

[Report of the Medical Officer of Health for Edmonton UDC 1897].

Contributors

Edmonton (London, England). Urban District Council.

Publication/Creation

1898

Persistent URL

<https://wellcomecollection.org/works/gpkm4npw>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution, Non-commercial license.

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

ADDISON HOUSE,

UPPER EDMONTON.

April 17th 1898.

Dear Sir,

I beg to send you herewith a copy of my Annual Report for 1897.

Will you kindly inform me whether the following work is in the Library;—


Proust. Pneumonie traumatique.

(Thèse de Paris 1884), & whether the Library regulations would allow you to send it to me for 2 or 3 days?

Yours faithfully,

Charles D Green.

The Librarian of the B. M. A.



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30431360>

ANNUAL REPORT

OF

Medical Officer of Health,

OF THE

EDMONTON URBAN SANITARY DISTRICT

FOR THE YEAR 1897.

place between 1881 and 1891; from the figures supplied in the 1891 census return, it was deduced that there were on an average 6.1 persons to each inhabited house; now the number of inhabited houses in the district shewn on the rate books for 1897 is 5,527, and if we assume that the average number of persons per house is the same as in 1891, we should get the number of inhabitants by multiplying 5,527 by 6.1, this gives 33,714 as the estimate of population, a result fairly in accordance with that obtained by the other method.

During the year 1897, 414 houses were occupied for the first time.

The figures in the succeeding paragraphs have been deduced from the data in the tables.

Deaths.

The total number of deaths that occurred in the district during 1897 was 704.

Of these 84 occurred in the two Institutions belonging to the Guardians of the Poor for the Strand Union, and do not properly belong to the vital statistics of this district; they have therefore been excluded from the subsequent calculations.

In the Edmonton Workhouse there occurred 147 deaths, 30 of which belong to this district; the following table prepared from information kindly supplied by the Registrar of Births and Deaths and by the Master of the Edmonton Workhouse, gives a classification of the population of and deaths in the Edmonton Workhouse, according to the parishes to which they belong:—

	Population.		Deaths.	Births.
Edmonton	162	...	30	11
Tottenham	220	...	44	15
Hornsey	48	...	23	6
South Hornsey	23	...	6	2
Enfield	76	...	15	4
Wood Green	52	...	11	3
Southgate	19	...	9	2
Cheshunt	31	...	6	4
Waltham	19	...	3	—
	<hr/>		<hr/>	<hr/>
Total	650		147	47
	<hr/>		<hr/>	<hr/>

I have information respecting 39 deaths of Edmonton residents occurring without the district, my information on this head has been rendered more complete this year than in former years, by a return furnished by the Registrar for Tottenham, of deaths of Edmonton residents occurring at the Tottenham Hospital, 17 in number.

Death Rate of District.

This I have estimated as follows :—

Deaths occurring in District and belonging thereto	473
Deaths occurring in Edmonton Workhouse belonging to District	30
Deaths occurring outside District, but belonging thereto	39
Total	542
Estimated population of District	33,804
Portion of population of Edmonton Workhouse belonging to District	162
Total	33,966

Death rate of District, 15.95 per 1000.

Infantile Mortality.

The number of deaths of children under 1 year was, in Edmonton District, 175, in Edmonton Workhouse belonging to District, 2, and occurring outside District but belonging thereto, 7, total 184; from this number 21 deaths attributed to premature birth may be deducted, leaving 163, this with the mean of the registered births for 1896 and 1897 = 1,037, as the basis of calculation, gives an infantile mortality of 157.18 per 1,000. A high rate.

The following table shows a classification of the infantile deaths according to the time at which they occurred, and the part of the district in which they occurred, and distinguishes the number of deaths arising from certain causes. In this table the premature births and the whole of the infantile deaths in the Edmonton Workhouse are included, but not the infantile deaths occurring without the district.

Locality.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Total.	Measles.	Acute Respiratory.	Diarrhoea.	All other Causes.
1. Town and Bounces Roads with their bye-roads	6	4	9	4	23		4	9	10
2. Hertford Road	3	3	11	3	20		3	8	9
3. Lower Fore Street & bye-roads	4	2	11	5	22		2	10	10
4. Upper Fore Street & bye-roads	2	2	14	10	28	2	4	8	14
5. Angel Road	3	1	18	4	26		4	7	15
6. Church Street	4	1	7	3	15		4	4	7
7. Hyde Lane & bye-roads ...	3	2	8	2	15	1	4	8	2
8. Silver Street & bye-roads ...	3	1	5	4	13		2	5	6
9. Brettenham Road	1	3	4	5	13	1	2	1	9
10. Edmonton Workhouse...	1	1	2	2	6			1	5
Total	26	24	89	42	181	4	29	61	87

District 2 includes the Hertford Road from the low level Station to the northern boundary with its bye-roads, including Grosvenor Road, but excluding Bury Street, and Town and Bounces Roads.

District 5 comprises Angel Road, Raynham Road and their bye-roads.

District 6 consists of Church Street, Bury Street and their bye-roads, and the Edmonton portion of Bush Hill Park.

District 9 comprises Brettenham Road, Fairfield Road and their bye-roads. The respective headings sufficiently indicate the limits of the other districts.

It will be seen that the chief single cause of death was diarrhœa, 61 deaths of infants under one year having occurred within the district, and one death of an infant under one year belonging to the district, occurred without it ; this, using the basis of calculation employed in estimating the total infantile mortality, would give an infantile mortality of 59·7 per 1,000 from this cause alone.

Zymotic Death Rate.

The number of Deaths from the principal Zymotic Diseases, inclusive of Deaths occurring outside the District of persons belonging thereto, is shown in the following table :—

Scarlet Fever ...	...	...	...	5
Diphtheria (including Membraneous Croup)...				18
Enteric Fever ...	...	...	...	5
Measles ...	...	...	...	20
Whooping Cough ...	...	...	...	9
Diarrhœa ...	...	...	...	73
Total ...				130

This, with the estimated population of the district, plus the number of persons in the Edmonton Workhouse belonging to the district = 33,966, gives a Zymotic Death Rate of 3·82 per 1,000, a rate equal to that of last year.

Inquests.

Forty-six inquests were held within the district during the year. 2 were cases of suicide—1 by drowning and 1 by hanging, 14 were cases in which death was caused or accelerated by accidental injuries, and the remaining 40 were deaths due to disease.

The remarks made in last year's report as to the desirability of providing accommodation for these enquiries within easy access of the public means of conveyance still apply.

Uncertified Deaths.

Two deaths were registered as uncertified, the Coroner having decided that no inquest was necessary. In both cases the death was attributed to Diarrhœa. With these 2 exceptions all the deaths were certified by registered medical practitioners or on the finding of a coroner's jury. Six inquests were held without the district on the bodies of persons belonging to this district; 5 were returned as accidental injuries, and 1 as due to disease.

Births.

The number of births registered as having occurred in the district during 1897 was 1,088, and of the 47 births that occurred in the Edmonton Workhouse, the mothers in 11 cases belonged to this district, total 1,099. This with the estimated population as the basis of calculation, gives a birth-rate of 32·5 per 1,000.

Infectious Diseases.

The Infectious Diseases (Notification) Act is in force within the district. The following is a tabular statement of the number of cases of each disease notified during the year, cases notified more than once being counted as one case :—

Scarlet Fever...	...	148
Enteric Fever	...	28
Continued Fever	...	1
Diphtheria ...	...	91
Puerperal Fever	...	5
Erysipelas ...	...	50
		<hr/>
		323
		<hr/>

Scarlet Fever.

148 cases were notified, a number less than either of the two preceding years.

One case occurred in the Strand Union Schools, and was removed to one of the hospitals of the Metropolitan Asylums' Board by the School authorities.

Nothing of the nature of an epidemic occurred during the year, but a succession of small groups of cases.

Of the 147 cases occurring in the district proper, 38 were secondary cases in infected houses, leaving 109 primary cases. From these the following groups may be separated according to the probable source of infection :—

School Attendance	60
School situated without district ...	6
St. James' School	9
Raynham Road School	15
St. Aldhelm's School	4
Croyland Road School	13
Brettenham Road School	9
Small Proprietary School	4
	<hr/>
	60
	<hr/>
House-to-house infections... ..	11
Contracted without district	6
	<hr/>
	77
	<hr/>

In these 77 primary cases the source of infection appeared to be fairly clear from the enquiries made.

Of the 32 other primary cases, 3 were cases in which subsequent observation threw doubt on the diagnosis ; 11 were children below school age ; and 7 were adults.

No facts were elicited which would enable me to classify them into definite groups.

Three of the cases occurred in the Edmonton portion of Bush Hill Park, but not at the same time.

The 38 secondary cases were in 24 houses. In 16 instances there was 1 secondary case, in four 2, in two 3, and in two 4 secondary cases besides the primary case.

In several instances the disease was not notified until more than one case had occurred on the premises, owing to the parents not consulting a medical practitioner respecting the first case.

Five deaths attributed to Scarlet Fever occurred during the year ; 3 in the district, and 2 in the Enfield Isolation Hospital.

There were quite a number of cases in which the symptoms were aberrant, or of so mild a type that they could scarcely have been diagnosed had it not been for the confirmatory evidence afforded by collateral circumstances. The following particulars may be quoted as instances of this class of case :—A child under 2 years of age was taken ill suddenly, it had high fever persisting several days, no rash nor sore throat were observed, though looked for daily, and no desquamation

followed, the child however in the third week became very ill with suppurative otitis, a frequent complication of Scarlet Fever: a brother of this child was taken ill during the first week of its illness, and clearly had Scarlet Fever, with all the usual symptoms—sore throat, rash, and desquamation: the two children were in the same room all through their illness.—About the same time a child living next door was taken ill, had a slight sore throat with fever and a rash, which the medical practitioner in attendance considered to be typical of Scarlet Fever: all symptoms disappeared about the third day, and though the child was carefully observed for three weeks no desquamation whatever was detected: this child was kept apart from the rest of the family, and no further case occurred in the house.

The first of these three cases could hardly have been diagnosed as Scarlet Fever without the collateral evidence afforded by the occurrence of the other cases.

Diphtheria.

The district was somewhat severely visited by this disease during the year, 91 cases having been notified, and 18 deaths having occurred, giving a case mortality of 19.9 per cent.

Twenty-four of the cases (more than one-fourth of the whole) were secondary infections in infected houses, leaving 67 primary cases, of these, in four instances, it was practically certain that the disease was contracted without the district; in two other instances the cases were subsequently notified as Scarlet Fever, leaving 61 primary cases for consideration, of these, 34 primary cases may be grouped together, not that they all occurred at one time, but they all seemed to me to have been connected with one another, directly or indirectly, in some instances the evidence being very clear, the group is made up of cases who attended the Brettenham Road and Raynham Road Board Schools, and of cases arising from intercourse with the infected families, other than that brought about by school attendance, the facts connected with this group of cases which I will call the Brettenham Road Group, were from time to time reported in detail to the Sanitary Committee, but I think it worth while to give a brief recapitulation of them in this place.

Early in May a child died in a house in the Brettenham Road after a few days illness, and the death was certified as due to Meningitis, but before the body was buried a case of undoubted Diphtheria occurred in the house, and shortly afterwards another case, a case also occurred about the same time in the next house, and in a house in the vicinity where children had been staying from the first mentioned house. Within a fortnight of the death from "Meningitis" I have mentioned, a child died in a house in Sebastapool Road after a

few days illness, the children from which also attended the Brettenham Road Board School, and the death was certified as having been due to *Purpura Hæmorrhagica*, but before the body was buried a medical practitioner other than the certifier of the death was called in and found a case of *Virulent Septic Diphtheria* there which proved rapidly fatal, at a table by the side of the bed where this child lay dying, a woman who also attended to the child was found pasting together the cut halves of paper bags which were spread about the room to dry; the bags bore the name of a well-known biscuit manufacturer, and I was informed the particular size then being manufactured was used principally for the reception of childrens' biscuits; the whole consignment of about 4000 bags was seized and taken away by the inspector and destroyed by burning, the paste would be a very apt material to hold the infection; this incident affords a good instance of the great danger involved in the distribution of work connected with the manufacture of articles of food and clothing amongst workers for execution in their own homes.

In May, 4 notifications of primary cases connected with this group other than those mentioned above were received. In June, 5 notifications of primary cases connected with this group were received. In July there were also 5 primary cases. In August only 2 primary cases occurred, and in one of these it was doubtful whether it should properly be included in this group, and during this month the group appeared to die out, probably owing to the closure of the schools. In September however, a recrudescence took place, 9 notifications of primary cases being received distinctly referable to this group, and a considerable extension was threatened; the Council, however, on my advice required the exclusion from schools of all children residing in a certain block of houses, in two of which cases had occurred, for 3 weeks, and I inspected all the children residing therein prior to removing the restriction, and this measure was I believe to some extent instrumental in checking what threatened to be a serious outbreak, and from this time it gradually died out. In October two cases, in November one, and in December two primary cases occurred which appeared to me to belong to this group, it is extremely probable that mild cases occurred which were not notified.

Of the 18 fatal cases that occurred in the district, 13 belonged to this group.

Of the 26 secondary cases in infected houses, 18 belonged to this group, so that it consisted of 52 cases with 13 deaths.

No case had been notified in the Brettenham Road district, nor in any children attending the Raynham Road or the Brettenham Road Board Schools for three clear months prior to the occurrence of the cases I have described as commencing this group.

One of the cases was taken by its mother to London prior to the

Sanitary Authority having been notified of its recovery, but the presumption was that it had recovered prior to removal, the people with whom they had been lodgers could not or would not give me the address to which the child had been taken, so I was unable to ascertain anything further about it.

The remaining cases present no special features for comment, and the facts ascertained with regard to them do not afford material for their classification into definitely connected groups.

All cases notified as Membraneous Croup are included as Diphtheria, but a case certified to have died from "Croup" is not included, the medical attendant having expressed the opinion that it was not Membraneous, disinfection of the premises where the death occurred was however carried out.

Two cases occurred of sudden death in children who had recently suffered from sore throat. Inquests were held in both instances, but no satisfactory evidence of the existence of Diphtheria being forthcoming they are not classified as Diphtheria, it is quite possible however that they were cases of Diphtheritic Paralysis.

Enteric Fever.

Twenty-eight cases were notified with 5 deaths. They were for the most part sporadic cases, and present little for comment in an Annual Summary. One of the cases occurred in the Strand Workhouse, and one was certainly contracted without the district, only 2 instances of secondary cases in infected houses occurred.

Two cases occurred about the same time in a group of 10 cottages deriving their water supply from one well; within a few feet of the well was a defective and choked drain, the evidence scarcely pointed to the well having been the source of infection, but given Typhoid in the group of houses, the risks were obvious enough; the use of the well was therefore at once stopped, the water was examined both chemically and bacteriologically; chemically it shewed but little evidence of pollution, but bacteriologically, it shewed a large number of micro-organisms; the *Bacillus Coli Communis* was identified but not the *Bacillus Typhi Abdominalis*.

Small-Pox.

No case of this disease was notified during 1897.

Puerperal Fever.

Five cases were notified of which 2 were fatal. Two maternity deaths from ruptured uterus formed subjects of Coroners' enquiries.

Erysipelas.

Fifty cases were notified and one death occurred.

Measles.

Although this disease was prevalent in 1896 with unusual severity, the district was again visited in 1897 by a considerable outbreak, the rate of mortality was however, fortunately not so high as that which characterised the outbreak of 1896; though towards the end of the year there was a considerable increase in the severity of type of the disease; during the first six months of the year the disease was practically confined to the Lower Edmonton portion of the district, but during the last 2 months of the year it was very prevalent in Upper Edmonton, principally among families whose children attended the Raynham Road Board School. The Christmas vacation of this school was extended by order of the Council.

Twenty deaths occurred from the disease during the year. In January 1, in February 1, in March 4, in April 2, in May 1, in June 2, in September 1, in November 2, and in December 6.

One of the fatal cases was that of a woman, aged 30 years, who contracted the disease in the 7th month of her pregnancy, she became extremely ill and was confined prematurely, and died. The other fatal cases were all children under 6 years of age.

Whooping Cough.

No unusual prevalence of this disease came to my knowledge during the year. 9 deaths were however attributed to it, all the cases being children under 5 years of age. The disease is regarded with indifference by a considerable proportion of those having the custody of children, and children so affected are allowed in many cases to mix freely with others. There is a very widespread popular opinion that fresh air is beneficial to those having the disease, and under this idea cases are frequently taken out, rides on the tram-car being a very popular way of acting on this opinion.

Diarrhoea.

The high rate of mortality from this disease was maintained during the year; 73 deaths having occurred from it within the district during the year, and 2 outside. Under this head have been included all deaths certified as due to Diarrhoea, Cholera Infantum, Enteritis, Gastro-enteritis, and Intestinal Catarrh, but deaths certified as due to

Marasmus (a term which according to the official nomenclature should be no longer used) are not included, except in those instances where Diarrhoea or some term having a similar meaning has been added to the certificate.

Sixty-one of the deaths from Diarrhoea were deaths of infants under 1 year of age.

Almost the whole of these deaths occurred in the months of July, August, and September, 38 having occurred in the month of August alone.

Under the heading "Infantile Mortality," I have given a classification of these deaths, shewing the parts of the district in which they occurred. The areas chosen will be readily intelligible to anyone well acquainted with the district, but the classification will convey little meaning to anyone without an intimate topographical knowledge of the district.

It may be stated that the divisions are not equal in area, nor is it likely that their infantile population is equal.

District No. 1 is, though a small district, selected because the infantile mortality has here been in my experience always high, the mortality being chiefly in the roads at the eastern extremity of this particular area.

A further consideration of the exact locality in which the deaths occurred shews that practically without exception in each district the mortality has chiefly occurred in certain of the poorer bye-roads belonging to it. For instance, in district No. 3, 8 of the 10 deaths occurred in Sebastopol, Beaconsfield, and Shrubbery Roads.

It is a matter well meriting careful consideration whether the Local Authority can do anything to reduce the prevalence of and the mortality from this disease.

The evidence which has been gathered by those who have made investigations into the causation of this disease, seem to shew that it is a disease of bacterial origin, and that the diffusion of the specific organism thereof is connected with certain conditions of the surface soil and the ground water, and that pollution of the surface soil is certainly favourable to its dissemination.

The conditions under which a considerable number of infants, especially in such areas as I have found to suffer from outbreaks of this disease, are very defective as regards food, clothing, cleanliness, and general management.

I have often seen houses in which infants in the day time are allowed to roll about on a dirty floor, or are stowed away in a filthy and dilapidated perambulator in a dark corner of an ill-kept kitchen swarming with flies, or dragged about the streets by a child scarcely able to carry them, and who in the night time are half stifled in bed with their parents.

Now when once a young infant has got an attack of this disease, it is, under any conditions, in considerable danger, and its cure demands an amount of attention and skill in nursing, which it is not, in very many instances, in the power of its mother to give or to command.

It would, I think, be scarcely possible to organise any system of relief when once an outbreak had started, as the cases occur with such rapidity that there would be no time.

The measures which I should think might prove of service in the treatment of an outbreak of this disease are :—

The establishment of a station where certain dietetic preparations found useful in the treatment of the disease could be supplied ;

The provision of a small staff of nurses who would visit and assist in the management of cases at their homes ; and

The provision of a temporary hospital, where some of the more grave cases could be received—an ordinary house temporarily rented would answer perfectly well.

I am not aware that much has been done hitherto by Sanitary and Municipal Authorities to aid in the treatment of this disease, but as a factor in the Infantile Mortality, at all events in this district, it plays a considerable part.

As an experiment, at first over a limited area, I think some attempt to combat the disease on the lines I have indicated, might usefully be tried, and (should the Council think further of the matter) there is ample time for the Sanitary Committee to discuss the details the means of carrying out any measures that may be adopted, should be ready not later than the 2nd week in July.

As regards the bye-roads at the eastern end of the town and Bounces Roads, where I have always found this disease to prevail in the summer months, I may remark that these roads have never been properly made up ; in the winter (when not frozen hard) they are simply mud swamps, and in summer, when dry, are generally covered with a thick layer of irritating dust, moreover, the vacant lands adjoining are much infested by gipsy encampments.

Anthrax.

A single case of this disease occurred during the year in a lad employed by a horse-hair importer ; it was recognised in a very early stage and sent to a hospital in London, where the seat of inoculation was excised, and the patient made an excellent recovery.

The business has now been removed to an adjoining district.

Hospital Accommodation for Infectious Diseases.

No further provision has as yet been made, and the remarks I have made in previous reports still apply.

The need of adequate provision is felt every year, and the cost and difficulty of providing it will, I fear, increase with delay.

During the year to which this report relates, the want of such provision was most keenly felt in dealing with the outbreak of Diphtheria, there being absolutely no accommodation at the disposal of the Council.

Twenty-six cases of Scarlet Fever were removed to the Enfield Isolation Hospital.

Five cases of Enteric Fever were received into the Tottenham Hospital, admission having been arranged through private sources.

This matter is one still demanding the careful consideration of the Council. The question has been before the Local Authority at intervals during at least seven years, and all that has been actually accomplished (except as regards the agreement with the Small-pox and Vaccination Hospital for the reception of a limited number of Small-pox cases, which has hitherto been found sufficient) is that an arrangement has been effected whereby Scarlet Fever cases can be sent to Enfield Hospital when the authorities there have no other use for the beds. This arrangement has proved of great benefit, but it does not meet the needs of the district, several important cases having been refused for lack of room, and in no instance is your Medical Officer able to order the immediate removal of a case, but the consent of the Enfield authorities has in each separate instance to be first obtained, an arrangement which frequently causes considerable delay, even if the case is ultimately removed.

As regards Diphtheria and Enteric Fever there is no accommodation whatever at the disposal of the Council's Officers.

Office Accommodation for the Sanitary Department.

No fresh provision has yet been made, but the Council has under consideration a plan for dealing with the matter which I trust will be shortly brought to a satisfactory conclusion, and some temporary arrangements have been made.

Infant Life Protection Act.

The Council took proceedings against a person registered under this Act, for failing to notify to the Coroner certain deaths of infants whom she had received under the Act. The party was convicted and a substantial fine imposed.

Slaughter Houses.

These have been regularly inspected, and are on the whole well kept. No fresh license has been granted during the year. One

slaughter house became a dangerous structure and was partly demolished ; it has not yet been re-built.

Cow Sheds.

No additional premises have been licensed. In two instances the over-crowding has been abated by diminishing the number of cows, but no material alteration in the construction and arrangement of any of the premises has been effected.

General Sanitary Work.

Tables in the form suggested by the County Medical Officer setting forth in detail under various headings, the General Sanitary Work done during the year by the Sanitary Inspector and his Assistants have been appended to the official copies of this report, but the following table gives a summary of the chief items :—

Specific Complaints received	...	...	134
Inspections made including re-inspections	...	...	5912
Letters written	...	...	854
Notices served including Statutory Notices	...	...	506
Inspections of Common Lodging House	...	...	58
Removals of gipsies	...	...	269
Seizures of unsound food, number of parcels (in three consignments)	...	...	60
Removal of bodies of persons dying from infectious disease to Mortuary	...	...	6
Cisterns cleansed	...	...	80
New Cisterns provided	...	...	6
Draw-taps removed to main	...	...	15
Closets new-constructed	...	...	7
„ new apparatus provided	...	...	32
„ re-paved, cleansed, &c.,	...	...	97
„ water supply newly provided, improved, or rendered efficient	...	...	102
Examination and repairs of drains	...	...	416
Cesspools cleansed	...	...	3
„ abolished	...	...	7
Total	...	...	8564

The foregoing table is exclusive of work done in connection with new buildings, and of work done pursuant to the Canal Boats Acts.

Changes have been made in the staff during the year whereby the work of Building Inspector is done by an official specially appointed for the purpose, and not as hitherto by the Sanitary Inspector.

Canal Boats.

Sixty-seven inspections have been made, and 5 contraventions of the regulations detected.

I have the honour to be, Gentlemen,

Your obedient Servant,

CHARLES D. GREEN,
M.D. (LOND.), F.R.C.S. (ENG.), D.P.H.
Medical Officer of Health.



A.

TABLE OF DEATHS during the Year 1897, in the Edmonton Urban Sanitary District, classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; public institutions being shown as separate localities. (Columns for Population and Births are in Table B.)	MORTALITY FROM ALL CAUSES AT SUBJOINED AGES.							MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE YEARS OF AGE.																																		
	At all ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.		FEVER.														Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diphtheria and Dysentery.	Rheumatic Fever.	Phthisis.	Breakable Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.	TOTAL.								
									Smallpox.	Scarlatina.	Diphtheria.	Membranous Group.	Typhus.	Ergone Typhoid.	Continued.	Relapsing.	Puer. peral.	10	11	12	13	14													15	16	17	18	19	20	21	22
(a.)	(b.)	(c.)	(d.)	(e.)	(f.)	(g.)	(h.)	(i.)	Smallpox.	Scarlatina.	Diphtheria.	Membranous Group.	Typhus.	Ergone Typhoid.	Continued.	Relapsing.	Puer. peral.	Cholera.	Erysipelas.	Measles.	Whooping Cough.	Diphtheria and Dysentery.	Rheumatic Fever.	Phthisis.	Breakable Pneumonia, and Pleurisy.	Heart Disease.	Injuries.	All other Diseases.	TOTAL.													
Edmonton	478	175	77	31	13	112	65	Under 5 5 upwds.	...	...	2	13	1	...	...	5	...	...	2	...	...	17	9	69	...	...	59	3	6	82	252	
Edmonton Union—	...	...	...	...	...	...	...	Under 5 5 upwds.	...	...	1	3	...	...	...	...	...	...	...	1	3	...	...	...	...	...	37	37	8	97	221	
Of Edmonton Parish	30	2	1	...	...	17	10	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3	
Of other Parishes	117	4	2	...	1	50	60	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7	4	3	1	12	27
Strand Union (including Schools)	84	5	...	...	1	25	53	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	15	15	11	1	69	111
TOTALS	704	188	80	31	15	204	188	Under 5 5 upwds.	...	...	2	13	1	...	...	5	...	...	2	...	...	17	9	71	...	...	51	3	6	93	266	
									...	...	1	3	...	...	...	5	...	...	2	...	...	1	3	...	2	2	65	69	42	10	233	438	
The subjoined numbers have also to be taken into account in judging of the above records of mortality.																																										
Deaths occurring outside the district among persons belonging thereto	39	7	8	...	1	17	6	Under 5 5 upwds.	...	...	2	1	...	...	...	...	...	...	...	1	...	...	...	...	2	...	2	2	...	1	7	15
Deaths occurring within the district among persons not belonging thereto	201	9	2	...	2	75	113	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	...	1	...	...	12	24	
									...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	21	28	16	1	124	190

The subjoined numbers have also to be taken into account in judging of the above records of mortality

B.

TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the year 1897, in the Edmonton Urban Sanitary District; classified according to Diseases, Ages and Localities.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; Public Institutions being shown as separate localities.	POPULATION AT ALL AGES.		Registered Births.	Aged under 5 or over 5.	NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH.												NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITAL.											
	Last Census.	Estimated to middle of 1897.			1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10		
					Smallpox.	Scarlatina	Diphtheria	Membranous Croup.	FEVER.					Cholera.	Erysipelas	Anthrax.	Typhus.	Enteric Typhoid	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas					
(a.)	(b.)	(c.)	(d.)	(e.)	Smallpox.	Scarlatina	Diphtheria	Membranous Croup.	Typhus.	Enteric or Typhoid	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas	Anthrax.	Smallpox.	Scarlatina	Diphtheria	Membranous Croup.	Typhus.	Enteric Typhoid	Continued.	Relapsing.	Puerperal.	Cholera.	Erysipelas	
Edmonton	23,473	33,804	1,088	Under 5 5 upwds.	...	45 103	37 54	...	...	1 27	...	...	...	...	3 12	...	...	...	...	...	...	...	...	...	...	...
Edmonton Union	561	650	47	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	4 1	...	...	...	...	...	...	...	...	...	...	...
Strand Union (including Schools)...	1,346	1,365	4	Under 5 5 upwds.	...	...	...	...	...	...	...	...	...	...	1 1	...	...	...	...	...	...	...	...	...	...	...
TOTALS	25,380	35,819	1,139	Under 5 5 upwds.	...	45 103	37 54	...	...	1 27	...	...	5	...	3 47	1	...	26	...	...	...	5	...	...	...	...

State here whether "Notification of Infectious Disease" is compulsory in the District—Yes.
blank headings the names of any that are notifiable in the District, and fill the columns accordingly.
which such Hospital is situated; and if not within the District, state where it is situated—Enfield.

Since when?—March, 1895.

Since when?—March, 1895. Besides the above-mentioned Diseases, insert in the columns with State here the name of the Isolation Hospital used by the sick of the District. Mark (H) the Locality in

THE UNIVERSITY OF CHICAGO

DEPARTMENT OF THE HISTORY OF ARTS

RECEIVED

FROM THE

LIBRARY OF THE

UNIVERSITY OF CHICAGO

CHICAGO, ILL.

1900

1901

1902

1903

1904

1905

1906

1907

1908

1909

1910

1911

1912

1913

1914

1915

1916