690. The Local Government Board have, however, since stated that they think that all necessary accommodation could be provided for £500, and we have therefore slightly modified the plan previously sent up, and have invited tenders for the work with a view of ascertaining whether the same can be carried out at less than the estimated cost.

**Lightning conductors.** On the advice of the Engineer-in-chief, we have arranged for the whole of the lightning conductors at the several institutions to be put into efficient condition, which, together with certain alterations in some instances to bring the conductors to the level of thoroughly approved methods of construction, has cost £201 17s.

**Appendices.** We submit the usual appendices relating to the various contracts and works carried out under our supervision during the year 1906.

(Signed) J. THORNLEY,  
Chairman.

## APPENDIX I.

Statement showing principal ENGINEERING WORKS carried out by contract (c) and by direct labour (D) under the Engineer-in-chief during 1906 :—

Institution.	Nature of Works.	Cost.		
		£	s.	d.
Leavesden Asylum .. ..	c New feed pump at gas works .. ..	12	0	0
	c Repairing steam boiler at gas works .. ..	19	0	0
	c New boiler at gas works .. ..	165	0	0
	D Kitchen alterations and new steam main ..	156	0	0
	c New boiler for No. 3 block .. ..	23	0	0
	D Brickwork for ditto .. ..	25	0	0
	D New steeping room .. ..	101	0	0
	D Revising heating and ventilation of airing rooms in laundry .. ..	26	0	0
Darent Asylum .. ..	D Revising water supplies in connection with spray lavatory basins, &c. .. ..	50	0	0
	c New exhaustor plant at gas works .. ..	127	0	0
	c Repairs to gas exhausting plant .. ..	64	0	0
	c Alterations to gas main .. ..	19	0	0
	c Alterations to water-softening plant .. ..	352	0	0
	D Alterations to water main .. ..	107	0	0
	D Repairs to laundry machinery .. ..	50	0	0
c Repairs to Cornish boilers .. ..	235	0	0	
Tooting Bec Asylum .. ..	c Alterations to fire-alarm wires .. ..	15	0	0
	c Repairs to gas generators and silencers ..	27	0	0
	c Repairs to electric mains .. ..	37	0	0
Belmont Asylum .. ..	c Guards for pipes and radiators .. ..	282	0	0
	c New boiler feed pump .. ..	48	0	0
	c Electric lighting to new gate-porter's office at south entrance .. ..	13	0	0
	c Provision of disinfectant .. ..	306	0	0
Eastern Hospital .. ..	c Lighting new boiler house .. ..	39	0	0
	c Wiring new sorting room .. ..	13	0	0
	c New boiler house and laundry alterations ..	3,606	0	0
	c New boiler feed pump .. ..	10	0	0
	c Laundry machinery guards .. ..	10	0	0
North-Eastern Hospital ..	c Repairing temporary chimney shaft .. ..	26	0	0
North-Western Hospital ..	c Fire-alarm electrical control .. ..	12	0	0
	c Repairs to lightning conductors .. ..	18	0	0
	c Heating bathrooms .. ..	100	0	0
	c New heater for hot-water circuits .. ..	52	0	0
	c New boiler (administrative block) .. ..	38	0	0
	c Fitting new boiler at nurses' home .. ..	56	0	0
c Repairs to Cornish boilers .. ..	137	0	0	
Western Hospital .. ..	c Repairing reducing valves .. ..	11	0	0
	c New enamelled wash troughs .. ..	31	0	0
	c Revising laundry hot-water supply .. ..	11	0	0
	c Laundry machinery guards .. ..	12	0	0
	c Engineer's tools .. ..	189	0	0
	c Alterations to disinfectant .. ..	49	0	0
South Western Hospital ..	c Repairs to lightning conductors .. ..	28	0	0
	c Heating lower administrative block .. ..	113	0	0
	c Repairing laundry machines .. ..	16	0	0

Institution.	Nature of Works.	Cost.			
		£	s.	d.	
Grove Hospital . . . . .	c Relagging heaters and pipes . . . . .	12	0	0	
	c Repairs to mechanical stokers . . . . .	11	0	0	
	c Extension to telephone system . . . . .	25	0	0	
Fountain Hospital . . . . .	c Repairs to lightning conductors . . . . .	18	0	0	
	c Telephones . . . . .	25	0	0	
South-Eastern Hospital . . . . .	c Repairs to lightning conductors . . . . .	19	0	0	
	c Installation of electric light, &c. . . . .	4,999	0	0	
	c Additional lighting in electrical work . . . . .	25	0	0	
	c Spares for ventilating fans, &c. . . . .	25	0	0	
	c Engineer's tools . . . . .	25	0	0	
	c Gas meters . . . . .	14	0	0	
	c Laundry alterations . . . . .	2,100	0	0	
	c Fire-service appliances . . . . .	173	0	0	
	c Fire guards . . . . .	69	0	0	
	c Repairs to boiler flue and shaft . . . . .	17	0	0	
	c New boiler installation . . . . .	2,300	0	0	
	c Water softeners, &c. . . . .	1,200	0	0	
	Park Hospital . . . . .	c Repairs to mechanical stokers . . . . .	12	0	0
		c Electric lighting of grounds and boiler house . . . . .	61	0	0
Brook Hospital . . . . .	c Covering heaters and pipes . . . . .	135	0	0	
	c Alterations to mechanical stokers . . . . .	14	0	0	
Northern Hospital . . . . .	c Locating and rectifying fault in underground electric mains . . . . .	17	0	0	
	c Repairs to lightning conductors . . . . .	18	0	0	
	c Heating No. 1 pavilion . . . . .	115	0	0	
Southern Hospital . . . . .	c Wire guards for windows . . . . .	35	0	0	
	c Engineer's tools . . . . .	52	0	0	
	c External water mains and storage tanks, fire service heating and hot-water supplies . . . . .	13,500	0	0	
	c Boilers, engine, pumps, storage tanks, vacuum apparatus, and water softeners, feed heaters, &c., and destructor . . . . .	6,400	0	0	
Joyce Green Hospital . . . . .	c Laundry machinery, kitchen apparatus, and disinfecter . . . . .	3,290	0	0	
	c Fitting up ambulance car . . . . .	58	0	0	
Gore Farm Hospital . . . . .	c Heating nineteen patients' blocks . . . . .	4,335	0	0	
	c Radiator and pipe guards . . . . .	1,887	0	0	
	c Erecting wrought-iron gates . . . . .	100	0	0	
	c Erecting four coke stores . . . . .	19	0	0	
	c Repairs to steam-jacketed pans . . . . .	22	0	0	
	c Fixing injector washing machine . . . . .	27	0	0	
	c Alteration to telephone system . . . . .	17	0	0	
South-Western Ambulance Stn	c Electric lighting . . . . .	24	0	0	
	c Electric motor for workshop . . . . .	59	0	0	
	c Lighting of stores . . . . .	11	0	0	
South-Eastern Ambulance Stn.	c Electric lighting . . . . .	300	0	0	
Brook Ambulance Station . . . . .	c Alterations to electric lighting . . . . .	20	0	0	
T.S. Exmouth . . . . .	c Additions to fire appliances . . . . .	29	0	0	
	c Gas disinfecter . . . . .	44	0	0	
High Wood School . . . . .	D Fixing flannel washer in laundry . . . . .	12	0	0	
White Oak School . . . . .	c Boiler cleaning . . . . .	10	0	0	
The Downs School . . . . .	c Boiler cleaning . . . . .	10	0	0	
	D Alterations to fire grates . . . . .	30	0	0	
Pentonville Remand Home . . . . .	c Alterations to drying closet . . . . .	28	0	0	
Head Office . . . . .	c Repairs to heating apparatus . . . . .	18	0	0	
Various Institutions . . . . .	c Testing lightning conductors . . . . .	21	0	0	

## APPENDIX II.

Statement showing principal BUILDING and SIMILAR WORKS carried out by contract (c) and by direct labour (D) under the Engineer-in-chief during 1906.

Institution.	Nature of Works.	Cost.		
		£	s.	d.
Leavesden Asylum .. ..	c Sewage works .. .. .	3,625	0	0
Darenth Asylum .. .. .	c Repairs to chimney shaft .. .. .	42	0	0
	D Drains to gasman's cottage .. .. .	77	0	0
	c Cleaning and painting .. .. .	256	0	0
	D Repairs to tar-paving .. .. .	498	0	0
Tooting Bec Asylum .. ..	c Repairs at ambulance station .. .. .	16	0	0
	c Cleaning and painting .. .. .	694	0	0
	c Repairs to tar-paving .. .. .	79	0	0
Eastern Hospital .. .. .	D Cleaning and painting .. .. .	711	0	0
	c Relaying ward floors .. .. .	210	0	0
	D Fixing stoves .. .. .	77	0	0
North-Eastern Hospital ..	D Cleaning and painting .. .. .	2,054	0	0
North-Western Hospital ..	c Cleaning and painting .. .. .	1,049	0	0
	c Gateway to medical superintendent's house from Fleet Road .. .. .	10	0	0
	c Repairs to tar-paving .. .. .	99	0	0
	D Underpinning annexe of ward 9 .. .. .	63	0	0
	c Renewing entrance gates .. .. .	33	0	0
Western Hospital .. .. .	D Cleaning and painting .. .. .	897	0	0
	c Drainage works .. .. .	88	0	0
	c Repairs to paving .. .. .	19	0	0
	c Extension of boundary wall .. .. .	210	0	0
	c Plastering rooms 9 to 11 and steward's w.c. .. .. .	22	0	0
	c New lavatory basins .. .. .	29	0	0
South-Western Hospital . .	D Cleaning and painting .. .. .	660	0	0
	c Repairing work to D block .. .. .	82	0	0
Grove Hospital .. .. .	c Cleaning and painting .. .. .	360	0	0
	c Repairs to tar-paving .. .. .	57	0	0
	c Box-room to medical superintendent's house .. .. .	10	0	0
	D Repairs to floor in staff quarters .. .. .	19	0	0
Fountain Hospital .. .. .	D Cleaning and painting .. .. .	2,068	0	0
	c Replacing manhole covers .. .. .	19	0	0
	c Conversion of architect's old office to staff quarters .. .. .	283	0	0
South-Eastern Hospital ..	c Repairs to laundry .. .. .	197	0	0
Park Hospital .. .. .	c Repairs to drainage of maids' home .. .. .	17	0	0
	c Cleaning and painting .. .. .	1,732	0	0
	c Erecting coal screen by laundry .. .. .	66	0	0
	c Repairing drains, medical superintendent's house .. .. .	20	0	0
Brook Hospital .. .. .	c Relaying drains by heater room .. .. .	181	0	0
	c Cleaning and painting .. .. .	263	0	0

Institution.	Nature of Works.	Cost.		
		£	s.	d.
Northern Hospital .. .. .	D Repairs to fencing .. .. .	469	0	0
	D Repairs to chimney stacks .. .. .	42	0	0
	C Repairs to main chimney shaft .. .. .	30	0	0
	C Cleaning and painting .. .. .	1,000	0	0
	D Underpinning pavilion No. 4 .. .. .	37	0	0
	D Fitting seats over hot water pipes in No. 1 pavilion .. .. .	10	0	0
	C Cleaning out pond .. .. .	85	0	0
Joyce Green Hospital .. .. .	C Painting works .. .. .	150	0	0
Long Reach Hospital .. .. .	C Overhauling docking, &c., pontoon .. .. .	301	0	0
Orchard Hospital .. .. .	C Painting roofs .. .. .	525	0	0
	C Painting of buildings .. .. .	555	0	0
Gore Farm Hospital .. .. .	C Repairing struts to huts .. .. .	12	0	0
	C Repairing bath hut .. .. .	46	0	0
	C Drainage to cottages .. .. .	200	0	0
	C Urinals to "J," "K," and "L" blocks .. .. .	44	0	0
	C Repairing roofs at lower hospital .. .. .	38	0	0
South Wharf .. .. .	C Paving works .. .. .	22	0	0
North Wharf .. .. .	C Repairs to No. 28, Coldharbour .. .. .	15	0	0
West Wharf .. .. .	C Repairs to dolphins .. .. .	335	0	0
Eastern Ambulance Station ..	C New gulleys in yard .. .. .	14	0	0
Western Ambulance Station..	C Fixing new slop sink .. .. .	12	0	0
Brook Ambulance Station ..	C Fixing new pavement lights .. .. .	14	0	0
Mead Ambulance Station ..	C Painting roof over carriage shelter .. .. .	40	0	0
T.S. Exmouth .. .. .	C New tank and supply pipes .. .. .	53	0	0
	C Sanitary work .. .. .	150	0	0
Shipping Home .. .. .	C Cleaning and painting .. .. .	78	0	0
High Wood School .. .. .	C Cleaning and painting .. .. .	368	0	0
	C Fixing spray baths .. .. .	150	0	0
White Oak School .. .. .	C Tar paving and drainage .. .. .	786	0	0
	C Ventilating floors .. .. .	71	0	0
	C Cleaning and painting .. .. .	351	0	0
The Downs School .. .. .	C Alterations to meat store .. .. .	45	0	0
S. Anne's Home .. .. .	C Repairs to laundry plant .. .. .	22	0	0
East Cliff House .. .. .	C Painting works .. .. .	67	0	0
	C Repairs to tar-paving, &c. .. .. .	20	0	0
Lloyd House .. .. .	C Cleaning and painting .. .. .	29	0	0
No. 12, Lloyd Street .. .. .	C Painting and cleaning .. .. .	34	0	0
Surrey House .. .. .	C New w.c.'s .. .. .	37	0	0
Pentonville Road .. .. .	C Cleaning and painting .. .. .	45	0	0
	C Sanitary repairs .. .. .	22	0	0
Harrow Road .. .. .	C Repairs to roofs .. .. .	20	0	0

## APPENDIX III.

Contracts entered into by the Managers during the year 1906 for works to be carried out under the supervision of the Works Committee:—

Institution.	Nature of Works.	Professional Advisers.	Contractors.	Amounts of Contract.
				£ s. d.
Belmont Asylum .. .. .	(i.) Wire guards for radiators and pipes (ii.) Drainage of certain residences into public sewer .. .. .	Engineer-in-chief .. T. Dinwiddy & Sons ..	F. Bird & Co. .. .. J. B. Potter .. ..	279 11 6 168 0 0
Darenth Asylum .. .. .	(i.) Building alterations in laundries .. (ii.) Engineering alterations in laundries (iii.) Cleaning and painting .. .. .	Engineer-in-chief .. Do. .. Do. ..	T. Knight .. .. D. & J. Tullis, Ltd. .. Woollaston Bros. ..	1,316 3 8 2,885 0 0 256 0 0
Tooting Bec Asylum .. .. .	(i.) Two patients' blocks, hall, and additional female staff quarters.. (ii.) External cleaning and painting ..	Do. .. Do. ..	J. Garrett & Son .. .. L. Kazak .. ..	31,295 0 0 724 8 0
Brook Hospital .. .. .	(i.) Non-conducting covering for additional heaters and pipes .. .. (ii.) Cleaning and painting .. .. .	Do. .. Do. ..	J. W. Kitson .. .. T. Quartermaine .. ..	136 4 7 255 16 0
Eastern Hospital .. .. .	Relaying floors .. .. .	Do. ..	W. Payne .. ..	209 10 0
Fountain Hospital .. .. .	Conversion of old architect's office into cubicles .. .. .	Do. ..	J. Nicks & Co. .. ..	275 0 0
Gore Farm Hospital .. .. .	(i.) Re-drainage of porter's lodge and four cottages .. .. . (ii.) Road repairs .. .. .	Do. .. W. Harston .. ..	Road Maintenance & Stone Supply Co. .. .. F. Miskin, Ltd. .. ..	199 19 9 100 0 0
Grove Hospital .. .. .	Cleaning and painting .. .. .	Engineer-in-chief ..	A. Porter .. ..	364 0 0
North-Eastern Hospital .. .. .	Filter for rain-water reservoir .. ..	Do. ..	W. S. Shepherd & Co. ..	397 0 0
North-Western Hospital .. .. .	(i.) Utilisation of exhaust steam (ii.) Cleaning and painting .. .. .	Do. .. Do. ..	J. Simpson & Co. .. .. Exors. of J. Arundel .. ..	534 0 0 1,038 11 4

Institution.	Nature of Works.	Professional Advisers.	Contractors.	Amounts of Contract.
				£ s. d.
Northern Hospital .. .. .	(i.) Oak for fencing .. .. . (ii.) Iron posts for fencing .. .. . (iii.) Cleaning and painting .. .. . (iv.) Cleaning and painting (to complete R. Woollaston & Co.'s contract) (v.) Heating in pavilion No. 1 .. .. .	Engineer-in-chief Do. Do.	J. & S. Agate, Ltd. .. .. . Howard Bros. .. .. . R. Woollaston & Co. .. .. .	170 10 0 107 0 0 1,350 0 0
Park Hospital .. .. .	Cleaning and painting and repair of covered ways .. .. .	Do.	A. H. Inns .. .. .	1,737 0 0
Smallpox Hospitals .. .. .	(i.) Cleaning and painting .. .. . (ii.) Repair of roads on west side .. .. . (iii.) Securing pier brow .. .. . (iv.) Repairing, re-painting, and dry-docking the pontoon .. .. .	Do. Do. Do. Do.	W. J. Simms & Sons .. .. . Road Maintenance and Stone Supply Co. Chafen & Newman .. .. . W. C. Reeder & Co. .. .. .	150 0 0 1,396 0 0 563 13 0 297 0 0
South-Eastern Hospital .. .. .	(i.) Installation of water-tube boilers, with mechanical stokers .. .. . (ii.) Incidental engineering in connection with boiler installation .. .. . (iii.) Cleaning, painting, and channelling in laundry .. .. . (iv.) Cleaning and painting in old buildings .. .. .	Do. Do. Do. T. W. Aldwinckle & Son	Babcock & Willcox .. .. . J. & F. May .. .. . T. Quartermaine .. .. . G. Godson & Sons .. .. .	2,259 0 0 1,270 0 0 193 0 0 980 0 0
South-Western Hospital .. .. .	(i.) Adaptation of two wards as isolation cubicles .. .. . (ii.) Heating in lower administrative block .. .. .	Do. Engineer-in-chief	T. J. Hawkins & Co. .. .. . Cannon & Hefford .. .. .	1,562 3 0 112 0 0
Southern Hospital .. .. .	Woodwork fittings in kitchen .. .. .	Do.	W. Johnson & Co. .. .. .	320 0 0
Antitoxin Buildings at Belmont .. .. .	Erection .. .. .	T. W. Aldwinckle & Son	J. & W. Drake .. .. .	4,912 10 0

Institution.	Nature of Works.	Professional Advisers.	Contractors.	Amounts of Contract.
				£ s. d.
West Wharf .. ..	Repairs of pontoon and dolphins ..	Engineer-in-chief ..	Chafen & Newman ..	275 0 0
High Wood School .. ..	(i.) Provision of infants' baths .. (ii.) Cleaning and painting ..	Do. Do.	W. J. Snuggs .. Wollaston Bros. ..	149 10 0 350 0 0
White Oak School .. ..	Cleaning and painting .. ..	Do.	W. Hussey .. ..	267 0 0
The Downs School .. ..	Wiring, &c., for electric lighting and X-ray apparatus .. ..	Do.	Dargue, Griffiths & Co. ..	2,407 0 0



## ANNUAL REPORT OF THE CONTRACT COMMITTEE FOR 1906.

6th March, 1907.

We present our annual report for the year 1906.

**Number of contracts entered into and their approximate value.**

The total number of contracts entered into by the Board at our instance during the year was upwards of 800, and the aggregate value represented by the more important of them was approximately £279,000. The following statement shows the contracts referred to, classified :

	Number of Contracts.	Approximate Total Value.
For Provisions ... ..	466	£ 164,400
For Necessaries ( <i>i.e.</i> , soap, soda, oilman's goods, paints, } varnishes, drugs, &c.) ... ..	81	21,500
For Stores Goods ( <i>i.e.</i> , linen and woollen goods, clothing, } uniforms, ironware, tinware, boots and shoes, brooms, } brushes, &c.) ... ..	133	24,100
For Coal and Coke (delivery included) ... ..	81	69,000
	761	£279,000

In addition to the contracts mentioned in the foregoing statement, 69 contracts were entered into for (*a*) builders', smiths', and engineers' ironmongery and electrical sundries, (*b*) surgical and laboratory appliances, (*c*) basket and brush making materials, (*d*) seeds, plants, and other farm and garden requisites required from time to time at certain of the Board's institutions, and (*e*) the cartage of soda, which is contracted for in bulk, ex wharf, and distributed by the Contract Department. It is impracticable to give any reliable estimate of the total amount represented by these contracts, as the demand for the supplies they cover fluctuates considerably.

**Supplemental and emergency supplies of stores goods.**

In addition to the formal contracts above-mentioned, it was necessary to make supplemental arrangements for various supplies of goods to enable the Central Stores to meet requisitions from the Board's institutions. The total value of those additional supplies was about £730, spread over seven purchases.

In view of certain difficulties experienced early in the year in obtaining various descriptions of Stores goods urgently required for the re-equipment at short notice of certain hospital accommodation, we, on the 23rd June, reported to the Board as follows :—

“Owing to the special character of the Board's work, particularly that portion dealing with infectious disease, it not infrequently happens that circumstances (such as the re-opening at short notice of a hospital or part of a hospital) arise which necessitate the immediate supply of large quantities of Stores goods. As these emergencies cannot be foreseen, it sometimes happens that great difficulty is experienced in supplying the quantities of goods required with the necessary degree of promptitude. If the stock at the Central Stores is not sufficient to meet the demands the goods must be ordered from the contractors, and reasonable time must be allowed for their supply—which in the case of many kinds of goods means sufficient time to allow of their being made—and until that time has expired no purchase can be made against the contractor. It would not be advisable, even if it were practicable, to maintain at the Stores such a stock as would meet all demands in such emergencies ; we have, therefore, considered what other course likely to reduce such difficulties could be adopted. As a result, we submit the following recommendation :

“That the Contract Committee be authorised, any existing Order of the Board to the contrary notwithstanding, to make a special purchase, outside any contract which may be current, in any case where the Board's requirements may necessitate a prompt supply of Stores goods, and such goods are not in stock at the Central Stores, cannot be obtained from the contractor within the required time, and cannot be purchased against him because he has not had reasonable time in which to supply them.”

The Board adopted our recommendation, and, consequently, in any future case of difficulty in obtaining goods urgently required, through the ordinary contract channels, we can under that authority meet requirements in other and more expeditious ways.

**Supply of miscellaneous articles not included in current contracts.**

During the year, in accordance with what is now the established general practice, 550 requisitions were received by the Contract Department from the various central and other committees and their sub-committees for the supply of miscellaneous articles required at the institutions, but not included in periodical contracts. In upwards of 200 cases the articles required were supplied by transfers from surplus stock at various institutions, thus bringing into beneficial use goods which might otherwise have lain unused indefinitely. The remaining requisitions were fulfilled in the usual course by purchases from manufacturers and others, under the special arrangements made for dealing with such cases. The total value of the goods so purchased was about £2,400.

**Coal supplies.** The year 1906 was the fifth year of the system of obtaining coal supplies from collieries direct, and we are pleased to be able to record our continued satisfaction with that system, both as regards the quality and price of the coal supplied and the general working of the system. The latter we may mention was severely tested at the close of the year, when the sudden setting in of severe weather resulted in exceptionally heavy and urgent orders for coal for the Board's institutions. Notwithstanding the difficulties which practically all collieries were experiencing about that time owing to shortage of coal wagons, to delays on rail owing to Christmas traffic and other causes, and to the generally increased demand for coal for the London market, all the collieries under contract with the Board made exceptional, and we are happy to say successful, efforts to keep the Board's institutions supplied, although they could, owing to the remarkable rise in the market prices, have made considerable profit by selling their coal elsewhere. To give an idea of the efforts made we may mention that one colliery alone supplied to the Board over 1,000 tons of steam coal per week at the time of greatest pressure, although their contract is only for about 20,000 tons of steam coal for the whole year.

We would here remind the Board that when the system of obtaining coal from collieries direct was instituted, it was arranged that all the larger institutions should each year, commencing in the autumn, gradually accumulate a sufficient reserve stock of coal to fall back upon in the event of any interference with supplies during the winter. We regard compliance with that arrangement as most important, and we trust that all committees concerned will see that it is carried out every year without fail. The reserve stock should only be maintained during the winter months, and should be gradually decreased as the spring advances.

In March, 1906, the Board received from the Society of Coal Merchants a letter expressing "the feeling of injustice which the members of this Society have in consequence of the refusal of the Board to accept tenders for the supply of . . . coals from London merchants," and stating that "as ratepayers, they have to contribute to the support of the asylums, and they think it very unfair that they should be shut out of all chance of competing for the contracts of the Asylums Board." That letter was referred to us, and on the 12th May we submitted to the Board a report dealing with it and generally with the whole question of the Board's coal supplies.

Our report reviewed the history of the present system of obtaining supplies from its inception in May, 1902, stating the reasons which led us to adopt that system, and recapitulating the more important facts, as to financial and other advantages, stated in our previous reports to the Board on the matter. The report also contained the following paragraphs :—

"Recently, at the request of the Hospitals Committee, we investigated the results, so far as the Board's hospitals are concerned, of the present system of obtaining coal supplies, as compared with the former system, and on the 21st March, 1906, we forwarded to the Hospitals Committee a detailed statement showing that during the four years the present system had been in force, a total reduction of £8,700 had taken place in the cost of the coal consumed at the Board's hospitals, as compared with the four preceding years under the former system. From that it will be seen that the saving

shown to have resulted during the first two years from the introduction of the present system has been maintained, as, in addition to the hospitals dealt with in the statement above-mentioned, all the other large establishments of the Board, except the training ship Exmouth and the River Ambulance Service, are included in the system, and share proportionately in its benefits.

“ We may add that the engineer-in-chief, in a report dated 16th March, stated: ‘ I find that there have been fewer complaints since buying coal direct from collieries than when the merchants supplied it in earlier years. I also find that complaints when made are more readily attended to under the present conditions than under the old. . . . I am strongly of opinion that the average quality of the coal bought under the present system is higher than was the case under the old system ’ ”

After consideration of that report the Board resolved—

“ That the Society of Coal Merchants be informed, in reply to their letter of the 30th March, 1906, that the Board, after full investigation and consideration of the whole question, are satisfied that it is distinctly in the interests of the metropolitan ratepayers at large that the Board’s coal supplies should be obtained as at present under direct contracts with colliery proprietors, and that the Board cannot see their way to depart from that system.”

**Adminis-  
tration of  
Central  
Stores.**

In our report for the year 1905 we gave particulars of the important changes made in April of that year in the administration of this establishment, and of their financial effect on the cost of such administration, which was an immediate reduction of £270 per annum in the total cost of staff. We also expressed our opinion that the changes would secure increased efficiency and protection of the Board’s interests.

In March and April, 1906, we reviewed in the fullest detail the working of the new system of administration, and after careful consideration unanimously decided that the change had proved distinctly advantageous to the Board, and that the arrangements then (and now) in force were satisfactory.

**Work of  
central  
needle-  
rooms.**

During the past year this establishment has been working at high pressure, many urgent requisitions for articles required for the Board’s institutions having been fulfilled. The total number of articles made during that period was upwards of 35,000, and a large proportion of them was required at short notice for the equipment of extended accommodation at the Board’s institutions, or for the re-equipment of accommodation required to be reopened. The total value of the articles made (including material, labour, and establishment charges) was about £3,200.

We may mention that whatever differences of opinion may exist as to the extent to which it is advisable to carry on a central needleroom permanently in future, we are satisfied from our experience during the past few years that in times of pressure from any cause, when articles of equipment are urgently required, the existence of a central needleroom, with the nucleus at least of an efficient staff of workwomen, is essential to the prompt, economical and satisfactory supply of the articles required. We find that in every case of pressure during the past five years the urgent demands have been met by the central needlerooms and not by those

of the individual institutions. Moreover, when at the time of the last smallpox epidemic articles of equipment (ordinarily made in institution needlerooms) were made both in the central needleroom and at a large clothing factory under a special arrangement with a contractor, it was found that the work done at the central needleroom was not only incomparably better than that done in the factory, but that on the whole the cost to the Board was less, notwithstanding the fair wages paid by the Board, and the comparative smallness of the establishment. In both cases the materials used were the same, so that no question of difference in wearing qualities on that account could arise.

**New  
central  
stores and  
needle-  
rooms.**

On the 3rd March, 1906, we submitted to the Board, pursuant to reference, and after conference with the Works Committee, revised plans of the proposed new central stores and needlerooms. These plans, as compared with those submitted to the Board in August, 1905, showed a reduction of the floor area of the stores by 18 per cent. They also showed needleroom accommodation for only 25 machinists, instead of for 50 as previously proposed. In consequence of those reductions and of certain modifications in the construction and general arrangement of the proposed buildings, the estimated total cost was reduced from £22,000 to £16,000.

In addition to those reductions, the revised plans showed such an alteration in the proposed position of the buildings on the site at Peckham Rye as would admit of the use of a portion of the ground as a site for the proposed bacteriological laboratories.

The Board having approved the revised plans, they were forwarded in due course to the Local Government Board for approval, but up to the present such approval has not been signified. We trust that the erection of the required buildings will be proceeded with as quickly as possible, as the introduction of certain important reforms decided upon in connection with various supplies awaits the completion of the new Stores, and the insufficient and inconvenient accommodation at the present Stores is a serious drawback to the efficient working of the system of central supplies. We would remind the Board that the site for the proposed new stores, &c., has been in their possession since July, 1903.

**Supplies of  
tea and  
coffee.**

In the latter part of the year 1906 we reviewed the system of purchasing tea and coffee periodically, in bulk, through brokers, on the open market, and after exhaustive inquiry and careful and prolonged consideration, we decided that with some slight modifications in practice (since put in force) the system is the best the Board can follow, the supplies of tea and coffee obtained in that way during the past 12 and 10 years respectively, having, we believe, been more satisfactory in every respect than those previously obtained in various other ways, and their total cost having been on an average considerably less than under previous arrangements.

**Analysis of  
supplies.**

On the 26th May, 1906, we reported to the Board on this matter as follows:—

“As the Board are aware from reports we have submitted to them from time to time, all contract conditions relating to supplies of provisions

and necessaries now contain a clause providing that goods supplied shall, wherever practicable, be subject to analysis from time to time, and that in all such cases the decision of the Board's analyst shall be final; also that in the event of an average sample of any delivery of goods being shown on analysis to be not in accordance with the contract, the whole cost of such analysis shall be chargeable against the contractor, and recoverable by action or otherwise.

"In connection with that clause we have recently considered the question of extending the system of analysing supplies hitherto in force, as we are of opinion that while such extension will necessarily entail increased expenditure, there will be a commensurate gain in the maintenance of a high quality of supplies. The Board's average annual total expenditure on provisions and necessaries is about £182,000, and of milk alone there are about 28,000 separate deliveries per annum at the Board's institutions. It will, therefore, be seen that a reasonable expenditure on systematic analytical testing is fully justifiable. We have accordingly adopted a scheme which, in our opinion, adequately provides for analyses of all classes of provisions (with special reference to milk) and necessaries, according to their relative importance, and we only await the Board's sanction to the increased expenditure before bringing that scheme into force."

We added that in view of the proposed extension of the Board's analytical work, we considered that a reduction in the rate of the analyst's fees should be obtained; that we had communicated with the analyst on the matter, and that he was prepared to agree to the reduction we proposed.

The Board thereupon authorised us to extend the system of analysing contract supplies in accordance with that report, and following that authority we instituted a system which provides for a frequent, regular, and thorough testing by analysis of all supplies capable of being so tested. The total number of samples of all kinds analysed during the year (*i.e.*, 6 months under the new system and 6 months under previous arrangements) was 824, of which 491 were samples of milk. Of these analyses, 208 (of which 156 were of milk) showed results below the contract requirements, and the contract conditions as to the rejection of unsatisfactory supplies and the charging of the cost of analysis against the contractor were duly enforced. Moreover, in cases of supplies of milk found to be below the legal standard (*viz.*, a total of 91), the assistance of the local authorities concerned was invoked, with a view to the prosecution of the offending contractors under the "Sale of Food and Drugs Act." It should be explained that the Board's contract standard for milk is .3 per cent. of milk fat higher than the legal standard, so that supplies may be below the contract standard without rendering the contractor liable to prosecution under that Act. In such cases, however, he incurs a record against him and the deduction of the cost of the analysis from his account.

(Signed) W. J. B. GRAHAM,  
*Chairman*

ANNUAL REPORT OF THE STATISTICAL COMMITTEE FOR THE  
YEAR 1906.

10th April, 1907.

We submit our report for the year 1906 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** (1.) During the year there were notified in the Metropolis 35,812  
**Statistics.** (33,293)\* cases of infectious disease. Of these, 30,023 (27,593) were legally admissible to the Managers' hospitals. The remainder—mainly cases of erysipelas and chickenpox, but including also 298 (292) cases of puerperal fever—were not admissible. Out of the admissible cases 25,213 (*vide* table, p. 165) (23,348)† or 84·0 (84·6) 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. 167, and slight decreases in the years 1895 and 1906) from 33·6 to 84·6 as follows:—

1890	..	..	..	33·6	per cent.
1891	..	..	..	36·7	„
1892	..	..	..	43·2	„
1893	..	..	..	36·9	„
1894	..	..	..	52·2	„
1895	..	..	..	50·3	„

\* Italic figures in brackets throughout are the corresponding figures for 1905.

† Excluding Tottenham and other Extra-metropolitan cases.

1896	..	..	..	52·4 per cent.
1897	..	..	..	58·5 „
1898	..	..	..	65·5 „
1899	..	..	..	68·1 „
1900	..	..	..	70·6 „
1901	..	..	..	74·7 „
1902	..	..	..	77·2 „
1903	..	..	..	78·9 „
1904	..	..	..	80·0 „
1905	..	..	..	84·6 „
1906	..	..	..	84·0 „

Table A, p. 164A, 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 1906.

The ratio of diphtheria to scarlet fever which, for several years prior to 1906, had shown a tendency to decrease, in 1906 showed an increase as compared with 1905 of from 1 to 3 to 1 to 2·5.

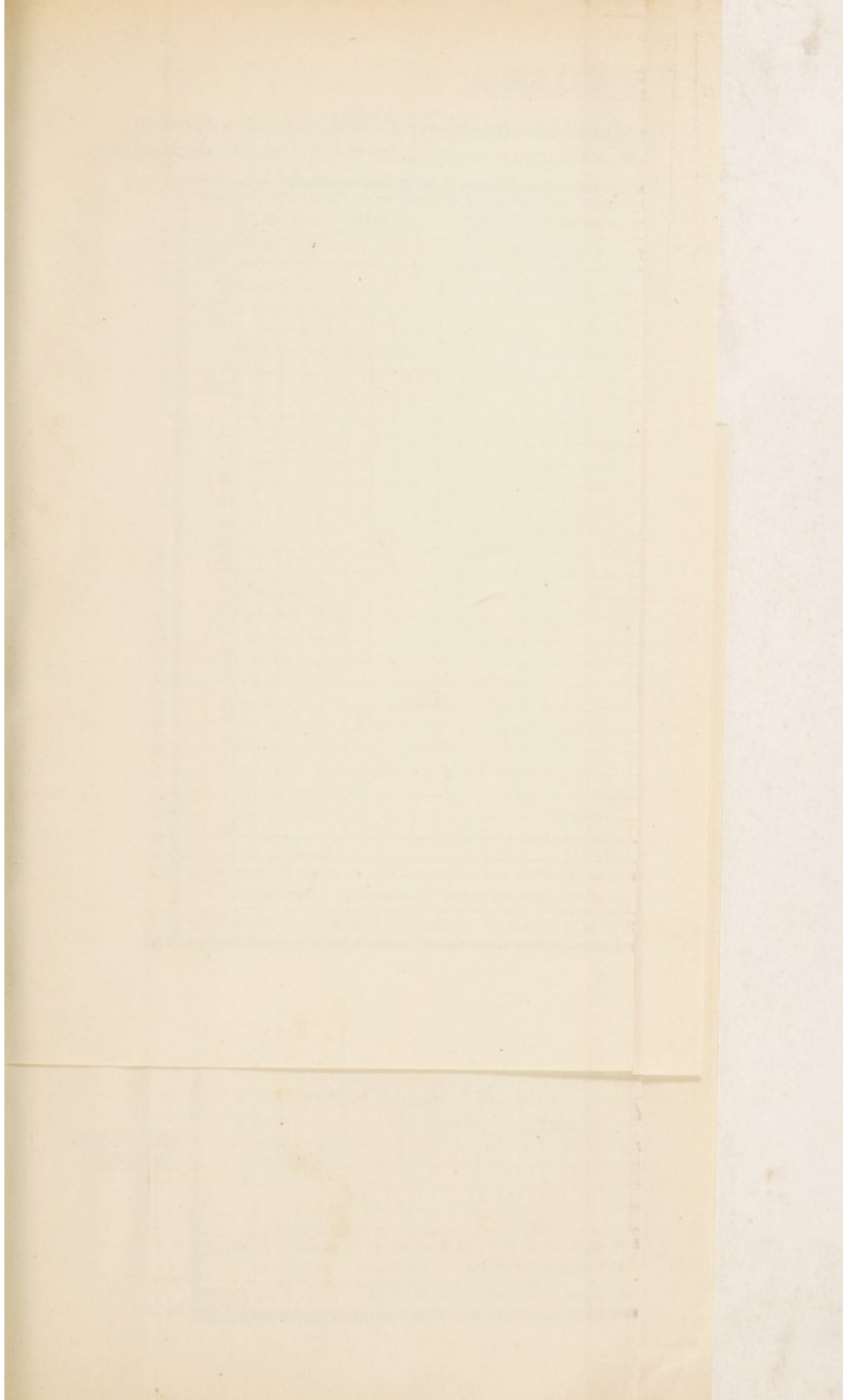
Chickenpox was a notifiable disease in the Borough of Bethnal Green until the 28th August.

Facing p. 165 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.





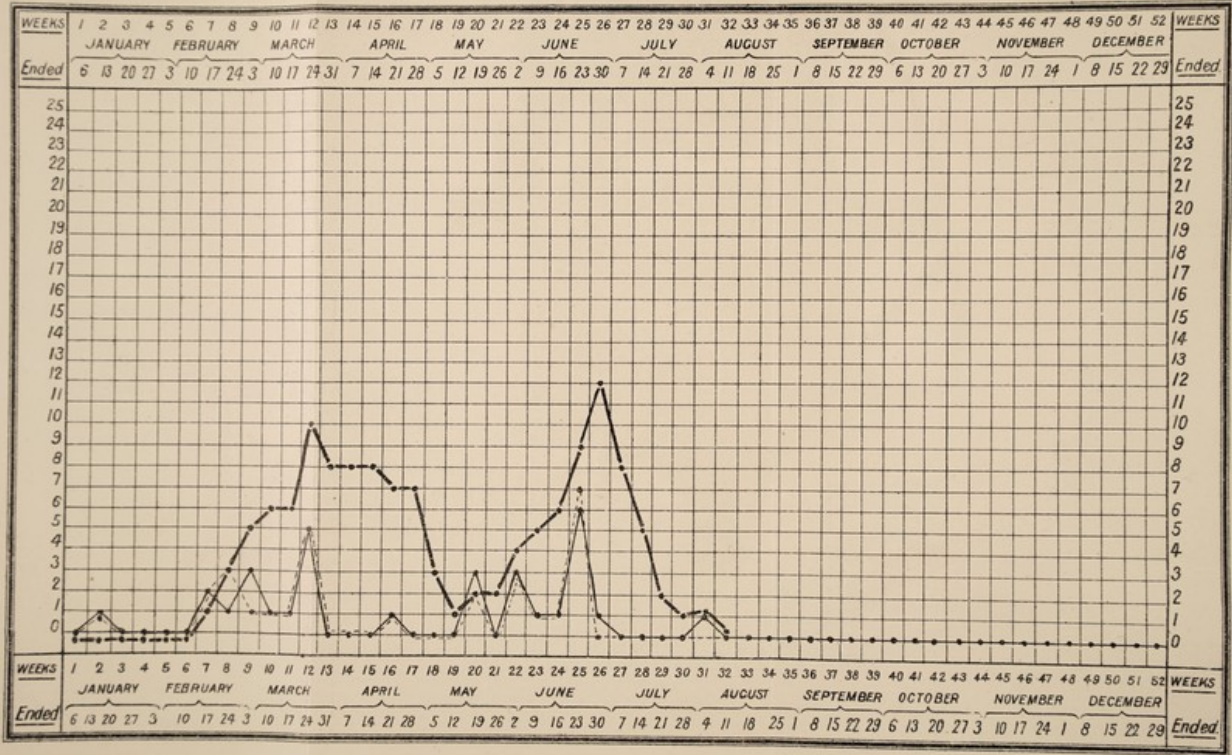


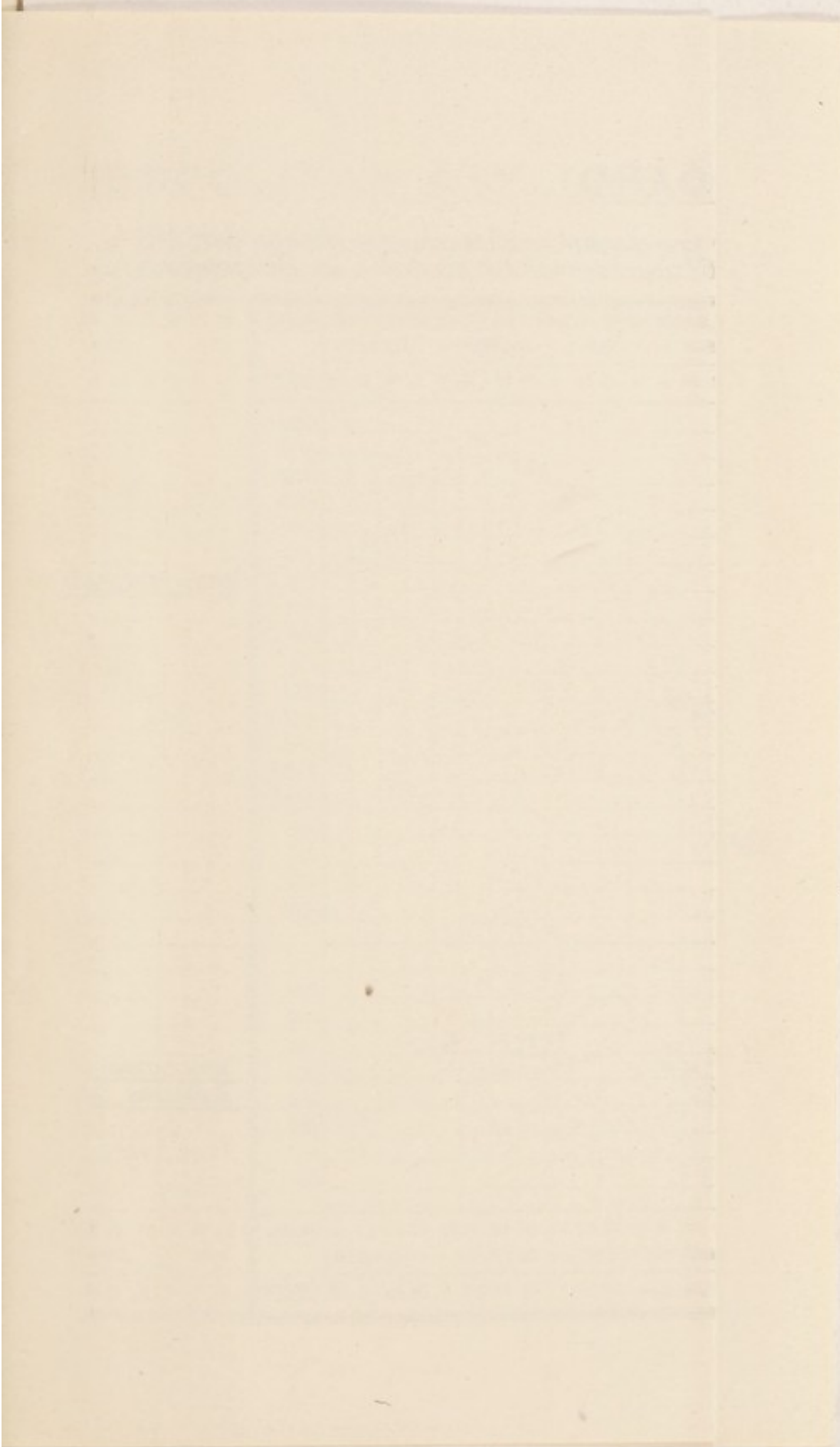


## METROPOLITAN ASYLUMS BOARD.

*CHART showing the mean number of SMALL-POX patients remaining under treatment each week, also the number of cases notified, and the number admitted into Hospital during each week of 1906 (uncorrected for mistakes in diagnosis.)*

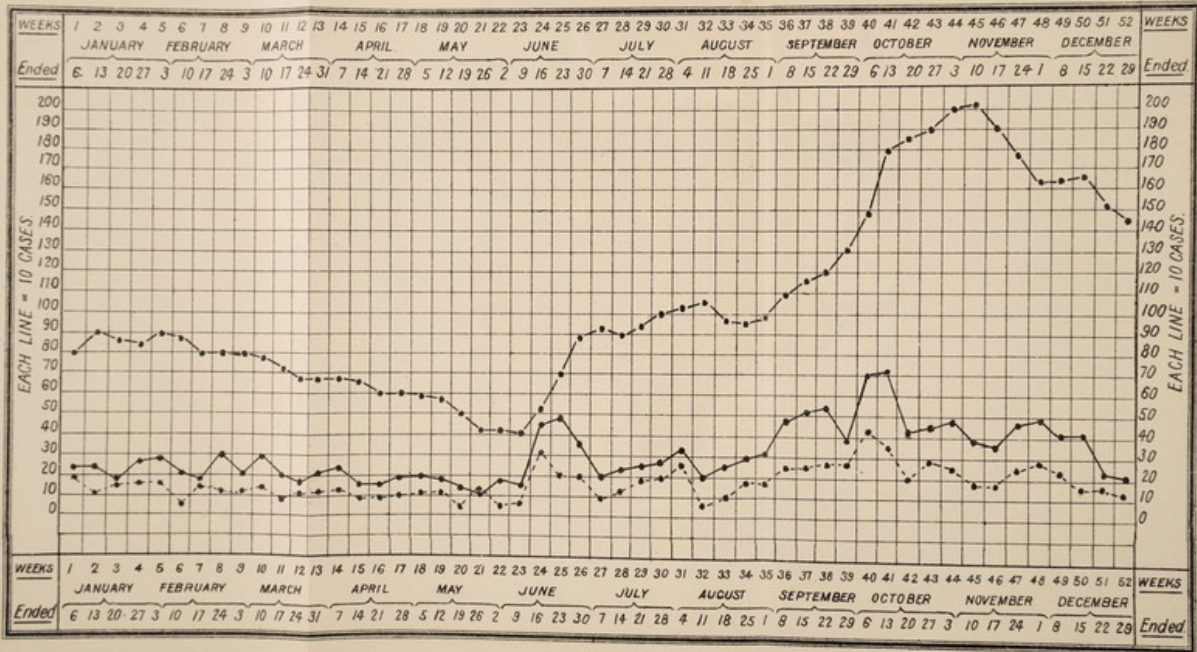
UNDER TREATMENT  
 (THICK LINE)  
 NOTIFICATIONS  
 (DOTTED LINE)  
 ADMISSIONS  
 (DOTTED LINE)





### 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 into Hospital during each week of 1906 (uncorrected for mistakes in diagnosis)



UNDER TREATMENT

UNDER TREATMENT

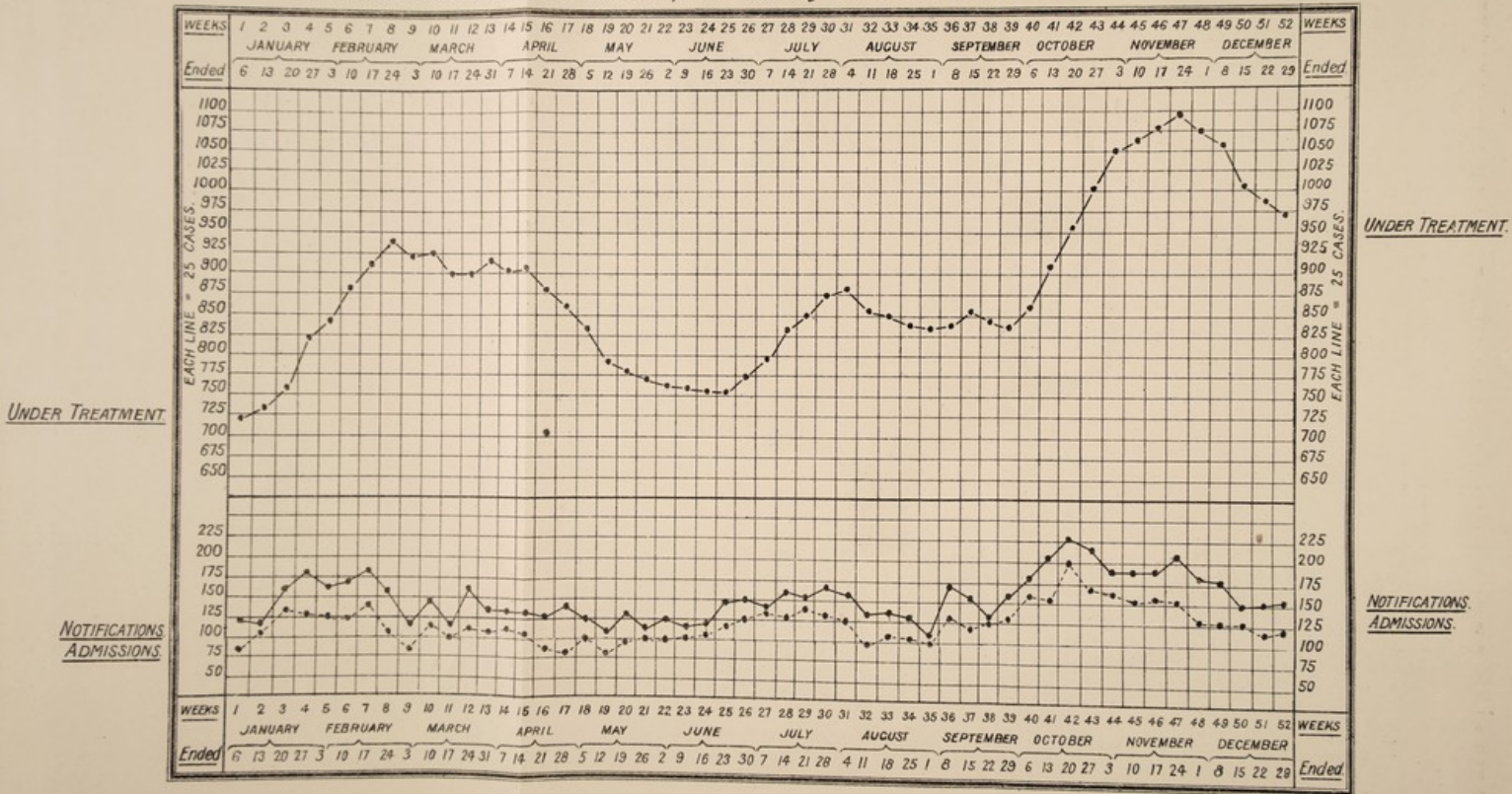
NOTIFICATIONS  
ADMISSIONS  
DOTTED LINE

NOTIFICATIONS  
ADMISSIONS

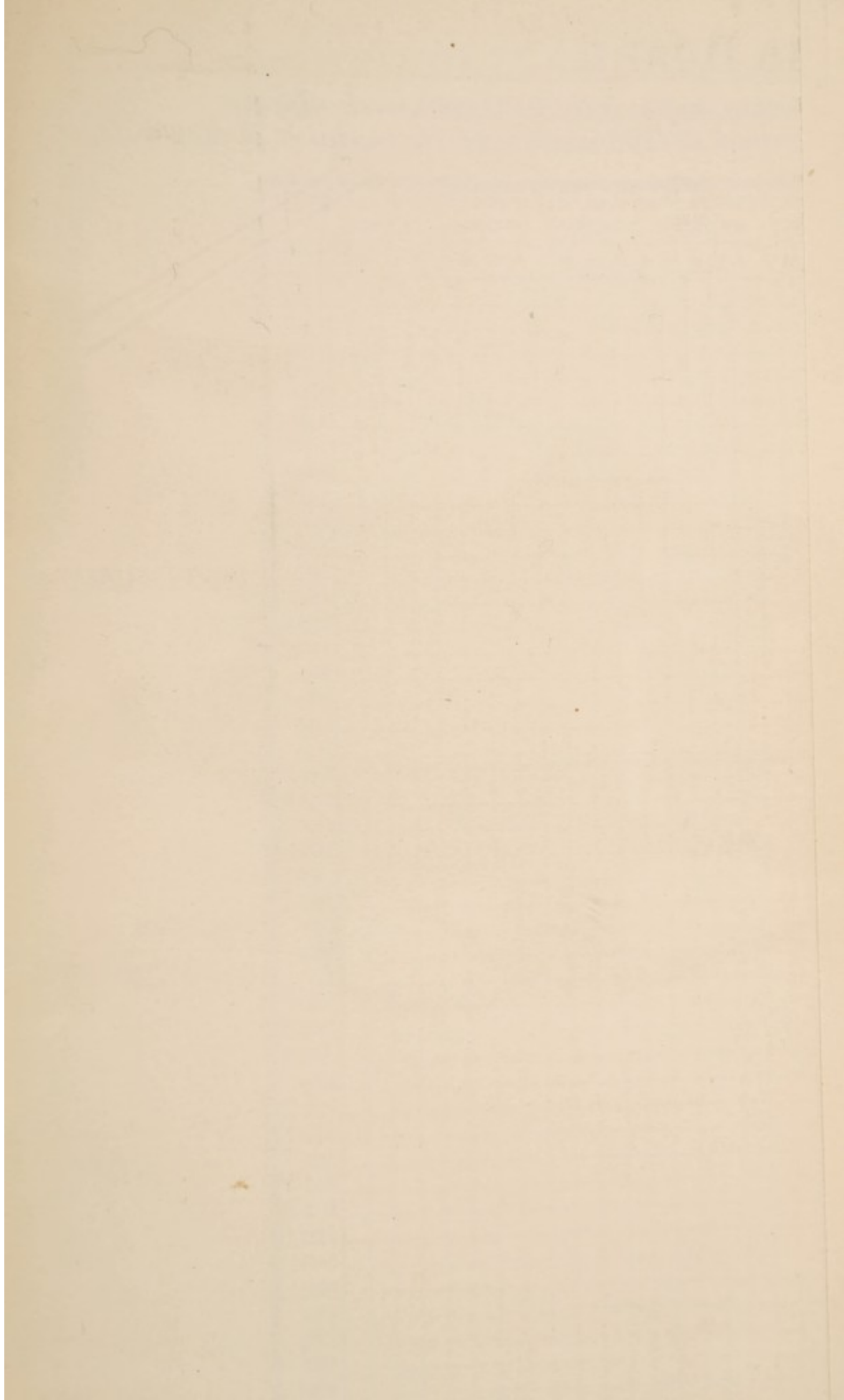


## METROPOLITAN ASYLUMS BOARD.

*CHART showing the mean number of DIPHTHERIA patients remaining under treatment each week, also the number of cases notified, and the number admitted into Hospital during each week of 1906 (uncorrected for mistakes in diagnosis.)*

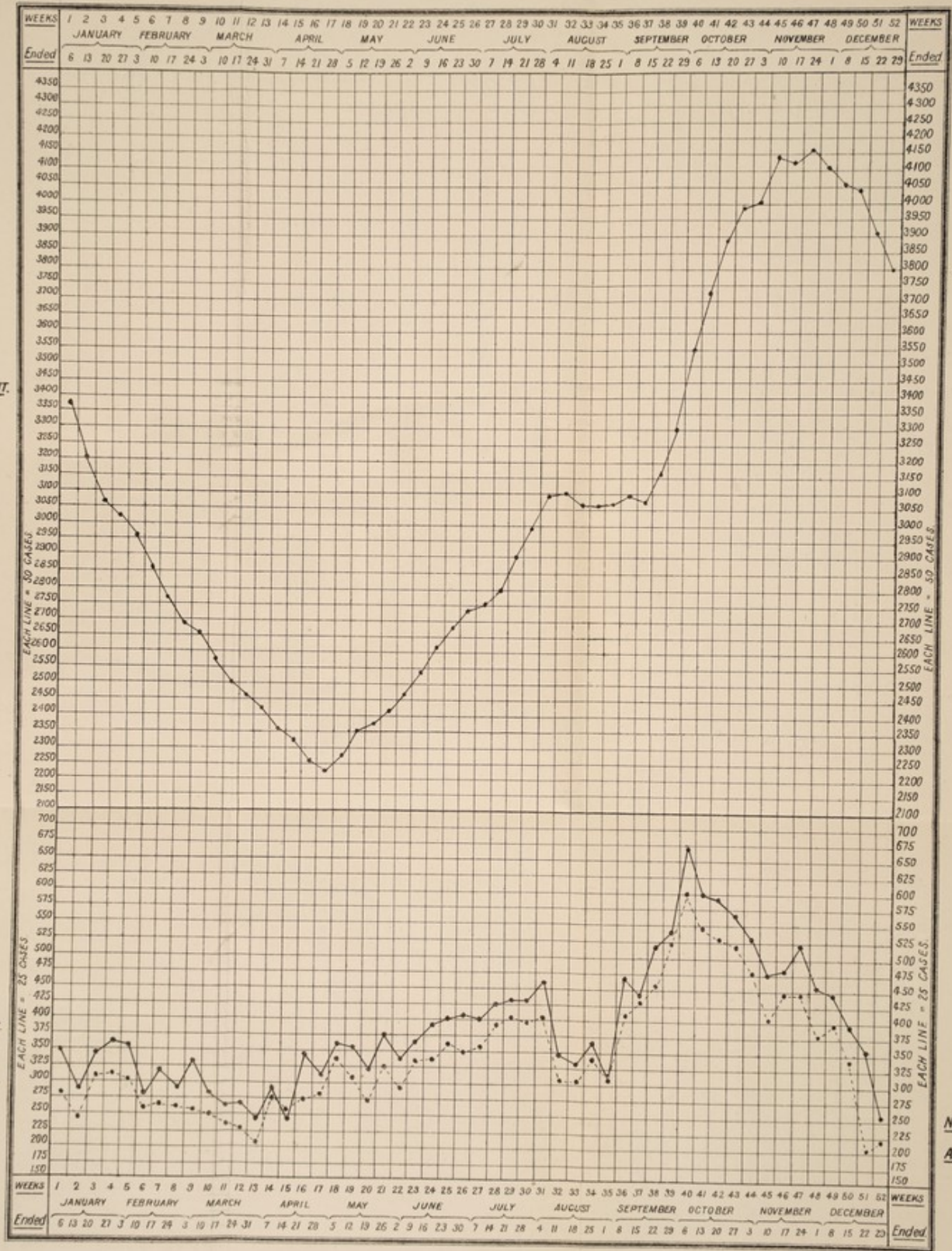






## METROPOLITAN ASYLUMS BOARD.

*CHART showing the mean number of SCARLET FEVER patients remaining under treatment each week, also the number of cases notified and the number admitted into Hospital during each week of 1906 (uncorrected for mistakes in diagnosis.)*



UNDER TREATMENT.

UNDER TREATMENT.

NOTIFICATIONS.

ADMISSIONS.

NOTIFICATIONS.

ADMISSIONS.

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 1906.

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.
1906.												
1 Jan. 6	347	280	80·7	123	85	69·1	23	18	78·3	...	...	...
2 " 13	287	241	84·0	114	104	91·2	23	11	47·8	1	1	...
3 " 20	345	311	90·1	160	135	84·4	17	15	88·2	...	...	...
4 " 27	363	312	85·9	178	131	73·6	27	16	59·3	...	...	...
5 Feb. 3	356	302	84·8	165	125	75·8	28	16	57·1	...	...	...
6 " 10	283	259	91·5	170	124	72·9	21	5	23·8	...	...	...
7 " 17	318	266	83·6	182	142	78·0	18	15	83·3	2	2	...
8 " 24	293	260	88·7	156	107	68·6	30	11	36·7	1	3	...
9 Mar. 3	333	260	78·1	114	83	72·8	20	11	55·0	3	1	...
10 " 10	286	252	88·1	147	117	79·6	29	13	44·8	1	1	...
11 " 17	268	239	89·1	117	101	86·3	20	8	40·0	1	1	...
12 " 24	271	229	84·5	163	114	69·9	17	11	64·7	5	5	...
13 " 31	245	206	84·1	133	108	81·2	21	13	61·9	...	...	...
14 Apr. 7	293	275	93·9	132	117	88·6	23	13	56·5	...	...	...
15 " 14	246	253	102·8	135	106	78·5	16	9	56·2	...	...	...
16 " 21	346	273	78·9	127	89	70·1	15	9	60·0	1	1	...
17 " 28	314	281	89·5	139	82	59·0	19	10	52·6	...	...	...
18 May 5	363	336	92·6	125	100	80·0	20	12	60·0	...	...	...
19 " 12	356	311	87·4	108	79	73·1	18	12	66·7	...	...	...
20 " 19	323	272	84·2	131	96	73·3	13	6	46·1	3	2	...
21 " 26	375	324	86·4	113	101	89·4	11	13	118·2	...	...	...
22 June 2	336	288	85·7	123	98	79·7	18	6	33·3	3	3	...
23 " 9	365	335	91·8	115	102	88·7	15	7	46·7	1	1	...
24 " 16	393	338	86·0	118	105	89·0	45	31	68·9	1	1	...
25 " 23	403	366	90·8	148	116	78·4	48	21	43·7	6	7	...
26 " 30	405	351	86·7	150	125	83·3	35	20	57·1	1	...	...
27 July 7	400	362	90·5	139	132	95·0	20	9	45·0	...	...	...
28 " 14	426	391	91·8	160	127	79·3	23	13	56·5	...	...	...
29 " 21	431	406	94·2	154	140	90·9	27	18	66·7	...	...	...
30 " 28	429	396	92·3	165	132	80·0	28	17	60·7	...	...	...
31 Aug. 4	461	402	87·2	158	126	79·7	33	26	78·8	1	...	...
32 " 11	345	307	89·0	133	98	73·7	20	7	35·0	...	...	...
33 " 18	330	310	93·9	136	111	81·6	25	11	44·0	...	...	...
34 " 25	367	338	92·1	129	106	82·2	30	18	60·0	...	...	...
35 Sep. 1	308	312	101·3	109	99	90·8	32	17	53·1	...	...	...
36 " 8	466	411	88·2	169	134	79·3	49	26	53·1	...	...	...
37 " 15	441	431	97·7	155	117	75·5	52	25	48·1	...	...	...
38 " 22	518	460	88·8	128	125	97·7	54	27	50·0	...	...	...
39 " 29	537	523	97·4	161	132	82·0	39	27	69·2	...	...	...
40 Oct. 6	671	596	88·8	183	164	89·6	71	43	60·6	...	...	...
41 " 13	602	545	90·5	207	156	75·4	72	36	50·0	...	...	...
42 " 20	591	530	89·7	227	200	88·1	43	21	48·8	...	...	...
43 " 27	565	518	91·7	218	168	77·1	45	29	64·4	...	...	...
44 Nov. 3	529	479	90·5	192	165	85·9	48	24	50·0	...	...	...
45 " 10	476	403	84·7	193	154	79·8	39	17	43·6	...	...	...
46 " 17	481	447	92·9	193	159	82·4	36	18	50·0	...	...	...
47 " 24	521	447	85·8	214	155	72·4	47	24	51·1	...	...	...
48 Dec. 1	457	380	83·1	182	133	73·1	49	28	57·1	...	...	...
49 " 8	445	399	89·7	178	128	71·9	42	23	54·8	...	...	...
50 " 15	396	339	85·6	149	128	85·9	42	16	38·1	...	...	...
51 " 22	362	210	58·0	151	117	77·5	23	16	69·6	...	...	...
52 " 29	261	221	84·7	160	121	75·6	21	14	66·7	...	...	...
	20,329	17,983	88·5	7,929	6,319	79·7	1,600	882	55·1	31	29	93·5

N.B.—Extra-metropolitan cases admitted into the Board's hospitals are deducted from the weekly admissions.

This table is of interest as showing the great variations from week to week in the percentages of cases admitted to hospital. They range from 58.0 (77.4)\* to 102.8 (96.0) in the case of scarlet fever; from 59.0 (68.1) to 97.7 (97.2) in the case of diphtheria; and from 23.8 (25.0) to 118.2 (84.4) in the case of enteric fever. Occasionally the admissions exceed the number of notifications. This is probably due to an unusual number of the notifications relating to patients admitted at the week end being received in the week following.

The following table, A<sub>2</sub>, shows the number of cases of infectious disease admissible to the Managers' hospitals which were notified during the years 1890 to 1906:—

TABLE A<sub>2</sub>.—*Number of cases of admissible Diseases notified during the years from 1890 to 1906.*

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
1902	18,252	10,538	3,407	4	7,796	2	47	40,046
1903	12,531	7,582	2,339	22	416	—	40	22,930
1904	13,439	7,073	1,896	3	489	1	29	22,930
1905	19,461	6,358	1,552	9	74	1	14	27,469
1906	20,329	8,045‡	1,600	7	31	2	9	30,023

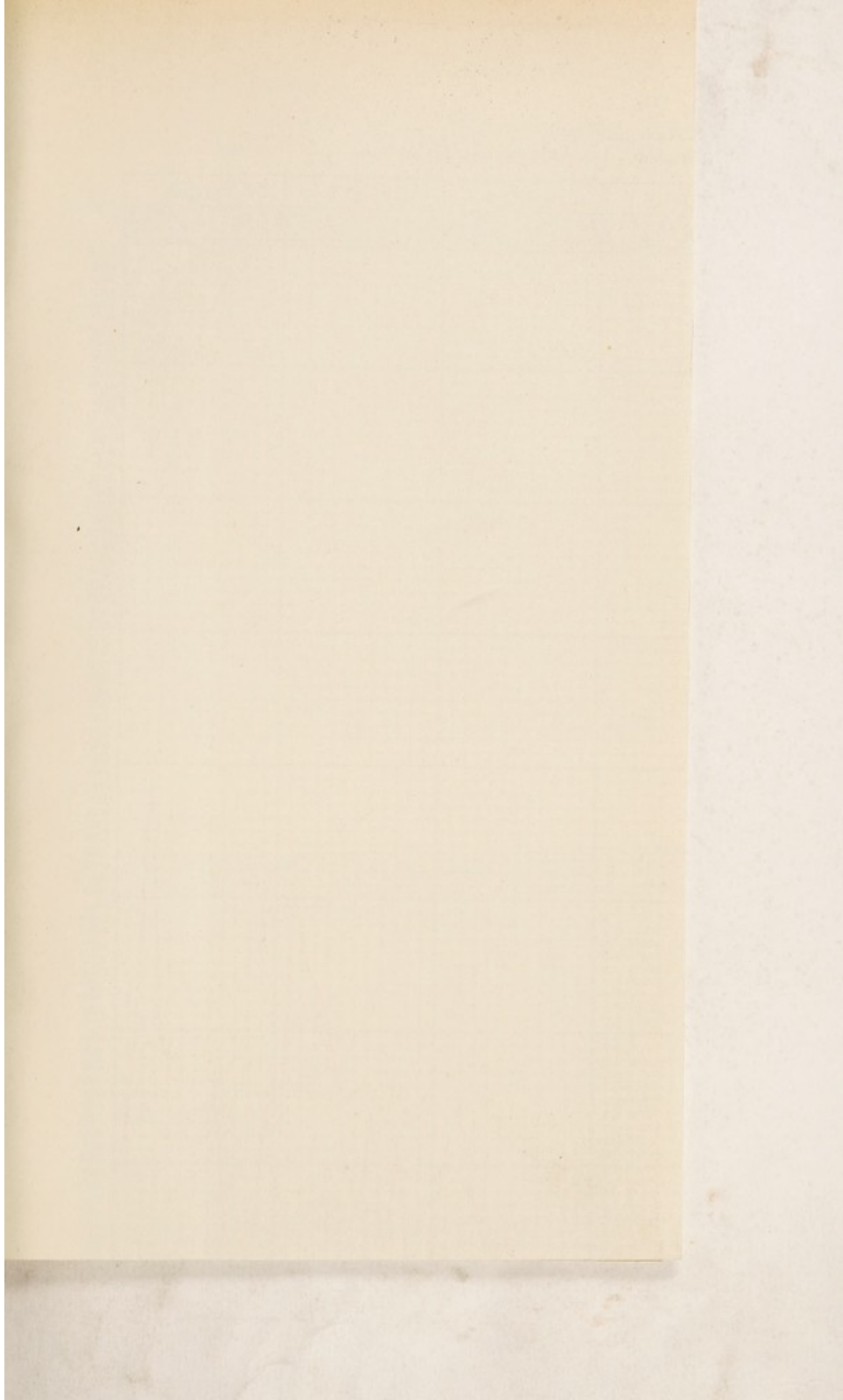
From the foregoing table it will be seen that diphtheria, up to and including the year, 1905, had been declining in prevalency since 1899. Last year the disease was more prevalent than in any of the three preceding years. Scarlet fever also increased in prevalence, and more cases were notified in 1906 than in any year since 1897. Enteric fever notifications were slightly more numerous than in 1905, but in 1905 they were lower than in any year since notification became compulsory in 1889.

A point 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 is the proportion which the hospital admissions bear to the total number of cases. In this connection the following table is of interest:—

\* Italic figures in brackets throughout are the corresponding figures for 1905.

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

‡ Including 116 cases of membranous croup.



### METROPOLITAN ASYLUMS BOARD.

NOTIFICATION CHART—Monthly notifications. Scarlet fever Red line — Enteric fever Green line — Diphtheria Yellow line — Smallpox Black 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.

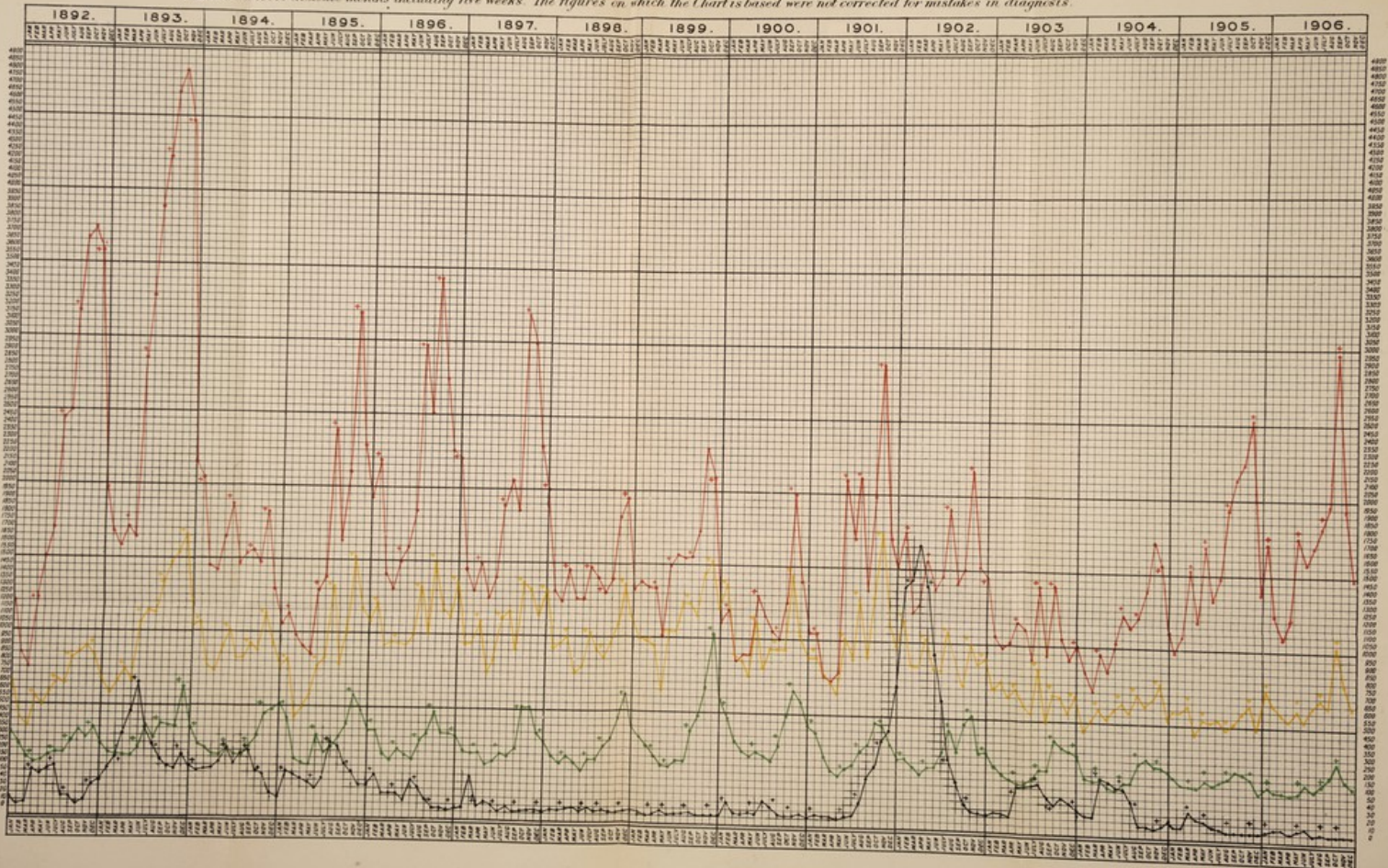


TABLE A3.—Percentage of Admissions to Notifications of each admissible Disease during the years 1890 to 1906.

YEARS.	Scarlet.	Diphtheria.	Enteric.	Typhus.	Smallpox.
1890	42·8	17·9	22·5	42·9	36·7
1891	46·8	25·1	27·3	70·4	55·3
1892	48·8	30·2	25·3	60·0	66·7
1893	39·7	24·5	20·0	36·4	81·2
1894	63·9	38·9	20·2	61·9	78·4
1895	58·2	41·5	24·1	42·9	84·6
1896	62·6	39·9	27·0	33·3	61·8
1897	67·0	51·6	30·4	50·0	66·3
1898	73·2	62·1	36·6	87·5	24·8
1899	74·3	69·7	40·8	84·6	55·2
1900	75·1	72·5	47·7	57·1	73·6
1901	78·9	74·8	45·3	85·0	97·3
1902	80·3	72·9	53·2	—	96·3
1903	83·8	80·3	51·8	100·0	97·8
1904	84·5	79·5	51·7	100·0	101·2
1905	88·6	82·1	51·4	55·6	105·4
1906	88·5	78·4	55·1	55·6	93·5

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. 231.

Between the years 1890 and 1906, the proportion of scarlet fever admissions to notifications has risen from 42·8 to 88·5 (88·6)\*, of diphtheria cases from 17·9 to 78·4 (82·1), and of enteric cases from 22·5 to 55·1 (51·4). The low figures of 1893, 1895, and 1896 were due to the fact that scarlet fever and diphtheria were unusually prevalent in those years, and the Board's hospital accommodation was inadequate.

The chart facing this page traces the course of scarlet fever, diphtheria, enteric fever, and smallpox month by month during each year from 1892 to 1906.

AGE AND SEX DISTRIBUTION. Table A4 exhibits 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 of each disease being under ten years of age.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TABLE A<sub>4</sub>.—Ages of Cases Notified—1906.

AGES.	SCARLET FEVER.			DIPHTHERIA.			ENTERIC FEVER.			SMALLPOX.		
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Under 1 ... ..	129	90	219	95	78	173	1	1	2	...	...	...
1 to 2 ... ..	367	349	716	313	243	556	..	1	1	...	1	1
2 ,, 3 ... ..	668	667	1,335	350	288	638	9	4	13	...	...	...
3 ,, 4 ... ..	962	896	1,858	426	403	829	5	7	12	...	...	...
4 ,, 5 ... ..	1,044	1,069	2,113	382	479	861	16	6	22	...	1	1
Total under 5	3,170	3,071	6,241	1,566	1,491	3,057	31	19	50	...	2	2
5 to 10 ... ..	3,986	4,494	8,480	1,187	1,533	2,720	113	86	199	3	1	4
10 ,, 15 ... ..	1,500	1,745	3,245	405	508	913	131	129	260	4	3	7
15 ,, 20 ... ..	465	534	999	160	203	363	125	102	227	1	2	3
20 ,, 25 ... ..	259	389	648	109	180	289	104	100	204	2	3	5
25 ,, 30 ... ..	124	217	341	72	142	214	102	90	192	1	2	3
30 ,, 35 ... ..	74	134	208	62	94	156	73	62	135	1	1	2
35 ,, 40 ... ..	34	59	93	43	57	100	71	56	127	2	1	3
40 ,, 45 ... ..	16	20	36	23	27	50	39	26	65	1	..	1
45 ,, 50 ... ..	8	16	24	11	21	32	37	27	64	...	...	...
50 ,, 55 ... ..	2	3	5	8	13	21	16	21	37	...	...	...
55 ,, 60 ... ..	4	2	6	3	3	6	12	9	21	1	...	1
Upwards ... ..	1	2	3	6	2	8	13	6	19	...	...	...
Unrecorded ... ..	...	...	..	...	...	...	...	...	...	...	...	...
Totals	9,643	10,686	20,329	3,655	4,274	7,929	867	733	1,600	16	15	31

**Ambulance Work.** (2.) The statistical tables concerning the work of the ambulance service will be found on pp. 210 to 213.

**Land Service.** During the year 25,926 (*23,816*)\* fever, diphtheria, and smallpox patients were conveyed to the various hospitals of the Managers; 12,617 (*9,584*) convalescent patients were transferred to the Northern and other hospitals; and 8,043 (*8,154*) recovered patients were brought back to London, that number including 29 (*261*) taken from the convalescent hospitals direct to their homes, and 8,014 (*1,794*) to the ambulance stations. Of the latter 292 (*75*) were subsequently conveyed home in consequence of their friends not attending to take charge of them. 1,094 (*1,267*) recovered patients were taken home from the acute hospitals. Further, 405 (*423*) persons were removed to other places than the Managers' hospitals; and 24 (*37*) extra-metropolitan cases were taken from the out-patient departments of general hospitals to their homes.

**Non-Infectious Removals.** The non-infectious removals during the year were as follow:—

Imbecile cases .. .. .	734	( <i>684</i> )
Ringworm ,, .. .	58	—
Ophthalmia ,, .. .	318	( <i>306</i> )
Defective and other children .. .. .	271	( <i>314</i> )
Other cases (private removals) .. .. .	424	( <i>131</i> )
Staff—Surgical .. .. .	2	( <i>1</i> )
Total .. .. .	1,807	( <i>1,436</i> )

**Total Removals.** Altogether, 50,306 (*46,093*) removals were effected by the land ambulance service during 1906, and the various vehicles made 32,614 (*28,926*) journeys, and ran 388,265 (*334,446*) miles.

\* Italic figures in brackets throughout are the corresponding figures for 1905.



**River Service.** The steamboats of the river ambulance service conveyed 709 (798)\* passengers to and from Long Reach; of that number 27 (51) were patients taken to the smallpox hospitals; 27 (57)\* were recovered patients brought back to London, and 655 (690) were visitors, staff, workmen. &c.

Fires were alight on the steamboats a total of 15,467 (15,233) hours; steam was raised on 683 (1,356) days; the vessels were under steam 7,924 (8,272) hours, under way 427 (539) hours; they ran 4,451 (3,784) miles, and consumed 164 (221) tons of coal.

**Hospital Accommodation.**

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

HOSPITAL.	No. of Beds.
Eastern Hospital .. .. .	368
North-Eastern Hospital (including temporary buildings)	678
North-Western Hospital (including some temporary buildings) .. .. .	460
Western Hospital .. .. .	452
South-Western Hospital...	345
Fountain Hospital .. .. .	402
Grove Hospital .. .. .	518
South Eastern Hospital .. .. .	488
Park Hospital .. .. .	548
Brook Hospital .. .. .	568
Northern Hospital (including temporary buildings)	738
Gore Farm Upper Hospital .. .. .	961
"    " Lower " (as adjunct to Upper Hospital if and when required) .. .. .	850
	7,376
Further accommodation is being provided at:—	
Southern Convalescent Hospital (not yet equipped) about	800
	800
Grand total .. .. .	8,176

From this 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 1906 the following accommodation:—

Joyce Green Hospital .. .. .	940 beds
Long Reach Hospital .. .. .	300 "
Orchard Hospital .. .. .	800 "
Total .. .. .	2,040 "

**Hospital Statistics.** (4.) FEVER.—On the last day of 1905 there were 4,224 (3,308) patients in the fever hospitals.

In the first four months of the year the number under treatment steadily declined and fell to the minimum for the year, 3,108 on the 28th April (31st March, 1905, 2,848); then followed a gradual rise until

\* Italic figures and dates in brackets throughout are the corresponding figures and dates for 1905.

it reached 4,412 on the 31st July, then a slight fall to 3,957, 18th August, occurred. The number again rose and attained the maximum, 5,498, for the year on 20th November (*7th November, 1905, 5,247*)\*, and then declined until the end of the year, when, on the 31st December, 4,931 (*4,224*) patients remained under treatment.

Distribution of patients amongst the several fever hospitals on 28th April, 1906:—

*Minimum number under treatment.*

HOSPITAL.	BEDS OCCUPIED.					
	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	TOTAL.
Eastern Hospital... ..	108	85	...	5	...	198
North-Eastern Hospital...	167	101	..	7	...	275
North-Western ,, ...	226	85	...	10	...	321
Western ,, ...	155	148	...	9	...	312
South-Western ,, ...	128	88	...	7	...	223
Fountain ,, ...	141	...	...	...	...	141
Grove ,, ...	150	90	...	12	...	252
South-Eastern ,, ...	...	...	Closed.	...	...	...
Park ,, ...	237	70	...	...	...	307
Brook ,, ...	115	75	...	6	...	196
Northern ,, ...	477	28	...	...	...	505
Gore Farm ,, ...	302	76	...	...	...	378
TOTALS ... ..	2,206	846	...	56	...	3,108

Distribution of patients amongst the several hospitals on 20th November 1906:—

*Maximum number under treatment.*

HOSPITAL.	BEDS OCCUPIED.					
	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	TOTAL.
Eastern Hospital ... ..	183	99	...	38	...	320
North-Eastern Hospital..	397	114	...	16	...	527
North-Western ,, ...	315	116	...	24	...	455
Western ,, ...	233	176	...	19	...	428
South-Western ,, ...	143	77	...	7	...	227
Fountain ,, ...	124	49	...	...	...	173
Grove ,, ..	278	125	...	18	...	421
South-Eastern ,, ...	202	128	...	30	...	360
Park ,, ...	348	72	...	5	...	425
Brook ,, ...	344	129	...	27	...	500
Northern ,, ...	716	...	...	...	...	716
Gore Farm ,, ...	946	...	...	...	...	946
TOTALS ... ..	4,229	1,085	...	184	...	5,498

\* Italic figures and dates in brackets throughout are the corresponding figures and dates for 1905.

The following table shows the number of cases of scarlet and enteric fevers and diphtheria notified in the respective borough areas, and the number of such cases which were admitted to the Managers' hospitals. The Managers keep their records of admissions according to the Poor Law districts to which the patients are chargeable. The areas of these districts are not in all cases co-extensive with the borough areas. Both areas are included in the table, and, in certain instances, several parishes or unions are grouped together to make a total corresponding to the borough areas.

*Notifications and Admissions during the 52 weeks ended 31st December, 1906.*

Metropolitan Boroughs and Populations estimated to the middle of 1906.	Corresponding Poor Law Parishes and Unions and Populations.*	Scarlet Fever.		Diphtheria (including Membranous Croup).		Enteric Fever (including Continued Fever).		Total.		Percentage of Admissions to Notifications.
		Notifications.	Admissions.	Notifications.	Admissions.	Notifications.	Admissions.	Notifications.	Admissions.	
Paddington ... 148,913	Paddington ... —	717	685	183	141	35	18	935	844	90·3
Kensington ... 180,952	Kensington ... —	470	403	178	144	39	27	687	574	83·6
Hammersmith 120,679	Hammersmith —	437	360	278	248	34	16	749	624	83·3
Fulham ... 161,965	Fulham ... —	674	615	404	347	45	22	1,123	984	87·6
Chelsea ... 74,672	Chelsea ... —	271	241	162	147	17	7	450	395	87·8
City of Westminster ... 173,905	(Strand ... 17,764 ) { Westminster 31,011 } { St. George's W. 125,130 }	537	498	209	180	49	14	795	692	87·0
St. Marylebone 128,580	St. Marylebone —	396	378	141	114	48	22	585	514	87·9
Hampstead ... 89,633	Hampstead ... —	387	339	99	60	22	9	508	408	80·3
St. Pancras ... 236,455	St. Pancras ... —	798	734	279	219	95	49	1,172	1,002	85·5
Islington ... 344,987	Islington ... —	1,392	1,178	439	321	147	79	1,978	1,578	79·8
Stoke Newington 53,217	{ Hackney ... 283,938 }	1,184	983	436	330	105	70	1,725	1,383	80·2
Hackney ... 230,721	{ Hackney ... 283,938 }	1,184	983	436	330	105	70	1,725	1,383	80·2
Holborn ... 55,805	{ Holborn ... 123,847 }	587	537	264	221	60	30	911	788	86·5
Finsbury ... 97,466	{ Bloomsbury 29,424 }	587	537	264	221	60	30	911	788	86·5
City of London 21,367	City of London —	113	127	18	16	10	2	141	145	102·8
Shoreditch ... 116,108	Shoreditch ... —	627	590	144	117	37	18	808	725	89·7
Bethnal Green 130,609	Bethnal Green —	650	623	252	198	55	27	957	848	88·6
Stepney ... 307,176	{ Stepney ... 58,610 } { St. George's E. 51,035 } { Whitechapel 81,316 } { Mile End O.T. 116,215 }	1,219	1,143	604	527	124	48	1,947	1,718	88·2
Poplar ... 170,673	Poplar ... —	571	464	249	179	86	53	906	696	76·8
Southwark ... 209,143	Southwark ... —	1,470	1,428	401	356	111	68	1,982	1,852	93·4
Bermondsey ... 128,629	Bermondsey —	990	917	336	269	41	23	1,367	1,209	88·4
Lambeth ... 315,774	Lambeth ... —	1,264	1,160	422	311	91	60	1,777	1,531	86·2
Battersea ... 179,622	{ Wandsworth 453,003 }	2,117	1,891	831	668	141	89	3,089	2,648	85·7
Wandsworth ... 273,381	{ Wandsworth 453,003 }	2,117	1,891	831	668	141	89	3,089	2,648	85·7
Camberwell ... 274,132	Camberwell ... —	1,161	969	355	245	59	27	1,575	1,241	78·8
Deptford ... 115,495	{ Greenwich ... 195,865 }	2,292	1,947	1,361	1,035	150	107	3,803	3,089	81·2
Greenwich ... 105,350	{ Greenwich ... 195,865 }	2,292	1,947	1,361	1,035	150	107	3,803	3,089	81·2
Lewisham ... 148,463	{ Lewisham ... 156,524 }	2,292	1,947	1,361	1,035	150	107	3,803	3,089	81·2
Woolwich ... 127,345	{ Woolwich ... 144,264 }	2,292	1,947	1,361	1,035	150	107	3,803	3,089	81·2
4,721,217	Totals ...	20,324	18,210	8,045	6,393	1,601	885	29,970	25,488	85·0

N.B.—The admissions in this table are not corrected for mistakes in diagnosis.  
Extra-metropolitan cases are not included in this table.

\* Populations are the same as in the boroughs unless otherwise stated.

Tables I. to VII. and the accompanying chart summarise the several fever hospital tables given on pp. 230-240.

TABLE I.—*Admissions, Discharges, and Deaths at Fever Hospitals during 1906.*

DISEASES.	Re- main- ing on Dec. 31, 1905.	Admitted.	Total under treatment during 1906.	Dis- charged.	Died.	Mortality per cent.	Re- main- ing on Dec. 31, 1906.
Scarlet ... ..	3,471*	17,933	21,404	17,041	521	2·94	3,842
Diphtheria ... ..	565	5,218	5,783	4,489	445	8·77	849
Enteric ... ..	73	698	771	542	108	16·02	121
Typhus ... ..	...	4	4	4	...	...	...
Totals ... ..	4,109*	23,853	27,962	22,076	1,074	4·57	4,812
Other diseases ... ..	115*	2,151	2,266	1,984	163	7·58	119
Grand Totals... ..	4,224	26,004	30,228	24,060	1,237	...	4,931

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.

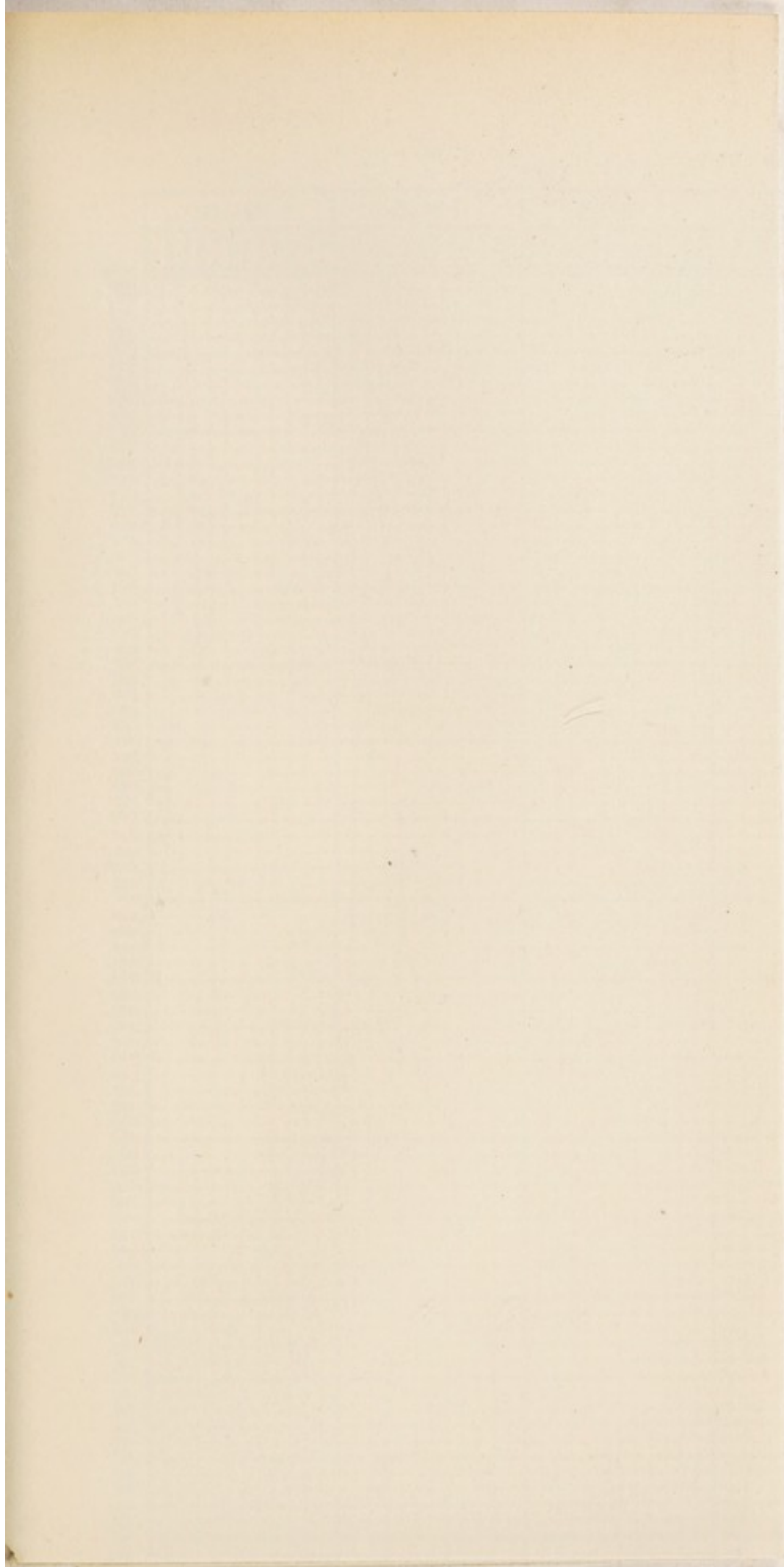
The mortality rates are calculated according to the Registrar-General's formula—*i.e.*, by dividing the deaths, multiplied by 100, by half the sum of the admissions, discharges, and deaths for the year.

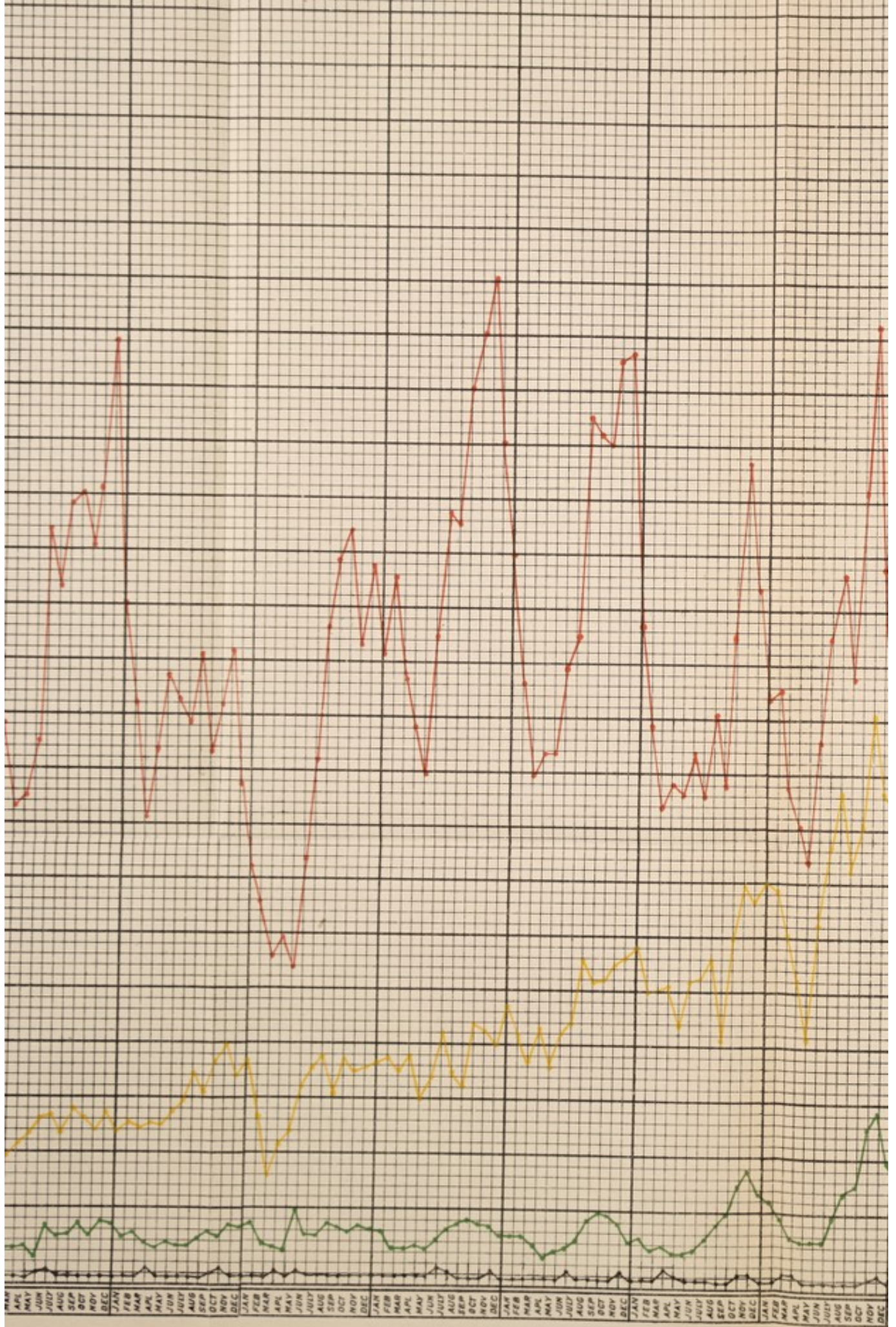
\*These figures differ slightly from those given in last year's report as remaining, owing to subsequent correction of errors of diagnoses.

The total number of patients treated during the year was 3,066 more than in the preceding year. The mortality rate for scarlet fever was 0·33 lower, whilst for diphtheria it was 0·50, and for enteric fever 2·87 higher than in 1905.

In the reports of the Medical Superintendents of the Eastern Hospital (p. 214) and the Park Hospital (p. 226), attention is directed to the need of further accommodation in country hospitals for convalescing patients. In this connection we give the following statement of the percentage of cases of scarlet fever and diphtheria transferred from the acute hospitals during the year:—

	Percentage of cases transferred to Convalescent Hospitals.	
	Scarlet.	Diphtheria.
Eastern Hospital ... ..	54·73	7·23
North Eastern Hospital ... ..	52·69	2·54
North Western ,, ... ..	58·40	5·90
Western ,, ... ..	64·59	13·62
Grove ,, ... ..	61·71	17·21
Fountain ,, ... ..	64·25	7·89
South Western ,, ... ..	65·14	7·97
South Eastern ,, ... ..	61·94	0·27
Park ,, ... ..	68·02	23·30
Brook ,, ... ..	45·90	12·25





NOTE.— Diphtheria cases were not admitted into the Board.

TABLE II.—*Monthly Admissions and Deaths at Fever Hospitals during 1906.*

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. ...	1 298	436	49	1	149	1,933	59	36	6	...	11	103	3·27	9·86	13·48	...	7·28	4·92
Feb. ...	1,044	402	32	...	137	1,615	38	39	3	...	10	90	3·14	10·65	8·00	...	7·46	5·15
March ...	1,066	420	33	2	145	1,666	44	42	9	...	14	109	3·84	9·95	23·08	...	9·24	6·23
April...	1,175	354	21	...	144	1,694	45	35	2	...	11	93	3·68	9·08	6·90	...	7·77	5·22
May ...	1,386	339	26	...	174	1,925	49	30	4	...	14	97	3·83	7·77	13·33	...	8·05	5·18
June ...	1,464	346	69	1	179	2,059	44	17	6	...	11	78	3·28	4·86	13·79	...	6·36	4·09
July ...	1,743	486	40	...	177	2,446	41	29	7	...	15	92	2·66	6·89	17·95	...	8·43	4·32
Aug. ...	1,392	347	57	...	171	1,967	34	27	10	...	14	85	2·38	6·94	18·52	...	8·67	4·18
Sept....	1,902	432	105	...	202	2,641	33	40	16	...	8	97	1·92	9·06	18·82	...	3·97	4·00
Oct. ...	2,335	655	122	...	296	3,379	51	46	20	...	13	130	2·55	8·42	20·62	...	5·17	4·49
Nov. ...	1,784	549	87	...	228	2,648	47	43	11	...	21	122	3·60	7·85	10·94	...	8·99	4·53
Dec. ...	1,464	452	56	...	179	2,091	45	61	14	...	21	141	2·98	12·60	18·67	...	10·61	6·44
Totals	17,933	5,218	698	4	2,151	26,004	521	445	108	...	163	1,237	2·94	8·77	16·05	...	7·58	4·82

\* Calculated according to the Registrar-General's formula. See footnote to Table I., p. 231.

The total monthly admissions were lowest in March (*January*)\* and highest in October (*October*).

The accompanying chart shows the monthly admissions of each kind of fever from and including the year 1892.

During the thirty-four 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 once in January, fourteen times in February, five times in March, eight times in April, four times in June, once in September, and twice in December (1888 and 1903); while the maximum number of admissions was reached once in January (1888), twice in July, five times in September, nineteen times in October, six times in November, and twice in December. The enteric fever admissions fell to the minimum for the year four times in March, thirteen times in April, nine times in May, eight times in June, and once in July; and rose to the maximum once in May, seven times in September, fifteen 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, once in March, eight times in April, once in May, once in August, and once in September; while the maximum admissions took place four times in July, once in August, twice in September, six 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 during the years referred to in the chart, for the reason that on several occasions the accommodation in the Managers' hospitals became exhausted.

The maximum death-rate in 1906 was for scarlet fever in April (*January*), for diphtheria in April (*March*), and for enteric fever in September (*October*). The minimum rate was for scarlet fever in September (*June*), for diphtheria in September (*June*), and for enteric fever in December (*March*).

\* Months in italics in brackets are the corresponding months for 1905.

TABLE III.—Admissions and Deaths of Patients at Fever Hospitals during 1906, divided according to Parishes or Unions.

PARISH OR UNION.	Scarlet.	Diphtheria	Enteric.	Typhus.	Other Diseases.	Total Admissions.	Total Deaths.
Kensington ... ..	403	118	20	...	36	577	25
Hammersmith ... ..	343	209	14	...	50	616	46
Fulham ... ..	632	282	19	..	53	986	46
Paddington ... ..	656	112	12	...	64	844	36
Chelsea ... ..	237	122	6	...	30	395	25
St. George's, Hanover Square ...	374	95	6	...	43	518	20
Westminster... ..	79	22	...	...	18	119	3
St. Marylebone ... ..	359	91	15	...	47	512	25
St. Pancras ... ..	726	177	37	...	68	1,008	61
Hampstead ... ..	332	55	7	...	16	410	11
Islington ... ..	1,129	244	72	1	131	1,577	68
Hackney ... ..	935	248	49	1	157	1,390	56
St. Giles & St. George, Bloomsbury	54	6	...	...	9	69	3
Strand ... ..	41	8	1	...	4	54	2
Holborn ... ..	449	144	21	...	107	721	42
London, City of ... ..	105	13	3	...	22	148	9
Shoreditch ... ..	561	63	16	...	82	722	35
Bethnal Green ... ..	592	141	18	...	96	847	52
Whitechapel ... ..	315	89	12	1	81	498	32
St. George-in-the-East ... ..	133	53	8	...	40	234	19
Stepney ... ..	219	125	13	...	46	403	20
Mile End Old Town ... ..	393	112	8	...	68	581	24
Poplar ... ..	449	155	39	...	55	698	41
Southwark ... ..	1,378	290	46	...	138	1,852	79
Bermondsey... ..	908	208	17	1	78	1,212	55
Lambeth ... ..	1,134	278	46	...	82	1,540	71
Wandsworth ... ..	1,798	592	62	...	189	2,641	116
Camberwell... ..	928	221	18	...	87	1,254	57
Greenwich ... ..	998	440	41	...	87	1,566	71
Woolwich ... ..	426	234	30	...	66	756	26
Lewisham ... ..	484	197	10	...	62	753	35
Port and Tower of London ... ..	...	...	...	...	...	...	...
Tottenham ... ..	362	74	32	...	39	507	25
Beyond Metropolitan Area ... ..	1	...	...	...	...	1	1
Totals ... ..	17,933	5,218	698	4	2,151	26,004	1,237

SCARLET FEVER.—TABLE IV.—Admissions, Deaths, and Mortality per cent. of Scarlet Fever Patients during 1906, 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 ... ..	77	10	13·0	78	7	9·0	155	17	11·0
1 to 2 ... ..	327	40	12·2	337	29	8·6	664	69	10·4
2 „ 3 ... ..	648	46	7·1	624	48	7·7	1,272	94	7·4
3 „ 4 ... ..	902	61	6·8	823	39	4·7	1,725	100	5·8
4 „ 5 ... ..	956	43	4·5	1,117	26	2·3	2,073	69	3·3
Totals under } 5 years ... }	2,910	200	6·9	2,979	149	5·0	5,889	349	5·9
5 to 10 ... ..	3,417	62	1·8	3,924	58	1·5	7,341	120	1·6
10 „ 15 ... ..	1,358	12	0·9	1,509	19	1·3	2,867	31	1·1
15 „ 20 ... ..	399	7	1·8	440	1	0·2	839	8	1·0
20 „ 25 ... ..	191	3	1·6	281	4	1·4	472	7	1·5
25 „ 30 ... ..	103	1	1·0	163	2	1·2	266	3	1·1
30 „ 35 ... ..	60	1	1·7	98	1	1·0	158	2	1·3
35 „ 40 ... ..	24	1	4·2	33	...	...	57	1	1·8
40 „ 45 ... ..	9	...	...	15	...	...	24	...	...
45 „ 50 ... ..	3	...	...	10	...	...	13	...	...
50 „ 55 ... ..	...	...	...	2	...	...	2	...	...
55 „ 60 ... ..	1	...	...	1	...	...	2	...	...
And upwards ... ..	...	...	...	3	...	...	3	...	...
Grand Totals	8,475	287	3·4	9,458	234	2·5	17,933	521	2·9



The total admissions of scarlet fever cases in 1906 were 17,933 (16,958)\* the females were 983 (916) in excess of the male admissions. The total mortality calculated on the admissions, was 2·9 (3·3) per cent.

DIPHTHERIA.—TABLE V.—Admissions, Deaths, and Mortality per cent. of Diphtheria Patients during 1906, 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 ...	54	16	29·6	35	11	31·4	89	27	30·3
1 to 2 ...	194	37	19·1	154	40	26·0	348	77	22·1
2 ,, 3 ...	249	34	13·7	230	33	14·3	479	67	14·0
3 ,, 4 ...	295	34	11·5	325	28	8·6	620	62	10·0
4 ,, 5 ...	297	31	10·4	348	41	11·8	645	72	11·2
Total under 5 years }	1,089	152	13·9	1,092	153	14·0	2,181	305	13·9
5 to 10 ...	829	46	5·5	1,122	72	6·4	1,951	118	6·0
10 ,, 15 ...	245	8	3·3	321	6	1·9	566	14	2·4
15 ,, 20 ...	85	1	1·2	103	...	...	188	1	0·5
20 ,, 25 ...	45	1	2·2	74	...	...	119	1	0·8
25 ,, 30 ...	29	...	...	52	2	3·8	81	2	2·5
30 ,, 35 ...	19	1	5·3	33	1	3·0	52	2	3·8
35 ,, 40 ...	18	1	5·6	25	1	4·0	43	2	4·7
40 ,, 45 ...	3	...	...	10	...	...	13	...	...
45 ,, 50 ...	5	...	...	8	...	...	13	...	...
50 ,, 55 ...	5	...	...	4	...	...	9	...	...
55 ,, 60 ...	2	...	...	...	...	...	2	...	...
And upwards	...	...	...	...	...	...	...	...	...
Grand Totals	2,374	210	8·8	2,844	235	8·3	5,218	445	8·5

The total admissions of diphtheria were greater by 1,070 than in the previous year. The death-rate, calculated on the admissions, was 8·5 (8·3) per cent.

ENTERIC FEVER.—TABLE VI.—Admissions, Deaths, and Mortality per cent. of Enteric Fever Patients during 1906, 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 ...	10	...	...	8	2	25·0	18	2	11·1
5 to 10 ...	49	5	10·2	45	2	4·4	94	7	7·4
10 ,, 15 ...	51	2	3·9	63	5	7·9	114	7	6·1
15 ,, 20 ...	51	6	11·8	56	7	12·5	107	13	12·1
20 ,, 25 ...	56	10	17·9	37	4	10·8	93	14	15·0
25 ,, 30 ...	56	11	19·6	41	11	26·8	97	22	22·7
30 ,, 35 ...	39	9	23·1	24	3	12·5	63	12	19·0
35 ,, 40 ...	25	5	20·0	23	8	34·8	48	13	27·1
40 ,, 45 ...	13	3	23·1	9	4	44·4	22	7	31·8
45 ,, 50 ...	15	6	40·0	12	2	16·7	27	8	29·7
50 ,, 55 ...	3	...	...	5	2	40·0	8	2	25·0
55 ,, 60 ...	2	1	50·0	3	...	...	5	1	20·0
And upwards	1	...	...	1	...	...	2	...	...
Totals ...	371	58	15·6	327	50	15·3	698	108	15·5

There were 112 more cases of enteric fever admitted than during 1905.

The total death-rate, calculated on the admissions, was 15·5 (14·0) per cent.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TYPHUS FEVER.—TABLE VII.—Only 4 (5)\* cases of typhus fever were admitted during the year. For details refer to Table VII., p. 240.

MISCELLANEOUS DISEASES.

The table giving details of the cases of miscellaneous diseases admitted will be found in the Medical Supplement, p. 316. Further reference to it is made on p. 184, "Cases of mistaken diagnosis."

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 that completed their treatment at the convalescent hospitals.

SCARLET FEVER PATIENTS

TABLE VIII A.—Length of Residence of Scarlet Fever Patients who completed their Recovery or Died at the Board's Town Hospitals during the year 1906.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence (days).	Recovered Cases only.	Number of Days' Residence.	Average Residence (days).
Eastern ... ..	584 (338)	30,235 (15,429)	51·8 (45·6)	533 (284)	29,530 (14,861)	55·4 (52·3)
North-Eastern ... ..	1,129 (1,513)	66,278 (89,152)	58·7 (58·9)	1,062 (1,426)	65,169 (87,915)	61·4 (61·6)
North-Western ... ..	694 (532)	42,553 (30,043)	61·3 (56·5)	622 (452)	41,207 (28,652)	66·2 (63·4)
Western ... ..	572 (743)	31,899 (42,427)	55·8 (57·1)	505 (681)	30,295 (41,512)	60·0 (61·0)
South-Western ... ..	377 (708)	27,453 (45,864)	72·8 (64·8)	324 (659)	26,613 (45,126)	82·1 (68·5)
Fountain ... ..	351 (432)	23,997 (26,049)	68·4 (60·3)	338 (417)	23,625 (25,831)	69·9 (61·9)
Grove ... ..	626 (855)	34,426 (46,364)	55·0 (54·2)	577 (805)	33,619 (45,651)	58·3 (56·7)
South-Eastern ... ..	205	11,179	54·5 (Closed)	182	10,953	60·2
Park ... ..	436 (938)	23,123 (50,773)	53·03 (54·1)	371 (864)	22,116 (49,718)	59·6 (57·5)
Brook ... ..	909 (1,033)	54,611 (67,545)	60·1 (65·4)	859 (985)	53,761 (66,814)	62·6 (67·8)
Totals ... ..	5,883 (7,092)	345,752 (413,646)	58·8 (58·3)	5,373 (6,573)	336,888 (406,080)	62·7 (61·8)

TABLE VIII B.—Length of Residence of Scarlet Fever Patients who completed their Recovery or Died at the Board's Convalescent Hospitals during the year 1906.

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...	5,989 (6,469)	191,894 (201,841)	177,084 (180,324)	368,978 (382,165)	32·0 (31·2)	29·6 (27·9)	61·6 (59·1)	5,981 (6,457)	191,623 (201,492)	176,850 (179,873)	368,473 (381,365)	32·0 (31·2)	29·6 (27·9)	61·6 (59·0)
Gore Farm	5,690 (1,750)	183,572 (60,467)	206,750 (75,181)	390,322 (135,648)	32·3 (34·5)	36·3 (43·0)	68·6 (77·5)	5,687 (1,749)	183,502 (60,333)	206,651 (75,115)	390,153 (135,448)	32·3 (34·5)	36·3 (42·9)	68·6 (77·4)
Total ...	11,679 (8,798)	375,466 (282,708)	383,834 (282,666)	759,300 (565,374)	32·1 (32·1)	32·9 (32·1)	65·0 (64·2)	11,668 (8,781)	375,125 (282,064)	383,501 (281,999)	758,626 (564,093)	32·1 (32·1)	32·9 (32·1)	65·0 (64·2)

\* Italic figures in brackets throughout are the corresponding figures for 1905.

The average duration of residence of scarlet fever cases was at the town hospitals 58·8 (58·3)\* days including deaths, and 62·7 (61·8) days if the fatal cases be excluded. At the convalescent hospitals the average duration was 65·0 (64·2) and 65·0 (64·2) days respectively (including residence in the town hospitals). So that, on the whole, the total residence of cases who completed their recovery at the convalescent hospital was only 2·3 (5·9) days longer than that of cases at the town hospitals. The Northern Hospital cases were detained 2·6 days longer than in the preceding year.

As regards the residence of the recovered patients in the town hospitals there are very considerable variations. The shortest residence was 55·4 days at the Eastern Hospital (*Eastern Hospital, 52·3*), or 7·3 (9·4) days below the average, and the longest was 82·1 at the South-Western Hospital (*South-Western Hospital, 68·5*), or 19·4 (6·7) days above the average.

DIPHTHERIA PATIENTS. TABLE IXA.—Length of Residence of Diphtheria Patients who completed their Recovery or Died at the Board's Town Hospitals during the year 1906.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence. (days)	Recovered Cases only.	Number of Days' Residence.	Average Residence (days).
Eastern ... ..	468 (516)	26,869 (28,242)	57·4 (54·7)	418 (457)	26,344 (27,715)	63·0 (60·6)
North-Eastern ...	487 (435)	27,516 (24,014)	56·5 (55·2)	450 (391)	27,202 (23,562)	60·4 (60·3)
North-Western ...	455 (415)	23,689 (20,277)	52·1 (48·9)	420 (382)	23,161 (19,951)	55·1 (52·2)
Western ... ..	641 (495)	24,753 (20,633)	38·6 (41·7)	561 (449)	23,844 (20,231)	42·5 (45·0)
South-Western ...	445 (446)	23,892 (22,913)	53·7 (51·4)	405 (407)	23,516 (22,374)	58·1 (55·0)
Fountain ... ..	26	889 (Closed against diphtheria cases.)	34·2	22	860	39·1
Grove ... ..	551 (446)	25,332 (23,564)	46·0 (52·8)	493 (407)	24,949 (23,238)	50·6 (57·1)
South-Eastern ...	225	10,769 (Closed.)	47·9	191	10,467	54·8
Park ... ..	369 (420)	16,176 (20,228)	43·8 (48·2)	318 (379)	15,053 (19,658)	47·3 (51·9)
Brook ... ..	639 (575)	31,154 (32,572)	48·8 (56·6)	584 (530)	30,601 (32,152)	52·4 (60·7)
Totals ... ..	4,306 (3,748)	211,039 (192,443)	49·0 (51·3)	3,862 (3,402)	205,997 (188,881)	53·3 (55·5)

TABLE IXB.—Length of Residence of Diphtheria Patients who completed their Recovery or Died at the Board's Convalescent Hospitals during the year 1906.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.			Average Residence (days).			Recovered Cases only.	Number of Days' Residence.			Average Residence (days).		
		Town Hospital.	Convalescent Hospital.	Total.	Town Hospital.	Convalescent Hospital.	Total.		Town Hospital.	Convalescent Hospital.	Total.	Town Hospital.	Convalescent Hospital.	Total.
Northern...	245 (488)	10,219 (22,184)	5,895 (8,355)	16,114 (30,419)	41·7 (45·4)	24·1 (16·9)	65·8 (62·3)	245 (487)	10,219 (22,146)	5,895 (8,215)	16,114 (30,361)	41·7 (45·4)	24·1 (16·9)	65·8 (62·3)
Gore Farm	383 (2)	15,573 (153)	10,397 (43)	25,970 (196)	40·7 (76·5)	27·1 (21·5)	67·8 (98·9)	382 (2)	15,540 (153)	10352 (43)	25,892 (196)	40·7 (76·5)	27·1 (21·5)	67·8 (98·0)
Totals ...	628 (491)	25,792 (22,420)	16,292 (8,312)	42,084 (30,732)	41·1 (45·7)	25·9 (16·9)	67·0 (62·6)	627 (490)	25,759 (22,382)	16,247 (8,292)	42,006 (30,674)	41·1 (45·7)	25·9 (16·9)	67·0 (62·6)

\* Italic figures in brackets throughout are the corresponding figures for 1905.

The average length of residence of diphtheria patients at the town hospitals was 49.0 (51.3)\* days including deaths, and 53.3 (55.5) days if the fatal cases be omitted. At the convalescent hospital the average residence of recovered cases (including residence in the town hospitals) was 67.0 (62.6) days or 13.7 (7.1) days longer than in the town hospitals. The Northern Hospital cases were detained 3.5 days longer than in the preceding year.

The variations in length of residence of recovered patients at different hospitals during the year are again very remarkable, ranging from 39.1 days at the Fountain Hospital (*Western Hospital, 45.0*), 14.2 (10.5) days below the average, to 63.0 days at the Eastern Hospital (*Brook Hospital, 60.7*), or 9.7 (5.1) days above the average.

ENTERIC FEVER PATIENTS. TABLE X.—*Length of Residence of Enteric Fever Patients who completed their Recovery or Died at the Board's Town Hospitals during the year 1906.*

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence. (days).	Recovered Cases only.	Number of Days' Residence.	Average Residence (days).
Eastern ... ..	137 (168)	7,281 (9,984)	53.1 (59.4)	118 (145)	6,952 (9,450)	58.9 (65.2)
North-Eastern ... ..	100 (70)	5,307 (4,333)	53.1 (61.9)	86 (63)	5,127 (4,226)	59.6 (67.1)
North-Western ... ..	36 (85)	1,962 (5,506)	54.5 (64.8)	33 (74)	1,932 (5,288)	58.5 (71.5)
Western ... ..	77 (72)	3,787 (3,315)	49.2 (46.0)	59 (58)	3,422 (3,111)	58.0 (53.6)
South-Western .. ..	81 (73)	3,955 (4,436)	48.8 (60.8)	64 (69)	3,737 (4,363)	58.4 (63.2)
Fountain ... ..		(Closed against enteric fever cases.)				
Grove ... ..	75 (86)	3,642 (4,671)	48.6 (54.3)	61 (76)	3,466 (4,543)	56.8 (59.8)
South-Eastern ... ..	36	1,466	40.7 (Closed.)	29	1,389	47.9
Park ... ..	4 (18)	129 (1,149)	32.2 (63.8)	3 (16)	128 (1,137)	42.7 (71.1)
Brook ... ..	104 (89)	5,171 (5,135)	49.7 (57.7)	89 (78)	4,988 (5,012)	56.0 (64.3)
Total ... ..	650 (661)	32,700 (38,529)	50.3 (58.3)	542 (579)	31,141 (37,130)	57.5 (64.1)

The average residence of enteric fever patients was 50.3 (58.3) days including deaths, and 57.5 (64.1) days if the fatal cases be excluded. The shortest residence of recovered cases was 42.7 days at the Park Hospital (*Western Hospital 53.6*), or 14.8 (10.5) days below the average, and the longest 59.6 days at the North-Eastern Hospital (*Eastern Hospital, 71.5*), or 2.1 (7.3) days above the average.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TYPHUS  
FEVER  
PATIENTS.

TABLE XA.—Length of Residence of Typhus Fever Patients who completed their Recovery or Died at the Board's Town Hospitals during the year 1906.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence (days).	Recovered Cases only.	Number of Days' Residence.	Average Residence (days).
Eastern ... ..	3 (5)*	83 (141)	27·7 (28·2)	3 (5)	83 (141)	27·7 (28·2)
South-Western ...	1	21	21·0	1	21	21·0

MISCELLA-  
NEOUS  
DISEASES.

TABLE XI.—Length of Residence of Patients suffering from Miscellaneous Diseases who completed their Recovery or Died at the Board's Town Hospitals during the year 1906.

HOSPITAL.	Total Number of Cases (including Deaths).	Number of Days' Residence.	Average Residence. (days).	Recovered Cases only.	Number of Days' Residence.	Average Residence. (days).
Eastern ... ..	292 (298)	6,464 (6,678)	22·1 (22·4)	264 (280)	6,169 (6,506)	23·4 (23·2)
North-Eastern ...	406 (358)	9,111 (7,028)	22·4 (19·6)	374 (341)	8,808 (6,927)	23·6 (20·3)
North-Western ...	202 (258)	5,158 (6,964)	25·5 (27·0)	168 (237)	4,820 (6,829)	28·7 (28·8)
Western ... ..	242 (150)	3,862 (2,534)	16·0 (16·9)	227 (129)	3,767 (2,306)	16·6 (17·9)
South-Western ...	132 (192)	3,464 (4,390)	26·2 (22·9)	121 (169)	3,351 (4,203)	27·7 (24·9)
Fountain ... ..	89 (90)	2,343 (2,253)	26·3 (25·0)	87 (88)	2,338 (2,237)	26·8 (25·4)
Grove ... ..	262 (318)	4,097 (7,031)	20·3 (22·1)	191 (307)	3,994 (6,965)	20·9 (22·7)
South-Eastern ...	156	2,642	16·9 (Closed)	147	2,605	17·7
Park ... ..	240 (345)	5,226 (7,493)	21·8 (21·7)	234 (332)	5,201 (7,368)	21·2 (22·2)
Brook ... ..	183 (133)	3,813 (2,686)	20·8 (20·2)	168 (112)	3,598 (2,541)	21·4 (22·7)
Totals ... ..	2,144 (2,142)	46,180 (47,057)	21·5 (22·0)	1,981 (1,995)	44,651 (45,882)	22·5 (23·0)

Of the cases of miscellaneous diseases (cases of mistaken diagnosis) treated, the average residence of each patient was 21·5 (22·0) days including deaths, and 22·5 (23·0) days if the fatal cases be excluded. The shortest residence of recovered cases was at the Western Hospital, 16·6 (*Western Hospital*, 17·9) days, or 5·9 (5·1) days below the average, and the longest at the South-Western Hospital, 27·7 (*North-Western Hospital*, 28·8) days, or 5·2 (5·8) days above the average.

SMALLPOX PATIENTS. Of smallpox patients 27 (69) were treated. Average residence, 35·1 (44·1) days.

SMALLPOX HOSPITAL TABLES. TABLE XII.—The following table is a condensed form of Table I. on p. 242A :—

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TABLE XII.—Admissions, Deaths, and Discharges at Smallpox Hospitals during 1906.

PARISH OR UNION.	Remaining in Hospital on 1st January, 1906.			Admissions.			Deaths.			Discharges.			Remaining in Hospital on 31st December, 1906.		
	Class A. Vaccinated.	Class B. Doubtful.	Class C. Unvaccinated.	Class A. Vaccinated.	Class B. Doubtful.	Class C. Unvaccinated.	Class A. Vaccinated.	Class B. Doubtful.	Class C. Unvaccinated.	Class A. Vaccinated.	Class B. Doubtful.	Class C. Unvaccinated.	Class A. Vaccinated.	Class B. Doubtful.	Class C. Unvaccinated.
Kensington ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hammersmith ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fulham ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paddington ...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...
Chelsea ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. George's ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Westminster ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. Marylebone ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. Pancras ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hampstead ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Islington ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hackney ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. Giles and St. George, Bloomsbury ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Strand ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Holborn ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
London, City of ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Shoreditch ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bethnal Green ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whitechapel ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. George-in-the-East ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Stepney ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mile End Old Town ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poplar ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Southwark ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bermondsey ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lambeth ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wandsworth ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Camberwell ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Greenwich ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Woolwich ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lewisham ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Port of London ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Beyond Metropolitan area ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals ...	9	2	16	9	2	16	9	2	16	9	2	16	27	27	

N.B.—Admissions, &c., from "other diseases" during the year are not included in this table.

N ORK.—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 XIV., p.

In addition to the 27 (53)\* genuine smallpox cases included in the foregoing table, there were 6 (32) non-smallpox cases received at South Wharf; all were returned to their homes.

The highest number under treatment at one time was 11 (25) on the 19th March (20th March).

TABLE II., p. 242B, shows the ages and condition as regards vaccination of the patients admitted during 1906.

The following tables XIII A and XIII B are summaries of the totals of each class as shown in Table II., p. 242B.

TABLE XIII A.

	Admissions.	Deaths.	Mortality per cent.
A. Vaccinated class :—			
A <sup>1</sup> , half and upwards of half square inch total area of cicatrices ...	7	—	—
A <sup>2</sup> , one-third, but less than half ditto ... ..	2	—	—
A <sup>3</sup> , less than one-third ditto ... ..	—	—	—
A <sup>4</sup> , area not recorded ... ..	—	—	—
Totals of vaccinated class ...	9	—	—
B. Doubtful class ... ..	2	—	—
C. Unvaccinated class ... ..	16	—	—
Grand totals ... ..	27	—	—

\*Italic figures, &c., in brackets throughout are the corresponding figures for 1905

TABLE XIIIb.—Giving particulars as regards Vaccination and Age Distribution of all cases of Smallpox admitted during the year 1906.

AGES.	VACCINATED CASES.			DOUBTFUL CASES.						UNVACCINATED CASES.					
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 year ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
From 1 to 2 years ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 2 " 3 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 3 " 4 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 4 " 5 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 5 " 6 "	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
" 6 " 7 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 7 " 8 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 8 " 9 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 9 " 10 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 10 " 11 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 11 " 12 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 12 " 13 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 13 " 14 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 14 " 15 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 15 " 20 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 20 " 25 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 25 " 30 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 30 " 35 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 35 " 40 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 40 " 50 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 50 " 60 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 60 " 70 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 70 " 80 "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" 80 years and upwards ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
<b>TOTAL ...</b>	<b>9</b>	..	..	<b>2</b>	..	..	..	..	..	<b>1</b>	..	..	<b>15</b>	..	..

During the year there were admitted 4 (9)\* unvaccinated cases under ten years of age, but not one vaccinated case.

\* Italic figure in brackets throughout is the corresponding figure for 1905.



TABLE XIV.—The following is a summary (at all ages) of the analysis in Table III., p. 242c, of the “doubtful” class of cases contained in Table II., p. 242b, and shows the reasons for considering the evidence as to vaccination inconclusive:—

	Admissions.	Deaths.	Mortality per cent.		Admissions.	Deaths.	Mortality per cent.
CLASS I.—Cases stated to have been successfully vaccinated in which cicatrix was absent ...	2	..	...	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 ...	...	...	...
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 ...	...	...	...	Total ... ..	...	...	...
Total ... ..	...	...	...	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 XV.—The following summarises Table IV., p. 242b, and shows the results at all ages of the analysis of cases included in Table II., p. 242b, 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 U ascertained.	
	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...	...	...	...	...	...	...	...	...	...	...
(b) Evidence as to vaccination inconclusive ...	...	...	...	...	...	...	...	...	...	...
(c) Evidence of previous vaccination absent ...	1	...	...	...	...	...	...	...	...	...

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

TABLE XVI.—The following particulars are taken from Table V., p. 243, which contains a list of cases stated to have been (a) successfully revaccinated and (b) unsuccessfully revaccinated previous to infection by smallpox:—

(a) *Successfully revaccinated.*

No case.

(b) *Revaccination unsuccessful.*

Total number of Cases	TYPE OF DISEASE.					
	Discrete.		Confluent.		Hæmorrhagic.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
1	1	...	...	...	...	...

This patient stated that the revaccination was unsuccessful, and the appearance of the vaccination cicatrices confirmed his statement.

CASES OF MISTAKEN DIAGNOSIS. *Fever.*—In the course of the year 1906 no fewer than 2,151 (2,157)\* patients, or a percentage on the total admissions of 8·3 (9·04), 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 (Table XIV., Medical Supplement, pp. 316–325). The largest number of cases admitted to any one hospital was at the North-Eastern Hospital (*North-Eastern Hospital*), where the proportion was 390 (373) out of 3,687 (3,709) admissions, or 10·6 (10·06) per cent. of the total. The percentage on the total scarlet fever cases was 5·2 (5·4), diphtheria cases 18·3 (17·2), and enteric fever cases 33·7 (29·6).

Amongst the 932 (975) cases wrongly certified as scarlet fever there were 93 (96) of measles, 85 (90) of rubella, 169 (157) of tonsillitis, 138 (147) of erythema, 145 (143) had no obvious disease, and 82 (149) were not diagnosed. Amongst the 959 (908) cases wrongly certified as diphtheria were 47 (52) of measles, 627 (544) of tonsillitis, 20 (55) had no obvious disease, and 10 were not diagnosed. Amongst the 235 (247) cases wrongly certified as enteric fever were 14 (27) of influenza, 1 (6) of general tuberculosis, 62 (64) of pneumonia, 7 (6) had no obvious disease.

On reference to Table XI., p. 179, it will be noted that these cases were detained in hospital on an average for 21·5 (22·0) days.

In the annual reports of the Medical Superintendents of the Eastern (p. 215), and the South-Western Hospitals (p. 220), attention is directed to the desirability of further increasing the isolation accommodation at the Board's hospitals. The Medical Superintendent of the Eastern Hospital suggests "that there is a growing

\* Italic figures in brackets throughout are the corresponding figures for 1905.

disposition on the part of practitioners to get cases away while they are still in a doubtful stage." If this is so, and it becomes a recognised practice for the Board's medical officers to admit "suspected" cases of infectious disease, it will have a most important bearing on the question of the amount of isolation accommodation to be provided at the fever hospitals, and more particularly so in connection with the smallpox hospitals.

*Smallpox.*—In the case of smallpox the original medical certificate is revised by 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 6 (32)\* out of 33 (74), or 18·2 (43·2) per cent.; and these are the figures properly to be compared with those given above in the case of fever.

**Statistics since Establishment of the Managers' Hospitals.** (5.) FEVER.—The return on p. 186 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.

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\* Italic figures in brackets throughout are the corresponding figures for 1905.

TABLE XVII.—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.	Relapsing fever.	Diphtheria.	Typhus.	Enteric.	Scarlet.	Diphtheria.	Typhus.	Enteric.	
	...	...	...	...	...	218	...	...	...	...	...	14	...	...	...	...	6.3	...	...	...	...	
1870	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1871	108	...	134	279	343	864	11	...	30	57	...	168	...	...	...	...	...	0.58	0.11	0.12	0.27	
1872	92	...	401	381	271	1,145	6	...	91	56	58	211	6.5	...	...	...	...	0.28	0.08	0.05	0.24	
1873	804	...	536	435	359	2,134	89	...	106	63	84	342	12.1	...	...	...	...	0.19	0.09	0.08	0.27	
1874	1,182	...	65	299	269	1,815	160	...	16	78	54	308	13.7	...	...	...	...	0.77	0.12	0.09	0.26	
1875	671	...	139	288	294	1,392	90	...	28	59	71	248	12.1	...	...	...	...	1.06	0.17	0.04	0.23	
1876	479	...	170	372	186	1,207	54	...	36	79	33	202	12.1	...	...	...	...	0.65	0.11	0.04	0.22	
1877	679	...	168	484	233	1,564	91	...	47	100	40	278	14.3	...	...	...	...	0.44	0.09	0.04	0.25	
1878	1,469	...	48	385	196	2,098	211	...	11	74	39	335	15.3	...	...	...	...	0.49	0.15	0.04	0.28	
1879	1,949	...	28	248	239	2,464	242	...	6	43	37	328	12.3	...	...	...	...	0.72	0.15	0.02	0.23	
1880	1,477	...	219	415	211	2,322	168	...	34	86	46	334	11.1	...	...	...	...	0.82	0.14	0.02	0.19	
1881	1,850	...	148	515	354	2,867	189	...	27	104	60	380	10.4	...	...	...	...	0.55	0.17	0.02	0.25	
1882	1,920	...	45	486	269	2,547	234	...	11	74	66	385	12.4	...	...	...	...	0.52	0.22	0.01	0.25	
1883	1,845	...	29	493	180	2,547	234	...	5	98	55	392	12.3	...	...	...	...	0.51	0.24	0.01	0.25	
1884	1,353	...	53	220	229	1,855	130	...	7	36	46	219	9.5	...	...	...	...	0.36	0.24	0.01	0.23	
1885	1,780	...	10	333	74	2,197	151	...	4	47	22	224	9.0	...	...	...	...	0.18	0.23	0.01	0.15	
1886	5,900	...	35	441	161	6,537	489	...	4	61	59	613	9.5	...	...	...	...	0.17	0.21	0.00	0.15	
1887	4,408	99	1	450	194	5,152	501	46	...	72	60	679	9.9	...	...	...	...	0.36	0.23	0.00	0.15	
1888	4,518	722	23	290	219	5,772	366	275	6	41	48	736	8.9	...	...	...	...	0.30	0.32	0.00	0.17	
1889	6,537	942	16	498	341	8,334	510	316	5	93	81	1,005	7.9	...	...	...	...	0.19	0.39	0.00	0.13	
1890	5,262	1,312	18	755	462	7,809	357	397	1	106	102	963	6.7	...	...	...	...	0.21	0.33	0.00	0.15	
1891	13,093	2,009	19	430	725	16,276	839	583	2	65	140	1,629	7.3	...	...	...	...	0.14	0.32	0.00	0.13	
1892	14,548	2,848	2	544	732	18,674	901	865	1	110	105	1,982	6.1	...	...	...	...	0.27	0.46	0.00	0.10	
1893	11,598	3,666	6	534	863	16,667	717	1,035	1	96	150	1,999	5.9	...	...	...	...	0.37	0.76	0.00	0.16	
1894	11,271	3,635	3	661	1,277	16,847	591	820	...	119	142	1,672	5.4	...	...	...	...	0.22	0.62	0.00	0.15	
1895	15,982	4,508	9	600	1,174	22,273	666	948	2	96	109	1,821	4.3	...	...	...	...	0.19	0.54	0.00	0.14	
1896	15,113	5,673	2	664	1,417	22,869	619	987	...	124	140	1,870	4.1	...	...	...	...	0.18	0.51	0.00	0.13	
1897	12,125	6,566	9	869	1,488	21,057	514	991	1	143	147	1,796	4.1	...	...	...	...	0.13	0.39	0.00	0.13	
1898	13,290	8,676	11	1,535	1,582	25,094	353	1,182	...	240	160	1,935	2.6	...	...	...	...	0.09	0.43	0.00	0.17	
1899	10,343	7,873	4	1,728	1,706	21,654	313	988	1	245	167	1,714	3.0	...	...	...	...	0.08	0.34	0.00	0.16	
1900	14,539	7,622	13	1,129	2,365	25,668	542	849	4	175	167	1,737	3.8	...	...	...	...	0.13	0.29	0.00	0.11	
1901	14,503	6,520	...	1,420	2,108	24,551	512	739	...	218	178	1,647	3.4	...	...	...	...	0.13	0.29	0.00	0.11	
1902	10,345	5,072	19	967	1,913	18,316	333	504	4	145	166	1,152	3.1	...	...	...	...	0.12	0.25	0.00	0.12	
1903	11,155	4,687	3	750	1,993	18,588	364	469	...	115	183	1,131	3.4	...	...	...	...	0.08	0.16	0.00	0.08	
1904	16,958	4,148	5	586	2,157	23,854	536	347	...	82	147	1,112	3.3	...	...	...	...	0.08	0.16	0.00	0.06	
1905	17,933	5,218	4	698	2,151	26,004	521	445	...	108	163	1,237	2.9	...	...	...	...	0.12	0.12	...	0.05	
Totals	247,079	81,796	2,395	21,382	28,735	381,405	12,604	12,786	491	3,508	3,395	32,798	...	...	...	...	...	...	...	...	...	...

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 malade. 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 patient 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.

There was a decrease in the mortality amongst scarlet fever patients, as compared with the previous year, the rate being 2·9 as compared with 3·3. The rate was as low as 2·6 in 1899.

The mortality amongst diphtheria patients was 8·8, a slight increase over the previous year when it was the lowest rate recorded (8·3).

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 fallen, and this fall has been coincident with the introduction and increasing use of the antitoxic serum treatment of diphtheria.

**Antitoxin  
treatment  
of Diph-  
theria.**

We submit the following tables, which summarise the results of the antitoxin treatment of diphtheria in the Board's hospitals during the years 1895-1906, and compare them with the results obtained before the use of that treatment.

At the Brook Hospital it has been the practice to tabulate (p. 227) the results of the antitoxin treatment, with special reference to the day of the disease on which the treatment began. Amongst 235 cases treated during the years 1897-1906 on the first day of the disease, not a single death occurred; whereas, there died of 1,441 cases treated on the second day, 4·30 per cent.; of 1,600 cases treated on the third day, 11·12 per cent.; of 1,276 cases treated on the fourth day, 17·24 per cent.; and of 1,645 cases treated on the fifth day and afterwards, 18·72 per cent.

TABLE XVIII.—*Summary of the Antitoxin Treatment of Diphtheria at the Board's Hospitals during the years 1895-1906, compared with the results obtained before the adoption of that treatment:—*

TABLE A.—ALL FORMS OF DIPHTHERIA.

YEAR.	Cases treated with Antitoxin.			Cases not so treated.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
1890-3 ... ..	Before use of anti-toxin.			7,111	2,161	30·4
1894 ... ..	Antitoxin in occasional use.			3,042	902	29·6
Antitoxin years—						
1895 ... ..	2,182	615	28·1	1,347	181	13·4
1896 ... ..	2,764	717	25·9	1,411	154	10·9
1897 ... ..	4,381	896	20·4	1,078	62	5·8
1898 ... ..	5,186	906	17·5	1,186	84	7·8
1899 ... ..	7,038	1,082	15·4	977	44	4·5
1900 ... ..	7,271	936	12·9	954	51	5·3
1901 ... ..	6,499	817	12·6	1,013	32	3·1
1902 ... ..	6,015	714	11·8	824	27	3·3
1903 ... ..	4,839	493	10·2	583	11	1·9
1904 ... ..	4,070	444	10·9	569	20	3·5
1905 ... ..	3,734	335	9·0	490	11	2·2
1906 ... ..	4,149	432	10·4	788	12	1·5*

TABLE B.—LARYNGEAL CASES.

YEAR.	Cases treated with Antitoxin.			Cases not so treated.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
1890-3 ... ..	Before use of anti-toxin.			(Particulars not published.)		
1894 ... ..	Antitoxin in occasional use.			466	289	62·0
Antitoxin years—						
1895 ... ..	461	195	42·2	82	35	42·7
1896 ... ..	488	141	28·8	28	12	42·8
1897 ... ..	473	142	30·0	18	10	55·6
1898 ... ..	624	199	31·9	30	26	86·7
1899 ... ..	669	190	28·4	18	11	61·1
1900 ... ..	777	182	23·2	22	14	63·6
1901 ... ..	753	159	21·1	15	10	66·7
1902 ... ..	618	125	20·2	21	9	42·8
1903 ... ..	551	99	18·0	9	3	33·3
1904 ... ..	688	123	17·9	7	4	57·1
1905 ... ..	699	112	16·0	7	4	57·1
1906 ... ..	695	122	17·6	7	5	71·4

\* At all the hospitals antitoxin is now given to every case that is judged to be sufficiently severe to require it. For an explanation of the deaths among the non-infected patients, see the footnotes to "Summary of Antitoxin Treatment" in the Medical Supplement (p. 309).

TABLE C.—TRACHEOTOMY CASES.

YEAR.	Cases treated with Antitoxin.			Cases not so treated.*		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
1890-3 ... ..	Before use of anti-toxin.			364	241	66.2
1894 ... ..	Antitoxin in occasional use.			261	184	70.5
Antitoxin years—						
1895 ... ..	225	113	50.2	30	12	40.0
1896 ... ..	197	80	40.6	15	7	46.7
1897 ... ..	258	103	39.9	6	4	75.0
1898 ... ..	305	113	37.0	8	6	75.0
1899 ... ..	377	147	39.1	5	2	40.0
1900 ... ..	377	127	33.6	13	12	92.3
1901 ... ..	367	111	30.2	5	4	80.0
1902 ... ..	257	82	31.9	7	4	57.1
1903 ... ..	219	65	29.7	4	2	50.0
1904 ... ..	243	76	31.3	4	3	75.0
1905 ... ..	253	70	27.6	2	2	100.0
1906 ... ..	371	115	31.0	3	3	100.0

TABLE XX.—Summary of number of Cases of Laryngeal and Non-Laryngeal Post-Scarlatinal Diphtheria at the Board's Hospitals during the years 1896-1906.

YEAR.	LARYNGEAL CASES.					NON-LARYNGEAL CASES.					ALL CASES.				
	Cases.	Total Deaths.	Deaths from causes other than Diphtheria.	Deaths from Diphtheria.	Diphtheria Mortality per cent.	Cases.	Total Deaths.	Deaths from causes other than Diphtheria.	Deaths from Diphtheria.	Diphtheria Mortality per cent.	Cases.	Total Deaths.	Deaths from causes other than Diphtheria.	Deaths from Diphtheria.	Diphtheria Mortality per cent.
1896	79	18	1	17	29.5	626	18	5	13	2.1	705	36	6	30	4.3
1897	119	10	1	9	7.6	677	20	5	15	2.2	796	30	6	24	3.0
1898	82	5	1	4	4.9	579	19	4	15	2.6	661	24	5	19	2.9
1899	84	10	...	10	11.9	608	15	3	12	2.0	692	25	3	22	3.2
1900	27	4	...	4	14.8	378	8	6	2	0.5	405	12	6	6	1.5
1901	40	9	1	8	20.0	340	14	10	2	0.6	380	23	11	12	3.2
1902	55	11	4	7	12.7	369	10	4	6	1.6	424	21	8	13	3.1
1903	29	1	...	1	3.4	246	2	1	1	0.4	275	3	1	2	0.7
1904	18	1	...	1	5.6	193	2	...	2	1.03	211	3	...	3	1.4
1905	29	4	...	4	13.8	189	1	...	1	53	218	5	...	5	2.3
1906	23	3	2	2	8.7	165	2	...	2	1.2	188	5	2	4	2.1

(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.		
1st Dec., 1870, to 3rd Feb., 1871 )	582	...	582	97	...	97	20·8	...
1871-2 (4th Feb., 1871, to 31st Jan., 1872) ... )	13,139	6	13,145	2,460	...	2,460	18·9	2·42
1872-3 (year ended 31st Jan., 1873) )	2,359	3	2,362	467	1	468	17·8	0·54
1873-4 (year ended 31st Jan., 1874) )	174	17	191	35	...	35	17·0	0·03
1874 (11 months ended 31st Dec.) )	112	8	120	10	...	10		0·02
1875 ... ..	89	22	111	22	...	22	21·6	0·01
1876 ... ..	2,134	16	2,150	372	1	373		0·21
1877 ... ..	6,516	104	6,620	1,214	4	1,218	17·9	0·71
1878 ... ..	4,558	96	4,654	824	9	833	18·0	0·39
1879 ... ..	1,628	60	1,688	273	5	278	15·7	0·12
1880 ... ..	1,982	50	2,032	286	2	288	15·9	0·12
1881 ... ..	8,551	120	8,671	1,417	14	1,431	16·6	0·62
1882 ... ..	1,799	55	1,854	260	3	263	13·0	0·11
1883 ... ..	598	28	626	93	...	93	16·1	0·03
1884 ... ..	6,363	204	6,567	940	3	943	16·0	0·31
1885 ... ..	6,146	198	6,344	1,052	3	1,055	15·8	0·35
1886 ... ..	99	33	132	22	2	24	14·3	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	...	0·00
1891 ... ..	63	1	64	8	...	8	...	0·00
1892 ... ..	325	23	348	35	...	35	11·3	0·01
1893 ... ..	2,376	*118	2,494	180	2	182	7·6	0·05
1894 ... ..	1,117	*120	1,237	102	7	109	8·9	0·02
1895 ... ..	941	*81	1,022	64	1	65	6·4	0·01
1896 ... ..	190	*41	231	9	1	10	4·0	0·00
1897 ... ..	70	*26	96	13	1	14	18·4	0·00
1898 ... ..	5	*9	14	...	...	...	...	0·00
1899 ... ..	18	*18	36	3	...	3	20·7	0·00
1900 ... ..	66	*19	85	3	...	3	4·3	0·00
1901 ... ..	1,743	*107	1,850	257	3	260	18·5	0·05
1902 ... ..	7,916	*608	8,524	1,337	5	1,342	16·6	0·28
1903 ... ..	355	*80	435	12	1	13	3·4	0·00
1904 ... ..	449	*64	513	27	...	27	6·0	0·01
1905 ... ..	53	*34	87	8	1	9	15·1	...
1906 ... ..	27	*6	33	...	...	...	...	...
Totals ... ..	72,688	2,388	75,076	11,916	69	11,985	...	...

\* 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 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	50	11
1902	4,579,110	1,372	300	71
1903	4,613,812	13	3	71
1904	4,648,950	25	5·4	72
1905	4,684,794	10	2·1	71
1906	4,721,217	—	—	61

**Staff Illness in the Fever and Smallpox Hospitals.** On p. 192A 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 5,151 (*4,336*)\* persons employed at the fever hospitals during the course of the year, 179 (*181*) or 3·5 (*4·1*) per cent. fell ill with fever or diphtheria, while 1,388 (*1,235*) or 26·9 (*28·2*) per cent. suffered from other forms of illness.

The table also shows that 190 (*166*) persons were employed at the smallpox hospitals during the year, of whom 33 (*50*) or 17·3 (*30·1*) per cent. suffered from various forms of illness, but none from smallpox.

## II.—IMBECILITY.

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

INSTITUTION.	Males.	Females.	Total.
Tooting Bec Asylum ... ..	381	474	855
„ „ Receiving Home for Children	20	16	36
Leavesden Asylum ... ..	859	1,018	1,877
Caterham „ ... ..	888	1,055	1,943
Darenth „ ... ..	1,030	964	1,994
Belmont „ ... ..	336	...	336 <sup>a</sup>
Total ... ..	3,514	3,527	7,041

<sup>a</sup> Not yet definitely settled.

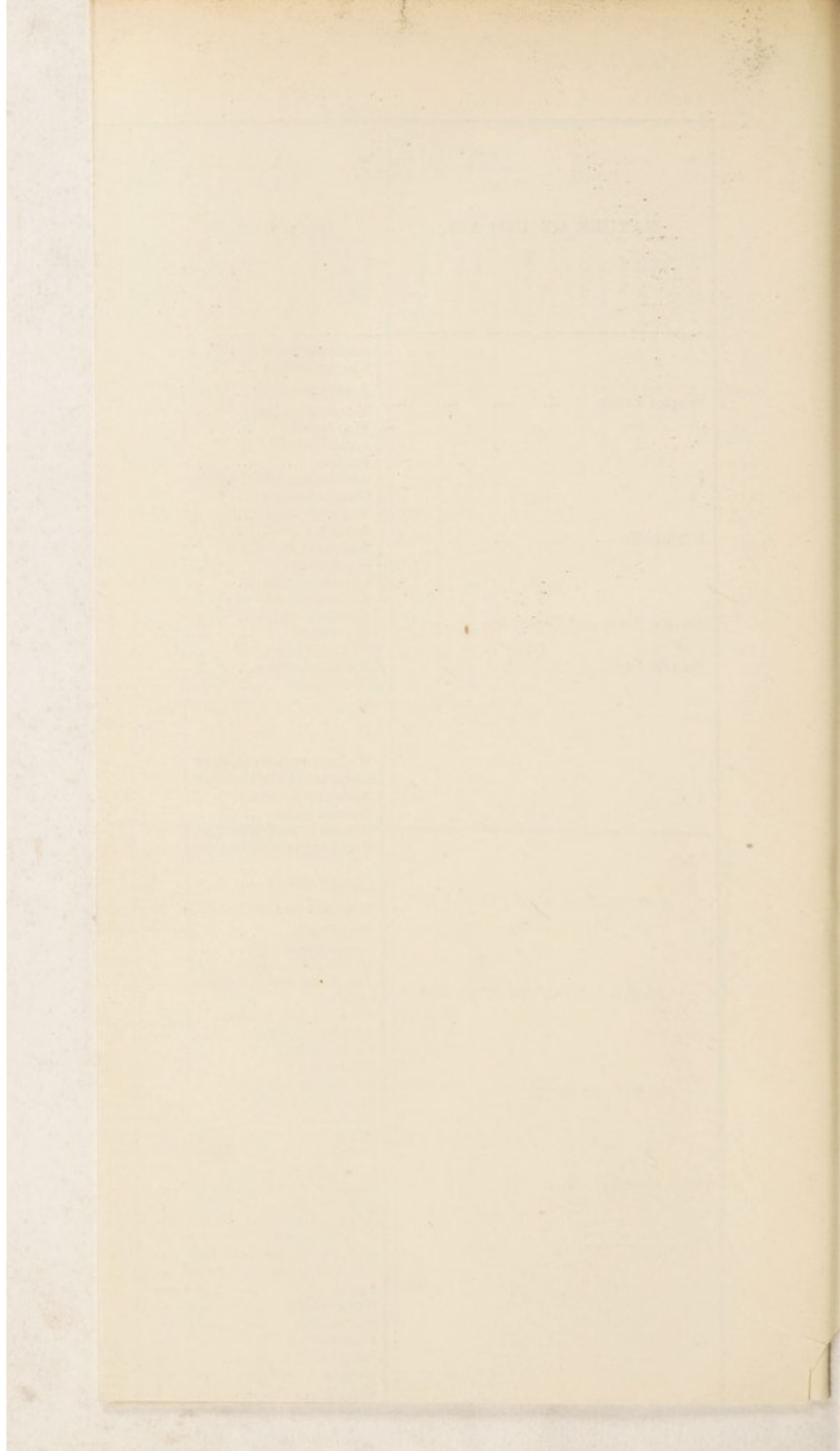
**Annual Reports.**

The annual reports of the medical superintendents of the asylums will be found on pp. 244–268.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

ANNUAL REPORT, STATISTICAL COMMITTEE, 1906  
TABLE XX.—Staff Illness in Infectious Hospitals during the year 1906.

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.	Grey Farm Hospital.	SEWARD (Fever Hospital).	Smallpox Hospital and Liver Ambulance Service.	REMARKS. (All recovered except where otherwise stated.)
		Number of illnesses.	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 officer	...	...	...	...	...	...	1	57	...	...	...	...	1	57	H. H. one worked at commencement of year; G. H. one remaining worked at end of year; R. H. one, G. F. H. one, worked at commencement of year; F. H. one, G. H. one, B. H. one, G. F. H. one, remaining worked at end of year.
	Charge nurse	...	...	...	...	...	...	4	90	...	...	...	...	4	90	
	Assistant nurses	3	103	3	124	1	49	10	479	5	295	4	244	9	288	
	Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaids	1	27	1	28	5	96	...	...	1	43	4	133	4	146	
	Laundrymaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant medical officers	1	21	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	1	24	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurses	1	29	3	191	1	26	8	295	3	140	...	...	...	...	
Diphtheria	Assistant cook	...	...	...	...	...	...	...	...	...	...	...	...	...	...	G. F. H. one remaining worked at end of year.
	Assistant landlady	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaids	3	111	...	...	...	...	...	...	...	...	...	...	...	...	
	Laundrymaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Amulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurse	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Scarlet Fever and Diphtheria	Assistant nurse	...	...	...	...	...	...	...	...	...	...	...	...	...	...	G. F. H. one remaining worked at end of year.
	Wardmaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Amulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurse	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Esteric Fever	Assistant nurse	...	...	...	...	...	...	...	...	...	...	...	...	...	...	S. W. H. one worked at commencement of year, who subsequently died; G. H. one remaining worked at end of year.
	Wardmaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Amulance driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurse	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Wardmaid	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant nurses	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Other Diseases	Medical superintendent	...	...	...	...	...	...	...	...	...	...	...	...	...	...	G. F. H. one worked at commencement of year; F. H. one, R. H. one, remaining worked at end of year; S. H. one died at City's Hospital; S. F. H. one died at Reception Hospital.
	Assistant medical officer	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Assistant matron	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Housekeeper	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Housekeeper (Amb. Sta.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Night superintendent	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
	Charge nurses	4	49	9	119	3	44	16	344	16	145	15	97	8	52	
	Assistant nurses	16	178	27	609	36	453	69	789	51	696	62	514	87	1,250	
	Wardmaids	19	183	30	315	29	264	19	263	45	356	41	336	46	628	
	Needlework sup.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Needlework maids	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Telephone clerk (Am. St. Ck.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Cook (Amb. Station)	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Assistant cooks	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Kitchen maids	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Pastry maid	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Scullery maids	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Messroom maids	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Housemaids	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Barnyard maids	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Laundry superintendent	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Laundry maids	1	7	...	...	...	...	...	...	...	...	...	...	...	...		
General servant (Am. St.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Superintendent (Am. St.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Assistant steward	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Steward's clerks	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Cook (Stationer, Amb. St.)	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Clerk of works	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Engineer	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Farm bailiff	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Carpenter	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Fair master	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Storekeeper	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Engine driver	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Fitters	1	31	...	...	...	...	...	...	...	...	...	...	...	...		
Solers	1	6	...	...	...	...	...	...	...	...	...	...	...	...		
Solers (Amb. Station)	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Ambulance drivers	3	24	...	...	...	...	...	...	...	...	...	...	...	...		
Foreman porter	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Porters	1	27	6	38	3	27	2	12	8	65	12	51	9	40		
Gate-porters	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Gate-keeper	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Landrymen	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Nurse attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Male attendants	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Disinfecting porter	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Housekeeper	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Gardener	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Handymen	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
TOTALS	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Number employed	(Males)	59	70	65	56	70	232	30	47	78	41	38	131	1,017	101	
(Females)	268	485	298	351	239	314	468	206	473	336	221	453	4,134	89		
TOTALS	327	555	363	407	309	546	698	236	521	317	279	584	5,151	190		
Number engaged during the year	(Males)	13	17	19	9	28	190	22	41	22	15	11	77	448	19	
(Females)	124	211	85	125	58	130	206	283	352	133	72	194	1,913	25		
TOTALS	137	228	104	134	66	246	241	247	374	148	83	273	2,461	44		
Number that left during the year	(Males)	15	16	17	8	28	205	34	18	18	17	15	62	455	29	
(Females)	113	222	80	111	71	213	204	61	246	149	71	197	1,758	56		
TOTALS	128	240	97	119	99	419	228	79	264	166	86	212	2,193	65		



**Asylum Statistics.** The annual statistical tables for each asylum are printed on pp. 268A-300.

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

TABLE I.—Admissions, Re-admissions, Discharges, and Deaths at Asylums during 1906.

	Males.	Females.	Total.
In the asylums, January 1st, 1906	3,230	3,360	6,590
<b>Cases admitted—</b>	<b>Males.</b>	<b>Females.</b>	<b>Total.</b>
First admissions	425	443	868
Not first admissions	1	5	6
From other Asylums of the Board	528	215	743
Total cases admitted during the year	426	448	874
Total cases under care during the year	3,656	3,808	7,464
<b>Discharged—</b>	<b>Males.</b>	<b>Females.</b>	<b>Total.</b>
Not insane	2	...	2
Recovered	9	6	15
Relieved	21	6	27
Not improved	41	32	73
To other Asylums of the Board	528	215	743
Died...	334	335	669
Total cases discharged and died during the year	407	379	786
Remaining in the asylums, December 31st, 1906	3,249	3,429	6,678
Average number resident during the year	3,236	3,396	6,632
Persons* under care during the year†	4,126	4,022	8,148
Persons admitted	896	663	1,559
Persons recovered	11‡	6	17‡
Transferred from other asylums not under the Board‡	128	117	245
Transferred to other asylums not under the Board§	20	20	40

Attention is again directed by the medical superintendent of Tooting Bec Asylum, Dr. Beresford, to the large proportion of very feeble and decrepit people who are sent into the asylum. Of 626 patients admitted 208 were upwards of 70 years of age. This is the asylum to which all patients are admitted in the first instance direct from the Parishes and Unions. Afterwards cases are selected for transfer to the other asylums of the Board. With such a large proportion of old and weak patients amongst the admissions, the sending of many of them to the other asylums cannot be avoided, hence the proportion of working patients at those asylums is steadily decreasing, and more paid help is required.

\* 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.

¶ Includes 2 "not insane" cases.

TABLE IA.—(1) *Previous Attacks among Persons Admitted at the Asylums during 1906, 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	..	...	...	...	...	...	...	299	334	633
" 2 attacks	...	...	...	...	...	...	...	14	11	25
" 3 "	...	...	...	...	...	...	...	4	2	6
" 4 "	...	...	...	...	...	...	...	2	...	2
" 5 "	...	...	...	...	...	...	...	...	...	...
" 6 "	...	...	...	...	...	...	...	...	...	...
Unknown...	...	...	...	...	...	...	...	78	62	140

(2) NUMBER OF TIMES PATIENTS RECOVERED.								IN BOARD'S ASYLUMS.			IN ANY ASYLUM.		
								M.	F.	Total.	M.	F.	Total.
Once	...	...	...	...	...	...	...	...	2	2	5	1	6
Twice	...	...	...	...	...	...	...	...	...	...	...	1	1
3 times	...	...	...	...	...	...	...	...	...	...	...	...	...
4 "	...	...	...	...	...	...	...	...	...	...	...	...	...
5 "	...	...	...	...	...	...	...	...	...	...	...	...	...
6 "	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown...	...	...	...	...	...	...	...	...	...	...	...	...	...

TABLE II.—*Admissions, Re-admissions, Discharges, and Deaths from the opening of the Asylums to the 31st December, 1906.*

	Males.	Females.	Total.	Males.	Females.	Total.
Persons admitted during the period of 36 years and 94 days	13,427	12,760	26,187			
Re-admissions	164	119	283			
<i>Admissions from other asylums of Board</i>				3,179	2,454	5,633
				16,770	15,333	32,103
	Males.	Females.	Total.			
Discharged cases—						
Not insane	30	26	56			
Recovered	637	443	1,080			
Relieved †	908	640	1,548			
Not improved	1,004	917	1,921			
To other asylums of the Board	2,891	1,982	4,873			
Died	8,051	7,896	15,947			
Total cases discharged and died since opening of the asylums				13,521	11,904	25,425
Remaining December 31st, 1906				3,249	3,429	6,678
Average number resident during the 36 years and 94 days				2,470	2,782	5,252
Transferred from other asylums not under the Board ‡				643	978	1,621
Transferred to other asylums not under the Board §				278	278	556

† These include a few escapes which have occurred since the opening of the asylums.

‡ Included in the admissions.

§ Included with the not improved cases

|| See notes to Table II., p. 268A.

TABLE II A.—Admissions and Recoveries of Persons\* from the opening of the Asylums to the 31st December, 1906 (36 Years and 94 Days).

	Males.	Females.	Total.
Persons * admitted ... ..	10,714	9,915	20,629
Persons discharged recovered during the same period ...	550	363	913
Of whom were re-admitted relapsed † ... ..	1	2	3
Recovered persons who have not relapsed ... ..	16	16	32
Relapsed persons discharged recovered ‡ ... ..	1	1	2
Net recovered persons § ... ..	13	14	27

N.B.—This is an incomplete table. See notes to Table II A. p. 270.

\* 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 on the Admissions per cent. at the Asylums for 1897, 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.*		Total.	Re. covered. †		Re. liewed.		Not Im. proved. ‡		Total.		Total.		Total.		Total.		Total.		Total.		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.			
1897 ...	305	217	522	15	9	24	33	19	52	34	20	54	209	190	399	2,914	3,085	5,999	2,891	3,092	5,983	4.9	4.1	4.6	7.2	6.1	6.7
1898 ...	260	289	549	25	12	37	15	13	28	40	34	74	202	216	418	2,892	3,099	5,991	2,953	3,087	6,040	9.6	4.1	6.7	6.8	7.0	6.9
1899 ...	298	228	526	15	9	24	31	8	39	40	32	72	214	217	431	2,890	3,061	5,951	2,874	3,069	5,943	5.0	3.9	4.6	7.4	7.1	7.2
1900 ...	175	209	384	10	8	18	14	6	20	24	27	51	235	284	519	2,782	2,945	5,727	2,836	2,995	5,831	5.7	3.8	4.7	8.2	9.5	8.9
1901 ...	218	219	437	5	1	6	1	3	4	15	21	36	170	172	342	2,809	2,967	5,776	2,769	2,919	5,688	2.3	0.5	1.4	6.1	5.9	6.0
1902 ...	246	207	453	4	2	6	10	3	13	26	24	50	156	164	320	2,857	2,981	5,838	2,853	2,972	5,825	1.6	1.0	1.3	5.5	5.5	5.5
1903 ...	588	637	1,225	8	7	15	13	15	28	22	22	44	233	223	456	3,170	3,351	6,521	3,097	3,271	6,368	1.4	1.1	1.2	7.5	6.8	7.2
1904 ...	395	375	770	9	10	19	14	9	23	16	36	52	272	283	555	3,254	3,388	6,642	3,312	3,385	6,697	2.3	2.7	2.5	8.2	8.4	8.3
1905 ...	351	335	686	8	15	23	23	19	42	38	48	86	306	281	587	3,230	3,360	6,590	3,245	3,370	6,615	2.3	4.5	3.3	9.4	8.3	8.9
1906 ...	426	448	874	11	6	17	21	6	27	41	32	73	334	335	669	3,249	3,429	6,678	3,236	3,396	6,632	2.1	1.3	1.7	10.3	9.9	10.1

\* Including transfers from asylums not under Board. † Including transfers to asylums not under Board. ‡ Including "not insane" cases shown on Table II.



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, 1906. (Table VIII. in reports previous to 1900.)

YEAR.	ADMITTED.				OF EACH YEAR'S ADMISSIONS DISCHARGED AND DIED IN 1906.				TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.				Remaining of each year's Admissions 31st December, 1906.	
	First Admissions.		Not First Admissions.		Total.		Recovered.		Not Improved.		Died.		Males.	Females.
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.		
	Total.	Grand Total.	Total.	Total.	Total.	Total.	Total.	Total.	Total.	Total.	Total.	Total.	Total.	Total.
1870 (part of)...	624	758	1,382	...	...	...	...	...	...	...	...	...	43	86
1871...	1,184	1,415	2,599	...	...	...	...	...	...	...	...	...	37	144
1872...	422	417	839	...	...	...	...	...	...	...	...	...	6	18
1873...	324	332	656	...	...	...	...	...	...	...	...	...	11	14
1874...	355	318	673	...	...	...	...	...	...	...	...	...	15	23
1875...	316	322	638	...	...	...	...	...	...	...	...	...	15	33
1876...	400	285	685	...	...	...	...	...	...	...	...	...	15	25
1877...	305	79	384	...	...	...	...	...	...	...	...	...	32	66
1878...	276	64	340	...	...	...	...	...	...	...	...	...	32	8
1879...	347	1	348	...	...	...	...	...	...	...	...	...	31	9
1880...	289	306	595	...	...	...	...	...	...	...	...	...	24	35
1881...	273	236	509	...	...	...	...	...	...	...	...	...	19	41
1882...	403	411	814	...	...	...	...	...	...	...	...	...	23	19
1883...	342	377	719	...	...	...	...	...	...	...	...	...	36	43
1884...	269	291	560	...	...	...	...	...	...	...	...	...	17	30
1885...	216	226	442	...	...	...	...	...	...	...	...	...	18	15
1886...	285	275	560	...	...	...	...	...	...	...	...	...	11	29
1887...	307	278	585	...	...	...	...	...	...	...	...	...	40	49
1888...	275	272	547	...	...	...	...	...	...	...	...	...	30	51
1889...	451	370	821	...	...	...	...	...	...	...	...	...	68	61
1890...	448	421	869	...	...	...	...	...	...	...	...	...	50	55
1891...	443	412	855	...	...	...	...	...	...	...	...	...	87	76
1892...	381	339	720	...	...	...	...	...	...	...	...	...	58	62
1893...	328	263	591	...	...	...	...	...	...	...	...	...	67	95
1894...	323	341	664	...	...	...	...	...	...	...	...	...	59	76
1895...	305	275	580	...	...	...	...	...	...	...	...	...	64	101
1896...	301	215	516	...	...	...	...	...	...	...	...	...	76	90
1897...	303	215	518	...	...	...	...	...	...	...	...	...	94	96
1898...	256	286	542	...	...	...	...	...	...	...	...	...	101	92
1899...	291	224	515	...	...	...	...	...	...	...	...	...	93	135
1900...	170	204	374	...	...	...	...	...	...	...	...	...	110	94
1901...	216	219	435	...	...	...	...	...	...	...	...	...	77	95
1902...	245	205	450	...	...	...	...	...	...	...	...	...	82	117
1903...	587	637	1,224	...	...	...	...	...	...	...	...	...	67	139
1904...	394	375	769	...	...	...	...	...	...	...	...	...	78	109
1905...	342	345	687	...	...	...	...	...	...	...	...	...	84	65
1906...	425	443	868	...	...	...	...	...	...	...	...	...	88	103
Total	13,427	12,760	26,187	61	67	128	41	32	73	434	335	669	1,004	917
													1,921	8,061
													15,947	13,249
													3,429	6,678

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.	
	<b>CEREBRO-SPINAL DISEASES—</b>																								
Apoplexy ... ..																									
Brain, Sclerosis of ... ..																									
Brain atrophy ... ..																									
Cerebral embolism ... ..																									
Cerebral hæmorrhage ... ..																									
Cerebral hæmorrhage & pulmonary tuberculosis ... ..																									
Cerebral softening ... ..	1	1								1	1														
Cerebral tumour ... ..																									
Epilepsy ... ..	1	1		4	3	7	1	2	3	4	2	6	1	2	3	2	1	3	1	1	2	2	2	4	
Exhaustion of Dementia ... ..																									
General paralysis ... ..	1	1		3	2	5	2	2	2	1	1	1	1	2	2	1	3	3	2	3	1	4			
General paralysis and pulmonary tuberculosis ... ..													1	1											
Maniacal or melancholic exhaustion ... ..																									
Organic disease of brain ... ..	1	1	2	3		3	4		4	1		1							1		1				
<b>THORACIC DISEASES—</b>																									
Aneurism ... ..																									
Asthma ... ..																									
Bronchitis ... ..																									
Empyema ... ..													1		1										
Heart, valvular disease of ... ..							1	1	1	1		1	1		1								1	1	
Heart, degeneration of ... ..				1		1	1		1	1		1													
Heart, muscular disease of ... ..																									
Heart, rupture of ... ..																									
Lung, gangrene of ... ..																									
Pericarditis ... ..							1	1	2	1	1	2													
Pleurisy ... ..	1	1											1		1										
Pneumonia and bronchitis ... ..																									
Pneumonia ... ..	1	1	2	4	10	14	4	3	7	3	3	6	1	1	2	2	2	4	1	1	4	4	8		
Pneumothorax ... ..																									
Phthisis ... ..	1	1	13	6	19	5	3	8	3	3	6	4		4	2	3	5	1	2	3	2	1	3		
Pulmonary tuberculosis ... ..				1		1	2	3	5	1		1	2	1	3	1	1	2				2	4	6	
Pulmonary abscess ... ..																									
Syncope, following sudden and acute dilatation of heart (inquest) ... ..																									
<b>ABDOMINAL DISEASES—</b>																									
Ascites ... ..				1		1																			
Bright's disease, chronic ... ..				2		2				1		1													
Colitis ... ..																									
Cystitis ... ..																									
Constipation (chronic) and fecal absorption ... ..										1		1													
Liver, cirrhosis of ... ..																									
Nephritis, chronic ... ..																									
Nephritis, acute ... ..																									
Obstruction of bowels (volvulus) ... ..																									
Peritonitis ... ..																									
Peritonitis tubercular ... ..							1		1																
Rupture of intestine ... ..																									
Stomach, fibrous stenosis of pyloric end of ... ..																									
Stomatitis gangrenous ... ..																									
Tumour of bladder ... ..										1		1													
<b>GENERAL DISEASES—</b>																									
Anæmia ... ..				1		1																			
Cancer ... ..										1		1													
Cancer and pulmonary tuberculosis ... ..																									
Carbuncle ... ..																									
Caries of spine ... ..										1		1													
Chronic pyæmia ... ..																									
Dermatitis exfoliative ... ..													1		1										
Enteric fever ... ..				3		3	4		4	3		3													
Enteritis ... ..																									
Gastro-enteritis (inquest) ... ..																									
Gangrene ... ..																									
Scarlet fever ... ..																									
Septicæmia ... ..	1	1																							
Senile decay ... ..																									
Senile gangrene ... ..																									
Syphilis ... ..																									
Tuberculosis ... ..	2	2		1		1	1		1	3	1	4													
Tuberculosis of bones and joints ... ..																									
Uremia ... ..																									
<b>ACCIDENT OR VIOLENCE—</b>																									
Fracture of femur ... ..																									
Fracture of femur (inquest) ... ..																									
Impaction of stone in gullet (inquest) ... ..													1		1										
Suffocation after a fit (inquest) ... ..																									
Totals ... ..	4	8	12	39	24	63	28	13	41	27	11	38	15	5	20	10	12	22	10	6	16	16	18	34	

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



From the foregoing table it will be seen that the principal causes of death were pneumonia, phthisis, epilepsy, general paralysis, pulmonary tuberculosis, diseases of the heart, cancer, and senile decay.

TABLE VI.—*Length of Residence in those Discharged Recovered and in those who have Died at the Asylums during 1906.* (Table IX. in reports previous to 1900).

LENGTH OF RESIDENCE.	RECOVERED.			DIED.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under 1 Month... ..	2*	...	2*	10	12	22
From 1 to 3 Months ...	3	2	5	19	12	31
" 3 ,, 6 ,, ..	3	...	3	21	22	43
" 6 ,, 9 ,, ..	1*	3	4*	32	11	43
" 9 ,, 12 ,, ..	...	...	...	36	17	53
" 1 ,, 2 Years ...	...	1	1	58	46	104
" 2 ,, 3 ,, ..	1	...	1	33	36	69
" 3 ,, 5 ,, ..	1	...	1	38	60	98
" 5 ,, 7 ,, ..	...	...	...	11	21	32
" 7 ,, 10 ,, ..	...	...	...	14	21	35
" 10 ,, 12 ,, ..	...	...	...	13	13	26
" 12 ,, 15 ,, ..	...	...	...	10	14	24
" 15 ,, 20 ,, ..	...	...	...	8	13	21
" 20 ,, 25 ,, ..	...	...	...	9	6	15
" 25 ,, 30 ,, and } upwards ... .. }	...	...	...	22	31	53
Totals ... ..	11	6	17	334	335	669

\* Includes 1 "not insane."

89 of the patients who died had been inmates for upwards of 15 years, and 53 for upwards of 25 years.

TABLE VII.—*Duration of Insanity on Admission in the Admissions, Discharges, and Deaths at the Asylums during 1906.*

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	3	4	...	...	..	...	...	..	...	3	3
" 1 month " ..	22	20	42	1	...	1	1	1	2	18	21	39
" 2 months " ..	23	23	46	1	...	1	...	1	1	7	14	21
" 3 " " ..	4	16	20	1	...	1	2	1	3	5	9	14
Second class—First attack—												
Above 3 and within 6 months												
on admission ... ..	13	24	37	1	...	1	6	4	10	15	10	25
Above 6 and within 12 months												
on admission ... ..	30	37	67	2	...	2	5	2	7	28	25	53
Third class—Not first attack, and												
within 1 month on admission	4	1	5	1	...	1	...	...	...	...	2	2
" 6 months " ..	7	6	13	...	...	...	3	...	3	1	3	4
" 12 " " ..	3	1	4	...	...	..	1	...	1	5	2	7
Fourth class—First attack or not, but												
over 12 months on admission ...	113	155	268	2	3	5	14	7	21	104	127	231
Fifth class—Congenital ... ..	179	137	316	...	...	...	27	20	47	127	95	222
Unknown ... ..	25	25	50	...	3	3	3	2	5	24	24	48
Not insane ... ..	2	..	2	2	..	2	..	..	..	..	..	..
Totals ... ..	426	448	874	11	6	17	62	38	100	334	335	669

TABLE VIII.—Ages of Patients Admitted, Recovered, and Died at the Asylums during 1906, and of those remaining on 31st December, 1906.

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

AGES.	ADMISSIONS.			RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DEC., 1906.		
	From Parishes and Unions.†			M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
	M.	F.	Tl.									
Under 5 years ...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years ...	46	32	78	...	...	...	...	...	...	239	146	385
" 10 " 15 " ...	32	31	63	1	...	1	11	9	20	272	203	475
" 15 " 20 " ...	47	25	72	1	...	1	27	15	42	319	200	519
" 20 " 25 " ...	35	25	60	...	1	1	29	13	42	245	237	502
" 25 " 30 " ...	26	14	40	2	...	2	26	11	37	262	211	473
" 30 " 35 " ...	22	15	37	...	1	1	18	5	23	273	245	518
" 35 " 40 " ...	24	20	44	...	...	...	9	12	21	208	201	409
" 40 " 45 " ...	15	19	34	...	...	...	11	6	17	201	222	423
" 45 " 50 " ...	16	19	35	1	1	2	16	18	34	210	227	437
" 50 " 55 " ...	13	19	32	1	...	1	17	20	37	194	246	440
" 55 " 60 " ...	17	28	45	...	...	...	18	13	31	200	237	437
" 60 " 65 " ...	28	33	61	...	...	...	21	18	39	165	229	394
" 65 " 70 " ...	28	37	65	3	2	5	31	42	73	141	244	385
" 70 " 75 " ...	32	54	86	1	...	1	27	33	60	136	231	367
" 75 " 80 " ...	29	40	69	1	...	1	45	51	96	98	175	273
" 80 " 85 " ...	12	26	38	...	1	1	13	38	51	45	120	165
" 85 " 90 " ...	3	9	12	...	...	...	8	15	23	16	42	58
" 90 " 95 " ...	1	2	3	...	...	...	1	7	8	3	6	9
" 95 " 100 " ...	...	...	...	...	...	...	2	1	3	...	2	2
" 100 " 105 " ...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown ...	...	...	...	...	...	...	...	...	...	2	5	7
Total ...	426	448	874	11	6	17	334	335	669	3249	3429	6678
Mean age ...	36	39	38	39	52	39	40	43	42	35	41	38

Of the direct admissions 334 (275)\* were patients over 60 years of age; 8 (9) patients over 60 years of age were discharged as recovered. There were 69 (74) 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 1906.

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

CONDITION AS TO MARRIAGE.	ADMISSIONS.			RECOVERIES.			DEATHS.		
	From Parishes and Unions.†			M.	F.	Tl.	M.	F.	Tl.
	M.	F.	Tl.						
Single ...	273‡	209	482‡	5‡	3	8‡	163	123	286
Married ...	82	84	166	3	2	5	67	47	114
Widowed ...	70‡	154	224‡	3‡	1	4‡	72	128	200
Unknown ...	1	1	2	...	...	...	32	37	69
Totals ...	426	448	874	11	6	17	334	335	669

482 (307) out of a total of 874 (686) direct admissions are recorded as single.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

† Including transfers from asylums not under the Board.

‡ Includes 1 case "not insane."

TABLE X.—*Probable Causes of Insanity in the Patients admitted at the Asylums during 1906.*

(Table XI. in reports previous to 1900.)

CAUSES OF INSANITY.	Total number of direct Admissions. Males, 426; Females, 448; Total, 874.											
	NUMBER OF INSTANCES IN WHICH CAUSES WERE ASSIGNED.											
	Number of Cases. Admissions—Males, 311; Females, 378; Total, 689.											
	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.	
<b>MORAL—</b>												
Domestic trouble (including loss of relatives and friends) ...	...	...	1	1	2	...	4	4	1	5	6	
Adverse circumstances (including business anxieties and pecuniary difficulties) ...	...	...	...	...	...	6	...	6	6	...	6	
Love affairs ...	...	...	...	...	...	...	...	...	...	...	...	
Mental anxiety and worry (not included under the above head) and overwork ...	...	...	...	...	...	3	2	5	3	2	5	
Religious excitement ...	...	...	...	2	2	...	1	1	...	3	3	
Fright and nervous shock ...	1	...	1	...	...	1	2	3	2	2	4	
<b>PHYSICAL—</b>												
Intemperance in drink... ..	...	...	4	5	9	7	9	16	11	14	25	
Intemperance, sexual ... ..	...	...	...	...	...	...	1	1	...	1	1	
Venereal disease ... ..	...	...	2	...	2	1	2	3	3	2	5	
Self-abuse, sexual ... ..	...	...	1	...	1	1	...	1	2	...	2	
Over-exertion ... ..	...	...	...	...	...	...	...	...	...	...	...	
Sunstroke ... ..	...	...	...	...	...	...	...	...	...	...	...	
Accident or injury ... ..	...	1	1	...	...	6	2	8	6	3	9	
Parturition and the puerperal state ... ..	...	...	...	...	...	...	2	2	...	2	2	
Change of life ... ..	...	...	...	...	...	...	1	1	...	1	1	
Fevers ... ..	...	...	...	2	2	...	...	...	...	2	2	
Privation and starvation ... ..	...	...	...	...	...	...	...	...	...	...	...	
Old age ... ..	...	...	...	...	...	106	167	273	106	167	273	
Other bodily diseases or disorders... ..	...	1	1	3	4	2	9	11	5	11	16	
Previous attacks ... ..	2	1	3	...	...	6	12	18	8	13	21	
Hereditary influences ... ..	12	12	24	...	...	23	22	45	35	34	69	
Congenital defect, ascertained	5	8	13	3	5	169	125	294	177	135	312	
Other ascertained causes ... ..	...	1	1	3	5	...	1	1	3	4	7	
Unknown... ..	...	...	...	...	...	...	...	...	...	...	...	
Not insane ... ..	...	...	...	...	...	1	...	1	1	...	1	

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 of the Board are not included in this table.

Intemperance in drink is assigned as a cause in 25 (14)\* cases. Hereditary influence in 45 (40) cases, and congenital defect in 312 (253).

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TABLE XI.—*Form of Mental Disorder in the Admissions, Recoveries, and Deaths at the Asylums during 1906 and of Inmates on 31st December, 1906.*

(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.
<b>CONGENITAL OR INFANTILE MENTAL DEFICIENCY—</b>												
Congenital—(a) with epilepsy	49	31	80	...	...	..	64	45	109	607	616	1,223
(b) without ..	128	105	233	...	...	..	60	51	111	1,518	1,219	2,737
Epilepsy acquired ...	16	6	22	...	...	..	13	5	18	180	156	336
General paralysis of the insane	8	4	12	...	...	..	18	7	25	34	21	55
Cretanism... ..	...	1	1	..	...	...	...	...	...	...	3	3
<b>MANIA—</b>												
Acute ... ..	3	2	5	3	...	3	...	...	...	2	...	2
Chronic ... ..	5	10	25	2	1	3	4	7	11	109	181	290
Recurrent ... ..	1	...	1	...	...	...	...	...	...	13	1	14
A potù ... ..	1	...	1	1	...	1	...	...	...	...	...	...
Senile ... ..	5	13	18	...	...	...	2	1	3	7	16	23
Delusional insanity ...	9	15	24	...	1	1	...	5	5	11	39	50
<b>MELANCHOLIA—</b>												
Acute ... ..	2	2	4	...	...	...	...	...	...	2	...	2
Chronic ... ..	2	11	13	...	...	...	2	3	5	39	69	108
Recurrent ... ..	...	1	1	...	...	...	...	...	...	...	...	...
Senile ... ..	1	6	7	...	...	...	3	3	6	12	11	23
<b>DEMENTIA—</b>												
Primary ... ..	35	19	54	2	1	3	...	3	3	3	14	17
Secondary ... ..	52	52	104	1	...	1	37	38	75	320	577	897
Senile ... ..	101	153	254	...	1	1	120	162	282	383	501	884
Organic ( <i>i.e.</i> , from tumours, coarse brain disease, &c.) ...	1	2	3	...	...	...	11	5	16	7	2	9
Alcoholic dementia ... ..	5	5	10	...	2	2	...	...	...	2	3	5
Not insane ... ..	1	...	1	;	..	1	...	...	...	...	...	...
Mania following enteric ...	1	...	1	1	...	1	...	...	...	...	...	...
<b>Totals ... ..</b>	<b>426</b>	<b>448</b>	<b>874</b>	<b>11</b>	<b>6</b>	<b>17</b>	<b>334</b>	<b>335</b>	<b>669</b>	<b>3,249</b>	<b>3,429</b>	<b>6,678</b>

3,960 (3,813)\* out of the 6,678 (6,589) patients remaining in the asylums at the end of the year were cases of congenital insanity, 290 (300) of chronic mania, 108 (116) of chronic melancholia, 897 (1,030) of secondary dementia, and 884 (861) of senile dementia.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TABLE XII.—Station or Occupation of Patients Admitted at the Asylums during 1906.

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

STATION OR OCCUPATION.	M.	F.	STATION OR OCCUPATION.	M.	F.	STATION OR OCCUPATION.	M.	F.
			Brought forward	78	52	Brought forward	191	102
Army pensioner ...	1	...	Fireman ... ..	1	...	Porter, coal ... ..	1	...
Artists ... ..	2	...	Flower seller ...	1	...	„ railway ... ..	1	...
Attendant ... ..	1	...	French polisher ...	1	...	Plasterers ... ..	2	...
Bakers ... ..	4	...	Furniture salesman	1	...	Presser ... ..	1	...
Barbers ... ..	3	...	Gardeners ... ..	4	...	Rubber stamp mkr.	1	...
Barber's boy ... ..	1	...	Gilder ... ..	1	...	Sawyer ... ..	1	...
Basket maker ... ..	1	...	Greengrocers'			Schoolmaster ... ..	1	...
Blacksmith ... ..	1	...	assistants ... ..	2	...	Sculleryman ... ..	1	...
Blue maker ... ..	1	...	Grocer ... ..	1	...	Seamen ... ..	3	...
Boot clicker ... ..	...	1	Grocer's assistant...	1	...	Servants... ..	1	10
Boot makers ... ..	3	...	Hawkers ... ..	5	3	Servant, daily ... ..	...	1
Boot repairer ... ..	1	...	Hatter ... ..	1	...	Servants, general...	...	23
Boot sewer ... ..	...	1	Horse dealers ... ..	2	...	Seamstresses ... ..	...	2
Bottle dealer... ..	1	...	Housework ... ..	...	3	Shoebblack ... ..	1	...
Box maker ... ..	1	...	Housewives ... ..	...	18	Shoemakers ... ..	5	...
Bricklayer ... ..	1	...	Insurance agent ...	1	...	Shop assistant ... ..	1	...
Bookbinder ... ..	1	...	Ice cream vendor... 1	...	1	Ship's fireman ... ..	1	...
Brass finisher ... ..	1	...	Ironer ... ..	...	1	Shirt maker ... ..	...	1
Builder ... ..	1	...	Joiners ... ..	2	...	Shopkeeper ... ..	...	1
Builder's foreman	1	...	Labourers ... ..	44	...	Silk winder ... ..	...	1
Cabinetmakers ...	3	...	„ general... ..	9	...	Shipwrights ... ..	2	...
Cabinetmaker's			Labourer, waterside	1	...	Silversmith ... ..	1	...
assistant ... ..	1	...	„ kitchen... ..	1	...	Soldiers ... ..	2	...
Cap makers ... ..	1	1	„ brewer's ... ..	1	...	Solicitor ... ..	1	...
Carmen ... ..	3	...	„ bricklayer's ...	1	...	Stable help ... ..	1	...
Carpenters ... ..	6	...	„ wharf ... ..	1	...	Stablemen ... ..	2	...
Caretaker ... ..	...	1	Labourers, dock ...	2	...	Street orderly ... ..	1	...
Clerks ... ..	10	...	Labourer, painter's	1	...	Stocking maker ... ..	...	1
Coachmen ... ..	5	...	Laundryman... ..	1	...	Stonemason ... ..	1	...
Carver and gilder	1	...	Laundresses ... ..	...	4	Swordblade		
Charwomen ... ..	...	25	Law writer ... ..	1	...	embosser ... ..	1	...
Child's nurse... ..	...	1	Lighterman ... ..	1	...	Sweetmaker ... ..	1	...
Crane driver... ..	1	...	Mangler... ..	1	...	Tailors ... ..	11	...
Coopers ... ..	3	...	Mattress maker ...	1	...	Tailoresses ... ..	...	4
Compositor ... ..	1	...	Marble polisher ...	1	...	Table maker ... ..	1	...
Cellarman ... ..	1	...	Matchbox maker... ..	...	1	Tinsmith ... ..	1	...
Cabmen ... ..	2	...	Messenger ... ..	1	...	Travellers ... ..	2	...
Cork cutter ... ..	1	...	Mould cutter ... ..	1	...	Vanboy ... ..	1	...
Collar cutter... ..	1	...	Monthly nurse ... ..	...	1	Venetian blind		
Coffeshopassistant	1	...	Music teacher ... ..	...	1	maker ... ..	1	...
Cleaning ... ..	1	..	Navy pensioner ... ..	1	...	Watchman ... ..	1	...
Cooks ... ..	...	6	Newsagents ... ..	2	...	Watchmaker... ..	1	...
Collar maker... ..	...	1	Needle-women ... ..	...	17	Waterman ... ..	1	...
Costermonger ... ..	1	...	Nurse ... ..	...	1	Wardrobe dealer ...	...	1
Crossing sweepers	...	1	Paper boy ... ..	1	...	Washerwoman ... ..	...	1
Dock gateman ... ..	1	...	Painters ... ..	4	...	Writer ... ..	1	...
Dressmakers ... ..	...	10	Park attendant ... ..	1	...	Wood turner... ..	1	...
Errand boys ... ..	3	...	Piano tuner ... ..	1	...	None ... ..	82	220
Engineers ... ..	3	...	Pianoforte maker... ..	1	...	None (children) ...	90	68
Engineer's smith ...	1	...	Plumber's gas-fitter	1	...	Not known ... ..	7	12
Fishmonger ... ..	...	1	Porters ... ..	3	...			
Field workers ... ..	...	2	Potmen ... ..	2	...			
Fishing net maker	...	1	Porter, market ... ..	1	...			
File cutter ... ..	1	...	„ auctioneer ... ..	1	...			
Carried forward	78	52	Carried forward	191	102	Totals ... ..	426	448



TABLE XIII.—*Table of Heredity in Patients admitted in the Asylums during 1906.*

DEGREE.	Males.	Females.	Total.
<b>I. DIRECT—</b>			
Paternal ... ..	13	10	23
Maternal ... ..	6	5	11
Grandparents ... ..	5	2	7
<b>II. COLLATERAL—</b>			
Brothers or sisters ... ..	9	13	22
Paternal uncles or aunts ... ..	5	11	16
Maternal „ „ ... ..	9	6	15
Maternal or paternal uncles or aunts ... ..	...	...	...
Maternal or paternal grandparents ... ..	2	2	4
Cousins ... ..	3	1	4
<b>III. REMOTE—</b>			
Undefined ... ..	5	3	8
Totals ... ..	57	53	110
Total number of direct admissions ... ..	426	448	874
Number in which causes were assigned ... ..	36	35	71
Percentage of heredity on admissions ... ..	8.45	7.81	8.12

In the 110 (79)\* cases dealt with, there appears to have been a history of insanity in the parents or grandparents of the patients in 41 (25) cases and in other relatives in 69 (54) cases.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

TABLE XIV.—Table showing the number of Male and Female Imbeciles Admitted, Transferred, Discharged, and Died at the Board's several Asylums during the year 1906, according to the Parishes and Unions, also the number remaining under treatment at the end of the year.

PARISHES AND UNIONS.	No. remaining at Asylum on 1st January, 1906.			Admitted.						Died.			Discharged.			Transferred to other Asylums of the Board.			No. remaining at Asylum on 31st December, 1906.					
	M	F	Total.	Direct.			From other Asylums of the Board.			M	F	Total.	M	F	Total.	M	F	Total.	M	F	Total.			
				M	F	Total.	M	F	Total.															
																						M	F	Total.
Kensington	87	69	149	13	5	18	15	5	20	6	14	8	3	11	3	1	4	15	5	20	81	68	149	
Hammersmith	41	55	96	8	11	19	4	3	7	11	13	2	3	5	8	3	4	7	4	3	7	45	54	99
Fulham	53	44	97	15	6	21	12	...	12	6	18	7	1	8	8	3	1	12	12	...	12	54	43	97
Paddington	53	39	92	8	9	17	19	...	25	7	1	7	...	8	8	3	3	3	19	6	25	55	42	97
Chelsea	45	58	103	2	3	5	...	3	3	3	3	5	3	8	8	3	3	...	...	3	42	59	101	
St. George's, W.	81	78	159	14	15	29	13	4	17	10	18	10	3	1	1	4	1	13	13	4	17	82	84	166
Westminster	44	36	80	...	4	4	2	5	5	2	7	5	...	8	7	...	...	...	...	...	3	40	38	78
St. Marylebone	97	98	195	3	3	6	17	3	19	6	12	6	1	6	12	1	1	17	17	2	19	94	96	190
St. Pancras	355	390	745	30	47	77	32	18	50	40	92	52	9	40	92	9	6	50	32	18	50	323	390	713
Hampstead	24	28	52	2	10	12	2	1	3	3	6	1	3	4	7	1	4	3	2	1	3	24	31	55
Islington	108	111	219	7	11	18	15	6	21	7	8	7	7	11	15	8	11	15	15	6	21	109	114	223
Hackney	112	123	235	18	21	39	25	9	34	7	11	18	1	1	18	1	1	25	25	9	34	122	133	255
Bloomsbury	38	36	74	6	5	11	3	3	6	3	2	3	3	2	2	2	1	3	3	3	5	40	33	73
Strand	29	25	54	1	1	2	4	3	4	1	5	1	1	1	5	1	1	4	4	...	...	29	24	53
Holborn	166	187	353	5	8	13	16	...	23	10	20	10	9	20	30	1	1	16	16	7	23	161	175	336
London, City of	102	76	178	25	4	29	21	3	24	13	6	19	9	9	17	6	6	24	21	3	24	103	74	177
Shoreditch	109	117	226	10	13	23	17	7	24	6	11	17	1	7	17	7	7	17	17	7	24	112	119	231
Bethnal Green	92	103	195	8	6	14	16	3	19	7	5	7	7	12	13	5	12	16	16	3	19	93	102	195
Whitechapel	137	107	244	30	23	53	36	15	51	12	13	25	11	11	25	11	11	36	36	15	51	144	111	255
St. George's, E.	62	63	125	10	10	20	13	6	19	8	3	11	3	3	11	3	3	19	19	6	19	61	69	130
Stepney	40	51	91	12	12	24	20	4	24	3	5	8	3	5	8	3	5	20	20	4	24	50	58	108
Mile End	90	81	171	8	10	18	9	2	11	9	18	3	3	9	18	3	3	9	9	2	11	85	82	167
Poplar	124	165	289	22	14	36	25	11	36	13	21	34	2	2	36	2	2	25	25	11	36	131	158	289
Southwark	188	155	343	30	20	50	26	10	36	24	16	40	1	1	40	1	1	26	26	10	36	181	168	349
Bernoldsey	138	132	270	22	13	35	14	7	21	15	29	40	3	3	43	2	2	26	26	10	36	142	140	282
Lambeth	243	294	537	38	40	78	31	14	45	27	31	58	4	4	62	4	4	31	31	14	45	251	300	551
Wandsworth	168	160	328	33	40	73	39	17	56	23	19	42	7	7	49	7	7	39	39	17	56	172	177	349
Camberwell	189	234	423	22	39	61	32	20	52	21	29	50	2	2	31	2	2	32	32	20	52	188	240	428
Greenwich	124	119	243	20	18	38	33	11	44	9	10	19	2	2	21	2	2	33	33	11	44	133	125	258
Woolwich	59	62	121	7	14	21	8	13	21	4	3	7	4	3	7	4	3	8	8	13	21	61	73	134
Lewisham	39	44	83	7	3	10	9	2	11	4	5	4	4	1	5	4	1	9	9	2	11	41	44	85
Totals	3,230	3,360	6,590	426	448	874	528	215	743	334	335	669	73	44	117	(16)	(5)	528	528	215	743	3,249	3,420	6,678

NOTE.—The small figures in brackets represent alterations in chargeability after admission.

## III.—CHILDREN'S SCHOOLS AND HOMES.

**Children suffering from ophthalmia or other contagious disease of the eye.**

The reports of the visiting ophthalmic surgeon, Mr. E. Treacher Collins, on the two Ophthalmia Schools, at Swanley and Brentwood respectively, will be found at pp. 50-52.

There were 472 (498)\* children in the homes at the beginning of the year; 383 (366) were admitted during the year direct from the unions or parishes, and 71 (63) from other institutions of the Board; 370 (426) children were discharged direct to the unions or parishes and 55 (29) to other institutions of the Board. One died; and 500 (472) remained under treatment at the end of the year.

**Children suffering from contagious disease of the skin or scalp.**

At the two Ringworm Schools at Witham and Sutton respectively there were 538 (569) children remaining at the beginning of the year; 585 (554) were admitted from the unions and parishes, and 120 (65) from other institutions of the Board; 784 (622) have been discharged to the unions and parishes, and 118 (26) to other institutions of the Board; 2 (2) have died; and 339 (538) remained under treatment

at the close of the year.

The reports of the visiting medical officer are on pp. 52-54.

**Children requiring special treatment during convalescence, or the benefit of seaside air.**

The Homes at Herne Bay, Margate, and Rustington contained 307 (306) children at the beginning of the year; 648 (548) were admitted direct from the unions and parishes, and 129 (124) from other institutions of the Board; 599 (493) were discharged to the unions and parishes, and 140 (167) to other institutions of the Board; 10 (11) died; and 335 (307) remained under treatment at the end of the year.

The reports of the visiting medical officers will be found on pp. 55, 56.

**Defective children.**

In the eight Homes for Children who, by reason of defect of intellect or physical infirmity, cannot properly be trained in association with children in ordinary schools, there were resident at the beginning of the year 100 (89) children, 62 (39) were admitted from the unions or parishes, and 129 (118) from other institutions of the Board; 9 (4) were discharged to the unions or parishes, and 182 (123) to other institutions of the Board; one died; 119 (119) remained under training at the end of the year.

The reports of the medical officers will be found on pp. 57-68.

**Remand homes.**

In the three homes provided for children who are ordered by two Justices or a Magistrate to be taken, under the Industrial Schools Act, 1866, and Youthful Offenders' Act, 1900, to a workhouse or an asylum of the district, there were resident 29 (40) children at the beginning of the year; 3,068 (1,987) were admitted, and 3,079 (1,998) were discharged, leaving 18 (29) resident at the end of the year.

\* Italic figures in brackets throughout are the corresponding figures for 1905.

## IV.—TRAINING SHIP EXMOUTH.

**Statistics.** The number of boys admitted during the year was 279 (277)\* (including 97 (92) from extra-metropolitan parishes and unions), while the number discharged was 281 (256); and one died.

Of the discharges 58 (96) entered the royal navy, 115 (123) the mercantile marine, 39 (12) the army as musicians, and 69 (25) were returned to their respective parishes and unions.

At the end of the year there remained 578 (581) boys under training.

The statistical tables on pp. 83–89 supply detailed information concerning the boys under training.

## V.—GENERAL SUMMARY.

In conclusion, we 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, 1906.
Fever patients ... ..	381,405	4,931
Smallpox patients ... ..	75,076	—
Imbeciles (including 1,201 admitted at Hampstead Hospital) ... ..	26,470	6,678
Boys on training ship "Exmouth" ... ..	9,430	578
Children at homes and special schools ... ..	21,758	1,374
Totals ... ..	514,139	13,561

\* Italic figures in brackets throughout are the corresponding figures for 1905.

## 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 there are included, in the first place, reports based on the records of the fever hospitals for 1906, 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. Summary of Antitoxin treatment of diphtheria.
4. Tracheotomy, intubation, and laparotomy statistics.
5. Miscellaneous diseases.
6. Causes of death in scarlet fever, diphtheria, and enteric fever.

There are also included papers by two of the Board's assistant medical officers.

(Signed)      WILLIAM R. SMITH,  
*Chairman.*

# APPENDIX I.—INFECTIOUS DISEASES.

(Statistical tables detached from the Ambulance Committee's Annual Report, p. 90.)

## A.—AMBULANCE SERVICE.—Number of Patients removed by the Ambulances of the Board.

	From 1881 to 1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	TOTALS.
<b>REMOVED:—</b>													
From homes to Hospitals	110,760	22,152	22,795	20,923	24,917	21,430	25,532	24,410	18,191	18,468	23,736	25,893	359,207
General Hospitals	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever from homes to General Hospitals	627	109	186	133	247	201	98	59	...	...	...	...	1,660
From General Hospitals to homes, owing to want of room in the Managers' Hospitals, or to the patients being extra-Metropolitan residents	1,335	1,287	752	71	144	20	159	51	44	44	37	24	3,968
<b>RETURNED HOME:—</b>													
Mistaken diagnoses	†	†	†	†	†	†	†	33	48	38	51	68	238
<b>TRANSFERRED:—</b>													
Convalescent to Northern and other Hospitals	36,570	9,998	8,941	6,437	7,973	5,394	5,223	4,210	2,565	5,388	9,584	12,617	114,900
Other transfers between Hospitals and Wharves	68	1	10	2	8	39	201	66	43	3	642	21	1,104
<b>DISCHARGED:—</b>													
From Northern Hospitals to Town Hospitals	29,256	5,899	5,259	4,226	4,530	2,681	4,300	4,489	2,758	4,300	6,099	...	73,797
From Northern Hospital and conveyed from Eastern, Western, South-Eastern, North-Western, and South-Western Hospitals to other Hospitals	463	154	111	1	99	29	126	293	229	306	574	...	2,385
From Gore Farm Hospital to Town Hospitals	5,562	3,629	3,658	2,445	3,374	2,735	1,239	...	...	...	...	...	22,642
From Gore Farm Hospital and conveyed from the South-Eastern, the South-Western, and the Brook Hospitals to other Hospitals	421	31	181	125	31	233	87	...	...	...	...	...	1,109
From Northern Hospital direct home	...	...	...	...	...	...	...	...	...	...	...	...	12
From Gore Farm Hospital direct home	...	...	...	...	...	...	...	...	...	...	...	...	278
From Northern Hospital to Ambulance Stations	...	...	...	...	...	...	...	...	...	...	...	...	3,924
From Gore Farm Hospital to Ambulance Stations	...	...	...	...	...	...	...	...	...	...	...	...	5,884
From Ambulance Stations to homes	*3,824	377	350	317	385	577	642	623	663	972	1,267	1,094	367
From other Hospitals to homes	...	...	...	...	...	...	...	...	...	...	...	...	11,091
<b>Total Fever and Diphtheria patients</b>	188,886	43,637	42,243	34,680	41,708	33,339	37,607	34,234	24,541	29,519	44,121	48,053	602,568

† These patients were admitted to General Hospitals, being too ill to be admitted to Board's Hospitals. ‡ Not recorded. \* Includes some smallpox cases.

	From 1881 to 1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	TOTALS.
<b>SMALLPOX.</b>													
<b>REMOVED :—</b>													
From homes to Hospitals and Wharves ...	18,996	265	121	36	28	94	1,848	7,830	422	4 <sup>04</sup>	80	33	30,247
RETURNED HOME; mistaken diagnoses ...	†	†	†	†	†	†	†	310	68	40	27	5	450
<b>TRANSFERRED :—</b>													
From Hospitals to Wharves ...	5,492	...	...	...	8	...	3	16	1	...	...	...	5,520
Other transfers between Hospitals and Wharves	10	...	...	...	7	...	2	33	1	...	...	...	53
<b>DISCHARGED :—</b>													
From Hospitals and Wharves to homes ...	10,566	39	33	1	1	31	118	567	15	30	3	3	11,407
Total Smallpox patients ...	35,064	304	154	37	44	125	1,971	8,756	507	564	110	41	47,677
CONVEYANCE OF INFECTIOUS PATIENTS to other places than the Managers' Hospitals ...)	1,876	433	361	326	369	327	388	360	323	442	423	405	6,033
<b>NON-INFECTIOUS REMOVALS.</b>													
Imbecile ...	...	...	...	...	...	...	96	23	769	531	684	734	2,837
Ringworm ...	...	...	...	...	...	...	180	120	203	22	...	58	583
Ophthalmia...	...	...	...	...	...	...	...	...	245	433	306	318	1,302
Defective and other Children ...	...	...	...	...	...	...	13	129	90	219	314	271	1,036
Other Patients (private removals) ...	...	...	...	...	...	...	...	...	...	68	134	424	626
Staff—Surgical ...	...	...	...	...	...	...	...	...	...	...	1	2	3
Total Non-Infectious Removals	...	...	...	...	...	...	289	272	1,307	1,273	1,439	1,807	6,387
Grand Totals ...	225,826	44,374	42,758	35,043	42,121	33,791	40,255	43,622	26,678	31,798	46,093	50,306	662,665

† Not recorded.

## B.—AMBULANCE SERVICE—(continued).

Return of Work for the Twelve Months ended December 31st, 1906.

PARTICULARS OF WORK.	Number of Journeys.	MILES RUN.					Total by Vehicles.
		By Horses.				By Motor.	
		1	2	3	4		
<b>I. Infectious Cases.</b>							
<i>Removals from Home—</i>							
To the Board's Hospitals—							
Fever Patients ... ..	24,669	234,028	367	...	...	12,294	246,689
Smallpox Patients ... ..	27	459	...	...	...	...	459
To the Board's Wharves—							
Smallpox Patients ... ..	...	...	...	...	...	...	...
To General Hospitals ... ..	5	57	...	...	...	...	57
<i>Other Removals—</i>							
From General Hospitals to homes owing to want of room in the Board's Hospitals, or to the patients being extra-Metropolitan residents	24	315	...	...	...	...	315
Non-Smallpox Patients returned home	5	67	...	...	...	...	67
Other Patients returned home	62	593	...	...	...	...	593
Patients sent for, but for various causes not removed (lost journeys)	338	2,698	56	...	...	168	2,922
Patients' friends taken from home to Hospital ... ..	351	3,954	...	...	...	78	4,032
Patients' friends taken from Hospital to home ... ..	316	3,256	...	...	...	75	3,331
<i>Transfers between Hospitals—</i>							
Fever Patients to and from Northern Hospital ... ..	766	2,227	17,504	...	...	...	19,731
Fever Patients to Gore Farm Hospital	734	254	21,598	...	...	97	28,036
Other transfers between Hospitals ...	9	74	134	...	...	...	208
Board's Hospitals to Wharves... ..	...	...	...	...	...	...	...
<i>Recovered Patients—</i>							
From Northern Hospital to Homes ...	5	149	...	...	...	...	149
Gore Farm " " " " " "	19	225	358	...	...	40	674
" Northern " to Ambulance Stations	556	3,908	8,117	...	...	1,900	13,925
" Gore Farm " " " " " "	610	653	11,573	...	...	3,839	16,065
" Ambulance Stations to Homes	236	2,113	...	...	...	16	2,129
From other Fever Hospitals to Homes	797	9,220	145	...	...	137	9,502
From Wharves (Smallpox) ... ..	1	14	...	...	...	...	14
<i>Conveyance of Patients—</i>							
To other places than Managers' Hospitals (private removals) ... ..	400	4,557	86	...	...	341	4,982
Totals ... ..	29,930	268,812	59,938	...	...	18,985	353,871
<b>II. Non-infectious Cases.</b>							
Imbeciles ... ..	147	50	3,425	...	...	1,321	6,981
Ringworm children ... ..	8	16	120	...	...	10	207
Ophthalmic children ... ..	64	318	500	...	...	98	925
Defective and other children ... ..	26	124	301	...	...	6	431
To other places than the Managers' Institutions (private removals) ...	423	4,872	270	...	...	147	5,289
Lost journeys ... ..	9	50	15	...	...	2	67
Totals ... ..	677	5,430	4,631	...	...	1,584	13,900
<b>III. Other Work.</b>							
Service requirements and conveyance of general stores ... ..	1,058	6,385	3,073	...	...	2,940	11,574
Conveyance of Ambulance Committee	21	86	8	...	...	10	104
Conveyance of other Committees ...	...	...	...	...	...	...	...
<i>Conveyance of Hospital Stores—</i>							
Fever ... ..	468	3,592	5,114	...	...	8	8,762
Smallpox ... ..	...	...	...	...	...	...	...
Conveyance of Staff ... ..	7	54	...	...	...	...	54
Horses in exchange ... ..	453	56	12,388	...	...	...	...
Totals ... ..	2,007	10,173	20,583	...	...	2,958	20,494
Totals for 1906 ... ..	32,614	284,415	85,152	...	...	23,527	388,265
Totals for 1905 ... ..	28,926	264,282	64,671	175	...	6,050	334,446
Totals for 1904 ... ..	22,625	216,958	31,902	8	...	1,964	250,352
Totals for 1903 ... ..	20,374	181,799	24,081½	330	...	...	205,676½
Totals for 1902 ... ..	35,151	309,571½	19,836½	38	...	...	388,996
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 ... ..	23,129	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	176,002	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 ... ..	417,095	3,699,512½	598,908	3,042	11,342	31,541	4,337,086½



C.—RIVER SERVICE.

*Number of Patients, Visitors, Staff, &c., conveyed to and from Long Reach during the year 1906.*

MONTH.	Patients conveyed to Long Reach.	Recovered cases conveyed from Long Reach	Visitors conveyed to and from Long Reach (including Managers).	Staff, &c., conveyed to and from Long Reach.	Totals.
January ... ..	...	...	...	55	55
February ... ..	5	...	...	47	52
March ... ..	8	5	...	73	86
April ... ..	1	6	...	56	63
May ... ..	5	3	...	49	57
June ... ..	7	3	6	54	70
July ... ..	1	9	...	44	54
August ... ..	...	1	3	44	48
September ... ..	...	...	...	85	85
October ... ..	...	...	9	53	62
November ... ..	...	...	...	45	45
December ... ..	...	...	...	32	32
Totals for 1906 ... ..	27	27	18	637	709
Totals for 1905 ... ..	51	57	121	569	798
Totals for 1904 ... ..	437	418	90	711	1,656
Totals for 1903 ... ..	349	321	34	1,631	2,335
Totals for 1902 ... ..	7,239	6,002	5,708	5,667	24,616
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 ... ..	26,143	22,336	13,905	34,853	97,237

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 " ...	7,966	...	4,453	...	141	38	85	10	338	1,425
" Geneva Cross " ...	110	...	46	...	...	...	10	10	5	...
" Maltese Cross " ...	187	...	109	...	...	...	3	...	9	...
" White Cross " ...	5,028	...	2,950	...	281	...	46	...	235	2,986
" Red Cross " ...	2,176	...	366	...	4	33	19	...	96	40
Totals ...	15,467	...	7,924	...	427	11	164	...	683	4,451

*Quantity of Stores, Parcels, &c., conveyed to and from Long Reach.*

Weight, 114 tons 13 cwt. 3 qr. 18 lbs.

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

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

## D

REPORTS OF THE MEDICAL SUPERINTENDENTS OF  
THE BOARD'S FEVER HOSPITALS FOR THE  
YEAR 1906.

## No. 1.

## EASTERN HOSPITAL.

HOMERTON, N.E.,

20th January, 1907.

**Statistics.** The total number of patients under treatment was 2,831, exactly 100 fewer than last year. During the autumn the wards were very full; on two occasions 366 of the 368 beds were occupied.

The scarlet fever fatality is 3·28 per cent., slightly lower than last year. In 11 cases death was due to some other cause than scarlet fever, as follows:—Tuberculous meningitis, 2 cases; burns, 2; old-standing heart disease, 1; cerebrospinal meningitis, 1; measles, 1; measles and diphtheria, 1; pulmonary tuberculosis, 1; diphtheria contracted before admission, 1; and convulsions (in an imbecile child), 1. If allowance is made for these cases the fatality is 2·57 per cent.

There were 3 cases of post-scarlatinal diphtheria, with 1 death. In this case the patient was still suffering from the effects of an attack of measles when diphtheria supervened.

The number of instances where a case of scarlet fever apparently gave rise to fresh cases after its discharge from hospital ("infecting case") was 16, being 3·0 per cent. of the discharges.

The diphtheria fatality is 9·78 per cent., 1·2 higher than last year. In 3 cases death was due to measles, and in 1 to general tuberculosis. The subtraction of these cases reduces the fatality to 8·99 per cent.

Of 511 completed cases 140 were laryngeal, 27·3 per cent., 7·3 higher than the high percentage of last year. This large proportion of laryngeal cases is of itself quite sufficient to account for the increased fatality of all the diphtheria cases.

The 140 cases may be classified as follows:—

(a)	Cases not requiring operation .. .. .	44	with 3 deaths.
(b)	„ submitted to tracheotomy only .. .. .	10	„ 5 „
(c)	„ „ intubation only .. .. .	46	„ 2 „
(d)	„ „ intubation followed by tracheotomy .. .. .	20	„ 9 „
(e)	„ „ tracheotomy before admission .. .. .	20	„ 2 „
	<b>Total .. .. .</b>	<b>140</b>	<b>21</b> „

The fatality of all the laryngeal cases is 15·0 per cent.; of the 76 cases operated upon (*b*), (*c*) and (*d*), 21·0; of the 66 intubated, (*c*) and (*d*), 16·6 per cent.

There were also 7 cases of tracheotomy and 5 of intubation in diseases other than diphtheria, and 1 case of intubation followed by tracheotomy for post-scarlatinal diphtheria; so that the total number of cases operated on in the hospital for laryngeal obstruction was 89. Last year the number was 91.

The number of "infecting cases" was 2, or 0·4 per cent. of the diphtheria discharges.

The enteric fever fatality is 13·82, almost the same as last year.

There has been a higher proportion of severe hæmorrhage cases than there was last year—13·8 per cent., as against 7·7. In 5 of the 19 fatal cases, death was due directly to hæmorrhage, and in 6 to perforation. Three cases of perforation were submitted to operation, but none of them recovered. They were all severe cases.

A fewer number of patients have been transferred to the convalescent hospitals than last year, 54·7 per cent. of the scarlet fever cases under treatment, and only 7·2 per cent. of the diphtheria cases. Last year the figures were 66·4 and 20·0 respectively.

From the facts that on some occasions patients convalescent from scarlet fever, whose names were down for transfer to the Northern Hospital, could not be taken, especially male patients over 7 years of age, and that no diphtheria convalescents have been transferred for several months past, I must suppose that the accommodation at the Northern Hospital is not sufficiently ample. I am aware that, when it is possible, preference is given to cases from the Eastern Hospital, because of the limited space there is at that hospital for the patients to take out-of-door exercise. But I think it is a great pity that more of the patients cannot be transferred, especially of those convalescent from diphtheria. Recovery from this disease is much more tedious than from scarlet fever. I have heard the opinion expressed that when a diphtheria convalescent has so far recovered as to be fit to be transferred to the convalescent hospital, he is fit to be allowed to go home. If this opinion refers to the freedom of the patient from infection, I might be disposed to agree with it to a considerable extent; but if it refers to the state of health of the patient, I most strongly differ.

**Other Diseases.** Of the 2,511 patients admitted directly from their homes, 296, or 11·7 per cent., were found to be suffering from diseases other than those notifiable diseases which are admissible to the Managers' hospitals. The percentage of error was:—For scarlet fever, 7·2; for diphtheria, 20·0; and for enteric fever, 25·0. These figures are all higher than those for last year.

**Isolation Accommodation.** There does not appear to be any decrease from year to year in these cases. I am tempted, indeed, to believe that there is a growing disposition on the part of practitioners to get cases away while they are still in a doubtful stage. In fact instances have come under my notice lately in which a note has been sent with the patient to state that the case was only suspicious, and suggesting that the patient should, on that account, not be sent into a general but to an observation ward. If such a practice becomes at all frequent—

and there is much to be said in its favour from the points of view of both the public and the patient—it is quite clear that what was deemed to be a sufficient number of isolation beds a few years ago will not be so in the future. Quite recently the Managers have determined to increase the isolation accommodation at some of their hospitals; and proposals are now under consideration for putting this intention into effect at this hospital.

In connection with this question I have thought that the following facts would prove of interest, as indicating the use to which such accommodation has to be put.

The most valuable isolation accommodation here consists of a small block containing 7 rooms, of which 6 are for patients, and 1, in the centre, is a kitchen. The rooms are arranged in a single row, side by side, the doors opening on a verandah which runs the whole length of the block. The block is quite separate from any of the other buildings.

One nurse is in charge of this block, unless, as seldom happens, a very serious case has to be treated in it. This nurse is enjoined to wash her hands after attending to every patient who is known to be suffering from any infectious disease, and the usual utensils for washing are kept in each room. But she does not put on an overall, going from one room to the other in her ordinary uniform.

It was intended, when the block was erected, that not more than 6 patients should be in it at the same time—that is, 1 in each room. But more often than not there are 2 patients in a room. Since 14th May, 1901, I have kept a record of the cases treated in this block. Up to 30th October, 1906, a period of 5 years and 169 days, there have been 900, as follows:—Scarlet fever, alone or combined with measles, chicken-pox, whooping-cough, and rubella, 169 cases, with an average stay in the block of 17·8 days; diphtheria, alone or combined with measles, chicken-pox, scarlet fever, and rubella, 69 cases, with a stay of 12·4 days; measles, 39 cases, with a stay of 15·4 days; enteric fever, 8 cases, with a stay of 15·5 days; typhus fever, 3 cases, with a stay of 40·6 days; rubella, 25 cases, acute pneumonia, 10 cases, chicken-pox, 4 cases, whooping-cough, 3 cases, and mumps, 1 case, 43 cases in all with a stay of 16·7 days; miscellaneous, not communicable, diseases, 446 cases, with an average stay of 15·4 days. Besides all these there have been 123 of convalescent scarlet fever, diphtheria, and enteric fever cases, all of them presumably free from infection, with a stay of 5 or 6 days. Three cases of smallpox have also been treated in the block for a few hours each, but very special precautions were taken to prevent the spread of infection. The short average stay of the scarlet fever and diphtheria patients is due to the fact that many of them, being doubtful at first, were transferred to general wards when their nature was clearly determined; and also that many of them were kept in the block only while they were suffering from, or suspected to be suffering from, some other infectious disease.

Now of all these patients only 3 caught any definite infectious disease—namely, a child aged 3 years, who was admitted with chicken-pox and caught scarlet fever; a child of 2 years, admitted with a febrile attack of a doubtful nature, who also caught scarlet fever; and a child a year old, who was sent in with doubtful scarlet fever and caught measles. This patient would not have contracted measles could it have been placed in a room by itself. As it happened, the child who shared the room with it, also a doubtful scarlet fever case, had been exposed to the infection

of measles unknown to myself and developed the disease while in the block. A fourth child, aged 1 year, admitted with scalds, a few days later developed a rash of a doubtful character; it was a question between scarlet fever, rubella, and a septic rash; while a fifth child, aged 6 years, who was convalescent from scarlet fever, developed a sore throat which raised a suspicion of diphtheria, but did not yield diphtheria bacilli on cultivation.

Therefore, 0·3 per cent. of the patients certainly, and 0·5 per cent. possibly, contracted other infectious diseases while in the block, a very small number when it is remembered that it has not been possible to restrict the use of the rooms to 1 patient each.

**Works.** During the year the reconstruction of the laundry has been completed. Since June, 1904, the staff washing had been done at the North-Eastern Hospital, and it was not till December last that it became possible to discontinue this arrangement.

Two new steam boilers have been put in to replace old ones which were worn out; and a new refuse destructor has been built.

The floors of 1 diphtheria and 3 scarlet fever wards have been relaid.

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

## No. 2.

### NORTH-EASTERN HOSPITAL.

ST. ANN'S ROAD,

TOTTENHAM, N.,

22nd January, 1907.

**Statistics.** During the year 1906 the total number of cases treated was 4,143; of these 1,972 were discharged, 1,630 were transferred to other hospitals, and 150 died. At the end of the year 391 remained under treatment.

**Scarlet Fever.** The number treated was 3,067; of these 1,062 were discharged, 1,616 transferred, and 67 died. At the end of the year 322 remained. The mortality rate was 2·46 per cent.

**Diphtheria.** The number treated was 551; of these 450 were discharged, 14 transferred, and 37 died. At the end of the year 50 remained. The mortality rate was 7·45 per cent.

**Enteric Fever.** The number treated was 104; of these 86 were discharged, and 14 died. At the end of the year 4 remained. The mortality rate was 14·28 per cent.

**Other Diseases.** The number treated was 421; of these 374 were discharged, and 32 died. At the end of the year 15 remained. The mortality rate amongst these was 8·04 per cent. The percentage of error in the notifications was as follows:—Scarlet fever, 6 per cent.; diphtheria, 31·3 per cent.; and enteric fever 17·9 per cent.

**Staff illness.** 4 of the female staff suffered from scarlet fever, 6 from diphtheria, and 1 from enteric fever. All recovered.

(Signed) FREDERIC THOMSON,  
*Medical Superintendent.*

### No. 3.

#### NORTH-WESTERN HOSPITAL.

HAMPSTEAD, N.W.,

30th January, 1907.

**Statistics.** The number of patients under treatment during the year was 3,202. Of these 1,243 were discharged, 1,412 were transferred, 144 died, and 403 were remaining in hospital at the end of the year.

2,356 were cases of scarlet fever, 561 diphtheria, 61 enteric fever, and 224 other diseases.

The percentage mortality was:—For scarlet fever, 3·4; for diphtheria, 7·1; for enteric, 6·5; and for other diseases, 16·5.

**Other diseases.** Of 2,893 cases admitted from home, 207 cases were not suffering from the disease certified—a percentage of 7·7, the error being 4·6, 12·7, and 34·5, in regard to scarlet fever, diphtheria and enteric fever, respectively.

**Post-Scarlatinal Diphtheria.** 2 cases occurred. Both recovered.

**Tracheotomy.** 24 tracheotomies were performed, with 4 deaths—a percentage mortality of 16·6.

**Staff illness.** 88 members of the staff were warded. Of these, 1 assistant nurse and 3 wardmaids had scarlet fever; and 1 assistant medical officer, 1 assistant nurse, 1 assistant cook and 2 wardmaids, diphtheria. All recovered.

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

## No. 4.

## WESTERN HOSPITAL.

SEAGRAVE ROAD, FULHAM, S.W.,

1st February, 1907.

**Statistics.** The work of the hospital has shown a considerable increase during the past year, 3,505 cases having been treated as compared with 2,668 in 1905. 1,585 were transferred to the convalescent hospitals, 1,352 were discharged, and 180 died. 388 remained in the hospital at the end of the year.

Of scarlet fever, 2,265 cases were treated and 1,463, or 64 per cent., were transferred. The mortality was 3·27 per cent.

There were 10 cases of post-scarlatinal diphtheria, a percentage incidence of ·4 on the completed cases, as compared with ·7 and 2·02 in the two preceding years. All recovered.

Of diphtheria, 896 cases were treated, and 122, or 13 per cent., were transferred.

The mortality was 10·03 per cent.

Tracheotomy was performed on 30 patients, with 15 deaths, and intubation alone on 14 patients, with 4 deaths.

Of enteric fever, 92 cases were treated. The mortality per cent. was 22·5.

**Other diseases.** 244 cases were found subsequent to admission to be suffering from other diseases. The percentage of error was 3·6 for scarlet fever, 16·8 for diphtheria, and 32·5 for enteric fever.

**Staff illness.** During the year 150 members of the staff were warded for various illnesses. Of these, 10 suffered from scarlet fever and an equal number from diphtheria. An assistant nurse died of perforation following gastric ulcer, and a laundryman, who had been in the service 27 years, died of malignant disease.

**Works.** No works of a structural character were carried out during the year, except the extension of the boundary wall of the hospital round the small plot of land acquired by the Board in 1904.

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

## SOUTH-WESTERN HOSPITAL.

STOCKWELL,

25th January, 1907.

**Statistics.** During the year 1906, 2,332 patients were treated in the hospital. Of these 915 were discharged, 1,044 were transferred, 121 died, and 252 remained under treatment at the close of the year. The number admitted during the twelve months was 2,048.

The scarlet fever mortality was	..	..	3.9	per cent.
The diphtheria	..	..	7.9	..
The enteric fever	..	..	22.2	..
The general	..	..	5.86	..

The death rate amongst patients suffering from various other diseases who were found to have been erroneously certified prior to admission was high, as is usually the case, viz., 8.98 per cent. Among the completed cases, the proportion which on arrival at the hospital were found to have been wrongly certified was 6.2 per cent.—the figures being:—For scarlet fever, 2.9 per cent.; for diphtheria, 10.1 per cent.; and for enteric fever, no less than 52.1 per cent.

**Other diseases.** The mistakes in connection with the diagnosis of enteric fever are always more numerous than in the case of any other disease, but the percentage of error during the year 1906 has been higher than I have ever known it previously. Of those which proved on admission to be genuine cases of enteric fever, the proportion of patients whose condition at the time of their reception was very critical was unduly high. Of the 17 patients in whom the attack proved fatal, no less than 7 died within four days after they came into hospital—a fact which has undoubtedly contributed to the high enteric fever mortality for the past year.

Of the scarlet fever cases, 5.1 per cent. developed a second disease, the incidence of post-scarlatinal diphtheria being .8 per cent. All recovered.

Of the diphtheria cases, 10.5 per cent. developed a second disease, the incidence of post-diphtheritic scarlet fever being 6.9 per cent. Of these, 1 attack proved fatal. Amongst the secondary diseases which occurred in patients admitted with scarlet fever or diphtheria were 42 cases of chicken pox, 20 of measles, and 10 of whooping cough.

**Isolation accommodation.** The recent conversion of two of the wards into 16 cubicles each will afford much-needed facilities for the isolation of these cases of mixed infection, as, with the 2 beds in each of the separation rooms attached, they will provide 36 beds for the reception of doubtful and negative cases. This will free the separation rooms attached to the main wards, which have hitherto been chiefly devoted to the accommodation of this class of case,



and permit of their being utilised for cases of mixed infection, for which they are well adapted.

The cubicle wards were opened for the reception of patients on 1st January of the current year, and are now in occupation.

They supply a much-needed want in that they represent an addition of 32 beds to our hitherto quite inadequate provision for isolation.

As to which varieties of infectious disease it may be safe to treat in cubicles, which, from an aërial point of view, provide, it must be remembered, but a *partial* isolation, I am not yet in a position to speak, as the question can only be settled by experience. For the present I propose to devote them exclusively to the treatment of anomalous and doubtful cases, and such others as I believe to be unattended with a high degree of infectivity.

The conversion of these two wards into cubicles to be utilised for the purpose I have named represents a curtailment by 38 beds of the accommodation hitherto reserved for scarlet fever.

The scarlet fever accommodation has been slightly further curtailed throughout the year by the appropriation, since 1st January, 1906, of a ward of 13 beds as a discharge ward for scarlet fever patients.

As far as the evidence goes, the institution of a discharge ward has been a success, as the incidence of return cases following scarlet fever during 1906 has fallen to 1·2 per cent.

**Staff illness.** 20 members of the staff were warded with an infectious disease during the year. With the exception of an assistant nurse, who died from ulcerative colitis following enteric fever, all recovered. In the case of this nurse the disease was contracted in the previous year. 141 members of the staff were warded for various other complaints, all of whom recovered.

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

## No. 6.

### FOUNTAIN HOSPITAL.

TOOTING GRAVENEY,  
30th January, 1907.

**Statistics.** The number of patients under treatment during the past year has been 1,396. Of these 447 were discharged recovered, 795 were transferred to the convalescent hospitals, and 19 died; leaving in hospital at the end of the year a total of 135.

The admissions comprised 965 cases of scarlet fever (including 2 transferred from the Grove Hospital), 76 of diphtheria (including 4 transferred from the Grove Hospital), and 86 suffering from other diseases (including 3 transferred from the Grove Hospital).

**Scarlet Fever.** As regards scarlet fever 965 patients were admitted, and 13 deaths occurred, giving a case mortality of 1·24 per cent.

**Diphtheria.** 76 diphtheria patients were admitted, and 4 deaths occurred, giving a case mortality of 7·41 per cent. ; 2 patients were found to have diphtheria at the time of admission who were certified to be suffering from scarlet fever. Antitoxin was given in 75 per cent. of the cases.

**Other diseases.** The original diagnosis was not confirmed in 83 of the 1,118 patients who were admitted direct from their homes. The percentage of cases in which a different diagnosis was made subsequent to admission amounted to 7·58 in the case of scarlet fever patients, and 8·10 for diphtheria patients. 1 of the scarlet fever patients contracted diphtheria during convalescence, or a percentage incidence of 0·08 on the completed cases.

3 of the 32 completed cases of diphtheria contracted scarlet fever while in hospital, or a percentage incidence of 9·37.

**Staff illness.** (a) Infectious diseases. 9 officers contracted scarlet fever, none contracted diphtheria. All recovered. (b) 160 officers were off duty with various ailments. One general porter died during the year from an internal hernia. He had been removed to St. Thomas's Hospital for operation. A considerable number of cases of influenza occurred during the latter part of November and December, and affected principally the female domestic staff.

On the 4th August the Managers decided for the present not to appoint a Medical Superintendent for this hospital, but to put the hospital under the general supervision of the Medical Superintendent of the Grove Hospital. Permission was subsequently given to use the isolation wards at the Grove Hospital for cross infections originating in either hospital, and to utilise the isolation accommodation at the Fountain for patients who did not furnish definite evidence of suffering from an infectious disease. This accommodation, however, was largely occupied by sick staff, and on this account it was chiefly used for the requirements of the Fountain Hospital only.

In the Steward's department approval was given to the principle of keeping one set of books as far as possible for the two institutions, and arrangements were made to adopt this plan from the commencement of the year 1907.

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

## No. 7.

## GROVE HOSPITAL.

TOOTING GROVE, S.W.,

30th January, 1907.

**Statistics.** The number of patients under treatment during the past year has been 3,431. Of these 1,322 were discharged recovered, 1,582 were transferred to the convalescent hospitals, and 132 died, leaving in hospital at the end of the year a total of 395.

The admissions comprised 2,102 cases of scarlet fever (including 5 transferred from the Fountain Hospital), 739 of diphtheria (including 6 transferred from the Fountain Hospital), 77 of enteric fever, and 199 suffering from other diseases.

All the wards were open and in use during the autumn for the first time since the hospital has been opened.

**Scarlet Fever.** As regards scarlet fever 2,102 patients were admitted and 49 deaths occurred, giving a case mortality of 2·35 per cent. Amongst these were 21 patients who were certified to be suffering from diphtheria at the time of their admission.

**Diphtheria.** 739 diphtheria patients were admitted and 58 deaths occurred, giving a case mortality of 8·12 per cent. 9 patients were found to have diphtheria at the time of admission who were certified to be suffering from scarlet fever. Antitoxin was given in 93·17 per cent. of the cases.

**Enteric Fever.** Of the 77 enteric fever patients who were admitted direct from their homes 14 died, showing a mortality of 18·42 per cent. 1 patient was found to have enteric fever at the time of admission who was certified to be suffering from scarlet fever.

**Other diseases.** The original diagnosis was not confirmed in 199 of the 3,106 patients who were admitted direct from their homes. The percentage of cases in which a different diagnosis was made subsequent to admission amounted to 3·62 in the case of scarlet fever patients, 14·62 in the case of diphtheria, and 24 for enteric fever patients. In all cases these figures show a reduction compared with those of 1905, the reduction being most marked in the case of scarlet fever and diphtheria patients.

3 of the scarlet fever patients suffered from diphtheria during convalescence or a percentage incidence of 0·14 on the completed cases. This shows a slight reduction as compared with 1905, when 4 cases occurred or a percentage incidence of 0·22. One died.

25 of the completed cases of diphtheria contracted scarlet fever while in hospital, or a percentage incidence of 3·62. This shows a reduction as compared with 1905, when the incidence was 6·16 per cent.

Some cases of measles occurred in the scarlet fever wards at the latter part of 1905 and early in 1906. They originated from separate outbreaks in a number of the wards owing to patients being admitted with scarlet fever who were incubating measles.

**Average Residence.** The average stay of patients in hospital shows a reduction in the case of diphtheria, enteric fever, and other diseases; while for scarlet fever the period is almost identical with that recorded in 1905.

The proportion of scarlet fever patients transferred to the convalescent hospitals was 61·71 per cent., as compared with 53·84 per cent. in 1905.

As in previous years I have had a table prepared showing the percentage of patients discharged after each week's residence in hospital.

Number of Weeks	Under 1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9	9-10	10-11	11-12	Over 12	Total.
Scarlet fever ...	...	...	0·17	0·69	2·42	15·42	22·87	19·58	11·26	6·58	6·75	2·42	11·78	99·94
Diphtheria ...	...	...	0·40	2·23	8·72	21·29	30·02	10·54	8·72	4·66	4·46	3·04	5·88	99·96
Enteric fever ...	...	...	...	...	3·27	11·47	13·11	19·67	24·59	13·11	4·91	3·27	6·55	99·95
Other diseases ...	...	26·70	32·46	23·63	9·42	2·09	2·61	2·09	...	0·52	0·52	...	0·52	99·90

From this it will be seen that the majority (57·87 per cent.) of the scarlet fever patients were discharged after a stay of between five and eight weeks. In the previous year the percentage amounted to 58·62 and in 1904 to 54·55. A rather higher proportion of scarlet fever patients were in hospital over 12 weeks; 11·78 per cent. as compared with 8·44 per cent. in 1905.

Amongst the diphtheria patients 11·35 per cent. were discharged under five weeks as compared with 5·39; 61·85 per cent. were discharged after five to eight weeks' residence as compared with 54·78; and 13·38 per cent. remained in hospital over ten weeks as compared with 21·61 per cent. in 1905. A smaller proportion of the diphtheria patients (4·49 per cent. as compared with 7·48 per cent. in 1905) contracted secondary diseases in hospital. This would have the effect of reducing the percentage of diphtheria patients who remained in hospital over ten weeks.

**Return Cases.** 28 alleged return cases were reported during the year in connection with patients discharged direct from the hospital. 22 of these were cases of scarlet fever arising subsequent to the discharge of 20 scarlet fever patients; 2 were cases of diphtheria arising after the discharge of 2 diphtheria patients. The remaining 4 cases were instances of cross infections, 2 being cases of diphtheria arising after the discharge of 2 scarlet fever patients and 2 being cases of scarlet fever arising in connection with the discharge of 2 diphtheria patients.

The following particulars refer to the 22 alleged return cases which originated in connection with the discharge of 20 scarlet fever patients:—

The interval which elapsed between the discharge of the infecting case and the occurrence of the alleged return case was 7 days or under in 7 instances, from 8 to 14 days in 4, from 15 to 21 days in 5, from 22 to 28 days in 2, from 29 to 35 days in 3, and over 35 days in 1.

Of the 20 infecting cases 7 suffered from nasal discharge while in hospital, and 2 from ear discharge; while in 11 instances no discharges were noted. 14 of the infecting cases were discharged from hospital between October and April, and 6 between May and September. The average residence of the infecting cases was 59·2 days as compared with an average residence of 58·26 for all scarlet fever patients discharged direct to their homes.

**Staff illness.** (a) Infectious diseases. 19 officers contracted scarlet fever, 13 contracted diphtheria, 3 contracted enteric fever. All recovered.

(b) 170 officers were off duty with various ailments; one died. A large number of cases of influenza occurred during November and December, and affected principally the nursing staff.

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

## No. 8.

### SOUTH-EASTERN HOSPITAL.

AVONLEY ROAD, NEW CROSS, S.E.,

31st January, 1907.

**Statistics.** The hospital was reopened for patients on 2nd July. The total number of cases admitted up to the end of the year was 1,593, of which 1,001 were suffering from scarlet fever, 369 from diphtheria, and 49 from enteric fever. 174 were not found to have definite signs of any of the above diseases. The death rate for scarlet fever was 2·52, for diphtheria 11·43, and for enteric fever 16·47. The two latter numbers are higher than the corresponding death rates for 1903, the last complete year during which the hospital was open. In part this is accounted for by the formula used, which always tells against a hospital reopened towards the end of a year; but the diphtheria cases contained a larger number than usual of severe cases; as an instance, the proportion of tracheotomies was higher.

At the reopening a large number of the former staff returned, and this contributed materially to the efficient performance of the work, which was carried out under difficulty, the building contractors not having completed their works before we took possession of the buildings.

The refurnishing of the hospital was considerably delayed, the orders for many of the articles not having been issued until a few days before the opening.

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

## No. 9.

## PARK HOSPITAL.

HITHER GREEN, S.E.,

14th January, 1907.

**Statistics.** 419 patients remained in hospital at the end of 1905 ;  
2,750 were admitted ;  
1,722 were transferred to other hospitals ;  
926 were discharged ; and  
123 died during the year ;  
398 remained at the end of 1906.

**Scarlet Fever.** 2,006 scarlet fever patients were admitted, and 1,591 were transferred when convalescent—that is, 68 out of every 100 were sent to the country to complete their recovery. There can be no doubt that this is of the greatest benefit to the patients, and must be the means of restoring very many to health after their serious illness. In two previous years the admissions for this disease have been exceeded ; but never before have so many been sent from the Park either in actual numbers or percentage. In 1899, 63 out of every 100 were so sent, and in 1905, 56. These were the two next highest years as regards percentage.

**Diphtheria.** 487 diphtheria patients were admitted, and 130 were transferred in the early months of the year.

I think it would be desirable to transfer almost all patients to the country hospitals of the Board.

**Works.** The new departure, experimentally tried at the Park, of almost closing the hospital during the extensive whitewashing of ceilings and cleaning of the wards, has been an unqualified success. A few wards were left open for emergencies, the remainder being handed over to the contractor. The work was completed within the specified time. The staff were temporarily transferred to other hospitals, so gaining varied experience and enabling the nurses and others at the hospital to which they were sent to go on their annual leave. At the completion of the work our staff were returned to the Park. The method is simple and mutually advantageous.

(Signed) R. A. BIRDWOOD,  
*Medical Superintendent.*

No. 10.

BROOK HOSPITAL.

SHOOTERS HILL, WOOLWICH,

28th January, 1907.

**Statistics.** The total number of cases treated during the year 1906 was 3,482. Of these, 1,700 were discharged recovered, 1,184 were transferred to other hospitals of the Board, and 135 died. There remained under treatment on 31st December, 463 patients.

**Scarlet Fever.** The number treated was 2,366. The mortality was 2·47 per cent.

**Diphtheria.** The number treated was 800. The mortality was 7·61 per cent. There were 13 hæmorrhagic cases. 7 patients died within 24 hours of admission. Tracheotomy was performed on 43 patients, of whom 9 died; the mortality was, therefore, 20·9 per cent.

**Antitoxin treatment.** Of 737 completed cases 463 were treated with antitoxin. Of the 274 cases not treated with antitoxin, 272 were mild cases and did not require antitoxin; 1 was admitted on eleventh day of disease, too late for antitoxin treatment to be of any value, and 1 died of syncope immediately on admission, before antitoxin could be administered. 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 Percentage.
	1st.		2nd.		3rd.		4th.		5th and later.		Cases.	Deaths.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.			
Under 1 ... ..	0	0	4	1	1	0	2	1	5	3	12	5	41·66
1 to 2 ... ..	2	0	6	1	4	0	6	1	4	0	22	2	9·09
2 to 3 ... ..	1	0	6	0	11	1	9	1	17	4	44	6	13·63
3 to 4 ... ..	1	0	6	0	15	4	11	3	19	0	52	7	13·46
4 to 5 ... ..	2	0	11	0	13	2	14	3	32	4	72	9	12·5
5 to 10 ... ..	7	0	29	1	39	3	51	11	56	9	182	24	13·18
10 to 15 ... ..	3	0	11	0	21	0	9	0	8	0	52	0	0·0
15 to 20 ... ..	0	0	1	0	7	0	3	0	2	0	13	0	0·0
20 and upwards	0	0	3	0	4	0	3	0	4	0	14	0	0·0
Total ... ..	16	0	77	3	115	10	108	20	147	20	463	53	...
Percentage Mortality	0·0		3·89		8·69		18·51		13·60		11·44		...

**Enteric Fever.** The number treated was 125. The mortality, 13·52 per cent.

**Staff illness.** (A) *Infectious Diseases*.—2 second assistant nurses contracted scarlet fever; 2 charge nurses, 3 first assistant nurses, 1 second assistant nurses, contracted diphtheria. All recovered. 1 wardmaid, who developed scarlet fever in 1905, died during 1906.

(B) *Other Diseases*.—145 officers of hospital and ambulance station were warded with various ailments. All recovered except the superintendent of the ambulance station and one of the charge nurses.

(Signed) JOHN MACCOMBIE,  
*Medical Superintendent.*

## No. 11.

### NORTHERN HOSPITAL.

WINCHMORE HILL, N.,

29th January, 1907.

**Statistics.** The summary of the annual statistics for the year 1906 shows the following results:—

Number of patients in hospital, 1st January, 1906	..	519
Admitted during the year	.. .. .	6,296
Total treated	.. .. .	6,815
Discharged recovered during the year	.. .. .	6,228
,, to other hospitals of the Board	.. .. .	2
Died during the year	.. .. .	8
Number remaining on 31st December, 1906	.. .. .	577

The patients treated comprise 6,568 cases of scarlet fever, and 245 cases of diphtheria. During the last four months of the year no cases of diphtheria were admitted, the whole accommodation being required for cases of scarlet fever.

**Average residence.** The average stay of patients at this hospital was 29·6 days for scarlet fever, and 24·1 days for diphtheria.

The largest number of patients in hospital on any one day was 736, on 22nd November, and the smallest 390, on 8th June.

The average daily number of patients was 534.

**Direct discharge of patients.** The system of direct discharge of recovered patients from the Northern Hospital, inaugurated at the latter end of 1905, was continued throughout the year, and has worked satisfactorily; 3,020 patients, or 48·4 per cent. of recovered cases, were discharged from the hospital gate, the remainder being conveyed to London by horse or motor omnibus.



**Staff.** 86 members of the staff were warded with non-infectious disorders ; in addition, 2 assistant nurses and 2 wardmaids contracted scarlet fever ; and 1 charge nurse, 4 assistant nurses, and 1 laundry maid contracted diphtheria. All recovered.

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

## No. 12.

### GORE FARM HOSPITAL.

DARTFORD, KENT,

21st January, 1907.

**Statistics.** During the year 1906, 6,268 patients were admitted ; 6,071 were discharged, and 4 died. The total number treated during the year was 6,916. At the end of the year 841 remained in hospital. During the months of October and November, 1,838 patients were admitted, and 1,488 were discharged. The highest point was reached on 13th December, when there were 994 patients in hospital. The percentage of infecting cases on total number of scarlet fever patients discharged was, approximately, 1·8.

**Classification of Patients.** During the year the classification of the scarlet fever patients according to the character of attack has been continued. The advantages of this classification have not been demonstrated, and from an administrative point of view its disadvantages have been very obvious.

**Discharge of Patients.** The system of discharging patients direct from the hospital has continued to work smoothly. The employment of motor traction in dealing with the patients handed over to their friends at the hospital would be of considerable advantage to the administration.

**Works.** The radiator system of heating the hospital blocks was brought fully into use during the autumn and winter. It has proved quite satisfactory.

**Staff Sickness.** During the year 1 charge nurse, 6 2nd assistant nurses, 2 nurse attendants, 8 wardmaids, and 1 general porter contracted scarlet fever. 1 second assistant nurse and 1 wardmaid contracted diphtheria. The general health of the staff has been good.

(Signed) A. F. CAMERON,  
*Acting Medical Superintendent.*

EASTERN HOSPITAL.									
DISEASES.	Remain- ing on Dec. 31st, 1905.	Admitted during 1906.		Total under treatment during 1906.	Discharged during 1906.		Died during 1906.	Mortality per cent.	Remain- ing on Dec. 31, 1906.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet ... ..	203	1,562	...	1,765	533	966	51	3.28	215
Diphtheria ... ..	83	512	...	595	418	43	50	9.78	84
Enteric ... ..	21	138	...	159	118	...	19	13.82	22
Typhus ... ..	...	3	...	3	3	...	...	...	...
	307	2,215	...	2,522	1,072	1,009	120	5.43	321
Other diseases ... ..	13	296	...	309	264	...	28	9.52	17
Totals ... ..	320	2,511	...	2,831	1,336	1,009	148	...	338
NORTH-EASTERN HOSPITAL.									
Scarlet ... ..	358	2,709	...	3,067	1,062	1,616	67	2.46	322
Diphtheria ... ..	59	492	...	551	450	14	37	7.45	50
Enteric ... ..	8	96	...	104	86	...	14	14.29	4
Typhus ... ..	...	...	...	...	...	...	...	...	...
	425	3,297	...	3,722	1,598	1,630	118	3.55	370
Other diseases ... ..	31	390	...	421	374	...	32	8.04	17
Totals ... ..	456	3,687	...	4,143	1,972	1,630	150	...	391
NORTH-WESTERN HOSPITAL.									
Scarlet ... ..	225	2,130	1	2,356	622	1,376	72	3.40	286
Diphtheria ... ..	60	501	...	561	420	33	35	7.08	73
Enteric ... ..	6	55	...	61	33	1	3	6.52	24
Typhus ... ..	...	...	...	...	...	...	...	...	...
	291	2,686	1	2,978	1,075	1,410	110	4.17	388
Other diseases ... ..	17	207	...	224	168	2	34	16.55	20
Totals ... ..	308	2,893	1	3,202	1,243	1,412	144	...	403
WESTERN HOSPITAL.									
Scarlet ... ..	198	2,067	...	2,265	505	1,463	67	3.27	230
Diphtheria ... ..	63	833	...	896	561	122	80	10.03	133
Enteric ... ..	9	82	1	92	59	...	18	22.50	15
Typhus ... ..	...	...	...	...	...	...	...	...	...
	270	2,982	1	3,253	1,125	1,585	165	5.63	378
Other diseases ... ..	8	244	...	252	227	...	15	6.17	10
Totals ... ..	278	3,226	1	3,505	1,352	1,585	180	...	388
SOUTH-WESTERN HOSPITAL.									
Scarlet ... ..	194	1,338	...	1,532	324	998	53	3.91	157
Diphtheria ... ..	65	512	...	577	405	46	40	7.98	86
Enteric ... ..	14	72	...	86	64	...	17	22.22	5
Typhus ... ..	...	1	...	1	1	...	...	...	...
	273	1,923	...	2,196	794	1,044	110	5.68	248
Other diseases ... ..	11	125	...	136	121	...	11	8.56	4
Totals ... ..	284	2,048	...	2,332	915	1,044	121	...	252
FOUNTAIN HOSPITAL.									
Scarlet ... ..	263	963	2	1,228	338	789	13	1.24	88
Diphtheria ... ..	...	72	4	76	22	6	4	7.41	44
Enteric ... ..	...	...	...	...	...	...	...	...	...
	263	1,035	6	1,304	360	795	17	1.54	132
Other diseases ... ..	6	83	3	92	87	...	2	2.31	3
Totals ... ..	269	1,118	9	1,396	447	795	19	...	135
GROVE HOSPITAL.									
Scarlet ... ..	233*	2,097	5	2,335	577	1,441	49	2.35	268
Diphtheria ... ..	63	733	6	802	493	138	58	8.12	113
Enteric ... ..	8	77	...	85	61	...	14	18.42	10
Typhus ... ..	...	...	...	...	...	...	...	...	...
	304	2,907	11	3,222	1,131	1,579	121	4.21	391
Other diseases ... ..	10*	199	...	209	191	3	11	5.45	4
Totals ... ..	314	3,106	11	3,431	1,322	1,582	132	...	395

TABLE I.—Admissions, Discharges, and Deaths during 1906.

SOUTH-EASTERN HOSPITAL.									
DISEASES.	Remain- ing on Dec. 31st, 1905.	Admitted during 1906.		Total under treatment during 1906.	Discharged during 1906.		Died during 1906.	Mortality per cent.	Remain- ing on Dec. 31st, 1906.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet ... ..	...	1,001	...	1,001	182	620	23	2·52	176
Diphtheria ... ..	...	369	...	369	191	1	34	11·43	143
Enteric ... ..	...	49	...	49	29	..	7	16·47	13
Typhus ... ..	...	...	...	...	...	...	...	...	...
Other diseases ... ..	...	1,419	...	1,419	402	621	64	5·11	332
	...	174	...	174	147	...	9	5·45	18
Totals ... ..	...	1,593	...	1,593	549	621	73	...	350
PARK HOSPITAL.									
Scarlet ... ..	383	2,006	...	2,389	371	1,591	65	3·22	312
Diphtheria ... ..	71	486	1	558	318	130	51	10·34	59
Enteric ... ..	...	11	...	11	3	...	1	13·33	7
Typhus ... ..	...	...	...	...	...	...	...	...	...
Other diseases ... ..	404	2,503	1	2,908	692	1,721	117	4·65	378
	15	246	...	261	234	1	6	2·46	20
Totals ... ..	419	2,749	1	3,169	926	1,722	123	...	398
BROOK HOSPITAL.									
Scarlet ... ..	306	2,060	...	2,366	859	1,086	50	2·47	371
Diphtheria ... ..	92	708	...	800	584	98	55	7·61	63
Enteric ... ..	7	118	...	125	89	...	15	13·52	21
Typhus ... ..	...	...	...	...	...	...	...	...	...
Other diseases ... ..	405	2,886	...	3,291	1,532	1,184	120	4·20	455
	4	187	...	191	168	...	15	8·11	8
Totals ... ..	409	3,073	...	3,482	1,700	1,184	135	...	463
NORTHERN HOSPITAL.									
Scarlet ... ..	510	...	6,058	6,568	5,981	2	8	·13	577
Diphtheria ... ..	9	...	236	245	245	...	...	...	...
Other diseases ... ..	519	...	6,294	6,813	6,226	2	8	·13	577
	...	...	2	2	2	...	...	...	...
Totals ... ..	519	...	6,296	6,815	6,228	2	8	...	577
GORE FARM HOSPITAL.									
Scarlet ... ..	648	...	5,883	6,531	5,687	1	3	·05	840
Diphtheria ... ..	...	...	384	384	382	...	1	·26	1
Enteric ... ..	...	...	...	...	...	...	...	...	...
Other diseases ... ..	648	...	6,267	6,915	6,069	1	4	·06	841
	...	...	1	1	1	...	...	...	...
Totals ... ..	648	...	6,268	6,916	6,070	1	4	...	841
SUMMARY.									
Scarlet ... ..	*3,471	17,933	(11,949)	21,404	17,041	(11,949)	521	2·94	3,842
Diphtheria ... ..	565	5,218	(631)	5,783	4,489	(631)	445	8·77	849
Enteric ... ..	73	698	(1)	771	542	(1)	108	16·02	121
Typhus ... ..	...	4	...	4	4	...	...	...	...
Totals ... ..	4,109	23,853	(12,581)	27,962	22,076	(12,581)	1,074	4·57	4,812
Other diseases ... ..	*115	2,151	(6)	2,266	1,984	(6)	163	7·58	119
Grand Totals ..	4,224	26,004	(12,587)	30,228	24,060	(12,587)	1,237	...	4,931

NOTES.—The mortalities returned as above include all deaths occurring from intercurrent diseases, particulars of which will be found in the Medical Supplement, Tables XV. to XVIII., pp. 326-329.

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.

\* These figures differ slightly from those given in the committee's report for 1905, p. 211 owing to the subsequent correction of errors of diagnoses.





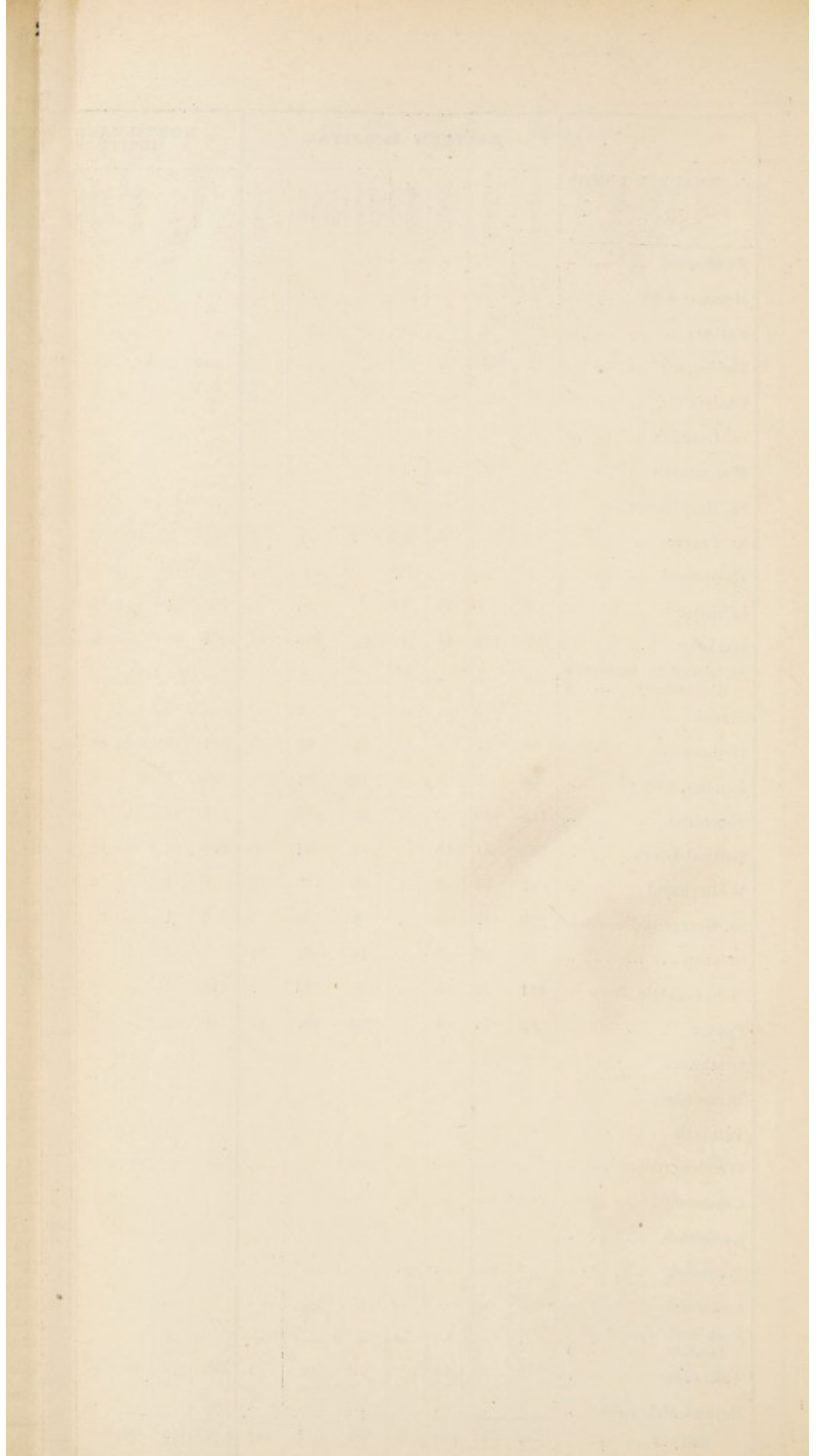




Date		Description		Amount	
1890	Jan 1	Balance		100.00	
	Jan 15	Received	...	50.00	
	Jan 30	Received	...	25.00	
	Feb 15	Received	...	75.00	
	Feb 28	Received	...	100.00	
	Mar 15	Received	...	50.00	
	Mar 31	Received	...	25.00	
	Apr 15	Received	...	75.00	
	Apr 30	Received	...	100.00	
	May 15	Received	...	50.00	
	May 31	Received	...	25.00	
	Jun 15	Received	...	75.00	
	Jun 30	Received	...	100.00	
	Jul 15	Received	...	50.00	
	Jul 31	Received	...	25.00	
	Aug 15	Received	...	75.00	
	Aug 31	Received	...	100.00	
	Sep 15	Received	...	50.00	
	Sep 30	Received	...	25.00	
	Oct 15	Received	...	75.00	
	Oct 31	Received	...	100.00	
	Nov 15	Received	...	50.00	
	Nov 30	Received	...	25.00	
	Dec 15	Received	...	75.00	
	Dec 31	Received	...	100.00	
	Total			1000.00	









FEVER STATISTICS.—TABLE IV.—Scarlet Fever Admissions

AGES.	EASTERN HOSPITAL.						NORTH-EASTERN HOSPITAL.						NORTH-WESTERN HOSPITAL.						WESTERN 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	3	1	4	7	2	9	7	1	8	15	1	16	15	1	16	11	3	14	26	4	30	12	1	13	
1 to 2	26	3	29	52	5	57	38	7	45	32	4	36	32	4	36	11	3	14	68	7	75	34	3	37	
2 to 3	72	6	78	138	10	148	98	6	104	63	5	68	63	5	68	12	15	27	127	15	142	62	6	68	
3 to 4	81	3	84	168	11	179	135	9	144	135	4	139	100	10	110	13	13	26	188	13	201	118	10	128	
4 to 5	82	1	83	172	5	177	139	5	144	139	2	141	97	7	104	7	7	14	218	11	229	109	4	113	
5 to 10	294	5	299	637	10	647	435	12	447	462	8	470	462	8	470	14	14	28	927	14	941	388	7	395	
10 to 15	116	1	117	256	5	261	192	2	194	141	1	142	141	1	142	4	4	8	331	4	335	166	4	170	
15 to 20	31	2	33	67	2	69	56	1	57	43	...	43	43	...	43	1	1	84	95	...	95	...	...	...	
20 to 25	11	...	11	31	...	42	23	...	23	23	...	23	23	...	23	1	1	104	104	...	104	...	...	...	
25 to 30	6	...	6	20	...	26	13	...	13	14	...	14	14	...	14	1	1	62	74	...	74	...	...	...	
30 to 35	2	...	2	7	...	9	7	...	7	7	...	7	7	...	7	1	1	40	40	...	40	...	...	...	
35 to 40	1	...	1	6	...	7	6	...	6	4	...	4	4	...	4	...	...	11	11	...	11	...	...	...	
40 to 45	...	...	...	1	...	1	2	...	2	1	...	1	1	...	1	...	...	5	5	...	5	...	...	...	
45 to 50	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3	...	3	...	...	...
50 to 55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	725	23	748	1,562	51	1,613	1,146	43	1,189	1,146	43	1,189	1,002	38	1,040	72	72	1,112	2,130	72	1,204	997	35	1,032	
<b>SOUTH-WESTERN HOSPITAL.</b>																									
Under 1	6	1	7	11	1	12	3	...	3	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1 to 2	29	4	33	50	6	56	12	...	12	...	12	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2 to 3	61	6	67	105	12	117	24	...	24	...	24	...	...	...	...	...	...	...	...	...	...	...	...	...	...
3 to 4	60	5	65	129	12	141	48	...	48	...	48	...	...	...	...	...	...	...	...	...	...	...	...	...	...
4 to 5	73	8	81	134	11	145	43	...	43	...	43	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 to 10	268	3	271	547	7	554	209	...	213	...	213	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 to 15	95	1	96	204	3	199	91	...	82	...	82	...	...	...	...	...	...	...	...	...	...	...	...	...	...
15 to 20	34	...	34	61	...	65	25	...	37	...	37	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20 to 25	21	1	22	50	1	51	10	...	20	...	20	...	...	...	...	...	...	...	...	...	...	...	...	...	...
25 to 30	9	...	9	25	...	34	7	...	4	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...
30 to 35	7	...	7	13	...	20	3	...	6	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...
35 to 40	2	...	2	5	...	7	1	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...
40 to 45	1	...	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	667	29	696	1,338	53	1,391	478	6	485	7	492	985	26	1,011	23	2097	49	49	5,141	1,001	23	5,372	487	12	5,000

and Deaths during 1906, divided according to Age and Sex.

AGES.	PARK HOSPITAL.						BROOK HOSPITAL.						NORTHERN HOSPITAL.						GORE PARM 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	4	2	6	1	10	3	11	8	1	19	1	11	8	1	19	1	11	8	1	19	1	11	8	1	19	
1 to 2	55	11	64	5	119	16	42	38	2	80	2	42	38	2	80	2	42	38	2	80	2	42	38	2	80	
2 to 3	92	5	93	5	185	10	68	78	7	146	10	68	78	7	146	10	68	78	7	146	10	68	78	7	146	
3 to 4	115	8	111	5	226	13	106	83	2	189	9	106	83	2	189	9	106	83	2	189	9	106	83	2	189	
4 to 5	141	5	137	2	278	7	101	4	127	3	228	7	101	4	127	3	228	7	101	4	127	3	228	7	101	
5 to 10	339	9	368	5	707	14	415	5	464	10	879	15	415	5	464	10	879	15	415	5	464	10	879	15	415	
10 to 15	157	2	145	...	302	2	153	1	167	1	320	2	153	1	167	1	320	2	153	1	167	1	320	2	153	
15 to 20	42	...	38	...	80	...	61	3	87	...	98	3	61	3	87	...	98	3	61	3	87	...	98	3	61	
20 to 25	19	...	26	...	45	...	21	23	...	44	...	21	23	...	44	...	21	23	...	44	...	21	23	...	44	
25 to 30	9	...	17	...	26	...	14	13	...	27	...	14	13	...	27	...	14	13	...	27	...	14	13	...	27	
30 to 35	11	...	13	...	24	...	7	12	...	19	1	7	12	...	19	1	7	12	...	19	1	7	12	...	19	
35 to 40	1	...	2	...	3	...	2	3	...	5	...	2	3	...	5	...	2	3	...	5	...	2	3	...	5	
40 to 45	...	...	1	...	1	...	1	2	...	3	...	1	2	...	3	...	1	2	...	3	...	1	2	...	3	
45 to 50	...	...	...	...	...	...	1	2	...	3	...	1	2	...	3	...	1	2	...	3	...	1	2	...	3	
50 to 55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	985	42	1,021	23	2,006	65	1,003	25	1,057	25	2,060	50	1,003	25	1,057	25	2,060	50	1,003	25	1,057	25	2,060	50	1,003	

SUMMARY.										
AGES.	MALES.	FEMALES.	TOTAL.	Admitted.	Died.	Total.	Admitted.	Died.	Total.	Transferred Cases.
Under 1	77	10	78	7	155	17	...	...	...	...
1 to 2	327	40	337	29	664	69	...	...	...	...
2 to 3	648	46	624	48	1,272	93	...	...	...	...
3 to 4	902	61	823	39	1,725	99	...	...	...	...
4 to 5	956	43	1,117	26	2,073	68	...	...	...	...
5 to 10	3,417	62	3,924	58	7,341	113	...	...	...	...
10 to 15	1,358	12	1,509	19	2,867	31	...	...	...	...
15 to 20	339	7	440	1	839	7	...	...	...	...
20 to 25	191	3	281	4	472	7	...	...	...	...
25 to 30	103	1	163	2	265	3	...	...	...	...
30 to 35	60	1	98	1	158	2	...	...	...	...
35 to 40	24	1	33	...	57	1	...	...	...	...
40 to 45	9	...	15	...	24	...	...	...	...	...
45 to 50	3	...	10	...	13	...	...	...	...	...
50 to 55	...	...	2	...	2	...	...	...	...	...
55 to 60	1	...	1	...	2	...	...	...	...	...
And upwards	...	...	3	...	3	...	...	...	...	...
Totals ...	8,475	287	9,458	234	17,933	510	...	...	...	11





ANNUAL REPORT,  
FEVER STATISTICS.—TABLE VI.—Enteric Fever

AGES.	EASTERN HOSPITAL.						NORTH-EASTERN HOSPITAL.						NORTH-WESTERN HOSPITAL.						WESTERN HOSPITAL.							
	MALES.			FEMALES.			MALES.			FEMALES.			MALES.			FEMALES.			MALES.			FEMALES.				
	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.		
	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.	Of Direct Admissions.	Of Transferred Cases.	Total.		
Under 5	2	...	6	...	...	2	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...		
5 to 10	5	...	14	...	...	3	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...		
10 to 15	6	...	16	...	...	4	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...		
15 to 20	11	2	29	4	...	3	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...		
20 to 25	12	2	19	2	...	5	...	...	...	...	...	5	...	...	...	...	...	...	...	...	...	...	...	...		
25 to 30	9	2	17	2	...	6	...	...	...	...	...	6	...	...	...	...	...	...	...	...	...	...	...	...		
30 to 35	4	1	7	1	...	4	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...		
35 to 40	6	2	12	5	...	4	...	...	...	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...		
40 to 45	4	2	6	1	...	2	...	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...		
45 to 50	5	2	8	3	...	3	...	...	...	...	...	3	...	...	...	...	...	...	...	...	...	...	...	...		
50 to 55	1	1	2	1	...	2	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...		
55 to 60	...	...	2	...	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...		
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...		
Totals...	65	11	73	8	138	48	8	48	6	96	14	...	32	2	23	1	55	3	...	36	5	46	13	82	18	...
Under 5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 to 10	3	...	9	1	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 to 15	6	2	5	3	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
15 to 20	8	3	7	3	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20 to 25	11	1	9	2	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
25 to 30	5	1	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
30 to 35	3	1	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
35 to 40	3	1	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
40 to 45	2	...	3	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
45 to 50	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	44	8	28	9	72	40	11	37	3	77	14	...	40	11	37	3	77	14	...	32	2	23	1	55	3	...



Admissions and Deaths during 1906, divided according to Age and Sex.

AGES.	PARK HOSPITAL.						BROOK HOSPITAL.						NORTHERN HOSPITAL.						GORE FARM HOSPITAL.								
	MALES.			FEMALES.			TOTAL.			MALES.			FEMALES.			TOTAL.			MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.
Under 5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 to 10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 to 15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
15 to 20	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20 to 25	2	...	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
25 to 30	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
30 to 35	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
35 to 40	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
40 to 45	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
45 to 50	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
50 to 55	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
And upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals...	8	...	3	1	11	1	67	8	51	7	118	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

SUMMARY.									
Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.	Died.	Of Admitted.	Admitted.
10	...	...	18	2	...	2	...	...	...
49	5	45	94	2	...	7	...	...	...
51	2	63	114	5	...	7	...	...	...
51	6	56	107	7	...	13	...	...	...
56	10	37	93	4	...	14	...	...	...
56	11	41	97	11	...	22	...	...	...
39	9	24	63	3	...	12	...	...	...
25	5	23	48	8	...	13	...	...	...
18	3	9	22	4	...	7	...	...	...
15	6	12	27	2	...	8	...	...	...
3	...	5	8	2	...	2	...	...	...
2	1	3	5	...	...	1	...	...	...
1	...	1	2	...	...	...	...	...	...
Totals ...	58	327	50	698	108	...	...	...	...



F.

REPORT OF THE MEDICAL SUPERINTENDENT OF  
THE SMALLPOX HOSPITALS FOR THE YEAR 1906.

No. 13.

JOYCE GREEN HOSPITAL.

DARTFORD, KENT,

29th January, 1907.

**Statistics.** There were no patients under treatment in the smallpox hospitals on 31st December, 1905. During 1906, 27 patients suffering from smallpox were admitted, all of whom came from the metropolitan area. There were no deaths, the type of disease prevailing being remarkably benign.

**Non-Smallpox cases.** Besides the patients admitted to the smallpox hospitals, 6 patients certified to have smallpox were sent to South Wharf, and were returned home as not suffering from that disease. The diagnoses made in these cases were as follows :—

Varicella	..	..	..	..	..	2
Erythema	..	..	..	..	..	2
Drug Rash	..	..	..	..	..	1
No obvious disease	..	..	..	..	..	1

The majority of the patients admitted came from Hackney and Bethnal Green. The disease seems to have been introduced into that part of London early in the year from Devonport. It smouldered in the East End of London from February until June, a few sporadic cases occurring also in other parts. No cases are known to have occurred during the last six months of the year.

**The opening of Joyce Green Hospital.** The Long Reach Hospital was used for the treatment of all the smallpox patients admitted. The various works recently in progress at the Joyce Green Hospital having been completed, that hospital was re-opened at the beginning of November, the Long Reach Hospital at the same time being dismantled and closed. No patients have been admitted to the Joyce Green Hospital since it was re-opened, and there were no patients under treatment on 31st December, 1906, in any of the institutions under your management.

**Staff.** I append the usual return of staff employed. This return deals with persons employed in the smallpox hospital open for the time being for the reception of smallpox patients. It does not include persons employed in the other smallpox hospitals or in the River Ambulance Service.

<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
1906	I.*	20	} Nil.	1906	I.	7	} Nil.
	II.	62			II.	13	
	III.	130			III.	38	
	IV.	91			IV.	26	
Total	...	303	...	Total	...	84	...

(Signed)

T. F. RICKETTS,

*Medical Superintendent.*

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

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

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

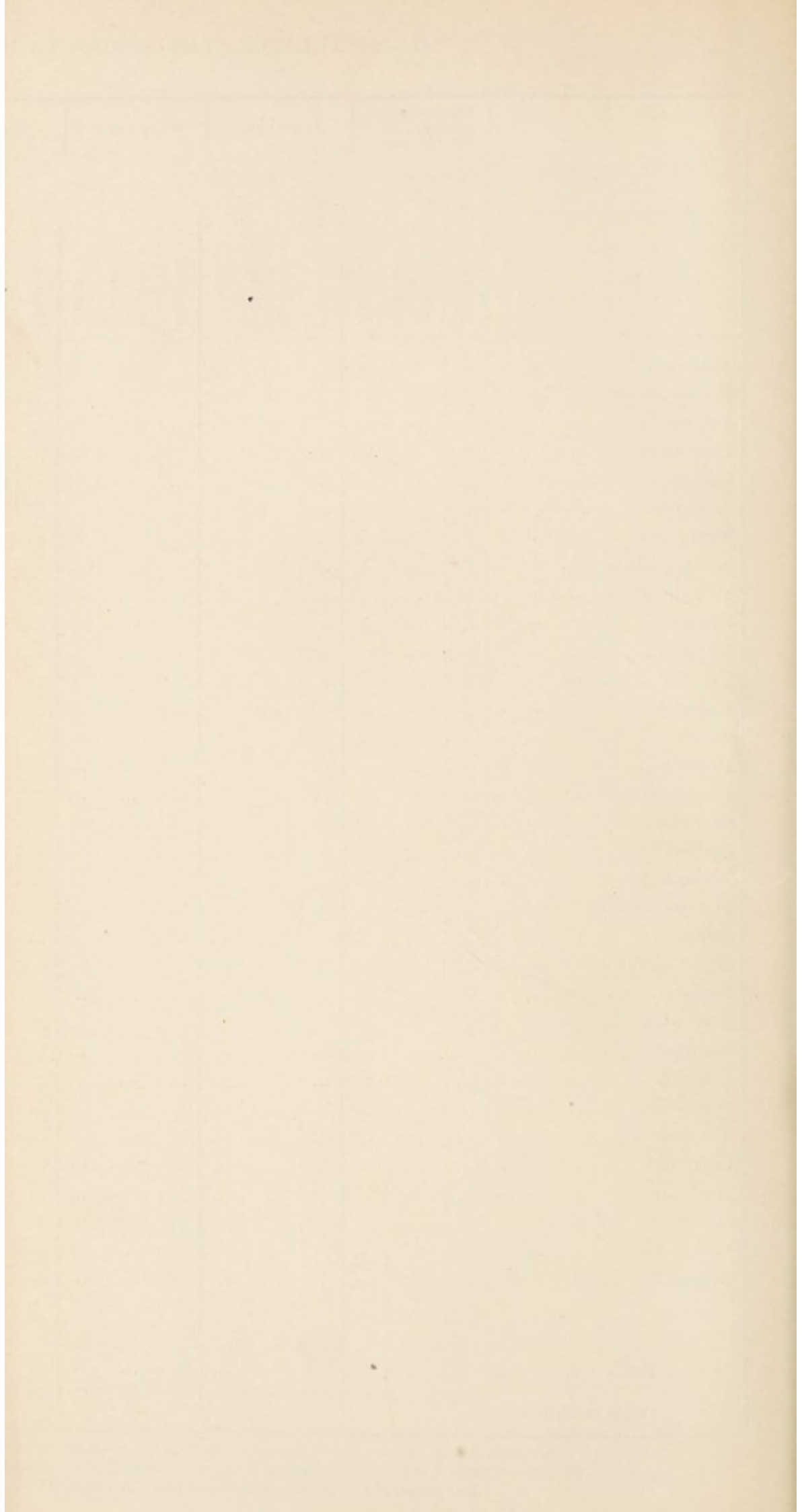
Class IV.—Includes contractors' men and others temporarily employed at the hospital.

ANNUAL REPORT, STATISTICAL COMMITTEE, 1906.

G.—SMALLPOX STATISTICS.—TABLE I.—Returns showing the Numbers of Smallpox Patients Admitted from each Parish or Union during each Month of the Year 1906; the Total Admissions, Discharges, and Deaths during the Year, and the condition of the Patients as to Vaccination.

PARISH OR UNION.	REMAINING IN HOSPITAL ON 31st JANUARY.		JANUARY.		FEBRUARY.		MARCH.		APRIL.		MAY.		JUNE.		JULY.		AUGUST.		SEPTEMBER.		OCTOBER.		NOVEMBER.		DECEMBER.		TOTAL ADMISSIONS.		DEATHS.		DISCHARGES.		REMAINING IN HOSPITAL ON 31st DECEMBER.			
	VACCINATION CICATRIX OR CICATRICES.																																			
	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.	Present.	Vaccination Evidence inconclusive.	Absent.			
Kensington	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hammersmith	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Fulham	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paddington	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Chelsea	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. George's	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Westminster	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. Marylebone	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. Pancras	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hampstead	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Islington	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Hackney	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Elmwood	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Strand	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Holborn	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
London, City of	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Shoreditch	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bethnal Green	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whitechapel	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
St. George-in-the-East	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Stepney	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mill End Old Town	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Poplar	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Southwark	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bermondsey	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lambeth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Wandsworth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Camden	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Greenwich	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Woodwich	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Lewisham	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Port of London	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Beyond Metropolitan Area	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals combined	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...

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

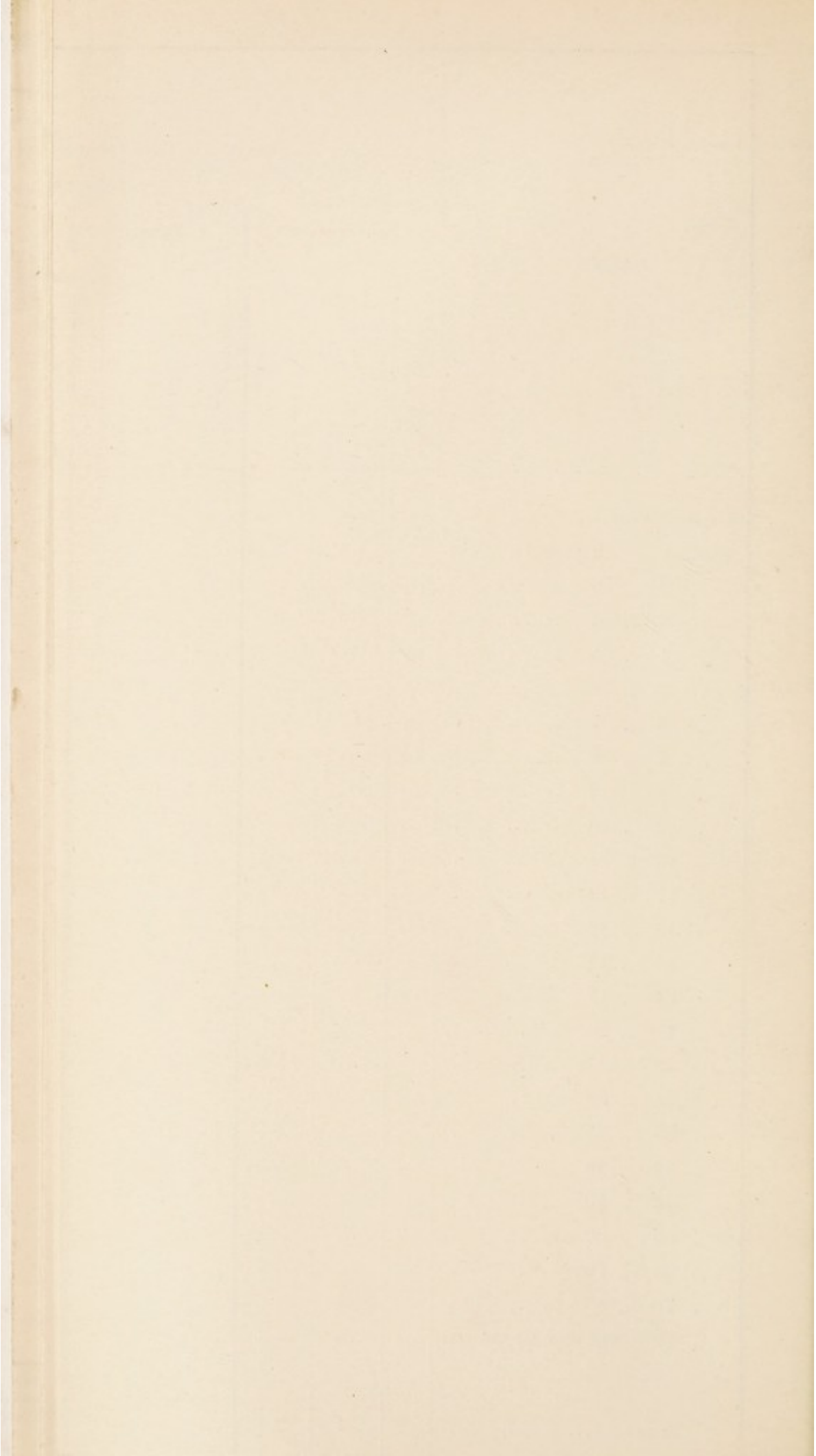


ANNUAL REPORT, STATISTICAL COMMITTEE, 1906.

SMALLPOX STATISTICS.—TABLE IV.—Analysis of Cases included in Table II, which had been successfully Vaccinated or Re-vaccinated after having been infected by Smallpox.

AGES.	CLASS I.—Cases in which vaccination was stated to have been performed from the 11th to 15th day before the day on which the rash appeared.						CLASS II.—Cases in which vaccination was stated to have been performed from the 8th to 10th day before the day on which the rash appeared.						CLASS III.—Cases in which vaccination was stated to have been performed from the 5th to 7th day before the day on which the rash appeared.						CLASS IV.—Cases in which vaccination was stated to have been performed on the 4th day before the day on which the rash appeared, or later.						CLASS V.—Cases in which the day of the incubation period on which vaccination was performed could not be ascertained.						TOTAL.	
	Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Admitted.	Died.						
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.										
	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.	Discrete.	Confluent or Hemorrhagic.								
Under 1 year ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
From 1 to 2 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
2 3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
3 4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
4 5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
5 6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
6 7	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
7 8	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
8 9	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
9 10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
10 11	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
11 12	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
12 13	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
13 14	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
14 15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
15 20	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
20 25	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
25 30	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
30 35	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
35 40	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
40 50	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
50 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
60 70	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
70 80	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
80 years and upwards ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
TOTAL ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							

NOTE.—This table follows the form used by the medical superintendent of the Hospital Ships in his report for the year 1893. It relates to cases successfully vaccinated during the incubation period of smallpox on the arbitrary assumption that the limits of that period are, on the one hand, the day on which the eruption appears, and on the other hand, the fifteenth day before that date. Cases are not included in which a successful vaccination was performed on the day on which the eruption appeared, or subsequently.









SMALLPOX STATISTICS.—TABLE IV.—Analysis of Cases included in Table II, which had been successfully vaccinated or Re-vaccinated after having been infected by Smallpox.

AGES.	CLASS I.—Cases in which vaccination was stated to have been performed from the 11th to 15th day before the day on which the rash appeared.						CLASS II.—Cases in which vaccination was stated to have been performed from the 6th to 10th day before the day on which the rash appeared.						CLASS III.—Cases in which vaccination was stated to have been performed from the 5th to 7th day before the day on which the rash appeared.						CLASS IV.—Cases in which vaccination was stated to have been performed on the 4th day before the day on which the rash appeared, or later.						CLASS V.—Cases in which the day of the incubation period on which vaccination was performed could not be ascertained.						Total.	
	Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Previously vaccinated and showing cicatrices.		Evidence as to previous vaccination inconclusive.		Evidence of previous vaccination absent.		Admitted.	Died.						
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.										
	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.	Diarrhea, Confusion or Hemorrhagic.							
Under 1 year ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
From 1 to 2 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
2 1/2 3 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
3 1/2 4 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
4 1/2 5 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
5 1/2 6 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
6 1/2 7 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
7 1/2 8 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
8 1/2 9 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
9 1/2 10 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
10 1/2 11 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
11 1/2 12 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
12 1/2 13 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
13 1/2 14 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
14 1/2 15 1/2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
15 1/2 20	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1							
20 1/2 25	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
25 1/2 30	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
30 1/2 35	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
35 1/2 40	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
40 1/2 50	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
50 1/2 60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
60 1/2 70	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
70 1/2 80	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
80 years and upwards	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...							
TOTAL	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1							

Note.—This table follows the form used by the medical superintendent of the Hospital Ships in his report for the year 1905. It relates to cases successfully vaccinated during the incubation period of smallpox on the arbitrary assumption that the limits of that period are, on the one hand, the day on which the eruption appears, and on the other hand, the fifteenth day before that date. Cases are not included in which a successful vaccination was performed on the day on which the eruption appeared, or subsequently.

Year	Month	Day	Temperature	Wind	Humidity	Clouds	Notes
1880	Jan	1	32	N	75	100	
1880	Jan	2	35	N	75	100	
1880	Jan	3	38	N	75	100	
1880	Jan	4	40	N	75	100	
1880	Jan	5	42	N	75	100	
1880	Jan	6	45	N	75	100	
1880	Jan	7	48	N	75	100	
1880	Jan	8	50	N	75	100	
1880	Jan	9	52	N	75	100	
1880	Jan	10	55	N	75	100	
1880	Jan	11	58	N	75	100	
1880	Jan	12	60	N	75	100	
1880	Jan	13	62	N	75	100	
1880	Jan	14	65	N	75	100	
1880	Jan	15	68	N	75	100	
1880	Jan	16	70	N	75	100	
1880	Jan	17	72	N	75	100	
1880	Jan	18	75	N	75	100	
1880	Jan	19	78	N	75	100	
1880	Jan	20	80	N	75	100	
1880	Jan	21	82	N	75	100	
1880	Jan	22	85	N	75	100	
1880	Jan	23	88	N	75	100	
1880	Jan	24	90	N	75	100	
1880	Jan	25	92	N	75	100	
1880	Jan	26	95	N	75	100	
1880	Jan	27	98	N	75	100	
1880	Jan	28	100	N	75	100	
1880	Jan	29	102	N	75	100	
1880	Jan	30	105	N	75	100	
1880	Jan	31	108	N	75	100	

SMALLPOX STATISTICS.—TABLE V.—List of Cases stated to have been revaccinated which have been included in Table II.

N. B.—No cases where the revaccination was performed after infection by smallpox are here included.

Consecutive Number.	Patients' Age.	Vaccination Cicatrix or Cicatrices present.			Vaccination Cicatrix absent.	Period stated to have elapsed since last Revaccination.	Type of Disease.	Result.	Remarks.	Reference Number in Case Register.
		Number	Area in square inch.	Whether their appearance affords presumptive evidence of Revaccination.						
1	34	2	.82	No .. ...	—	3 years ... ..	Discrete	R	Patient states that the revaccination was unsuccessful.	7

## APPENDIX II.—IMBECILITY.

## A.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF  
THE IMBECILE ASYLUMS FOR THE YEAR 1906.

## No. 1.

## TOOTING BEC ASYLUM.

TOOTING, S.W.,

30th January, 1907.

**Statistics.** The following is a brief summary of the statistics for the year 1906 :—

	Males.	Females.	Total.
On January 1st, 1906 ... ..	315	414	729
Admitted during the year ... ..	301	325	626
Discharges :—			
To other asylums of the Board ... ..	222	128	350
To other asylums not under the Board ... ..	3	7	10*
Not insane ... ..	1	...	1
Recovered ... ..	5	6	11
Improved ... ..	2	1	3
Not improved ... ..	4	8	12
Died ... ..	100	135	235

\* This number is included in the total of those "not improved."

**Admissions.** The admissions for the year 1906 bear curious resemblance to those of previous years, which have been referred to at length in my former reports. In 1905, of those cases admitted directly from the workhouses, 55 per cent. were upwards of 60 years of age; in 1906, 56 per cent. were upwards of 60 years of age. On the 31st December, 1905, there were remaining in the asylum 729 adult patients, of whom 161 were between 60 and 70 years of age, 309 between

70 and 80, 146 between 80 and 90, and 10 upwards of 90 years of age. On the 31st December, 1906, there were remaining in the asylum 743 adult patients, of whom 161 were between the ages of 60 and 70 years, 310 between 70 and 80, 146 between 80 and 90, and 7 upwards of 90 years of age.

**Deaths.** Deaths during the year numbered 235. The percentage of those resident on the male side is 32·15, and on the female side 30·20, this being a higher death rate than during the previous years. *Post-mortem* examinations have been made in 222 instances. Of the 235 patients who died here during the year, 159 were over 70 years of age, and of that 159, 54 were between 80 and 95, and 3 between 95 and 100.

Apoplexy was responsible for	..	..	..	5 deaths.
General paralysis	..	..	..	3 „
Chronic heart disease..	..	..	..	15 „
Pneumonia	..	..	..	24 „
Phthisis	..	..	..	16 „
Cancer..	..	..	..	8 „
Senile decay	..	..	..	116 „

It will be noticed that there is a slight increase in the number of deaths from phthisis—16 cases last year, as compared with 5 cases in the year previous; but of these 16 cases, 7 were of comparatively recent admission, having been admitted within the previous 12 months, and suffering from tuberculosis upon admission; so our mortality from phthisis up to the present is a very low one and compares most favourably with the other English asylums. I am glad to be able to report once more complete immunity from cases of colitis and epidemic diarrhœa.

**Inquests.** Inquests have been held in 11 cases during the year, and the verdicts have been in accordance with the medical evidence and call for no special comment.

**Restraint and seclusion.** No restraint has been employed during the year; 1 male was secluded on 1 occasion for 7 hours, and 1 female on 2 occasions, totalling 3¼ hours.

**Visit of Lunacy Commissioners.** The Commissioners in Lunacy visited the asylum on the 8th November, and their report will be found on reference to the index.

**Staff.** I am glad to be able to report very favourably on the general conduct of the staff in this asylum during the past year. I regret very much to have to report the death of a wardmaid who had been in the service of the Managers for 1 year and 10 months; she succumbed at the University College Hospital from peritonitis following rupture of gastric ulcer.

**Buildings.** During the past year the work of completing this asylum has been begun, and is at the present time being rapidly carried on, and I hope soon the asylum will be in possession of the much-needed hall. In connection

with the building the question of lighting the new blocks and hall arose, and the committee have thought it advisable to recommend the Board to obtain from an outside source the future supply of electricity for the entire institution.

### RECEIVING HOME FOR CHILDREN.

#### Statistics

	Males.	Females.	Total.
Remaining on January 1st, 1906 ... ..	17	14	31
Admitted during the year ... ..	90	68	158
Discharges :—			
To other asylums of the Board ... ..	88	76	164
Not insane ... ..	1	...	1
Recovered ... ..	1	...	1
Improved ... ..	...	...	...
Not improved ... ..	4	...	4
Died ... ..	2	1	3

**Admissions.** In connection with the above I append two tables—(1) showing the forms of imbecility and insanity from which children were found to be suffering on admission; and (2) showing the probable causes of their mental defects, so far as can be ascertained. It has not been possible in all cases to obtain family histories, but the family histories which have been secured were from personal interviews with relatives of the patients. The table with regard to family history will be found interesting.

(Signed) EDWYN H. BERESFORD,  
*Medical Superintendent.*



TABLE I.

	Males.	Females.	Total.
Imbecility or idiocy ... ..	53	37	90
„ „ with epilepsy ... ..	28	19	47
Microcephalic ... ..	3	...	3
„ with epilepsy ... ..	1	...	1
Hydrocephalic ... ..	...	3	3
„ with epilepsy ... ..	1	...	1
Mongolian ... ..	2	4	6
Cretin ... ..	...	2	2
Juvenile general paralysis ... ..	1	2	3
Totals ... ..	89	67	156

Not included in the above table—  
 1 boy, acute mania, following enteric.  
 1 girl, acute mania.

TABLE II.

	History of Insanity.			History of Phthisis.			History of Syphilis.			History of Alcohol.			History of Ab-normal Labour.			History of Trauma to Patient.			Un-known.			None.		
	M	F	Tl	M	F	Tl	M	F	Tl	M	F	Tl	M	F	Tl	M	F	Tl	M	F	Tl	M	F	Tl
Imbecility or idiocy ...	11	7	18	4	4	8	...	...	...	1	2	3	1	1	2	...	2	2	16	13	29	23	13	36
„ with epilepsy	6	5	11	2	3	5	...	...	...	2	1	3	3	1	4	...	1	1	4	6	10	10	6	16
Microcephaly ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...	1	...	1	1	...	1
„ with epilepsy	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	...
Hydrocephaly ...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	2	2
„ with epilepsy	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Mongolian ...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	4
Cretin ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	1	1	1
Juvenile general paralysis	...	1	1	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
	18	14	32	6	8	14	...	...	...	3	4	7	5	2	7	...	3	3	22	19	41	37	25	62

NOTE.—In the case of 1 male, repeated pregnancy.  
 1 male, difficult labour.  
 1 female, G.P.I., illegitimate.  
 3 females, difficult labour.

## No. 2.

## LEAVESDEN ASYLUM.

1st January, 1907.

**Statistics.** The following is a brief summary of the statistics for the year 1906:—

	Males.	Females.	Total.
On January 1st, 1906, the asylum contained ... ..	809	967	1,776
Admitted during the year ... ..	98	87	185
Total under treatment during the year ... ..	907	1,054	1,961
Died during the year ... ..	65	62	127
Discharged during the year ... ..	24	15	39
Remaining in the asylum on December 31st, 1906 ... ..	818	977	1,795

Owing to the further reduction of the number of active tubercular cases under treatment, and to the apportionment of some staff rooms for the use of patients, the total accommodation has risen from 1,834 to 1,877.

**Admissions.** The following table shows the bodily state of the admissions during the seven years, 1900–1906:—

Year.	Good.	Average.	Indifferent.	Weak.	Very weak.	Totals.
1900 ..	0	8	39	91	38	176
1901 ..	2	6	28	69	41	146
1902 ..	1	7	27	117	24	176
1903 ..	0	25	36	70	12	143
1904 ..	0	18	42	122	23	205
1905 ..	2	9	52	146	3	212
1906 ..	1	5	52	105	22	185

The weak and very weak include those suffering from actual physical disease, including epileptics. The large dayrooms for 150 patients, and dormitories for 75 patients, do not provide proper and suitable accommodation for the constantly growing number of feeble patients now accommodated in this asylum. This is an urgent matter and needs the Committee's attention.

Every endeavour is made to keep up the numbers employed, but a great deal of the work done by such feeble patients is of the poorest quality, many being kept at work not for what they do but to keep their minds and bodies occupied. As a consequence more paid help will in the future be required.

**Discharges.**

	Males.	Females.	Total.
Recovered .. .. .	—	—	—
Relieved .. .. .	10	3	13
Not improved .. .. .	14	12	26
<b>Total discharges .. .. .</b>	<b>24</b>	<b>15</b>	<b>39</b>

Of these, 15 were sent to other asylums:—

Names of Asylums.	Males.	Females.	Total.
London County Asylum, Banstead ..	1	1	2
London County Asylum, Colney Hatch ..	2	2	4
London County Asylum, Claybury ..	2	1	3
London County Asylum, Hanwell ..	1	3	4
City of London Asylum .. .. .	1	—	1
Metropolitan Board's Asylum, Caterham..	—	1	1
	<b>7</b>	<b>8</b>	<b>15</b>

**Deaths.**

The deaths numbered 127—65 males and 62 females. The percentage of deaths on the average number resident was in 1906 as follows:—

Males.	Females.	Total.
7·94	6·44	7·13

There were 123 *post-mortem* examinations—62 males and 61 females—this representing 97 per cent. of the deaths. Every body was systematically examined after death for bedsores, and any break in the continuity of the skin over an area liable to pressure by lying or sitting was carefully noted, with the following results:—

	Males.	Females.	Total.
Bedsores (slight abrasions not included) .. .. .	2	1	3
Trifling abrasions .. .. .	4	3	7
Very trifling abrasions .. .. .	2	6	8

Considering the class of patients under care no reflection is made upon the nursing, which is generally considered good.

The following table gives a list of the deaths during 1906 where tuberculosis played a principal or secondary part:—

	Males.	Females.	Total.
Pulmonary tuberculosis .. .. .	17	10	27
General tuberculosis .. .. .	4	3	7
Tuberculosis of bones and joints .. .. .	—	2	2
General paralysis of the insane and pulmonary tuberculosis.. .. .	1	—	1
Cancer and pulmonary tuberculosis .. .. .	—	1	1
Cerebral hæmorrhage and pulmonary tuberculosis	1	—	1
Tubercular peritonitis .. .. .	—	1	1
	<b>23</b>	<b>17</b>	<b>40</b>

The following table gives particulars as to the tubercular death-rate during the past seven years :—

Year.	Average No. of patients resident.	Deaths from all causes.	Tubercular deaths.	Tubercular Percentage.
1900	1,905	310	104	5·46
1901	1,772	164	67	3·78
1902	1,768	134	43	2·38
1903	1,752	131	34	1·94
1904	1,751	158	53	3·02
1905	1,776	126	44	2·47
1906	1,782	127	40	2·24

Among the other chief causes of death during 1906 were pneumonia and bronchitis 11, valvular disease of heart 11, senile decay 9, and cancer 7.

**Accidents, inquests, and sudden deaths.** There were 14 accidents during the year involving fractures of bone or other serious injury, each being fully reported at the time. The circumstances of each accident were also inquired into by members of the Sub-Committee soon after the injury had been sustained.

Besides the above accidents there were 5 inquests. At an inquest held on March 1st on the body of Margaret Crockett, aged about 66 years, the jury returned the following verdict :—“ That the said Margaret Crockett died at Leavesden Asylum, on the 27th February, 1906, from natural causes, probably accelerated by having fractured her left thigh by accidentally falling in No. 5B infirmary ward on 1st February, 1906. And the jurors also say that no blame attaches to any of the attendants for such accident.” At an inquest held on May 16th, on the body of William Parker, the jury returned the following verdict :—“ That the said William Parker died at Leavesden Asylum, on the 15th day of May, 1906, from broncho-pneumonia and abscess of neck, and from having swallowed a stone, wood, and other substances, and the jury consider that no blame is attached to any of the officials.” At an inquest held on July 10th, on the body of John Wallace, the jury returned the following verdict :—“ That the said John Wallace died at the Leavesden Asylum aforesaid on the 7th July, 1906, and that his death was due to natural causes, his age 66, and that he was a patient in the Leavesden Asylum.” Early in the morning of August 3rd night attendant Albert Edward Clarke, found George Warner, an epileptic patient, lying dead in bed upon his face, which was livid and had creases upon it such as might be made by bed clothes. The coroner ordered a *post-mortem* examination to be made by a Watford medical man, and at the inquest held on August 4th the following verdict was returned :—“ That the said George Warner died on August 3rd, 1906, at the Leavesden Asylum of the Metropolitan Asylums Board from syncope following upon a sudden and acute dilatation of the heart, which is a natural cause.” At an inquest held on

November 16th, on the body of Isabella Roberts, the jury returned the following verdict :—“ That the said Isabella Roberts died at the Leavesden Asylum aforesaid on the 14th day of November, 1906, and her death resulted from (1) Fracture of the left thigh bone, which was sustained on the 10th day of October, 1906, by the deceased accidentally falling in No. 1B ward ; and (2) Senility, and we are of opinion that no blame is attachable to any person.”

There were 8 cases of unexpected or unusual death, in which the coroner, after satisfying himself as to the facts, did not deem an inquest necessary.

**Entertain-  
ments and  
amuse-  
ments  
provided.**

These have taken place as usual, and in this connection the valuable services of the chaplain and Mrs. Athelstan Clark should be specially recorded.

**Improve-  
ments and  
additions.**

Among the more important works executed during the year may be mentioned the laying down of the sewage system upon the new land, the erection of a shelter in No. 3 airing court, the conversion of 6 windows into doorways on the ground floors of the infirmary blocks, the provision of a chair store adjoining the recreation hall, the making of 24 book-cases for the wards, and the provision of steeping tanks under shelter for the disinfection of clothes, besides numerous smaller alterations and repairs.

The chief works now in progress consist of the laying out of a much-needed recreation ground, the erection of a shelter in No. 7 airing court, and the provision of better fire-grates throughout the institution, in order to do away with the present arrangements of heating the wards, which are costly, inefficient, and dangerous to health.

Among the works projected are the extension of the cemetery, general repairs to the roads upon the estate, and the conversion of blocks 9, 10, and 11 into 9 infirmary wards, each for 50 patients.

**The Staff.**

In August, Dr. Field, third assistant medical officer, left on his appointment as assistant medical officer at the North Western Fever Hospital, and was succeeded by Dr. O'Brien. Mr. James Taylor, who had been unfit for duty, owing to illness, since November, 1905, retired on July 31st, 1906, upon a pension, after about 15 years in the Managers' service. Mrs. Butler, superintendent nurse, left in May, and was succeeded by Miss Florence Nightingale. I regret to record 3 deaths among the staff, all of which were unexpected

During the year 12 of the staff obtained the valuable nursing certificate of the Medico-Psychological Association.

**General  
remarks.**

Two of the Commissioners in Lunacy visited on June 9th. Dr. Downes and Mr. E. A. Sandford Fawcett, Local Government inspectors, visited on March 16th and June 15th, respectively. A general inspection of the asylum by the Asylums Committee took place on 4th July. Three members of the Royal Commission on the Feeble Minded visited on December 5th.

The list of epidemic and zymotic diseases which have occurred among the patients during the year comprises 1 case of enteric fever, 2 cases of erysipelas, and 1 case of dysentery, all on the female side. No cases occurred among the staff.

There was no necessity during 1906 to use seclusion by day or by night, mechanical restraint or strong dresses in the treatment of the patients.

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

### No. 3.

#### CATERHAM ASYLUM.

CATERHAM,

SURREY.

1st January, 1907.

The following is a summary of the changes during the year 1906:—

##### Statistics.

	Males.	Females.	Total.
Number of patients on 1st January, 1906 ... ..	850	1,045	1,895
Admitted since ... ..	82	89	171
Total under treatment ... ..	932	1,134	2,066
Discharged ... ..	15	4	19
Died ... ..	72	94	166
Remaining 31st December, 1906 ... ..	845	1,036	1,881
Average number resident ... ..	840	1,037	1,877

**Admissions.** Of the 171 patients admitted during the year, 57 male and 41 female were transferred from Tooting Bec, 1 female from Leavesden, 20 male and 20 female from Cane Hill, 27 female from Banstead, and 5 male from the London County Council's Epileptic Colony at Ewell.

I regret to have to report that there has been no improvement in the character of the admissions, and have no hesitation in stating that only those who have to face the difficulties of internal management, and are able by daily contact to recognise the additional responsibility and anxiety devolving on the staff, can

have any idea of the evil and risks arising from collecting large numbers of the class we are now receiving, in wards containing 156 patients, often as at meal times left with only 2 attendants in charge of them. While without doubt this asylum is eminently fitted for the imbecile class for which it was originally intended, to try and adapt it for the reception of the many unsuitable cases transferred from other asylums is in my opinion impracticable. The conversion of blocks consisting of a day-room and two dormitories into 3 infirmary wards does not meet the necessary requirements, and owing to the want of proper day-room space has not proved satisfactory. The largeness of these wards renders efficient supervision of those of mischievous, destructive, and faulty habits almost impossible, while the comfort of the more sensible patients and those suffering from bodily ailments is in consequence greatly disturbed.

**Discharges.**

	Males.	Females.	Total.
As recovered ... ..	2	—	2
As relieved... ..	5	1	6
Not improved ... ..	8	2	10
To other Asylums of the Board ... ..	—	1	1

Of those relieved, 4 males and 1 female were discharged as improved to the care of friends, and 1 male by order of the guardians for removal to the Nantwich Union. One female was transferred to Tooting Bec, and 8 males and 2 females, having become dangerous to themselves or others, were re-certified and sent to Cane Hill or the City of London Asylums.

**Deaths.**

72 male and 94 female patients died during the year; the percentage of deaths on the average number resident being 8.6 for the males and 9.1 for the females, a marked increase when compared with previous years. In 81 out of the 166, or practically 49 per cent., 60 years of age was exceeded, and of the 54 female patients 10 were over 80, and 1 was in her 91st year. Pneumonia in most cases following influenza, which was very prevalent during the first quarter of the year, accounted for 16 males and 21 females, and tuberculosis for 11 male and 5 female deaths. One male patient was the subject (verified during life by "Widal's Test") of enteric fever, and 1 of each sex died of colitis.

In 151 instances, or 91 per cent. of the cases, the cause of death was verified by *post-mortem* examination.

**Inquests.**

Three inquests were held during the year. The facts were fully reported at the time and the verdicts call for no special comment. In the case of a female patient who died after an operation for strangulated hernia, the Coroner, to whom I sent full particulars, informed me that he did not deem an inquest necessary.

**Restraint and seclusion.** Early in the year mechanical restraint as a last resource had to be employed to prevent a female patient interfering with surgical dressings; and in only a few instances have patients required to be secluded.

**Employment.** The total number of those employed compares favourably with previous years, and the percentage is under existing circumstances exceptionally good, especially on the male side. I feel, however, that it is expedient to discriminate between those whose work is remunerative and useful and the much larger section whose occupation is of little value to the institution, though of distinct benefit to themselves. As death or increasing feebleness deprives the wards and domestic departments of working patients, the greatest difficulty is experienced in replacing them, and as at the present time I am quite unable to select female patients to fill four vacancies that have arisen in the laundry, the question of providing more paid help will ere long have to be faced.

**Epidemics.** The great advantage of having an isolation hospital attached to the asylum has been clearly demonstrated during the past year. In June a female patient and 1 of the housemaids, suffering from chicken-pox and German measles respectively, and in November 2 nurses who were the subject of scarlatina, were removed from the main building for treatment. On both occasions it is satisfactory to be able to report that prompt isolation and the precautionary measures taken prevented the spreading of the complaints.

**General history.** While able to report favourably on the sanitary condition of the asylum, I regret that the general health of the staff and patients has not been so good as in previous years. An outbreak of influenza occurred during the first quarter, the type being of a more serious nature than met with heretofore, and in a large proportion of the cases, pneumonia supervening, there was a fatal termination. In addition to the 2 cases of colitis there have also been from time to time slight outbreaks of dysenteric diarrhœa.

The Commissioners in Lunacy made their official visit on June 1st, and a female patient has been twice interviewed by the Lord Chancellor's visitor. On August 4th, a deputation of the Fulham Board of Guardians inspected the asylum and saw the patients chargeable to that parish, and on February 11th Bishop Taylor-Smith, Chaplain-General to the Forces, preached in the asylum chapel to a full and appreciative congregation of patients and staff.

**Structural improvements.** In addition to the usual cleaning and renovating inside, a considerable amount of external painting was carried out during the year, and among the necessary improvements might be enumerated the completion of the laying out and tar-paving of the male airing courts, the fixing of white glazed stoneware sinks in the kitchens of female "A" infirmary wards, the provision of a galvanized iron shed for wood-chopping, and the laying on of a better supply of water to the distant piggeries. The work in prospect includes much-needed increased messroom and sleeping accommodation for the male side, and the reorganising of the general bathrooms, which are antiquated and unfitted for present requirements.



**The staff.** The conduct of the staff has, with very few exceptions, been exemplary, and while there have been several changes, mostly among the junior members, it is noteworthy that as against 20 per cent. who number under 1 year's service, there are 28 per cent. who exceed 5.

Mr. Schilling, who had held the office of Steward for more than 12 years, was superannuated, and left the asylum in September, 2 ordinary male attendants were dismissed, their offences being in no way connected with the treatment of patients, and 3 owing to ill-health were called upon to resign. I regret to have to record the death of one of the attendants. While the state of the wards and condition of the patients point to the satisfactory manner in which their duties are performed, I feel that the class of patients now under treatment, especially on the female side, calls not only for an increase of the nursing but also the domestic staff.

The classes conducted by the Assistant Medical Officers continue to be well attended, and the result of the examinations have been most satisfactory, 18 male attendants and 36 nurses obtaining certificates.

(Signed) P. E. CAMPBELL, M.B.,  
*Medical Superintendent.*

No. 4.

DARENTH ASYLUM.

5th February, 1907.

Statistics for the year 1906 :—

	Males.	Females.	Total.
On January 1st, 1906, the asylum contained .. .. .	991	920	1,911
Admitted during the year... .. .	200	94	294
Total number under treatment during the year ... .. .	1,191	1,014	2,205
Discharged during the year ... .. .	172	21	193
Died during the year... .. .	28	43	71
Remaining in the asylum on December 31st, 1906 ... .. .	991	950	1,941

**Admissions.** All of the 294 admissions were received from Tooting Bec, with the exception of 60 male patients who were admitted from Belmont Asylum at the time of the epidemic of enteric fever at that institution.

In order to house these patients in the camps at the Lower Gore Hospital, it was necessary to entirely equip 5 huts, the attendants' quarters, to put the laundry into working order, and also to inaugurate a means of dealing with the sewage, there being nothing there at the time but a few earth closets.

This was all done and the patients safely admitted in four days.

The cases admitted came from the ward at Belmont where fresh cases of enteric fever were then occurring, and as a result 2 of the patients were found to be suffering from this disease on the day following admission, and 2 further cases within the next week, but after this no further patients were infected, showing that the precautions taken at the camps were successful in preventing the disease spreading. In great measure this was due to Dr. Wood, the assistant medical officer in charge, who spared neither time nor labour, and discharged his duties under extremely trying circumstances in a most capable manner.

**Discharges.** I regret to say that 17 patients between the ages of 5 and 23 were discharged to the care of their friends by order of the guardians, and in no instance was the patient fit in my opinion to be discharged from the asylum.

**General health.** The general health of the patients has been good, and except for the 4 cases of enteric fever mentioned above, and 1 case of scarlet fever, nothing calls for attention.

No inquest was held during the year, and but few accidents have been recorded.

**The Farm.** The bailiff has had a very successful year, and the returns show a balance of £976 10s. 9d., as against £625 3s. 2d. the preceding year.

**Industrial Colony.** Progress continues to be made, and there are now 492 males and 337 females usefully employed, being an increase over the numbers at the end of 1905 of 52 male and 22 female patients.

The accommodation afforded by our present make-shift shops remains as formerly, but shortly the building of the new workshops will be commenced, and it is hoped that they will be ready for occupation before the end of the present year.

When these are completed the problem will be settled of providing accommodation for the male working patients. The same problem will shortly have to be faced for providing proper accommodation on the female side for the needleroom workers and patients occupied in other industries.

The drilling of the male patients has greatly improved, and visitors who have seen the drill have expressed astonishment at the degree of excellence reached. Unfortunately, Madame Osterberg has been unable to continue sending her pupils to instruct the female patients in the Swedish physical drill, but Miss Tingberg, one of Madame Osterberg's teachers, has been extremely kind in holding classes among the nurses to enable them to continue the drilling of the patients in the proper method.

Below, each industry is separately dealt with and a comparative table of the work done in 1905 and 1906 is presented.

Since the previous report a better method of keeping industrial accounts has been arranged by the accountant, and in consequence, the profit and loss account of some of the industries can only be shown for the six months ending September 29th, 1906.

*Tailor's Shop.*—In this shop, although fewer repairs have been executed than in 1905, a considerable increase is shown in the new work, and as far as possible a certain number of patients are kept to this alone.

During the year 1,764 articles were made and 14,967 articles were repaired.

*Shoemaker's Shop.*—In this shop there is also an increase in the new work, and at this several patients have shown good progress. Numbers of repairs have been executed for White Oak School and Belmont Asylum, and there is still scope for an increase in repairing boots for other institutions.

The following articles were made and repaired during the year :—

486 pairs new boots made ; 6,308 pairs boots repaired for Darenth ;  
1,605 pairs boots repaired for White Oak School, 314 pairs boots  
repaired for Belmont Asylum ; 3 leather bookcases repaired ;  
1 belt ; 1 portmanteau.

*Upholsterer's Shop.*—A list of articles repaired and re-upholstered is subjoined, and is both numerous and various, but in neither case is it equal to that of 1905, no unpicking being now included in these returns.

The price for recarding hair, which was formerly 1d. per lb., has been reduced to  $\frac{1}{2}$ d. per lb.

Articles made and repaired :—

7 window blinds made ; 1 cushion and pad made ; 2 chair cushions made ;  
8 armchairs re-upholstered ; 8 couches re-upholstered ; 21 small  
chairs re-upholstered ; 2 pieces cocoa-matting bound ; 9 hammock  
slips made ; 6 sun-blinds repaired ; 2 dress hampers lined ; 3 carpets  
repaired ; 7 mattresses made for Darenth ; 2 pillows made for  
Darenth ; 1 bolster made for Darenth ; 13 mattresses made for  
North-Western Hospital ; 1 mattress made for Belmont Asylum ;  
38 hassocks made for Belmont Asylum ; 24 epileptic pillows made  
for Belmont Asylum ; 36 waterproof bibs made for Belmont Asylum ;  
1 drawing-room suite of six pieces re-upholstered for South-Eastern  
Hospital ; 9 cork mattresses for North-Western Hospital.

*Basket Shop.*—Returns of new work in this shop are less than last year, and it appears as if it were now possible to make more articles than are required by the Board's institutions.

However, considerable progress has been made with wicker, cane and rush chair-making, and different kinds of bamboo furniture.

An increase is shown in the articles repaired.

Articles made and repaired in 1906 :—

54 fancy baskets ; 83 linen baskets ; 16 bread baskets ; 3 store baskets ;  
4 wood baskets ; 13 laundry hampers ; 106 prickle baskets ; 43  
shopping baskets ; 6 wastepaper baskets ; 24 cane and wicker chairs ;  
252 clothes pegs ; 16 wall pockets ; 8 letter racks ; 9 flower-pot

stands; 1 work-table; 2 netting baskets; 4 portmanteaus; 1 dog basket; 4 flower-pot covers; 7 cabbage baskets; 2 dress hampers; 6 round linen baskets; 18 vase-shape buff linen baskets; 36 clothes baskets; 195 chairs caned and repaired; 205 baskets repaired.

*Mat Shop.*—A large increase is shown in new work, and the patients employed in both the male and female shops are making good progress.

Numbers of articles made and repaired:—

70 curbed kneelers; 486 kneeling mats; 68 coir mats; 63 Axminster wool rugs; 32 fendoffs; 72 potato nets; 43 mats repaired.

*Brush Shop.*—A great increase is shown in the work turned out in this department, and it is to be hoped that all possible orders for other institutions will be sent on, as otherwise the output is in danger of exceeding the demand.

19 male patients and 18 females are employed in this industry.

Articles made in 1906:—

1,208 bass brooms; 170 carpet brooms; 1,198 hair brooms; 5 Turk's-head brooms; 473 banister brushes; 32 clothes brushes; 39 crumb brushes; 167 carpet brushes; 163 dandy brushes; 26 dusting brushes; 67 flue brushes; 1 filter brush; 18 floor-polishing brushes; 33 fancy brushes; 281 hair brushes; 12 bottle brushes; 4 corridor brooms; 27 hearth brushes; 216 laundry brushes; 67 nail brushes; 270 round oil brushes; 65 spoke brushes; 5,024 scrubbing brushes; 600 stove brushes; 202 sweep's brushes; 58 w.c. brushes; 36 body brushes; 18 water brushes; 31 tar brushes; 6 double banister brushes; 6 saucepan brushes; 12 bath brushes; 1,459 shoe brushes.

*Carpenter's Shop.*—A large number of articles have been made in this shop, and the 18 boys employed are improved considerably, and 2 of these are making good progress in French polishing.

Should the progress continue, it may be necessary to engage a second carpenter-instructor.

Articles made and repaired in 1906:—

350 chart boards; 71 picture frames; 1 fancy box; 1 fancy gate; 6 stools; 1 copper lid; 3 salt boxes; 69 bed tables; 6 basket bottoms and feet; 1 knife box; 1 flap and bracket; 24 poultice boards; 2 doll cases; 2 chopping blocks; 2 cold frames; 2 mat frames; 98 latrine paper boxes; 24 scrubbing boards; 9 soap boxes; 6 cot tables; 10 separation tables; 42 inventory frames; 1 camp stool; 6 brush-backs; 34 mineral-water boxes repaired; 1 mirror repaired; 13 chairs repaired; 24 brush-backs screwed.

*Painter's Shop.*—Most of the work allocated from the painting and cleaning contract has now been carried out, and, in addition, other minor works have been completed.

List of work done in 1906:—

Completion of painting and cleaning corridors at pavilions.

Painting exterior and interior of coachman's cottage.

Painting exterior and interior of farm labourers' cottages.

Painting, cleaning, and papering the male staff and officers' billiard rooms.  
Lime-washing piggeries at farm.

Painting, tarring, and lime-washing new breeding styes.

A quantity of fencing cleaned and painted.

Head attendant's office and medical office, ceilings whitened and walls cleaned.

Six rooms in asylum, cleaned, painted, and varnished throughout.

*Wood Chopping.*—There is a less number of bundles turned out owing to a shortage in the stock of wood.

Deal ends are now being purchased.

210,033 bundles were made in 1906.

*Tinsmith.*—Only fair progress has been made in this industry by the 6 boys employed, but it is hoped during the following year to do better than formerly.

Number of articles made and repaired :—

1 zinc box and tube ; 7 crumb trays ; 6 copper brush backs ; 21 paint kettles ; 25 dustpans ; 1 wire-holder ; 33 bread tins ; 6 tin tubes ; 3 meat tins ; 98 cake tins ; 60 tin labels ; 46 funnels ; 11 tea cans ; 15 gas consumers ; 3 potato steamers ; 8 measures ; 3 vegetable tins ; 2 tin hoods ; 308 articles repaired.

*Roadmaking.*—A number of roads, previously made of ashes, have been treated with hard core and finished with hand-picked flints and gravel.

Tar paving work, at a cost of £113 17s. 9d., has been completed in the pavilion airing courts. In this work a considerable amount of patient labour was employed.

*Bookbinding.*—This new industry was commenced in July last, and since that time very considerable progress has been made by the 6 patients employed.

A profit and loss account of this shop cannot be shown until next year.

Number of books bound, rebound, or repaired :—

24 Psalters ; 60 hymn and prayer ; 27 choir ; 2 children's hymn ; 1 Bible ; 3 hymn ; 1 organ music ; 8 chants ; 12 library books repaired ; 15 library books rebound ; 36 anthems ; 17 glees ; 18 " Te Deums " ; 3 " Christ and His Soldiers " ; 2 music books ; 84 other books ; 11 books for Chief Office and 324 manuscript books made for Chief Office.

Articles made :—

8 writing cases ; 1 blotting pad ; 32 pocket books.

*Needlerooms.*—There are now 3 needlerooms, one at the training school for making new articles, another in the industrial colony for general repairs, and a small probationary room in charge of an industrial attendant, where at present 18 of the younger adult girls are taught sewing before being drafted into one of the other rooms.

This last—a new departure—was commenced in March last, and, so far, has been very fairly successful, 7 girls having already been drafted into the other large rooms.

In the repairing room 52 adults of varying ages are employed, with good results,

as the number of repairs, an increase of over 6,000 over those of the preceding year, testify.

Of these patients, 9 have improved to such an extent that they are now capable, with a little assistance, of doing neat new work, and one has been taught to work the treadle machine.

In the making room at the school, the 13 girls employed are doing well and all of them are capable of finishing new garments, which are fixed for them by the staff, whilst 2 can fix new work for themselves.

Articles made during 1906 :—

535 patients' dresses ; 560 nightgowns ; 391 chemises ; 385 pairs drawers ; 1,215 flannel vests ; 459 flannel petticoats ; 400 upper petticoats ; 713 bibs ; 1,135 pinafores ; 953 shirts ; 533 scarves ; 1,313 sheets ; 1,011 bolster cases ; 85 attendants' pillow cases ; 26 attendants' sheets ; 810 hand towels ; 34 round towels ; 67 dusters and slop cloths ; 32 tea cloths ; 8 linen bags ; 17 tea bags ; 145 hats trimmed ; 311 tablecloths ; 187 curtains ; 22 cushion covers ; 495 patients' aprons ; 507 staff aprons ; 523 staff dresses ; 7 mosquito nets ; 7 altar cloths and drapery ; 20 hassocks recovered ; 141 staff caps ; 165 pairs cap strings ; 50 feeding cloths ; 568 bath sheets ; 500 small towels ; 1 gramophone cover ; 10 bonnets trimmed ; 92 shrouds ; 4 dress curtains ; 1 chair cover ; 9 mangling cloths ; 33 pudding cloths ; 2 dresser cloths ; 34 ironing cloths ; 4 sideboard cloths ; 37 toilet covers ; 150 hats trimmed ; 192 pairs sleeves ; 35 braces ; 2 curtains relined ; 7 jackets ; 1 ironing blanket ; 554 pairs stockings and socks taped.

*Female Brush and Rugmaking Shop.*—18 adult girls are employed in brush-making and 9 making Axminster rugs. On an average 10 dozen brushes are wire drawn per week, composed of 10 entirely different kinds, and the work done has considerably improved during the past year.

The girls are all happy and thoroughly enjoy their work.

Rugmaking was started in the colony in March last and the 9 patients employed all show improvement.

Up to the time of starting this industry, 2 of the patients used to sit about in the ward doing nothing whatever.

*Kitchens.*—10 female patients are employed in the school's kitchen, in helping the kitchenmaids, preparing the vegetables for cooking, and doing scullery and cleaning work. They show improvement.

*Laundries.*—73 patients are employed in the two laundries. A number of them can wash, iron, and mangle, and are a great help to the staff. Four of them can work almost as well as paid hands, having improved considerably during the past year, and one can do 4 gross of collars per week with a collar machine.

*Female Bookbinding Shop.*—It is hoped at an early date to start a shop in which female patients can do stripping, folding, preparing, and sewing.

The following table deals with the number of workers and work done during 1905 and 1906 :—

INDUSTRY.	Number of Patients employed.		Number of Articles made.		Number of Articles repaired.		REMARKS.
	1905.	1906.	1905.	1906.	1905.	1906.	
Tailor ...	39	42	1,267	1,764	23,648	14,967	The repairs are valued as follows :-Jackets, 9d. each ; vests, 4d. ; trousers, 8d. ; capes, 3d. ; overcoats, 9d. ; and combinations, 3d. The new articles as per contract. Repairs valued :-Mattresses, 1/- ; bolsters, 6d. ; pillows, 3d. ; hair carding, 1d. per lb. Other articles valued as follows :-Mattresses remade, 2/6 ; bolsters, 9d. ; pillows, 4d. ; kneelers, 6d. Repairs :-White Oak, 1/3 ; Darenth, 1/9 ; Belmont, 2/- ; New work as per schedule. All goods are charged at contract prices. At 1/3 per seat (large and small). All goods are charged at contract prices. Do. do. do. These rugs have been sold at 3/- to 42/-. At 30/- per 1,000. The price for repairs is based on staff plumber's time and new work to schedule price. At invoiced prices to other institutions, and a nominal charge for repairs.
Upholsterer ...	18	20	4,407	3,139	67,794 lbs. hair carded 5,828 12 sundries	60,847 lbs. hair carded 3,057 5 sundries	
Shoemaker ...	35	39	379	486	8,415	8,227	
Basket maker ...	13	11	666	466	77	205	
Chair caning...	4	4	...	...	Chairs caned	Chairs caned	
Brush maker...	13 Male 12 Female	19 Male 18 Female	4,978	11,994	262	195	
Mat ...	12	21	138 37 nets	624 72 nets	64	43	
Rug (Axminster) maker ...	6	6 Male 9 Female	41	63	...	...	
Wood chopping ...	30	38	218,000	210,033	...	...	
Tinsmith ...	2	6	35	349	50	308	
Carpenter ...	6	18	487	762	57	48	
Bookbinder ...	...	6	...	...	...	...	
Painter ...	10	10	...	...	...	...	
Baker ...	7	8	...	...	...	...	
Farm and garden ...	85	58	...	...	...	...	
Road making ...	4	6	...	...	...	...	
Bricklayer ...	2	1	...	...	...	...	
Engineer ...	2	2	...	...	...	...	
Stores ...	4	6	...	...	...	...	
Kitchen ...	8	8	...	...	...	...	
Handyman ...	2	3	...	...	...	...	
Ward work ...	124	104	...	...	...	...	
Domestic offices ...	...	9	...	...	...	...	
Odd jobs ...	14	47	...	...	...	...	
Laundry...	61	73	Average weekly wash	40,020 articles.	...	...	
Kitchen ...	10	10	...	...	...	...	
Needle room...	59	83	15,067	15,498	42,751	49,005	
Brush makers ...	12	18	...	...	...	...	
Rug ...	...	9	...	...	...	...	
Messroom ...	...	2	...	...	...	...	
Ward work ...	173	142	...	...	...	...	

The following tables show the Profit and Loss in connection with each shop:—

<i>Dr.</i>	SHOEMAKER'S ACCOUNT.		<i>Cr.</i>
	Six months ending September 29th, 1906.		
New Stock ... ..	£	s. d.	
	234	2 4	
Wages of shoemaker, board and wages of instructor ...	56	17 0	
To balance of account...	150	11 7	
	<u>£441</u>	<u>10 11</u>	
30,548 hours of patients' labour not charged.			£ s. d.
			406 2 7
			35 8 4
			<u>£441 10 11</u>

<i>Dr.</i>	UPHOLSTERER'S ACCOUNT.		<i>Cr.</i>
	Six months ending September 29th, 1906.		
New Stock ... ..	£	s. d.	
	190	16 9	
Wages of upholsterer ... ..	37	6 7	
To balance of account...	110	16 10	
	<u>£339</u>	<u>0 2</u>	
14,715½ hours of patients' labour not charged.			£ s. d.
			230 9 6
			108 10 8
			<u>339 0 2</u>

<i>Dr.</i>	TAILOR'S ACCOUNT.		<i>Cr.</i>
	Six months ending September 29th, 1906.		
New Stock ... ..	£	s. d.	
	283	12 0	
Wages of tailor, board and wages of instructor ...	54	4 7	
To balance of account	97	3 11	
	<u>£435</u>	<u>0 6</u>	
34,620 hours of patients' labour not charged.			£ s. d.
			340 4 8
			94 15 10
			<u>£435 0 6</u>

<i>Dr.</i>	CARPENTER'S ACCOUNT.		<i>Cr.</i>
	Six months ending September 29th, 1906.		
Stock brought forward ...	£	s. d.	
	7	16 0	
New Stock ... ..	57	16 7	
Board and wages of instructor	19	15 1	
To balance of account...	50	8 3	
	<u>£135</u>	<u>15 11</u>	
4,754 hours of patients' labour not charged.			£ s. d.
			89 5 6
			3 11 6
			42 18 11
			<u>£135 15 11</u>



*Dr.* PAINTER'S ACCOUNT. *Cr.*

Twelve months ending September 29th, 1906.

	£	s.	d.		£	s.	d.
New Stock ... ..	14	6	4	To work done ... ..	131	10	0
Board and wages of instructor	19	15	8				
To balance of account...	97	8	0				
	<hr/>				<hr/>		
	£131	10	0		£131	10	0
	<hr/>				<hr/>		
11,496 hours of patients' labour not charged.							

*Dr.* BASKET ACCOUNT. *Cr.*

Twelve months ending September 29th, 1906.

	£	s.	d.		£	s.	d.
New stock and stock brought forward ... ..	402	2	7	Goods disposed of and repairs executed... ..	197	17	7
Board and wages of instructor	30	2	5	Outstanding credit ... ..	1	3	0
To balance of account...	47	4	7	Stock remaining ... ..	280	9	0
	<hr/>				<hr/>		
	£479	9	7		£479	9	7
	<hr/>				<hr/>		
19,233 hours of patients' labour not charged.							

*Dr.* BRUSH ACCOUNT. *Cr.*

Twelve months ending September 29th, 1906.

	£	s.	d.		£	s.	d.
Stock brought forward and new stock ... ..	645	8	9½	Goods disposed of ... ..	427	5	9
Board and wages of instructors	48	17	7	Stock in hand ... ..	345	6	10½
To balance of account...	78	6	3				
	<hr/>				<hr/>		
	£772	12	7½		£772	12	7½
	<hr/>				<hr/>		
30,640 hours of patients' labour not charged.							

*Dr.* MAT ACCOUNT. *Cr.*

Twelve months ending September 29th, 1906.

	£	s.	d.		£	s.	d.
Stock brought forward and new stock ... ..	176	4	10½	Goods disposed of and repairs executed ... ..	175	17	5
Wages and board of instructor	22	4	0	Stock in hand ... ..	83	9	3½
To balance of account	60	18	10				
	<hr/>				<hr/>		
	£259	6	8½		£259	6	8½
	<hr/>				<hr/>		
37,841 hours of patients' labour not charged.							



THE TRAINING SCHOOL—STATISTICS.

	Males.	Females.	Total.
Number on the School Register on January 1st, 1906 ...	263	174	437
Admitted during the year ... ..	50	52	102
Transferred to adult and pavilions ... ..	69	47	116
Returned to the care of friends ... ..	7	4	11
Died during the year ... ..	4	4	8
Number on School Register on December 31st, 1906 ...	233	171	404
Highest number attending School daily ... ..	—	—	387

The Head Mistress and Matron reports as follows :—

“ In addition to being matron at the Schools, on August 30th last I was appointed head schoolmistress.

“ During this time I have been able to classify the children more in accordance with their abilities, and am confident that better results will be gained.

“ I have at present a large number of intelligent little scholars, who will particularly benefit by the above change. A further advantage will be derived from the opening of the shops for junior boys under 16 years of age, as it is often difficult to find suitable and attractive occupation for these boys in school.

“ I have commenced an experimental class in bead blind making, and am hoping that satisfactory results will be attained.”

The following table shows the number of articles made and sold during 1906 :—

No.	Industry.	No. of Articles.	£ s. d.
1	Basket work ... ..	180	4 4 1
2	Macramé work ... ..	27	2 12 8
3	Paper flowers ... ..	2,771	11 11 9
4	Ornamental paper work ... ..	647	4 10 10
5	Fancy needle work ... ..	10	2 4 6
6	Stuffed calico toys ... ..	74	1 11 7
7	Knitting ... ..	162	7 4 7
8	Weaving ... ..	15	0 11 3
9	Teneriffe lace and drawn thread work ... ..	34	2 5 3
10	Rug work ... ..	8	4 4 0
11	Fret work ... ..	1	0 1 3
12	Gipsy clothes pegs ... ..	108	0 1 2
13	Wood work ... ..	5	0 2 3
	Totals ... ..	4,042	£41 5 2

WORK FOR INSTITUTION NOT SOLD.

No.	Industry.	No. of Articles.
1	Needlework .. ..	673
2	Ironing .. ..	1,473
3	Cane seating .. ..	3
	Total .. ..	2,149

The following alterations and improvements have been carried out at the asylum during the past year :—

- Alteration to water main (water softening).
- New exhaust engine at gas works.
- New liquor tank at gas works.
- Alterations to cow stalls.
- Tar paving school and pavilions.
- Painting and cleaning.
- Repairs to boundary fence.
- Alterations to laundries.

(Signed)

A. ROTHERHAM.

*Medical Superintendent.*

No. 5.

BELMONT ASYLUM.

2nd January, 1907.

**Statistics.** The following is a summary of statistics for the year 1906 :—

	MALE PATIENTS.		
	Over 16 years of age.	Under 16 years of age.	Totals.
Number resident January 1st, 1906 .. ..	248	—	248
Admitted during the year, 1906 .. ..	174	9	183
Discharged—			
(a) To other asylums of the Board .. ..	60	1	61
(b) To other asylums not under the Board ..	1	—	1
(c) Died .. .. .	67	—	67
Total number of cases under treatment ..	422	9	431
Number remaining, December 31st, 1906 ..	294	8	302

The admissions have been such as to lower the general average of mental and physical health. If there are included in the category of "infirmity cases" all those who come within the scope of the definition accepted by the Asylums Committee, in November, 1903, *i.e.*, "those who, from varying causes such as advanced age, feebleness, deformity, paralysis, faulty habits or general helplessness, are unsuitable for wards accommodating

**Class of  
Patients.**

from 100 to 160 patients, many of whom are at times impulsive and spiteful," only 57 out of the 302 can be classified as "ordinary cases." At present there are in the asylum 8 children suffering from ringworm. Several patients, who came from Gore Farm, suffer from chronic ophthalmia, and being very prone to relapse are a perpetual source of danger to their fellows. There are also a number of cases of tubercular disease of the lungs which cannot be satisfactorily isolated. The need of facilities for better classification of the patients is constantly being felt, but any further steps in this direction are impracticable until the work of adaptation of the asylum buildings is more advanced.

**Discharges.** There were not among the patients during 1906 any cases of recovery or even of such improvement as would justify discharge to the care of friends. One patient who developed suicidal tendencies was removed to Banstead Asylum, while the transfer of 60 to Gore Farm was due to the necessity of clearing one of the sections of the asylum so that the work of disinfecting the wards could be proceeded with.

**Deaths.** The death-rate during the year has been high, 67 names having to be removed from the books. In 59 of these cases a post-mortem examination was made, the friends raising objection in the other 8 instances. The large number of deaths was primarily due to the very poor physique of the patients, and their consequent susceptibility to injurious agencies. 11 of the deaths may be regarded as to some extent exceptional in that enteric fever played a part in their causation.

**Epidemic of Enteric Fever.** This constituted the most noteworthy event of the year. Between May 14th and August 11th 64 cases were notified, and, as has been indicated, 11 of these patients died. 2 of them were, however, the subjects of advanced tubercular disease, and in one of them, although a positive reaction was obtained from the blood during life, the post-mortem appearances afforded little evidence in support of the diagnosis of enteric fever. The epidemic was marked by a high degree of infectivity, and four of the attendants who were on duty in the wards where the cases were being nursed caught the disease, fortunately without fatal consequences. A thorough investigation of the circumstances of the outbreak was made by Dr. Monckton Copeman, of the Local Government Board, and as his report has been so recently in the hands of the Managers, it will not be necessary for me to deal with this topic at length. I may, however, be permitted to direct attention to the fact that the report is of a character entirely favourable to the administration of the asylum.

**Mechanical Restraint, &c.** As in the previous year, no mechanical restraint or seclusion was called for, and no serious accidents occurred among the patients. In no case did the coroner for the district deem it necessary to hold an inquest.

**General.** On June 2nd the asylum was visited by Dr. Needham, one of the Commissioners in Lunacy. At his suggestion further efforts were made to provide amusement for the patients. The asylum has now an efficient band, pictures have been purchased for the wards, and the number of papers and magazines supplied has been somewhat augmented.

Considerable progress has been made with the development of the asylum farm, which has been redeemed from its neglected condition and bids fair to become a valuable asset to the institution. Many additions to the stock of agricultural implements have been made during the year.

As the asylum was so recently opened no extensive new works were required but the safety of the patients in the wards has been furthered by covering in the steam heating pipes, and the efficiency of the kitchen equipment has been increased by the provision of a new vegetable steamer.

(Signed)

EDWARD B. SHERLOCK,

*Acting Medical Superintendent.*

ANNUAL REPORT, STATISTICAL COMMITTEE, 1906. R.-ASYLUM STATISTICS.—TABLE I.—Admissions, Re-admissions, Discharges, and Deaths during the Year ended 31st December, 1906.

Table I: Admissions, Re-admissions, Discharges, and Deaths during the Year ended 31st December, 1906. Columns include: TOOTING BEC ASYLUM, RECEIVING HOME FOR CHILDREN, LEAVESDEN ASYLUM, CATERHAM ASYLUM, DARENTH ASYLUM, BELMONT ASYLUM, and SUMMARY. Rows include: In the asylums, 1st January, 1906; Cases admitted (First, Not first); Total cases admitted during the year; Total cases under care during the year; Cases discharged (Not issued, Recovered, Relieved, Not improved, To other asylums, Died); Total cases discharged and died during the year; Remaining in the asylums, 31st Dec., 1906; Average number resident during the year; Persons under care during the year; Persons admitted; Persons recovered; Transferred from other asylums; Transferred to other asylums; Transferred to other asylums not under the Board.

Persons, i.e., separate persons in contractions in "cases," which may include the same individual more than once. \* Includes 1 not issued. † Includes 1 not issued. ‡ Included in first admission. § Included with not improved cases.

TABLE II.—Admissions, Re-admissions, Discharges, and Deaths from the Opening of the Asylums to the 31st December, 1906.

Table II: Admissions, Re-admissions, Discharges, and Deaths from the Opening of the Asylums to the 31st December, 1906. Columns include: TOOTING BEC ASYLUM, RECEIVING HOME FOR CHILDREN, LEAVESDEN ASYLUM, CATERHAM ASYLUM, DARENTH ASYLUM, BELMONT ASYLUM, ROCHESTER HOUSE ASYLUM, GORE FARM (Temporary) ASYLUM, and SUMMARY. Rows include: Persons admitted during the period of 36 years and 94 days; Re-admissions; Admissions from other asylums; Total cases admitted; Discharged cases (Not issued, Recovered, Relieved, Not improved, To other asylums, Died); Total cases discharged and died since opening of the asylum; Remaining 31st December, 1906; Average number resident during the 36 years and 94 days; Persons admitted; Persons recovered; Transferred from other asylums; Transferred to other asylums; Transferred to other asylums not under the Board.

\* Does include a few cases which have occurred since the opening of the asylums. † Included in the admissions. ‡ Included with the not improved cases. § Information prior to 1890 not obtainable. ¶ Information prior to 1890 not obtainable. N.B.—From April 1876, 1877, at Doncaster, 1878, at York Western Hospital (disagreed) was used as an asylum for females, and during that period 1,591 patients were admitted direct from the several parishes and unions, as well as from the other asylums of the Board; 222 patients (92 males and 130 females) died, and the remainder were discharged or transferred to the asylums at Leavesden and Caterham. On April 25th, 1881, an asylum was opened temporarily at Clapton, where patients were received during the building of Darroch 36th-40th, which were opened in November, 1884. Darroch asylum was opened on 4th May, 1880.

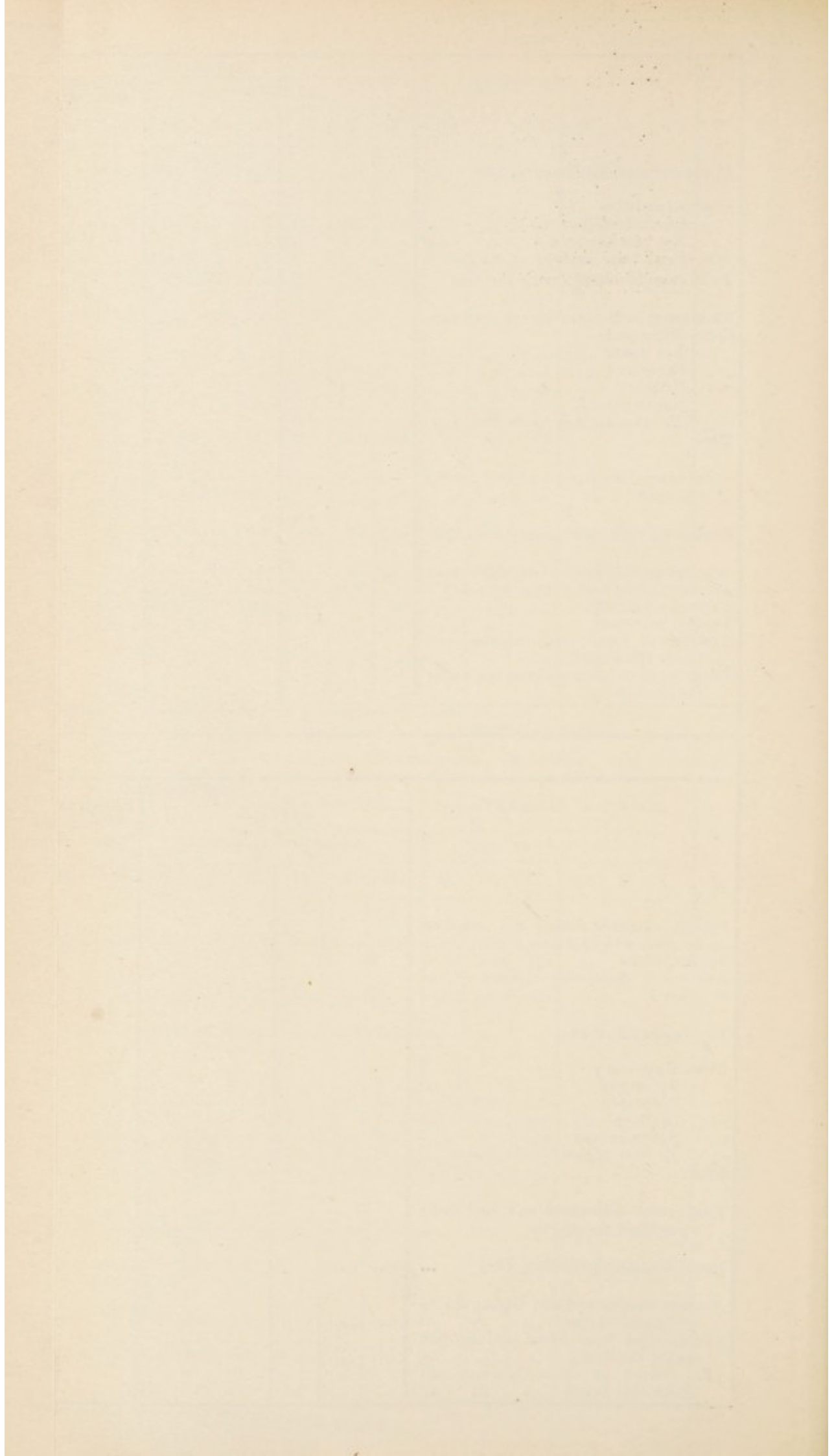






TABLE IA.—Showing (1) the previous attacks among persons admitted during 1906,

	TOOTING BEC						LEAVESDEN ASYLUM.		
	ASYLUM.			RECEIVING HOME FOR CHILDREN.					
	PERSONS.			PERSONS.			PERSONS.		
(1) Number of previous attacks.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Have had 1 attack ...	203	251	454	90	68	158	1	1	2
"  "  2 attacks ...	14	10	24	...	...	...	...	1	1
"  "  3  "  " ...	4	2	6	...	...	...	...	...	...
"  "  4  "  " ...	2	...	2	...	...	...	...	...	...
"  "  5  "  " ...	...	...	...	...	...	...	...	...	...
"  "  6  "  " ...	...	...	...	...	...	...	...	...	...
Unknown ...	78	62	140	...	...	...	...	...	...

	In this Asylum.			In any Asylum.			In this Asylum.			In any Asylum.			In this Asylum.			In any Asylum.		
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Once ...	...	2	2	...	...	...	...	...	...	...	...	...	...	...	1	1	2	
Twice ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
3 times ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
4  "  "  "  " ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
5  "  "  "  " ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
6  "  "  "  " ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Unknown ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	

TABLE IIA.—Admissions and recoveries of persons\* from the opening

	TOOTING BEC						LEAVESDEN ASYLUM.		
	ASYLUM.			RECEIVING HOME FOR CHILDREN.					
	Opened 19th Jan., 1903.			Opened 22nd Oct., 1904.			Opened 9th Oct., 1870		
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Persons* admitted direct during 36 years and 94 days ...	1,257	1,396	2,653	195	155	350	4,481	4,314	8,795
Persons admitted from other Asylums of the Board during the same period ...	93	122	215	...	...	...	577	675	1,252
Persons discharged during the same period ...	15	17	32	2	1	3	263	150	413
Of whom were re-admitted relapsed† ...	1	2	3	...	...	...	Insufficient data obtainable, hence impossible to give reliable figures.		
Recovered persons who have not relapsed ...	14	15	29	2	1	3			
Relapsed persons discharged recovered‡ ...	...	...	...	1	1	2			
Net recovered persons§	12	14	26	1	...	1			

\* 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  
 § i.e., recovered

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

CATERHAM ASYLUM.			DARENTH ASYLUM.			SUMMARY.		
PERSONS.			PERSONS.			PERSONS.		
M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
5	14	19	...	..	...	299	334	633
...	...	...	...	...	...	14	11	25
...	...	...	...	...	...	4	2	6
...	...	...	...	...	...	2	...	2
...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	78	62	140

In this Asylum.			In any Asylum.			In this Asylum.			In any Asylum.		
M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.
...	...	...	...	...	...	...	2	2	5	1	6
...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...	...	...	...

of the asylums to the 31st December, 1906 (36 years and 94 days).

CATERHAM ASYLUM.			DARENTH ASYLUM.			BELMONT ASYLUM.			ROCHESTER HOUSE ASYLUM.			GORE FARM (Temporary) ASYLUM.			SUMMARY.		
Opened 29th Sept., 1870.			Opened Nov., 1878.			Opened 5th July, 1905.			Opened 1st Aug., 1901. Closed 24th June, 1905.			Opened 15th Aug., 1904. Closed 5th July, 1905.					
M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
4,405	4,050	8,455	Insufficient data obtainable, hence impossible to give reliable figures.	...	...	...	...	...	...	...	...	...	...	...	10,714	9,915	20,629
413	492	905		376	...	376	...	...	...	231	51	282	1,314	1,340	2,654		
270	195	465		...	...	...	...	...	...	...	...	...	550	363	913		
Insufficient data obtainable, hence impossible to give reliable figures.				...	...	...	...	...	...	...	...	...	1	2	3		
				...	...	...	...	...	...	...	...	...	16	16	32		
				...	...	...	...	...	...	...	...	...	1	1	2		
			...	...	...	...	...	...	...	...	...	13	14	27			

more than once. † i.e., persons who have relapsed one or more times.  
 persons, sane at the present time so far as the asylums statistics show. \* Not insane.

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.
<b>TOOTING BEC ASYLUM.</b>																					
1903 ... ..	419	509	928	80	100	180	499	609	1,108	2	2	4	...	...	...	5	12	17	101	132	233
1904 ... ..	280	300	580	...	2	2	280	302	582	6	6	12	...	...	...	3	16	19	208	193	401
1905 ... ..	260	268	528	13	19	32	273	287	560	1	3	4	2	5	7	8	17	25	157	152	309
1906 ... ..	361	324	625	...	1	1	301	325	626	†6	6	12	2	1	3	4	8	12	222	128	350
<b>TOOTING BEC RECEIVING HOME FOR CHILDREN.</b>																					
1904 ... ..	15	20	35	...	...	...	15	20	35	...	...	...	...	...	...	...	...	...	8	6	14
1905 ... ..	91	67	158	...	...	...	91	67	158	...	1	1	...	1	1	3	1	4	76	63	139
1906 ... ..	90	68	158	...	...	...	90	68	158	†2	...	2	...	...	...	4	...	4	88	76	164
<b>LEAVESDEN ASYLUM.</b>																					
1897 ... ..	145	103	248	...	...	...	145	103	248	15	...	15	8	6	14	16	10	26	...	...	...
1898 ... ..	119	135	254	...	...	...	119	135	254	20	11	31	5	6	11	17	16	33	...	...	...
1899 ... ..	184	135	319	12	11	23	196	146	342	12	5	17	25	5	30	26	18	44	...	...	...
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
1902 ... ..	80	91	171	5	...	5	85	91	176	2	1	3	2	...	2	18	16	34	2	1	3
1903 ... ..	18	12	30	50	63	113	68	75	143	1	2	3	6	4	10	6	7	13	...	...	...
1904 ... ..	...	...	...	101	104	205	101	104	205	1	4	5	4	2	6	5	15	20	...	...	...
1905 ... ..	...	...	...	94	118	212	94	118	212	3	10	13	8	12	20	16	22	38	5	3	8
1906 ... ..	10	9	19	88	78	166	98	87	185	...	...	...	10	3	13	14	11	25	...	1	1
<b>CATERHAM ASYLUM.</b>																					
1897 ... ..	84	58	142	...	...	...	84	58	142	1	4	5	5	...	5	8	5	13	...	...	...
1898 ... ..	80	120	200	...	...	...	80	120	200	7	3	10	2	4	6	4	8	12	...	...	...
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
1902 ... ..	67	58	125	1	1	2	68	59	127	2	...	2	2	2	4	5	6	11	...	...	...
1903 ... ..	15	12	27	111	86	197	126	98	224	...	2	2	1	4	5	8	1	9	48	12	60
1904 ... ..	...	...	...	53	64	117	53	64	117	1	...	1	1	2	3	5	3	8	...	...	...
1905 ... ..	...	...	...	62	94	156	62	94	156	4	1	5	8	1	9	6	3	9	9	...	9
1906 ... ..	25	47	72	57	42	99	82	89	171	2	...	2	5	1	6	8	2	10	...	1	1
<b>DARENTH ASYLUM.</b>																					
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
1902 ... ..	99	58	157	9	4	13	108	62	170	...	1	1	6	1	7	3	2	5	69	10	79
1903 ... ..	136	104	240	40	27	67	176	131	307	5	1	6	3	5	8	3	2	5	129	128	257
1904 ... ..	97	55	152	75	42	117	172	97	269	1	...	1	8	5	13	3	2	5	217	53	270
1905 ... ..	...	...	...	194	172	366	194	172	366	...	...	...	5	...	5	4	5	9	97	96	193
1906 ... ..	...	...	...	200	94	294	200	94	294	1	...	1	4	1	5	10	11	21	157	9	166

\* Including transfers from asylums not under Board

† Including transfers to asylums not under Board.

Proportion of Recoveries per cent. on the Admissions for the year 1896, 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.
68	52	120	323	411	734	263	353	616	0.40	0.30	0.36	25.85	14.73	19.48
79	91	170	307	407	714	321	409	730	2.14	1.99	2.06	24.61	22.25	23.29
97	103	200	315	414	729	316	414	730	0.37	1.04	0.71	30.69	24.88	27.39
00	135	235	282	461	743	311	447	758	1.67	1.84	1.76	32.15	30.20	31.00
...	...	...	7	14	21	7	12	19	...	...	...	...	...	...
2	1	3	17	14	31	11	11	22	...	1.48	.63	18.18	9.09	13.64
2	1	3	11	5	16	11	10	21	1.11	...	.63	18.18	10.00	14.28
00	84	184	900	1,099	1,999	895	1,095	1,990	10.3	0.0	6.0	11.1	7.6	9.2
92	102	194	885	1,099	1,984	889	1,097	1,986	16.8	8.1	12.2	10.3	9.3	9.8
21	129	250	897	1,088	1,985	869	1,083	1,952	6.1	3.4	5.0	13.9	11.9	12.8
37	173	310	813	992	1,805	863	1,042	1,905	2.6	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
60	74	134	812	955	1,767	815	953	1,768	2.4	1.1	1.7	7.3	7.7	7.5
64	67	131	803	950	1,753	805	947	1,752	1.5	2.7	2.1	7.9	7.1	7.5
82	76	158	812	957	1,769	806	945	1,751	1.0	3.8	2.4	10.2	8.0	9.0
65	61	126	809	967	1,776	812	964	1,776	3.2	8.5	6.1	8.0	6.3	7.1
65	62	127	818	977	1,795	819	963	1,782	...	...	...	7.9	6.4	7.1
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
63	48	111	882	1,047	1,929	885	1,045	1,930	3.0	...	1.6	7.1	4.6	5.7
64	62	126	887	1,064	1,951	888	1,038	1,926	...	2.0	0.9	7.2	6.0	6.5
52	83	135	881	1,040	1,921	882	1,049	1,931	1.9	...	0.9	5.9	7.9	7.0
66	84	150	850	1,045	1,895	875	1,049	1,924	6.5	1.0	3.2	7.5	8.0	7.8
72	94	166	845	1,036	1,881	840	1,037	1,877	2.4	...	1.2	8.6	9.1	8.8
43	34	77	1,085	936	2,021	1,065	934	1,999	1.0	5.6	3.2	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	...	0.8	0.4	3.79	3.92	3.85
38	31	69	1,072	913	1,985	1,070	916	1,986	3.5	...	1.7	3.55	3.39	3.47
32	42	74	1,070	919	1,989	1,070	916	1,986	...	1.6	0.6	2.99	4.58	3.72
37	41	78	1,069	873	1,942	1,057	880	1,937	2.8	0.8	2.0	3.50	4.66	4.03
57	30	87	955	880	1,835	1,033	912	1,945	0.6	...	0.4	5.52	3.29	4.47
52	31	83	991	920	1,911	993	911	1,904	...	...	...	5.24	3.13	4.36
28	43	71	991	950	1,941	993	939	1,932	0.5	...	0.34	2.82	4.58	3.67

‡ Includes "not insane" cases shown in Tables I. and II.

TABLE III. (contd).—Admissions, Discharges, and Deaths, with the Mean Annual Mortality as

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.
<b>BELMONT ASYLUM.</b>																					
1905 ... ..	...	...	...	251	...	251	251	...	251	...	...	...	...	...	...	...	...	...	...	...	...
1906 ... ..	...	...	...	183	...	183	183	...	183	...	...	...	...	...	...	1	...	1	61	...	61
<b>ROCHESTER HOUSE ASYLUM.</b>																					
1901 ... ..	...	...	...	41	54	95	41	54	95	...	...	...	...	...	...	...	...	...	1	...	...
1902 ... ..	...	...	...	65	10	75	65	10	75	...	...	...	...	...	...	...	...	...	10	4	1
1903 ... ..	...	...	...	24	15	39	24	15	39	...	...	...	3	2	5	...	...	...	27	19	4
1904 ... ..	...	3	...	32	...	32	35	...	35	...	...	...	1	...	1	...	...	...	39	1	4
1905 ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	83	50	13
<b>GORE FARM (Temporary) ASYLUM.</b>																					
1904 ... ..	...	...	...	211	51	262	211	51	262	...	...	...	...	...	...	...	...	...	...	10	1
1905 ... ..	...	...	...	20	...	20	20	...	20	...	...	...	...	...	...	1	...	1	207	39	24
<b>SUMMARY.</b>																					
1897 ... ..	305	217	522	24	33	57	305	217	522	15	9	24	33	19	52	34	20	54	24	33	5
1898 ... ..	260	289	549	19	25	44	260	289	549	25	12	37	15	13	28	40	34	74	19	25	4
1899 ... ..	298	228	526	26	21	47	298	228	526	15	9	24	31	8	39	40	32	72	26	21	4
1900 ... ..	175	209	384	48	70	118	175	209	384	10	8	18	14	6	20	24	27	51	48	70	11
1901 ... ..	218	219	437	43	55	98	218	219	437	5	1	6	1	3	4	15	21	36	43	55	9
1902 ... ..	246	207	453	80	15	95	246	207	453	4	2	6	10	3	13	26	24	50	81	15	9
1903 ... ..	588	637	1,225	305	291	596	588	637	1,225	8	7	15	13	15	28	22	22	44	305	291	59
1904 ... ..	395	375	770	472	263	735	395	375	770	9	10	19	14	9	23	16	36	52	472	263	73
1905 ... ..	351	335	686	634	403	1037	351	335	686	8	15	23	23	19	42	38	48	86	634	403	103
1906 ... ..	426	448	874	528	215	743	426	448	874	11	6	17	21	6	27	41	32	73	528	215	74

\* Including transfers from asylums not under Board.

† Including transfers to asylums not under Board.

‡ Average numbers resident for period during 19

Proportion of Recoveries, per cent. on the Admissions for the year 1896, 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.
3	...	3	248	...	218	214	...	\$214	...	...	...	1.4	...	1.4
67	...	67	302	...	302	262	...	262	...	...	...	25.6	...	25.6
...	...	...	40	54	94	...	...	...	...	...	...	...	...	...
1	...	1	94	60	154	83	58	141	...	...	...	1.20	...	.71
...	1	1	88	53	141	84	53	137	...	...	...	...	1.88	.73
...	1	1	83	51	134	83	40	123	...	...	...	...	2.5	0.82
..	1	1	...	...	...	56	43	\$99	...	...	...	..	2.32	1.01
2	2	4	209	39	248	180	19	199	...	...	...	1.1	10.5	2.0
21	...	21	...	...	...	209	2	\$211	...	...	...	10.05	...	9.95
209	190	399	2,914	3,085	5,999	2,891	3,092	5,983	4.92	4.15	4.60	7.23	6.14	6.68
202	216	418	2,892	3,099	5,991	2,953	3,087	6,040	9.62	4.15	6.74	6.84	6.99	6.92
214	217	431	2,890	3,061	5,951	2,874	3,069	5,943	5.03	3.95	4.56	7.44	7.07	7.25
235	284	519	2,782	2,945	5,727	2,836	2,995	5,831	5.71	3.83	4.69	8.25	9.48	8.90
170	172	342	2,809	2,967	5,776	2,769	2,919	5,688	2.29	0.46	1.37	6.14	5.86	6.01
156	164	320	2,857	2,981	5,838	2,853	2,972	5,825	1.63	0.97	1.32	5.47	5.52	5.49
233	223	456	3,170	3,351	6,521	3,097	3,271	6,368	1.36	1.10	1.22	7.52	6.82	7.16
272	283	555	3,254	3,388	6,642	3,312	3,385	6,697	2.28	2.67	2.47	8.21	8.36	8.29
306	281	587	3,230	3,360	6,590	3,245	3,370	6,615	2.28	4.47	3.35	9.43	8.34	8.87
334	335	669	3,249	3,429	6,678	3,236	3,396	6,632	2.12	1.34	1.72	10.32	9.86	10.09

; Includes "not insane" case shown in Tables I. and II. that the asylum was open (see Table II.).

TABLE IV.—History of the Annual Admissions since the opening of the Asylums, with the

(Table VIII. in

ADMITTED.										Of each year's admissions, discharged & died in 1906																
YEAR.	First Admissions.		Not first Admissions.		From other Asylums of the Board.		TOTAL.			*Re-covered.			Relieved.			Not Im-proved.			To other Asylums of the Board.			DIED.				
	M	F	M	F	M	F	M	F	G. TL.	M	F	TI	M	F	TI	M	F	TI	M	F	TI	M	F	T		
<b>TOOTING BEC ASYLUM.</b>																										
1903 .. ..	419	509	...	...	80	100	499	609	1,108	1	...	1	...	...	...	...	...	14	3	17	30	48	7			
1904 ... ..	279	300	1	...	...	2	280	302	582	...	1	1	...	...	...	...	...	6	1	7	17	19	8			
1905 ... ..	258	268	2	...	13	19	273	287	560	...	2	2	1	1	2	...	1	1	23	13	36	32	38	7		
1906 ... ..	301	319	...	5	...	1	301	325	626	5	3	8	1	...	1	4	7	11	179	111	290	21	30	6		
Totals ...	1,257	1,396	3	5	93	122	1,353	1,523	2,876	6	6	12	2	1	3	4	8	12	222	128	350	100	135	23		
<b>TOOTING BEC RECEIVING HOME FOR CHILDREN.</b>																										
1904 ... ..	15	20	...	...	...	...	15	20	35	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1		
1905 ... ..	91	67	...	...	...	...	91	67	158	...	...	...	...	...	1	...	1	11	12	23	2	...	...	...		
1906 ... ..	89	68	1	...	...	...	90	68	158	2	...	2	...	...	3	...	3	77	64	141	...	...	...	...		
Totals ..	195	155	1	...	...	...	196	155	351	2	...	2	...	...	4	...	4	88	76	164	2	1	...	...		
<b>LEAVESDEN ASYLUM.</b>																										
1870 part of ...	468	556	...	...	...	...	468	556	1,024	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	3	
1871 ... ..	520	545	...	...	...	...	520	545	1,065	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	
1872 ... ..	163	256	...	...	...	...	163	256	419	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1873 ... ..	141	165	...	...	41	30	182	195	377	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1874 ... ..	115	149	1	...	1	13	117	162	279	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1875 ... ..	111	108	1	1	...	...	112	109	221	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1876 ... ..	158	79	...	...	126	184	284	263	547	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	
1877 ... ..	95	...	...	...	1	4	96	4	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1878 ... ..	69	1	1	...	13	...	83	1	84	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1879 ... ..	80	89	...	...	...	...	80	89	169	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1880 ... ..	92	75	...	...	...	...	92	75	167	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1881 ... ..	85	71	4	1	...	...	89	72	161	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1882 ... ..	82	85	3	2	...	...	85	87	172	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1883 ... ..	75	106	5	1	...	...	80	107	187	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1884 ... ..	56	96	2	...	...	...	58	96	154	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	
1885 ... ..	71	97	2	...	...	...	73	97	170	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1886 ... ..	62	83	3	3	...	...	65	86	151	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1887 ... ..	80	92	2	...	...	...	82	92	174	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1888 ... ..	71	83	2	...	...	...	73	83	156	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	
1889 ... ..	140	121	2	1	...	...	142	122	264	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1890 ... ..	162	155	1	2	...	...	163	157	320	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1891 ... ..	176	148	3	2	...	...	179	150	329	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	2	
1892 ... ..	181	149	4	2	...	1	185	152	337	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1893 ... ..	156	95	4	...	...	...	160	95	255	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	
1894 ... ..	148	112	6	...	...	...	154	112	266	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1895 ... ..	125	125	1	2	...	...	126	127	253	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	2	
1896 ... ..	136	100	3	2	...	...	139	102	241	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	2	
1897 ... ..	143	102	2	1	...	...	145	103	248	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	3	
1898 ... ..	118	134	1	1	...	...	119	135	254	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	4	
1899 ... ..	182	134	2	1	12	11	196	146	342	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	4	
1900 ... ..	32	28	1	1	46	69	78	98	176	...	...	...	1	1	...	2	2	...	...	...	...	...	...	...	5	
1901 ... ..	80	65	1	...	...	...	81	65	146	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	
1902 ... ..	80	89	...	2	5	...	85	91	176	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	
1903 ... ..	18	12	...	...	50	63	68	75	143	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	3	
1904 ... ..	...	...	...	...	101	104	101	104	205	...	...	...	5	...	5	2	...	2	...	...	...	...	...	...	...	6
1905 ... ..	...	...	...	...	94	118	94	118	212	...	...	...	3	1	4	7	4	11	...	...	...	...	...	...	...	12
1906 ... ..	10	9	...	...	88	78	98	87	185	...	...	...	1	...	1	2	1	3	...	1	1	...	...	...	14	
Totals ...	4,481	4,314	56	25	578	675	5,115	5,014	10,129	...	...	...	10	3	13	14	11	25	...	1	1	65	62	13		



Discharges and Deaths, and the numbers of each year remaining on the 31st December, 1906. (reports previous to 1900.)

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.															Remaining of each year's Admissions 31st December, 1906.		
*Recovered.			Relieved.			Not Improved.			To other Asylums of the Board.			DIED.					
M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.
5	5	10	1	1	2	8	20	28	188	194	382	202	230	432	93	156	249
5	5	10	...	...	...	5	14	19	162	162	324	72	60	132	34	57	91
...	4	4	2	5	7	3	12	15	159	135	297	49	61	110	60	66	126
5	3	8	1	...	1	4	7	11	179	111	290	31	30	51	95	182	277
15	17	32	4	6	10	20	53	73	688	605	1,293	344	381	725	282	461	743
...	...	...	...	...	...	...	...	...	8	6	14	...	1	1	...	...	...
...	1	1	...	1	1	4	1	5	87	75	162	4	1	5	2	2	4
2	...	2	...	...	...	3	...	3	77	64	141	...	...	...	9	3	12
2	1	3	...	1	1	7	1	8	172	145	317	4	2	6	11	5	16
15	8	23	26	22	48	25	44	69	12	4	16	363	456	819	27	22	49
20	15	35	30	23	53	50	49	99	15	10	25	377	398	775	28	50	78
12	6	18	12	11	23	15	14	29	5	14	19	119	196	315	...	15	15
9	4	13	10	6	16	17	21	38	10	5	15	133	150	283	...	3	9
7	2	9	2	7	9	13	17	30	2	...	2	93	135	228	...	1	1
5	3	8	3	5	8	17	13	30	...	...	...	79	83	162	8	5	13
13	3	16	18	8	26	12	13	25	...	...	...	219	210	429	22	29	51
7	...	7	5	...	5	3	...	3	...	...	...	72	4	76	9	...	9
5	...	5	4	...	4	3	...	3	...	...	...	62	1	63	9	...	9
3	3	6	3	5	8	3	8	11	...	...	...	64	60	124	7	13	20
8	5	13	10	9	19	10	4	14	...	...	...	60	42	102	4	15	19
11	8	19	7	5	12	7	3	10	...	...	...	62	55	117	2	1	3
3	6	9	3	5	8	3	3	6	...	...	...	68	64	132	8	9	17
4	2	6	8	8	16	4	9	13	...	...	...	61	75	136	3	13	16
2	8	10	3	3	6	6	7	13	...	...	...	40	77	117	7	1	8
4	9	13	5	4	9	5	8	13	...	...	...	59	62	121	...	14	14
3	...	3	3	1	4	7	4	11	1	...	1	39	62	101	12	19	31
4	3	7	5	3	8	5	7	12	...	...	...	63	66	129	5	13	18
6	3	9	4	2	6	6	4	10	...	...	...	48	58	106	9	16	25
9	4	13	10	5	15	8	13	21	...	...	...	102	78	180	13	22	35
14	12	26	13	8	21	12	8	20	...	...	...	109	103	212	15	26	41
14	10	24	7	10	17	13	12	25	...	...	...	126	90	216	19	28	47
14	7	21	11	5	16	22	9	31	...	1	1	119	98	217	19	32	51
13	4	17	8	3	11	14	12	26	...	...	...	99	66	165	26	10	36
12	2	14	9	5	14	16	11	27	1	...	1	92	64	156	24	30	54
8	3	11	9	3	12	19	10	29	2	1	3	71	90	161	17	20	37
12	4	16	4	4	8	12	13	25	2	...	2	69	48	117	40	33	73
10	1	11	10	4	14	10	16	26	...	1	1	68	50	118	47	31	78
11	7	18	4	2	6	8	11	19	...	...	...	66	69	135	30	46	76
9	5	14	11	3	14	21	19	40	2	1	3	83	73	156	70	45	115
2	3	5	2	2	4	5	10	15	2	1	3	33	40	73	34	42	76
1	...	1	1	2	3	13	8	21	1	...	1	36	28	64	29	27	56
3	1	4	3	1	4	5	7	12	...	...	...	37	36	73	37	46	83
1	5	6	4	1	5	6	2	8	1	...	1	21	16	37	39	51	90
1	3	4	8	4	12	9	6	15	...	...	...	27	28	55	56	63	119
1	...	1	5	3	8	11	8	19	...	1	1	18	11	29	59	95	154
...	...	...	1	...	1	2	1	3	...	1	1	14	...	14	81	85	166
276	159	435	281	192	473	413	404	817	56	40	96	3,271	3,242	6,513	818	977	1,795

\* Includes the "not insane" cases shown in Table II.

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

YEAR.	ADMITTED.							Of each year's admissions, discharged & died in 1906.																	
	First Admissions.		Not First Admissions.		From other Asylums of the Board.		TOTAL.			*Re-covered.			Re-lieved.			Not Im-proved.			To other Asylums of the Board.			DIED.			
	M	F	M	F	M	F	M	F	Gd. TL.	M	F	TL.	M	F	TL.	M	F	TL.	M	F	TL.	M	F	TL.	
<b>CATERHAM ASYLUM.</b>																									
1870 part of ...	156	202	...	...	...	...	...	156	202	358	...	...	...	...	...	...	...	...	...	...	...	2	2	4	
1871 ...	664	870	...	...	...	...	...	664	870	1,534	...	...	...	...	...	...	...	...	...	...	...	2	4	6	
1872 ...	259	161	...	...	...	...	...	259	161	420	...	...	...	...	...	...	...	...	...	...	3	1	4		
1873 ...	183	167	1	...	...	...	...	184	167	351	...	...	...	...	...	...	...	...	...	...	...	2	2	2	
1874 ...	240	169	2	3	...	72	36	314	208	522	...	...	...	...	...	...	...	...	...	...	1	...	1		
1875 ...	158	180	...	...	...	...	...	158	180	338	...	...	...	...	...	...	...	...	...	...	1	...	1		
1876 ...	173	170	5	5	33	167	...	211	342	553	...	...	...	...	...	...	...	...	...	...	...	6	6		
1877 ...	178	56	2	...	...	1	...	180	57	237	...	...	...	...	...	...	...	...	...	...	2	...	2		
1878 ...	157	47	...	...	...	17	...	174	47	221	...	...	...	...	...	...	...	...	...	...	...	...	...		
1879 ...	176	84	...	...	...	6	...	182	84	266	...	...	...	...	...	...	...	...	...	...	3	2	5		
1880 ...	122	87	2	6	...	...	...	124	93	217	...	...	...	...	...	...	...	...	...	...	1	3	4		
1881 ...	122	105	...	...	...	...	...	122	105	227	...	...	...	...	...	...	...	...	...	...	1	...	1		
1882 ...	81	85	...	2	...	...	...	81	87	168	...	...	...	...	...	...	...	...	...	...	2	...	2		
1883 ...	73	37	3	3	...	...	...	76	40	116	...	...	...	...	...	...	...	...	...	...	1	...	1		
1884 ...	98	102	2	1	...	...	...	100	103	203	...	...	...	...	...	...	...	...	...	...	2	1	3		
1885 ...	59	48	3	3	...	...	...	62	51	113	...	...	...	...	...	...	...	...	...	...	...	2	2		
1886 ...	115	91	3	1	...	...	...	118	92	210	...	...	...	...	...	...	...	...	...	...	1	2	3		
1887 ...	103	90	2	1	...	...	...	105	91	196	...	...	...	...	...	...	...	...	...	...	...	2	2		
1888 ...	83	81	...	...	...	...	...	83	81	164	...	...	...	...	...	...	...	...	...	...	1	1	2		
1889 ...	92	78	...	1	...	...	...	92	79	171	...	...	...	...	...	...	...	...	...	...	...	...	...		
1890 ...	119	122	2	1	...	...	...	121	123	244	...	...	...	1	1	2	...	...	...	...	1	2	3		
1891 ...	104	108	...	...	...	...	...	104	108	212	...	...	1	1	...	...	...	...	...	...	3	4	7		
1892 ...	101	114	2	1	...	...	...	103	115	218	...	...	...	...	...	...	...	...	...	...	4	2	6		
1893 ...	86	76	...	...	...	...	...	86	76	162	...	...	...	...	...	...	...	...	...	...	2	1	3		
1894 ...	100	112	2	1	...	...	...	102	113	215	...	...	...	...	...	...	...	...	...	...	1	3	4		
1895 ...	85	75	...	1	...	...	...	85	76	161	...	...	...	...	...	...	...	...	...	...	3	3	6		
1896 ...	83	59	1	...	1	...	...	85	59	144	...	...	1	1	...	...	...	...	...	...	1	2	3		
1897 ...	84	58	...	...	...	...	...	84	58	142	...	...	...	1	1	...	...	...	...	...	1	2	3		
1898 ...	77	119	3	1	...	...	...	80	120	200	...	...	...	...	1	...	...	...	...	...	1	4	5		
1899 ...	73	67	3	1	...	...	...	76	68	144	...	...	...	...	...	...	...	...	...	...	2	3	5		
1900 ...	41	49	...	2	...	...	...	41	51	92	...	...	...	...	...	...	...	...	...	...	2	3	5		
1901 ...	54	64	...	...	...	1	...	54	65	119	...	...	...	...	...	...	...	...	...	...	3	...	3		
1902 ...	66	58	1	...	1	1	...	68	59	127	1	1	...	1	1	...	...	...	...	...	1	5	6		
1903 ...	15	12	...	...	111	86	...	126	98	224	...	...	...	...	1	1	...	...	...	...	8	4	12		
1904 ...	...	...	...	...	53	64	...	53	64	117	...	...	...	...	1	1	...	...	...	...	5	10	15		
1905 ...	...	...	...	...	62	94	...	62	94	156	...	...	...	...	...	...	...	...	...	...	5	14	19		
1906 ...	25	47	...	...	57	42	...	82	89	171	1	1	3	1	4	4	4	...	...	...	6	6	12		
Total ...	4,405	4,050	39	34	413	492	4,857	4,576	9,433	2	2	5	1	6	8	2	10	...	...	...	72	94	166		
<b>DARENTH ASYLUM.</b>																									
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 ...	91	64	1	1	...	...	92	65	157	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1880 ...	75	228	...	1	25	54	100	283	383	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	
1881 ...	66	63	1	2	...	13	67	78	145	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1882 ...	240	241	...	2	78	17	318	260	578	...	...	...	...	...	...	...	...	6	6	1	...	...	...	...	
1883 ...	194	234	1	2	6	8	201	244	445	...	...	...	...	...	...	...	...	...	2	2	...	...	...	...	
1884 ...	115	93	4	2	...	...	119	95	214	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1885 ...	86	81	3	1	22	30	111	112	223	...	...	...	...	...	...	...	...	2	2	...	...	...	...	...	
1886 ...	107	94	5	3	26	8	132	105	237	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	
1887 ...	124	96	1	5	12	69	137	170	307	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1888 ...	121	108	2	2	145	86	268	196	464	...	...	...	...	...	...	...	...	4	4	...	...	...	...	...	
1889 ...	219	171	3	4	26	9	248	184	432	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	
1890 ...	167	144	3	4	52	42	222	190	412	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	
1891 ...	163	156	4	...	...	...	167	156	323	...	...	...	...	...	...	...	...	3	1	4	...	...	...	...	
1892 ...	99	76	2	2	11	31	112	109	221	...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	
1893 ...	86	92	2	3	45	44	133	139	272	...	...	...	...	...	...	...	...	9	1	10	...	...	...	...	
1894 ...	75	117	2	...	38	13	115	130	245	...	...	...	...	...	...	...	...	10	1	11	1	1	1	1	
1895 ...	95	75	1	1	26	46	122	122	244	...	...	...	...	...	...	...	...	4	4	4	4	3	...	...	
1896 ...	82	56	1	1	27	29	110	86	196	...	...	...	...	...	...	...	...	6	6	1	4	4	...	...	
1897 ...	76	55	...	1	24	33	100	89	189	...	...	...	...	...	...	...	...	4	1	5	1	2	...	...	
1898 ...	61	33	...	1	19	25	80	59	139	...	...	...	...	...	...	...	...	3	3	...	...	...	...	...	
1899 ...	36	25	2	...	14	10	52	35	87	...	...	1	1	...	...	...	...	2	2	...	...	...	...	...	
1900 ...	97	127	5	2	2	1	104	130	234	...	...	...	...	...	...	...	...	3	3	...	...	...	...	...	
1901 ...	82	90	1	...	2	...	85	90	175	...	...	...	...	...	...	...	...	4	4	3	4	4	...	...	
1902 ...	99	58	...	...	9	4	108	62	170	...	...	...	...	...	...	...	...	5	1	6	4	2	...	...	
1903 ...	135	104	1	...	40	27	176	131	307	...	...	...	...	1	1	7	...	7	7	1	3	...	...		
1904 ...	97	55	...	...	75	42	172	97	269	...	...	...	...	...	1	6	...	6	6	2	1	...	...		
1905 ...	...	...	...	...	194	172	194	172	366	...	...	1	1	6	5	11	12	...	12	5	5	...	...		
1906 ...	...	...	...	...	200	94	200	94	294	1	1	2	1	3	2	6	8	64	64	4	1	...	...		
TOTALS ...	3,086	2,845	65	55	1,268	1,035	4,419	3,935	8,354	1	1	4	1	5	10	11	21	157	9	166	28	43	7		

† See footnote, Table II.

the Discharges and Deaths, and the numbers of each year remaining on the 31st December, 1906. (Reports previous to 1900.)

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.															Remaining of each year's Admissions 31st December, 1906		
Recovered.			Relieved.			Not Improved.			To other Asylums of the Board.			DIED			M	F	TL.
M	F	TL.	M	F	TL.	M	F	TL.	M	F	TL.	M	F	TL.	M	F	TL.
4	4	8	7	13	20	6	7	13	3	1	4	120	156	276	16	21	37
47	31	78	50	30	80	48	36	84	19	6	25	401	710	1,201	9	57	66
24	12	36	24	10	34	11	9	20	16	11	27	178	116	294	6	3	9
19	10	29	19	6	25	13	19	32	12	8	20	113	119	232	8	5	13
18	24	42	30	13	43	2	...	2	36	18	54	213	131	344	15	22	37
13	11	24	10	8	18	9	8	17	1	3	4	118	130	248	7	20	27
2	11	13	21	13	34	5	9	14	...	...	...	152	272	424	31	37	68
...	...	...	14	4	18	5	3	8	1	...	1	137	42	179	23	8	31
5	3	8	11	1	12	4	5	9	2	...	2	130	29	159	22	9	31
6	4	10	9	4	13	13	1	14	1	...	1	136	53	189	17	22	39
7	4	11	11	7	18	8	7	15	...	...	...	83	64	147	15	11	26
3	2	5	6	5	11	10	4	14	...	...	...	82	77	159	21	17	38
9	11	20	5	5	10	2	4	6	...	...	...	50	58	108	15	9	24
11	4	15	4	3	7	3	1	4	...	1	1	44	24	68	14	7	21
7	12	19	9	11	20	6	5	11	2	...	2	65	61	126	11	14	25
2	2	4	1	1	2	1	5	2	7	1	...	43	38	81	11	8	19
12	5	17	7	6	13	11	4	15	...	...	...	71	56	127	17	21	38
7	4	11	7	2	9	7	6	13	2	...	2	60	56	116	22	23	45
5	5	10	6	...	6	4	6	10	...	...	...	54	54	108	14	16	30
9	3	12	4	4	8	4	10	14	2	...	2	61	44	105	12	18	30
8	7	15	4	3	7	10	6	16	1	...	1	70	73	143	28	34	62
6	2	8	2	2	4	5	5	10	1	...	1	64	69	133	26	30	56
3	2	5	1	1	2	6	11	17	3	...	3	61	62	123	29	39	68
8	3	11	3	5	8	9	5	14	1	...	1	51	41	92	14	22	36
6	1	7	6	3	9	4	5	9	1	...	1	57	65	122	28	39	67
4	4	8	4	3	7	8	5	13	3	...	3	43	37	80	23	27	50
3	3	6	4	1	5	5	5	10	2	...	2	45	27	72	26	23	49
5	2	7	3	1	4	10	1	11	2	...	2	42	29	71	22	25	47
2	3	5	6	7	13	6	11	17	...	...	...	34	42	76	32	57	89
10	2	12	3	3	6	2	7	9	2	...	3	35	22	57	24	33	57
2	4	6	...	...	...	...	1	1	1	...	1	21	21	42	17	25	42
1	...	1	1	3	4	2	4	6	4	...	4	24	19	43	22	39	61
2	1	3	3	...	3	1	1	5	25	12	37	26	21	47	8	24	32
1	...	1	...	...	...	3	1	4	...	...	...	26	19	45	36	78	174
2	1	3	1	1	2	3	1	4	1	...	1	15	21	36	31	40	71
2	...	2	2	...	2	2	...	2	...	...	...	11	22	33	45	72	117
1	...	1	3	1	4	4	...	4	...	1	1	6	6	12	68	81	149
276	197	473	300	180	480	259	215	474	145	62	207	3,032	2,886	5,918	845	1,036	1,881
5	2	7	7	19	26	41	16	57	102	82	184	58	45	103	...	...	...
3	2	5	11	...	11	4	10	14	37	17	54	21	15	36	...	...	...
...	3	3	4	4	8	2	...	2	14	9	23	12	8	20	...	...	...
1	...	1	9	2	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	43	49	92	37	106	203	...	15	15
3	7	10	9	12	21	5	3	8	26	20	46	24	35	59	...	1	1
12	10	22	23	20	43	23	24	47	68	36	104	179	145	324	13	25	38
9	13	22	25	25	50	17	15	32	60	53	113	90	128	218	...	10	10
8	5	13	15	11	26	11	9	20	29	17	46	56	53	109	...	...	...
6	4	10	18	11	29	8	5	13	38	26	64	41	59	100	...	7	7
...	...	...	23	19	42	4	13	17	42	21	63	52	43	95	11	9	20
1	1	2	21	6	27	14	12	26	27	77	104	62	59	121	12	15	27
3	...	3	16	15	31	21	17	38	108	68	176	75	67	142	45	29	74
8	4	12	25	21	46	29	14	43	61	52	113	100	78	178	25	15	40
4	1	5	12	11	23	29	17	46	62	74	136	71	71	142	44	16	60
9	16	25	12	7	19	18	6	24	44	47	91	71	76	147	13	4	17
1	2	3	14	4	18	7	6	13	27	28	55	44	45	89	19	24	43
1	2	3	7	2	9	7	7	14	56	47	103	43	37	86	19	44	63
3	3	6	8	4	12	8	7	15	48	39	87	36	45	81	12	32	44
1	3	4	5	11	16	3	5	8	47	29	76	30	31	61	36	43	79
...	...	...	2	7	9	1	...	1	53	13	66	26	26	52	28	40	68
1	5	6	6	5	11	4	6	10	40	20	60	17	17	34	32	36	68
...	...	...	5	4	9	8	...	8	26	17	43	10	6	16	31	32	63
...	...	...	4	1	5	1	...	1	23	13	36	8	5	13	16	16	32
4	2	6	2	2	4	3	7	10	41	35	76	23	34	57	31	50	81
1	...	1	1	1	2	3	1	4	41	26	67	12	19	31	27	43	70
...	1	1	3	2	5	...	1	1	32	17	49	20	8	28	53	33	86
4	...	4	10	3	13	3	2	5	17	13	30	20	16	36	122	97	219
...	...	...	2	2	4	3	1	4	43	17	60	12	5	17	112	72	184
...	...	...	1	1	9	7	16	12	12	1	13	9	8	17	163	156	319
1	...	1	2	1	3	2	6	8	64	...	64	4	1	5	127	86	213
98	95	193	319	259	578	303	244	547	1,402	1,007	2,409	1,306	1,380	2,686	991	950	1,941

\* Includes the "not insane" cases shown on Tables I. and II.

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

YEAR.	ADMITTED.									Of each year's admissions, discharged & died in 1906.														
	First Admissions.		Not First Admissions.		From other Asylums of the Board.		TOTAL.			*Re-covered.			Re-lieved.			Not im-proved.			To other Asylums of the Board.			DIED.		
	M	F	M	F	M	F	M	F	Gd. Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.
<b>BELMONT ASYLUM,</b>																								
1905 ... ..	...	...	...	...	251	...	251	...	251	...	...	...	...	...	...	...	...	...	48	...	48	50	50	
1906 ... ..	...	...	...	...	183	...	183	...	183	...	...	...	...	...	1	...	1	13	...	13	17	...	17	
TOTALS ... ..	...	...	...	...	434	...	434	...	434	...	...	...	...	...	1	...	1	61	...	61	67	...	67	
<b>ROCHESTER HOUSE ASYLUM.</b>																								
1901 ... ..	...	...	...	...	41	54	41	54	95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1902 ... ..	...	...	...	...	65	10	65	10	75	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1903 ... ..	...	...	...	...	24	15	24	15	39	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1904 ... ..	3	...	...	...	32	...	35	...	35	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1905 ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
TOTALS ... ..	3	...	...	...	162	79	165	79	244	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
<b>GORE FARM (Temporary) ASYLUM.</b>																								
1904 ... ..	...	...	...	...	211	51	211	51	262	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1905 ... ..	...	...	...	...	20	...	20	...	20	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
TOTALS ... ..	...	...	...	...	231	51	231	51	282	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
<b>SUMMARY.</b>																								
1870 (part of)...	624	758	...	...	...	...	624	758	1,382	...	...	...	...	...	...	...	...	...	...	...	3	5	8	
1871 ... ..	1,184	1,415	...	...	...	...	1,184	1,415	2,599	...	...	...	...	...	...	...	...	...	...	...	4	4	8	
1872 ... ..	422	417	...	...	...	...	422	417	839	...	...	...	...	...	...	...	...	...	...	...	3	1	4	
1873 ... ..	324	332	1	...	41	30	325	332	657	...	...	...	...	...	...	...	...	...	...	...	...	2	2	
1874 ... ..	355	318	3	3	73	49	358	321	679	...	...	...	...	...	...	...	...	...	...	...	1	1	2	
1875 ... ..	316	322	12	7	155	124	328	329	657	...	...	...	...	...	...	...	...	...	...	...	2	...	2	
1876 ... ..	400	285	12	9	159	355	412	294	706	...	...	...	...	...	...	...	...	...	...	...	...	9	9	
1877 ... ..	305	79	2	1	1	5	307	80	387	...	...	...	...	...	...	...	...	...	...	...	3	...	3	
1878 ... ..	276	64	3	4	31	...	279	68	347	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
1879 ... ..	347	237	1	1	6	...	348	238	586	...	...	...	...	...	...	...	...	...	...	...	4	2	6	
1880 ... ..	289	390	2	7	25	54	291	397	688	...	...	...	...	...	...	...	...	...	...	1	1	1	5	
1881 ... ..	273	239	5	3	...	13	278	242	520	...	...	...	...	...	...	...	...	...	...	1	1	1	4	
1882 ... ..	403	411	3	6	78	17	406	417	823	...	...	...	...	...	...	...	...	6	6	3	...	3	3	
1883 ... ..	342	377	9	6	6	8	351	383	734	...	...	...	...	...	...	...	...	...	2	2	2	2	4	
1884 ... ..	269	291	8	3	...	...	277	294	571	...	...	...	...	...	...	...	...	...	2	2	2	1	3	
1885 ... ..	216	226	8	4	22	30	224	230	454	...	...	...	...	...	...	...	...	...	...	...	...	4	4	
1886 ... ..	284	268	11	7	20	8	295	275	570	...	...	...	...	...	...	...	...	...	1	...	1	3	4	
1887 ... ..	307	278	5	6	12	69	312	284	596	...	...	...	...	...	...	...	...	...	...	...	...	3	3	
1888 ... ..	275	272	4	2	145	86	279	274	553	...	...	...	...	...	...	...	...	...	...	...	...	1	2	
1889 ... ..	451	370	5	6	26	9	456	376	832	...	...	...	...	...	...	...	...	...	1	1	1	1	3	
1890 ... ..	448	421	6	7	52	42	454	428	882	...	...	...	...	...	...	...	...	...	...	...	...	1	2	
1891 ... ..	443	412	7	2	...	...	450	414	864	...	...	...	...	...	...	...	...	...	...	...	3	4	10	
1892 ... ..	381	339	8	5	11	32	389	344	733	...	...	...	...	...	...	...	...	...	...	...	1	5	9	
1893 ... ..	328	263	6	3	45	44	334	266	600	...	...	...	...	...	...	...	...	...	...	...	...	2	5	
1894 ... ..	323	341	10	1	38	13	333	342	675	...	...	...	...	...	...	...	...	...	...	...	10	11	7	
1895 ... ..	305	275	2	4	26	46	307	279	586	...	...	...	...	...	...	...	...	...	...	...	...	9	17	
1896 ... ..	301	215	5	3	28	29	306	218	524	...	...	...	...	...	...	...	...	...	...	...	4	6	10	
1897 ... ..	303	215	2	2	24	33	305	217	522	...	...	...	...	...	...	...	...	...	...	...	6	4	10	
1898 ... ..	256	286	4	3	19	25	260	289	549	...	...	...	...	...	...	...	...	...	...	...	5	2	7	
1899 ... ..	291	226	7	2	26	21	298	228	526	...	...	...	...	...	...	...	...	...	...	...	3	5	13	
1900 ... ..	170	204	5	5	48	70	175	209	384	...	...	...	...	...	...	...	...	...	...	...	2	6	13	
1901 ... ..	216	219	2	...	43	55	218	219	437	...	...	...	...	...	...	...	...	...	...	...	3	7	15	
1902 ... ..	245	205	1	2	80	15	246	207	453	...	...	...	...	...	...	...	...	...	...	...	4	7	13	
1903 ... ..	587	637	1	...	365	291	588	637	1,225	...	...	...	...	...	...	...	...	...	...	...	5	12	18	
1904 ... ..	394	375	1	...	472	263	395	375	770	...	...	...	...	...	...	...	...	...	...	...	21	39	72	
1905 ... ..	349	335	2	...	634	403	351	335	686	...	...	...	...	...	...	...	...	...	...	...	24	106	173	
1906 ... ..	425	443	1	5	528	215	426	448	874	9	3	12	7	2	9	16	14	30	133	177	510	62	99	
TOTALS ... ..	13,427	12,700	164	119	5,179	2,454	13,591	12,879	26,470	11	6	17	21	6	27	41	32	73	528	215	743	334	335	689

Discharges and Deaths, and the numbers of each year remaining on the 31st December, 1906. reports previous to 1900.)

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS.															Remaining of each year's Admissions 31st December, 1906.		
*Recovered.			Relieved.			Not Improved.			To other Asylums of the Board.			DIED.					
M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.	M	F	Tl.
...	...	...	...	...	...	...	...	...	48	...	48	53	...	53	150	...	150
...	...	...	...	...	...	1	...	1	13	...	13	17	...	17	152	...	152
...	...	...	...	...	...	1	...	1	61	...	61	70	...	70	302	...	302
...	...	...	...	2	2	...	...	...	41	51	92	...	1	1	...	...	...
...	...	...	4	...	4	...	...	...	60	10	70	1	...	1	...	...	...
...	...	...	...	...	...	...	...	...	24	13	37	...	2	2	...	...	...
...	...	...	...	...	...	...	...	...	35	...	35	...	...	...	...	...	...
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
...	...	...	4	2	6	...	...	...	160	74	234	1	3	4	...	...	...
...	...	...	...	...	...	1	...	1	188	49	237	22	2	24	...	...	...
...	...	...	...	...	...	...	...	...	19	...	19	1	...	1	...	...	...
...	...	...	...	...	...	1	...	1	207	49	256	23	2	25	...	...	...
19	12	31	33	35	68	31	51	82	15	5	20	483	612	1,095	43	43	86
67	46	113	80	53	133	98	85	183	34	16	50	868	1,108	1,976	37	107	144
36	18	54	36	21	57	26	23	49	21	25	46	297	312	609	6	18	24
28	14	42	29	12	41	30	40	70	22	13	35	246	269	515	11	14	25
25	26	51	32	20	52	15	17	32	38	18	56	306	266	572	15	23	38
23	16	39	20	32	52	67	37	104	103	85	188	255	258	513	15	25	40
18	16	34	50	21	71	21	32	53	37	17	54	392	497	889	53	66	119
7	3	10	23	8	31	10	3	13	15	9	24	221	54	275	32	8	40
11	3	14	24	3	27	11	6	17	29	14	43	204	33	237	31	9	40
12	10	22	19	15	34	23	9	32	45	30	75	231	139	370	24	35	59
21	15	36	31	37	68	22	37	59	43	49	92	180	272	452	19	41	60
17	17	34	22	22	44	22	10	32	26	20	46	168	167	335	23	19	42
24	27	51	31	30	61	28	31	59	68	36	104	297	267	564	36	43	79
24	19	43	37	36	73	24	25	49	60	54	114	195	227	422	17	30	47
17	25	42	27	25	52	23	21	44	31	17	48	161	191	352	18	15	33
12	15	27	23	16	39	18	15	33	39	26	65	143	159	302	11	29	40
15	5	20	33	26	59	22	21	43	43	21	64	162	161	323	40	49	89
12	8	20	33	11	44	26	25	51	29	77	106	185	181	366	39	51	90
14	8	22	26	17	43	31	27	58	108	68	176	177	179	356	68	61	129
26	11	37	39	30	69	41	37	78	63	52	115	263	200	463	50	55	105
26	20	46	29	22	51	51	31	82	63	74	137	250	247	497	87	76	163
29	28	57	21	19	40	36	23	59	45	47	92	261	235	496	58	62	120
18	11	29	26	10	36	35	26	61	30	29	59	224	205	429	67	95	162
22	9	31	18	10	28	30	24	54	54	47	101	193	144	337	59	76	135
21	6	27	23	12	35	28	23	51	50	39	89	185	174	359	64	101	165
13	10	23	18	17	35	30	20	50	52	30	82	144	158	302	76	90	166
15	7	22	10	12	22	18	18	36	57	13	70	140	101	241	94	96	190
16	8	24	19	10	29	24	23	47	42	21	63	127	96	223	101	92	193
13	10	23	15	13	28	22	22	44	26	17	43	110	117	227	93	135	228
19	7	26	18	7	25	24	26	50	27	15	42	126	100	226	110	94	204
8	9	17	4	4	8	8	18	26	44	36	80	77	95	172	82	117	199
3	...	3	3	8	11	18	13	31	87	77	164	72	67	139	78	109	187
5	3	8	13	3	16	9	9	18	117	39	156	84	65	149	98	103	201
11	10	21	15	5	20	16	25	41	230	220	450	269	282	552	350	332	732
8	9	17	11	7	18	21	22	43	437	234	671	148	117	265	233	232	465
3	5	8	10	9	19	29	28	57	325	215	540	145	103	248	479	391	870
9	3	12	7	2	9	16	14	30	333	177	510	62	37	99	532	437	969
667	469	1,136	908	640	1,548	1,004	917	1,921	2,891	1,982	4,873	8,051	7,896	15,947	3,249	3,429	6,678

\* Includes the "not insane" cases shown on Tables I. and II.

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

CAUSE OF DEATH.	TOOTING BEC																										
	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.			
<b>CEREBRO-SPINAL DISEASES—</b>																											
Apoplexy ... ..																											
Epilepsy ... ..							1	1																			
General paralysis ... ..										1	1																
Organic disease of brain ... ..																											
Softening of brain ... ..																											
<b>THORACIC DISEASES—</b>																											
Asthma ... ..																											
Bronchitis ... ..																											
Empyema ... ..																											
Heart, valvular disease of ... ..																											
Heart, degeneration of ... ..																											
Phthisis ... ..																											
Pneumonia ... ..							1	1				1	1														
Pericarditis ... ..																											
<b>ABDOMINAL DISEASES—</b>																											
Bright's disease, chronic ... ..																											
Cystitis ... ..																											
Liver, disease of (cirrhosis) ... ..																											
Obstruction of bowels (volvulus) ... ..																											
Peritonitis ... ..																											
Rupture of intestine ... ..																											
Tumour of bladder ... ..																											
<b>GENERAL DISEASES—</b>																											
Cancer ... ..																											
Caries of spine ... ..																											
Senile decay ... ..																											
Tuberculosis ... ..																											
Senile gangrene ... ..																											
Uremia ... ..																											
<b>ACCIDENT OR VIOLENCE—</b>																											
Fracture of femur ... ..																											
Totals ... ..							1	1		1	1		2	2		2	2		1	1		2	2		2	2	

TOOTING BEC CHILDREN'S

CAUSE OF DEATH.	Males.	Females.	Total.
<b>CEREBRO-SPINAL DISEASES—</b>			
General paralysis ... ..	1	1	2
Softening of brain ... ..	1	1	2
Totals ... ..	1	1	2



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

CAUSE OF DEATH.	LEAVESDEN																								
	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.	
<b>CEREBRO-SPINAL DISEASES—</b>																									
Brain, sclerosis of																									
Cerebral embolism																									
Cerebral hæmorrhage																									
Cerebral hæmorrhage & pulmonary tuberculosis																									
Cerebral softening																									
Cerebral tumour													1	1											
General paralysis													1	1											
General paralysis and pulmonary tuberculosis													1	1											
Status epilepticus																									
<b>THORACIC DISEASES—</b>																									
Heart, valvular disease of																									
Heart, muscular disease of																									
Heart, rupture of																									
Lung, gangrene of																									
Pericarditis													1	1											
Pneumonia and bronchitis																									
Pulmonary tuberculosis													1	1	2	3	5	1	1	2	1	3	1	1	2
Pulmonary abscess													1	1											
Syncope, following sudden and acute dilatation of heart (inquest)																									
<b>ABDOMINAL DISEASES—</b>																									
Constipation, chronic, with fecal absorption																									
Cystitis																									
Liver, cirrhosis of																									
Nephritis, chronic																									
Peritonitis tubercular																									
Stomach, fibrous stenosis of pyloric end of																									
Stomatitis, gangrenous																									
<b>GENERAL DISEASES—</b>																									
Cancer																									
Cancer and pulmonary tuberculosis																									
Dermatitis, exfoliative																									
Gastro-enteritis (inquest)																									
Gangrene																									
Septicæmia																									
Senile decay																									
Tuberculosis, general																									
Tuberculosis of bones and joints																									
<b>ACCIDENTAL OR VIOLENCE—</b>																									
Fracture of femur (inquest)																									
Impaction of stone in gullet (inquest)																									
Suffocation after a fit (no inquest)																									
Totals				3	1	4	3	4	7	8	2	10	4	2	6	3	3	6	2		2	5	8	13	

CATERHAM																									
<b>CEREBRO-SPINAL DISEASES—</b>																									
Apoplexy																									
Brain atrophy																									
Epilepsy																									
Exhaustion of dementia																									
General paralysis																									
Maniacal or melancholic exhaustion																									
Softening of brain																									
<b>THORACIC DISEASES—</b>																									
Aneurism																									
Bronchitis																									
Heart, valvular disease of																									
Heart, degeneration of																									
Phthisis																									
Pneumonia																									
Pericarditis																									
<b>ABDOMINAL DISEASES—</b>																									
Acute nephritis																									
Bright's disease, chronic																									
Colitis																									
Enteritis																									
Obstruction of bowels (volvulus)																									
Peritonitis																									
<b>GENERAL DISEASES—</b>																									
Anæmia																									
Cancer																									
Senile decay																									
Tuberculosis																									
Typhoid fever																									
Totals				1	1	2	4	6	4	4	8	4	3	7	4	5	9	2	3	5	9	9	18		





										<b>DARENTH</b>																
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.		
<b>CEREBRO-SPINAL DISEASES—</b>																										
Epilepsy ... ..		1	1	2	3	5				1	1															
General paralysis ... ..				2	2	4															1	1				
Organic disease of brain ... ..		1	1	3	3	3																				
<b>THORACIC DISEASES—</b>																										
Heart, valvular disease of ... ..				1	1																					
Phthisis ... ..		1	1	10	6	16	1	3	4	1	1										1	1				
Pneumonia ... ..		1	1	2	1	9	10			1	1										1	1				
Pleurisy ... ..		1	1																							
Pneumothorax ... ..				1	1																					
<b>ABDOMINAL DISEASES—</b>																										
Ascites ... ..				1	1																					
Bright's disease, chronic... ..				1	1																1	1				
Obstruction of bowels (volvulus) ... ..																										
<b>GENERAL DISEASES—</b>																										
Cancer ... ..																										
Enteric fever ... ..							1	1																		
Scarlet fever ... ..		1	1																							
Tuberculosis ... ..		2	2																							
Totals ... ..	3	7	10	21	21	42	2	4	6	3	3					1	2	4	1	1	2		1	1		
<b>BELMONT</b>																										
<b>CEREBRO-SPINAL DISEASES—</b>																										
Epilepsy ... ..				1	1	1	1	2	2																	
General paralysis ... ..						4	4	1	1												2	2	1	1		
Organic disease of brain ... ..																1	1				1	1				
<b>THORACIC DISEASES—</b>																										
Empyema ... ..													1	1												
Heart, valvular disease of ... ..				1	1																					
Heart, degeneration of ... ..				1	1	1	1	1	1																	
Pericarditis ... ..						1	1	1	1																	
Phthisis ... ..				3	3	4	4	3	3																	
Pleurisy ... ..													1	1												
Pneumonia ... ..				3	3	3	3	2	2	1	1	1	1	1	1	1	1									
<b>ABDOMINAL DISEASES—</b>																										
Bright's disease, chronic... ..				1	1			1	1																	
<b>GENERAL DISEASES—</b>																										
Cancer ... ..						1	1																1	1		
Carbuncle ... ..						1	1																			
Chronic pyæmia ... ..													1	1												
Enteric fever ... ..																										
Syphilis ... ..				3	3	3	3	3	3												1	1				
Tuberculosis ... ..				1	1					1	1										1	1				
Totals ... ..				14	14	21	21	15	15	5	5	1	1	1	1	5	5	2	2							

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



## SUMMARY.

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.			
<b>CEREBRO-SPINAL DISEASES—</b>																											
Apoplexy ... ..																									1	1	
Brain, sclerosis of ... ..																											
Brain atrophy ... ..																											
Cerebral embolism ... ..																											
Cerebral hæmorrhage ... ..																											
Cerebral hæmorrhage and pulmonary tuberculosis																											
Cerebral softening ... ..	1	1								1	1																
Cerebral tumour ... ..																											
Epilepsy ... ..	1	1	4	3	7	1	2	3	4	2	6	1	2	3	2	1	3	1	1	2	2	2	2	4			
Exhaustion of Dementia ... ..																											
General paralysis ... ..	1	1	3	2	5	2	2	2	1	1	1	1	2	2	1	3	3	3	3	3	1	4					
General paralysis and pulmonary tuberculosis																											
Maniacal or melancholic exhaustion																											
Organic disease of brain ... ..	1	1	2	3	3	4	4	4	1	1																	
<b>THORACIC DISEASES—</b>																											
Aneurism ... ..																											
Asthma ... ..																											
Bronchitis ... ..																											
Empyema ... ..																											
Heart, valvular disease of ... ..																											
Heart, degeneration of ... ..																											
Heart, muscular disease of ... ..																											
Heart, rupture of ... ..																											
Lungs, gangrene of ... ..																											
Pericarditis ... ..																											
Pleurisy ... ..	1	1																									
Pneumonia and bronchitis ... ..																											
Pneumonia ... ..	1	1	2	4	10	14	4	3	7	3	3	6	1	1	2	2	2	4	1	1	4	4	8				
Pneumothorax ... ..																											
Phthisis ... ..	1	1	13	6	19	5	3	8	3	3	6	4	4	2	3	5	1	2	2	2	1	3					
Pulmonary tuberculosis ... ..																											
Pulmonary abscess ... ..																											
Syncope, following sudden and acute dilatation of heart (inquest) ... ..																											
<b>ABDOMINAL DISEASES—</b>																											
Ascites ... ..																											
Bright's disease (chronic) ... ..																											
Colitis ... ..																											
Cystitis ... ..																											
Constipation (chronic), with fœcal absorption																											
Liver, cirrhosis of ... ..																											
Nephritis (chronic) ... ..																											
Nephritis (acute) ... ..																											
Obstruction of bowels (volvulus) ... ..																											
Peritonitis ... ..																											
Peritonitis (tubercular) ... ..																											
Rupture of intestine ... ..																											
Stomach, fibrous stenosis of pyloric end of																											
Stomatitis gangrenous ... ..																											
Tumour of bladder ... ..																											
<b>GENERAL DISEASES—</b>																											
Anæmia ... ..																											
Cancer ... ..																											
Cancer and pulmonary tuberculosis																											
Carbuncle ... ..																											
Caries of spine ... ..																											
Chronic pyæmia ... ..																											
Dermatitis, exfoliative ... ..																											
Enteric fever ... ..																											
Enteritis ... ..																											
Gastro-enteritis (inquest) ... ..																											
Gangrene ... ..																											
Scarlet fever ... ..																											
Septicæmia ... ..	1	1																									
Senile decay ... ..																											
Senile gangrene ... ..																											
Syphilis ... ..																											
Tuberculosis ... ..																											
Tuberculosis of bones and joints																											
Uræmia ... ..																											
<b>ACCIDENTS OR VIOLENCE—</b>																											
Fracture of femur ... ..																											
Fracture of femur (inquest) ... ..																											
Impaction of stone in gullet (inquest) ... ..																											
Suffocation after a fit (inquest) ... ..																											
Totals ... ..	4	8	12	39	24	63	28	13	41	27	11	38	15	5	20	10	12	22	10	6	16	16	18	34			







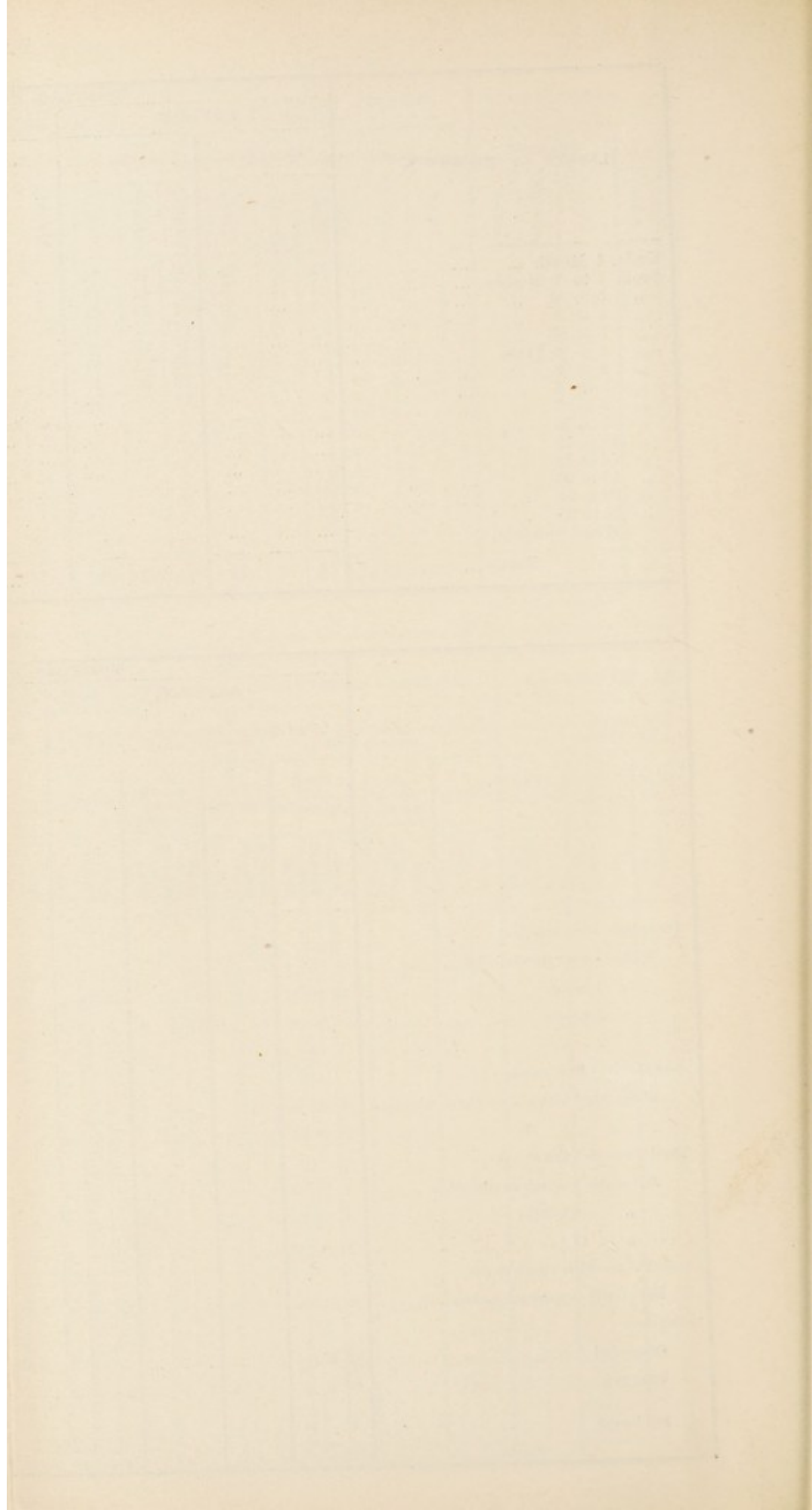






TABLE VIII.—Showing in Quinquennial Periods the Ages of those Admitted,  
(In place of Tables X. and

AGES.	ADMISSIONS.						TOTAL ADMISSIONS.			RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DECEMBER, 1906.		
	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.												
<b>TOOTING BEC ASYLUM.</b>																		
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" 10 "	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" 15 "	20	31	20	51	...	...	31	20	51	...	...	...	1	1	2	2	6	8
" 20 "	25	33	23	56	...	...	33	23	56	1	1	...	1	1	2	4	7	10
" 25 "	30	22	10	32	...	...	22	10	32	1	1	...	2	2	4	3	7	7
" 30 "	35	17	8	25	...	...	17	8	25	1	1	2	1	2	1	7	8	8
" 35 "	40	24	16	40	...	...	24	16	40	...	...	...	1	1	2	3	5	8
" 40 "	45	13	11	24	...	...	13	11	24	...	...	...	2	2	3	7	10	15
" 45 "	50	14	12	26	...	...	14	12	26	1	1	2	...	...	5	10	15	15
" 50 "	55	12	15	27	1	1	12	16	28	...	...	...	1	6	7	3	13	16
" 55 "	60	12	24	36	...	...	12	24	36	...	...	...	2	2	4	13	23	36
" 60 "	65	27	29	56	...	...	27	29	56	...	...	...	10	11	21	29	37	66
" 65 "	70	22	32	54	...	...	22	32	54	2	2	4	18	16	34	45	50	95
" 70 "	75	30	50	80	...	...	30	50	80	†1	1	16	20	36	69	88	157	157
" 75 "	80	28	38	66	...	...	28	38	66	1	1	33	33	66	58	95	153	153
" 80 "	85	12	26	38	...	...	12	26	38	1	1	9	24	33	30	71	101	101
" 85 "	90	3	8	11	...	...	3	8	11	...	...	5	10	15	12	33	45	45
" 90 "	95	1	2	3	...	...	1	2	3	...	...	1	5	6	2	5	7	7
" 95 "	100	...	...	...	...	...	...	...	...	...	...	2	1	3	...	...	...	...
" 100 "	105	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1
Totals...	...	301	324	625	1	1	301	325	626	6	6	12	100	135	235	282	461	743
Mean age	...	48	57	53	52	52	48	57	53	60	52	56	72	72	72	69	69	69
<b>TOOTING BEC RECEIVING HOME FOR CHILDREN.</b>																		
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	46	32	78	...	...	...	46	32	78	...	...	1	1	2	6	...	...	
" 10 "	15	32	31	63	...	...	32	31	63	1	1	...	...	...	4	4	8	
" 15 "	20	12	5	17	...	...	12	5	17	†1	1	1	1	1	1	1	2	
" 20 "	25	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
" 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	...	90	68	158	...	...	90	68	158	2	2	2	2	1	3	11	5	16
Mean age	...	9.7	9.8	9.7	...	...	9.7	9.8	9.7	12.5	12.5	11.5	6	9.6	10	12	11	
<b>LEAVESDEN ASYLUM.</b>																		
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" 10 "	15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
" 15 "	20	1	...	7	9	16	8	9	17	...	...	3	1	4	15	22	37	
" 20 "	25	...	1	9	8	17	9	9	18	...	...	3	4	7	53	66	119	
" 25 "	30	2	1	3	6	4	10	8	5	13	...	...	8	2	10	80	149	
" 30 "	35	2	1	3	5	4	9	7	5	12	...	...	4	2	6	97	182	
" 35 "	40	...	1	1	11	11	22	11	12	23	...	...	3	3	6	74	160	
" 40 "	45	1	2	3	4	7	11	5	9	14	...	...	2	2	2	77	153	
" 45 "	50	...	3	3	6	5	11	6	8	14	...	...	5	8	13	94	186	
" 50 "	55	...	...	3	7	10	3	7	10	...	...	6	6	12	81	100	181	
" 55 "	60	1	...	1	7	8	15	8	8	16	...	...	4	5	9	73	166	
" 60 "	65	...	...	4	4	8	4	4	8	...	...	2	2	4	59	67	126	
" 65 "	70	3	...	3	6	9	6	6	12	...	...	4	6	10	49	90	139	
" 70 "	75	...	...	6	2	8	6	2	8	...	...	6	3	9	30	62	92	
" 75 "	80	...	...	11	3	14	11	3	14	...	...	9	8	17	23	37	60	
" 80 "	85	...	...	4	...	4	4	...	4	...	...	3	7	10	9	24	35	
" 85 "	90	...	...	2	...	2	2	...	2	...	...	3	4	7	2	3	5	
" 90 "	95	...	...	...	...	...	...	...	...	...	...	...	1	1	...	1	1	
" 95 "	100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
" 100 "	105	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	3	5	
Totals	...	10	9	19	88	78	166	98	87	185	...	...	65	62	127	818	977	1,794
Mean age	...	43	39	41	48	43	46	48	42	45	...	...	53	59	56	46	49	48

\* Including transfers from Asylums not under the Board.

† Not insane.

Recovered, and Died during 1906, and of those Remaining on the 31st December, 1906.

XI. in reports previous to 1900.)

AGES.	ADMISSIONS.						TOTAL ADMISSIONS.			RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DECEMBER, 1906.		
	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.												
<b>CATERHAM ASYLUM.</b>																		
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
15	3	...	3	3	4	7	6	4	10	...	...	...	1	1	11	26	37	
20	2	1	3	4	2	6	6	3	9	...	...	2	4	6	33	60	93	
25	2	3	5	3	1	4	5	4	9	...	...	4	4	8	76	67	143	
30	3	6	9	6	2	8	9	8	17	...	...	6	3	9	71	79	150	
35	...	3	3	8	2	10	8	5	13	...	...	3	5	8	71	68	139	
40	1	6	7	4	3	7	5	9	14	...	...	3	3	6	97	84	181	
45	2	4	6	5	2	7	7	6	13	...	...	9	9	18	102	98	200	
50	1	4	5	3	5	8	4	9	13	1	...	9	7	16	97	111	208	
55	4	4	8	3	4	7	7	8	15	...	...	9	6	15	106	101	207	
60	1	4	5	5	4	9	6	8	14	...	...	9	5	14	74	101	175	
65	3	5	8	8	9	17	11	14	25	1	...	9	19	28	46	96	142	
70	2	4	6	3	3	6	5	7	12	...	...	5	9	14	36	72	108	
75	1	2	3	1	1	2	2	3	5	...	...	3	10	13	16	40	56	
80	...	...	...	...	...	...	...	...	...	...	...	1	7	8	6	25	31	
85	...	1	1	1	...	1	1	1	2	...	...	...	1	1	2	5	7	
90	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals..	25	47	72	57	42	99	82	89	171	2	...	2	72	94	166	845	1,036	1,881
Mean age	46	51	50	47	51	49	47	51	49	60	...	60	54	59	57	48	51	49
<b>DARENTH ASYLUM.</b>																		
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	...	...	...	46	36	82	46	36	82	...	...	3	7	10	227	146	373	
10	...	...	...	32	36	68	32	36	68	...	...	11	9	20	265	199	464	
15	...	...	...	50	6	56	50	6	56	...	...	10	12	22	174	145	319	
20	...	...	...	31	10	41	31	16	41	...	...	2	4	6	105	104	209	
25	...	...	...	16	3	19	16	3	19	1	...	...	3	3	73	72	145	
30	...	...	...	9	2	11	9	2	11	...	...	...	...	...	70	73	143	
35	...	...	...	6	1	7	6	1	7	...	...	1	3	4	41	42	83	
40	...	...	...	4	...	4	4	...	4	...	...	1	1	2	18	55	73	
45	...	...	...	1	...	1	1	...	1	...	...	...	1	1	5	27	32	
50	...	...	...	1	...	1	1	...	1	...	...	...	1	1	5	22	27	
55	...	...	...	2	...	2	2	...	2	...	...	...	...	...	2	20	22	
60	...	...	...	2	...	2	2	...	2	...	...	...	...	...	3	24	27	
65	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	8	9	
70	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	9	10	
75	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	3	4	
80	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
85	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	
90	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Totals...	...	...	...	200	94	294	200	94	294	1	...	1	28	43	71	991	950	1,941
Mean age	...	...	...	19	13	17	19	13	17	27	...	27	16	22	20	18	24	21
<b>BELMONT ASYLUM.</b>																		
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	...	...	...	6	...	6	6	...	6	...	...	...	...	...	6	...	6	
10	...	...	...	3	...	3	3	...	3	...	...	...	...	...	3	...	3	
15	...	...	...	77	...	77	77	...	77	...	...	13	...	13	116	...	116	
20	...	...	...	37	...	37	37	...	37	...	...	22	...	22	71	...	71	
25	...	...	...	20	...	20	20	...	20	...	...	14	...	14	29	...	29	
30	...	...	...	13	...	13	13	...	13	...	...	6	...	6	34	...	34	
35	...	...	...	9	...	9	9	...	9	...	...	1	...	1	19	...	19	
40	...	...	...	5	...	5	5	...	5	...	...	5	...	5	6	...	6	
45	...	...	...	4	...	4	4	...	4	...	...	2	...	2	4	...	4	
50	...	...	...	4	...	4	4	...	4	...	...	1	...	1	8	...	8	
55	...	...	...	5	...	5	5	...	5	...	...	3	...	3	6	...	6	
60	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
65	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
70	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
75	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
80	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
85	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
90	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
95	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
100	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
Totals...	...	...	...	183	...	183	183	...	183	...	...	67	...	67	302	...	302	
Mean age	...	...	...	31	...	31	31	...	31	...	...	37	...	37	32	...	32	

TABLE VIII. (continued).—Showing in Quinquennial Periods the Ages of those Admitted, Recovered, and Died during 1906, and of those Remaining on the 31st December, 1906.

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

AGES.	ADMISSIONS.						RECOVERIES.			DEATHS.			PATIENTS RESIDENT 31ST DECEMBER, 1906.		
	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.
<b>SUMMARY.</b>															
Under 5 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
From 5 and under 10 years	46	32	78	52	36	88	...	...	...	4	8	12	239	146	385
" 10 " 15 "	32	31	63	35	36	71	1	...	1	11	9	20	272	203	475
" 15 " 20 "	47	25	72	137	19	156	1	...	1	27	15	42	319	200	519
" 20 " 25 "	35	25	60	81	20	101	...	1	1	29	13	42	265	237	502
" 25 " 30 "	26	14	40	45	8	53	2	...	2	26	11	37	262	211	473
" 30 " 35 "	22	15	37	33	8	41	...	1	1	18	5	23	273	245	518
" 35 " 40 "	24	20	44	34	14	48	...	...	...	9	12	21	208	201	409
" 40 " 45 "	15	19	34	17	10	27	...	...	...	11	6	17	201	222	423
" 45 " 50 "	16	19	35	16	7	23	1	1	2	16	18	34	210	227	437
" 50 " 55 "	13	19	32	11	13	24	1	...	1	17	20	37	194	246	440
" 55 " 60 "	17	28	45	17	12	29	...	...	...	18	13	31	200	237	437
" 60 " 65 "	28	33	61	11	8	19	...	...	...	21	18	39	165	229	394
" 65 " 70 "	28	37	65	11	15	26	3	2	5	31	42	73	141	244	385
" 70 " 75 "	32	54	86	9	5	14	1	...	1	27	33	60	136	231	367
" 75 " 80 "	29	40	69	12	4	16	1	...	1	45	51	96	98	175	273
" 80 " 85 "	12	26	38	4	...	4	...	1	1	13	38	51	45	120	165
" 85 " 90 "	3	9	12	3	...	3	...	...	...	8	15	23	16	42	58
" 90 " 95 "	1	2	3	...	...	...	...	...	...	1	7	8	3	6	9
" 95 " 100 "	...	...	...	...	...	...	...	...	...	2	1	3	...	2	2
" 100 " 105 "	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown	...	...	...	...	...	...	...	...	...	...	...	...	2	5	7
Totals...	426	448	874	528	215	743	11	6	17	334	335	669	3,249	3,429	6,678
Mean age	36	39	38	36	42	39	39	52	39	40	43	42	35	41	38

\* Including transfers from Asylums not under the Board.

TABLE IX.—Condition as to Marriage of those Admitted, Recovered, and Died during 1906.  
(Included in Table XIII. in reports previous to 1900.)

<b>TOOTING BEC ASYLUM.</b>															
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 ... ..	160	113	273	...	...	...	160	113	273	2	3	5	16	23	39
Married ... ..	73	67	140	...	1	1	73	68	141	1	2	3	30	29	59
Widowed ... ..	67	143	210	...	...	...	67	143	210	†3	1	†4	54	81	135
Unknown ... ..	1	1	2	...	...	...	1	1	2	...	...	...	...	2	2
Total ... ..	301	324	625	...	1	1	301	325	626	†6	6	†12	100	135	235
<b>TOOTING BEC RECEIVING HOME FOR CHILDREN.</b>															
Single ... ..	90	68	158	...	...	...	90	68	158	†2	...	†2	2	1	3
Married ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Widowed ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total ... ..	90	68	158	...	...	...	90	68	158	†2	...	†2	2	1	3
<b>LEAVESDEN ASYLUM.</b>															
Single ... ..	6	7	13	45	48	93	51	55	106	...	...	...	35	33	68
Married ... ..	4	2	6	25	14	39	29	16	45	...	...	...	21	6	27
Widowed ... ..	...	...	...	17	15	32	17	15	32	...	...	...	8	23	31
Unknown ... ..	...	...	...	1	1	2	1	1	2	...	...	...	1	...	1
Total ... ..	10	9	19	88	78	166	98	87	185	...	...	...	65	62	127
<b>CATERHAM ASYLUM.</b>															
Single ... ..	17	21	38	36	20	56	53	41	94	...	...	...	24	23	47
Married ... ..	5	15	20	11	12	23	16	27	43	2	...	2	9	12	21
Widowed ... ..	3	11	14	10	10	20	13	21	34	...	...	...	8	24	32
Unknown ... ..	...	...	...	...	...	...	...	...	...	...	...	...	31	35	66
Total ... ..	25	47	72	57	42	99	82	89	171	2	...	2	72	94	166

\* Including transfers from asylums not under the Board.

† Includes 1 "not insane."

TABLE IX. (contd.)—Conditions as to Marriage of those Admitted, Recovered, and Died during  
(Included in Table XIII. in reports previous to 1900.)

<b>DARENTH ASYLUM.</b>															
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.	
	Males.	Females.	Total.	Males.	Females.	Total.									
Single ... ..	...	...	...	192	94	286	192	94	286	1	...	1	28	43	
Married ... ..	...	...	...	1	...	1	1	...	1	...	...	...	...	...	
Widowed ... ..	...	...	...	2	...	2	2	...	2	...	...	...	...	...	
Unknown ... ..	...	...	...	5	...	5	5	...	5	...	...	...	...	...	
<b>Total ... ..</b>	...	...	...	<b>200</b>	<b>94</b>	<b>294</b>	<b>200</b>	<b>94</b>	<b>294</b>	<b>1</b>	...	<b>1</b>	<b>28</b>	<b>43</b>	

<b>BELMONT ASYLUM.</b>															
Single ... ..	...	...	...	171	...	171	171	...	171	...	...	...	58	...	
Married ... ..	...	...	...	7	...	7	7	...	7	...	...	...	7	...	
Widowed ... ..	...	...	...	3	...	3	3	...	3	...	...	...	2	...	
Unknown ... ..	...	...	...	2	...	2	2	...	2	...	...	...	...	...	
<b>Total ... ..</b>	...	...	...	<b>183</b>	...	<b>183</b>	<b>183</b>	...	<b>183</b>	...	...	...	<b>67</b>	...	

<b>SUMMARY.</b>															
Single ... ..	273	209	482	444	162	606	273	209	482	†5	3	†8	163	123	
Married ... ..	82	84	166	44	27	71	82	84	166	3	2	5	67	47	
Widowed ... ..	70	154	224	32	25	57	70	154	224	†3	1	†4	72	128	
Unknown ... ..	1	1	2	8	1	9	1	1	2	...	...	...	32	37	
<b>Total ... ..</b>	<b>426</b>	<b>448</b>	<b>874</b>	<b>528</b>	<b>215</b>	<b>743</b>	<b>426</b>	<b>448</b>	<b>874</b>	<b>11</b>	<b>6</b>	<b>17</b>	<b>334</b>	<b>335</b>	

\* Including transfers from asylums not under the Board. † Includes 1 "not insane."

TABLE X.—Probable causes of Insanity in the Patients admitted during 1906.  
(Table VI. in reports previous to 1900)

CAUSES OF INSANITY.	TOOTING BEC												LEAVESDEN ASYLUM.				CATERHAM ASYLUM.				SUMMARY.										
	Asylum.						Receiving Home for Children.						Total number of direct admissions— Males, 10; Females, 9; Total, 19.				Total number of direct admissions— Males, 25; Females, 47; Total, 72.				Total number of direct admissions— Males, 311; Females, 378; Total, 689.										
	Total number of direct admissions— Males, 301; Females, 324; Total, 625.						Total number of direct admissions— Males, 90; Females, 68; Total, 158.						Number of instances in which causes were assigned.				Number of instances in which causes were assigned.				Number of instances in which causes were assigned.										
	Number of instances in which causes were assigned.						Number of instances in which causes were assigned.						Number of Cases. Males, 5; Females, 4; Total, 9.				Number of cases. Males, 21; Females, 43; Total, 64.				Number of Cases. Males, 311; Females, 378; Total, 689.										
	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.		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.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.	
<b>MORAL—</b>																															
Domestic trouble (including loss of relatives and friends) ...																															
Adverse circumstances (including business anxieties and pecuniary difficulties) ...																															
Mental anxiety and worry (not included under the above two heads) and over-work ...																															
Religious excitement ...																															
Love affairs ...																															
Fright and nervous shock ...																															
<b>PHYSICAL—</b>																															
Intemperance in drink ...																															
Intemperance, sexual ...																															
Venereal disease ...																															
Self-abuse, sexual ...																															
Over-exertion ...																															
Accident or injury ...																															
Parturition and the puerperal state ...																															
Change of life ...																															
Fever ...																															
Privation and starvation ...																															
Old age ...																															
Other bodily diseases or disorders ...																															
Previous attacks ...																															
Hereditary influences ascertained (direct and collateral) ...																															
Congenital defect, ascertained ...																															
Other ascertained causes ...																															
Unknown ...																															
Not insane ...																															

There were no direct admissions at any of the other asylums of the Board.  
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 of the Board are not included in this table.

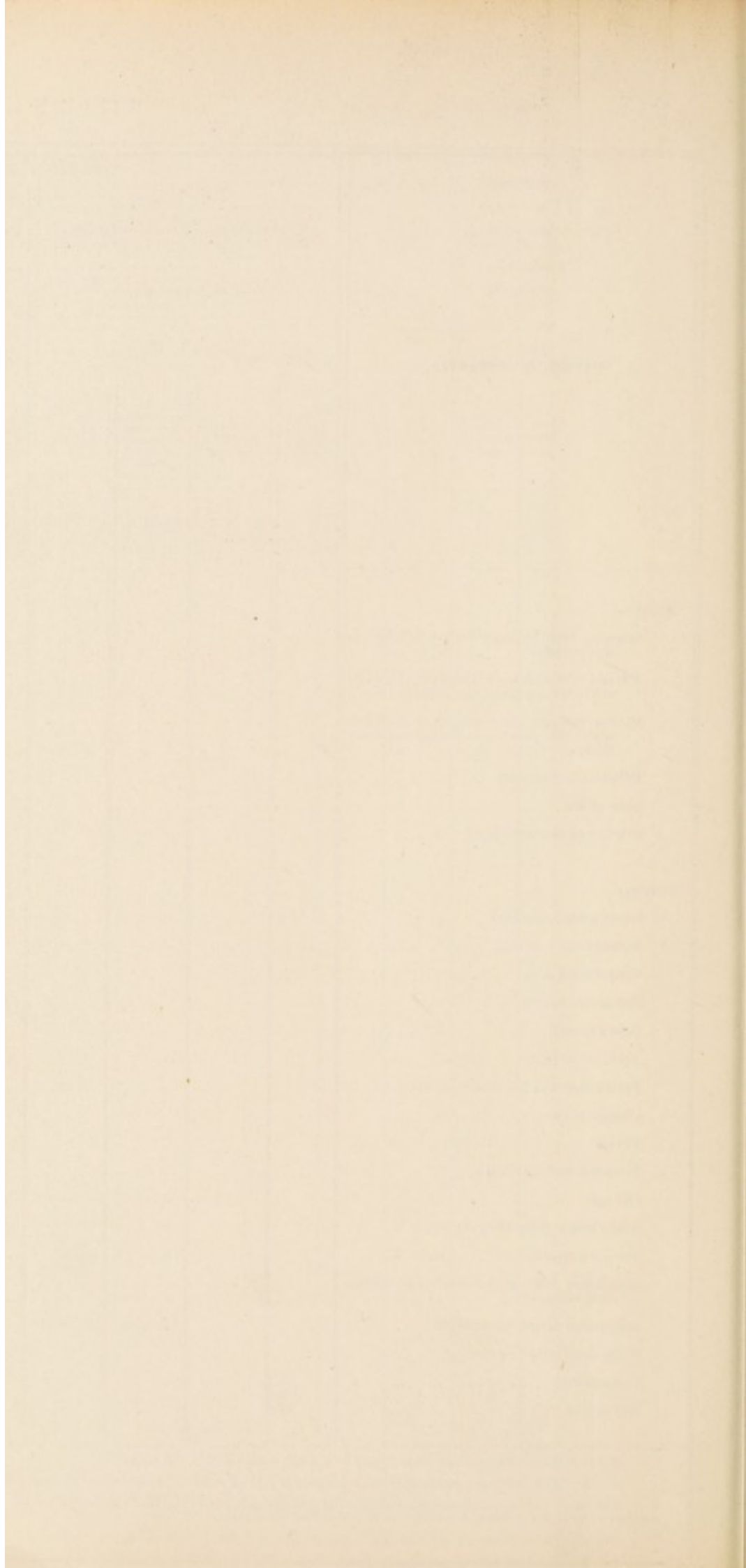








TABLE XII.—*Station or Occupation of Patients admitted during 1906.*

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

STATION OR OCCUPATION.	TOOTING BEC				LEAVESDEN ASYLUM.		CATERHAM ASYLUM.		TOTAL.	
	ASYLUM.		RECEIVING HOME FOR CHILDREN.		M.	F.	M.	F.	M.	F.
	M.	F.	M.	F.						
Army pensioner ... ..	1	...	...	...	...	...	...	1	...	
Artists ... ..	2	...	...	...	...	...	...	2	...	
Attendant ... ..	1	...	...	...	...	...	...	1	...	
Bakers ... ..	4	...	...	...	...	...	...	4	...	
Barbers ... ..	3	...	...	...	...	...	...	3	...	
Barber's boy ... ..	1	...	...	...	...	...	...	1	...	
Basket maker ... ..	1	...	...	...	...	...	...	1	...	
Blacksmith ... ..	...	...	...	...	1	...	...	1	...	
Blue maker ... ..	1	...	...	...	...	...	...	1	...	
Boot clicker ... ..	...	1	...	...	...	...	...	...	1	
Bootmakers ... ..	3	...	...	...	...	...	...	3	...	
Boot repairer ... ..	1	...	...	...	...	...	...	1	...	
Boot sewer ... ..	...	1	...	...	...	...	...	...	1	
Bottle dealer ... ..	1	...	...	...	...	...	...	1	...	
Box maker ... ..	1	...	...	...	...	...	...	1	...	
Bricklayer ... ..	1	...	...	...	...	...	...	1	...	
Bookbinder ... ..	1	...	...	...	...	...	...	1	...	
Brass finisher ... ..	1	...	...	...	...	...	...	1	...	
Builder ... ..	1	...	...	...	...	...	...	1	...	
Builder's foreman ... ..	...	...	...	...	1	...	...	1	...	
Cabinet makers ... ..	3	...	...	...	...	...	...	3	...	
Cabinet maker's assist't ... ..	1	...	...	...	...	...	...	1	...	
Cap makers ... ..	1	1	...	...	...	...	...	1	1	
Carmen ... ..	3	...	...	...	...	...	...	3	...	
Carpenters ... ..	6	...	...	...	...	...	...	6	...	
Caretaker ... ..	...	1	...	...	...	...	...	...	1	
Clerks ... ..	8	...	...	...	...	...	2	10	...	
Coachmen ... ..	4	...	...	...	...	...	1	5	...	
Carver and gilder ... ..	1	...	...	...	...	...	...	1	...	
Charwomen ... ..	...	22	...	...	...	1	...	...	25	
Child's nurse ... ..	...	1	...	...	...	...	...	...	1	
Crane driver ... ..	1	...	...	...	...	...	...	1	...	
Coopers ... ..	3	...	...	...	...	...	...	3	...	
Compositor ... ..	1	...	...	...	...	...	...	1	...	
Cellarman ... ..	1	...	...	...	...	...	...	1	...	
Cabmen ... ..	2	...	...	...	...	...	...	2	...	
Cork cutter ... ..	1	...	...	...	...	...	...	1	...	
Collar cutter ... ..	1	...	...	...	...	...	...	1	...	
Coffee shop assistant ... ..	1	...	...	...	...	...	...	1	...	
Cleaning ... ..	1	...	...	...	...	...	...	1	...	
Cooks ... ..	...	5	...	...	...	...	1	...	6	
Collar maker ... ..	...	...	...	...	...	...	1	...	1	
Costermonger ... ..	...	...	...	...	...	...	1	1	...	
Crossing sweeper ... ..	...	1	...	...	...	...	...	...	1	
Dock gateman ... ..	1	...	...	...	...	...	...	1	...	
Dressmakers ... ..	...	5	...	...	...	1	...	...	10	
Errand boys ... ..	3	...	...	...	...	...	...	3	...	
Engineers ... ..	3	...	...	...	...	...	...	3	...	
Engineer's smith ... ..	1	...	...	...	...	...	...	1	...	
Fishmonger ... ..	...	1	...	...	...	...	...	...	1	
Field workers ... ..	...	2	...	...	...	...	...	...	2	
Fishing-net maker ... ..	...	...	...	...	...	...	1	...	1	
File cutter ... ..	1	...	...	...	...	...	...	1	...	
Fireman ... ..	1	...	...	...	...	...	...	1	...	
Flowerseller ... ..	1	...	...	...	...	...	...	1	...	
French polisher ... ..	1	...	...	...	...	...	...	1	...	
Furniture salesman ... ..	...	...	...	...	...	...	1	...	...	
Gardeners ... ..	3	...	...	...	...	...	1	4	...	
Gilder ... ..	1	...	...	...	...	...	...	1	...	
Greengrocer's assistant ... ..	2	...	...	...	...	...	...	2	...	
Carried forward ... ..	81	41	...	...	2	2	6	9	89	52

Transfers admitted from other Asylums of the Board are not included.

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TABLE XII. (continued).—Station or Occupation of Patients admitted during 1906.  
(Included in Table XIII. in reports previous to 1900.)

STATION OR OCCUPATION.	TOOTING BEC				LEAVESDEN ASYLUM.		CATERHAM ASYLUM.		TOTAL.	
	ASYLUM.		RECEIVING HOME FOR CHILDREN.		M.	F.	M.	F.	M.	F.
	M.	F.	M.	F.						
Brought forward ...	81	41	...	...	2	2	6	9	89	52
Grocer ...	1	...	...	...	...	...	...	...	1	...
Grocer's assistant ...	...	...	...	...	...	...	1	...	1	...
Hawkers... ..	5	1	...	...	...	...	...	2	5	3
Hatter ... ..	1	...	...	...	...	...	...	...	1	...
Horsedealers... ..	2	...	...	...	...	...	...	...	2	...
Housework ... ..	...	3	...	...	...	...	...	...	...	3
Housewives ... ..	...	14	...	...	...	...	...	4	...	18
Insurance agent ... ..	1	...	...	...	...	...	...	...	1	...
Ice-cream vendor ... ..	1	...	...	...	...	...	...	...	1	...
Ironer ... ..	...	1	...	...	...	...	...	...	...	1
Joiners ... ..	2	...	...	...	...	...	...	...	2	...
Labourers ... ..	38	...	...	...	2	...	4	...	44	...
" general ... ..	9	...	...	...	...	...	...	...	9	...
Labourer, waterside ... ..	1	...	...	...	...	...	...	...	1	...
" kitchen ... ..	1	...	...	...	...	...	...	...	1	...
" brewer's ... ..	1	...	...	...	...	...	...	...	1	...
" bricklayer's ... ..	1	...	...	...	...	...	...	...	1	...
" wharf ... ..	1	...	...	...	...	...	...	...	1	...
Labourers, dock ... ..	2	...	...	...	...	...	...	...	2	...
Labourer, painter's ... ..	1	...	...	...	...	...	...	...	1	...
Laundryman... ..	1	...	...	...	...	...	...	...	1	...
Laundresses ... ..	...	3	...	...	...	...	...	1	...	4
Law writer ... ..	1	...	...	...	...	...	...	...	1	...
Lighterman ... ..	1	...	...	...	...	...	...	...	1	...
Mangler... ..	1	...	...	...	...	...	...	...	1	...
Mattress maker ... ..	1	...	...	...	...	...	...	...	1	...
Marble polisher ... ..	1	...	...	...	...	...	...	...	1	...
Matchbox maker... ..	...	1	...	...	...	...	...	...	...	1
Messenger ... ..	1	...	...	...	...	...	...	...	1	...
Mould cutter ... ..	1	...	...	...	...	...	...	...	1	...
Monthly nurse ... ..	...	1	...	...	...	...	...	...	...	1
Music teacher ... ..	...	1	...	...	...	...	...	...	...	1
Navy pensioner ... ..	1	...	...	...	...	...	...	...	1	...
Newsagents ... ..	2	...	...	...	...	...	...	...	2	...
Needlewomen ... ..	...	14	...	...	...	...	...	3	...	17
Nurse ... ..	...	1	...	...	...	...	...	...	...	1
Paper boy ... ..	1	...	...	...	...	...	...	...	1	...
Painters ... ..	4	...	...	...	...	...	...	...	4	...
Park attendant ... ..	1	...	...	...	...	...	...	...	1	...
Piano tuner ... ..	1	...	...	...	...	...	...	...	1	...
Pianoforte maker... ..	1	...	...	...	...	...	...	...	1	...
Plumber's gasfitter ... ..	1	...	...	...	...	...	...	...	1	...
Porter ... ..	3	...	...	...	...	...	...	...	3	...
Potman ... ..	1	...	...	...	...	...	1	...	2	...
Porter, market ... ..	1	...	...	...	...	...	...	...	1	...
" auctioneer's ... ..	1	...	...	...	...	...	...	...	1	...
" coal ... ..	1	...	...	...	...	...	...	...	1	...
" railway ... ..	...	...	...	...	1	...	...	...	1	...
Plasterers ... ..	2	...	...	...	...	...	...	...	2	...
Presser ... ..	1	...	...	...	...	...	...	...	1	...
Rubber stamp maker... ..	1	...	...	...	...	...	...	...	1	...
Sawyer ... ..	1	...	...	...	...	...	...	...	1	...
Schoolmaster ... ..	...	...	...	...	...	...	1	...	1	...
Sculleryman ... ..	1	...	...	...	...	...	...	...	1	...
Seamen ... ..	3	...	...	...	...	...	...	...	3	...
Servants... ..	1	...	...	...	...	1	...	9	1	10
Servant, daily ... ..	...	1	...	...	...	...	...	...	...	1
Carried forward ...	186	82	...	...	5	3	13	28	204	113

Transfers admitted from other Asylums of the Board are not included.

TABLE XII. (continued). Station or Occupation of Patients admitted during 1906.  
(Included in Table XIII. in reports previous to 1900.)

STATION OR OCCUPATION.	TOOTING BEC				LEAVESDEN ASYLUM.		CATERHAM ASYLUM.		TOTAL.	
	ASYLUM.		RECEIVING HOME FOR CHILDREN.		M.	F.	M.	F.	M.	F.
	M.	F.	M.	F.						
Brought forward ...	186	82	...	...	5	3	13	28	204	113
Servants, general...	...	23	...	...	...	...	...	...	...	23
Seamstresses ...	...	2	...	...	...	...	...	...	...	2
Shoeblick ...	1	...	...	...	...	...	...	...	1	...
Shoemakers ...	5	...	...	...	...	...	...	...	5	...
Shop assistant ...	1	...	...	...	...	...	...	...	1	...
Ship's fireman ...	1	...	...	...	...	...	...	...	1	...
Shirt maker ...	...	1	...	...	...	...	...	...	...	1
Shopkeeper ...	...	1	...	...	...	...	...	...	...	1
Silk winder ...	...	1	...	...	...	...	...	...	...	1
Shipwrights ...	2	...	...	...	...	...	...	...	2	...
Silversmith ...	1	...	...	...	...	...	...	...	1	...
Soldiers ...	2	...	...	...	...	...	...	...	2	...
Solicitor ...	1	...	...	...	...	...	...	...	1	...
Stable help ...	...	...	...	...	1	...	...	...	1	...
Stablemen ...	1	...	...	...	...	...	1	...	2	...
Street orderly ...	...	...	...	...	...	...	1	...	1	...
Stocking maker ...	...	1	...	...	...	...	...	...	...	1
Stone mason ...	1	...	...	...	...	...	...	...	1	...
Sword-blade embosser	1	...	...	...	...	...	...	...	1	...
Sweet maker ...	1	...	...	...	...	...	...	...	1	...
Tailors ...	11	...	...	...	...	...	...	...	11	...
Tailoresses ...	...	3	...	...	...	1	...	...	...	4
Table maker ...	1	...	...	...	...	...	...	...	1	...
Tinsmith ...	1	...	...	...	...	...	...	...	1	...
Travellers ...	2	...	...	...	...	...	...	...	2	...
Van boy ...	1	...	...	...	...	...	...	...	1	...
Venetian blind maker	...	...	...	...	1	...	...	...	1	...
Watchman ...	1	...	...	...	...	...	...	...	1	...
Watchmaker ...	1	...	...	...	...	...	...	...	1	...
Waterman ...	1	...	...	...	...	...	...	...	1	...
Wardrobe dealer ...	...	1	...	...	...	...	...	...	...	1
Washerwoman ...	...	1	...	...	...	...	...	...	...	1
Writer ...	1	...	...	...	...	...	...	...	1	...
Wood turner ...	1	...	...	...	...	...	...	...	1	...
None (children) ...	...	...	90	68	...	...	...	...	90	68
Not known ...	7	9	...	...	...	...	...	3	7	12
No occupation ...	69	199	...	...	3	5	10	16	82	220
Total ...	301	324	90	68	10	9	25	47	426	448

TABLE XIII.—Table of Heredity in Patients admitted in 1906.

DEGREE.	TOOTING BEC						LEAVESDEN ASYLUM.		
	ASYLUM.			RECEIVING HOME FOR CHILDREN.			Males.	Females.	Total.
	Males.	Females.	Total.	Males.	Females.	Total.			
<b>I. DIRECT—</b>									
Paternal ... ..	6	4	10	5	1	6	...	1	1
Maternal ... ..	1	2	3	4	3	7	...	...	...
Grandparents ... ..	1	...	1	4	2	6	...	...	...
<b>II. COLLATERAL—</b>									
Brothers or sisters ... ..	8	11	19	...	1	1	...	...	...
Paternal uncles or aunts ... ..	3	3	6	1	6	7	...	1	1
Maternal " " ... ..	2	2	4	7	4	11	...	...	...
Maternal or paternal uncles or aunts ... ..	...	...	...	...	...	...	...	...	...
Paternal grandparents... ..	1	...	1	...	...	...	...	...	...
Maternal " " ... ..	...	...	...	1	2	3	...	...	...
Cousins ... ..	...	...	...	1	...	1	1	1	2
<b>III. REMOTE—</b>									
Undefined ... ..	...	...	...	...	...	...	...	...	...
Total ... ..	22	22	44	23	19	42	1	3	4
Total number of direct admissions ... ..	301	324	625	90	68	158	10	9	19
Number in which causes were assigned ... ..	5	8	13	19	15	34	1	3	4
Percentage of heredity on admissions ... ..	1.6	2.5	2.1	21.1	22.06	21.52	10.0	33.3	21.0
DEGREE.	CATERHAM ASYLUM.			SUMMARY.					
	Males.	Females.	Total.	Males.	Females.	Total.			
<b>I. DIRECT—</b>									
Paternal ... ..	2	4	6	13	10	23			
Maternal ... ..	1	...	1	6	5	11			
Grandparents ... ..	...	...	...	5	2	7			
<b>II. COLLATERAL—</b>									
Brothers or sisters ... ..	1	1	2	9	13	22			
Paternal uncles or aunts ... ..	1	1	2	5	11	16			
Maternal " " ... ..	...	...	...	9	6	15			
Maternal or paternal uncles or aunts ... ..	...	...	...	...	...	...			
Paternal grandparents... ..	...	...	...	1	...	1			
Maternal " " ... ..	...	...	...	1	2	3			
Cousins ... ..	1	...	1	3	1	4			
<b>III. REMOTE—</b>									
Undefined ... ..	5	3	8	5	3	8			
Total ... ..	11	9	20	57	53	110			
Total number of direct admissions ... ..	25	47	72	426	448	874			
Number in which causes were assigned ... ..	11	9	20	36	35	71			
Percentage of heredity admissions ... ..	44	19.1	27.8	8.45	7.81	8.12			

Transfers admitted from other Asylums of the Board are not included.

CONTENTS

# MEDICAL SUPPLEMENT

FOR THE

## YEAR 1906.

EDITED BY

F. M. TURNER, M.D.

AND

H. E. CUFF, M.D.

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1. PREFACE.

The tables included in this supplement have been compiled on similar lines to those of previous years.

All the tables except Table XIV. have been compiled from lists of cases completed during 1906. Thus cases admitted during 1905, but discharged on or after January 1st, 1906, are included, while cases still under treatment at the end of 1906 are excluded. In all tables deaths have been included from whatever cause they were due, whether connected or unconnected with the disease or operation treated of in the table.

COMPLICATIONS TABLES.

**Scarlet Fever.** The figures shown in these tables are in most instances very similar to those of past years. As regards scarlet fever the decrease in the percentage incidence of nephritis and albuminuria, which was noticeable last year, has not continued; but there has been a further reduction in the incidence of secondary diphtheria at both the acute and convalescent hospitals. The figures are shown in the following table which records the percentage incidence for the last four years:—

Complications.	1903.	1904.	1905.	1906.
Nephritis .. .. .	5.37	4.27	3.25	4.15
Albuminuria .. .. .	13.08	11.78	9.23	10.07
Diphtheria .. .. .	2.32	2.00	1.32	1.05
Chicken pox .. .. .	2.36	2.03	1.96	2.31
Measles .. .. .	1.26	1.30	0.70	1.17
Rubella .. .. .	1.02	1.01	0.99	0.81
Whooping cough .. .. .	0.74	0.29	0.54	0.56
Mumps .. .. .	0.04	0.19	0.06	0.31
Erysipelas .. .. .	0.10	0.07	0.07	0.07

The incidence of secondary diseases contracted in hospital is shown both in the acute and convalescent hospital figures. Those for the convalescent hospitals are given in the following table. The percentages are calculated on the total number of completed cases at the convalescent hospitals during the last four years.

INCIDENCE OF SECONDARY DISEASES AT THE CONVALESCENT HOSPITALS.

	Total No. of Completed Cases during 1904.	Total No. of Completed Cases during 1905.	Total No. of Completed Cases during 1906.
	4,098	8,847	11,678
Diphtheria .. .. .	3.31	1.41	1.10
Varicella .. .. .	2.61	1.89	1.17
Measles .. .. .	0.19	0.03	.07
Rubella .. .. .	1.34	0.96	.98
Whooping cough .. .. .	0.31	0.30	.47
Mumps .. .. .	0.39	0.06	.39

**Diphtheria.** The incidence of the complications approximates closely to the figures of the preceding year. The percentage of cases in which paralysis occurred is 10.98 per cent. as compared with 12.47 during 1905; while scarlet fever supervened in 5.02 per cent. of the patients as contrasted with 5.11.

The total number of scarlet fever, diphtheria, and enteric fever patients treated shows an increase; 23,417 cases were completed in 1906 as compared with 21,210 in 1905 and 15,989 in 1904. The proportion of patients in which two or more diseases were present at the time of admission shows a reduction to 1.71 per cent. as compared with 2.02 in 1905.

### LAPAROTOMY STATISTICS.

In 27 of the 651 cases of enteric fever a perforation occurred, and in 11 instances a laparotomy was performed. One patient recovered.

### CAUSES OF DEATH IN SCARLET FEVER, DIPHTHERIA, AND ENTERIC FEVER.

These tables were first issued in the report for 1904. Those for 1906 have been compiled on the same lines.

As far as possible all causes of death have been classified into three groups: (1) death from the primary disease, (2) death from a complication, (3) death from a cause unconnected with the primary disease.

In a few cases where doubt has occurred, preference has been given to group (2). All complications secondary to measles have been entered as deaths from measles, and similarly with other intercurrent infectious diseases.

In Table XV. all complications secondary to nephritis or otorrhœa will be found under those headings.

As in the report for 1904 we find a difficulty in the classification of diphtheria deaths owing to the use of the term cardiac paralysis. At some hospitals deaths have been recorded from cardiac failure and from cardiac paralysis; the latter being presumably a complication, the former the primary disease. At other hospitals this distinction is not maintained or the terminology is different. We have accordingly included all these cases in group (1).

(Signed) F. M. TURNER.  
H. E. CUFF.

**2. COMPLICATIONS AND CO-EXISTENT INFECTIOUS DISEASES, 1906.**

The following tables are compiled from cases completed during 1906:—

TABLE I.—*Showing Incidence of Complications amongst 17,829 cases of Scarlet Fever completed during 1906.*

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain.	Grove.	South-Eastern.	Park.	Brook.	Northern (Convalescent)	Gore Farm (Convalescent)	Total.	Percentage Incidence.
Total cases ... ..	1,550	2,745	2,070	2,035	1,375	1,140	2,067	825	2,028	1,995	[5,991]	[5,687]	17,829	...
Relapse of disease ... ..	14	18	27	22	17	20	19	7	1	12	70	72	299	1·68
Rheumatism ... ..	18	55	32	35	78	75	63	32	42	56	13	12	11	2·87
Chorea ... ..	...	...	2	...	...	2	1	...	2	2	...	1	10	0·06
Pyæmia ... ..	1	1	...	3	3	1	...	...	1	8	...	...	18	0·10
Meningitis ... ..	4	...	4	...	...	...	1	...	1	1	...	1	12	·07
Otitis ... ..	178	293	285	253	240	97	199	80	147	221	173	189	2,355	13·21
Mastoid abscess (1) ... ..	6	17	11	15	12	8	9	2	13	14	9	6	122	0·68
Endocarditis ... ..	6	12	...	24	6	6	9	4	8	19	3	7	104	0·58
Pericarditis ... ..	2	2	...	1	1	...	1	...	...	3	...	1	11	0·06
Laryngitis ... ..	6	2	...	2	1	2	6	...	...	...	2	5	26	0·15
Bronchitis ... ..	7	17	4	6	28	9	4	4	1	9	4	24	117	0·66
Broncho-pneumonia ... ..	5	13	1	12	17	9	11	5	12	7	6	4	102	0·57
Pneumonia ... ..	3	11	2	6	7	1	4	2	7	2	...	3	48	0·27
Pleurisy ... ..	3	2	1	1	1	2	4	1	2	3	...	...	20	0·11
Empyema ... ..	...	1	...	...	1	2	...	1	1	...	...	...	6	0·03
Stomatitis ... ..	7	6	14	26	22	9	13	4	2	18	36	63	220	1·26
Tonsilitis (during convalescence) ... ..	8	15	15	27	31	28	3	3	4	5	12	126	277	1·55
Jaundice ... ..	1	3	9	6	1	5	9	3	3	2	5	5	52	0·30
Nephritis ... ..	84	94	82	87	51	63	90	40	122	50	55	24	842	4·72
Albuminuria (2) ... ..	116	92	83	310	57	148	320	73	142	141	179	134	1,795	10·07
Cervical cellulitis ... ..	5	2	4	6	3	1	1	1	2	7	...	2	34	0·19
Late cervical adenitis, non-suppurative ... ..	57	87	94	38	164	127	80	60	101	109	59	60	1,036	5·81
Cervical adenitis, suppurative ... ..	29	52	44	40	23	21	30	5	11	31	21	9	316	1·77
Eczema ... ..	...	...	...	...	...	...	...	7	...	...	...	...	7	0·04
Abscesses (3) ... ..	10	1	3	9	29	9	15	6	18	21	3	14	129	0·72
Diphtheria ... ..	3	10	1	10	12	1	3	2	1	6	109	30	188	1·05
Chickenpox ... ..	52	31	42	16	35	33	5	1	43	16	114	23	411	2·31
Measles ... ..	6	31	46	14	18	12	32	12	13	15	6	3	298	1·17
Rubella ... ..	5	12	4	1	1	2	2	...	...	2	104	11	144	0·81
Whooping cough ... ..	3	9	6	3	7	4	4	2	1	5	40	15	99	0·56
Mumps ... ..	...	1	4	1	...	3	...	...	...	...	1	45	55	0·31
Erysipelas ... ..	1	5	1	...	3	...	...	...	2	1	...	...	13	0·07

- (1) Includes all abscesses in or around the mastoid process.
- (2) Includes all cases in which albumen was detected, and in which there were no other signs of nephritis, even if only on one occasion.
- (3) This does not include mastoid abscess or cervical abscess which are separately returned.
- (4) Specific infectious diseases co-existent on admission are returned in Table IV

TABLE II.—Showing Incidence of Complications amongst 4,937 cases of Diphtheria completed during 1906.

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain (Acute).	Grove (Acute).	South-Eastern.	Park.	Brook.	Northern (Convalescent).	Gore Farm (Convalescent).	Total.	Percentage Incidence
Total cases ... ..	511	501	488	763	491	32	680	326	499	737	...	[385]	4,937	...
Relapse of disease ... ..	7	3	2	12	5	...	12	1	...	6	...	3	51	1.03
Cardiac paralysis (1) ... *	16	9	30	...	...	4	30	...	12	24	...	...	125	2.53
Cardiac disturbance ... ..	...	...	...	...	83	...	...	...	...	...	...	...	83	1.68
Paralysis (other forms) ...	62	54	43	97	38	...	100	29	30	83	...	6	542	10.98
Otitis ... ..	32	22	28	44	45	...	19	12	17	24	1	3	247	5.06
Mastoid abscess ... ..	2	...	...	...	2	...	...	...	...	1	...	...	5	0.10
Pneumonia ... ..	2	2	2	4	4	...	1	1	3	1	...	...	18	0.36
Bronchitis ... ..	...	...	...	...	...	...	...	1	...	...	...	...	1	0.02
Broncho-pneumonia ... ..	11	7	2	18	6	...	6	1	10	7	1	...	69	1.40
Cervical adenitis (simple) (2) ..	7	...	9	4	23	...	30	7	9	18	1	1	109	2.19
Cervical adenitis (suppurative) ...	7	1	4	7	5	...	5	1	...	4	...	...	34	0.69
Other abscesses ... ..	...	...	...	...	...	...	...	2	...	...	...	...	2	0.04
Nephritis ... ..	4	1	7	2	6	...	3	...	7	3	...	1	36	0.69
Albuminuria (3) ... ..	255	132	86	181	37	8	338	38	80	217	...	4	1,378	27.97
Stomatitis ... ..	...	...	...	...	...	...	...	1	...	...	...	...	1	0.02
Tonsillitis secondary ... ..	...	...	...	...	...	...	...	...	...	...	...	...	2	0.04
Scarlet fever ... ..	24	15	28	38	34	3	25	7	13	30	18	13	248	5.02
Chickenpox ... ..	5	5	10	1	...	...	...	...	10	2	...	...	40	0.81
Measles ... ..	12	2	11	2	7	...	...	...	12	4	...	...	50	1.01
Whooping cough ... ..	3	...	1	3	3	...	2	...	1	1	...	2	16	0.32
Rubella ... ..	1	...	...	...	...	...	3	...	2	...	...	...	6	0.12
Enteric fever ... ..	...	...	...	...	...	...	1	...	...	...	...	...	1	0.02
Mumps ... ..	...	...	7	...	1	...	...	...	...	...	...	4	12	0.24

Complications referable to Antitoxin amongst 4,149 cases of Diphtheria completed during 1906.

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain (Acute).	Grove (Acute).	South-Eastern.	Park.	Brook.	Northern (Convalescent).	Gore Farm (Convalescent).	Total.	Percentage Incidence
Total cases ... ..	491	439	423	680	401	24	642	182	404	463	...	...	4,149	...
Rash ... ..	124	76	113	234	164	...	377	19	55	110	...	...	1,272	30.66
Joint-pains ... ..	25	13	16	37	23	...	53	2	4	31	...	...	204	4.92
Abscess ... ..	2	...	4	1	2	...	2	1	2	1	...	...	15	0.36

- (1) This term is one in common use and accordingly has been retained, but we do not wish to imply that the condition is necessarily pathologically related to the other forms of diphtheritic paralysis.
- (2) Cases developing after the subsidence of the early throat symptoms only.
- (3) 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.
- \* Not tabulated. (4) Specific infectious diseases co-existent on admission are returned in Table IV.

TABLE III.—Showing Incidence of Complications amongst 651 Enteric Fever cases completed during 1906.

COMPLICATION.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Park.	Brook.	Total.	Percentage Incidence.
Total cases ... ..	137	100	37	77	81	75	36	4	104	651	...
Relapse of disease ... ..	13	10	12	8	8	9	...	...	6	56	8.60
Hæmorrhage ... ..	19	13	12	16	12	6	3	1	7	79	12.14
Perforation ... ..	7	5	1	2	6	2	1	...	3	27	4.15
Peritonitis (non-perforative) ...	1	...	...	...	...	1	...	...	...	2	0.31
Bronchitis ... ..	...	...	...	...	12	...	...	...	...	14	2.15
Pneumonia ... ..	3	...	...	5	...	...	...	...	3	22	3.38
Broncho-pneumonia ... ..	1	...	2	1	1	...	...	...	1	6	0.92
Pleurisy ... ..	3	...	...	...	5	1	...	...	...	11	1.69
Albuminuria ... ..	...	13	...	...	...	...	3	...	...	16	2.46
Nephritis ... ..	9	...	1	...	...	...	...	...	...	10	1.54
Parotitis ... ..	1	...	...	...	6	...	...	...	2	10	1.54
Ostitis ... ..	...	...	...	2	...	1	...	...	...	4	0.61
Periostitis ... ..	2	...	...	1	3	...	...	...	...	2	0.31
Phlebitis ... ..	4	1	...	4	6	1	...	...	3	19	2.92
Dementia ... ..	...	1	1	...	1	...	...	...	...	5	0.77
Otitis media ... ..	9	3	1	3	3	...	1	...	8	28	4.30
Abscesses ... ..	1	...	...	1	5	...	1	...	5	13	2.00
Boils ... ..	...	...	...	...	1	4	...	...	...	7	1.08
Scarlet fever ... ..	...	1	...	...	...	...	...	...	...	1	0.15
Diphtheria ... ..	1	1	...	1	...	...	...	...	...	3	0.46
Pertussis ... ..	...	...	...	...	...	...	...	...	1	1	0.15
Varicella ... ..	...	1	...	...	...	...	...	...	...	1	0.15
Erysipelas ... ..	...	...	...	...	...	1	...	...	...	1	0.15

\* Not tabulated.

TABLE IV.—Showing number of Cases in which two or more separate Infectious Diseases were co-existent at the time of admission during 1906.

CO-EXISTENT INFECTIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain.	Grove.	South-Eastern.	Park.	Brook.	Total.
Scarlet fever and diphtheria*	15	13	...	14	9	5	5	2	...	14	77
Scarlet fever and chickenpox*	19	13	2	14	2	10	15	4	11	11	101
Scarlet fever and whooping cough*	7	11	4	7	6	10	14	4	1	24	88
Scarlet fever and measles*	7	13	1	9	1	5	2	2	...	6	45
Scarlet fever and rubella*	...	1	...	1	...	2	...	...	...	1	5
Scarlet fever and erysipelas*	1	...	...	...	...	...	...	...	...	...	1
Scarlet fever and enteric fever*	2	...	...	...	...	...	...	...	...	...	2
Scarlet fever and parotitis ...	...	...	...	...	...	...	...	2	...	...	2
Scarlet fever and tuberculosis ...	...	...	...	...	...	...	...	1	...	...	1
Diphtheria and measles†	5	9	3	5	1	...	1	...	5	6	35
Diphtheria and chickenpox†	3	6	...	2	...	...	4	...	3	6	24
Diphtheria and whooping cough†	3	3	...	1	2	...	3	...	...	4	16
Diphtheria, whooping cough, and chicken pox †	1	...	...	...	...	...	...	...	...	...	1
Diphtheria and enteric fever†	...	...	...	...	1	...	1	...	...	...	2
Diphtheria and erysipelas†	...	...	...	...	1	...	...	...	...	...	1
Enteric fever and measles‡	...	...	...	1	...	...	...	...	...	...	1
Measles and whooping cough	...	...	...	...	1	...	...	...	...	...	1
Total ...	63	69	10	54	24	32	45	15	20	72	404
Total number of cases of scarlet fever, diphtheria, and enteric fever admitted during 1906	2,212	3,297	2,686	2,982	1,922	1,035	2,907	1,419	2,503	2,886	23,849
Percentage in which two or more diseases were present	2·85	2·09	0·37	1·81	1·25	3·09	1·55	1·06	0·80	2·50	1·69

\* These cases are entered under scarlet fever in the general tables.

† These cases are entered under diphtheria in the general tables.

‡ This case is entered under enteric fever in the general tables.

3. POST-SCARLATINAL DIPHTHERIA, 1906.

TABLE V.—Sex Distribution and Mortality.

	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.	
Non-Laryngeal Cases.	1	...	4	...	2	...	4	...	5	...	1	...	...	...	1	...	...	...	3	...	42	1	12	...	75	1	...
	1	...	5	...	...	...	6	...	5	...	1	...	...	...	1	...	...	...	3	...	49	1	18	...	90	1	...
	2	...	9	...	2	...	10	...	10	...	1	...	...	...	...	...	...	...	6	...	91	2	30	...	165	2	1.2
Laryngeal Cases.	1	1	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	11	...	...	...	15	2	...
	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	7	...	...	...	8	1	...
	1	1	1	1	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	18	...	...	...	23	3	13.0
All Cases.	2	1	5	1	2	...	4	...	7	...	1	...	...	...	1	...	...	...	3	...	53	1	12	...	90	3	...
	1	...	5	...	...	...	6	...	5	...	...	...	3	1	1	...	...	...	3	...	56	1	18	...	88	2	...
	3	1	10	1	2	...	10	...	12	...	1	...	3	1	2	...	...	...	6	...	100	2	30	...	188	5	2.66

TABLE VI.—Antitoxin Treatment.

	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.	
Cases treated with antitoxin ... )	3	1	10	1	2	...	8	...	12	...	1	...	3	1	...	...	...	...	4	...	107	2	27	...	177	5	2.82
Cases not so treated ... )	...	...	...	...	...	...	2	...	...	...	...	...	...	...	2	...	...	...	2	...	2	...	3	...	11	...	0.00
Total ... )	3	1	10	1	2	...	10	...	12	...	1	...	3	1	2	...	...	...	6	...	109	2	30	...	188	5	2.66

<sup>1</sup> This case developed diphtheria in the Fountain Hospital, and was subsequently transferred to the Grove Hospital.

### 4. SUMMARY OF THE ANTITOXIN TREATMENT OF DIPHTHERIA, 1906.

TABLE VII.—All forms of Diphtheria.

HOSPITAL.	Cases treated with Antitoxin.			Cases not so treated.			TOTAL.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Eastern... ..	491	50	10.2	20	...	0.0	511	50	9.8
North-Eastern ..	439	37	8.4	62	...	0.0	501	37	7.4
North-Western ...	423	34	8.0	65	1 (1)	1.5	488	35	7.2
Western ... ..	680	76	11.2	83	4 (2)	4.8	763	80	10.5
South-Western ...	401	40	10.0	90	...	0.0	491	40	8.1
Fountain ... ..	24	3	12.5	8	1 (3)	12.5	32	4	12.5
Grove ... ..	642	57	8.9	47	1 (4)	2.1	689	58	8.4
South-Eastern ...	182	31	17.0	44	3 (5)	6.8	226	34	15.0
Park ... ..	404	51	12.6	95	...	0.0	499	51	10.2
Brook ... ..	463	53	11.4	274	2 (6)	0.7	737	55	7.5
Total ... ..	4,149	432	10.4	788	12	1.5	4,937	444	8.99

- (1.) Admitted moribund with measles. The evidence of diphtheria was very doubtful on admission.
- (2.) Two were moribund on admission, and two were admitted during the late paralytic stage.
- (3.) Admitted on seventh day of illness with clean fauces.
- (4.) Died before reaching the receiving room.
- (5.) One case was moribund on admission. The other two were cases of measles and diphtheria, in both of whom the evidence of diphtheria was very doubtful on admission.
- (6.) One case died suddenly immediately after admission. The other was admitted on the eleventh day of disease and died of paralysis.

TABLE VIII.—Laryngeal Cases.

HOSPITAL.	Cases treated with Antitoxin.			Cases not so treated.			TOTAL.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Eastern... ..	120	19	15.8	...	...	...	120	19	15.8
North-Eastern ...	70	7	10.0	...	...	...	70	7	10.0
North-Western ...	46	7	15.2	...	...	...	46	7	15.2
Western ... ..	109	24	22.0	2	2	100.0	111	26	23.4
South-Western ...	79	13	16.5	...	...	...	79	13	16.5
Fountain ... ..	4	1	25.0	...	...	...	4	1	25.0
Grove ... ..	70	11	15.7	1	1	100.0	71	12	16.9
South-Eastern ...	43	14	32.6	3	1	50.0	46	15	32.6
Park ... ..	67	14	20.9	...	...	...	67	14	20.9
Brook ... ..	87	12	13.79	1	1	100.0	88	13	14.8
Total ... ..	695	122	17.6	7	5	71.4	702	127	18.1

TABLE IX.--Operations for Primary Laryngeal Diphtheria.

HOSPITAL.	Cases treated with Antitoxin.								Cases not so treated.								TOTAL.								Mortality per cent. (all operations).
	Cases.				Deaths.				Cases.				Deaths.				Cases.				Deaths.				
	Tracheotomy only.	Intubation only.	Both Operations.	Total.	Tracheotomy only.	Intubation only.	Both Operations.	Total.	Tracheotomy only.	Intubation only.	Both Operations.	Total.	Tracheotomy only.	Intubation only.	Both Operations.	Total.	Tracheotomy only.	Intubation only.	Both Operations.	Total.	Tracheotomy only.	Intubation only.	Both Operations.	Total.	
Eastern ... ..	30	46	20	96	14	2	9	25	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	26.0
North-Eastern... ..	21	..	..	21	5	..	..	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	23.8
North-Western ... ..	24	..	..	24	4	..	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	16.7
Western ... ..	30	19	5	54	15	6	2	23	2	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..	44.6
South-Western ... ..	35	..	..	35	13	..	..	13	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	37.1
Fountain ... ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Grove ... ..	42	2	..	44	8	..	..	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	18.2
South-Eastern ... ..	20	..	..	20	11	..	..	11	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	57.0
Park ... ..	16	12	6	34	11	..	6	17	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	50.0
Brook ... ..	42	..	1	43	9	..	..	9	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	20.9
Total ... ..	260	79	32	371	90	8	17	115	3	3	..	3	..	..	..	..	..	..	..	..	..	..	..	..	31.5

The following additional cases were admitted on whom tracheotomy had been performed previous to admission :—

North Western Hospital	..	..	..	5 cases	..	..	..	0 deaths.
Western Hospital	..	..	..	3 "	..	..	..	1 "
Fountain Hospital	..	..	..	2 "	..	..	..	0 "
Total	..	..	..	10 cases	..	..	..	1 death.



**5. TRACHEOTOMY AND INTUBATION STATISTICS, 1906.**

TABLE X.—*Number of Cases and Deaths at different Ages of all Cases of Tracheotomy performed for Primary Diphtheria, Secondary Diphtheria, also for other causes, at all the Hospitals.*

AGE.	PRIMARY DIPHTHERIA.			SECONDARY DIPHTHERIA.			OTHER CAUSES.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1 ... ..	17	11	64·7	1	1	100·0	...	...	...
1 to 2 ... ..	73	41	56·2	...	...	...	7	5	71·4
2 „ 3 ... ..	56	19	33·9	2	1	50·0	5	4	80·0
3 „ 4 ... ..	51	15	29·4	1	...	0·0	3	3	100·0
4 „ 5 ... ..	42	12	28·5	1	1	100·0	2	2	100·0
5 „ 6 ... ..	26	5	19·2	...	...	...	2	1	50·0
6 „ 7 ... ..	18	3	16·7	...	...	...	...	...	...
7 „ 8 ... ..	3	1	33·3	...	...	...	...	...	...
8 „ 9 ... ..	3	1	33·3	...	...	...	...	...	...
9 „ 10 ... ..	1	...	0·0	...	...	...	...	...	...
Over 10 ... ..	5	1	20·0	1	...	...	2	1	50·0
Total ... ..	295	109	36·9	6	3	50·0	21	16	76·2

TABLE XI.—*Number of Cases and Deaths at different Ages of all Cases of Intubation performed for Primary Diphtheria, also for other causes, at all the Hospitals.*

AGE.	PRIMARY DIPHTHERIA.			OTHER CAUSES.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1 ... ..	3	2	66·7	2	...	} 8·3
1 to 2 ... ..	21	12	57·1	5	1	
2 „ 3 ... ..	20	5	25·0	...	...	
3 „ 4 ... ..	21	3	14·3	2	...	
4 „ 5 ... ..	26	3	11·5	2	...	
5 „ 6 ... ..	10	...	0·0	1	...	
6 „ 7 ... ..	7	...	0·0	...	...	
7 „ 8 ... ..	2	...	0·0	...	...	
8 „ 9 ... ..	...	...	...	...	...	
9 „ 10 ... ..	...	...	...	...	...	
Over 10 ... ..	...	...	...	...	...	
Total ... ..	110	25	22·7	12	1	

TABLE XII—*Number of Cases and Deaths of Patients suffering from Primary Diphtheria in whom Intubation and Tracheotomy were both performed.*

AGE.				Cases.	Deaths.	
Under 1	...	...	..	...	...	} Mortality per cent. = 53.1
1	..	2	...	14	10	
	..	3	...	7	3	
3	..	4	...	6	1	
4	..	5	...	2	2	
5	..	6	...	2	1	
6	..	7	...	1	...	
7	..	8	...	...	...	
8	..	9	...	...	...	
9	..	10	...	...	...	
Over 10	...	...	...	...	...	
Total	...	...	..	32	17	

These cases have been included both in Tables X. and XI.

LAPAROTOMIES FOR PERFORATION IN ENTERIC FEVER PERFORMED DURING 1906. TABLE XIII.

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 ...	F	16	End of 5th week	36 hours ...	Acute general peritonitis, with gas, lymph, and offensive fluid	Median incision. One perforation and one necrotic ulcer sutured	Death, 29 hours after operation	Irrigation and drainage of abdominal cavity.
	F	48	6th day of a relapse; 30th day of illness	12 hours ...	Acute, not offensive peritonitis, mostly localised	Right iliac incision. Suture of perforation	Death, 59 hours after operation	No irrigation or drainage.
	M	13	About 15th day ...	Between 11 and 18 hours	Very acute, offensive, general peritonitis	Right iliac incision. Suture of perforation	Death, 15 hours after operation	No irrigation or drainage. The perforation was a large one and was sutured with some difficulty.
North-Eastern ...	F	13½	19th day ...	11 hours ...	Peritonitis. Perforation at base of adhesion of ileum to pelvis. A second perforation found 6 inches nearer cecum	Incision in right linea semilunaris. Perforation closed by Lembert's sutures. Free flushing with saline solution. Tube with gauze wick placed in pelvis	Death, 24 hours later	
	F	12	13th day ...	4 hours ...	Much yellow fluid and gas escaped. Perforation in ileum 1 inch from cecum	Incision in right linea semilunaris. Perforation closed by Lembert's sutures. Pelvis sponged. No drainage	Death, 11 days later	
Western ...	F	8	22nd day ...	15 hours ...	Fluid in peritoneal cavity. Perforation 8 inches above valve	Perforation closed with continuous suture	Died 48 hours after operation	

## LAPAROTOMIES FOR PERFORATION IN ENTERIC FEVER PERFORMED DURING 1906—(continued).

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.
South-Western	M	18	10th day of relapse.	5 hours	Large perforation just above caecum, intense injection of peritoneum and turbid fluid, much thickening of gut round perforation	Lateral incision through abdominal wall, gut stitched to margin of opening in peritoneum, and packed round with gauze, perforation not closed, peritoneum sponged out, not washed out	Died 40 hours after operation	No attempt made to close perforation owing to large area of thickening round opening. Patient was much run down at time of perforation.
	F	16	23rd day	4½ hours	Perforation, size of slate pencil, gas and turbid fluid in peritoneum, much lymph	Median incision, four silk sutures, peritoneum flushed with sterile water, wound closed, no drain	Died 12 hours after operation	Very collapsed at time of operation. Never rallied.
	M	15	38th day	7½ hours	Small perforation of ileum 1½ inch above valve, no gas in peritoneum, but little lymph, slightly turbid fluid in pelvis	Perforation closed with five silk stitches, very difficult to invaginate owing to (a) wide area of thickening; (b) friable state of gut wall; (c) deep fixation of part owing to short meso-caecum. Peritoneum sponged out, not flushed out. Abdominal wound closed, no drain left in	Died 14 days after operation	No union of part of abdominal wound, which gaped when some stitches removed on 7th day. Peritoneal cavity apparently shut off at this time by adhesion of gut to parietal peritoneum. On 10th day some pus welled up from loculus in deeper part of abdominal cavity. Opening made freer by gently separating coils at spot, and carefully washing out. Condition gradually became worse, and died with rapid emaciation.
Grove	M	16	3rd week	8 hours	Gas and fluid in abdominal cavity. Bowel distended by gas. Small perforation round about 2 inches above ileo-caecal valve.	Incision in right linea semilunaris. Perforation closed with two rows of Lembert's sutures. No irrigation or drainage.	Death	Died 3 hours after operation.

LAPAROTOMIES FOR PERFORATION IN ENTERIC FEVER PERFORMED DURING 1906 — (continued).

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.
Brook	F	12	17th day	10 hours. After onset of sudden severe abdominal pain after passing motion. The pain was continuous up to the time of operation	Abdomen slightly tumid, but moved well with respiration. Some rigidity of R. rectus muscle on palpation, and pain localised between umbilicus and R. spine of ilium, where also there was some superficial dullness. Clear fluid with some flakes of lymph escaped on opening the abdomen. Perforation found about 12 inches from end of ileum. The gut was injected for about 6 inches on either side of perforation	Incision near right linea semilunaris, ulcer invaginated and closed with eight Lembert sutures. The loops of intestine in the immediate neighbourhood of perforation swabbed with sterilised water, and some flakes of adherent lymph wiped off. No drain used. Abdominal wound sutured and stitches removed on 26th day	Recovery	Pleurisy with localised empyema, followed later in the illness; this was opened and drained on the 45th day of disease, after which the patient made rapid recovery.

LAPAROTOMIES FOR SUPPOSED PERFORATION IN ENTERIC FEVER PERFORMED DURING 1906.

North Eastern	F	38	17th day	4 hours	No peritonitis, no free fluid or gas escaped	Small incision in right linea semilunaris. Wound sutured	Death 2 days later	An exploratory operation in a very severe case. No autopsy could be obtained.
Grove	M	30	6th week	9 hours	Injection of coil of small intestines with a few patches of lymph on their surface. No perforation	Incision through linea alba. Intestine swabbed. No flushing or drainage. Wound sutured	Death	Death due to erysipelas 4 weeks after operation.
South Eastern	F	14	14th day	24 hours	No fluid, nor gas in peritoneal cavity	Exploratory incision made and sewn up	Death in 29 hours	Post-mortem. Pneumonia No perforation.

## 7. DETAILS OF MISCELLANEOUS DISEASES ADMITTED

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 ...	506	<b>GENERAL DISEASES.</b>										
		Purpura ... ..	1	...	...	...	...	...	...	...		
		Vaccinia ... ..	1	...	...	...	...	...	...	...		
		Chickenpox ... ..	...	...	...	...	1	...	...	...		
		Measles ... ..	14	1	18	3	9	...	9	...		
		Rubella ... ..	8	...	8	...	10	...	14	...		
		Influenza ... ..	1	...	...	...	1	...	...	...		
		Whooping cough ...	1	...	3	...	1	...	...	...		
		Marasmus ... ..	...	...	...	...	...	...	...	...		
		Febricula ... ..	3	...	...	...	...	...	...	...		
		Erysipelas ... ..	...	...	1	...	1	...	...	...		
		Pyæmia ... ..	1	...	...	...	...	...	...	...		
		Septicæmia ... ..	1	1	...	...	1	...	...	...		
		Acute tuberculosis ..	...	...	...	...	1	1	...	...		
		Tubercular meningitis	...	...	...	...	1	1	...	...		
		Tubercular ulceration of bowel...	...	...	1	1	...	...	...	...		
		Tubercular disease of hip joint...	1	...	...	...	...	...	...	...		
		Tuberculosis of spine	1	...	...	...	...	...	...	...		
		Congenital syphilis ...	...	...	1	1	...	...	...	...		
		Enema rash ... ..	...	...	...	...	...	...	...	...		
		Drug rash ... ..	...	...	...	...	...	...	...	...		
		Rheumatism ... ..	...	...	...	...	...	...	2	1		
		<i>Nervous System.</i>										
		Meningitis ... ..	...	...	1	1	...	...	...	...	...	
		Chorea ... ..	1	...	...	...	...	...	...	...	...	
		Neurasthenia ... ..	...	...	...	...	...	...	...	...	...	
		<i>Ear, Diseases of.</i>										
		Otitis media ... ..	2	...	...	...	...	...	...	...	...	
		Mastoid abscess...	...	...	...	...	...	...	...	...	...	
		<i>Nose, Disease of.</i>										
		Coryza ... ..	11	...	1	...	...	...	...	...	...	
		<i>Circulatory System.</i>										
		Morbus cordis ... ..	1	1	2	1	...	...	...	...	...	
		<i>Respiratory System.</i>										
		Laryngitis ... ..	...	...	3	1	...	...	...	...	...	
		Bronchitis ... ..	1	...	1	...	1	...	...	...		
		Pneumonia, lobar ..	2	1	2	...	3	1	1	...		
		Broncho-pneumonia...	...	...	1	1	2	...	...	...		
		Pleurisy ... ..	...	...	...	...	...	...	...	...		
		Empyema ... ..	...	...	2	1	...	...	...	...		
		<i>Digestive System.</i>										
		Stomatitis ... ..	...	...	...	...	...	...	...	...	...	
		Jaundice ... ..	...	...	...	...	...	...	...	...	...	
		Dentition ... ..	...	...	...	...	3	...	...	...		
		Alveolar abscess ...	1	...	...	...	...	...	...	...		
		Tonsillitis ... ..	14	...	39	...	8	...	34	...		
		Pharyngitis ... ..	...	...	...	...	...	...	...	...		
		Post-pharyngeal abscess	...	...	...	...	...	...	...	...		
		Gastritis ... ..	...	...	1	...	...	...	...	...		
		Enteritis tubercular ...	1	...	...	...	1	...	...	...		
Peritonitis ... ..	...	...	...	...	...	...	...	...				
Intussusception...	...	...	...	...	...	...	1	1				
Fauces, acute ulceration of	3	3	...	...	...	...	...	...				
<i>Lymphatic System.</i>												
Adenitis ... ..	1	...	...	...	...	...	...	...	...			
Carried forward	506	...	71	7	85	10	44	3	61	2		

**DURING 1906, ALSO OF THOSE DYING DURING 1906.—TABLE XIV.**

SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE 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	...
1	...	...	...	...	...	1	...	9	...	4	...	16	...
14	...	9	...	2	...	4	1	9	...	5	1	93	6
2	...	4	...	7	...	4	...	19	...	9	...	85	...
...	...	...	...	...	...	...	...	...	...	...	...	2	...
1	...	1	...	1	...	...	...	...	...	...	...	8	...
...	...	...	...	...	...	...	...	1	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	...	...	4	...
...	...	1	...	...	...	1	...	...	...	...	...	4	...
1	1	...	...	...	...	...	...	...	...	...	...	2	1
...	...	...	...	...	...	...	...	...	...	...	...	2	1
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	1	1	1	1	1	1	4	4
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	1	1	...	...	...	...	2	2
...	...	...	...	1	...	...	...	...	...	...	...	1	...
1	...	1	...	1	...	...	...	2	...	...	...	5	...
...	...	...	...	...	...	...	...	...	...	1	...	3	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...
1	1	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	1	...	...	...	...	...	...	...	3	...
...	...	...	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	2	...	2	...	...	...	...	...	16	...
...	...	1	...	...	...	...	...	...	...	...	...	4	2
...	...	1	...	...	...	...	...	...	...	1	...	5	1
...	...	1	...	1	...	1	...	1	...	...	...	7	...
2	...	2	...	1	...	1	...	...	...	2	...	16	2
...	...	...	...	1	...	...	...	3	1	...	...	7	2
1	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	2	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...
1	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	3	...	1	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	7	...
5	...	15	...	28	...	12	...	4	...	10	...	169	...
1	...	...	...	...	...	1	...	...	...	7	...	9	...
...	...	...	...	...	...	...	...	1	...	1	...	2	...
...	...	...	...	...	...	1	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	1	1	1	1
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	3	3
...	...	1	1	...	...	...	...	...	...	1	...	3	1
31	2	37	1	46	...	32	3	53	2	46	3	506	33

Details of Miscellaneous Diseases admitted during 1906,

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	506	... ..	71	7	85	10	44	3	61	2	
Scarlet Fever (continued)	426	<i>Urinary System.</i>									
		Nephritis ... ..	1	...	3	1	...	...	...	...	
		Cystitis ... ..	1	...	1	1	...	...	...	...	
		<i>Bone, Diseases of.</i>									
		Osteomyelitis ... ..	...	...	1	1	1	...	...	...	...
		Acute Periostitis of Spine ... ..	1	1	...	...	...	...	...	...	...
		<i>Skin Diseases.</i>									
		Erythema ... ..	23	...	39	...	1	...	11	...	...
		Urticaria ... ..	1	...	...	...	1	...	...	...	...
		Eczema ... ..	5	...	1	...	1	...	...	...	...
		Lichen ... ..	...	...	...	...	...	...	...	...	...
		Dermatitis ... ..	1	...	...	...	1	...	...	...	...
		Sudamina ... ..	1	...	...	...	...	...	...	...	...
		Exfoliative dermatitis	...	...	...	...	...	...	...	...	...
		Keratosis pilaris ... ..	...	...	1	...	...	...	...	...	...
		Xeroderma ... ..	...	...	...	...	...	...	...	...	...
		Pediculosis ... ..	...	...	...	...	...	...	...	...	...
		Herpes ... ..	...	...	...	...	...	...	...	...	...
		Molluscum Contagiosum ... ..	...	...	...	...	...	...	...	...	...
		<i>Local Injuries.</i>									
Scald ... ..	1	1	...	...	...	...	...	...	...		
Wound of chin ... ..	...	...	...	...	...	...	...	...	...		
Wound of knee ... ..	1	...	...	...	...	...	...	...	...		
No obvious disease ...	15	...	37	...	52	...	4	...	...		
Not diagnosed ... ..	...	...	...	...	...	...	...	...	...		
Diphtheria ...	932	...	122	9	168	13	101	3	76	2	
Diphtheria ...	95	<b>GENERAL DISEASES.</b>									
		Influenza ... ..	...	...	...	...	...	...	1	...	
		Measles ... ..	7	...	8	3	4	1	5	2	
		Rheumatism ... ..	...	...	...	...	1	...	1	...	
		Whooping cough ... ..	...	...	1	1	1	...	...	...	
		Febricula ... ..	3	...	...	...	...	...	...	...	
		Erysipelas ... ..	...	...	2	...	...	...	...	...	
		Tubercular meningitis	...	...	...	...	1	1	...	...	
		Pulmonary tuberculosis ... ..	...	...	...	...	2	2	1	1	
		Syphilis ... ..	...	...	...	...	...	...	2	...	
		<i>Nervous System.</i>									
		Meningitis ... ..	...	...	...	...	...	...	...	...	...
		Laryngismus stridulus	1	...	1	...	...	...	1	...	
		<i>Eye, Diseases of.</i>									
		Ophthalmia ... ..	...	...	1	...	...	...	...	...	
Necrosis of orbit ...	1	...	...	...	...	...	...	...			
<i>Diseases of Ear.</i>											
Otitis media ... ..	1	...	...	...	...	...	...	...			
<i>Circulatory System.</i>											
Pericarditis ... ..	...	...	...	...	...	...	...	...			
Carried forward ...	95	...	13	...	13	4	9	4	11	3	
Carried forward	1,027	...	135	9	181	17	110	7	87	5	



also of those Dying during 1906 (continued).

SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE 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.
31	2	37	1	46	...	32	3	53	2	46	3	506	33
1	...	2	...	...	...	...	...	2	...	1	1	10	2
...	...	...	...	...	...	...	...	...	...	...	...	2	1
...	...	...	...	...	...	...	...	...	...	...	...	1	1
3	...	22	...	18	...	10	...	1	...	10	...	138	...
...	...	1	...	...	...	1	...	2	...	2	...	8	...
...	...	3	...	...	...	3	...	2	...	...	...	15	...
...	...	...	...	...	...	...	...	...	...	2	...	2	...
...	...	2	...	...	...	...	...	3	...	...	...	5	...
...	...	...	...	...	...	...	...	1	...	...	...	3	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	2	...	2	...	1	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	...	...	5	...
...	...	...	...	...	...	1	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	...	...	1	...
...	...	1	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	1	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	7	...	10	...	19	...	1	...	...	...	145	...
...	...	...	...	...	...	...	...	82	...	...	...	82	...
35	2	47	1	77	...	68	3	147	2	61	4	932	39
...	...	...	...	...	...	...	...	...	...	...	...	1	...
4	...	3	...	...	...	4	...	8	1	4	2	47	9
1	...	...	...	...	...	...	...	1	...	...	...	4	...
1	...	...	...	...	...	...	...	...	...	3	...	6	1
...	...	...	...	...	...	...	...	...	...	...	...	3	...
1	...	1	...	...	...	...	...	...	...	2	...	6	...
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	1	...	...	...	...	...	4	3
2	...	1	...	...	...	1	...	3	...	2	...	11	...
...	...	...	...	...	...	2	2	...	...	...	...	2	2
...	...	1	...	...	...	...	...	1	...	...	...	5	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...	2	...
...	...	...	...	...	...	...	...	...	...	1	...	1	...
9	...	6	...	...	...	8	2	13	1	13	2	95	16
44	2	83	1	77	...	76	5	160	3	74	6	1,027	55

Details of Miscellaneous Diseases admitted during 1906,

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	1,027	...	135	9	181	17	110	7	87	5
Brought forward — Diphtheria	95	...	13	...	13	4	9	4	11	3
Diphtheria (continued)		...	...	...	...	...	...	...	...	...
	864	<i>Diseases of Nose.</i>								
		Rhinitis ... ..	3	...	...	...	1	...	...	...
		Coryza ... ..	...	...	...	...	...	...	...	...
		Chancre ... ..	...	...	...	...	...	...	...	...
		<i>Respiratory System.</i>								
		Laryngitis ... ..	19	1	15	2	2	1	..	...
		Tracheal Stenosis ...	...	...	...	...	...	...	...	...
		Bronchitis ... ..	1	...	1	...	...	...	2	1
		Pneumonia, lobar ..	...	...	1	...	4	2	4	3
		Broncho-pneumonia...	1	1	...	...	5	4	1	1
		Atelectasis ... ..	...	...	...	...	...	...	2	2
		Phthisis ... ..	...	...	...	...	...	...	...	...
		<i>Digestive System.</i>								
		Stomatitis ... ..	7	...	...	...	1	...	...	...
		Dentition ... ..	...	...	...	...	1	...	...	...
		Alveolar abscess ...	1	...	1	...	...	...	...	...
		Vincent's angina ...	...	...	25	...	3	...	...	...
		Ulcerative tonsillitis .	11	5	...	...	2	1	...	...
		Tonsillitis ... ..	65	...	132	...	32	...	114	...
		Tonsillitis, suppurative	...	...	...	...	3	..	2	...
		Tonsillitis, septic ...	...	...	4	4	...	...	...	...
		Pharyngitis ... ..	...	...	...	...	...	...	...	...
		Post-pharyngeal abscess ...	...	...	1	1	1	1	2	...
		Intussusception ... ..	...	...	...	...	1	1	...	...
		Appendicitis ... ..	...	...	...	...	...	...	1	...
		<i>Lymphatic System.</i>								
		Adenitis ... ..	...	...	...	...	1	...	...	...
		Adenitis, suppurative	...	...	...	...	...	...	...	...
	<i>Diseases of the Skin.</i>									
	Herpes ... ..	1	...	...	...	...	...	...	...	
	Eczema ... ..	1	...	...	...	...	...	...	...	
	<i>Urinary System.</i>									
	Nephritis ... ..	1	...	1	...	2	2	...	...	
	No obvious disease ...	4	...	5	...	5	...	...	...	
	Not diagnosed ... ..	...	...	...	...	...	...	...	...	
Enteric Fever ...	959	GENERAL DISEASES.	128	7	199	11	73	16	139	10
		Influenza ... ..	2	...	2	...	1	...	2	...
		Measles ... ..	...	...	1	...	...	...	...	...
		Febricula ... ..	4	...	...	...	...	...	...	...
		Erysipelas ... ..	...	...	2	...	...	...	...	...
		Pyæmia ... ..	1	1	...	...	...	...	...	...
		Septicæmia ... ..	1	1	3	3	2	1	...	...
		General tuberculosis	...	...	1	1	...	...	...	...
		Pulmonary tubercle...	1	1	...	...	1	1	...	...
		Tubercular meningitis	...	...	...	...	1	1	...	...
		Tubercular peritonitis	...	...	...	...	...	...	...	...
	Syphilis ... ..	...	...	1	...	...	...	...	...	
	Malaria ... ..	...	...	...	...	...	...	...	...	
	46	Carried forward ...	9	3	10	4	5	3	2	...
Carried forward	1,937	...	259	19	377	28	179	22	217	12

also of those Dying during 1906 (continued).

SOUTH WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE 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.
44	2	83	1	77	...	76	5	160	3	74	6	1,027	55
9	...	6	...	...	...	8	2	13	1	13	2	95	16
3	...	...	...	...	...	1	...	...	...	...	...	7	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	...	...	1	...
...	...	2	...	...	...	4	...	6	...	...	...	48	4
...	...	...	...	...	...	...	...	1	...	...	...	1	...
1	...	...	...	...	...	...	...	...	...	2	...	7	1
1	...	1	...	1	1	1	...	1	...	2	...	16	6
...	...	...	...	1	1	1	1	3	2	1	1	13	11
...	...	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	...	...	1	1	...	...	1	1
...	...	2	...	...	...	...	...	...	...	2	...	12	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	8	1	...	...	3	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	39	1
33	...	66	...	4	...	73	...	42	...	66	...	13	6
...	...	...	...	...	...	1	...	4	...	...	...	627	...
...	...	...	...	...	...	1	1	6	...	...	...	10	...
2	...	...	...	...	...	...	...	...	...	...	...	11	5
...	...	...	...	...	...	...	...	...	...	...	...	2	...
1	...	...	...	...	...	1	...	...	...	2	...	8	2
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	1	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...	5	2
...	...	...	...	...	...	6	...	...	...	...	...	20	...
...	...	...	...	...	...	...	...	10	...	...	...	10	...
50	...	85	1	6	2	102	4	88	4	89	3	959	58
4	...	...	...	...	...	2	...	...	...	1	...	14	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	4	...
1	...	...	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	2	1
...	...	...	...	...	...	...	...	...	...	...	...	6	5
2	...	...	...	...	...	...	...	...	...	...	...	1	1
2	2	2	1	...	...	2	1	...	...	...	...	6	3
1	...	...	...	...	...	1	1	...	...	...	...	6	5
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	1	...	...	...	1	...
10	2	2	1	...	...	6	2	1	...	1	...	46	15
95	4	164	3	83	2	176	9	236	6	151	7	1,937	112

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	1,937	...	259	19	377	28	179	22	217	12
Brough forward —Enteric Fever	46	...	9	3	10	4	5	3	2	...
Enteric Fever (continued)		...	...	...	...	...	...	...	...	...
		<b>GENERAL DISEASES</b> (continued).								
		Dysentery, ...	1	1	...	...	...	...	...	...
		Rheumatism ...	2	...	...	...	4	...	...	...
		Abdominal tumour ...	...	...	...	...	1	...	...	...
		Cancer of stomach ...	1	...	...	...	...	...	...	...
		Malta fever ..	1	...	...	...	...	...	...	...
		Anæmia ...	1	...	...	...	...	...	...	...
		Alcoholism ..	...	...	...	...	1	1	...	...
		<i>Nervous System.</i>								
		Neurasthenia ...	...	...	...	...	1	...	...	...
		Insolation ...	...	...	...	...	...	...	...	...
		Meningitis ...	...	...	...	...	1	...	1	1
		Cerebellar abscess ..	1	1	...	...	...	...	...	...
		<i>Diseases of the Ear.</i>								
		Otitis media ...	...	...	...	...	1	1	...	...
		Mastoiditis ...	...	...	...	...	1	...	...	...
		<i>Circulatory System.</i>								
	171	Acute endocarditis ...	...	...	...	...	...	...	...	...
		Infective endocarditis	2	2	3	3	2	2	...	...
		Pericarditis ...	...	...	...	...	1	1	...	...
		<i>Respiratory System.</i>								
		Bronchitis ...	1	...	1	...	...	...	1	...
		Pneumonia ...	13	4	3	1	4	3	4	...
		Broncho-pneumonia	...	...	...	...	...	...	5	1
		Phthisis ...	2	1	...	...	1	...	...	...
		Pleurisy ...	...	...	...	...	...	...	2	...
		Empyema ...	...	...	...	...	1	1	2	...
		<i>Digestive System.</i>								
		Tonsillitis ...	...	...	...	...	...	...	1	...
		Gastritis ...	...	...	...	...	...	...	...	...
		Enteritis ...	...	...	...	...	...	...	8	...
		Perityphlitis ...	2	...	...	...	...	...	...	...
		Appendicitis ...	...	...	...	...	1	...	...	...
		Diarrhoea ...	2	...	...	...	...	...	...	...
		Hepatic abscess and peritonitis ...	...	...	...	...	...	...	...	...
		Colitis ...	1	...	...	...	...	...	...	...
		Gallstones ...	...	...	1	...	...	...	...	...
		Peritonitis, acute sup- purative ...	...	...	...	...	...	...	...	...
		Peritonitis ...	...	...	...	...	1	1	...	...
	217	Carried forward ...	39	12	18	8	26	13	26	2
Carried forward	2,108	...	289	28	385	32	200	32	241	14

also of those Dying during 1906 (continued).

SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE 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.
95	4	164	3	83	2	176	9	236	6	151	7	1,937	112
10	2	2	1	...	...	6	2	1	...	1	...	46	15
1	1	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	1	...	...	...	...	...	7	...
...	...	...	...	...	...	...	...	...	...	1	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	1	...	1	...
...	...	...	...	...	...	...	...	1	...	...	...	2	...
...	...	...	...	...	...	...	...	1	...	...	...	2	1
1	...	...	...	...	...	...	...	...	...	...	...	2	...
1	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	7	5	9	6
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	1	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	1	...	...	...	1	...
...	...	...	...	...	...	1	...	...	...	1	1	9	8
...	...	...	...	...	...	...	...	...	...	...	...	1	1
2	...	1	1	...	...	1	...	1	...	2	...	10	1
15	1	3	2	...	...	8	...	...	...	12	1	62	12
...	...	...	...	...	...	...	...	...	...	...	...	5	1
...	...	...	...	...	...	...	...	...	...	1	...	4	1
...	...	...	...	...	...	1	...	...	...	...	...	3	...
...	...	...	...	...	...	1	1	...	...	...	...	4	2
...	...	...	...	...	...	...	...	1	...	1	...	3	...
...	...	...	...	...	...	2	...	...	...	2	...	4	...
3	...	...	...	...	...	1	...	...	...	2	...	14	...
...	...	...	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	1	...	...	...	2	...	4	...
...	...	...	...	...	...	...	...	...	...	...	...	2	...
1	1	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	1	1	2	1
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	2	1	...	...	...	...	...	...	...	...	2	1
1	1	2	1	...	...	...	...	...	...	...	...	4	3
35	6	10	6	...	...	23	3	5	...	35	8	217	58
120	8	172	8	83	2	193	10	240	6	185	15	2,108	155

Details of Miscellaneous Diseases admitted during 1906,

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	2,108	...	289	28	385	32	200	32	241	14
Brought forward —Enteric Fever	217	...	39	12	18	8	26	13	26	2
Enteric Fever (continued)		<i>Urinary System.</i> Nephritis, acute ... Nephritis, chronic ... Pyuria ...  <i>Generative System.</i> Miscarriage ... Orchitis ...  <i>Diseases of Connective Tissue.</i> Cellulitis Pelvic ...  <i>Local Diseases.</i> Spinal Caries ...  No obvious disease ...	...	...	...	...	...	...	...	...
	18		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
	...		...	...	...	...	...	...	...	...
Infectious Disease...	235	...	42	12	21	8	29	13	27	3
	1	Angina Ludovici	...	...	...	...	...	...	...	...
	1	...	...	...	...	...	...	...	...	...
Typhus Fever ...	1	Ulcerative endocarditis	...	...	...	...	...	...	...	...
	1	...	...	...	...	...	...	...	...	...
Cerebro-spinal Fever ...	1	Tuberculosis	...	...	...	...	...	...	1	...
	1	...	...	...	...	...	...	...	1	...
Uncertified ...	22	Admitted with mother	4	...	2	...	4	...	1	...
		...	Born in hospital	...	...	...	...	...	...	...
	22	...	4	...	2	...	4	...	1	...
	...	Case dying in 1906, but admitted in 1905	...	...	...	...	...	2	...	...
	...	...	...	...	...	...	...	2	...	...
GRAND TOTALS	2,151	...	296	28	390	32	207	34	244	15

also of those Dying during 1906 (continued).

SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		FOUNTAIN HOSPITAL.		GROVE 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.
120	8	172	8	83	2	193	10	240	6	185	15	2,108	155
35	6	10	6	...	...	23	3	5	...	35	8	217	58
1	...	1	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	2	1
1	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	1	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	2	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	1	...	2	...	1	...	7	...
37	6	11	6	...	...	24	3	8	...	36	8	235	59
...	...	1	1	...	...	...	...	...	...	...	...	1	1
...	...	1	1	...	...	...	...	...	...	...	...	1	1
1	1	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	...	...	...	...	...	...	1	...
...	...	...	...	...	...	4	...	2	...	1	...	18	...
2	2	...	...	...	...	1	...	1	...	...	...	4	2
2	2	...	...	...	...	5	...	3	...	1	...	22	2
...	...	...	...	...	...	...	1	...	...	...	...	...	3
...	...	...	...	...	...	...	1	...	...	...	...	...	3
125	11	174	9	83	2	199	11	246	6	187	15	2,151	163

## 8. CAUSES OF DEATH.

TABLE XV.—Causes of Death in Scarlet Fever, 1906.

	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain.	Grove.	South-Eastern.	Park.	Brook.	Northern.	Gore Farm.	Total.
I. Death from the primary disease	29	41	40	53	45	4	24	12	42	33	...	...	323
II. Death from complications:—													
Relapse ... ..	...	1	2	...	...	...	...	...	...	...	2	1	6
Pyæmia ... ..	...	1	1	1	...	1	...	...	1	2	...	...	7
Meningitis ... ..	1	...	4	1	1	...	...	...	1	...	...	1	9
Otitis and meningitis ... ..	2	...	...	1	...	...	1	...	...	1	...	...	5
"  "  sinus thrombosis ... ..	...	...	...	...	...	...	1	...	...	...	...	...	1
"  "  cerebral or cerebellar abscess ... ..	...	1	2	...	...	...	...	...	...	...	...	...	3
Post pharyngeal abscess ... ..	...	...	2	...	...	...	...	...	...	...	...	...	2
Laryngitis... ..	3	...	...	...	...	2	1	...	...	...	1	...	7
Bronchitis... ..	...	1	...	...	...	...	...	...	...	1	...	...	2
"  capillary ... ..	...	...	1	...	...	...	...	...	...	...	...	...	1
Pleurisy ... ..	...	...	...	...	...	...	1	...	...	1	...	...	2
Broncho-pneumonia ... ..	2	2	5	2	...	4	6	1	9	5	...	...	36
"  "  and enteritis ... ..	...	...	...	...	...	...	1	...	...	...	...	...	1
"  "  "  pleuritic effusion ... ..	...	...	...	...	2	...	...	...	...	...	...	...	2
Pneumonia ... ..	1	4	7	1	1	...	...	1	3	...	...	...	18
Rheumatism ... ..	...	...	...	...	...	...	...	...	...	1	...	...	1
Endocarditis ... ..	...	...	...	...	...	...	1	...	...	...	...	...	1
"  ulcerative ... ..	...	1	...	...	...	...	...	...	...	...	...	...	1
"  and pericarditis... ..	...	1	...	...	...	...	...	...	...	...	1	...	2
Pericarditis ... ..	...	...	...	1	1	...	...	...	...	1	...	...	3
Morbus cordis ... ..	...	...	1	...	...	...	...	...	...	...	...	...	1
Cardiac dilatation ... ..	...	...	...	...	...	...	...	...	1	...	...	...	1
Nephritis ... ..	...	4	3	2	1	1	6	...	5	1	2	...	25
"  and empyema ... ..	...	...	...	...	...	...	...	1	...	...	...	...	1
"  "  pneumonia ... ..	1	2	...	...	...	...	...	...	...	...	...	...	3
Diarrhœa ... ..	...	...	...	...	...	...	1	1	...	...	...	...	2
Cellulitis of neck... ..	2	...	...	...	1	...	...	3	2	2	...	...	10
"  "  arm and trunk ... ..	...	...	...	...	...	...	...	1	...	...	...	...	1
Cervical adenitis and laryngeal obstruction ... ..	...	...	...	...	...	...	1	1	...	...	...	...	2
III. Death from other causes than Scarlet Fever or its usual complications:—													
Burns ... ..	1	...	...	...	...	...	...	...	...	...	...	...	1
"  and meningitis ... ..	1	...	...	...	...	...	...	...	...	...	...	...	1
Diphtheria... ..	1	2	...	...	...	...	1	1	...	...	2	...	7
Measles ... ..	1	1	1	4	...	1	2	...	...	1	...	...	11
"  and diphtheria .. ..	1	...	...	...	...	...	...	...	...	...	...	...	1
Tuberculosis, pulmonary ... ..	1	...	...	...	...	...	1	...	...	...	...	...	2
"  acute miliary ... ..	...	3	...	1	...	...	...	...	...	...	...	...	4
"  meningeal ... ..	2	...	2	...	...	...	...	...	...	1	...	...	5
Empyema, pre-existing ... ..	...	...	...	...	...	...	...	1	...	...	...	...	1
Appendicitis ... ..	...	...	...	...	...	...	...	...	...	...	...	1	1
Internal hernia ... ..	...	...	...	...	...	...	1	...	...	...	...	...	1
Convulsions ... ..	1	...	1	...	...	...	...	...	1	...	...	...	3
Morbus cordis, pre-existing .. ..	1	2	...	...	...	...	...	...	...	...	...	...	3
Purpura, hæmorrhagica... ..	...	...	...	...	1	...	...	...	...	...	...	...	1
	51	67	72	67	53	13	49	23	65	50	8	3	521



TABLE XVI.—*Causes of Death in Scarlet Fever, 1906.*

	Simple.	Septic.	Toxic.	Not stated.	Total.
I. <i>Death from the primary disease</i> ...	1	162	72	88	323
II. <i>Death from complications:—</i>					
Relapse ... ..	...	3	...	3	6
Pyæmia ... ..	...	6	...	1	7
Meningitis ... ..	3	4	...	2	9
Otitis and meningitis ... ..	...	5	...	...	5
"  "  sinus thrombosis ... ..	...	1	...	...	1
"  "  cerebral or cerebellar abscess ... ..	...	3	...	...	3
Post-pharyngeal abscess ... ..	...	2	...	...	2
Laryngitis ... ..	...	5	1	1	7
Bronchitis ... ..	1	1	...	...	2
"  capillary ... ..	...	1	...	...	1
Pleurisy ... ..	1	1	...	...	2
Broncho-pneumonia ... ..	2	23	2	9	36
"  "  and ententis ... ..	1	...	...	...	1
"  "  "  pleuritic effusion ... ..	...	...	...	2	2
Pneumonia ... ..	5	5	4	4	18
Rheumatism ... ..	...	1	...	...	1
Endocarditis ... ..	...	1	...	...	1
"  ulcerative ... ..	1	...	...	...	1
"  and pericarditis ... ..	1	...	...	1	2
Pericarditis ... ..	1	1	...	1	3
Morbus cordis ... ..	1	...	...	...	1
Cardiac dilatation ... ..	...	...	...	1	1
Nephritis ... ..	5	12	...	8	25
"  and empyema... ..	1	...	...	...	1
"  "  pneumonia ... ..	1	2	...	...	3
Diarrhœa ... ..	2	...	...	...	2
Cellulitis of neck ... ..	...	7	...	3	10
"  "  arm and trunk ... ..	...	1	...	...	1
Cervical adenitis and laryngeal obstruc- tion ... ..	...	2	...	...	2
III. <i>Death from other causes than Scarlet   Fever or its usual complications:—</i>					
Burns ... ..	1	...	...	...	1
"  and meningitis ... ..	1	...	...	...	1
Diphtheria... ..	3	2	...	2	7
Measles ... ..	8	3	...	...	11
"  and diphtheria .. ..	1	...	...	...	1
Tuberculosis, pulmonary ... ..	1	1	...	...	2
"  acute miliary ... ..	4	...	...	...	4
"  meningeal ... ..	4	1	...	...	5
Empyema, pre-existing... ..	1	...	...	...	1
Appendicitis ... ..	...	...	...	1	1
Internal hernia ... ..	1	...	...	...	1
Convulsions ... ..	2	...	...	1	3
Morbus cordis pre-existing ... ..	3	...	...	...	3
Purpura hæmorrhagica ... ..	...	...	...	1	1
Total ...	57	256	79	129	521

TABLE XVII.—*Causes of Death in Diphtheria, 1906.*

	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Fountain	Grove.	South-Eastern.	Park.	Brook.	Gore Farm.	Total.
<i>I. Death from the primary disease:—</i>												
Cardiac failure ... ..	28	14	18	45	35	...	16	10	30	38	...	234
„ paralysis* ... ..	...	16	3	23	...	4	29	7	...	1	...	83
Laryngeal obstruction ...	1	...	1	...	...	...	1	10	...	...	...	13
Extension of membrane to lungs ... ..	4	...	...	...	...	...	7	...	3	4	...	18
Convulsions ... ..	...	...	...	...	1	...	...	...	...	...	...	1
<i>II. Death from complications:—</i>												
Paralysis ... ..	2	...	3	1	...	...	...	...	2	5	...	13
Bronchitis ... ..	1	...	...	...	...	...	...	...	...	...	...	1
„ capillary ... ..	...	...	...	1	...	...	...	...	...	...	...	1
Broncho-pneumonia ... ..	6	3	2	6	4	...	1	...	3	1	...	26
Pneumonia ... ..	2	2	4	3	...	...	...	...	2	1	...	14
Hæmorrhage from tracheal wound ... ..	1	...	...	...	...	...	...	...	...	...	...	1
Cellulitis of tracheal wound ...	...	...	...	...	...	...	...	2	...	...	...	2
„ „ neck ... ..	1	...	...	...	...	...	...	...	...	...	...	1
„ „ arm ... ..	...	...	...	...	...	...	...	...	...	1	...	1
Cancorom oris ... ..	...	...	...	...	...	...	1	...	...	...	...	1
Ante-mortem thrombus in the heart ... ..	...	...	...	...	...	...	1	...	...	...	...	1
<i>III. Death from other causes than Diphtheria or its usual complications:—</i>												
Scarlet fever ... ..	...	...	...	1	1	...	...	...	2	...	1	5
Measles ... ..	3	...	2	...	...	...	...	3	6	3	...	17
Whooping cough ... ..	...	...	...	...	...	...	...	...	1	1	...	2
Tuberculosis, acute miliary ...	1	...	1	...	...	...	1	...	...	...	...	3
„ meningeal ... ..	...	...	...	...	1	...	...	1	1	...	...	3
„ peritoneal ... ..	...	...	1	...	...	...	...	...	...	...	...	1
Syphilis, congenital ... ..	...	...	...	...	...	...	1	...	...	...	...	1
Hip disease, lardaceous disease ...	...	1	...	...	...	...	...	...	...	...	...	1
Morbus cordis ... ..	...	1	...	...	...	...	...	...	...	...	...	1
Pneumonia, pre-existing ... ..	...	...	...	...	...	...	...	1	...	...	...	1
Total ... ..	50	37	35	80	42	4	58	34	50	55	1	446

\* There is considerable divergency of practice as to which of the early deaths should be recorded as from cardiac paralysis and which from cardiac failure. For this reason the former heading is included in Section I. although it includes also cases where cardiac paralysis was a late complication.

TABLE XVIII.—*Causes of Death in Enteric Fever, 1906.*

	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Park.	Brook.	Total.
I. <i>Death from the primary disease</i> ...	5	7	2	12	6	7	4	...	5	48
II. <i>Death from complications:—</i>										
Relapse and perforation ...	1	...	...	...	...	...	...	...	...	1
"    "    hemorrhage ...	1	...	...	...	...	...	...	...	...	1
Fatty degeneration of the heart ..	1	...	...	...	...	...	...	...	...	1
Bronchitis ...	1	...	...	...	...	...	...	...	...	1
Broncho-pneumonia and stomatitis	...	...	...	...	...	...	...	...	1	1
Pneumonia ...	...	...	...	2	4	1	2	...	2	11
Pleuritic effusion ...	...	...	...	...	...	1	...	...	...	1
Hæmorrhage... ..	4	2	...	2	1	2	...	1	4	16
"    and bronchitis ...	...	...	...	...	...	...	...	...	1	1
Perforation ...	5	5	1	2	6	2	1	...	1	23
Peritonitis ...	1	...	...	...	...	...	...	...	1	2
III. <i>Death from other causes than Enteric Fever or its usual complications:—</i>										
Erysipelas ...	...	...	...	...	...	1	...	...	...	1
Total ...	19	14	3	18	17	14	7	1	15	108

### 9. A NOTE ON RHINORRHŒA IN FAUCIAL DIPHTHERIA.

By J. D. ROLLESTON, M.D., Assistant Medical Officer, Grove Hospital.

From an early stage in the history of diphtheria the occurrence of nasal discharge preceding or accompanying the angina has been well known. Misled by the fact that a nasal discharge, apparently benign in nature, may sometimes precede very severe diphtheria, Bretonneau, who first established diphtheria as a specific disease, formulated the law that diphtheria always has a nasal origin. The nasal fossæ according to him were the nest from which the membrane is carried to the lower parts. The exaggeration of this statement was obvious. Trousseau, between whom and Bretonneau a controversy arose, had no difficulty in showing that diphtheria is not always preceded by a nasal discharge, and fell into the opposite error of denying the possibility of the nasal onset of diphtheria. Membranous coryza, according to Trousseau, was merely a complication of the angina. The question of the nasal origin of diphtheria was soon forgotten, and it is only within the last few years that it has been revived by Sevestre, who states that careful inquiry from the parents of children affected with faucial diphtheria will often elicit a history of a nasal discharge. More recently Marfan has declared that while it is rare for a child to complain of a sore throat at the very beginning of diphtheria a mucous hypersecretion of the nostrils at that time is not uncommon. The pharyngeal tonsil, according to Marfan, is probably the site of origin of diphtheria. It is obvious that pre-existing adenoids would predispose to diphtheria originating in such a spot. The frequency of adenoids in fatal cases of diphtheria has been shown by Cottier, who in 38 autopsies on diphtheria patients found adenoids in 50 per cent.

The great authority of Trousseau is responsible for the erroneous doctrine

that a nasal discharge in diphtheria is invariably of bad omen. "Coryza, even of a slight degree, is a serious occurrence, for it indicates that the specific phlegmasia has invaded the nasal fossæ. . . . Of 20 individuals affected with nasal diphtheria 19 succumb, while of 20 affected with croup you can save a certain number by tracheotomy." Two subsequent writers of the pre-antitoxin era, Cadet de Gassicourt and Hensch, showed that Trousseau's statements were too absolute, both asserting that a nasal discharge during the acute stage of diphtheria was compatible with a mild attack. The truth of this view is confirmed by my own experience, as will be seen below.

The present paper is based on 1,200 consecutive cases of diphtheria that have been under my care in the course of the last four years. Of these, 323, or 26·91 per cent., on admission to hospital, or subsequently during the acute stage, presented a discharge from the nose. There was also a history of recent nasal discharge since the commencement of the disease in 177 others (14·75 per cent.), though in them no nasal discharge was observed either on admission or subsequently. Thus a total of 500, or 41·6 per cent. of all the cases had some nasal involvement.\* Those figures are probably too low, for a slight degree of nasal discharge before admission to hospital may have escaped the notice of the patient or his friends. Further, it must be borne in mind that the absence of rhinorrhœa, or of visible membrane in the nostrils, does not necessarily imply that no nasal diphtheria exists. The nasal membrane may, as autopsies show, be limited to the posterior part of the nares, from which the discharge passes down into the pharynx instead of externally.

As only four of the 177 cases with nasal discharge prior to admission had received antitoxin before admission, and two of the four on the same day that they were admitted, it is obvious that nasal discharge may cease spontaneously. This is most likely to occur in cases which run a mild course, as is shown by the following tables, from which it is seen that, while the self-limiting nasal discharge becomes progressively more frequent in the milder cases, the more persistent nasal discharge becomes progressively more frequent in the severer cases.

TABLE I.—Cases in which nasal discharge occurred as a prodromal symptom, but was not present on admission to hospital or subsequently.

Character of Faucial Attack.	Total Number of Faucial Cases.	Cases with Prodromal Nasal Discharge.	Percentage.
Very severe . . . . .	121	9	7·43
Severe . . . . .	225	24	10·6
Moderately severe . . . . .	108	12	11·1
Moderate . . . . .	305	53	17·37
Mild . . . . .	428	79	18·45
	1,187†	177	

\* Seven purely laryngeal cases and six purely nasal cases which have not been included complete the 1,200 cases.

† Very similar figures are quoted by Glatard, who says that out of 177 cases of diphtheria admitted to the Hôpital Bretonneau, 42·9 per cent. contained diphtheria bacilli in the nose. The great majority of those cases showed clinical evidence of nasal diphtheria as well. In pre-antitoxin times Garnier (quoted by Glatard) found nasal diphtheria in 41·05 per cent., or in 39 out of 95 cases.

TABLE II.—Cases in which nasal discharge was present on admission, or developed subsequently during the acute stage.

Character of Faucial Attack.	Total Number of Faucial Cases.	Number of Cases with Nasal Discharge.	Percentage.
Very severe .. .. .	121	89	73·55
Severe .. .. .	225	112	49·77
Moderately severe .. .. .	108	30	27·7
Moderate .. .. .	305	48	15·73
Mild .. .. .	428	44	10·28
	<u>1,187</u>	<u>323</u>	

Further evidence of the greater severity of the cases in which the nasal discharge persisted until admission is afforded by the following figures. Out of 92 deaths in the 1,200 cases 16, or 1·8 per cent., occurred in the purely faucial cases, among which are included those which had a history of nasal discharge prior to admission only; 14 or 11·1 per cent. occurred in the faucial and laryngeal cases; while in the faucial and nasal cases there were 59 deaths, or a mortality of 18·2 per cent. Intercurrent diseases were responsible for 3 deaths, two being due to scarlet fever, and one to congenital syphilis.

The incidence of albuminuria and paralysis, the frequency and severity of which bear a direct relation to the character of the initial attack, was greatest in the nasal cases. Thus, among the purely faucial cases there were 135 paralysis cases (15·6 per cent.), 27 of which were severe, while in the faucial and nasal cases there were 143 paralysis cases (44·2 per cent.), 59 of which were severe. So with albuminuria. In the faucial and nasal cases there were 215 albuminuric cases (66·5 per cent.), in 32 of which the albumin persisted for three weeks or more; in the purely faucial cases there were 395 albuminuric cases (45·8 per cent.), in 19 of which the albumin was present for more than three weeks.

In the cases of self-limiting nasal discharge the rhinorrhœa was a very early symptom, starting as a rule at an earlier date than the nasal discharge which persisted until admission.

This is shown by the following tables:—

TABLE III.—Day of disease on which a nasal discharge was first noted in cases which on admission and subsequently had none.

1st day .. .. .	88 cases
2nd .. .. .	43 ..
3rd .. .. .	28 ..
4th .. .. .	6 ..
5th .. .. .	7 ..
6th .. .. .	5 ..
	<hr/>
	177 cases

TABLE IV.—Day of disease on which a nasal discharge was first noted in cases in which it was present on admission or subsequently.

1st day	..	..	..	..	..	..	89 cases
2nd	..	..	..	..	..	..	69 ..
3rd	..	..	..	..	..	..	68 ..
4th	..	..	..	..	..	..	50 ..
5th	..	..	..	..	..	..	37 ..
6th	..	..	..	..	..	..	6 ..
7th	..	..	..	..	..	..	4 ..
							323 cases

Though the self-limiting nasal discharge was more common in young children it was not confined to them; 26 out of the 177 cases occurred in patients between the ages of 10 and 36 years.

A previous history of recent nasal discharge was more frequent in the laryngeal cases than in those which were purely faucial. Out of 133 laryngeal cases in the 1,200, 31, or 23·3 per cent., had such a history; while out of 861 purely faucial cases, 152, or 17·65 per cent., had had a nasal discharge at the beginning of their illness. It is interesting to note that in three out of seven cases (42·8 per cent.), which on admission were clinically cases of purely laryngeal diphtheria, there was a recent history of nasal discharge. Such cases are especially likely to occur in very young children. The nasal diphtheria of infants usually remains localised to the nose, but it may spread, the membrane passing down the sides of the pharynx, where it may easily escape observation. In seven cases of nasal diphtheria in nurslings recorded by Ballin there were two in which the larynx was affected.

#### SUMMARY.

1. A large percentage of all cases of faucial diphtheria admitted to hospital has a history of rhinorrhœa.
2. In a certain number of cases which clinically are purely faucial, rhinorrhœa is an early symptom, subsequently disappearing without treatment.
3. The frequency of this early and transitory rhinorrhœa bears a direct relation to the mildness and an inverse relation to the severity of the faucial attack.
4. Faucial cases which are also clinically nasal are more severe than those which are clinically faucial only.
5. Faucial cases which are also clinically nasal as a rule develop the nasal discharge at a later date than those which are clinically faucial only.
6. Early and transitory rhinorrhœa is relatively more common in laryngeal cases than in those that are purely faucial.

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## RETURN CASES OF SCARLET FEVER. A SUGGESTION.

By F. J. WOOLLACOTT.

In establishing hospitals for scarlet fever there are two main objects in view ; first the complete isolation or segregation of the patients during their illness so that infection cannot spread to the rest of the community, and secondly the provision of efficient medical control and nursing. Probably these two objects are at the present time fairly well attained. A third essential is to free the patients from infection, at the conclusion of their illness, or at all events not to allow them to return home till they are no longer likely to spread the disease. It is in this particular that hospital efficiency sometimes breaks down, and it is on this failure that the recent attack on Isolation Hospitals has been to some extent based.

Everyone with experience of scarlet fever admits that, in spite of all precautions, patients sometimes spread the disease after returning home. The same trouble does not arise in other infectious diseases to anything like the same extent. It is easy to say when the infectiousness of small-pox, for example, is at an end ; but with scarlet fever there is always some doubt and uncertainty, and, in the present state of our knowledge, we have to confess that we can never be quite sure when any single case is quite free from infection. How much harm results from the discharge of patients still in an infectious state we have no accurate means of judging. If inmates of the same house or relations are attacked we probably hear of it, but not so when the infection attacks schoolmates and casual associates. Moreover, the discharged patient may not come into contact with susceptible persons, and therefore, although still infectious, may have no opportunities of doing mischief.

While admitting all this, however, there are facts that make it clear that certain classes of patients are more likely than others to retain and spread infection. Children, for example, are more likely to do this than adults, and complicated and severe rather than simple, mild cases. The whole matter has been made the subject of much investigation ; and the investigators are unanimous in attributing the spread of infection chiefly to some unhealthy condition of the naso-pharynx, usually associated with discharge from the nose, ear or throat, present when the patient left hospital, or arising soon afterwards (1) (2) (3). In fact there seem to be strong grounds for believing that the organisms of scarlet fever chiefly reside

and persist longest in the naso-pharynx, and therefore, when set free by discharges, are able to communicate infection. Two theories have been invoked to account for this. The first is that the naso-pharynx acts as a store-house, where the organisms, present on leaving hospital, remain for a time without increasing in number, and gradually die out. The second is that it acts as an incubator where the organisms live and multiply. May it not be that there is some truth in both theories? the naso-pharynx being at times a mere storehouse, but in certain unhealthy conditions able to play the part of an incubator. Whatever theory be adopted the fact remains clearly established that it is the patient with nasal or other discharge who is most likely to give rise to infection. The actual occurrence of the discharge seems, in many cases, to be the determining factor, and not the mere presence of the organisms in the naso-pharynx. In the latter case they may remain shut up, so to speak, like enteric fever bacilli in an abscess. Let discharge begin, or let the abscess be opened and the organisms are let loose. It is probable that some rhinorrhœas do not contain the specific organisms and are therefore innocuous, but we have no means of determining when this is the case.

In view of these facts, which, I believe, are now generally admitted, the rational precautions to take seem to be to restore the naso-pharynx to a healthy condition as soon as possible, while the patient is in hospital, and to send him out under such conditions and in such a state of health that discharges are not likely to occur afterwards. These measures would be of less importance if it were possible to disinfect the nose and throat, for, if organisms were destroyed or removed, there could, of course, be no spread of infection. But it has not yet been shown that this can be done with any certainty. Douching with antiseptic lotions will not do it.

Some scarlet fever hospitals now endeavour to separate the convalescent patients from those still in the acute stage. The latter for practical purposes may be considered to last about four weeks, longer of course in complicated cases. This time is convenient, for, after it has elapsed, the onset of dangerous complications, such as kidney or heart affections, is rare; while, as it exceeds the incubation stage of other diseases, the risk of introducing other infections among the convalescent patients is reduced to a minimum. Looking at the matter chiefly from the point of view of the prevention of return cases, *i.e.*, cases due to infection derived from patients discharged from hospital, the subject may be considered under four divisions. For convenience, it may be here mentioned, it is usual to speak of the patients who spread infection as "Infecting," and the proportion they bear to all cases discharged is known as the "Infectivity Rate."

(i.) *Management of the Acute Stage.* The object of treatment should be to restore the throat and the adjacent parts to a normal state, to remove all obvious signs of disease and to prevent any added infection from outside sources. The usual and apparently the best plan is to employ routine douching of the fauces. Whether the nasal cavities should be treated in the same way is doubtful. If there be purulent discharge douching is, I think, advisable, but otherwise perhaps the best plan is to leave the nose alone. The separation of severe or septic and mild cases is probably desirable, although this has not yet been conclusively proved. The strict isolation of each case, or at least every septic case, in a separate room



or cubicle, has been proposed, and seems theoretically desirable; but the difficulties of nursing and the expense entailed, seem to render such a plan impracticable, except on a very limited scale.

One other point in this connection is worth mentioning. It is sometimes noticed, if a hospital be overcrowded, or, if many severe cases, especially in young children, are admitted to a ward, that sooner or later all the patients in the ward get into an unsatisfactory state. Discharges from the nose and ear become common and very difficult to deal with, and troublesome sores of the mouth and lips sometimes make their appearance. For this state of things there is only one satisfactory remedy, viz., to admit no more patients, and to close and disinfect the ward. When it re-opens everything is found altered for the better; complications are less frequent, and whereas before they were apparently hopeless, they now readily yield to treatment. For this reason, I think acute wards should be closed for a few days and disinfected at least twice a year. It is hardly necessary to insist on the importance of disinfecting the nozzles of syringes, &c., that come into contact with the discharges of the patient. In every hospital worth the name this is a routine precaution.

The management of cases of chronic otorrhœa, rhinorrhœa and of unhealthy conditions of the throat is a subject of great practical importance. They cannot always be cured in hospital, and the question arises, how long should they be detained? Rhinorrhœa seems sometimes to depend on diseased conditions of the pharynx, and might possibly be occasionally dealt with by operation, *e.g.*, removal of adenoids and enlarged tonsils. The thin watery discharge from the nose, so often seen in young children, may however persist when there is no obvious disease. Local applications in such cases are not of much service, and perhaps the best treatment is exercise in the open air. With otorrhœa the same difficulty arises, and it has been suggested that, whenever the condition threatens to become chronic, the mastoid antrum should be opened and adequate drainage provided. Whatever is done, however, it is consoling to observe that very many of the patients who are sent out of hospital with persistent mucous discharges never seem to cause any mischief. Is it possible that when the discharge becomes chronic the virulence of the organisms is diminished in some way, while the outward flow washes them away, and at the same time prevents any renewed or more virulent infection from outside? On the other hand, it so often happens that discharges, arising in hospital and temporarily cured before the patient leaves, reappear later and spread infection, that one is tempted to believe that under these conditions an actual increase of virulence takes place, such as may occur in diphtheria, or that, owing to some slight affection of the mucous membranes, the organisms may be enabled to multiply and develop their full powers, just as in chronic pyæmia pyogenic organisms may seize on an injured part and give rise to an abscess. It may be that patients leaving hospital with otorrhœa or rhinorrhœa still persistent after having lasted for many weeks, are less dangerous than those in whom these conditions have been temporarily checked; but I know of no figures sufficiently reliable to settle the matter. The whole subject needs fuller investigation, and not only investigation, but carefully planned and safeguarded experiments. If experiments are held to be unjustifiable, at least it is possible to inquire fully into the methods adopted

at different hospitals in dealing with the discharges from the nose and ear, and to find out if, other things being equal, any one method gives better results than the others.

It is sometimes assumed that much of the difficulty will disappear as soon as the organism of scarlet fever is discovered. Whether this view is well founded, remains to be seen. The use of bacteriological methods in diphtheria, which is analogous in many ways with scarlet fever, has so far not been of any great service in preventing return cases of that disease. It is interesting to note, as pointed out by the medical superintendents in their observations on Cameron's report (No. 1, p. 220), that the hospitals follow nearly the same order in diphtheria and scarlet fever, as regards the magnitude of their infectivity rates, a fact which suggests that the same causes are at work in both diseases.

(ii.) *Management of the Convalescent Stage.*—In this stage the object of treatment should be to prepare the patient for returning home. Improvement of the general health is of course desirable, but the great aim should be to gradually remove the conditions of hospital life, and introduce those of the patient's own home. It is not possible to disinfect with certainty his naso-pharynx, and to destroy or remove the organisms therein contained; but the attempt may reasonably be made to establish such a mode of life that there is no sudden change when he leaves the hospital, and therefore no tendency to the development of any state of ill-health, associated with discharges such as might set free the organisms, which otherwise would remain latent and harmless, till in time they died out. There is no doubt that at present the conditions prevailing in fever hospitals are largely artificial, or rather un-homelike, and the tendency is for them to become even more so. The temperature of the ward is kept, day and night, as even and unvarying as possible; hot water and steam pipes being used instead of open fires. The patient is only allowed out in fine weather for a comparatively short time each day. His hours for rising and going to bed are not those of his home life. In the case of the poorer classes, the warm clothing and the regular and nourishing meals are not such as the patient has been used to, or such as they are likely to return to. The immediate effect is of course most satisfactory, and the patient perhaps becomes stronger and seems healthier than ever before. But there comes an end to all this.

Sooner or later he has to go home. He returns to the old and perhaps unsatisfactory conditions, but he is no longer inured to them; he is a hot-house plant put out in the cold. He has lost his old hardihood, his powers of resistance are weakened by disuse, the equilibrium of his mucous membranes is unstable, catarrhal inflammations are readily set up, and the resulting discharges set free the bacteria of disease. The consequence is spread of infection and return cases. That many patients after leaving hospital apparently in a robust and healthy state, do quickly show symptoms of ill-health, associated with morbid conditions of the throat and nose, is proved by an investigation reported by Cameron (No. 1, p. 13). 500 unselected recovered patients were examined within a fortnight after their return home. On leaving hospital, 418 of these were well in all respects, but in less than a fortnight this number had been reduced to 184. On discharge, 22 had morbid conditions of the nose, 7 morbid conditions of the throat, 1 enlarged glands, and 8 otorrhœa.

When examined at home these numbers had grown to 88, 156, 109 and 27 respectively. It is true that the hospital and home examinations were made by different observers, but allowing for this, the figures show that, although patients may be discharged in an excellent state of health, they often do not remain so long. This of itself suggests that more attention should be paid in hospital to preparation for the transition to home life. After all, trained and resistant mucous membranes that can adapt themselves to changes in external conditions, are a more valuable asset than the plump flabbiness that hospital life not infrequently produces.

It is a point of interest and perhaps of importance, in this connection, that return cases are rarer in summer than in winter; and it is undeniable that in summer the conditions of hospital life are far more home-like than in winter. In the former season there is little or no artificial heating or ventilation; and the patient is much more out in the open air. The increase in the number of return cases in the colder months is not satisfactorily explained by the increased general prevalence of scarlet fever; for their number bears no constant relation to the total number of cases notified. The determining cause seems to be the weather, or rather may it not be the artificial methods adopted in hospital to neutralise weather conditions? Cameron (No. 1, page 57) states that "the increase in return cases commences somewhat suddenly, and ends with equal abruptness"; an abruptness, I think, almost rivalling that of turning on steam to warm a ward, and the consequent starting of what is perhaps the most artificial factor of hospital life.

If the view that the conditions of hospital life are largely responsible for the occurrence of return cases be correct, we should expect to find that the more artificial the conditions the greater would be the number of return cases. Cameron's figures (No. 1, page 4) may be cited as evidence. They shew that, on comparing the infectivity rates of the different acute hospitals of the Metropolitan Asylums Board, the rate is greatest in the more modern hospitals, *i.e.*, those built most recently, with the newest improvements, and on the most scientific principles, while, on the other hand, the older and so-called "out-of-date" hospitals were the most satisfactory. It is true that the former transferred a relatively small proportion of patients to the convalescent hospitals; but the medical superintendents of the Board in their review of Cameron's report (No. 1, page 206), after a careful examination of the question, concluded that the "transferring of cases affected the infectivity rates of the various acute hospitals to a moderate extent, in no case exceeding 6 per cent." Of the three hospitals, which the medical superintendents considered to have the lowest infectivity rates, two consisted of wooden huts, while the third has actually been condemned and pulled down. It has been rebuilt with modern improvements. The result will be worth watching. Besides the proportion of cases transferred there are two other factors that may influence the infectivity rate of a hospital; first, the character of the administration; and secondly, the type of cases admitted. There is no evidence that the newer hospitals are worse off in either of these respects than the older ones. Looking at all the facts the conclusion cannot be avoided that recent improvements in hospital construction have not, to put it with strict moderation, tended to reduce the number of return cases. Their influence, as far as can be judged, is in the opposite direction.

What then should be the right treatment of the convalescent stage? Its aim should be to "harden" the patient, and to accustom him again to the changes that are bound to occur when he returns home. The temperature of the ward should be allowed to vary a good deal; at night it should be considerably lower than in the day. Open fires should be employed, and not an elaborate system of hot water pipes. The patients of suitable age should go out of doors daily in nearly all weathers, common sense precautions being taken that they do not get wet. Exercise sheds should be provided for rainy days, roofed, but open at the sides. If space be limited, let the wards be so built that there is a space under them in which exercise can be taken. The clothing and food should, of course, be good; and, in the case of the poorest patients, better than they would have at home. But the clothing should be that suitable for healthy persons, and not for invalids, and the food should be plain. It is readily admitted that, under this management, some patients will be temporarily inconvenienced. Some will probably develop a "cold in the head," or some other similar ailment, and it may be reasonably presumed that they would have done the same, if they had returned home without passing through a preparatory stage. Is it not better for them to get the "cold" over in hospital, where it can do little or no harm?

*Convalescent Hospitals.*—In London, and possibly elsewhere, special hospitals are provided for patients in the convalescent stage of scarlet fever. It is usually considered essential that such hospitals should be in the country, so that the inmates may breathe purer air and live under healthier conditions. It is assumed, and possibly correctly, that in this way infection may be more readily eliminated. The question as to the relative frequency of return cases in connection with these hospitals and those in town has not yet been satisfactorily answered. Neither Simpson's or Cameron's investigations afford adequate help. Simpson's tables include both scarlet fever and diphtheria cases, but Cameron (No. 1, page 159) has re-examined his figures and finds that the infectivity rates for scarlet fever alone of the acute and convalescent hospitals were 1.5 per cent. and 1.2 per cent. respectively. The difference is not great and moreover we have no means of making corrections, such as are admittedly necessary in Cameron's own figures. Simpson's conclusion was that the number of return cases was not reduced by transferring patients from the town to the country. Millard (No. 4), describing his own experience, states that a convalescent home in the country does not, unfortunately, appear to affect the occurrence of return cases. Cameron's figures, however, seem to present the convalescent hospitals in a more favourable light, but any conclusion is invalidated by the admitted fact that only certain selected cases were transferred from the acute hospitals, there not being room for all, while one of the convalescent hospitals was only available for a short time in the summer. It is quite possible, therefore, that an undue proportion of cases, most likely to retain and give rise to infection after returning home, were never transferred at all. This point needs examination.

Cameron (No. 1, page 44) states that among infecting cases it was rare to find patients who had had a mild, presumably uncomplicated attack of scarlet fever. On the other hand a large number of the infecting cases had passed through more severe and complicated attacks, in other words, the

greater the number of mild cases under treatment, the fewer would be the return cases and *vice versa*. Now, was there any difference in the prevalent type of disease at the convalescent and the acute hospitals? Cameron has gone into the matter at some length. His method was to determine the number of cases with mucous discharges, lasting intermittently or otherwise, for a period of one month. It is true that not all cases with discharges are included, but certainly all the most severe are. Now of these patients with persistent mucous discharges only 16 per cent. (No. 1, page 12) reached the convalescent hospital; of whose total number discharged they form 5.7 per cent. (No. 1, page 174). The remaining 84 per cent. represented 12.7 per cent. of the total number discharged from the acute hospitals. In other words the acute hospitals had to deal with a proportion of patients with persistent mucous discharges twice as great as that of the convalescent hospitals. The conclusion is obvious. The latter were unduly favoured. How much allowance should be made for this difference in type of case, we do not know. All that can be said with certainty is that the apparent superiority of the convalescent hospital would be diminished to some extent, the exact degree of which there is not sufficient data to determine.

To one other point in this connection reference must now be made. Cameron (No. 1, page 12) shows that one apparent advantage of the convalescent hospital was in cases discharged after 12 weeks or more. The infectivity rates of these cases was 3.6 per cent. for the acute, and .9 per cent. for the convalescent hospitals, a very marked difference, and at first sight due to the influence of prolonged stay in the country in destroying or eliminating infection. The numbers were, however, comparatively small, and therefore inconclusive. Moreover the question arises, did this prolonged detention arise from the same causes in the two classes of hospital? There are two chief reasons why patients are detained longer than usual: (1) because their attacks of scarlet fever are severe, with complications, particularly those of a septic character; (2) because they contracted some other disease. Now at the convalescent hospitals (No. 1, page 161) 16 per cent. of all patients were detained 12 weeks or more, and 15 per cent. of all those at the acute hospitals. Thus there was no very great difference in this respect. At the acute hospitals, however, a certain proportion of the super-added diseases were contracted quite early, and influenced but little the duration of stay. At the convalescent hospitals a much larger proportion were contracted late, and a large number were merely mild post-scarlatinal diphtheria. It is necessary that these considerations should receive due weight before it can be concluded that prolonged detention in hospital tends to eliminate infection. It is necessary to know in what proportion of patients this detention was due to persistent mucous discharges, and in what proportion to super-added diseases, "relapses\*," or to some chronic complications of scarlet fever, such as kidney or heart diseases. In other words, were they essentially cases of scarlet fever, of a type likely to give rise to subsequent infection, or were they cases, whose prolonged stay was due to causes more or less accidental. It is not enough merely to furnish totals of cases in which

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\* Including relapses proper, and also cases who caught scarlet fever in hospital. The latter are not usually shown in statistics, but they are not altogether unknown.

these causes were present, it is absolutely essential to know how often each one had a direct influence in prolonging the stay in hospital. As far as I can make out, an analysis of cases on these lines tends to explain why in some hospitals the infectivity rate of patients detained long is high, while in others it is low.

On one other point there can be no difference of opinion. Cameron's tables (No. 1, page 175) indicate that even the convalescent hospital, that kept open throughout the year, discharged a relatively larger proportion of patients in the months May to October inclusive, than did the acute hospitals. The figures are 53 per cent. and 45 per cent. Now this is the time when return cases are fewest. According to Cameron (No. 1, page 177), the infectivity rate for all hospitals for these months was under 3.5 per cent.; while in the rest of the year it was 5 per cent. In this respect, therefore, the crude annual infectivity rates need correction, and again the country convalescent hospital suffers.

Now the infectivity rates of the country convalescent and of the acute hospitals were, as determined by Cameron (No. 1, page 175), 3.31 per cent. and 4.55 per cent. respectively. From the difference between these numbers, deductions, whose full extent we do not know, must be made. The superiority of the country hospital may be very slight; perhaps indeed a negative quantity; at all events there is no clear proof that return cases have been rendered less frequent by transferring patients to the country.

Cameron's report, though not conclusive as regards the value of country convalescent hospitals, furnishes some important comparative statistics between acute hospitals situated in healthy outlying suburbs, and those in the more central districts of London, and shows that the infectivity rate of the former was the higher. It should be pointed out that the outlying hospitals did not draw all their patients from the immediate neighbourhood; as a matter of fact, many of them came from the poorest and most densely crowded districts. On this point Cameron is fully confirmed by Turner's report (No. 5) for the years 1902-1904. What then is the cause of the relative failure of the more favourably situated hospitals? While fully admitting that comparisons of this sort are subject to certain possible fallacies, may it not be that life in the country, though pleasant and invigorating, is not under all circumstances a suitable preparation for return to the smoke and fogs of town? The change is sudden, and may determine some disturbance of health, and perhaps inflammation of mucous membranes and consequent discharges. Even granting that country air has greater power of destroying, or enabling the patient to cast off infection, and that therefore fewer cases carry out the organisms of disease, may it not be that the conditions of life are so suddenly and completely altered that in a relatively large number catarrhal and other morbid processes result?

Consideration of one other point will help to illustrate my meaning. Return cases are more common in the winter both in connection with the country and town hospitals, but there is a more marked winter increase with the former than with the latter. In the months May to October inclusive, the infectivity rate of the town hospitals was 3.6 per cent. (No. 1, page 175). For the country hospitals the rate was 2.7 per cent. In the remaining cold months the numbers were 5.3 per cent., an increase of 47 per cent., and 4.4 per cent., an increase of 62 per cent.

respectively. If my view be correct, there should be some additional influence at work in winter which affects the town and country differently. I think we have it in the irritating, catarrh-producing London fog. Patients in town hospitals to some extent are used to it, but patients in the country know it not. The latter have therefore been shielded from one additional and important weather condition to which they have to become re-acclimatised when they return home, and in the process they often suffer.

The experiment seems well worth trying of having the convalescent hospital, or as I prefer to call it, the preparation-for-home hospital, in the district where the patient lives, so that he may breathe the same air as that of his home. At the same time he will be as much removed from the concentrated infection of the acute wards as if he had been sent to the country. That such removal is of great value I fully believe, for my objections do not apply to convalescent hospitals in general, only to those situated in the country. In fact, one of the greatest puzzles has always been that although the country hospitals possess this enormous advantage, they do not show better results.

(iii.) *Discharge of Patients from Hospital.*—The mode of procedure, now happily discredited, but not yet generally discontinued, has usually been as follows: The patient, after a stay of 6 weeks or more in luxuriously warmed wards, and carefully protected from the inclemencies of the weather, is one day led off to the discharge rooms. He has a hot bath and is thoroughly washed all over and carefully dried before a fire. He is then dressed in his own clothes, sometimes thin and insufficient, and delivered over to his friends. They take him home, perhaps in rain, or wind or fog; perhaps in a draughty 'bus or train. What reason for wonder is there that sometimes he "catches cold," that rhinorrhœa begins, and return cases follow. I suppose, if we were to deliberately set to work to produce nasal catarrh, we should choose some such method as that just described; yet that is the procedure often followed, although it has been known for years that the one thing to avoid, if possible, is the occurrence of any discharge from the nose. Does not common-sense suggest that the right principles that should govern the methods of discharging patients are to "harden," or re-acclimatise them to the conditions of outside life, during the last part of their stay in hospital; to give up the hot bath immediately before leaving, and by having the hospital near their homes to avoid long journeys by 'bus or train, especially in inclement weather?

There are certain patients who cannot be submitted to the preparation-for-home treatment already outlined. I refer to those suffering from chronic ailments, from some previous illness or accident which confines them to their beds; or from some complication of scarlet fever, such as kidney or heart affections, which do not clear up, but leave the organs permanently damaged. The plan usually adopted in dealing with these cases is as follows: They are washed as thoroughly as possible on the day of discharge, or on the previous evening, in the latter case being kept for the night in an uninfected room. Then, carefully wrapped in blankets, they are sent by ambulance, either to some general hospital or infirmary or to their own homes. I have no statistics on the subject, but as far as I am aware, these patients do not spread infection afterwards, although they may have been kept entirely in an acute ward, and never allowed out of doors. Does this invalidate

the views previously expressed? I think not. It is true they have had no preparation in any way for discharge, but they do not need any. They are not going out to live the ordinary life of a healthy person. They go out as invalids, and as such they are still going to be treated. They are merely exchanging the artificial conditions of one hospital for those of another, or for those of the sick room at home. There is no sudden change.

(iv.) *Management of Patients after return home.*—There are no absolute criteria by which a patient, convalescent after scarlet fever, can be judged to be free from infection, and undoubtedly many patients are and always will be, in the present state of knowledge, discharged while still harbouring infection. Warning should be given, therefore, to parents and advice as to certain necessary precautions. In the first place they should be instructed to keep the patient from close association with other children, especially if he show signs of any mucous discharges. In the second place it should be pointed out that he is not yet fit for ordinary life, and that there should be a home convalescent period, during which he must be carefully looked after. Above all, precautions should be adopted and only gradually relaxed, in order to avoid "catching cold." In this way we may hope in some measure to effect a gradual transition from the hospital to the home conditions of life. Unfortunately, many people, especially among the poorer classes, have neither inclination or opportunity for carrying out these suggestions. They assume that their children would not be sent out of hospital unless free from infection, and very little assistance can be expected from them as a rule.

There is one class of patients, however, of whom even the poorest and most neglectful are more or less careful, viz., the infants and very young ones. These are usually looked after with some care, especially after an illness. They remain in the company of their mothers most of the day, stay a good deal indoors, and are allowed out only when properly wrapped up and in suitable weather. The change from hospital to home life is, in their case, marked by less abruptness than with older children, and they should, therefore, if the view expressed in this paper be correct, give rise to fewer return cases. Cameron's figures on this point are (No. 1, page 211):—

AGE.	0—1	1—2	2—3	3—4	4—5	5—10	10 and upwards.
Discharges ..	146	540	1033	1403	1639	6029	4711
Infecting Cases ..	4	22	26	60	100	307	129
Percentage ..	2·74	4·08	2·51	4·26	6·10	5·10	2·74

In considering this table, some explanation is necessary. The figures relate to patients, under the care of the Metropolitan Asylums Board, whose practice it is, with very few exceptions, not to send children under the age of 3 to the convalescent hospitals. Consequently such patients do not receive the assumed advantages of country air. Moreover, in the two acute hospitals that remove the convalescents to separate wards, no such wards are provided for the very young children; so that during their whole stay in hospital they are in close association



with patients still in the acute stage. Again, scarlet fever is a far more severe and dangerous disease in early youth than late in life; complications, especially, those of a septic character and associated with discharges, being more common, more severe, and more difficult to cure. In other words it is the very young children who, according to the views usually held, are most likely to go out of hospital still retaining infection. But, although they may more often harbour infection, the table shows that they do not spread it so readily as do older children. Is it because they have less opportunity? There is no evidence to show this. It is true that older children have opportunities for infecting their schoolmates, but such results are not usually included in return-case statistics. May the reason not be that the younger ones are better looked after, and therefore do not develop unhealthy conditions? Children from 4 to 10, on the other hand, are no longer household pets. They have reached the age of commencing independence and enterprise, and do not hesitate to risk exposure to cold and wet. But their stamina, especially when sapped by hospital life, is unequal to the strain. Later in life there is more caution, as well as greater resisting power, and return cases become relatively infrequent. It is interesting to note that Cameron (No. 1, page 12) assumes that the country convalescent hospitals are unfavourably influenced as regards their infectivity rates, because they did not admit small children. He does not discuss the converse possibility that small children may have been unduly favoured because they were not sent to the convalescent hospital.

It is probable that on the whole there are fewer return cases, arising from patients treated at home, than from hospital treated cases. There may be various reasons for this, but one is, I think, that the latter, on returning home, very frequently at once begin their everyday life, while the former, after being declared free from infection and leaving the sick room, are still looked upon as convalescent invalids and treated as such. They have still a further stage to pass through in which they are gradually prepared for the conditions and habits of active life.

To sum up. It is realised on all sides, at the present time, that our scarlet fever hospitals are not in all respects satisfactory, and that alterations are necessary. The tendency is to introduce reforms on the lines of stricter isolation. Even individual and solitary confinement has been advocated, the object being to preserve the patient from any added infection that may result from association with others. Another proposal is to increase the vigour of our attack on the organisms that produce the disease. A third plan, the one advocated in this paper, is to so prepare the patients for home that there may be no sudden, abrupt change of environment, using the word in the widest sense, when they leave the hospital. It realises the futility of hoping to destroy or remove all the organisms, and aims at preventing the onset of subsequent conditions of ill health likely to give rise to discharges from mucous surfaces, such discharges being well known to convey infection. I have referred to some possible fallacies, and hinted at others, but believe my contention is, in the main, correct. The home life of our patients varies widely in character, for fever hospitals admit all social classes, so that a *regime* suitable for one patient may be unfit for another. This is a difficulty even under present conditions, and would become even more so if the plan advocated be adopted, but this and even greater difficulties, may be overcome by tact and common sense.

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