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Government of Bengal

Public Health Department

Bengal Public Health Report

by

Dr. C. A. BENTLEY, M.B., D.P.H., D.T.M.&H.,

Director of Public Health, Bengal

Reports of the Bengal Sanitary Board and the Chief Engineer Public Health Department

For the Year 1925

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Bengal Public Health Department

Part I

Fifty-Eighth Annual Report of the Director of Public Health Bengal, 1925

INTRODUCTION.

Section I.—Meteorology.

„ II.—European Army.

„ III.—Indian Army.

„ IV.—Jails.

These sections are no longer dealt with in provincial reports. But since the meteorological conditions have a general effect upon the public health, the following brief account furnished by the Director-General of Observatories is reproduced.—

2. Rainfall in May, rain fell fairly frequently during the first fortnight. From the 17th to 21st a spell of very wet weather was introduced by a cyclone in the Bay of Bengal, which passed inland near Masulipatam on the 16th, then weakened into a depression and travelled along the coast through Orissa and South Bengal, ultimately disappearing over Assam on the 20th; heavy local falls occurred on the 19th. There was a temporary decrease of rainfall after the 21st, but it again increased on the 25th and was widespread between the 25th and 28th. On the latter date, there was a feeble depression at the head of the Bay. Thereafter, till the close of the month, the monsoon gradually weakened. The aggregate fall was in slight excess in the Dacca and Chittagong Divisions and in slight defect in the Presidency and Burdwan; elsewhere, the departures from normal were less than 10 per cent.

3. The Bay monsoon continued weak till the 18th of June and rain fell only spasmodically during this period. On the 18th, however, the current

strengthened and caused fairly well distributed rain until the 22nd. The last week of the month was marked by a storm from the Bay which crossed the coast between Sagar Island and Balasore on the morning of the 28th, and, advancing in a north-westerly direction, lay over Chota Nagpur on the morning of the 30th. It caused widespread rain and strong winds during the last four days of the month. The rainfall of the month was normal in Coah Behar, in moderate defect in Burdwan, and in slight defect elsewhere.

4. In July, the monsoon was weak during the first week, but strengthened later owing to two depressions in the Bay. The first crossed the Orissa coast on the 11th and, advancing west-north-west, filled up near Jhansi on the 14th. The second formed over deltaic Bengal on the 24th, and disappeared over the north of the Central Provinces on the 29th. The rainfall associated with both the depressions was widespread over the province. In the south-eastern districts, heavy rain fell continuously for several days: Cox's Bazar recorded nearly 23 inches between the 15th and 19th and Chittagong 19 inches between the 17th and 19th. The total for the month was in moderate defect in Cooch Behar, in slight defect in Rajshahi, and nearly normal elsewhere.

5. The activity of the monsoon was maintained during the first three weeks of August, and widespread rain occurred from the 5th to the 7th, from the 11th to the 13th and from the 19th to 21st: the last fall was associated with a depression in the Bay which crossed the Orissa coast on the evening of the 21st and disappeared near Jubbulpur on the

24th. With the passage inland of the depression, the monsoon weakened and comparatively scanty rain fell over the province between the 22nd and 26th. During the last three days of the month, however, rainfall again increased and became widespread under the influence of another depression which entered Orissa from the Bay on the night of the 30th. The month's total was slightly above normal in Rajshahi and Cooch Behar, and in moderate defect elsewhere.

6. The depression over Orissa reached the neighbourhood of Benares on the 2nd September and, then drifting eastwards, filled up over Bihar on the 4th. The very next day, another depression formed near the Sandheads and moving north-west crossed the coast on the morning of the 7th and disappeared over the United Provinces on the 9th. During all this period, widespread rainfall continued in the province. On the 13th, a third depression formed over south-east Bengal. It took a northerly course and disappeared over north Bengal on the 16th. The associated rainfall was heavy over the greater part of the province and caused floods in the Padma, causing parts of Rajbari and Pabna to be inundated and several villages to be submerged. The heavy falls, such as 33 inches at Mungpo and 20 inches at Darjeeling recorded between 8 hours on the 13th and 8 hours on the 17th, were responsible for landslips and breaches on the Darjeeling-Himalayan Railway. The depression also gave rise to stormy weather near Goalundo and at Chittagong and Pabna. From the 24th onwards, the monsoon gradually weakened. The rainfall of the month was in considerable excess in Rajshahi, and in slight excess in the Presidency,

Dacca and Cooch Behar; it was slightly below the average in Chittagong whilst a moderate deficiency occurred in Burdwan.

7. In October, the north-east monsoon set in about ten days before the normal date and was unusually active: rainfall extended into south Bengal as early as the 4th. A depression formed in the Bay during the next twenty-four hours but by the morning of the 8th, it had merged into a trough of low pressure, stretching from the Andamans across the peninsula to the Arabian Sea. This low pressure area persisted till the 13th causing more or less widespread rain in the province. Subsequently, it split up into two depressions, one off Masulipatam and the other near Table Island. The former moved north-east and, on the morning of the 16th, its centre was about a hundred miles east of the Sandheads; it then passed into Upper Burma. The rainfall due to it was widespread over the province: at Calcutta it was so heavy that many of the streets were flooded. Rainfall continued locally till the 20th. The aggregate rainfall for the month was in large excess in Burdwan, in moderate excess in the Presidency and Chittagong and nearly normal or slightly above it in Dacca and Cooch Behar; on the other hand, it was slightly less than the average in Rajshahi. The total rainfall for the whole season, May to October, was 20 per cent. in defect in Burdwan, and within 6 per cent. of the normal in the other divisions.

8. The statement below gives the percentage departures from normal for each month and for the whole period for each division of the province:—

Departure expressed as a percentage of the normal fall.

Divisions.	May.	June.	July.	August.	September.	October.	Monsoon season 1925.
Presidency	-10	-19	+8	-35	+17	+45	-4
Burdwan	-13	-41	-6	-33	-36	+63	-20
Rajshahi	+9	-10	-20	+12	+48	-22	+4
Dacca	+19	-11	-8	-32	+11	+15	-5
Chittagong	+22	-17	+1	-27	-11	+37	-6
Cooch Behar	-7	-1	-43	+23	+10	+9	-4

SECTION V.

Vital Statistics.

General.

9. **The provincial birth and death rates** (*Annual Forms Nos. I and II*). The following statement shows the provincial birth and death rates for the year 1925 calculated on the total population of the Presidency of Bengal (excluding the Chittagong Hill Tracts), which according to the 1921 census, was taken to be 46, 522, 293:—

	Birth-rate.	Death-rate.
1924 (per mille)	29.5	25.9
1925 (per mille)	29.6	24.9
Increase or decrease (per cent.)	+0.34	-3.86
Quinquennial average ..	28.8	27.7
Increase or decrease (per cent.)	+2.78	-10.0

10. **Comparison of Bengal vital statistics with other provinces.**—The table below shows the birth-and death-rates in the various provinces for the year 1925:—

	Birth-rate per mille.	Death-rate per mille.
1. Central Provinces	43.9	27.3
2. Punjab	40.1	30.0
3. Bihar and Orissa	35.6	23.7
4. Bombay	34.7	23.7
5. Madras	33.7	24.4
6. United Provinces	32.7	24.8
7. Bengal	29.6	24.9
8. Assam	29.1	22.5
9. North-West Frontier Province.	26.9	19.8
10. Burma	25.4	18.7

Bengal stood seventh on the list as regards birth-rate and third as regards death-rate. Its position with respect to the rates of natural increase is shown below.—

	Rates of natural increase per mille.
1. Central Provinces	+16.6
2. Bihar and Orissa	+11.9
3. Bombay	+11.0
4. Punjab	+10.1
5. Madras	+9.3
6. United Provinces	+7.9
7. North-West Frontier Province ..	+7.1
8. Burma	+6.7
9. Assam	+6.6
10. Bengal	+4.7

11. **Verification of vital statistics.**—Six hundred and ninety-eight omissions of births and 374 of deaths

were detected by the vaccination staff out of a total of 27,021 cases of births and 16,393 of deaths verified, giving a percentage of 2.6 omissions of births and 2.3 of deaths. Although these percentages are higher than those obtained in the previous year, the detection still is very defective, and this may possibly be due to the fact that the staff was busy in controlling the small-pox epidemic and could not find sufficient time for checking the registers. With a better vigilance, a higher percentage could have been detected. Turning to the divisions, it will be observed from the following table that Presidency Division shows the lowest percentage of omissions, which does not indicate so much an accuracy in the registration of vital statistics in that division as a neglect on the part of the staff to verify a sufficient number of cases.

Percentage of Omissions detected in the various divisions.

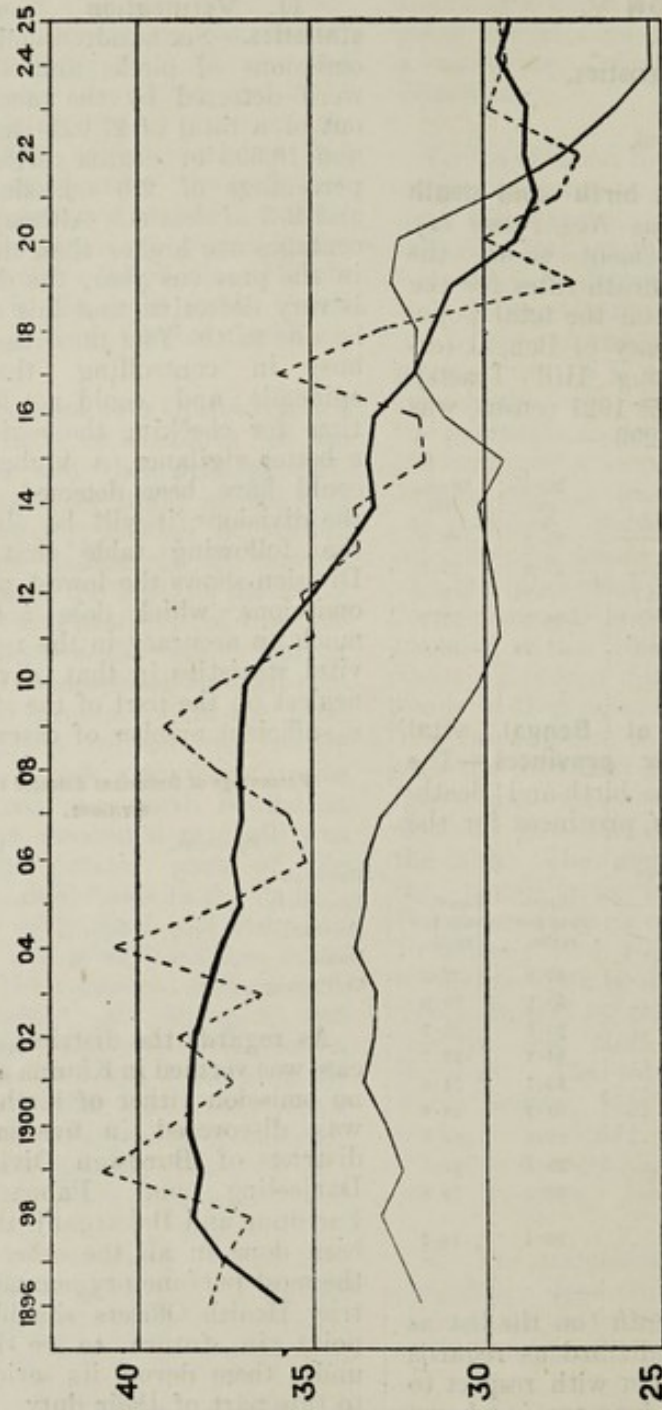
Divisions.	Births.	Deaths.
Burdwan	1.64	2.52
Presidency	.98	1.23
Rajahmahi	4.31	3.68
Dacca	2.92	2.26
Chittagong	4.09	3.05

As regards the districts, not a single case was verified in Khulna and Bankura, no omission either of births or deaths was discovered in five out of the six districts of Burdwan Division and in Darjeeling and Pabna. Excepting Faridpur and Bakarganj, this work has been done in all the other districts in the most perfunctory manner. The District Health Officers should make it a point in future to see that the staff under them devote its serious attention to this part of their duty.

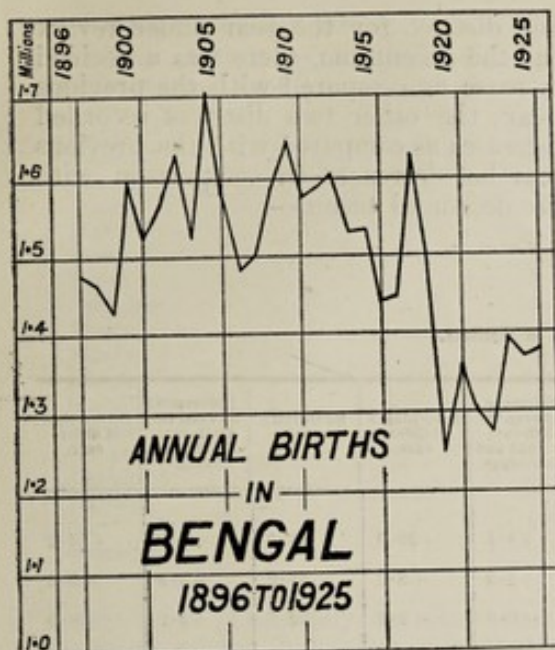
The registration of vital occurrences being highly unsatisfactory, it would be safe to assume the actual birth and death-rates of the province for the year 1925 to be 37.6 per mille and 31.6 per mille respectively, allowing for a recognised omission of 27 per cent. in each case.

Birth-rates.

12. **Birth-rate.**—The total number of births recorded during the year was



Bengal Birth-rate since 1896 with curve indicating the trend (in thick line)
 Curve showing the mortality trend added for comparison (in thin line)



1,377,097, including 717,330 males and 659,767 females, giving a ratio of 108 male children to every 100 females born. The birth-rate for the year (29.6 per mille) showed an increase of .34 per cent. over that of the previous year while it was about one per cent. less than the average for the previous ten years which was 29.98 per mille. Although the trend for birth-rate shows a slight improvement, yet it has to make up much leeway to gain the position it had attained before the fall began in 1919.

13. **Divisional birth-rates.**—The table below shows the birth-rates of the several divisions during the year and the percentage variations.—

Divisions.	Decennial mean (1915-24)	1925.	Differences.	Percentage variations.	1924.	Differences.	Percentage variations.
Burdwan	29.9	32.1	+2.2	+7.3	28.9	+3.2	+11.1
Presidency	28.6	30.5	+1.9	+6.6	28.3	+2.2	+7.8
Rajshahi	32.1	32.6	+0.5	+1.5	30.4	+2.2	+7.2
Dacca	29.6	26.5	-3.1	-10.5	30.0	-3.5	-11.7
Chittagong	29.5	26.2	-3.3	-11.2	29.0	-2.8	-9.6

Burdwan, Presidency and Rajshahi Divisions, which showed decreases last year compared with the decennial mean, recorded increases during 1925; Dacca, on the other hand, presented a decrease, while a marked falling off continued in the Chittagong Division. A comparison with the rates for 1924 shows similar variations. This confirms the opinion expressed in the report for the year 1923, that "in the western portions of the province changes in the vital phenomena tend to move in a direction contrary to those in the east". The following table, taken from the 27th report of the Department of Commercial Intelligence and Statistics, India, shows that the yield of the jute, which is the principal crop of Eastern Bengal was less in 1925 by 3.4 per cent. as compared with the previous year, while that of rice, the chief crop of Western Bengal was 2.8 per cent. greater during the same period and this might account for the lower

birth-rate in the one and the higher birth-rate in the other :—

Total estimated production of rice.

Seasons.	Tons.
1919-20	8,254,000
1920-21	8,219,000
1921-22	9,269,000
1922-23	9,049,000
1923-24	7,509,000
1924-25	7,721,000

Yield of jute in Bengal bales of 400 lbs. each.

Years.	Bales.
1919	7,567,800
1920	5,247,000
1921	3,595,000
1922	4,746,000
1923	7,463,000
1924	7,166,000
1925	6,922,000

14. **District birth-rates.**—The following statement shows that thirteen districts showed an increase and eleven a reduction in their birth-rates during 1925 both as compared with 1924 and with the previous decennium. Of the remaining three while the rates were the same in

one district for the year under review and the decennium, there was a decided increase as compared with the previous year; the other two districts recorded increases as compared with the previous year but decreases in comparison with the decennial mean.—

Birth-rates per mille in districts.

Districts.	Average birth-rates for previous ten years.	Birth-rates per mille for 1925.	Difference between the birth-rate for 1925 and the average.	Percentages of difference.	Birth-rates per mille for 1924.	Difference between the birth-rate of 1924 and 1925.	Percentages of difference.
Murshidabad	39.3	47.4	+8.1	+20.6	41.5	+5.9	+14.2
Dinajpur	35.4	38.3	+2.9	+8.2	35.0	+3.3	+9.4
Rajshahi	34.8	35.4	+0.6	+1.7	32.5	+2.9	+8.9
Nadia	34.8	40.3	+5.5	+15.8	33.7	+6.6	+19.6
Malda	34.6	40.5	+5.9	+17.0	30.0	+10.5	+35.0
Birbhum	34.3	43.7	+9.4	+27.4	37.5	+6.2	+16.5
Bankura	33.4	37.5	+4.1	+12.2	33.5	+4.0	+11.9
Jalpaiguri	33.0	30.4	-2.6	-7.9	31.9	-1.5	-4.7
Chittagong	33.0	30.5	-2.5	-7.6	34.2	-3.7	-10.8
Noakhali	32.8	30.6	-2.2	-6.7	35.1	-4.5	-12.8
Bakarganj	32.0	26.0	-5.1	-16.0	33.5	-6.6	-19.7
Rangpur	31.7	29.2	-2.5	-7.9	31.6	-2.5	-7.6
Darjeeling	31.0	33.7	+2.7	+8.7	33.5	+0.2	+0.6
Khulna	30.2	29.4	-0.8	-2.7	29.5	-0.1	-0.4
Faridpur	30.1	28.1	-2.0	-6.7	29.9	-1.8	-6.0
Dacca	30.0	26.4	-3.6	-12.0	29.0	-2.6	-9.0
Burdwan	29.5	32.9	+3.4	+11.5	27.4	+5.5	+20.0
Midnapur	29.1	29.7	+0.6	+2.0	27.2	+2.5	+9.2
Howrah	28.0	27.6	-0.4	-1.5	27.3	+0.3	+1.1
Mymensingh	27.7	25.5	-2.2	-8.0	28.9	-3.4	-11.8
Pabna	27.5	27.9	+0.4	+1.4	23.6	+4.3	+18.2
Hooghly	27.4	26.7	-0.7	-2.6	25.4	+1.3	+5.1
Jessore	27.4	26.4	-1.0	-3.7	28.2	-1.8	-6.4
Bogra	26.7	28.1	+1.4	+5.2	24.6	+3.5	+14.2
Tippera	25.7	21.3	-4.4	-17.1	22.7	-1.4	-6.2
24 Parganas	24.6	24.6	±0	±0	22.2	+2.4	+10.8
Calcutta	16.4	18.9	+2.5	+15.2	18.3	+0.6	+3.3

Four districts returned a birth-rate above 40 per mille, eight between 30 and 40 per mille, fourteen between 20 or 30 per mille, while Calcutta stood last on the list with a rate of 18.9 per mille.

15. **Birth-rates in towns.**—The aggregate birth-rate of the towns of

Bengal in 1925 was in excess of 1.02 per cent. over that for the previous year, the actual ratios being 19.8 for the former and 19.6 for the latter. Dhuliyan alone recorded a birth-rate above 40 per mille; eleven returned birth-rates between 30 and 40, thirty-eight between 20 and 30,

and sixty-five below 20 :—

The following towns returned obviously impossible rates :—

Katwa	..	..	8.9
Khulna	..	..	9.2
Comilla	..	..	9.9
Jessore	..	..	10.2
Maheshpur	..	..	10.5
Budge Budge	..	..	10.9
North Dum Dum	..	..	10.9
Jalpaiguri	..	..	10.9
Bogra	..	..	10.9
Burdwan	..	..	5.2
Bhola	..	..	5.3
Gaibandha	..	..	6.8
Barisal	..	..	6.9
Gobardanga	..	..	7.2
Jhalakati	..	..	7.4
Rajbari	..	..	7.8
Suri	..	..	8.1
Barrackpur	..	..	8.7

These are practically the same towns as those whose imperfect registration has been commented upon year after year and it is extremely regrettable that, in spite of the fact that the Births and Deaths Registration Act is compulsory in these towns, no material improvement has yet taken place in their recording of vital occurrences. The following statement shows the number of prosecutions and convictions in each municipality during the year under review.—

Prosecutions and convictions in the municipalities during 1925.

Districts and Municipalities showing prosecutions.	Number of prosecutions.	Number of convictions.	Number of acquittals.	Cases struck off or withdrawn.	Number of pending cases at the end of the year.
Burdwan— Raniganj	1	1	..	..	..
Bankura— Bankura Vishnupur Sonamukhi	5 1 6	4 .. 5	 1	1 .. ..	.. .. ..
Midnapur— Midnapur Ghatal Ramjibampur	1 3 1	1 3 1	.. .. ..	.. .. ..	.. .. ..
Hooghly— Bhadreswar	16	16	..	..	..
24 Parganas— Budge-Budge Baranagar Kamarhati Baruipur Titagarh Garulia Naihati Bhatpara Basirhat	26 20 11 12 6 3 21 2	17 20 7 11 6 3 19 ..	1 .. 2 .. 1	2 .. 1 1012 ..	6
Nadia— Kushtia	3	3	..	..	..
Murshidabad— Berhampur Azimganj	33 3	6 ..	.. 3	27 ..	.. ..
Jessore— Maheshpur Rajshahi	3 1	3 ..	.. ..	.. 1	.. ..

District and Municipalities reporting prosecutions.	Number of prosecutions.	Number of convictions.	Number of acquittals.	Cases struck off or withdrawn.	Number of pending cases at the end of the year.
Darjeeling— Darjeeling Kurseong	1 1	1 ..	.. 1	.. ..	.. ..
Rangpur— Rangpur	6	6	..	..	..
Bogra— Bogra	12	6	2	4	..
Malda— Malda Nawabganj	1 2	1 2	.. ..	.. ..	.. ..
Dacca— Dacca Narayanganj	5 1	.. ..	.. ..	1 ..	5 ..
Mymensingh— Tangail	6	4	..	2	..
Faridpur— Madaripur Rajbari	1 6	.. 2	.. 4	1 ..	.. ..
Bakarganj— Pirojpur Patuakhali Bhola	12 5 5 5	8 5 5 5	.. .. .. ..	4 .. .. ..	.. .. .. ..
Chittagong— Chittagong	17	7	..	1	9
Tippura— Comilla Brahmanbaria	3 6	3 3	.. 1	2 ..	.. ..
Total	269	180	16	53	20

16. It will thus be seen that out of a total of 269 cases instituted, only 180 or 66.9 per cent. ended in conviction; 16 persons were acquitted, while 53 cases were withdrawn. Another list appended below shows that 76 out of a total of 115 municipalities in the province excluding Calcutta failed to prosecute a single defaulter.—

List of municipalities which did not report any prosecution during the year 1925.

- | | |
|-----------------------|-----------------------|
| 1. Burdwan. | 20. Bally. |
| 2. Kalna. | 21. South Subarban. |
| 3. Katwa. | 22. Tollyganj. |
| 4. Dainhat. | 23. Rajpur. |
| 5. Asansol. | 24. Jaynagar. |
| 6. Kharar. | 25. North Dum Dum. |
| 7. Chandrakona. | 26. South Dum Dum. |
| 8. Khirpai. | 27. Barrackpur. |
| 9. Tamluk. | 28. Kharda. |
| 10. Hooghly-Chinsura. | 29. Panihati. |
| 11. Bansbaria. | 30. North Barrackpur. |
| 12. Arambagh. | 31. Halisahar. |
| 13. Serampur. | 32. Kanchrapara. |
| 14. Rishra-Konnagar. | 33. Barasat. |
| 15. Uttarpara. | 34. Gobardanga. |
| 16. Kotrung. | 35. Baduria. |
| 17. Baidyabati. | 36. Taki. |
| 18. Champdani. | 37. Kishnagar. |
| 19. Howrah. | 38. Nabadwip. |

39. Ranaghat.	58. Sherpur (Bogra).
40. Birnagar.	59. Pabna.
41. Santipur.	60. Sirajganj.
42. Chakdaha.	61. English Bazar.
43. Kumarkhali.	62. Mymensingh.
44. Meherpur.	63. Muktagacha.
45. Murshidabad.	64. Netrakona.
46. Kandi.	65. Jamalpur.
47. Jangipur.	66. Sherpur.
48. Dhuliyān.	67. Kishorganj.
49. Jessore.	68. Bajitpur.
50. Kotchandpur.	69. Faridpur.
51. Khulna.	70. Barisal.
52. Satkhira.	71. Jhalakati.
53. Debbhatta.	72. Nalchiti.
54. Nator.	73. Cox's Bazar.
55. Dinajpur.	74. Sudharam.
56. Jalpaiguri.	75. Chandpur.
57. Gaibandha.	76. Suri.

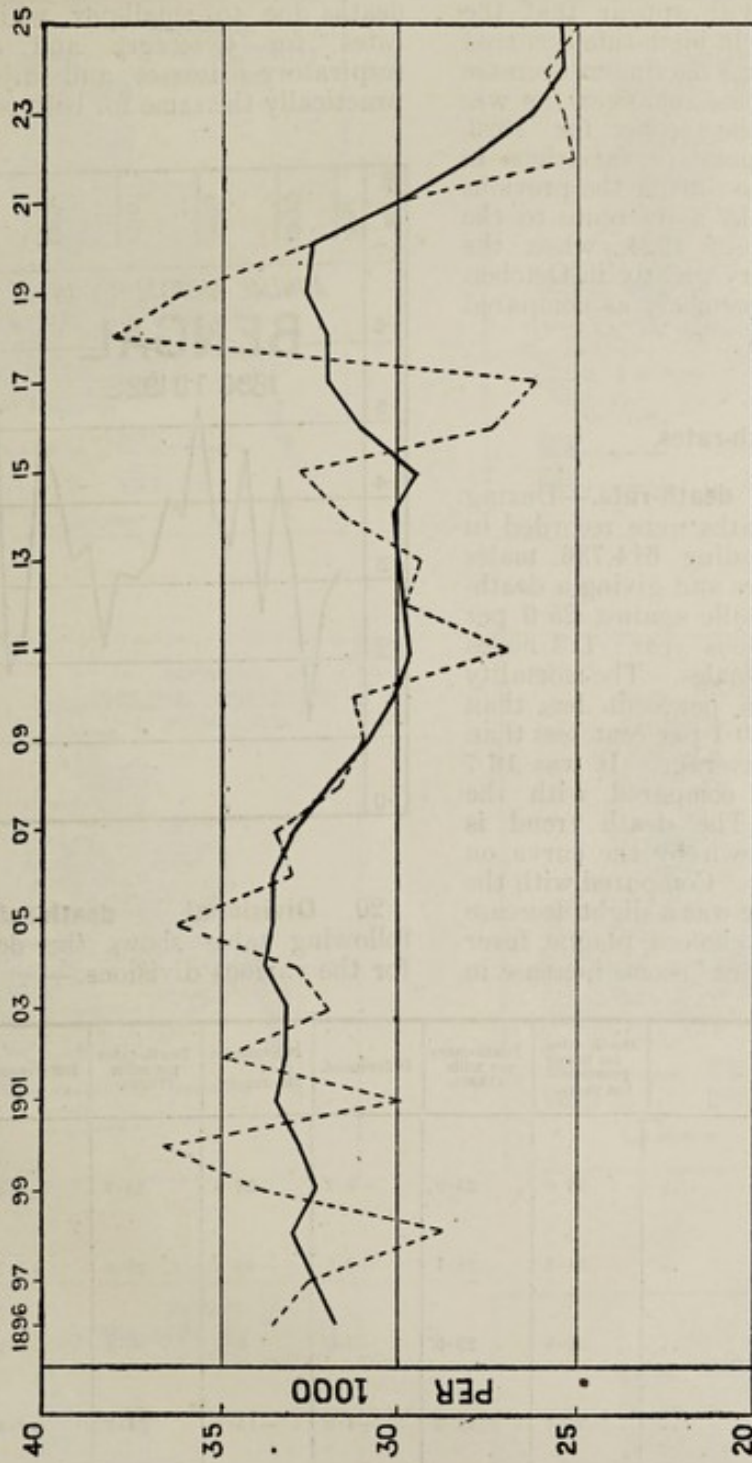
17. **Birth-rates in rural areas.**—The aggregate birth-rate in rural areas during the year under review was 30·3 per mille against 30·1 per mille for the previous year, showing an increase of ·6 per cent. It was in excess of that for the towns by 53·0 per cent.; 91 circles returned a birth-rate above 40 per mille of population and 15 only below 20 per mille. None of the circles recorded a rate below 10 per mille. This marks a great improvement in this matter in rural areas, as compared with the previous year, when only 52 circles recorded rates above 40 and 20 rates below 20 per mille. Murshidabad district as usual heads the list with its 25 registration circles out of a total of 27, returning birth-rates above 40 per mille. Some of the rates returned are apparently open

to doubt, *e.g.*, 102·9 per mille recorded in Malda district.

The thana officers have been relieved of the duty of registering vital occurrences in some districts but it is yet too early to state with any accuracy what the result of this change has been so far, except that the monthly returns of vital statistics have been unduly delayed. It is expected, however, that in course of time matters will improve and a more accurate and speedy system of registration will be established.

18. **Seasonal incidence of births.**—Below are given the crude birth-rates of the province month by month, compared with those of last year.—

Months.	1924.	1925.	Differences.	Percentages of differences.
January ..	2·9	2·4	-0·5	-17·2
February ..	2·6	2·4	-0·2	-7·7
March ..	3·2	3·1	-0·1	-3·1
April ..	2·8	2·4	-0·4	-14·3
May ..	2·2	2·2	±0	±0
June ..	2·1	2·3	+0·2	+9·5
July ..	1·8	1·9	+0·1	+5·5
August ..	1·6	2·0	+0·4	+25·0
September ..	2·2	2·0	-0·2	-9·1
October ..	2·2	2·5	+0·3	+13·6
November ..	2·7	3·1	+0·4	+14·8
December ..	3·2	3·1	-0·1	-3·1



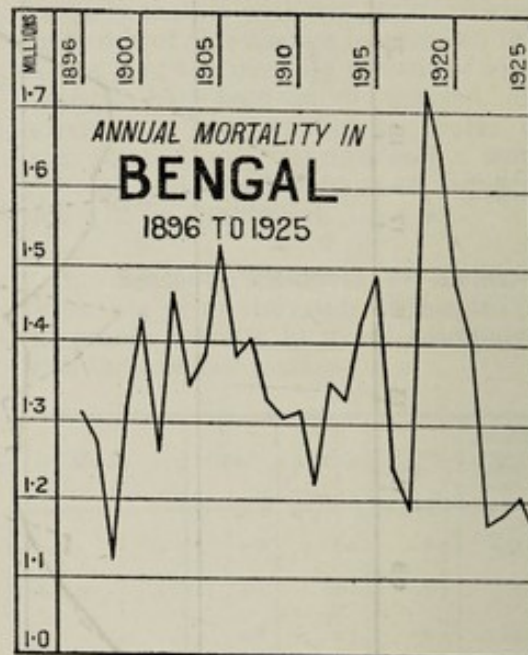
Bengal Death-rate since 1896 with curve indicating the trend.

From this it will appear that the maximum increase in birth-rate occurred in August, while the maximum decrease in January. These changes, as was pointed out in the report for 1923, "obviously correspond to variations in the conception rate during the previous year", as shown by a reference to the mortality returns of 1924, when the deaths declined very greatly in October, November and December, as compared with the previous year.

Death-rates.

19. **Provincial death-rate.**—During 1925, 1,158,473 deaths were recorded in the province, including 614,736 males and 543,737 females and giving a death-rate of 24.9 per mille against 25.9 per mille in the previous year: 113 males died to every 100 females. The mortality rate was thus 3.86 per cent. less than that of 1924 and 10.1 per cent. less than the quinquennial average. It was 16.7 per cent. less as compared with the decennial mean. The death trend is still falling as shown by the curve on the preceding page. Compared with the previous year, there was a slight decrease in mortality due to cholera, plague, fever and "all other causes", some increase in

deaths due to small-pox while death-rates for dysentery and diarrhoea, respiratory diseases and injury were practically the same for both years.

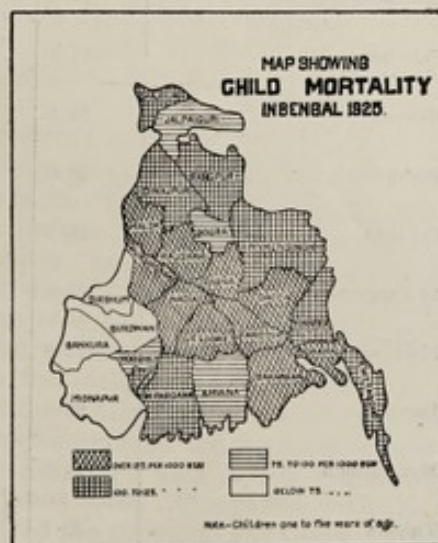
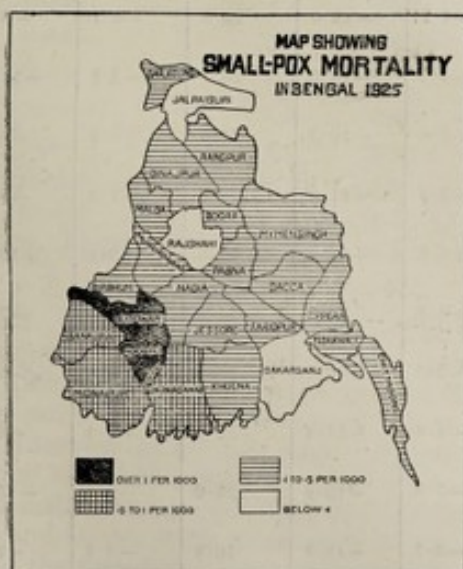
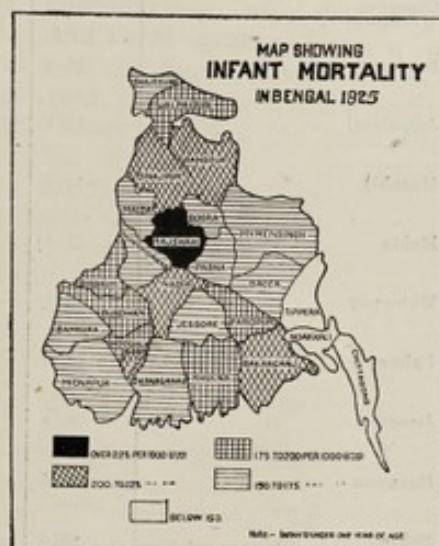
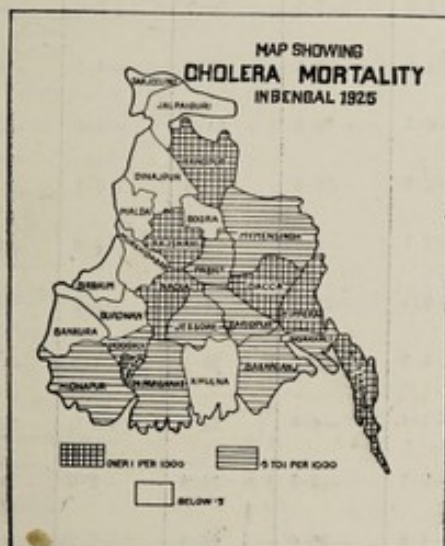
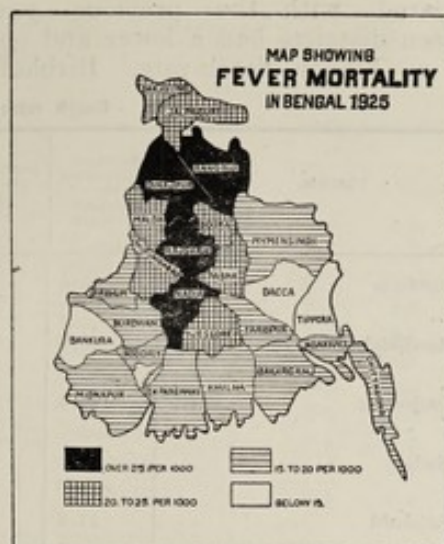
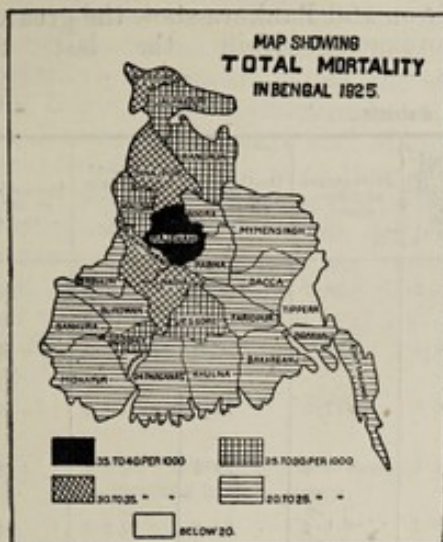


20. **Divisional death-rates.**—The following table shows the death-rates for the various divisions.—

Divisions.	Death-rates for the previous ten years.	Death-rates per mille (1925).	Differences.	Percentages of differences.	Death-rates per mille (1924).	Differences.	Percentages of differences.
Burdwan	33.6	23.9	-9.7	-28.9	25.7	-1.8	-7.0
Presidency	31.3	28.1	-3.2	-10.2	26.4	+1.7	+6.4
Rajshahi	32.9	29.9	-3.0	-9.1	30.4	-0.5	-1.7
Dacca	25.5	21.5	-4.0	-15.7	24.3	-2.8	-11.5
Chittagong	23.8	19.6	-4.2	-17.7	20.8	-1.2	-5.8

Compared with the previous year, it showed a decrease in all the divisions except Presidency Division where it rose by 6.4 per cent. It was less than the average of the previous ten years in all the divisions of the province.

21. **District death-rates.**—From the following table, giving the crude death-rates for individual districts it, appears that every district, with the exception of Calcutta, showed improvement as compared with the average death-rate for the previous ten years.



Compared with the previous year, Burdwan and Bankura show the greatest improvement within the last ten years:—

Death rates per mile in districts.

Districts.	Average death-rates for previous 10 years.	Death-rates per mile for 1925.	Differences between the death-rate of 1925 and the average.	Percentages of differences.	Death-rates per mile for 1924.	Differences between the death-rates of 1924 and 1925.	Percentages of differences.
1. Birbhum	40.6	24.9	-15.7	-38.7	28.6	-3.7	-13.0
2. Murshidabad	40.0	30.9	-9.1	-22.8	26.9	+4.0	+14.8
3. Darjeeling	39.4	32.5	-6.9	-17.5	36.1	-3.6	-10.0
4. Nadia	39.1	34.6	-4.5	-11.5	29.2	+5.4	+18.5
5. Rajshahi	37.6	37.4	-0.2	-0.6	34.6	+2.8	+8.1
6. Burdwan	36.7	24.5	-12.2	-33.3	25.3	-0.8	-3.2
7. Dinajpur	35.9	33.3	-2.6	-7.3	30.7	+2.6	+8.4
8. Bankura	35.5	23.7	-11.8	-33.3	27.8	-4.1	-14.8
9. Jalpaiguri	33.6	27.1	-6.5	-19.4	31.2	-4.1	-13.2
10. Hooghly	32.6	25.7	-6.9	-21.2	25.6	+0.1	+0.4
11. Malda	32.1	29.0	-3.1	-9.7	23.4	+5.6	+23.9
12. Midnapur	31.6	22.5	-9.1	-28.8	24.7	-2.2	-8.9
13. Pabna	30.7	24.4	-6.3	-20.5	29.1	-4.7	-16.2
14. Jessore	30.6	29.2	-1.4	-4.6	27.2	+2.0	+7.3
15. Rangpur	30.5	29.8	-0.7	-2.3	31.8	-2.0	-6.3
16. Bogra	28.5	23.7	-4.8	-16.9	26.4	-2.7	-10.2
17. Chittagong	28.3	21.7	-6.6	-23.3	23.2	-1.5	-6.5
18. Khulna	28.0	23.8	-4.2	-15.0	23.9	-0.1	-0.4
19. Bakarganj	27.3	23.2	-4.1	-15.0	26.1	-2.9	-11.1
20. Howrah	27.3	24.5	-2.8	-10.3	24.3	+0.2	+0.8
21. Faridpur	26.9	23.7	-3.2	-11.9	25.0	-1.3	-5.2
22. Calcutta	26.7	32.7	+6.0	+22.4	29.6	+3.1	+10.4
23. 24-Parganas	26.6	22.3	-4.3	-16.2	24.2	-1.9	-7.9
24. Noakhali	25.9	23.4	-2.5	-9.7	25.4	-2.0	-7.9
25. Dacca	25.0	20.6	-4.4	-17.6	22.7	-2.1	-9.3
26. Mymensingh	24.1	20.3	-3.8	-15.8	23.9	-3.6	-15.1
27. Tippera	20.1	16.4	-3.7	-18.4	16.8	-0.4	-2.4

22. Reviewing the percentages of district deaths to the total provincial mortality, it appears, from the statement below, that Mymensingh, Rangpur, Dacca, Bakarganj and Midnapur accounted for a little more than 30 per cent. of the total deaths in the province. As compared with the mean death-rate for the previous decade, ten districts show rises and thirteen reductions in their mortality rate, while in the remaining four it was the same for both the periods.—

Percentage of provincial total deaths recurring in each district.

Districts.	Averages.	1925.	Increases or Decreases.
1. Mymensingh ..	8.5	8.5	±0
2. Midnapur ..	6.1	5.2	-0.9
3. Dacca ..	5.7	5.5	-0.2
4. Rangpur ..	5.6	6.4	+0.8
5. Bakarganj ..	5.2	5.2	±0
6. 24-Parganas ..	4.8	4.7	-0.1
7. Dinajpur ..	4.5	4.9	+0.4
8. Faridpur ..	4.4	4.6	+0.2
9. Nadia ..	4.2	4.4	+0.2
10. Rajshahi ..	4.1	4.8	+0.7
11. Tippera ..	4.0	3.9	-0.1
12. Burdwan ..	3.8	3.0	-0.8
13. Jessore ..	3.8	4.3	+0.5
14. Murshidabad ..	3.7	3.4	-0.3
15. Chittagong ..	3.3	3.0	-0.3
16. Pabna ..	3.1	2.9	-0.2
17. Khulna ..	3.0	3.0	±0
18. Noakhali ..	2.8	3.0	+0.2
19. Bankura ..	2.6	2.1	-0.5
20. Hooghly ..	2.6	2.4	-0.2
21. Birbhum ..	2.5	1.8	-0.7
22. Malda ..	2.3	2.5	+0.2
23. Jalpaiguri ..	2.3	2.2	-0.1
24. Bogra ..	2.2	2.1	-0.1
25. Calcutta ..	2.1	3.0	+0.9
26. Howrah ..	2.0	2.1	+0.1
27. Darjeeling. ..	0.8	0.8	±0

23. **Death-rate in towns.**—The aggregate crude death-rate of the towns in 1925 was 23.9 per mille against 22.4 per mille in the previous year, showing an increase of 6.7 per cent. Kurseong alone as usual returned a rate above 40 per mille, 7 towns recorded rates between 30 and 40 per mille 26 between 20 and 30 and the remaining below 20 per mille, of

which the following returned absurd rates:—

Towns.	Death rates per mille.	
	1925.	1924.
Suri ..	6.4	4.9
Barrackpur ..	6.4	7.6
Bhola ..	6.4	2.4
Comilla ..	6.9	6.6
Asansol ..	7.9	9.1
Kanchrapara ..	8.6	10.8
Pirojpur ..	8.6	10.0
Kishoreganj ..	8.8	12.6
Chandpur ..	9.4	10.0
Champlani ..	9.6	8.1
Katwa ..	9.8	5.6

These are exactly the same towns that recorded ridiculously low rates in the previous year.

24. **Comparison of mortality in towns and rural areas.**—From a comparison of the death-rates in towns and rural areas, it appears that the mortality in the latter was 4.6 per cent. higher than that in the former. On the other hand the death-rate in the rural areas decreased in 1925 by 4.2 per cent., while it increased in the towns by 6.7 per cent. as compared with the previous year:—

Death rates per mille—	Towns.	Rural area.
1924 ..	22.4	26.1
1925 ..	23.9	25.0
Differences ..	+1.5	-1.1
Percentage of difference ..	+6.7	-4.2

25. From the following table, giving the mortality rate under each head of disease in the urban and rural areas, it will be observed that while fevers claimed the highest mortality in rural areas in 1925, all the other causes were responsible for a higher death-rate in the towns during the same period. Compared with the previous year, while cholera, plague and fevers decreased in towns in 1925, there was an increase in deaths due to small-pox, respiratory diseases, and other causes; dysentery and diarrhoea and injury returning the same rate for both the years. In rural areas, cholera, plague, fevers and deaths due to "other causes" were on the decline, while small-pox and respiratory diseases were on the increase, dysentery and diarrhoea and injury remaining on the same level. Compared with the average of the previous ten years, there was reduction under every head in towns,

except small-pox, respiratory diseases and injury which showed increase; while in rural areas, except for respiratory disease which recorded a rise

and injury which returned the same rate, there was an improvement in 1925, so far as all the other heads were concerned:—

Causes of deaths.	Average of previous ten years (1915-1924).			During 1924.			During 1925.		
	Urban.	Rural.	Combined.	Urban.	Rural.	Combined.	Urban.	Rural.	Combined.
Cholera	1.07	1.6	1.6	1.1	1.03	1.04	0.9	0.7	0.7
Small-pox	0.6	0.3	0.3	0.3	0.1	0.1	2.01	0.2	0.4
Plague	0.05	0.0003	0.003	0.01	0.00002	0.0007	0.003	..	0.0002
Fevers	7.9	23.3	22.3	6.6	20.5	19.6	6.5	19.7	18.8
Dysentery and diarrhoea. ..	2.5	0.4	0.5	2.3	0.3	0.5	2.3	0.3	0.5
Respiratory diseases	4.4	0.2	0.4	5.01	0.2	0.6	5.1	0.3	0.6
Injury	0.4	0.4	0.4	0.5	0.4	0.4	0.5	0.4	0.4
Other causes	6.7	3.7	3.9	6.5	3.4	3.6	6.6	3.3	3.5
All causes	24.4	29.9	29.5	22.4	26.1	25.9	23.9	25.0	24.9

26. **Still births.**—In 1925 62,281 still births were reported against 64,159 in the previous year, giving a decrease of 2.9 per cent. in the year under review. From the following statement, it appears that the proportion of still births to total births per cent. was very high in Rangpur (7.55), Calcutta (7.39), Chittagong (7.36) and Noakhali (6.72), while it was very low in Hooghly (0.16) and Bankura (0.04). Compared with the previous year, it increased in 15 and decreased in 11 districts, while it remained the same in one district (Bankura). It is, however, expected that, with the improvements of *dai* training, the number of still births will be appreciably reduced. The Rangpur District Health Officer ascribes the large proportion of still births to venereal disease among parents, though the possibility of country *daïs* failing to resuscitate asphyxiated babies is not to be overlooked; the latter suggestion was first made by the Khulna District Health Officer in his previous year's report.

Districts.	Proportion of still births to total births, per cent.	
	1924.	1925.
Chittagong	7.54	7.36
Rangpur	7.24	7.55
Noakhali	7.02	6.72
Pabna	6.95	6.01
Calcutta	6.48	7.39

Districts.	Proportion of still births to total births, per cent.	
	1924.	1925.
Tippera	6.23	5.23
Rajshahi	6.18	5.88
Jaipauri	5.95	6.13
Mymensingh	5.58	5.50
Bogra	5.50	5.54
Darjeeling	5.41	5.53
Dacca	5.15	5.27
Jessore	5.06	5.43
Khulna	4.88	4.43
Murshidabad	4.32	4.62
Faridpur	4.18	4.05
Dinajpur	4.02	4.29
Birbhum	2.94	3.20
Midnapur	2.77	2.91
Malda	2.64	2.97
Bakarganj	2.36	2.40
Nadia	2.07	1.95
Howrah	1.76	2.32
24 Parganas	1.54	1.10
Burdwan	0.76	0.73
Hooghly	0.10	0.16
Bankura	0.04	0.04
Total for the Province	4.47	4.33

27. **Comparison of Calcutta birth and death-rates with those of other Bengal towns and rural areas.**—Calcutta birth and death-rates as compared with other towns and rural areas in Bengal are given below:—

	Birth-rates.	Death-rates.
Calcutta—		
1924	18.3	29.6
1925	18.9	32.7
Bengal towns—		
1924	20.3	18.6
1925	20.3	19.2
Bengal rural areas—		
1924	30.1	26.1
1925	30.3	25.0

The birth-rate in Calcutta was less than in other Bengal towns by 6.9 per cent. and than rural areas by 37.6 per cent.; the death-rate on the other hand was 70.3 per cent. more than that in other Bengal towns and 30.8 per cent. more than the rural area rates. Compared with the previous year, Calcutta birth-rate in 1925 increased by 3.3 per cent. and the death-rate by 10.5 per cent. Turning to the details of deaths it is

apparent that death-rates due to cholera, plague, dysentery and diarrhoea and respiratory diseases decreased in Calcutta in 1925, while those for small-pox, fevers and "other causes" increased, injuries returning the same rates for both the years. All the other diseases except fevers were more prevalent in Calcutta in 1925 than either in other towns or rural areas of Bengal.

Causes.	Calcutta.		Bengal towns.		Bengal rural areas.	
	1925.	1924.	1925.	1924.	1925.	1924.
Birth-rate	18.9	18.3	20.3	20.3	30.3	30.1
Death-rate	32.7	29.6	19.2	18.6	25.0	26.1
Cholera	0.9	1.2	0.8	1.05	0.7	1.03
Small-pox	3.6	0.3	1.1	0.3	0.2	0.1
Plague	0.01	0.03	..	0.0004	..	0.00002
Fevers	5.1	5.0	7.2	7.5	19.7	20.5
Dysentery and diarrhoea	2.9	3.1	2.0	1.9	0.3	0.3
Respiratory diseases	9.2	9.3	2.9	2.7	0.3	0.2
Injuries	0.7	0.7	0.4	0.4	0.4	0.4
Other causes	10.3	10.0	4.6	4.6	3.3	3.4

28. Turning to subsidiary causes, Calcutta appears to have recorded in 1925 higher death-rates under every head except malaria, relapsing fever and other fevers as compared with other Bengal towns and rural areas. This higher rate of Calcutta mortality can be explained by a better registration of deaths and a more accurate diagnosis than is available either in other towns or the rural areas of the presidency.

Causes	Death-rates per mille in 1925.		
	Calcutta.	Other Bengal towns.	Rural areas.
Malaria	1.87	2.30	11.30
Enteric	.57	.20	.16
Measles	.06	0.5	.02
Relapsing fever	..	.06	.07
Kala-azar	.76	.61	.34
Other fevers	1.80	4.03	7.78
Dysentery	1.83	1.26	.21
Diarrhoea	1.08	.73	.13
Influenza	.51	.09	.03
Pneumonia	3.55	1.37	.11
Phthisis	2.28	.40	0.6
Other respiratory diseases	2.81	1.04	.07
Child birth	.09	.09	.06

29. **Mortality according to sex.**—During the year, 614,736 males and 543,737 females died against 647,403 males and 555,841 females in the previous year giving a ratio of 113 males to

every 100 females in 1925 against 116 to 100 in 1924. The death-rates were 25.5 per mille for males and 24.2 per mille for females against 26.9 and 24.7 per mille, respectively, in the previous year showing a reduction of 5.2 per cent. in male and of 2.03 per cent. in female deaths. The highest death-rate among males (38.7 per mille) was reported from Rajshahi district and that among the females (44.0 per mille) from Calcutta; while the lowest rates, 17.2 per mille for males and 15.5 per mille for females were reported from Tippera. The male death-rate exceeded the female rate in every district except Calcutta, Howrah and Nadia.

30. **Deaths among classes.**—The death-rate among the various communities in Bengal is given below:—

	Ratios of deaths per mille, 1924.	Ratios of deaths per mille, 1925.	* Difference.	Percentage of difference.
Christians	18.4	17.1	-1.3	-7.1
Hindus	25.4	24.5	-0.9	-3.6
Musalman	26.0	25.0	-1.0	-3.9
Buddhists	21.4	19.1	-2.3	-10.8
Other classes	35.6	32.5	-3.1	-8.7
Total	25.9	24.9	-1.0	-3.9

Compared with the previous year, death-rate diminished among all classes in 1925, markedly so among Buddhists where it was reduced by 10·8 per cent. and among other classes where the reduction was 8·7 per cent. The comparative incidence of deaths among the various classes was the same as in the previous year. Leaving aside Calcutta, only 1,503 deaths were recorded among Christians out of their total population of 106,044, giving a ratio of 14·17 per mille against 24·9, the provincial death-rate for the year. This low death-rate among this community is more an index of incomplete registration, to which attention has already been drawn in previous reports, than an indication of improved health conditions.

31. Turning to the divisional death-rate among the two chief communities of Bengal, it will be observed that the Presidency, Rajshahi and Burdwan Divisions showed an increased death-rate among Musalmans as compared with the Hindus, while in Dacca and Chittagong more Hindus died than the Musalmans:—

Divisions.	Hindus.	Musal- mans.	Diffe- rences.	Per- centages.
Burdwan ..	23·7	24·7	+1·0	4·2
Presidency ..	26·1	30·4	+4·3	16·5
Rajshahi ..	28·8	30·1	+1·3	4·5
Dacca ..	21·9	21·3	-0·6	2·8
Chittagong ..	19·7	19·6	-0·1	·5

In the districts, the highest death-rate among the Hindus (34·5 per mille) was returned from Darjeeling and the lowest 18·2 per mille from Tippera. Among the Musalmans, the highest rate (40·8 per mille) was recorded in Rajshahi, while the lowest (15·7 per mille) in Tippera.

32. Deaths from maternal causes.—

In 1925, 2,790 deaths were recorded as having occurred within 14 days of labour as compared with 1,972 in 1924, 1,185 in 1923, 2,567 in 1922 and 1,656 in 1921. The registration of such deaths is still far from complete, as will appear if the average death-rate from child-birth for the last three years in Calcutta where registration is more accurate is applied to the whole of the province. Working on this basis, 4,197 such deaths should have been registered in place of 2,790—the present reported number.

33. The following table shows the comparative incidence of such deaths in the various divisions.—

Divisions.	Deaths.	Rates per 1,000 births.
Burdwan ..	420	1·6
Presidency ..	860	3·0
Rajshahi ..	626	1·8
Dacca ..	485	1·4
Chittagong ..	399	2·6

34. Mortality according to age.—

The following statement shows the variations of mortality at different age periods:—

Age periods.	1924 per mille.	1925 per mille.	Differ- ence.	Percen- tage varia- tion.
Under one month*	93·9	96·5	+2·6	2·7
1—6 months* ..	48·1	45·8	-2·3	4·8
6—12 months* ..	42·1	38·9	-3·2	7·6
Under one year* ..	184·2	181·2	-3·0	1·7
1—5 years ..	32·1	34·1	+2·0	6·2
5—10 ..	12·9	12·7	-0·2	1·6
10—15 ..	11·3	10·2	-1·1	9·8
15—20 ..	17·1	15·2	-1·9	11·1
20—30 ..	17·6	15·9	-1·7	9·7
30—40 ..	19·0	17·4	-1·6	8·4
40—50 ..	22·5	20·9	-1·6	7·1
50—60 ..	33·3	31·5	-1·8	5·4
60 years and above	65·0	65·1	+0·1	0·1

* Per 1,000 births.

35. From the above table, it will be observed that the death-rate was highest as usual in infants; it reached its minimum at the age period of 10-15 years, after which it increased again, until it was very high at the age of 60 years and above. Compared with the previous year, the age period of 60 years and above shows the least percentage variation, while the highest variation is obtained at the age period of 15-20 years. With the exception of age periods under one month, 1-5 years and 60 years and above, the death-rate for every other period was reduced in 1925 as compared with the previous year. Turning to the percentage of total deaths for each age period, as given in the table below, it is noticed that 35 per cent. of the total deaths occurred in children below 5 years of age—a community which forms only 12·9 per cent. of the total population; another 17·3 per cent. took place in persons above 50, which from 9·3 per cent. of the total population. Thus, more than 50 per cent. of the total deaths occurred in children below 5 years and persons above 50, while a little less than half

in persons between 5 and 50 years of age. The explanation of this high mortality at the two extremes of life is given in the report for 1923 and can well bear repetition.—

What is the explanation of this amazing difference in the death-rate of these two portions of the community referred to? The answer can be given in a word—Age. The special ills of youth destroy vast numbers of the youngest members of society, and on the other hand, death takes an increasing toll from among those approaching the other extreme of life. From 10 to 15 years is the healthiest age period in Bengal. And mortality, which is extraordinarily great among the newly-born, gradually diminishes from year to year as the age of 10 is approached. But the wastage of life is so appalling that less than 50 per cent. of the children born ever reach this happy age. After the age of 15, the ills of life increase once more and the death-rate rises progressively as old age is approached. The period 10 to 15 besides being the healthiest period is also the point when the tide of mortality appears to flow and ebb.

Age periods.	Populations.	Percentage of total population.	Deaths at each age, 1925.	Percentage of total deaths, 1925.
Under one year	1,370,066	3.0	249,582	21.5
1 to 5 years ..	4,606,461	9.9	156,921	13.5
5 to 10 „ ..	7,318,153	15.3	93,259	8.0
10 to 15 „ ..	5,322,228	11.4	54,283	4.7
15 to 20 „ ..	4,484,329	9.6	68,122	5.9
20 to 30 „ ..	8,536,967	18.3	136,577	11.8
30 to 40 „ ..	6,453,782	13.9	112,641	9.7
40 to 50 „ ..	4,136,614	8.9	86,575	7.5
50 to 60 „ ..	2,355,751	5.1	74,356	6.4
60 and above ..	1,937,942	4.2	126,157	10.9

36. More males died than females at all ages except between the ages of 15 and 30—the usual child-bearing period, as is apparent from the following table:—

Age periods.	Death-rate per 1,000 living at various ages.			
	Males.	Females.	Differences.	Percentages.
Infants*	185.7	176.4	-9.3	-5.0
1-5	35.8	32.5	-3.3	-9.2
5-10	13.7	11.7	-2.0	-14.6
10-15	10.6	9.7	-0.9	-8.5
15-20	14.2	16.1	+1.9	+13.4
20-30	15.1	16.8	+1.7	+11.2
30-40	17.5	17.4	-0.1	-0.6
40-50	22.2	19.2	-3.0	-13.5
50-60	34.1	28.7	-5.4	-15.9
Over 60	71.1	59.1	-12.0	-16.9

* Per 1,000 births.

The greatest variation between male and female deaths is noticed between the ages of 5-10 years and then again above 50 years of age and the lowest between the ages of 30 and 40.

37. Infant mortality in the province.

—In 1925, 249,582 infant deaths were reported as compared with 252,337 in 1924, giving a death-rate of 181.2 per thousand births as against 184.2 in the previous year. There was thus a reduction by 1.6 per cent. in the year under report: 133,213 male and 116,369 female infants died giving a ratio of 114 males to every 100 females. The proportion borne by infant deaths to the total mortality was 21.5 per cent. which is much below the normal provincial mortality for Bengal: 53.3 per cent. of infants died within one month of their birth, 25.2 per cent. between 1 and 6 months, and 21.4 per cent. between 6 and 12 months. What has actually been done to reduce infant mortality is described later on in this report.

38. **Infant Mortality.**—The causes of infant mortality have been very succinctly classified by the Jessore District Health Officer as follows:—

(a) *Pre-natal*—

- (i) Ignorance of the care due to the expectant mother.
- (ii) Unhealthy surroundings during child-bearing period.
- (iii) Want of medical advice and aid if occasion arises during the child-bearing period.
- (iv) Poor vitality of parents due to high prices of food and poverty and to malaria and other specific diseases.

(b) *Natal*—Old prejudices and customs prevailing, unhealthy surroundings and illiterate untrained country *dais* who conduct labour.

(c) *Post-natal*—Ignorance of the care and management of the newly infant, unhealthy surroundings; want of medical aid and advice

if occasion arises during the post-natal period and infancy; want of proper nourishing food, specially milk and clothing.

To the above list may be added early marriage and seclusion of women, as suggested by the Rajshahi District Health Officer, isolated positions of dwellings amongst paddy and jute fields, more or less inaccessible to medical aid and ill-nourished condition of mothers, who often work in fields among trying conditions leading to personal exhaustion and inattention to their children, as mentioned by the Jalpaiguri District Health Officer.

39. Among the remedies suggested may be mentioned **maternity and child welfare work**, training of *dais*, teaching of domestic hygiene through text books, lantern lectures, leaflets and posters, improvement in the agricultural and economic conditions and unhealthy surroundings of the people and provision for medical aid and advice by itinerant dispensaries; free distribution of quinine and other anti-malarial measures, control of infectious diseases, improvement of milk supply, arrangements for the supply of good milk at a cheap rate to the children of the poor. Pabna suggests compulsory training of *dais*, if necessary. Bakarganj and Faridpur suggest the training of *dais* under the supervision of trained nurses in the mufassal. Tippera recommends that a trained indigenous *dai* should be maintained in every union board by contributions from the union board, local bodies and Government grant-in-aid. Khulna suggests the resuscitation of the post of a midwife in the district—a post unfortunately abolished by the District Board. Faridpur suggests the opening of maternity centres by voluntary organisations. Bogra suggests the establishment of a maternity institution in the town where a better class of women should receive training and should supplant indigenous *dais*, who object to be trained.

40. **Infant death-rates in districts.**—The crude infant mortality rates for each district are shown in the following statement. As usual, Calcutta returned the highest and Tippera the lowest rate. Compared with the average of the previous 10 years, the mortality appears to be less in 1925 in all the districts with the exception of Calcutta and Rajshahi.

The reduction was most marked in Birbhum and least in Howrah:—

Districts.	Average deaths rates (1915-1924).	1925.	Differences.	Percentages of infant mortality to total mortality 1925.
Calcutta	301	326	+25	18.8
Birbhum	258	182	-76	32.0
Burdwan	247	198	-49	26.4
Dinajpur	234	223	-11	25.6
Rangpur	227	217	-10	21.3
Jalpaiguri	225	193	-32	21.7
Nadia	225	218	-7	25.4
Khulna	224	189	-35	23.4
Rajshahi	223	234	+11	22.2
Bankura	218	174	-44	27.5
Murshidabad	215	174	-41	26.6
Hooghly	215	183	-32	19.0
Bakarganj	214	204	-10	23.7
Bogra	210	173	-37	20.4
Midnapur	206	160	-46	21.1
Howrah	203	201	-2	22.6
Darjeeling	202	164	-38	17.0
Mymensingh	192	174	-18	21.9
Faridpur	189	176	-13	20.9
24-Parganas	184	152	-32	16.7
Pabna	183	162	-21	18.5
Dacca	181	156	-25	20.1
Jessore	179	173	-6	15.6
Malda	169	154	-15	21.6
Chittagong	162	130	-32	18.2
Noakhali	152	143	-9	18.7
Tippera	150	135	-15	17.6

41. Classified according to sex, deaths among male infants decreased in 1925 compared with the average of the previous 10 years in all the districts except Calcutta and Rajshahi; in the case of female infants, the rates increased in 1925 in Howrah and Jessore in addition to Calcutta and Rajshahi but diminished in the remaining districts. Calcutta returned the highest rates both for male and female infants. The lowest rates were recorded for males in Chittagong and for females in Tippera.

Taken as a whole male deaths showed all the districts except Pabna, Nadia, variable increases over female deaths in Malda and Jessore.

Infant mortality rates for each district per 1,000 births according to sex.

Districts.	Male death-rates.			Female-death-rates.			Increases or decreases of male compared with female deaths (1925).
	Averages for the previous 10 years.	1925.	Increases or decreases.	Averages for the previous 10 years.	1925.	Increases or decreases.	
Calcutta	305.8	334.7	+28.9	295.3	316.9	+21.6	+17.8
Birbhum	270.5	193.4	-77.1	244.0	170.1	-73.9	+23.3
Burdwan	257.0	204.3	-52.7	235.9	189.1	-46.8	+15.2
Dinajpur	244.5	228.3	-16.2	223.8	217.5	-6.3	+10.8
Rangpur	236.6	226.9	-9.7	216.9	206.9	-10.0	+20.0
Jalpaiguri	234.3	202.2	-32.1	216.1	183.5	-32.6	+18.7
Nadia	226.9	216.3	-10.6	222.5	219.8	-2.7	-3.5
Khulna	228.4	190.3	-38.1	219.0	187.6	-31.4	+2.7
Rajshahi	225.0	237.0	+12.0	221.8	226.7	+4.9	+10.3
Bankura	227.8	185.5	-42.3	208.3	161.5	-46.8	+24.0
Murshidabad	219.2	178.2	-41.0	210.9	169.8	-41.1	+8.4
Hooghly	223.2	190.8	-32.4	205.7	174.1	-31.6	+16.7
Bakarganj	225.7	215.3	-10.4	201.5	191.7	-9.8	+23.6
Bogra	215.1	181.6	-33.5	204.7	165.2	-41.5	+18.4
Midnapur	207.2	160.0	-47.2	204.6	159.5	-45.1	+0.5
Howrah	213.2	207.9	-5.3	191.4	193.8	+2.4	+14.1
Darjeeling	212.6	169.7	-42.9	190.5	157.3	-33.2	+12.4
Mymensingh	199.6	190.4	-9.2	184.2	167.7	-16.5	+12.7
Faridpur	195.6	188.5	-7.1	181.8	174.3	-7.5	+4.2
24-Parganas	188.9	154.0	-34.9	178.2	149.0	-29.2	+5.0
Pabna	186.6	161.9	-24.7	179.7	162.6	-17.1	-0.7
Dacca	188.7	159.7	-29.0	173.3	152.5	-20.8	+7.2
Jessore	179.1	166.1	-13.0	179.2	179.9	+0.7	-13.8
Malda	171.8	150.4	-21.4	167.1	158.6	-8.5	-8.2
Chittagong	165.7	130.9	-34.8	157.9	128.2	-29.7	+2.7
Noakhali	154.5	144.6	-9.9	150.0	140.7	-9.3	+3.9
Tippura	158.2	144.6	-13.6	140.4	124.8	-15.6	+19.8

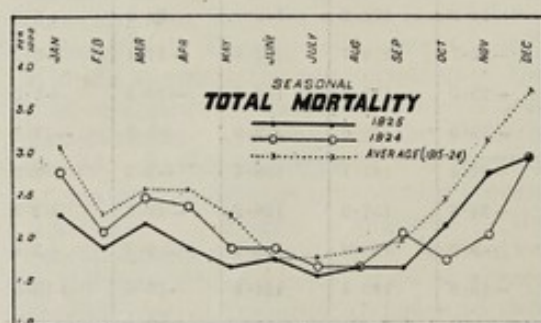
42. **Infant death-rates in town.**—The following statement shows the infant death-rates in towns and rural areas for 1924 and 1925 :—

42. Infant death-rates in town.—The following statement shows the infant death-rates in towns and rural areas for 1924 and 1925 :—												
						Rural areas.	Difference.	Percentage.				
1924	..	..	182.4	}	-3.3	1.8						
1925	..	..	179.1									
		Towns.	Difference.	Percentage.		Towns.	Rural areas.	Difference.	Percentage.			
1924	..	..	221.2	} +5.0	2.2	1924	..	..	221.2	182.4	-38.8	17.6
1925	..	..	226.2			1925	..	..	226.2	179.1	-47.1	20.8
										4		

The death-rate in towns increased in 1925 over that of the preceding year by 2.2 per cent. while in rural areas the mortality was reduced in the year under review by 1.8 per cent. The death-rate in rural areas was 20.8 per cent. less than in towns in 1925 compared with a similar reduction of 17.6 per cent. in the previous year. Out of 116 towns, 5 returned infant mortality rates above 300 per mille (Barisal with its 457.0 per mille heading the list); 27 towns recorded a rate between 200 and 300, 68 between 100 and 200 and the remaining 16 below 100 per mille, the lowest rate 19.0 per mille being returned by Jalpaiguri town.

43. Seasonal incidence of mortality.—

The graph below compares the seasonal incidence of mortality in 1925 with that of 1924 and the average of the previous 10 years. As compared with the decennial mean, the incidence was less in 1925 in all months of the year except June when it coincided with the former. Compared with 1924, it was less during the first seven months of the year under report when it rose reaching the same level as in 1924 in the month of August. In September it fell below that of 1924, but began to rise again until for the last 3 months of the year the curve for 1925 stood higher than the corresponding one for the previous year.



44. Excess of births over deaths.—

There was a natural increase of 4.7 per mille of the population in 1925 compared with 3.6 per mille in 1924, the excess of births over deaths being 218,624 and 166,870 in the two years, respectively. The following table shows the rates of natural increase, birth-rates, and the

death-rates per mille in the various divisions for the year under review and the preceding year:—

Divisions.	Natural increases. per mille.		
	1924.	1925.	
Burdwan ..	3.2	8.2	+5.0
Presidency ..	1.9	2.4	+0.5
Rajshahi ..	0.0	2.7	+2.7
Dacca ..	5.7	5.0	-0.7
Chittagong ..	8.2	6.6	-1.6

Divisions.	Birth-rates per mille.		Differ- ences.
	1924.	1925.	
Burdwan ..	28.9	32.1	+3.2
Presidency ..	28.3	30.5	+2.2
Rajshahi ..	30.4	32.6	+2.2
Dacca ..	30.0	26.5	-3.5
Chittagong ..	29.0	26.2	-2.8

Divisions.	Death-rates per mille.		Differ- ences.
	1924.	1925.	
Burdwan ..	25.7	23.9	-1.8
Presidency ..	26.4	28.1	+1.7
Rajshahi ..	30.4	29.9	-0.5
Dacca ..	24.3	21.5	-2.8
Chittagong ..	20.8	19.6	-1.2

It will be seen from the above table that, while the rates for natural increase rose in the Burdwan, Presidency and Rajshahi Divisions in 1925, as compared with the previous year, there was a reduction in the Dacca and Chittagong Divisions during the same period. The improvement in the Burdwan and Rajshahi divisions was due to higher birth-rates and reduced death-rates. In the Presidency Division, while the birth-rates increased, there was a corresponding rise in the death-rate, hence the natural increase was very slight. In the Dacca and Chittagong Divisions, while the death-rates decreased, there was a marked reduction in the birth-rates also and hence there was a retrogression.

45. Excess of deaths over births.—

Out of 27, only four districts (Calcutta, Jessore, Rajshahi and Rangpur) reported an excess of deaths over births in 1925.

Districts.	Birth-rates.		Death-rates.	
	1924.	1925.	1924.	1925.
Rangpur ..	31.6	29.2	31.8	29.8
Rajshahi ..	32.5	35.4	34.6	37.4
Jessore ..	28.2	26.4	27.2	29.2
Calcutta ..	18.3	18.9	29.6	32.7

An analysis of the birth and the death-rates of these four districts shows that, while the birth-rates showed an increase in Calcutta, Rangpur and Rajshahi in 1925, as compared with the previous year, there was a still higher rise in their death-rates, most marked in the case of Calcutta; in Jessore, on the other hand, while the death-rate increased the birth-rate diminished.

But, while the majority of the districts show a natural increase in their aggregate population, all of them individually, except five, show a variable proportion of decadent areas, as will appear from the following table. In eight districts the decadent areas have increased, while in seventeen they show an improvement as compared with the previous year. Tippera, as in previous years, did not show any decadent area, while Murshidabad which was free in the previous year showed signs of decadence in 1925. Malda, Dacca, Chittagong and Noakhali, which showed decadence formerly, appear to be improving now.

Statement of Decadent Areas in Bengal.

Districts.	Total decadent area in square miles.		Percentages of districts.		Improvement or regression +.
	1924.	1925.	1924.	1925.	
Burdwan ..	883	273	32.6	10.1	-
Birbhum ..	182	237	10.4	14.7	+
Bankura ..	325	336	12.4	12.8	+
Midnapur ..	1,743	926	34.5	18.3	-
Hooghly ..	795	721	66.9	60.7	-
Howrah ..	101	140	19.0	28.1	+
24 Parganas ..	1,034	1,004	21.3	20.7	-
Nadia ..	467	270	23.3	9.7	-
Murshidabad ..	..	236	..	11.1	+
Jessore ..	1,181	2,437	40.6	83.9	+
Khulna ..	625	436	13.2	9.2	-
Rajshahi ..	1,445	1,660	55.1	63.3	+
Dinajpur ..	982	665	24.9	16.8	-
Jalpaiguri ..	1,129	700	38.5	23.9	-
Darjeeling ..	834	253	71.6	21.7	-
Rangpur ..	1,961	2,100	56.1	60.1	+
Bogra ..	836	91	60.6	6.6	-
Pabna ..	1,400	522	83.4	31.1	-
Malda ..	292	..	15.9	..	-
Dacca ..	509	..	18.7	..	-
Mymensingh ..	1,576	1,385	25.2	22.2	-
Faridpur ..	324	535	13.7	22.6	+
Bakarganj ..	1,569	963	44.9	27.6	-
Chittagong ..	115	..	4.6	..	-
Noakhali ..	327	..	21.6	..	-
Tippera ..	..	..	..	..	±

SECTION VI.

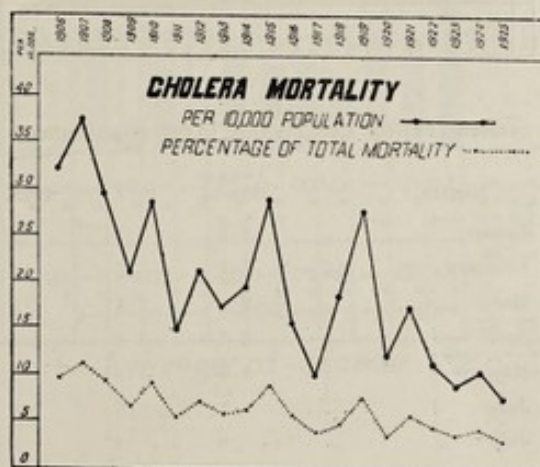
History of the chief diseases.

Cholera.

46. General Prevalence.—The following table shows the total deaths and the death-rates from cholera:—

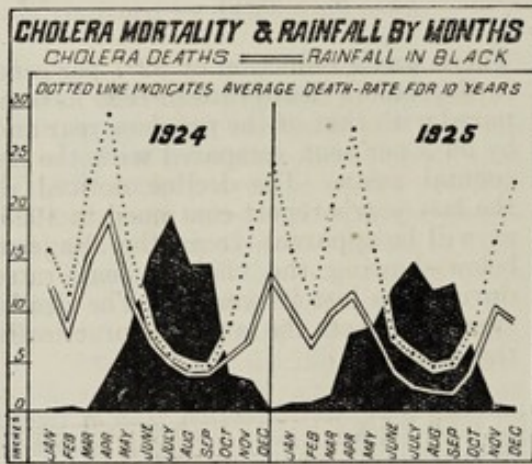
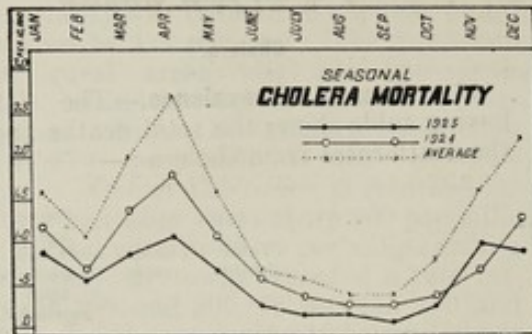
	Total deaths.	Death-rates.	Percentages of cholera deaths to total mortality.
1924 ..	48,514	1.04	4.03
1925 ..	34,276	.7	2.9

There was a reduction by 32.7 per cent. in the cholera death-rate in 1925 as compared with that of the previous year and by 56.3 per cent. compared with the decennial mean. The decline noticed in the last year's report continued in 1925, as will be apparent from the diagram below showing the cholera death-rates during the last 20 years. The death-rate among both the sexes was practically the same.



47. Seasonal prevalence.—The statement and the two graphs below show the prevalence of cholera in each month of the year. In 1925, as usual, the maximum was reached in April, after which the decline began, till the death-rate was reduced to its minimum in September. It rose again towards the latter part of the year. There was nothing abnormal about the curve which followed the usual course except that the death-rate in November was higher than that in December in 1925 while the reverse was the case in the previous year. The

death-rate did not exceed the mean for the previous ten years in any month.

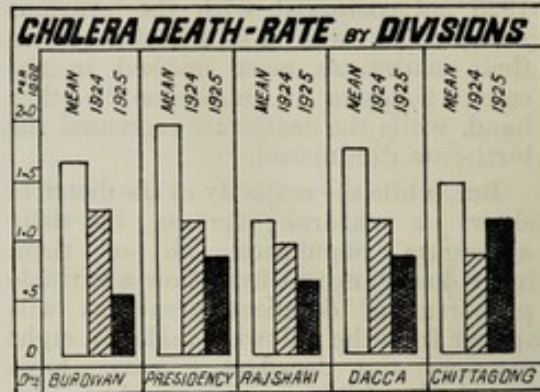


Seasonal cholera mortality (per 10,000 of population).

Months.	Average 1915-24.	1924.	1925.
January	1.6	1.2	.9
February	1.1	.7	.6
March	2.0	1.4	.9
April	2.7	1.8	1.1
May	1.6	1.1	.7
June	.7	.6	.3
July	.6	.4	.2
August	.4	.3	.2
September	.4	.3	.1
October	.8	.4	.3
November	1.6	.7	1.0
December	2.2	1.3	.9

48. **Cholera by divisions.**—The following statement shows the cholera death-rates in the divisions for 1925 as compared with those in the previous year and the decennial average. With the exception of Chittagong Division the rate was lower in every division in 1925 than the previous year, while it was much less than the mean of the previous decade in every division. The decline in

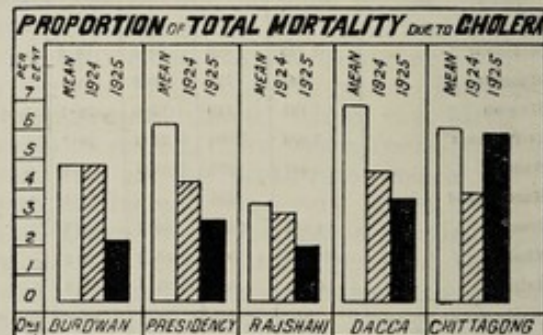
the death-rate in Dacca Division mentioned in the last report was steadily maintained.



Cholera death-rates by divisions per mille of population.

Divisions.	Mean (1915-24).	1924.	1925.
Burdwan	1.6	1.2	.5
Presidency	1.9	1.1	.8
Rajshahi	1.1	0.9	.6
Dacca	1.7	1.1	.8
Chittagong	1.4	0.8	1.1

The proportion of cholera mortality to total deaths in 1925 was higher in the Chittagong and Dacca Divisions than in Northern and Western Bengal, as will be seen from the following table and histogram. This proportion though higher only in the Chittagong Division in 1925 as compared with the previous year was appreciably much lower in almost all of the divisions than the decennial mean:—

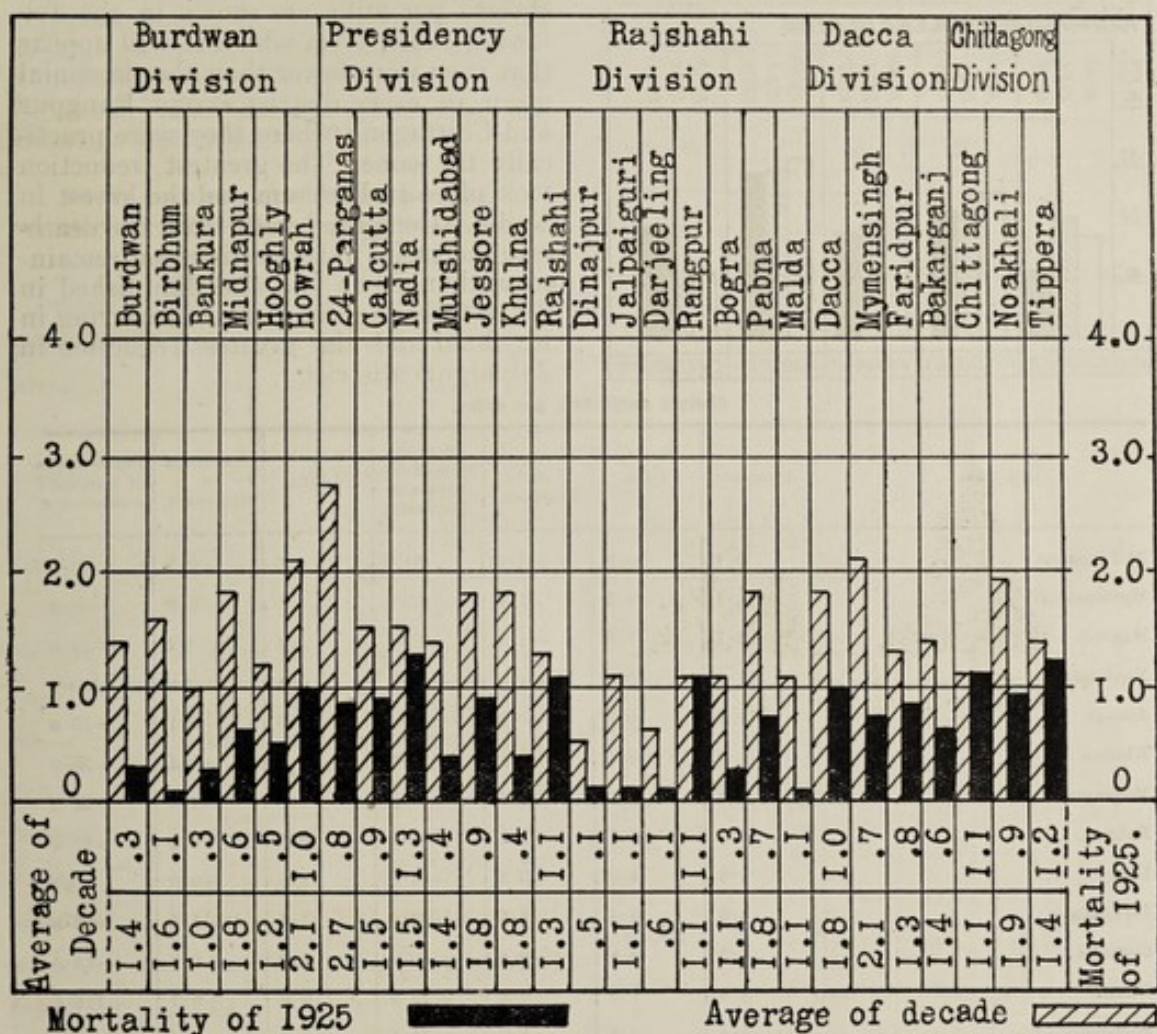


Proportion of total mortality due to cholera.

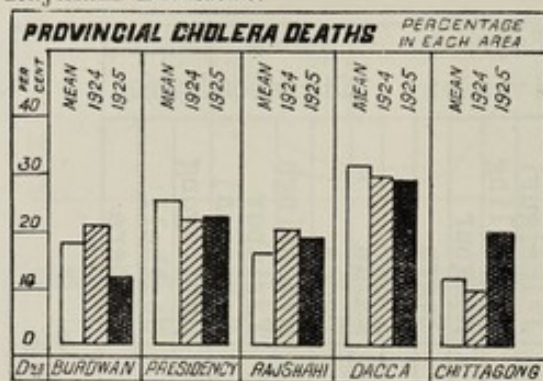
Divisions.	Mean (1915-24).	1924.	1925.
Burdwan	4.7	4.7	2.1
Presidency	6.1	4.1	2.8
Rajshahi	3.4	3.1	2.0
Dacca	6.8	4.5	3.6
Chittagong	6.0	3.8	5.8

From the table and the histogram below it will appear that as usual the largest proportion of cholera deaths in the province occurred in the Dacca Division in 1925. Compared with 1924,

GRAPH SHOWING THE RELATIVE INTENSITY OF CHOLERA MORTALITY
IN EACH DISTRICT OF BENGAL PRESIDENCY DURING THE
YEAR 1925 AND THE AVERAGE OF DECADE 1915-24.



cholera appeared to increase in Chittagong Division by 102.1 per cent. in 1925, while it was reduced in other divisions with a nominal increase in the Presidency Division. The percentages of deaths due to cholera was higher in 1925 than the decennial mean in Chittagong and Rajshahi Divisions.



Percentages of the total provincial cholera deaths.

Divisions.	Mean (1915-24).	1924.	1925.
Burdwan ..	17.3	20.1	11.6
Presidency ..	24.8	21.4	21.9
Rajshahi ..	15.9	19.8	18.4
Dacca ..	30.4	29.1	28.8
Chittagong ..	11.5	9.5	19.2

49. Cholera death-rates in the Districts.—The crude death-rates from cholera per mille are shown in the following table, from which it will appear that they were lower than the decennial mean in every district except Rangpur and Chittagong where they were practically the same. The greatest reduction took place in Birbhum and the lowest in Nadia. Compared with 1924, the death-rate increased in seven districts, remained unchanged in two and diminished in the rest, the highest increase occurring in Rajshahi and the greatest reduction in Jalpaiguri district.

Cholera death-rate per mille.

Districts.	Average.	1925.	Increases or decreases.	Percentages of increases or decreases.	1924.	Increases or decreases.	Percentages of increases or decreases.
24-Praganas	2.7	0.8	-1.9	-70.4	1.7	-0.9	-53.0
Mymensingh	2.1	0.7	-1.4	-66.7	1.6	-0.9	-56.3
Howrah	2.1	1.0	-1.1	-52.4	1.4	-0.4	-28.6
Noakhali	1.9	0.9	-1.0	-52.7	0.3	+0.6	+200.0
Jessore	1.8	0.9	-0.9	-50.0	1.0	-0.1	-10.0
Khulna	1.8	0.4	-1.4	-77.8	0.8	-0.4	-50.0
Midnapur	1.8	0.6	-1.2	-66.7	1.6	-1.0	-62.5
Pabna	1.8	0.7	-1.1	-61.1	0.5	+0.2	+40.0
Dacca	1.8	1.0	-0.8	-44.5	1.0	±0.0	±0
Birbhum	1.6	0.1	-1.5	-93.8	1.6	-1.5	-93.8
Calcutta	1.5	0.9	-0.6	-40.0	1.2	-0.3	-25.0
Nadia	1.5	1.3	-0.2	-13.3	0.6	+0.7	+116.6
Murshidabad	1.4	0.4	-1.0	-71.4	0.8	-0.4	-50.0
Tippera	1.4	1.2	-0.2	-14.3	1.2	0	±0
Burdwan	1.4	0.3	-1.1	-78.6	0.9	-0.6	-66.7
Bakarganj	1.4	0.6	-0.8	-57.2	0.8	-0.2	-25.0
Rajshahi	1.3	1.1	-0.2	-15.4	0.3	+0.8	+266.6
Faridpur	1.3	0.8	-0.5	-38.5	0.5	+0.3	+60.0
Hooghly	1.2	0.5	-0.7	-58.4	0.7	-0.2	-28.6
Bogra	1.1	0.3	-0.8	-72.8	0.9	-0.6	-66.7
Malda	1.1	0.1	-1.0	-90.9	0.2	-0.1	-50.0
Jalpaiguri	1.1	0.1	-1.0	-90.9	2.5	-2.4	-96.0
Rangpur	1.1	1.1	±0	±0	1.7	-0.6	-35.3
Chittagong	1.1	1.1	±0	±0	0.5	+0.6	+120.0
Bankura	1.0	0.3	-0.7	-70.0	0.7	-0.4	-57.2
Darjeeling	0.6	0.1	-0.5	-83.4	0.0	+0.1	..
Dinajpur	0.5	0.1	-0.4	-80.0	0.4	-0.3	-75.0

Turning to cholera as a percentage of the total mortality, it will be noticed from the following statement that 7·7 per cent. of the total deaths in Tippera were alone due to this cause. The percentage was lowest in Malda and Dinajpur. While it exceeded the average for the previous 10 years in Chittagong, Tippera, Rangpur and Nadia, it showed a reduction in every other district. Compared with 1924, cholera as a cause of death was less prevalent in all the districts but nine:—

Cholera as a percentage of the total mortality.

District.	Average.	1925.	Increases + or decreases.	1924.	Increases or decrease.
24-Parganas ..	10·2	3·4	-6·8	7·1	-3·7
Mymensingh ..	8·7	3·5	-5·2	6·6	-3·1
Howrah ..	7·7	4·2	-3·5	5·9	-1·7
Noakhali ..	7·2	4·0	-3·2	1·1	+2·9
Tippera ..	7·1	7·7	+0·6	7·5	+0·2
Dacca ..	7·1	4·8	-2·3	4·4	+0·4
Khulna ..	6·5	1·6	-4·9	3·4	-1·8
Jessore ..	6·0	3·0	-3·0	3·8	-0·8
Pabna ..	5·8	3·1	-2·7	1·9	+1·2
Calcutta ..	5·8	2·8	-3·0	3·9	-1·1
Midnapur ..	5·7	2·6	-3·1	6·3	-3·7
Bakarganj ..	5·1	2·5	-2·6	3·1	-0·6
Faridpur ..	4·7	3·4	-1·3	2·2	+1·2
Bogra ..	4·0	1·4	-2·6	3·3	-1·9
Birbhum ..	3·9	0·5	-3·4	5·6	-5·1
Burdwan ..	3·8	1·1	-2·7	3·4	-2·3
Chittagong ..	3·8	5·0	+1·2	2·0	+3·0
Nadia ..	3·8	3·9	+0·1	2·1	+1·8
Hooghly ..	3·7	2·0	-1·7	2·9	-0·9
Rangpur ..	3·6	3·8	+0·2	5·5	-1·7
Murshidabad ..	3·6	1·4	-2·2	2·9	-1·5
Malda ..	3·6	0·2	-3·4	0·8	-0·6
Rajshahi ..	3·4	3·0	-0·4	0·8	+2·2
Jalpaiguri ..	3·4	0·5	-2·8	7·8	-7·2
Bankura ..	2·8	1·4	-1·4	2·6	-1·2
Darjeeling ..	1·4	0·3	-1·1	0·0	+0·3
Dinajpur ..	1·4	0·2	-1·2	1·3	-1·1

The table below shows the relative prevalence of cholera in certain definite

areas, 16 districts show an improvement in 1925 as compared with the previous ten years, while the remaining 11 exhibit retrogression. Compared with 1924, conditions in 13 districts disclose a change for the better, and in 12 others it was for the worse, while the remaining two appear unaffected.

Percentage of Provincial cholera mortality in districts.

Districts.	Average.	1925.	Increases + or decreases.	1924.	Increases or decreases.
Mymensingh ..	13·9	10·0	-3·9	15·7	-5·7
24-Parganas ..	9·1	5·5	-3·6	8·7	-3·2
Dacca ..	7·6	9·0	+1·4	6·4	+2·6
Midnapur ..	6·6	4·5	-2·1	8·6	-4·1
Tippera ..	5·4	10·0	+4·6	7·1	+2·9
Bakarganj ..	5·0	4·4	-0·6	4·4	±0
Jessore ..	4·3	4·4	+0·1	3·7	+0·7
Faridpur ..	3·9	5·3	+1·4	2·5	+2·8
Rangpur ..	3·8	8·4	+4·6	9·0	-0·6
Noakhali ..	3·8	4·0	+0·2	0·8	+3·2
Khulna ..	3·6	1·7	-1·9	2·5	-0·8
Pabna ..	3·4	3·0	-0·4	1·6	+1·4
Nadia ..	3·0	5·8	+2·8	1·8	+4·0
Howrah ..	2·9	3·0	+0·1	2·9	+0·1
Burdwan ..	2·8	1·1	-1·7	2·6	-1·5
Rajshahi ..	2·6	5·0	+2·4	0·8	+4·2
Murshidabad ..	2·5	1·6	-0·9	2·0	-0·4
Chittagong ..	2·4	5·1	+2·7	1·5	+3·6
Calcutta ..	2·3	2·9	+0·6	2·6	+0·3
Birbhum ..	1·8	0·3	-1·5	2·8	-2·5
Hooghly ..	1·8	1·6	-0·2	1·6	±0
Bogra ..	1·6	1·0	-0·6	1·9	-0·9
Malda ..	1·6	0·2	-1·4	0·4	-0·2
Jalpaiguri ..	1·4	0·4	-1·0	4·7	-4·3
Bankura ..	1·4	1·0	-0·4	1·5	-0·5
Dinajpur ..	1·2	0·4	-0·8	1·4	-1·0
Darjeeling ..	0·2	0·1	-0·1	0·0	+0·1

50. Cholera in towns.—In 1925, 2,697 deaths from cholera occurred in towns and 31,579 in rural areas, giving a death-rate of ·9 per mille of population for the former and ·7 per mille for the latter. There was thus an increase of

28.6 per cent. deaths due to cholera in the towns over those in the rural areas. Out of 116 towns, 15 escaped from cholera. Forty towns returned a death-rate of 1.0 per mille and over, the highest rate 3.4 being recorded in Azimganj (Murshidabad district); in the rest the death-rate was below 1.0 per mille.

Turning to the divisions it will appear that the death-rate was highest in the Presidency Division and the lowest in Rajshahi. Another point that will be obvious from the following table is that while 7 per cent. of the total mortality in the towns of the Chittagong Division was due to cholera, the latter was responsible for only about 3½ per cent. in those of each of the other divisions:—

Divisions.	Number of towns.	Cholera death-rate per mille.	Proportion of cholera deaths to total mortality.
			Per cent.
Burdwan ..	25	.8	3.8
Presidency ..	42	.9	3.5
Rajshahi ..	11	.6	3.5
Dacca ..	17	.7	3.7
Chittagong ..	6	.8	7.0

51. Preventive measures.—The following measures were taken in 1925 against cholera.

(a) *Inoculation.*—The statement below shows the quantity of cholera vaccine issued to and the number of inoculations performed in each district:—

District.	Doses of cholera vaccine issued.	Number of inoculations performed.	Number of cholera deaths.
Burdwan ..	1,760	2,532	388
Howrah ..	280	75	1,031
24-Parganas ..	5,100	3,140	1,890
Murshidabad ..	500	564	546
Nadia ..	500	1,160*	1,992
Rajshahi ..	5,900	30,394	1,701
Dinajpur ..	2,280	1,382	127
Bogra ..	1,200	2,687	345
Rangpur ..	6,200	14,572	2,875
Pabna ..	8,500	2,361	1,041
Malda ..	200	85	58
Dacca ..	1,500	2,111	3,101
Mymensingh ..	2,500	7,692	3,439
Chittagong ..	8,700	13,043	1,758
Noakhali ..	5,000	10,030	1,386
Tippera ..	4,000	9,907	3,447
Total	54,120	101,735	25,125

*Inoculations performed by Bengal Health Association.

The greatest number of inoculations were performed in Rajshahi district, Rangpur, Chittagong and Noakhali stood next in order in this connection.

Only 75 inoculations were performed in Howrah district where the number of deaths reported as due to cholera in 1925 was 1,031. No inoculation was performed in 10 districts although cholera was prevalent in majority of them. Bakarganj district in which the largest number of inoculations were performed in the previous year did not inoculate a single person although 1,501 deaths from cholera were reported from that district in the year under review. The Bengal Health Association performed 1160 inoculations, all in the Nadia district.

(b) *Disinfection of water supplies.*—18,015 wells and 5,060 tanks were disinfected in connection with cholera, besides various bils, khals and river banks. Disinfectants—bleaching powder and izal, were supplied free to the local bodies for this purpose.

(c) Fifty Sanitary Inspectors, sanctioned by the Local Government for this purpose and the Assistant and Sub-Assistant Surgeons attached to the Public Health Department were deputed from time to time to help the local bodies in suppressing the epidemic while the Circle Assistant Directors gave the benefit of their advice to the sanitary authorities of the affected districts.

(d) The Publicity branch of the Public Health Department did valuable work by means of lectures and magic lantern demonstrations.

Small-pox.

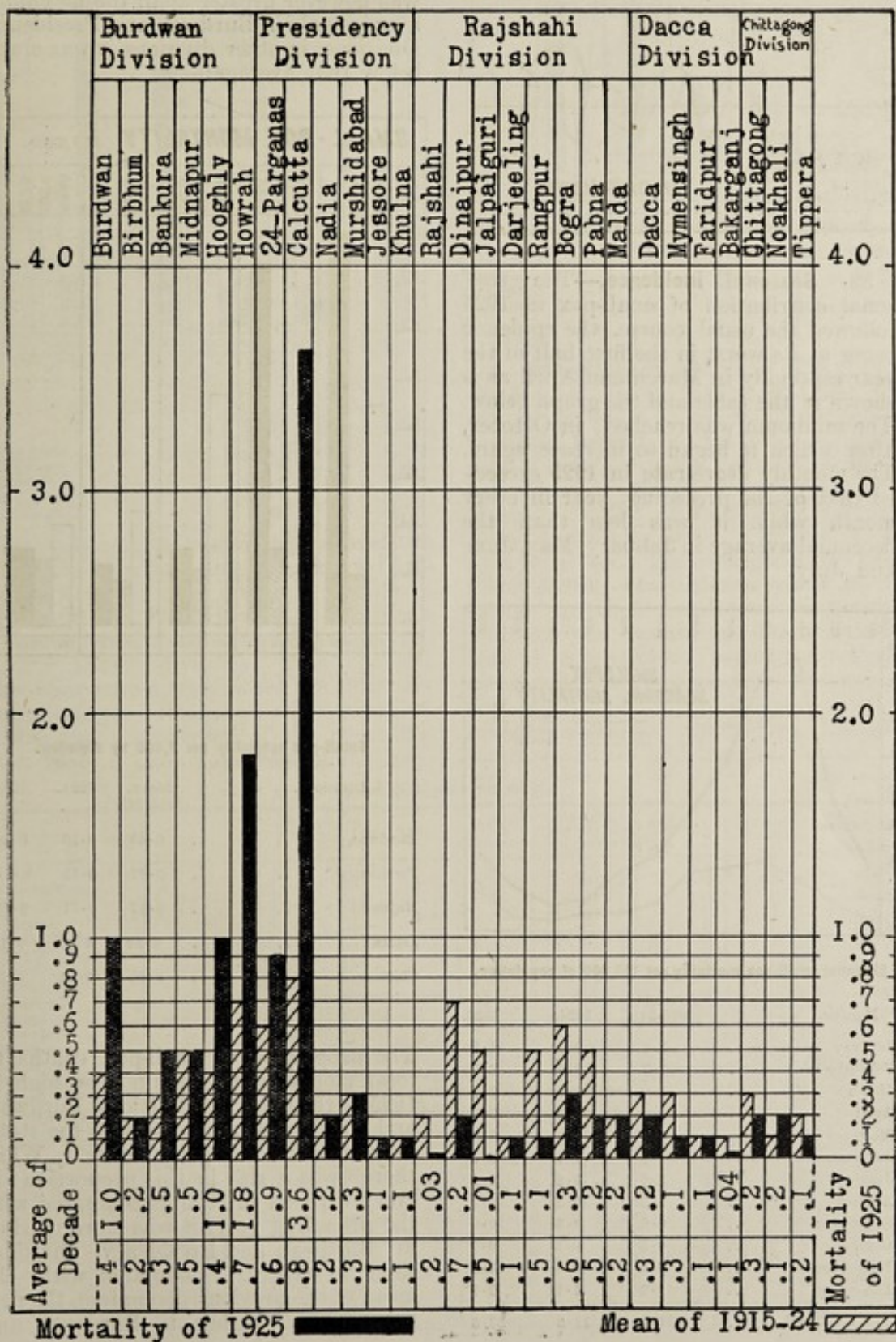
52. General prevalence.—The following table shows the general prevalence of small-pox in 1925 compared with the preceding year and the previous decennium:—

	Reported number of deaths.	Death-rate per mille.	Percentage of small-pox deaths to total mortality.
1924 ..	5,567	.12	.46
1925 ..	17,436	.4	1.5

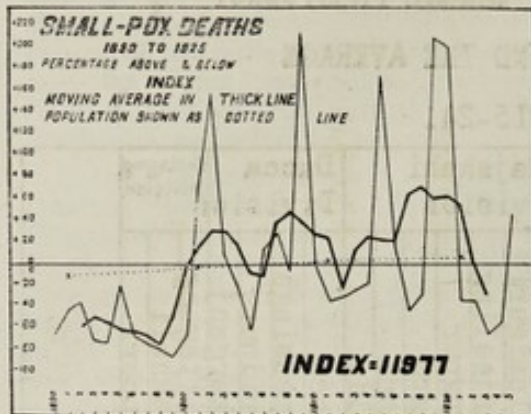
The death-rate increased by 233.3 per cent. as compared with 1924 and by 17.6 per cent. as compared with the previous decennium.

The ratio of deaths for males was .4 per mille and of females .3 per mille. This year saw a continuation of the epidemic which had started towards the end of the previous year. Eighty-eight out of 116 towns and 3,699 out of 84,748 villages were affected as against 50 towns and 1,611 villages in the preceding year. In 1925, small-pox was responsible for 1.5 per cent. of the total mortality from

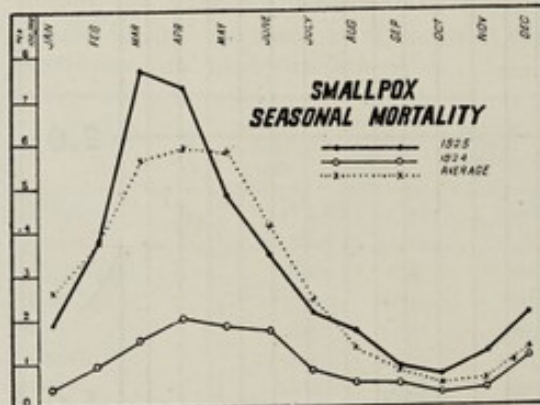
GRAPH SHOWING THE RELATIVE INTENSITY OF SMALL-POX
MORTALITY IN EACH DISTRICT OF BENGAL PRESIDENCY
DURING THE YEAR 1925 AND THE AVERAGE
OF DECADE 1915-24.



all causes as against 46 per cent. in the previous year.



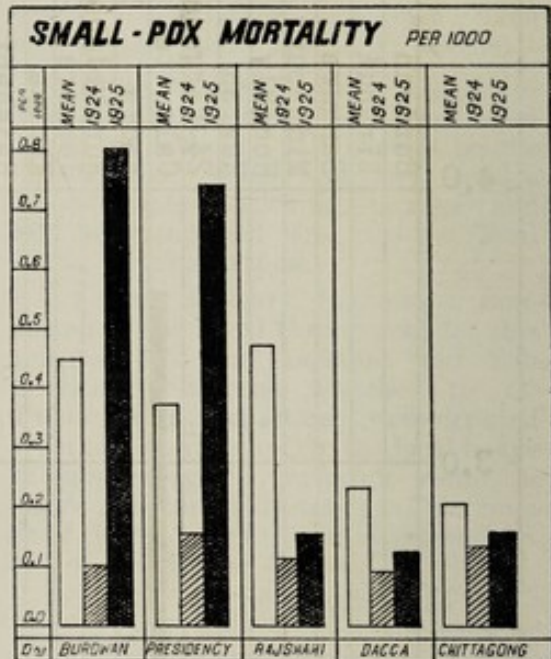
53. **Seasonal incidence.**—The seasonal distribution of small-pox in 1925 followed the usual course, the epidemic being at its worst in the first half of the year especially in March and April as is shown in the table and the graph below. The minimum was reached in October, after which it began to increase again. The monthly death-rate in 1925 exceeded that of the preceding year in every month while it was less than the decennial average in January, May, June and July.



Seasonal small-pox mortality per 100,000 of population.

Months.		Average (1915-24).	1924.	1925.
January	..	2.6	0.4	1.9
February	..	3.7	0.9	3.7
March	..	5.6	1.5	7.7
April	..	5.9	2.0	7.3
May	..	5.8	1.8	4.8
June	..	4.1	1.7	3.4
July	..	2.4	0.8	2.1
August	..	1.3	0.5	1.7
September	..	0.8	0.5	0.9
October	..	0.5	0.3	0.7
November	..	0.6	0.4	1.2
December	..	1.3	1.1	2.1
Total	..	34.6	11.9	37.5

54. **Small-pox by divisions.**—The mortality rate was the highest in Burdwan and Presidency Divisions (*vide* the following histogram and statement). The intensity of the disease in 1925 was greater in every division than in 1924. The death-rate in the year under review was however greater than the decennial average only in Burdwan and Presidency Divisions; in other divisions it was much below that average:—

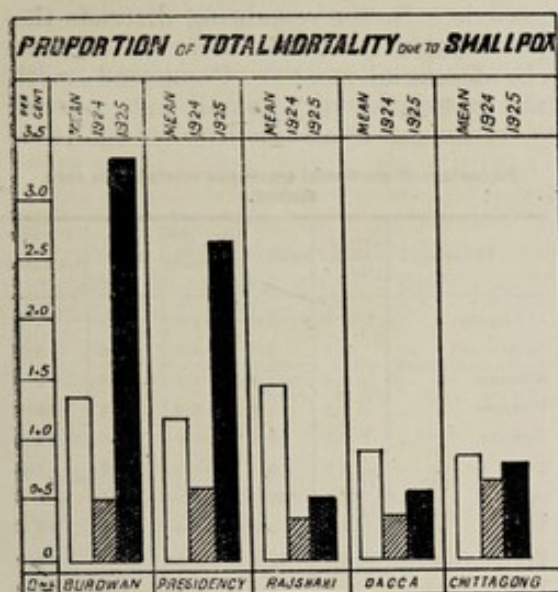


Small-pox mortality per 1,000 by divisions.

Divisions.		Mean. (1915-24).	1924.	1925.
Burdwan	..	.. 0.45	0.10	0.80
Presidency	..	.. 0.37	0.15	0.74
Rajshahi	..	.. 0.47	0.11	0.15
Dacca	..	.. 0.23	0.09	0.12
Chittagong	..	.. 0.20	0.13	0.15

The proportion of small-pox deaths to total mortality was again very high in 1925 in the same two divisions, Burdwan and Presidency, as is shown in the statement and the histogram below. While there was a rise in this proportion in every division in 1925 as compared with the preceding year, it was more marked in Burdwan and Presidency Divisions than in others. Compared with the mean of the previous decennium, the proportion was higher in Burdwan and

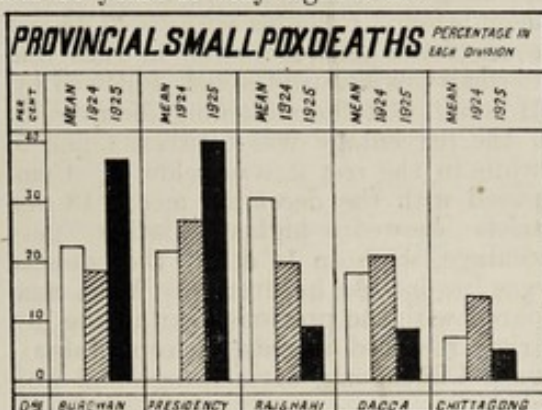
Presidency Divisions, but lower in the other three:—



Divisions.		Mean, 1915-24.	Proportion to total mortality, per cent.	
			1924.	1925.
Burdwan	..	..	1.33	.49
Presidency	..	..	1.18	.59
Rajshahi	..	..	1.44	.35
Dacca	..	..	0.89	.37
Chittagong	..	..	0.85	.66

The following table and histogram shows that the Burdwan and Presidency Divisions were the chief centres of small-pox epidemic in 1925, whereas the outbreak was comparatively insignificant in the other three divisions. This contrast becomes more marked when the 1925 percentages are compared with those of 1924 and the average of the preceding ten years. The improvement in Raj-

shahi and Dacca Divisions during the last 10 years is very significant.



Provincial small-pox mortality (per cent.).

Divisions.	Mean (1915-24).	1924.	1925.
Burdwan	..	22.3	18.3
Presidency	..	21.7	26.4
Rajshahi	..	30.4	19.9
Dacca	..	18.2	21.0
Chittagong	..	7.3	14.3

55. **Small-pox in districts.**—The crude death-rates in the various districts of Bengal are given in the following table. Calcutta headed the list with a death-rate of 3.64 per mille, followed by Howrah (1.84), Burdwan (1.04) and Hooghly (1.02). All the other districts show death-rates below 1.00 per mille. Compared with the average of the previous decade, 11 districts show an increase in their small-pox death-rate, while in the remaining districts there was a comparative reduction. Compared with the previous year, the mortality rates show excess in every district except Jalpaiguri, Chittagong, Mymensingh, Rajshahi and Bogra.

Small-pox death-rate per mille.

District.	Averages of decade, 1915-24.	1925.	Increases + or decreases—.	Percentages of increases or decreases.	1924.	Increases or decreases.	Percentages of increases or decreases.
Calcutta ..	.83	3.64	+2.81	+338.5	.29	+3.35	+1,155.2
Dinajpur ..	.74	.17	— .57	— 77.1	.02	+ .15	+ 750.0
Howrah ..	.67	1.84	+1.17	+174.6	.11	+1.73	+1,572.7
24-Parganas ..	.63	.86	+ .23	+36.5	.43	+ .43	+100.0
Bogra ..	.62	.35	— .27	— 43.6	.37	— .02	— 5.4
Pabna ..	.55	.17	— .38	— 69.1	.03	+ .14	+466.6
Midnapur ..	.53	.46	— .07	— 13.2	.09	+ .37	+411.0
Jalpaiguri ..	.53	.01	— .52	— 98.1	.39	— .38	— 97.5
Rangpur ..	.46	.14	— .32	— 69.6	.04	+ .10	+250.0
Hooghly ..	.42	1.02	+ .60	+142.8	.18	+ .84	+466.6
Burdwan ..	.36	1.04	+ .68	+188.9	.19	+ .85	+447.3
Bankura ..	.33	.54	+ .21	+63.6	.11	+ .43	+390.9
Murshidabad ..	.31	.28	— .03	— 9.7	.02	+ .26	+130.0
Dacca ..	.31	.24	— .07	— 22.6	.14	+ .10	+ 71.4
Mymensingh ..	.30	.09	— .21	— 70.0	.14	— .05	— 35.7
Chittagong ..	.30	.21	— .09	— 30.0	.42	— .21	— 50.0
Nadia ..	.23	.19	— .04	— 17.4	.01	+ .18	+1,800.0
Malda ..	.23	.24	+ .01	+ 4.3	.08	+ .16	+200.0
Birbhum ..	.22	.24	+ .02	+ 9.1	.08	+ .16	+200.0
Rajshahi ..	.19	.03	— .16	— 84.2	.05	— .02	— 40.0
Tippera ..	.18	.06	— .09	— 50.0	.02	+ .07	+350.0
Darjeeling ..	.15	.10	— .04	— 28.6	.01	+ .09	+900.0
Faridpur ..	.14	.19	+ .05	+35.7	.04	+ .15	+375.0
Noakhali ..	.13	.15	+ .02	+15.4	.02	+ .13	+650.0
Jessore ..	.06	.07	+ .01	+16.6	.01	+ .06	+600.0
Khulna ..	.06	.04	— .02	— 33.4	.01	+ .03	+300.0
Bakarganj ..	.06	.04	— .02	— 33.4	.01	+ .03	+300.0

The relative importance of small-pox as a cause of death is shown in the statement below. Calcutta with its 11.14 per cent. of the total mortality in 1925 due to small-pox headed the list, followed by Howrah. Of the remaining districts, in 7 the percentage was between 1 and 5, while in the rest it was below 1. Compared with the decennial mean, 13 districts showed a higher relative percentage, while in 14 others the disease was less intense in severity. When compared with the previous year all the districts recorded increases except Jalpaiguri, Chittagong, Mymensingh and Rajshahi.

Small-pox as a percentage of the total mortality.

Districts.	Average 1915-24.	1925.	Increases + or decreases —.	1924.	Increases + or decreases —.
Calcutta ..	3.12	11.14	+8.02	.99	+10.15
Howrah ..	2.46	7.51	+5.05	.44	+7.07
24-Parganas ..	2.37	3.86	+1.49	1.79	+2.07
Bogra ..	2.18	14.9	— .69	1.40	+ .09
Dinajpur ..	2.05	.50	— 1.55	.09	+ .41
Pabna ..	1.80	.69	— 1.11	.11	+ .58
Midnapur ..	1.69	2.06	+ .37	.39	+ 1.67
Jalpaiguri ..	1.59	.02	— 1.57	1.24	— 1.22
Rangpur ..	1.50	.48	— 1.02	.12	+ .86
Hooghly ..	1.29	3.97	+ 2.68	.69	+ 3.28
Mymensingh ..	1.26	.45	— .81	.59	— .14
Dacca ..	1.23	1.16	— .07	.64	+ .52
Chittagong ..	1.06	.98	— .08	1.83	— .85
Burdwan ..	.99	4.26	+ 3.27	.76	+ 3.50
Bankura ..	.93	2.28	+ 1.35	.39	+ 1.89
Tippera ..	.89	.58	— .31	.12	+ .46
Murshidabad ..	.78	.91	+ .13	.08	+ .83
Malda ..	.71	.82	+ .11	.36	+ .46
Nadia ..	.59	.54	— .05	.03	+ .51
Noakhali ..	.55	.81	+ .26	.16	+ .65
Birbhum ..	.54	.96	+ .42	.28	+ .68
Faridpur ..	.54	.41	— .13	.03	+ .38
Rajshahi ..	.53	.09	— .44	.14	— .05
Jessore ..	.42	.50	+ .08	.07	+ .43
Darjeeling ..	.38	.19	— .19	.09	+ .10
Bakarganj ..	.23	.18	— .05	.02	+ .16
Khulna ..	.22	.28	+ .06	.03	+ .25

The table below shows the percentages of provincial small-pox mortality. Calcutta which during the previous decade returned only 5.6 per cent of the total deaths due to small-pox in the province, recorded a percentage of 22.5 in 1925. In 7 other districts the percentages were

similarly raised, while in Birbhum the same rate was maintained in both these periods. In the remaining districts the percentages for 1925 were lower than the decennial mean. Compared with the previous year, small-pox proved more intense in all the districts but 10.

Percentage of provincial small-pox mortality in each district.

Districts.	Average 1915-24.	1925.	Increases + or decreases —.	1924.	Increases + or decreases —.
24-Parganas ..	9.6	12.2	+2.6	19.2	—7.0
Mymensingh ..	9.2	2.5	—6.7	12.2	—9.7
Midnapur ..	8.8	7.1	—1.7	4.7	—2.4
Dinajpur ..	7.8	1.6	—6.2	0.8	+0.8
Rangpur ..	7.1	2.1	—5.0	1.8	+0.3
Dacca ..	5.9	4.3	—1.6	8.2	—3.9
Calcutta ..	5.6	22.5	+16.9	5.7	+16.8
Pabna ..	4.8	1.3	—3.5	0.8	+0.5
Howrah ..	4.2	10.5	+6.3	1.9	+8.6
Bogra ..	4.0	2.1	—1.9	7.0	—4.9
Burdwan ..	3.3	8.6	+5.3	4.9	+3.7
Jalpaiguri ..	3.1	0.03	—2.07	6.5	—6.47
Tippera ..	3.1	1.5	—1.6	1.0	+0.5
Chittagong ..	3.0	2.0	—1.0	12.3	—10.3
Hooghly ..	2.8	6.3	+3.5	3.4	+2.9
Murshidabad ..	2.4	2.0	—0.4	0.5	+1.5
Nadia ..	2.1	1.6	—0.5	0.2	+1.4
Bankura ..	2.1	3.2	+1.1	2.0	+1.2
Faridpur ..	2.0	1.3	—0.7	0.3	+1.0
Rajshahi ..	1.8	0.3	—1.5	1.3	—1.0
Malda ..	1.4	1.3	—0.1	1.5	—0.2
Jessore ..	1.4	1.5	+0.1	0.6	+0.9
Noakhali ..	1.3	1.6	+0.3	1.0	+0.6
Birbhum ..	1.2	1.2	±0	1.3	—0.1
Bakarganj ..	1.0	0.6	—0.4	0.2	+0.4
Khulna ..	0.6	0.5	—0.1	0.2	+0.3
Darjeeling ..	0.3	0.1	—0.2	0.2	—0.1

56. Small-pox in towns.—It is apparent from the following table giving the total number of deaths in the towns and rural areas of the province in 1924 and 1925 that while the death-rate due to small-pox per mille of population increased in 1925, in both the towns and the rural areas, the increase was much higher in the former than in the latter. This increase in the urban death-rate was due to the intensity of epidemic in the town of Calcutta where 3.64 per mille of the total population fell victims to this disease as compared with 1.1 per mille—the small-pox death-rate of all the other towns taken together:—

	Total number of deaths.				Death-rate per mille of population.			
	Province.	Towns.	Calcutta.	Rural areas.	Province.	Towns.	Calcutta.	Rural areas.
1924	5,567	1,036	316	4,531	.12	.33	.29	.10
1925	17,436	6,247	3,923	11,189	.37	2.01	3.64	.25

Turning to the divisions, it will be observed from the following statement that 25 out of 29 towns in Burdwan Division and 40 (excluding Calcutta) out of 46 in Presidency Division were affected during the epidemic; hence it was that the death-rates in these two divisions were much higher than in the others. In rural areas, about 6 per cent. and 5 per cent. of the villages were affected in Burdwan and Presidency Divisions respectively as against about 3 per cent. or even less in the other divisions.

Divisions.	Number of towns infected.	Number of deaths.	Percentage of deaths.	Average age of deaths per town.
Burdwan ..	25	1,498	64.4	59.9
Presidency ..	40*	723	31.1	18.1
Rajshahi ..	9	49	2.1	5.4
Dacca ..	11	35	1.5	3.2
Chittagong ..	2	19	0.8	9.5
Total ..	87	2,324	100.0	26.7

* Excluding Calcutta.

Among the individual towns, besides Calcutta, where the death-rate was 3.6 per mille, 22 towns all in Burdwan and Presidency Divisions returned death-rates above 1.0 per mille, the highest 5.1, 4.6, 4.4 and 4.0 per mille being reported from Bankura, Kharar, Howrah and Bhatpara respectively. In the other affected towns it was below 1.0 per mille. The towns in the Burdwan and Presidency Divisions have been reported as centres of small-pox dissemination for several years past and it is high time that special attention should be paid by the local sanitary authorities towards starting vigorous campaigns of vaccination and revaccination in the affected localities. This will not be impossible of accomplishment since most of the towns have now been provided with Sanitary Officers.

57. Deaths from small-pox among infants and children.—From the table below showing the deaths from small-pox among infants and children, it will be seen that 6.2 per cent. of the total small-pox death occurred among infants and 19.08 per cent. in children between 1 and 10 years of age; while the remaining about 75 per cent. occurred among persons above 10. This points to the urgent necessity of introducing revaccination amongst a population, the majority of

whom, thanks to a better enforcement of the Vaccination Act under the guidance of the Health Officers now maintained in all the districts except Darjeeling, claim to have received some sort of protection against small-pox in their infancy.

Divisions.	Number of small-pox deaths.		Total number of small-pox deaths at all ages.
	Under 1 year.	Between 1 and 10 years.	
Burdwan ..	271	894	6,438
Presidency (including Calcutta) ..	714	2,140	7,931
Rajshahi ..	37	144	1,564
Dacca ..	11	30	1,520
Chittagong ..	49	119	883
Total ..	1,082	3,327	17,436

58. Admission to small-pox hospitals in Bengal.—There is no separate permanent hospital in the province set apart exclusively for small-pox. There is a separate ward for small-pox containing 164 beds attached to the Campbell Hospital in Calcutta; in Howrah, there is an infectious diseases hospital with 8 beds for small-pox patients; the number of beds can be increased up to 12, if necessary. In Darjeeling, 20 beds of a special ward in the local infectious diseases hospital were made available last year for small-pox patients; there is also a block which could accommodate 4 to 6 European cases. The immediate contacts are segregated in another building in the compound of the same hospital. Information regarding the vaccinal condition of the small-pox patients, except those admitted in the Campbell Hospital, Calcutta, is being collected and will be available for inclusion in the annual public health report for 1926. The vaccinal condition of small-pox patients admitted to the Campbell Hospital, Calcutta, classified under the various heads suggested by the Public Health Commissioner is as follows:—

- (a) Vaccinated as evidenced by the presence of one or more vaccination cicatrices 823.
- (b) Stated to have been successfully vaccinated, but no vaccination cicatrix present ... 333.
- (c) Stated to be unvaccinated (or vaccinated unsuccessfully) and no vaccination cicatrix present ... 320.

- (d) Previously unvaccinated but vaccinated during incubation of small-pox ... 15.
- (e) Stated to have been successfully revaccinated ... 44.

The following provisions are available to secure notification and isolation of small-pox cases in municipal towns :—

- (i) In Calcutta, every medical practitioner is obliged under section 435 of the Calcutta Municipal Act, 1923, to notify to the Health Officer every case of small-pox of which he becomes cognizant during the course of his practice. Under section 436 of the Act, the Health Officer or any other officer authorised by him can inspect any place at any time where a small-pox is suspected to exist; and under section 438, he can order the removal of a small-pox patient to a hospital for treatment subject to the approval of the Chief Executive Officer, if conditions for proper isolation are not possible in his own house. The Calcutta Municipal Act of 1923 is the only Bengal Act requiring notification of disease.
- (ii) In the Asansol Mines area, under temporary regulations made under the Epidemic Diseases Act, 1897, the relations of the patients are compelled to notify the occurrence of small-pox within 24 hours to the Chief Sanitary Officer. Under the same regulations, the Chief Sanitary Officer, Asansol Mines Board of Health, is authorised to order the isolation of a person suffering from small-pox for the protection of the neighbouring population. The contacts may also be ordered to be segregated for a period not exceeding ten days in such manner as approved by him. These regulations appear to have worked well in the mining settlement.
- (iii) In Howrah town, notification of small-pox is attempted through the agency of medical practitioners, as in Calcutta, but there is no law enforcing it. In addition, the officers of the

Health Department make house to house visitations during epidemics. Similar action is taken in other towns by the municipal sanitary supervisors and local vaccinators. Notification and isolation of small-pox patients cannot be legally enforced in mufassal municipalities. The Bengal Municipal Act, which applies to all the municipalities of the province, excluding Calcutta, does not contain any provision in this respect. During times of severe epidemic, it would be possible to enforce notification by temporary regulations framed under the Epidemic Diseases Act, but they have never been so applied in Bengal up to the present.

Fevers.

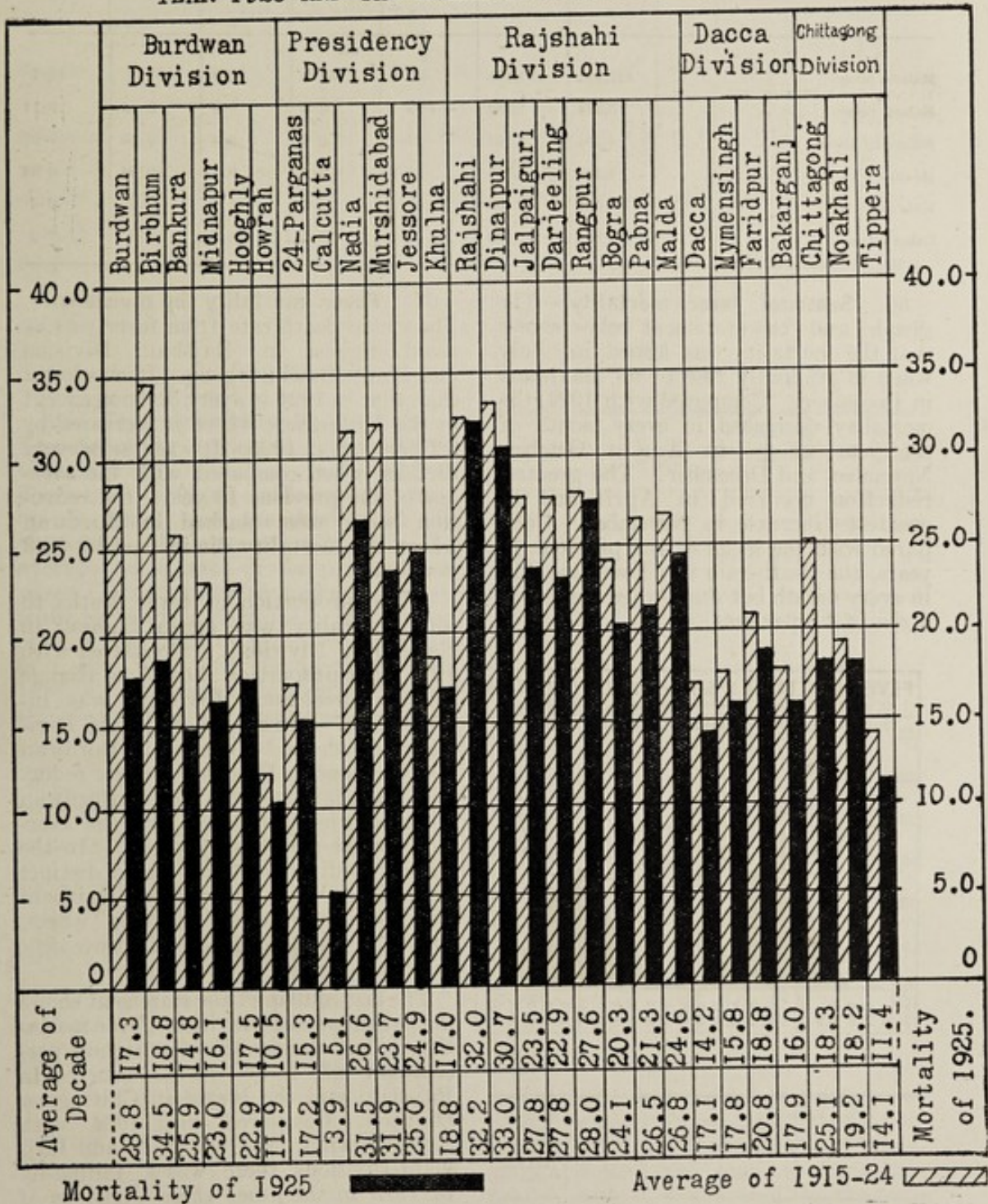
59. **General prevalence.**—The following table shows the deaths and death-rates from "Fevers" in 1924 and 1925 :—

	Total deaths.	Death-rate per mille.	Percentage of fever deaths to total mortality.
1924	.. 912,408	19.6	75.8
1925	.. 874,228	18.8	75.5

Compared with 1924, the death-rate decreased in 1925 by 4.08 per cent., while it was less than the decennial mean by 15.7 per cent.

Deaths from fevers accounted for 75.5 per cent. of the total mortality; 19.2 per mille of males and 18.3 females succumbed to fever during 1925. About 95 per cent. villages and 100 per cent. towns reported deaths from fevers. An analysis of the fever deaths shows that malaria was responsible for 56.9 per cent. of the total mortality from fever, kala-azar for 1.9 per cent. enteric for .9 per cent., relapsing fever for .4 per cent., and measles for .1 per cent., while the remaining 39.8 per cent. were claimed by other fevers. While malaria, relapsing fever, measles and other fevers were less prevalent during the year under review, death-rate from enteric and kala-azar increased, as compared with the previous year.

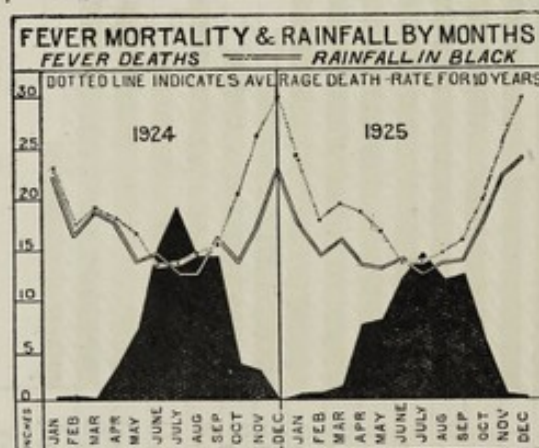
GRAPH SHOWING THE RELATIVE INTENSITY OF FEVER MORTALITY IN
EACH DISTRICT OF BENGAL PRESIDENCY DURING THE
YEAR 1925 AND THE AVERAGE OF DECADE 1915-24



Analysis of fever deaths in 1924 and 1925.

Causes.	Number.		Percent-ages of increases or decreases.	Percentages of total fever mortality.		Death-rates per mille.	
	1924.	1925.		1924.	1925.	1924.	1925.
Malaria fever	527,902	497,473	-5.8	57.9	56.9	11.3	10.7
Enteric fever	5,574	7,752	+39.1	0.8	0.9	0.12	0.17
Relapsing fever	4,034	3,161	-21.7	0.4	0.4	0.09	0.07
Measles	1,542	1,146	-25.7	0.1	0.1	0.03	0.02
Kala-azar	9,997	16,766	+67.7	1.1	1.9	0.2	0.4
Other fevers	363,359	347,930	-4.3	39.8	39.8	7.8	7.5

60. **Seasonal fever mortality.**—The graph and the statement below shows that the mortality was lowest in July when it gradually rose to its maximum in December. Compared with 1924, the mortality decreased in every month of the year, except in August, October, November and December. The greatest reduction occurred in April and the greatest increase in November. Compared with the mean of the previous 10 years, the death-rate was lower in 1925 in every month but June when there was a rise of 4.7 per cent.



Months.	Averages 1915 to 1924.	1924.	1925.	Percent-ages of difference between 1924 and 1925.
January ..	107,908	101,869	-79,712	-21.8
February ..	81,137	74,673	-65,216	-12.7
March ..	87,932	86,259	-73,587	-14.7
April ..	84,391	82,003	-61,294	-25.3
May ..	75,787	62,790	-59,059	-6.0
June ..	69,947	66,662	-63,821	-4.3
July ..	62,214	58,076	-56,397	-2.9
August ..	65,948	58,294	-61,463	+5.5
September ..	71,965	74,325	-62,701	-15.7
October ..	89,309	63,295	-79,681	+25.9
November ..	114,861	78,585	-101,685	+29.3
December ..	135,124	105,607	-109,642	+3.8

61. **Fever mortality by divisions.**—The crude death-rate from fever was as usual highest in Rajshahi Division and lowest in Chittagong. It was lower than that in 1924 in every division except in the Presidency where it increased by 6.7 per cent. in 1925. It was less in every division when compared with the average of the previous 10 years, the reduction being most marked in Burdwan where the mortality diminished by 34.3 per cent.

The proportion of fever deaths to total mortality was again highest in Rajshahi Division. Compared with 1924, this proportion showed no change in the Presidency Division, was increased in Dacca and Rajshahi Divisions and showed a decline in Burdwan and Chittagong Divisions. This reduction was again most marked in Burdwan Division when compared with the average for the previous 10 years. In the other two divisions there was a distinct increase. While, therefore, Rajshahi Division is gradually getting worse, Burdwan shows a decided improvement as regards fever.

The last column of the statement shows the percentage of provincial fever mortality. It is obvious that the highest percentages of fever deaths occurred in Rajshahi and the lowest in Chittagong Division. Compared with 1924, with the exception of Presidency and Rajshahi Divisions, there was a falling-off in 1925 in the other three divisions of the province. Compared with the previous decennium while Presidency, Rajshahi and Dacca showed higher percentages, Burdwan and Chittagong recorded decreases. From this point of view also Rajshahi is deteriorating while Burdwan is gradually improving.

Divisions.	Fever death-rates per mille.			Proportion of total deaths due to fever per cent.			Percentages of provincial fever mortality.		
	Average 10 years.	1924.	1925.	Average 10 years.	1924.	1925.	Average 10 years.	1924.	1925.
Burdwan	24.2	17.5	-15.9	72.1	68.0	-66.4	18.8	15.4	-14.7
Presidency	21.6	17.9	+19.0	68.9	67.8	-67.8	19.7	18.6	+20.6
Rajshahi	28.7	26.7	-26.4	87.1	88.0	+88.3	28.6	30.3	+31.2
Dacca	18.2	17.9	-16.0	71.3	73.8	+74.3	22.5	25.2	-23.5
Chittagong	18.4	16.4	-15.0	77.3	79.2	-76.6	10.4	10.3	-10.0

62. Fever mortality by districts.—

The following statement shows fever mortality by districts. The highest death-rate 32.0 per mille was returned by Rajshahi and the lowest 5.1 by Calcutta. When compared with the average death-rates of the previous ten years, Calcutta alone showed an increase, while there was a decrease in every other district, markedly in Birbhum, Burdwan and Bankura. On comparison with 1924, all the districts but eight show an improvement in the fever death-rate:—

Fever death-rates per mille.

Districts.	Averages of 1915 to 1924.	1925.	In-creases + or de-crease.	1924.	In-creases + or de-crease.
Birbhum	34.5	18.8	-15.7	21.9	-3.1
Dinajpur	33.0	30.7	-2.3	28.2	+2.5
Rajshahi	32.2	32.0	-.2	30.5	+1.5
Murshidabad	31.9	23.7	-8.2	20.2	+3.5
Nadia	31.5	26.6	-4.9	22.6	+4.0
Burdwan	28.8	17.3	-11.5	18.8	-1.5
Rangpur	28.0	27.6	-.4	28.9	-1.3
Jalpaiguri	27.8	23.5	-4.3	23.8	-0.3
Darjeeling	27.8	22.9	-4.9	25.2	-2.3
Malda	26.8	24.6	-2.2	20.3	+4.3
Pabna	26.5	21.3	-5.2	26.7	-5.4
Bankura	25.9	14.8	-11.1	17.7	-2.9
Chittagong	25.1	18.3	-6.8	20.1	-1.8

Districts.	Averages of 1915 to 1924.	1925.	In-creases + or de-crease.	1925.	In-creases + or de-crease.
Jessore	25.0	24.9	-.1	22.6	+2.3
Bogra	24.1	20.3	-3.8	22.7	-2.4
Midnapur	23.0	16.1	-6.9	17.5	-1.4
Hooghly	22.9	17.5	-5.4	17.6	-0.1
Faridpur	20.8	18.8	-2.0	20.1	-1.3
Noakhali	19.2	18.2	-1.0	20.8	-2.6
Khulna	18.8	17.0	-1.8	16.7	+0.3
Bakargani	17.9	16.0	-1.9	17.7	-1.7
Mymensingh	17.8	15.8	-2.0	18.1	-2.3
24-Parganas	17.2	15.3	-1.9	17.0	-1.7
Dacca	17.1	14.2	-2.9	16.1	-1.9
Tippera	14.1	11.4	-2.7	11.9	-0.5
Howrah	11.9	10.5	-1.4	11.4	-0.9
Calcutta	3.9	5.1	+1.2	5.0	+0.1

Turning to fevers as a percentage of total mortality, it is noticed that fevers claimed 92.6 per cent. deaths in Rangpur and 92.0 per cent. in Dinajpur, while only 15.5 per cent. of the total deaths in Calcutta were due to fever. Sixteen districts returned a higher percentage of fever deaths to their respective total mortality in 1925 than the average for the previous ten years, ten others showed *decreases*, while in one there was no change. Compared with

1924, there was a lesser percentage of mortality to total deaths in 17 districts in 1925 but higher in 9, Dinajpur alone returning the same percentage:—

Fevers as a percentage of the total mortality.

Districts.	Averages for 1915-24.	1925.	Increases + or decreases—.	1924.	Increases + or decreases—.	Fever indices (1925).
Dinajpur	91.9	92.0	+ .1	92.0	±0	41.9
Rangpur	91.8	92.6	+ .8	91.0	+1.6	35.4
Chittagong	88.9	84.4	-4.5	86.8	-2.4	13.6
Pabna	86.2	87.4	+1.2	91.9	-4.5	34.0
Rajshahi	85.4	85.6	+ .2	88.3	-2.7	43.6
Birbhum	84.8	75.7	-9.1	76.5	-0.8	43.7
Bogra	84.6	85.3	+ .7	85.9	-0.6	39.1
Malda	83.4	85.0	+1.6	86.4	-1.4	42.2
Jalpaiguri	83.0	86.9	+3.9	76.4	+10.5	41.8
Jessore	81.6	85.1	+3.5	83.1	+2.0	41.0
Nadia	80.6	77.0	-3.6	77.6	-0.6	51.2
Murshidabad	79.6	76.6	-3.0	75.2	+1.4	47.3
Burdwan	78.3	70.6	-7.7	74.5	-3.9	56.3
Faridpur	77.4	79.3	+1.9	80.4	-1.1	28.9
Noakhali	74.1	77.7	+3.6	81.7	-4.0	10.6
Mymensingh	73.6	78.0	+4.4	75.9	+2.1	16.1
Bankura	73.1	62.2	+10.9	63.5	-1.3	30.6
Midnapur	72.6	71.3	-1.3	70.9	+0.4	37.2
Darjeeling	70.5	70.5	±0	69.7	+0.8	21.0
Hooghly	70.4	68.0	-2.4	68.6	-0.6	44.5
Tippera	70.1	69.7	- .4	71.0	-1.3	11.2
Dacca	68.5	69.2	+ .7	70.9	-1.7	12.8
Khulna	67.4	71.3	+3.9	70.0	+1.3	37.4
Bakarganj	65.4	69.3	+3.9	67.8	+1.5	12.1
24 Parganas	64.6	68.4	+3.8	70.1	-1.7	35.7
Howrah	43.7	42.8	- .9	46.7	-3.9	39.3
Calcutta	14.7	15.5	+ .8	16.8	-1.3	8.8

These percentages give no indication of the prevalence of malaria in the respective districts as shown by their fever indices and should not be taken as being due solely to the former cause.

The table below points to the various districts as centres of fever infection. About 33 per cent. of the total fever deaths occurred in five districts alone—Mymensingh, Rangpur, Dinajpur, Raj-

shahi and Dacca. Darjeeling and Calcutta accounted only for .7 and .6 per cent. of fever deaths, respectively. Thirteen districts showed a deterioration and eleven an improvement as compared with the decennial mean, while no change occurred in the remaining three. Compared with 1924, there was an increase in nine districts and a decrease in fourteen others, the remaining four returning the same percentage:—

Percentages of provincial fever mortality occurring in each district.

Districts.	Averages. 1915-24.	1925.	Increases + or decreases —.	1924.	Increases + or decreases —.	Percentages of total reported malaria ¹ deaths, 1925.
Mymensingh	8.3	8.7	+ .4	9.6	—0.9	3.4
Rangpur	6.8	7.9	+1.1	7.9	±0	10.6
Midnapur	5.9	4.9	—1.0	5.1	—0.2	4.3
Dinajpur	5.4	6.0	+ .6	5.3	+0.7	7.4
Dacca	5.2	5.1	— .1	5.5	—0.4	1.3
Rajshahi	4.6	5.4	+ .8	5.0	+0.4	9.2
Bakarganj	4.5	4.8	+ .3	5.1	—0.3	0.8
Nadia	4.5	4.5	±0	3.7	+0.8	5.8
Faridpur	4.5	4.8	+ .3	4.9	—0.1	8.3
Jessore	4.1	4.9	+ .8	4.3	+0.6	7.7
24 Parganas	4.1	4.3	+ .2	4.6	—0.3	2.4
Burdwan	4.0	2.8	—1.2	2.9	—0.1	3.4
Chittagong	3.9	3.4	— .5	3.5	—0.1	1.6
Murshidabad	3.9	3.4	— .5	2.8	+0.6	5.3
Tippera	3.7	3.6	— .1	3.6	±0	1.3
Pabna	3.5	3.4	— .1	4.1	—0.7	5.3
Birbhum	2.8	1.8	—1.0	2.0	—0.2	0.3
Noakhali	2.7	3.1	+ .4	3.3	—0.2	0.6
Khulna	2.6	2.8	+ .2	2.7	+0.1	4.1
Bankura	2.5	1.7	— .8	1.9	—0.2	0.3
Malda	2.5	2.8	+ .3	2.2	+0.6	4.4
Jalpaiguri	2.5	2.5	±0	2.4	+0.1	4.1
Bogra	2.4	2.4	±0	2.6	—0.2	3.0
Hooghly	2.4	2.2	— .2	2.1	+0.1	3.0
Howrah	1.1	1.2	+ .1	1.2	±0	0.7
Darjeeling	.8	.7	— .1	.8	— .1	0.6
Calcutta	.4	.6	+ .2	.6	±0	0.4

63. **Fever mortality in towns and rural areas.**—The following statement shows that while the death-rate in both towns and rural areas in 1925 was less than that in 1924, fever was three times

more prevalent in the latter than in the former. Another point to be noticed from the statement is that, while 27.2 per cent. of the total deaths in towns in 1925 were due to fever, this percentage was

78.7 in the rural areas. But the most remarkable feature of the year under review was that compared with 1924 the

percentage of provincial fever mortality decreased in rural areas while it increased in towns :—

Areas.	Fever deaths per mille.		Proportion of total deaths due to fever (per cent).		Percentages of provincial fever mortality.	
	1924.	1925.	1924.	1925.	1924.	1925.
Municipal	6.6	6.5	29.5	27.2	2.2	2.3
Rural	20.5	19.7	78.6	78.7	97.8	97.7

The following towns recorded death-rates from fever above 10 per mille while the rest returned a rate below that. Compared with 1924, only 10 of these showed an improvement, while the remaining a deterioration so far as the prevalence of fever was concerned :—

Fever mortality.

Towns.	1924 per mille.	1925 per mille.	Increase + or decrease —
1. Murshidabad	18.4	26.0	+7.6
2. Chakdaha	15.0	19.2	+4.2
3. Kalna	19.1	16.8	-2.3
4. Malda	12.7	16.8	+4.1
5. Sirajganj	13.9	15.5	+1.6
6. Kurseong	16.9	15.2	-1.7
7. Kumarkhali	12.0	15.1	+3.1
8. Maheshpur	13.0	14.7	+1.7
9. Meherpur	9.3	14.1	+4.8
10. Jaynagar	12.0	13.9	+1.9
11. Taki	11.5	13.8	+2.3
12. Jamalpur	14.0	13.7	-3
13. Dainhat	13.2	13.4	+2
14. Natore	10.0	12.8	+2.8
15. Dhullian	16.0	12.6	-3.4
16. Azimganj	11.0	12.3	+1.3
17. Sherpur	11.0	12.3	+1.3
18. Chandrakona	12.7	12.2	-5
19. Hooghly-Chinsura	6.2	12.6	+6.4
20. Birnagar	4.8	12.1	+7.3
21. Baduria	14.5	11.8	-2.7
22. Baruipur	10.8	11.5	+7
23. Satkhira	11.7	11.3	-4
24. Khirpai	4.3	11.2	+6.9
25. Basirhat	13.4	10.7	-2.7
26. Jessore	6.1	10.4	+4.3
27. Narayanganj	8.6	10.2	+1.6
28. Patuakhali	12.4	10.2	-2.2
29. Kotechandpur	12.5	10.1	-2.4

64. **Malaria—Its general prevalence.**—The following table shows the number of deaths and death-rate due to malaria in Bengal :—

	Number of deaths.	Death rate per mille.	Increase or decrease per cent.
1924	527,902	11.3	..
1925	497,473	10.7	-5.3

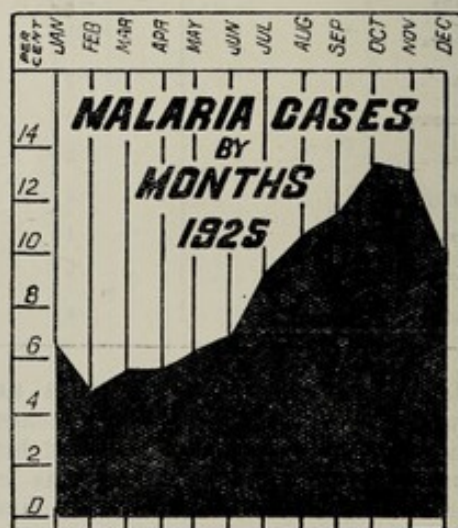
As has been pointed out last year, malaria has been steadily decreasing every year, though the figures given below are vitiated by the fact that many other febrile diseases are frequently mistaken for malaria and thus come to be included in that category.

Deaths and death-rates from malaria.

Years.	Number.	Death-rate per mille.
1921	737,223	15.8
1922	540,463	11.6
1923	539,899	11.6
1924	527,902	11.3
1925	497,473	10.7

Malaria was responsible for 56.9 per cent. of fever deaths and for 42.9 per cent. of total mortality.

65. **Seasonal incidence.**—From the diagram below, it will be seen that the greatest number of admissions from fever to the various medical institutions in the province took place in the month of October, followed in order by November, September, August, December and July, while the lowest number occurred from January to June :—





66. **Malaria by divisions.**—The crude death-rate from malaria was highest in Rajshahi Division and lowest in Chittagong, and compared with 1924, it was lower in 1925 in every division but Presidency where it was slightly increased and Rajshahi where the previous year's rate was maintained.



Rajshahi followed by Presidency Division again showed the worst record so far as the proportion of malaria deaths to total fever mortality was concerned. Compared with the previous year, this proportion was reduced in the year under review in all the divisions except Rajshahi where it increased by 1.1 per cent.

The incidence of malaria was most marked in Rajshahi and Presidency Divisions in 1925 as shown by the percentage of provincial malarial mortality. It was very low in Chittagong. These percentages were lower in 1925 than in the previous year in Eastern and Northern Bengal but higher in Western Bengal :—

Divisions.	Malaria deaths per mille of population.		Proportion of fever deaths due to malaria. (per cent.)		Percentage of provincial malaria mortality.	
	1924.	1925.	1924.	1925.	1924.	1925.
Burdwan	9.0	—7.5	51.5	—47.2	13.7	—12.2
Presidency	13.1	+13.5	72.9	—71.1	23.4	+25.7
Rajshahi	21.5	+21.5	80.5	+81.1	42.2	+44.7
Dacca	6.9	—5.4	38.9	—33.5	16.9	—13.9
Chittagong	3.3	—3.0	20.4	—20.0	3.7	—3.5

67. **Fever indices in divisions.**—The following statement shows the general incidence of malaria in divisions calculated on the basis of admissions from malaria to the various medical institutions in the country throughout the province.

The fever index for the province was higher by 12.3 per cent. in 1925 as compared with the previous year and by 17.3

per cent. as compared with 1912. It was less by 17.5 per cent. than 1921 which has been the worst year for malaria during the last six years. So far as the individual divisions were concerned, the fever indices for Burdwan, Presidency and Rajshahi increased by 8.6, 16.1 and 16.1 per cent., respectively, as compared with the previous year, but those for Dacca and Chittagong Divisions were lower :—

Fever indices.

Divisions.	1912.	1920.	1921.	1922.	1923.	1924.	1925.
Burdwan	35.4	48.2	48.5	48.1	47.3	40.6	+44.1
Presidency	33.2	45.9	44.7	41.8	29.22	27.4	+31.8
Rajshahi	25.2	34.6	36.8	33.0	37.1	32.9	+38.2
Dacca	9.9	17.5	19.4	16.8	17.4	16.3	-15.7
Chittagong	5.5	13.1	14.9	14.3	16.3	13.2	-11.6
Total	24.9	34.8	35.4	33.1	28.7	26.0	29.2

68. **Malaria by districts.**—The crude death-rate from malaria was increased in 12 districts in 1925 as compared with the previous year and reduced in the rest. The maximum death-rate 30.9 per mille occurred in Rajshahi and the lowest 1.5 per mille in Bakarganj district. It is also to be noted that Rajshahi has been returning the highest death-rate from this cause for several years past and the fever indices there have also been correspondingly on the increase.

Death-rates from malaria per mille.

Districts.	1924.	1925.	Increases + or decrease—.	Fever indices. (1925).
Rajshahi ..	29.7	30.9	+1.2	43.6
Pabna ..	23.3	18.9	-4.4	34.0
Jalpaiguri ..	22.3	21.8	-0.5	41.8
Jessore ..	21.9	22.2	+0.3	41.0
Rangpur ..	21.7	21.0	-0.7	35.4
Faridpur ..	19.9	18.4	-1.5	28.9
Dinajpur ..	19.1	21.6	+2.5	41.9
Bogra ..	17.1	14.2	-2.9	39.1
Murshidabad ..	17.1	20.9	+3.8	47.3
Malda ..	16.6	22.1	+5.5	42.2
Nadia ..	16.1	19.5	+3.4	51.2
Hooghly ..	15.4	14.0	-1.4	44.5
Darjeeling ..	14.1	11.4	-2.7	21.0
Birbhum ..	14.1	2.1	-12.0	43.7
Burdwan ..	13.5	11.7	-1.8	56.3
Khulna ..	13.3	14.0	+0.7	37.4
24 Parganas ..	8.0	4.9	-3.1	35.7
Midnapur ..	7.4	8.0	+0.6	37.2
Mymensingh ..	5.0	3.5	-1.5	16.1
Noakhali ..	4.7	2.0	-2.7	10.6
Dacca ..	4.6	2.1	-2.5	12.8
Chittagong ..	4.1	4.9	+0.8	13.6
Howrah ..	2.9	3.6	+0.7	39.3
Bakarganj ..	2.2	1.5	-0.7	12.1
Tippera ..	2.2	2.4	+0.2	11.2
Bankura ..	1.8	1.6	-0.2	30.6
Calcutta ..	1.5	1.9	+0.4	8.8

The crude death-rates, however, do not give any reliable indication of the prevalence of malaria, which is best shown by their fever indices, *i.e.*, the proportion borne by new admissions from malaria to the various dispensaries and hospitals to the total number of admissions from all causes. A comparison of the last column of the above statement with the 1925 death-rate sufficiently points to the obvious discrepancy between the two. From the following table, showing the fever indices in the various districts, it will be seen that the highest number of admissions from malaria (56.3 per cent.) was recorded in Burdwan district, followed by Nadia with a percentage of 51.2. Eight districts returned percentages of between 40 and 50, 8 others between 30 and 40 and the remaining 9, below 30. Calcutta returned the lowest percentage 8.8. The indices were higher in all the districts in 1925 as compared with 1912, except Jessore and Darjeeling. Compared with the previous year, there were more admissions from malaria in 17 districts in 1925, while the remaining districts showed slight improvements :—

Fever indices of districts.

Districts.	1912.	1922.	1923.	1924.	1925.	Differences between 1912 and 1925.
Burdwan	54.4	65.4	54.8	53.3	+56.3	+1.9
Jessore	42.0	46.9	39.1	36.2	+41.0	-1.0
Malda	39.4	34.3	46.6	34.5	+42.2	+2.8
Birbhum	39.1	55.4	47.8	43.2	+43.7	+4.6
Hooghly	38.8	56.2	51.1	36.5	+44.5	+5.7
Nadia	36.7	39.4	44.5	39.0	+51.2	+14.5
Murshidabad	33.9	47.9	47.9	38.7	+47.3	+13.4
Dinajpur	33.1	34.9	41.7	35.3	+41.9	+8.8
Midnapur	31.6	32.7	38.1	37.7	+37.2	+5.6
24-Parganas	29.4	38.3	31.7	34.7	+35.7	+6.3
Rajshahi	28.6	34.7	33.8	33.0	+43.6	+15.0
Bankura	24.7	42.1	38.3	34.3	+30.6	+5.9
Khulna	24.1	36.4	31.8	30.0	+37.4	+13.3
Howrah	23.8	36.6	34.5	37.4	+39.3	+15.5
Darjeeling	23.0	24.6	24.5	21.1	+21.0	-2.0
Pabna	23.0	31.9	35.9	35.0	+34.0	+11.0
Jalpaiguri	22.2	35.1	40.4	41.9	+41.8	+19.6
Rangpur	17.1	29.8	35.5	29.8	+35.4	+18.3
Faridpur	16.9	24.1	29.5	25.9	+28.9	+12.0
Bogra	16.6	38.7	44.3	36.4	+39.1	+22.5
Bakarganj	10.6	14.5	14.4	13.6	+12.1	+1.5
Calcutta	8.4	9.9	7.8	8.7	+8.8	+0.4
Dacca	7.1	12.5	15.1	14.0	+12.8	+5.7
Chittagong	6.8	19.8	16.6	13.9	+13.6	+6.8
Mymensingh	5.3	16.1	17.8	17.0	+16.1	+10.8
Noakhali	4.4	11.5	12.5	7.7	+10.6	+6.2
Tippera	4.2	11.5	16.2	17.4	+11.2	+7.0

69. **Malaria in towns and rural areas.**—From the following statement showing the deaths and death-rates from malaria in towns and rural areas since 1921, it is apparent that while the death-rate both in towns and rural areas has been gradually decreasing the reduction effected within the last 5 years has been 46.2 per cent. in towns and only 32.3 per cent. in rural areas. The greater improvement in towns has been chiefly due to greater facilities for treatment though other factors are also involved. Only 10 towns reported deaths above 10.0 per mille in 1925 against 14 in 1924. Of these 9 are the same as were noted in the previous year's report as returning a death-rate above 10.0 per mille, though 3 of them record a lower rate this year; while 6 show an increase. The tenth, Birnagar, which reported a death-rate of 4.8 per mille last year, recorded a rate of 11.3 per mille this year. In addition to Kharda, Jangipur, Kishorganj, Barisal, Pirojpur, Cox's Bazar, and Brahmanbaria, which reported no deaths from malaria in the previous year, 7 others also, *viz.*, Raniganj, Vishnupur, Tamluk, Netrakona, Jhalakati, Sudharam and Chandpur were reported to be free from malaria this year.

On the other hand Katwa, Khirpai, Champdani, Titagarh, Mursidabad, Bogra, Muktagacha, Patuakhali and Bhola that reported no deaths due to this cause last year, became again infected with malaria this year.

Deaths and death-rates from malaria in towns and rural areas per mille.

Years.	Towns.		Rural areas.	
	No.	Rate.	No.	Rate.
1921	11,998	3.9	725,315	16.7
1922	8,334	2.7	532,129	12.3
1923	7,574	2.4	532,325	12.2
1924	7,003	2.3	520,899	11.9
1925	6,673	2.1	490,800	11.3

70. **Quinine consumption.**—The total amount of quinine consumed in the province in the year under review was 10,109.7 lbs. as against 8,479.2 lbs. in the previous year showing an increase of 1,630.5 lbs. Dacca Division consumed the largest amount, while Presidency Division used 1,134 lbs. more than the previous year. The consumption in Burdwan Division was the lowest—1,133.7 lbs., though this too was greater than that in 1924 by 101.8 lbs.

Total amount of quinine consumed by divisions.

Divisions.	Total amount in lbs.		Increases+ or de- creases—.
	1924.	1925.	
Burdwan	1,031.9	1,133.7	+101.8
Presidency	1,299.3	2,433.3	+1,134.0
Rajshahi	1,180.1	1,455.0	+274.9
Dacca	2,542.2	3,096.4	+554.2
Chittagong	2,425.7	1,991.3	-434.4
Total	8,479.2	10,109.7	+1,630.5

Turning to the districts, it will be observed from the following statement that as in the previous year the largest amounts of quinine was consumed in Mymensingh and Tippera districts, Howrah, Jalpaiguri and Darjeeling were content with only 89.0, 73.7 and 32.5 lbs., respectively, during the year. The consumption increased in all the districts except Noakhali, Tippera, Chittagong,

Pabna, Midnapur, Birbhum, Howrah and Jalpaiguri, where it decreased. With the exception of the first 3, where the fever indices for the year were comparatively lower, it is regrettable that the remaining districts should only consume so little quinine considering that their fever indices were very high as shown in the following table:—

Districts.	Total quinine sold in pounds.		Increases + or decreases —.	Grains of quinine consumed, per head of the population.		Increases or decreases in grain per head.	Fever indices.		Increases + or decreases —.
	1924.	1925.		1924.	1925.		1924.	1925.	
Mymensingh	1,165.7	1,423.4	+22.1	1.7	2.0	+0.3	17.0	16.1	—
Tippera	1,168.8	1,125.1	—3.7	2.9	2.8	—0.1	17.4	11.2	—
Dacca	585.7	670.8	+14.5	1.3	1.5	+0.2	14.0	12.8	—
Jessore	308.6	592.4	+91.9	1.2	2.4	+1.2	36.2	41.0	+
Faridpur	386.2	582.8	+59.9	1.2	1.8	+0.6	25.9	28.9	+
Nadla	207.4	562.2	+171.0	1.0	2.6	+1.6	39.0	51.2	+
Khulna	245.1	511.4	+108.6	1.2	2.4	+1.2	30.0	37.4	+
Chittagong	634.3	479.4	—24.4	2.7	2.0	—0.7	13.9	13.6	—
Bakarganj	404.0	419.4	+3.8	1.1	1.1	± 0	13.6	12.1	—
Noakhali	622.8	386.8	—37.9	2.9	1.8	—1.1	7.7	10.6	+
Burdwan	239.4	382.8	+59.9	1.2	1.8	+0.6	53.3	56.3	+
Murshidabad	146.8	335.7	+128.7	0.8	1.8	+1.0	38.7	47.3	+
24 Parganas	257.1	287.1	+11.6	0.7	0.8	+0.1	34.7	35.7	+
Rajshahi	174.3	274.2	+57.3	0.8	1.2	+0.4	33.0	43.6	+
Pabna	273.1	263.4	—3.6	1.4	1.5	+0.1	35.0	34.0	—
Rangpur	178.3	241.1	+35.2	0.5	0.6	+0.1	29.8	35.4	+
Midnapur	245.1	240.5	—1.9	0.6	0.7	+0.1	37.7	37.2	—
Malda	128.6	237.1	+84.3	0.9	1.8	+0.9	34.5	42.2	+
Hooghly	164.6	182.0	+10.5	1.1	1.1	± 0	36.5	44.5	+
Bogra	153.7	168.8	+8.5	1.0	1.1	+0.1	36.4	39.1	+
Dinajpur	145.7	166.2	+14.0	0.6	0.6	± 0	35.3	41.9	+
Calcutta	134.3	144.5	+7.6	1.0	0.9	—0.1	8.7	8.8	+
Bankura	113.1	131.4	+15.2	0.8	0.9	+0.1	34.3	30.6	—
Birbhum	129.7	108.0	—16.7	1.1	0.8	—0.3	43.2	43.7	+
Howrah	140.0	89.0	—36.4	1.0	0.6	—0.4	37.4	39.3	+
Jalpaiguri	94.3	73.7	—21.9	0.7	0.4	—0.3	41.9	41.8	—
Darjeeling	32.1	32.5	+1.2	0.8	0.8	± 0	21.1	21.0	—
Total	8,479.2	10,109.7	+19.2						

	Fever indices.	Quinine consumption (1925).	Average consumption per head.
			Grs.
Birbhum ..	43.7	108.0	0.8
Jalpaiguri ..	41.8	73.7	0.4
Howrah ..	29.3	89.0	0.6
Midnapur ..	37.2	240.5	0.7
Pabna ..	34.0	263.4	1.5

The average consumption of quinine was 2.0 grains and above a head in six districts and below a grain a head in ten districts, in all of which, except Calcutta and Darjeeling, the fever indices have been reported to be above 30.0 per cent. As compared with 1924, the average consumption increased in 16 districts, decreased in seven others, while it remained the same in the remaining

four. So long as quinine is not more liberally provided, it is not possible to eradicate malaria from the province.

Experimental Anti-Malarial Operations.

71. **Banka Valley Scheme.**—It is a flood-flush scheme over a rural area comprising 19 villages. The details of the scheme were described in the previous reports. The idea is to introduce flood water from the river Banka into the fields during the rainy season when it is most needed for the optimum growth of the paddy. In the year under report, no silt-laden water could be introduced into the area. Due to the shortage in rainfall, the Irrigation Department

could not spare river water which was required in other leased areas where it was obligatory for the department to supply water. The spleen index in the treated area was 52.2 against 53.1 per cent. in 1924 and 65.9 per cent., the average of the previous 5 years. In the untreated area the spleen index was 57.5 against 52.6 in 1924 and 62.5, the average of the previous 5 years. Malaria sickness rate for 1925 was 533.5 per mille against 397.1 in 1924 and 423.5 the average of the previous five years, whilst in the untreated area the malaria sickness rate was 681.1 per mille in 1925 against 434.9 in 1924 and 457.3, the average of the previous five years. The malaria death-rate in 1925 was 11.8 per mille in the treated area against 7.4 in the year 1924 and 14.4 the average of the quinquennium and in the untreated area the malaria death-rate was 11.5 against 8.2 in 1924 and 19.2 the average of the previous quinquennium. Total death-rate was 34.6 per mille in the treated area against 39.9 in 1924 and 46.1 the average of the previous five years; and in the untreated area the death-rate from all causes was 29.2 in 1925 against 36.9 in 1924 and 38.7 of the previous 5 years. The birth-rate in the treated area was 42.8 per mille in 1925 against 42.9 in 1924 and 36.8 the quinquennial average, and in the untreated area it was 38.6 in 1925 against 32.8 in 1924 and 35.5 the quinquennial average. The natural increase of population which is the sign of the improvement in the economic condition was +8.2 in 1925 in the treated area against +3, +0.36, -1.9, -24.8, -23.8, -48.3 and -68.7 per mille in 1924, 1923, 1922, 1921, 1920, 1919 and 1918, respectively; whereas in the untreated area it was -9.4 in 1925 against -4.1, +10.4, -14.4, -7.5, -36.9, -64.6 in the years of 1924, 1923, 1922, 1921, 1920, 1919 and 1918, respectively.

72. Jangipur Scheme.—The scheme worked as in the previous years with the change that it was operated by the Jangipur Municipality. Wards I, II, III, IV and V are under the flushing system. The result in the spleen index is as follows:—

	1918,	Average of 1920-24.	1924	1925.
Ward I	20.0	4.8	2.6	0.0
" II	14.6	23.1	1.9	1.9
" III	16.5	5.7	0.8	0.5
" IV	33.5	11.5	3.1	2.3
" V	64.1	35.5	6.8	2.8
" VI	36.5	20.3	3.03	2.5
Diara Land	2.1	2.5	2.9	0.5

The total death-rate in Jangipur (Wards I, II and III) was 16.9 in 1925 against 22.7 in 1924 and 26.8 the average of the previous quinquennium and in Wards IV and V it was 10.03 and 6.4 per mille respectively in 1925 against 31.2 and 33.3 in 1924 and 27.4 and 31.4 the average of the last quinquennium, respectively. Whilst in Ward VI and the Diara land it was 19.2 and 17.9 per mille in 1925 against 16.3 and 12.2 in 1924 and 20.1 and 16.3 the average of the last quinquennium, respectively. The birth-rate in Jangipur was 39.3 in 1925 against 47.7 in 1924 and 44.3 the average of the last quinquennium and in Wards IV and V it was 28.0 and 39.7 per mille in 1925 against 29.1 and 31.3 in 1924 and 30.0 and 31.5 the averages of the last 5 years, respectively. Whilst in Ward VI and Diara land it was 31.5 and 48.3 in 1925 against 32.6 and 36.8 in 1924 and 28.4 and 37.0 the average of the last quinquennium, respectively. The scheme on the whole worked satisfactorily.

73. Meenglas Scheme.—In September 1925, the Meenglas as well as other gardens were examined to find out the effect of anti-malarial operations adopted in the Meenglas Tea Estate. The detailed report has been separately printed. Meenglas showed the lowest spleen index, lowest but one parasitic index and the least amount of breeding of mosquitoes.

The spleen index in 1925 for the whole garden was 51.8 against 53.2 in 1924 and 63.2 the average of the previous quinquennium. The death-rate from malaria was 4.6 against 5.9 in 1924 and 5.1 the average of the last 4 years. The total death-rate was 33.2 against 47.4 in 1924 and 41.3 the average for last 4 years. The birth-rate was 33.2 against 39.5 in 1924 and 40.6 the average of last 4 years. Therefore the effect of the operations was satisfactory. Although, there is almost complete eradication of the local mosquito-breeding places, the amount of mosquitoes immigrating into the area from other gardens is quite enough to keep up the present malarial incidence in the locality. Unless the gardens co-operate and take combined action, it is very difficult to reduce malaria to a negligible factor.

74. Singaran Scheme.—The scheme was worked in 1925 as in the previous

years. The spleen index and vital returns in the treated area and untreated are noted below:—

	1925.	1924.	Average of 1920-24.
	Per cent.	Per cent.	Per cent.
Spleen index—			
Treated area ..	6.6	6.8	23.8
Untreated area ..	1.2	1.4	6.9
The sickness rate from malaria—			
	Per mille.	Per mille.	Per mille.
Treated area ..	58.8	48.4	61.6
Untreated area ..	28.1	9.7	22.7
Fever index—			
Treated area ..	32.6	26.5	24.8
Untreated area ..	25.4	11.5	16.3
Malaria death-rate—			
Treated area ..	..	..	2.8
Untreated area ..	0.7	0.0	0.9
Total death-rate—			
Treated area ..	30.7	20.4	33.2
Untreated area ..	16.4	12.8	22.9
Birth-rate—			
Treated area ..	40.1	42.9	34.2
Untreated area ..	34.2	21.08	26.9

There was general increase in the malarial incidence in Burdwan district last year and it must have some influence on its incidence in this locality also. However this year's incidence is certainly much lower than that of the average of the last 5 years.

75. Malaria survey of the Jalpaiguri Duars.—Several tea gardens were surveyed in September 1925 from the malaria point of view. They were divided roughly into four classes—

(1) Gardens situated in an area consisting of sloping uplands adjoining the forests of the foothills. Here the surface streams are dry for a considerable period of the year which do not commence to run until about 40 inches of rainfall in the locality.

(2) Gardens situated in an area immediately south of the former in which the streams commence to flow earlier and continue later.

(3) Gardens situated in an area still to the south where the streams flow almost throughout the year and are much broader.

(4) Gardens practically situated in plains where perennial slow-running streams abound.

Breeding places of mosquitoes were (1) Jhoras which commence to run after 30 to 40 inches of rainfall, (2) perennial streams, (3) depressions and foggy areas containing seepage water, (4) ditches and borrowpits, and (5) ricefields.

Species of mosquitoes.—*A. Maculatus*, *Minimus*, *Karwari*, *Aitkeni*, *Culicifacies*, *Fuliginosus*, *Jamesii*, *Sinensis*, *Barbirostris* and *Rossi* were the species of anophelines found in that region. The relative preponderance of the species changed according to the situation of the garden. As for instance in the gardens situated in the first class area showed *A. Maculatus* and *Minimus*. In the garden situated in the second group of lands, *A. Culicifacies* could be found, whereas in the plains *A. Sinensis* appeared.

The average spleen index of the area was 70.6 amongst total of 1903 children examined. The paharia children showed higher spleen index than the madesia children, and amongst the paharias whether born in the garden or outside the spleen index was almost the same unlike that of madesias in which case the children who were born within the area had higher spleen index than those who were introduced from outside.

	Total children	Total spleen.	Percentage.
Paharia—			
Born within ..	341	292	85.6
Born outside ..	313	271	86.3
Madesia—			
Born within ..	1,466	1,166	79.5
Born outside ..	834	568	68.1

It was also found that with the age advancing the rate of spleen fell, possibly due to the partial immunity acquired during the stay. The parasitic index was 71.6 per cent. amongst a total of 953 blood films examined. Mat. parasites were found in 57.2 per cent., B. T. in 35.5 per cent. and quartan in 7.3 per cent. of the positive slides.

Regarding vital statistics, it was found that the record is most neglected in some of the gardens. The total death-rate varied from 22.5 per mille to 61.7 per mille. The malaria death-rate from 2.1 per mille to 14.8 per mille to 64 per mille.

Sickness rate.—It was found that the paharias suffered twice as much from all causes and thrice as much from malaria as the madesias. It was also found that there were two distinct rises in the sickness rate during the year once in March-April and again in August. In the

plains, the highest peak is generally in October or November. Here also it was found that as the gardens in the plains were approached this peak began to shift towards October.

Rainfall.—In the gardens in the first 3 groups of areas the more the rainfall the higher was sickness rate. Whereas in the garden situated in the plains, the more the rainfall the lower was the sickness rate, just like the plains.

76. Kala-azar.—The following statement shows the deaths and death-rates from kala-azar in the province since the year 1921. It will be seen that kala-azar has considerably increased within the last 5 years, the increase in the death-rate being 1,100·0 per cent. as compared with 1921 and 71·4 per cent. against that of 1924. Kala-azar was responsible for 1·9 per cent. of fever mortality and 1·4 per cent. of total deaths due to all causes against 1·1 and ·8 per cent; respectively, in the previous year. The reported death-rate from kala-azar was ·66 per mille in all towns, ·76 per mille in Calcutta and ·34 per mille in rural areas. Difficulty in diagnosis for want of medical practitioners possibly accounts for such a comparatively low rate of mortality in rural areas, where many of such cases are probably ascribed to some other cause. Twenty-one towns returned a death-rate of 1·0 per mille and above, the rest below 1·0 per mille. Very high rates were recorded in Jamalpur (Mymensingh district) 7·7 per mille, Sherpur (Bogra district) 3·3 per mille and Basirhat 3·1 per mille. Only 31 out of 116 towns reported no death from this cause.

Deaths and death-rates from kala-azar.

Years.	Number of deaths.			
	Bengal Presidency.	All Bengal towns.	Calcutta.	Rural areas.
1921	1,552	626	204	926
1922	1,531	604	287	927
1923	4,565	1,098	501	3,467
1924	9,997	1,571	665	8,426
1925	16,766	2,051	823	14,715

Years.	Ratio per mille.			
	Bengal Presidency.	All Bengal towns.	Calcutta.	Rural areas.
1921	·03	·20	·19	·02
1922	·03	·19	·26	·02
1923	·10	·35	·46	·08
1924	·21	·51	·62	·19
1925	·36	·66	·76	·34

77. Kala-azar by districts.—The following statement shows the number of kala-azar cases treated in the dispensaries and by other outside agencies since 1921. There appears to have been an increase in all the districts except Howrah, Birbhum, Hooghly, Nadia, Darjeeling, Malda and Noakhali. The decrease in the latter districts seems to be only apparent, and is possibly due to the fact that the figures for November and December, 1925, were not supplied by the Central Co-operative Anti-malaria Society while the Bengal Health Association failed to furnish figures for any month of the year. The activities of the Health Officers in the various districts of the province are detailed in another part of this report.

78. The following table of kala-azar cases treated in the dispensaries or by other agencies, year by year, shows that there has been an increase in the number of cases:—

Districts.	1921.	1922.	1923.		Total.	1924.		Total.	1925.		Total.
			Dispensary.	Outside agency.		Dispensary.	Outside agency.		Dispensary.	Outside agency.	
Mymensingh	1,327	1,521	7,397	..	7,397	8,690	..	8,690	11,181	5,758	16,939
Noakhali	194	437	2,640	771	3,411	8,687	4,876	13,563	6,792	2,645	9,437
24 Parganas	167	1,558	4,224	11,126	15,350	8,207	10,117	18,324	13,742	14,208	27,950
Tippura	276	1,052	2,203	2,392	4,595	9,403	4,867	14,270	13,311	6,233	19,544
Dacca	485	786	2,237	19	2,256	4,190	787	4,977	6,921	638	7,559
Hooghly	175	587	1,804	279	2,083	2,768	4,677	7,445	3,144	1,887	5,031
Nadia	269	841	1,549	..	1,549	3,262	4,944	8,206	4,672	2,924	7,596
Malda	126	195	1,065	469	1,534	2,555	3,041	5,596	3,142	1,748	4,895
Faridpur	42	171	716	694	1,410	2,346	1,372	3,718	4,924	1,987	6,911
Burdwan	734	712	1,333	60	1,393	1,451	62	1,513	1,957	76	2,033
Jessore	211	269	1,170	153	1,323	3,845	1,708	5,553	7,016	1,625	8,641
Rajshahi	685	300	1,213	74	1,287	5,130	5,751	10,881	12,679	3,141	15,820
Dinajpur	132	323	1,068	59	1,127	1,671	845	2,516	2,676	308	2,984
Bakarganj	186	332	792	268	1,060	4,414	1,527	5,941	8,360	5,158	13,518
Bogra	14	66	516	501	1,017	1,638	2,333	3,971	4,327	370	4,697
Rangpur	126	272	923	23	946	1,787	1,519	3,306	4,130	1,094	5,224
Murshidabad	222	469	920	..	920	1,377	..	1,377	2,178	118	2,296
Khulna	64	53	457	444	901	1,733	1,861	3,594	5,077	3,373	8,450
Howrah	1	20	302	407	709	635	5,040	5,675	1,184	3,143	4,327
Pabna	58	126	469	118	578	568	324	892	970	224	1,194
Darjeeling	84	242	434	..	434	398	..	398	278	..	278
Jalpaiguri	43	35	154	..	154	204	..	204	301	24	325
Midnapur	42	30	123	..	123	193	..	193	411	29	440
Chittagong	19	15	98	..	98	336	187	523	721	607	1,328
Birbhum	13	8	52	..	52	79	..	79	44	..	44
Bankura	13	21	33	..	33	37	..	37	55	5	60
Total	5,708	10,441	33,883	17,857	51,740	75,604	55,348	130,952	120,393	57,328	177,721

79. **Enteric fever.**—It will be seen from the following table that the death-rate from enteric fever rose from 0.12 per mille in 1921 and 1924 to .17 per mille in 1925, showing an increase of 41.7 per cent. Considering the widespread nature of infection this rate of mortality is too low. Only 47 out of 116 towns recorded deaths from this cause. Six towns reported death-rate of 1.0 per mille and above, and the rest below that. The highest death-rate, 1.7 per mille, was returned by Jaynagar. Enteric fever was responsible for .89 per cent. of fever mortality and .67 per cent. of total mortality:—

Deaths and death-rates from enteric fever.

Years.	Number of deaths.			
	Pro-vince.	All towns.	Calcutta.	Rural areas.
1921	5,693	678	328	5,015
1922	5,564	821	413	4,743
1923	6,680	974	460	5,706
1924	5,574	1,146	557	4,428
1925	7,752	1,020	613	6,732
Years.	Death-rates per mille.			
	Pro-vince.	All towns.	Calcutta.	Rural areas.
1921	0.12	0.22	0.30	0.11
1922	0.12	0.26	0.38	0.11
1923	0.14	0.31	0.43	0.13
1924	0.12	0.37	0.52	0.10
1925	0.17	0.33	0.57	0.15

80. **Measles.**—Measles accounted for 1,146 deaths, as compared with 1,542 in the previous year, giving a death-rate of .02 per mille in 1925 against .03 per mille in 1924. The registration of statistics of these subsidiary diseases being still very defective, the apparent decrease in the death-rate in the year under review cannot be a source of any satisfaction. Excluding Calcutta, only 29 out of 115 towns reported deaths from measles the death-rate being .05 per mille as compared with .02 per mille in rural areas. Calcutta returned a death-rate of .06 per mille in 1925 against .25 in 1924. Enteric fever represented .13 per cent. of fever mortality and .09 per cent. of total mortality.

Deaths and death-rates per mille from measles.

Years.	Number of deaths.			
	Pro-vince.	All towns.	Calcutta.	Rural areas.
1921	1,537	339	144	1,198
1922	1,160	117	65	1,043
1923	1,424	186	56	1,238
1924	1,542	337	266	1,205
1925	1,146	168	67	978
Years.	Death-rates per mille.			
	Pro-vince.	All towns.	Calcutta.	Rural areas.
1921	.03	.11	.13	.03
1922	.02	.03	.06	.02
1923	.03	.06	.05	.03
1924	.03	.11	.25	.03
1925	.02	.05	.06	.02

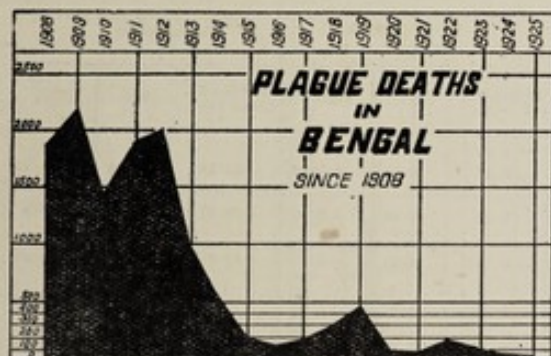
81. **Relapsing fever.**—In 1925, 3,161 deaths with a death-rate of .07 per mille occurred from relapsing fever as compared with 4,034 and .09, respectively, in the previous year. These statistics point to defective registration and hence are unreliable. No death occurred in Calcutta from this cause. Only 22 out of 116 towns reported deaths from relapsing fever. Seven towns reported a death-rate of over 1.0 per mille the rest below that. Sudharam headed this list as in the last year with a rate of 3.5 per mille followed by Chakdaña 2.9 per mille. Relapsing fever claimed .36 per cent. of fever mortality and .27 per cent. of the total mortality.

Deaths and death-rates from relapsing fever.

Years.	Number of deaths.			
	Pro-vince.	All towns.	Calcutta.	Rural areas.
1921	6,798	494	..	6,304
1922	5,285	307	2	4,978
1923	6,340	87	1	6,253
1924	4,034	119	..	3,915
1925	3,161	131	..	3,030
Years.	Death-rates per mille.			
	Pro-vince.	All towns.	Calcutta.	Rural areas.
1921	.14	.16	..	.14
1922	.11	.10	.002	.11
1923	.14	.02	.001	.14
1924	.09	.04	..	.09
1925	.07	.04	..	.07

82. **Other fevers.**—The remaining 347,930 deaths from fevers were ascribed to other fevers; these showed a death-rate of 7.5 per mille, less by 3.8 per cent. in 1925 than the previous year. This reduction was chiefly confined to Calcutta and rural areas, the rate remaining the same for towns; 39.8 per cent. of fever mortality and 30.03 per cent. of total mortality were registered as due to "Other fevers".

83. **Plague.**—Only 9 cases of plague were reported in 1925, all from Calcutta, giving a death-rate of .01 per mille for Calcutta and .0002 per mille for the province from this cause. One death occurred in January, 2 in June, 5 in July and one in December. The January case was imported; all the others were local. All the cases were of the bubonic type. Eight were males and one female. Plague as a cause of disease should be considered as a negligible factor so far as this province is concerned.



84. **Dysentery and Diarrhoea—General prevalence.**—The following statement shows the number of deaths and death-rates from dysentery and diarrhoea during 1925 and 1924.

		Deaths.	Death-rate (per mille).	Percentage of dysentery and diarrhoea deaths to total mortality.
1924		22,470	.48	1.87
1925		21,836	.47	1.88

The death-rate from these two diseases in 1925 was less by 2.1 per cent., as compared with that of 1924, and by 14.6

per cent. when compared with the previous decennium. The death-rate from dysentery was .29 per mille and from diarrhoea .18 per mille in 1925 against .30 and .18 per mille, respectively, in 1924; 115 males died to every 100 females from this cause; 7,646 villages out of a total of 84,748 or about 9 per cent. reported deaths from these two causes. The following table compares the mortality from this cause in the towns and rural areas:—

Dysentery and Diarrhoea.

Years.	Number of deaths		
	All towns.	Calcutta.	Rural areas.
1924	7,285	3,358	15,185
1925	7,156	3,132	14,680
Death-rates per mille.			
1924	2.35	3.12	.35
1925	2.30	2.91	.34

From this it will be seen that while the death-rate in towns was 2.30 per mille in 1925, it was only .34 per mille in rural areas. Calcutta recorded a rate of 2.91 mille. There was a general reduction in the death-rate in towns and rural areas in 1925 compared with the previous year, even Calcutta showed a diminution of 6.7 per cent. in its death-rate from this cause; 5 towns out of 116 were free from dysentery and 16 from diarrhoea. High death-rates were returned from Baranagar (3.8), Budge Budge (3.4), Sherpur (2.8 per mille) for dysentery and from Ramjibanpur (4.2), Malda (3.2) and Khirpai (2.9 per mille) for diarrhoea.

Only 30 towns reported death-rates below 1.0 per mille.

85. **Seasonal incidence.**—The death-rate was comparatively the lowest in July and September after which it began to rise gradually till it reached its maximum in December. Compared with 1924, the death-rate decreased in every month in 1925, except in March, October, November and December.

What has been said in the last year's report about the seasonal incidence of dysentery and diarrhoea being in inverse ratio in the hills and plains is further corroborated by a comparison of the death-rates from these two diseases in

Howrah and Darjeeling during the year under review, as seen from the following statement from which it is apparent that the mortality rates were very high in the plains in those months when they were comparatively the lowest in the hills and *vice versa* :—

Seasonal incidence of Dysentery and Diarrhoea.

Months.	Howrah.	Darjeeling.
January ..	8.66	1.68
February ..	7.48	1.83
March ..	8.55	5.65
April ..	8.03	9.16
May ..	7.52	10.38
June ..	6.30	21.06
July ..	6.78	14.66
August ..	8.37	13.43
September ..	7.92	7.17
October ..	8.70	7.33
November ..	9.43	4.88
December ..	12.23	2.75

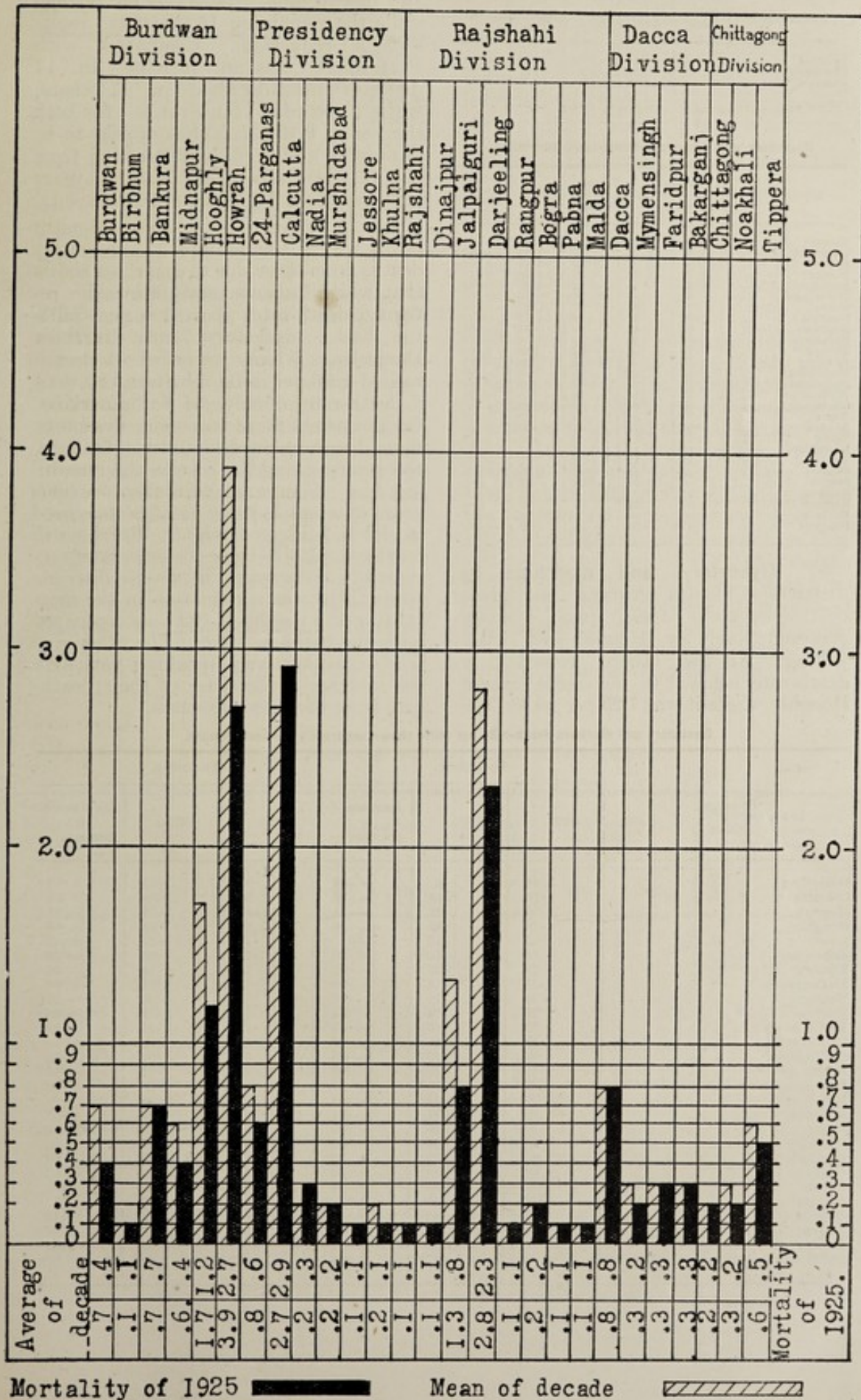
86. **Dysentery and diarrhoea by divisions.**—The death-rate from dysentery and diarrhoea was highest in Burdwan Division and lowest in Rajshahi in 1925. Compared with the average for the previous decennium, it was reduced by 28.0 per cent. in Burdwan, 4.8 per cent. in Presidency, 11.5 per cent. in Rajshahi, 2.4 per cent. in Dacca and 10.3 per cent. in Chittagong Divisions. Compared with 1924, the death-rates increased in Presidency, Dacca and Chittagong but were reduced in Burdwan and Rajshahi Divisions. Again, while 3.44 per cent. of the total deaths were due to this cause in Burdwan, it accounted for only .77 per cent. of the total deaths in Rajshahi. Compared with the decennial averages, the proportion of total mortality due to dysentery and diarrhoea in 1925 was higher in all the divisions but Rajshahi where it was reduced. It was, however, higher in Dacca and Chittagong Divisions but lower in the other three, when compared with that for 1924.

Divisions.	Death-rates per mille.			Proportion of total mortality due to dysentery and diarrhoea.			Percentages of total provincial mortality.		
	Averages (1915-24).	1924.	1925.	Averages (1915-24).	1924.	1925.	Averages (1915-24).	1924.	1925.
Burdwan	1.14	.92	.82	3.41	3.59	+3.44	-36.18	-33.08	-30.40
Presidency	.62	.56	+.59	1.98	2.13	+2.10	+23.01	+23.69	+25.53
Rajshahi	.26	.26	-.23	0.81	0.87	-0.77	-10.80	+12.19	+10.91
Dacca	.41	.39	+.40	1.63	1.60	+1.88	+20.90	+22.23	+23.80
Chittagong	.39	.34	+.35	1.67	1.63	+1.79	+9.11	-8.81	+9.36

Taking the percentages of total provincial mortality due to this cause, it will be noticed that about 56 per cent. of deaths due to dysentery and diarrhoea occurred in Burdwan and Presidency Divisions, while another 23.80 per cent. were returned from Dacca Division, Rajshahi and Chittagong Divisions recorded very low percentages. Compared with the average of the previous 10 years, this percentage increased in all divisions but Burdwan while compared with 1924, it was higher in Presidency, Dacca and Chittagong Divisions and lower in the other two divisions. Taking the two diseases individually it will be seen from the following table that while the death-rate from dysentery was highest in Presidency and lowest in Rajshahi Division, it was Burdwan

where the greatest number of deaths occurred from diarrhoea. Rajshahi again returned the lowest death-rate from diarrhoea. Dysentery returned a higher rate in every division than diarrhoea, except in Burdwan. The proportion of dysentery deaths to total mortality was highest in Burdwan and lowest in Rajshahi and the same was the case with diarrhoea also. But when the total provincial mortality from these diseases is analysed, it is noticed that the greatest number of such deaths due to dysentery occurred in Dacca Division while Chittagong returned the lowest percentage. On the other hand, 45 per cent. the highest percentage of the diarrhoea death occurred in Burdwan while only about 7 per cent. took place in Chittagong Division.

GRAPH SHOWING THE RELATIVE INTENSITY OF DYSENTERY AND DIARRHOEA MORTALITY IN EACH DISTRICT OF BENCAL PRESIDENCY DURING THE YEAR 1925 AND THE AVERAGE OF DECADE 1915-24



Divisions.	Death rates per mille.		Portion of total deaths due to Dysentery and diarrhoea.		Percentages of total provincial mortality.	
	Dysentery.	Diarrhoea.	Dysentery.	Diarrhoea.	Dysentery.	Diarrhoea.
Burdwan	31	16	1.51	1.93	21.44	4.09
Presidency	33	21	1.34	0.73	2.27	24.32
Rajshahi	16	0.7	0.53	0.24	12.07	8.99
Dacca	31	0.9	1.44	0.44	29.32	14.75
Chittagong	25	0.9	1.29	0.49	19.90	6.84

Dysentery and diarrhoea death-rates per mille.

Districts.	Average of decade.	1925.	Increases or decreases.	1924.	Increases + or decreases —.
Howrah	3.90	2.72	-1.18	2.55	+1.17
Darjeeling	2.76	2.31	-0.45	2.83	-0.52
Calcutta	2.67	2.91	+0.24	3.11	-0.02
Hooghly	1.72	1.25	-0.47	1.36	-0.11
Jalpaiguri	1.28	0.85	-0.43	1.29	-0.44
24 Parganas	0.85	0.59	-0.26	0.55	+0.04
Dacca	0.78	0.85	+0.07	0.81	+0.04
Bankura	0.75	0.75	± 0	1.12	-0.37
Burdwan	0.67	0.42	-0.25	0.46	-0.04
Midnapur	0.61	0.42	-0.19	0.56	-0.14
Tippera	0.57	0.52	-0.05	0.48	+0.04
Faridpur	0.33	0.28	-0.05	0.24	+0.04
Mymensingh	0.29	0.24	-0.05	0.26	-0.02
Bakarganj	0.27	0.28	+0.01	0.24	+0.04
Noakhali	0.27	0.17	-0.10	0.13	+0.04
Chittagong	0.22	0.21	-0.01	0.29	-0.08
Bogra	0.20	0.17	-0.03	0.25	-0.08
Khulna	0.19	0.13	-0.06	0.09	+0.04
Nadia	0.17	0.31	+0.14	0.15	+0.16
Murshidabad	0.16	0.17	+0.01	0.11	+0.06
Birbhum	0.13	0.11	-0.02	0.12	-0.01
Pabna	0.10	0.11	+0.01	0.08	+0.03
Jessore	0.09	0.07	-0.02	0.07	± 0
Rajshahi	0.08	0.13	+0.05	0.06	+0.07
Rangpur	0.06	0.07	+0.01	0.07	± 0
Malda	0.06	0.06	± 0	0.04	+0.02
Dinajpur	0.05	0.09	+0.04	0.03	+0.06

87. **Dysentery and diarrhoea by districts**—Calcutta returned the highest death-rate from these two diseases followed closely by Howrah and Darjeeling. All the others recorded a death-rate below 1.0 per mille, except Hooghly where it was 1.25 per mille. The

lowest rate was returned from Malda. Compared with the average of the previous decade, 9 districts showed a rise and in two others there was no change while the remaining 16 districts registered a reduction. Compared with 1924, there was an increase in 14 districts and a decrease in 11 others, while 2 recorded same ratios for both the years; 9 districts thus appear to be improving and 7 gradually getting from bad to worse during the last 10 years so far as these 2 diseases are concerned.

88. A reference to the statement below which differentiates the dysentery deaths from those due to diarrhoea shows that while Calcutta and Howrah returned death-rates above 1.0 per mille for both dysentery and diarrhoea Darjeeling, which recorded a death-rate of 1.80 per mille for dysentery, had a death-rate of only .51 for diarrhoea. On the whole there was more dysentery than diarrhoea in twenty-two districts, the reverse being the case in the remaining five. Compared with the previous year, dysentery appears to have increased in eleven districts while diarrhoea in fourteen. Both these diseases proportionately increased in seven districts while there was a reduction in the mortality rate in eight in 1925, as compared with the previous year. The other districts comparatively speaking varied in the increase or decrease of their death-rate from these two diseases.

Dysentery and diarrhoea death-rate per mille shown separately for each disease.

Districts.	Dysentery.			Diarrhoea.		
	1924.	1925.	Increase + or decrease —.	1924.	1925.	Increase + or decrease —.
Darjeeling	2.48	1.80	-0.68	.35	.51	+0.16
Calcutta	1.95	1.83	-0.12	1.16	1.08	-0.08
Howrah	1.06	1.02	-0.04	1.49	1.70	+0.21
Hooghly	.78	.62	-0.16	.58	.63	+0.05
Dacca	.65	.65	± 0	.17	.20	+0.03
Jalpaiguri	.56	.46	-0.10	.73	.39	-0.34
Tippera	.38	.36	-0.02	.10	.16	+0.06
24 Parganas	.36	.34	-0.02	.19	.24	+0.05
Bankura	.34	.25	-0.10	.77	.50	-0.27
Midnapur	.30	.24	-0.06	.26	.18	-0.08
Burdwan	.23	.20	-0.03	.23	.22	-0.01
Faridpur	.22	.26	+0.04	.02	.02	± 0
Chittagong	.20	.17	-0.03	.08	.04	-0.04
Bogra	.19	.13	-0.06	.05	.04	-0.01
Bakarganj	.19	.22	+0.03	.04	.06	+0.02
Mymensingh	.17	.16	-0.01	.09	.08	-0.01
Noakhali	.09	.13	+0.04	.04	.04	± 0
Nadia	.09	.25	+0.16	.05	.06	+0.01
Birbhum	.08	.05	-0.03	.04	.06	+0.02
Murshidabad	.07	.12	+0.05	.04	.05	+0.01
Khulna	.06	.09	+0.03	.03	.04	+0.01
Pabna	.05	.09	+0.04	.02	.02	± 0
Rangpur	.05	.05	± 0	.02	.02	± 0
Rajshahi	.05	.09	+0.04	.01	.04	+0.13
Jessore	.04	.05	+0.01	.03	.02	-0.01
Malda	.03	.04	+0.01	.01	.02	+0.01
Dinajpur	.02	.07	+0.05	.01	.02	+0.01

89. **Respiratory diseases—General prevalence.**—The following table shows the number of deaths and death-rates from respiratory diseases:—

		Deaths.	Death-rates.	Percentage of deaths from respiratory diseases to total mortality.
1924	..	26,649	·57	2·31
1925	..	27,325	·59	2·35

The death-rate showed increases of 3·5 per cent. and 31·1 per cent. in 1925, when compared with that of 1924 and the decennial mean respectively. One hundred and seventy-one—males died to every 100 females. It will be seen from the following statement that while the death-rate for all towns and rural areas was slightly higher in 1925 than in the previous year, the Calcutta mortality was somewhat lower in 1925. Excepting Bhola in Barisal district, all the towns reported deaths from this cause. High rates were reported from Khirpai 10·9, Calcutta 9·2, Howrah 9·1, Kurseong 9·0 and Chandrakona 7·7 per mille; 24 out of 116 towns returned a death-rate

below 1·0 per mille. Respiratory diseases accounted for 2·35 per cent. of the total mortality.

Years.	Number of deaths.			
	Province.	All towns.	Calcutta.	Rural areas.
1924	..	26,649	15,531	10,017
1925	..	27,325	15,754	9,872
Death-rates per mille.				
1924	..	·57	5·0	9·3
1925	..	·59	5·1	9·2

90. An analysis of deaths due to respiratory diseases, as given below, shows that the majority of such deaths were due to pneumonia which however were less by 2·0 per cent. in 1925 than in the previous year. Influenza showed a rise of 13·4 per cent. and phthisis of 9·0 per cent. over that of 1924, 8·086 death were due to unclassified respiratory diseases. From the statement it also appears that while 41·2 per cent. of the total deaths due to respiratory diseases were accounted for by pneumonia, phthisis was responsible for 22·2 per cent. and influenza for 6·9 per cent. while 29·6 per cent. remained unclassified.

Analysis of deaths from respiratory diseases in 1924 and 1925.

		Number.		Percentages of increase or decrease.	Death-rates per mille.		Percentages of total deaths from respiratory diseases.	
		1924.	1925.		1924.	1925.	1924.	1925.
Influenza	..	1,676	1,901	+13·4	·03	·04	6·3	6·9
Pneumonia	..	11,490	11,259	-2·0	·25	·24	43·1	41·2
Phthisis	..	5,577	6,079	+9·0	·12	·13	20·9	22·2
Other respiratory diseases	..	7,906	8,086	+2·3	·17	·17	29·7	29·6

91. **Seasonal incidence.**—Mortality from respiratory diseases was highest in the first 4 months of the year when

it began to decrease until October when there was another rise which continued for the next 3 months. Compared with

1924, the death-rate increased during February, July, August and the last three months of the year under review. The maximum increase in 1925 occurred in November when the death-rate was higher by 31·3 per cent. than in the corresponding month in 1924. The difference between the mortality in other months was however much less. Compared with the previous decennium, the mortality was higher during all the months of the year.

Seasonal mortality from respiratory diseases.

Months.	Average 1915 to 1924.	1924.	1925.	Percentages of difference between 1924 and 1925.
January ..	2,242	2,749	+2,651	-3·6
February ..	2,064	2,494	+2,515	+0·8
March ..	2,295	3,023	+2,896	-4·2
April ..	1,810	2,428	+2,252	-7·3
May ..	1,537	2,082	+1,926	-7·5
June ..	1,233	1,932	+1,824	-5·6
July ..	1,397	1,687	+1,875	+11·1
August ..	1,422	1,853	+1,964	+6·0
September ..	1,377	1,080	+1,814	-8·4
October ..	1,685	1,840	+2,112	+14·8
November ..	1,983	1,987	+2,610	+31·3
December ..	2,214	2,594	+2,886	+11·2

92. Respiratory diseases by divisions.

—The highest crude death-rate was recorded in Presidency Division in 1925; Rajshahi, Dacca and Chittagong each returned the lowest rate 0·2 per mille, while that for Burdwan was midway between these two rates. There was no apparent difference in the mortality rates of the year under review and of the previous one, but when compared with the average of the previous 10 years, all the divisions recorded an increase in 1925, except Rajshahi where the rate remained unchanged.

Of the total mortality, 5·2 per cent. was due to respiratory diseases in Presidency Division and 3·9 per cent. in Burdwan. This percentage was very low in the other three divisions. It was higher in every division when compared with the average of the previous 10 years but showed an increase in Burdwan and Chittagong Divisions and a decrease in Presidency on being compared with 1924, the proportion remaining the same in Rajshahi and Dacca Divisions.

About 78 per cent. of the total respiratory deaths occurred in the Burdwan and Presidency Divisions and the remaining in the other three divisions. Compared with 1924, these percentages were higher in Burdwan, Presidency and Chittagong Divisions but lower in Rajshahi and Dacca Divisions. Compared with the previous decennium, they increased in every other division except the Presidency, where they showed a reduction by 6·7 per cent.

Divisions.	Deaths from respiratory diseases per mille.			Proportion of total deaths due to respiratory diseases.			Percentages of provincial mortality from respiratory diseases.		
	Ten years.	1924.	1925.	Ten years.	1924.	1925.	Ten years.	1924.	1925.
Burdwan ..	0·7	0·9	0·9	2·1	3·5	3·9	26·7	27·2	27·5
Presidency ..	1·2	1·4	1·4	3·9	5·3	5·2	53·9	49·4	50·3
Rajshahi ..	0·2	0·2	0·2	0·6	0·8	0·8	9·0	9·9	9·2
Dacca ..	0·1	0·2	0·2	0·5	0·8	0·8	7·8	9·3	8·5
Chittagong ..	0·1	0·2	0·2	0·4	0·9	1·0	2·5	4·1	4·4

93. Respiratory diseases by districts.

—Five districts returned death-rates of

1·0 per mille and above, Calcutta as usual heading the list with 9·2 per mille

followed by Howrah with 3·3 per mille. Six districts recorded rates below 1 per mille. When compared with the average of the previous ten years, the death-rates appear to have increased in 1925 in all districts except 8, in 4 out of which they were reduced, while in 4 others, they remained the same. Compared with 1924, they increased in 7 districts but were lower in 12 others, the rates for the remaining 8 districts showing no change.

Deaths from respiratory diseases per mille.

Districts.	Average of decade.	1925.	In-creases + or decreases -	1924.	In-creases + or decreases -
Calcutta ..	7·3	9·2	+1·9	9·3	-·1
Howrah ..	2·1	3·3	+1·2	2·5	+·8
Darjeeling ..	1·7	1·6	-·1	1·8	-·2
24 Parganas ..	·9	1·0	+·1	·7	+·3
Hooghly ..	·9	1·0	+·1	1·1	-·1
Jalpaiguri ..	·6	·9	+·3	1·2	-·3
Bankura ..	·6	·8	+·2	1·1	-·3
Burdwan ..	·5	·6	+·1	·5	+·1
Midnapore ..	·4	·5	+·1	·6	-·1
Nadia ..	·3	·4	+·1	·4	± 0
Murshidabad ..	·3	·1	-·2	·2	-·1
Bogra ..	·2	·4	+·2	·3	+·1
Dacca ..	·2	·4	+·2	·3	+·1
Birbhum ..	·1	·1	± 0	·2	-·1
Jessore ..	·1	·1	± 0	·2	-·1
Tippera ..	·1	·3	+·2	·3	± 0
Mymensingh ..	·1	·2	+·1	·2	± 0
Khulna ..	·1	·2	+·1	·1	+·1
Malda ..	·09	·1	+·01	·1	± 0
Bakarganj ..	·09	·07	-·02	·08	-·01
Dinaipur ..	·08	·1	+·02	·1	± 0
Pabna ..	·08	·06	-·02	·08	-·02
Faridpur ..	·08	·08	± 0	·1	-·02
Chittagong ..	·08	·2	+·12	·2	± 0
Rajshahi ..	·06	·09	+·03	·09	± 0
Rangpur ..	·04	·07	+·03	·04	+·03
Noakhali ..	·02	·02	± 0	·02	± 0

94. **Influenza.**—As well be seen from the following statement, there were 225 more deaths from influenza in 1925 than the preceding year raising thereby the death-rate by 33·3 per cent. The total number of deaths was still lower by 90·9 per cent. than that in the influenza pandemic year 1918. The death-rate in all towns increased by 41·2 per cent., in Calcutta by 30·8 per cent. and in rural areas by 50 per cent. Out of the 116 towns 44 reported deaths from influenza, high death-rates being returned from Kurseong (2·2 per mille), Debhata (1·6) and Nalchiti (1·1). All the other towns recorded a death-rate below 1·0 per mille. Influenza accounted for 6·9 per cent of the deaths due to respiratory diseases and 0·1 per cent. of the total mortality.

Years.	Number of deaths.			
	Province.	All towns.	Calcutta.	Rural areas.
1918 ..	20,901	....	....	....
1921 ..	4,751	1,942	927	2,809
1922 ..	2,408	965	688	1,443
1923 ..	1,906	501	371	1,465
1924 ..	1,676	517	425	1,159
1925 ..	1,901	732	551	1,169
Death-rates per mille.				
1918 ..	....	....	....	....
1921 ..	·10	·62	1·02	·06
1922 ..	·05	·31	·76	·03
1923 ..	·04	·16	·41	·03
1924 ..	·03	·17	·39	·02
1925 ..	·04	·24	·51	·03

95. **Influenza by divisions.**—The highest crude death-rate from influenza was reported from the Presidency Division and the lowest from Dacca. It exceeded the death-rate of the previous year in Burdwan, Presidency and Dacca Divisions, was lower in Chittagong Division but continued the same in Rajshahi Division; 17·6 per cent. of the total deaths were due to influenza in 1925 in Rajshahi Division, 17·1 per cent. in Chittagong Division, the other divisions recording very low percentages. Excepting in Chittagong, this percentage was higher than that in 1924 in all the other divisions.

The highest percentage of the total provincial influenza mortality was returned from the Presidency Division and the lowest from Dacca. This percentage appears to have increased in 1925 in Burdwan, Presidency and Dacca Divisions and reduced in the other two divisions as compared with that in the previous year.

Influenza by divisions.

Divisions.	Influenza deaths per mille of population.		Proportion of total mortality from respiratory diseases due to influenza.		Percentages of provincial influenza mortality.	
	1924.	1925.	1924.	1925.	1924.	1925.
Burdwan ..	·03	+·05	3·9	+5·5	17·2	+21·7
Presidency ..	·06	+·08	4·2	+5·4	33·3	+39·0
Rajshahi ..	·04	+·04	15·1	+17·6	23·7	+23·3
Dacca ..	·004	+·008	2·2	+4·2	3·3	+5·1
Chittagong ..	·06	+·03	34·0	+17·1	22·4	+10·8

96. **Influenza by districts.**—Calcutta headed the list as in the previous year with a death-rate of ·51 per mille from influenza; 4 other districts, *viz.*, Howrah, Jalpaiguri, Bogra and Darjeeling returned death-rates between ·10 and ·20 per mille, 13 between ·01 and ·10 per mille while the rest ·005 per mille and below it. Noakhali returned the lowest rate ·0007 per mille. Compared with the rates for the previous year, 10 districts recorded decreases, 13 others increases, while in the remaining 4 there was no change. The maximum increase was noticed in Howrah and the maximum reduction in Darjeeling.

Deaths from Influenza per mille.

Districts.	1924.	1925.	Increases + or decreases —.
Calcutta ..	·39	·51	+·12
Darjeeling ..	·28	·14	—·14
Jalpaiguri ..	·21	·18	—·03
Tippera ..	·13	·07	—·06
Bogra ..	·12	·17	+·05
Bankura ..	·06	·03	—·03
Midnapore ..	·05	·04	—·01
Hooghly ..	·03	·04	+·01
24 Parganas ..	·03	·05	+·02
Nadia ..	·03	·02	—·01
Howrah ..	·01	·19	+·18
Chittagong ..	·01	·005	—·005
Burdwan ..	·01	·03	+·02
Birbhum ..	·01	·01	± 0
Murshidabad ..	·01	·005	—·005
Dacca ..	·005	·02	+·015
Mymensingh ..	·005	·004	—·001
Khulna ..	·004	·01	+·006
Bakarganj ..	·004	·003	—·001
Jessore ..	·003	·003	± 0
Dinajpur ..	·002	·01	+·008
Rangpur ..	·002	·01	+·008
Faridpur ..	·001	·001	± 0
Rajshahi ..	·001	·002	+·001
Pabna ..	·001	·001	± 0
Noakhali ..	.....	·0007	+·0007
Malda ..	.....	·01	+·01

97. **Pneumonia.**—The death-rate from pneumonia decreased in 1925 by 4·0 per cent. as compared with the preceding year. While the death-rate in all towns showed an increase of ·9 per cent. over that of the previous year, that in Calcutta was reduced by 1·6 per cent. In the rural areas there was practically no change. Only 14 towns out of 116 were free from this disease. High death-rates were reported from Khirpai 9·8 per mille, Chandrakona 5·4 per mille, Howrah 4·7 per mille and Malda 3·8 per mille; 56 towns returned death-rates below 1·0 per mille, Comilla recording a rate of ·04 per mille and Titagarh ·02 per mille. Pneumonia was responsible for 41·2 per cent. of the deaths due to respiratory diseases and for ·9 per cent. of the total mortality.

Pneumonia.

Year.	Number of deaths.			
	Province.	All towns.	Calcutta.	Rural areas.
1921 ..	11,567	5,806	3,183	5,761
1922 ..	10,615	5,255	2,722	5,360
1923 ..	10,767	5,470	2,863	5,297
1924 ..	11,490	6,538	3,896	4,952
1925 ..	11,259	6,611	3,830	4,648

Death-rates per mille.				
1921 ..	·25	1·87	3·50	·13
1922 ..	·23	1·70	3·00	·12
1923 ..	·23	1·76	3·15	·12
1924 ..	·25	2·11	3·61	·11
1925 ..	·24	2·13	3·55	·11

98. **Pneumonia by divisions.**—The crude death-rate was the highest in Presidency Division while Burdwan stood next on the list. It was very low in the other three divisions. Compared with the previous year, there was an increase of 7·0 per cent. in the Presidency and a reduction of 8·3 per cent. in Burdwan Division, 10 per cent. in Rajshahi and 16·6 per cent. in Dacca, Chittagong Division showing no change. In Burdwan Division 47·0 per cent. of the respiratory deaths were due to pneumonia, which similarly claimed a percentage of 42·0 in Presidency and 40·1 in Rajshahi Division. The percentages in Dacca and Chittagong Divisions were much lower. Compared with 1924, this proportion was less in every division except in Presidency. Viewed from the point of total mortality in the province due to this cause, pneumonia claimed 51·4 per cent. victims in Presidency and 31·4 per cent. in Burdwan and only about 17 per cent. from the other three divisions combined. With the exception of Presidency Division, in which there was a rise by 8·4 per cent. the percentage appears to have decreased in every other division.

in 1925 as compared with the previous year.

Pneumonia.

Divisions.	Pneumonia deaths per mille of population.		Proportion of total mortality from respiratory diseases due to pneumonia.		Percentage of provincial pneumonia mortality.	
	1924.	1925.	1924.	1925.	1924.	1925.
Burdwan ..	·48	·44	53·8	47·0	34·0	31·4
Presidency ..	·57	·61	41·3	42·0	47·4	51·4
Rajshahi ..	·10	·09	40·6	40·1	9·3	8·9
Dacca ..	·06	·05	30·5	28·3	6·6	5·9
Chittagong ..	·05	·05	28·3	22·3	2·7	2·4

99. **Pneumonia by districts.**—Calcutta and Howrah reported death-rates of 3·55 and 1·39 per mille, respectively, from pneumonia. Eleven districts reported rates between 1 and ·1 per mille and the remaining below ·1 per mille, the lowest being returned by Noakhali. Compared with the previous year, death-rate from pneumonia in 1925 increased in 10 districts, decreased in 14 others while the remaining three did not show any change. In Calcutta, the mortality rate was lower in the year under review by 1·7 per cent. than in 1924.

Deaths from Pneumonia per mille.

Districts.	1924.	1925.	Increase + or decrease —.
Calcutta ..	3·61	3·55	—·06
Howrah ..	1·12	1·39	+·27
Hooghly ..	·76	·55	—·21
Jalpaiguri ..	·66	·47	—·19
Darjeeling ..	·64	·49	—·15
Bankura ..	·50	·32	—·18
24-Parganas ..	·37	·54	+·17
Midnapur ..	·34	·29	—·05
Burdwan ..	·31	·31	±0
Nadia ..	·18	·22	+·04
Chittagong ..	·17	·11	—·06
Murshidabad ..	·15	·08	—·07
Birbhum ..	·11	·05	—·06
Bogra ..	·08	·11	+·03
Jessore ..	·07	·06	—·01
Mymensingh ..	·05	·04	—·01
Faridpur ..	·05	·02	—·03
Dinajpur ..	·04	·06	+·02
Malda ..	·04	·05	+·01
Dacca ..	·03	·12	+·09
Khulna ..	·03	·06	+·03
Rajshahi ..	·03	·03	±0
Bakarganj ..	·02	·01	—·01
Rangpur ..	·02	·03	+·01
Pabna ..	·02	·02	±0
Tippera ..	·01	·03	+·02
Noakhali ..	·003	·002	—·001

100. **Phthisis.**—6,079 deaths occurred from phthisis in 1925 giving a death-rate of ·13 per mille against 5,577 deaths and a death-rate of ·12 per mille in 1924, showing an increase in 1925 of 8·3 per cent. Phthisis deaths appear to have been gradually on the increase year by year both in the towns and rural areas; this may possibly be due to better registration of such occurrences. The death-rate in the rural areas was 94·3 per cent. less than in the town; the town rate itself was 53·5 per cent. less than that of Calcutta.

Phthisis.

Years.	Number of deaths.			
	Province.	All towns.	Calcutta.	Rural areas.
1921 ..	4,055	2,661	2,095	1,394
1922 ..	4,477	2,981	2,106	1,496
1923 ..	4,942	2,863	1,967	2,079
1924 ..	5,577	3,251	2,413	2,326
1925 ..	6,079	3,277	2,460	2,802
Years.	Death-rates per mille.			
	Province.	All towns.	Calcutta.	Rural areas.
1921 ..	·08	·86	2·31	·03
1922 ..	·09	·96	2·32	·03
1923 ..	·10	·92	2·17	·04
1924 ..	·12	1·05	2·24	·05
1925 ..	·13	1·06	2·28	·06

Twenty-two towns did not report a single death from phthisis, which clearly points to defective registration. Excluding Calcutta, only four towns reported death-rates of 1·0 per mille and above: Kurseong 4·0 per mille, Darjeeling 2·1 per mille, Baidyabati 1·2 and Taki 1·0 per mille. Three others, namely, Titagarh, Kishorganj and Chittagong returned rates of ·04, ·05 and ·05 per mille, respectively, while all the others recorded death-rates below 1·0 per mille but above ·01 per mille.

Phthisis was responsible for 22·2 per cent. of the total mortality due to respiratory diseases and for ·5 per cent. of the total mortality.

101. **Phthisis by divisions.**—The highest crude death-rate ·34 per mille was reported from Presidency Division and ·17 per mille from Burdwan; the remaining three divisions returned death-rates below ·1 per mille. It was higher in every division except Dacca in 1925 than in the previous year, the increase being 200·0 per cent. in Chittagong Division, 21·4 per cent. in Burdwan Division and 20·0 per cent. in Rajshahi, while it was only 3·0 per cent. in Presidency Division. 29·4 per cent. of deaths due to respiratory diseases in Chittagong

Division were due to phthisis, while the lowest proportion 17.9 was returned by Burdwan Division. Compared with 1924, this proportion increased in Burdwan, Rajshahi and Chittagong Divisions but was reduced in Dacca Division, the highest increase occurring in Chittagong Division.

Again, 53.1 per cent. of the total phthisis deaths in the province occurred in Presidency Division and 22.1 per cent. in Burdwan Division, while the remaining 24.8 per cent. were reported from the other 3 divisions combined. Compared with the previous year, this proportion increased in 1925 in Burdwan and Chittagong Divisions but decreased in others, the maximum increase being recorded in Chittagong Division.

Phthisis.

Divisions.	Phthisis deaths per mille of population.		Proportion of total mortality from respiratory diseases due to phthisis.		Percentage of provincial phthisis mortality.	
	1924.	1925.	1924.	1925.	1924.	1925.
Burdwan ..	14	17	16.0	17.9	20.8	22.1
Presidency ..	33	34	23.5	23.5	55.5	53.1
Rajshahi ..	05	06	21.2	23.0	10.0	9.5
Dacca ..	05	04	25.4	24.5	11.3	9.4
Chittagong ..	02	06	11.7	29.4	2.3	5.8

102. **Phthisis by districts.**—Calcutta recorded a death-rate of 2.28 per mille from phthisis showing an increase of 1.8 per cent. over the previous year's rate. Eight other districts recorded a death-rate of between 1.0 per mille and 1 per mille, while the remaining 18 a rate below 1 per mille, Noakhali returning the lowest rate .005 per mille. Excluding Calcutta, 11 districts showed a rise, 7 a reduction while in the remaining 8 districts there was no change. Notable increases occurred in Howrah and Darjeeling of 30.2 per cent. and 26.5 per cent., respectively.

Deaths from Phthisis per mille.

Districts.	1924.	1925.	Increases + or decreases —.
Calcutta ..	2.24	2.28	+ .04
Darjeeling ..	.49	.62	+ .13
Howrah ..	.43	.56	+ .13
Jalpaiguri ..	.26	.21	— .05
Bankura ..	.21	.18	— .03
24-Parganas ..	.15	.15	± 0

Districts.	1924.	1925.	Increases + or decreases —.
Hooghly ..	.13	.20	+ .07
Burdwan ..	.09	.09	± 0
Midnapore ..	.08	.09	+ .01
Nadia ..	.07	.10	+ .03
Jessore ..	.07	.05	— .02
Dacca ..	.07	.08	+ .01
Mymensingh ..	.06	.05	— .01
Bogra ..	.05	.07	+ .02
Murshidabad ..	.04	.03	— .01
Khulna ..	.04	.05	+ .01
Birbhum ..	.04	.02	— .02
Tippera ..	.03	.11	+ .08
Bakarganj ..	.02	.02	± 0
Rajshahi ..	.02	.02	± 0
Dinajpur ..	.02	.02	± 0
Malda ..	.02	.02	± 0
Chittagong ..	.02	.02	± 0
Pahna ..	.01	.01	± 0
Faridpur ..	.01	.02	+ .01
Noakhali ..	.01	.005	— .005
Rangpur ..	.005	.01	+ .005

103. **Other respiratory diseases.**—8,086 deaths from other unclassified respiratory diseases occurred in the province, including 2,952 in rural areas and 5,134 in towns, of which 3,031 took place in Calcutta alone. The death-rates as noted in the following statement show that such unclassified deaths are now gradually being relegated to their appropriate headings especially in Calcutta and other towns, pointing to a better diagnosis in these places :—

Other respiratory diseases.

Years.	Number of deaths.			
	Province.	All towns.	Calcutta.	Rural areas.
1921 ..	11,994	7,392	4,028	4,602
1922 ..	8,871	5,337	3,152	3,534
1923 ..	9,040	5,630	3,261	3,410
1924 ..	7,906	5,225	3,283	2,681
1925 ..	8,086	5,134	3,031	2,952
Years.	Death-rates per mille.			
	Province.	All towns.	Calcutta.	Rural areas.
1921 ..	.26	.239	4.43	.10
1922 ..	.19	1.73	3.47	.08
1923 ..	.19	1.82	3.59	.08
1924 ..	.17	1.68	3.05	.06
1925 ..	.17	1.65	2.81	.07

104. **Injuries.**—The following statement shows that the total deaths from injuries during 1915 increased by 178 over those of the previous year. While there were 13 more deaths from suicides and 451 from wounds or accidents during the year, those from snake-bites and

attacks of wild animals decreased by 247 and from rabies by 39. Injuries

accounted for 1·7 per cent. of the total mortality:—

Years.	Deaths from injuries.					Death-rates per mille.				
	Sui- cides.	Wounds or acci- dents.	Snake- bites and attacks of wild animals.	Rabies.	Total.	Sui- cides.	Wounds or acci- dents.	Snake- bites and attacks of wild animals.	Rabies.	Total.
1924 ..	3,302	10,967	5,160	343	19,772	·07	·24	·11	·007	·43
1925 ..	3,315	11,418	4,913	304	19,950	·07	·24	·10	·006	·43

Comparing the total number of deaths from these various causes in towns and rural areas, it will be observed that there were about 13 deaths from suicide, about 8 deaths from wounds and accidents, about 63 from snake-bites and attacks from wild animals and about 6 deaths from rabies in rural areas, to one in each case in the towns. In Calcutta there was one death to about every 3 from suicide, 2 from wounds and accidents, 15 from snake-bites and attacks of wild animals and 2 from rabies in the towns. On the whole, deaths from injuries in all towns were about 12 times less than in the rural areas and about double of those in Calcutta.

Injuries.

Causes.	Deaths.			Death-rates per mille.		
	All towns.	Calcutta.	Rural areas.	All towns.	Calcutta.	Rural areas.
Suicides ..	238	86	3,077	·08	·08	·07
Wounds or accidents	1,190	623	10,228	·38	·58	·23
Snake-bites and attacks from wild animals.	77	5	4,836	·02	·005	·11
Rabies ..	43	26	261	·01	·02	·006
Total ..	1,548	740	18,402	·49	·68	·42

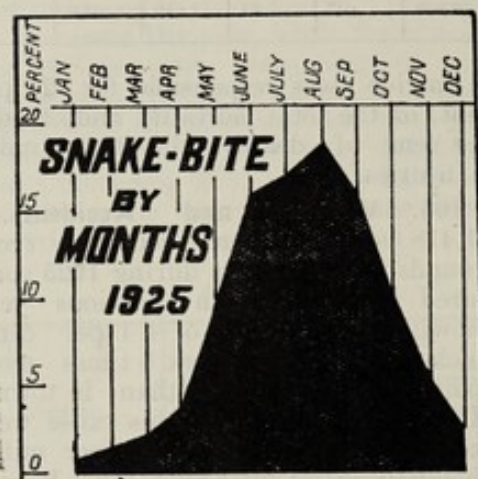
105. **Suicide.**—1,333 males and 1,982 females or a total of 3,315 persons committed suicide in 1925. The total deaths were ·8 per cent. below the decennial average and ·4 per cent. above those of the preceding year. The proportion of females who died of suicide was 149 to every 100 males. Two hundred and thirty-eight persons died from this cause in towns and 3,077 in rural areas. Death-rates above ·10 per mille were reported from Jessore, ·18 per mille, Nadia and Khulna, ·16 each, Howrah ·14, Rajshahi ·12 and 24-Parganas ·11. All the other districts reported a rate below ·10 per mille.

Suicide was responsible for ·2 per cent. of the total mortality and of 16·6 per cent. of deaths classified under "Injuries".

106. **Wounds and Accidents.**—11,418 deaths were reported from wounds and accidents during 1925 compared with 10,967 in previous year showing an increase of 4·1 per cent. Such deaths were about 8 times more common in rural areas than in towns. High death-rates from this cause were reported from Calcutta ·58 per mille, Noakhali ·57, Chittagong ·45, Bakarganj ·42, Howrah ·38, Hooghly ·35, 24-Parganas ·33 and Khulna ·30 per mille. All these districts form 2 blocks, 2nd, 3rd and 4th being in Eastern Bengal and the remaining in Western Bengal with contiguous boundaries. Wounds and accidents accounted for ·9 per cent. of the total mortality and for 57·2 per cent. of the mortality due to injuries.

107. **Snake-bites and attacks by wild animals.**—4,913 deaths were registered from snake-bites and attacks by wild animals during 1925, of which 77 occurred in towns, and 4,836 in rural areas, as compared with 5,16,095 and 5,065, respectively, in 1924. Five deaths were due to this cause in Calcutta against one in the previous year, while the death-rate showed a decline in 1925 compared with the average of the previous 10 years by 21·4 per cent. in the towns, it increased by 1·5 per cent. in rural areas and by 1·0 per cent. in the province as a whole. Murshidabad and Rajshahi districts reported a death-rate of ·21 per mille each, Jessore ·19, Khulna ·17, and Nadia, Dinajpur and Midnapur ·16 per mille each, 10 districts returned death-rates below ·10 per mille, Calcutta registering a rate of only ·005 per mille. No death was reported from Jalpaiguri due to this cause. ·4 per cent. of the total mortality and

24·6 per cent. of the deaths due to injuries were accounted for by snake-bites and attacks by wild animals. From the following graph showing snake-bite by months it will appear that the highest incidence was reached in August followed by July, June and September, *i.e.*, during the rains. January to April claimed the lowest numbers of snake-bites:—



108. **Hydrophobia.**—304 deaths were recorded from this cause in 1925

showing an increase by 53·5 per cent. over the average of the last 10 years and a decrease by 11·3 per cent. as compared with the previous year. The towns showed a rise in the death-rate of 95·4 per cent. in the year under review as compared with the decennial average and of 10·3 per cent. as compared with 1924; in rural areas while there was an increase of 48·3 per cent. deaths from rabies in 1925 over the decennial mean, there was a decrease by 14·1 per cent. as compared with the preceding year. Jessore, Jalpaiguri, Noakhali and Tippera reported no death from hydrophobia. The death-rate was lowest in Bakarganj (·0008 per mille). It was between ·01 and ·001 per mille in 17 districts and between ·1 and ·01 per mille in the remaining 5 districts, *viz.*, Midnapur, Howrah, Murshidabad ·01 per mille each and Calcutta and Nadia ·02 each. Rabies was responsible for 1·5 per cent. of deaths due to injuries and for ·02 per cent. of the total mortality.

109. The following statement shows the number of deaths and the death-rates in the districts due to all the sub-heads under injuries.

Districts.	Suicides.		Wounds and accidents.		Snake-bite.		Rabies.	
	Deaths.	Death-rates.	Deaths.	Death-rates.	Deaths.	Death-rates.	Deaths.	Death-rates.
Burdwan ..	80	·65	269	·19	142	·10	12	·008
Birbhum ..	45	·05	147	·17	118	·14	4	·005
Bankura ..	78	·08	149	·15	124	·12	6	·006
Midnapur ..	104	·04	665	·25	423	·16	41	·01
Hooghly ..	81	·07	380	·35	90	·08	8	·007
Howrah ..	141	·14	381	·38	91	·09	14	·01
24-Parganas	269	·11	814	·33	350	·14	6	·002
Calcutta ..	86	·08	623	·58	5	·005	26	·02
Nadia ..	235	·16	357	·24	244	·16	33	·02
Murshidabad	109	·09	288	·23	266	·21	13	·01
Jessore ..	315	·18	317	·18	326	·19	..	..
Khulna ..	232	·16	436	·30	243	·17	5	·003
Rajshahi ..	176	·12	229	·15	317	·21	14	·009
Dinajpur ..	81	·05	227	·13	282	·16	11	·006
Jalpaiguri ..	..	..	140	·15	..	..	..	..
Darjeeling ..	21	·07	79	·28	17	·06	1	·003
Rangpur ..	42	·02	330	·13	276	·11	23	·009
Bogra ..	70	·07	276	·26	156	·15	6	·006
Pabna ..	103	·07	250	·18	208	·15	2	·001
Malda ..	59	·06	130	·13	147	·15	6	·006
Dacca ..	260	·08	505	·16	183	·06	28	·009
Mymensingh	265	·05	886	·18	234	·05	23	·005
Faridpur ..	210	·09	528	·23	275	·12	14	·006
Bakarganj ..	142	·05	1,095	·42	193	·07	2	·0008
Chittagong ..	19	·01	725	·45	45	·03	6	·004
Noakhali ..	40	·03	844	·57	67	·04	..	..
Tippera ..	52	·02	348	·13	91	·03	..	..

110. **All other causes.**—163,413 deaths were reported as due to all other causes, comprising of 20,486 occurring in towns and 142,927 in rural areas

against 167,829 in the previous year. Deaths reported in this way accounted for mortality rate of 3·5 per mille in the province as a whole, 3·3 in rural areas,

6.6 in all towns and 10.3 in Calcutta as against 3.6, 3.4, 6.5 and 10.0 respectively, in 1924. 14.1 per cent. deaths of the total mortality were registered under this head during the year.

111. Other epidemic diseases.—During the year 1925, an epidemic of measles was detected among vaccinated children at Raripara village in Kachua police-station, district Khulna, but the mortality was very low. In the same district, epidemic dropsy (beri-beri) appeared in a family at Gotapara in Bagerhat police-station, in the month of September, but it died out quickly without any mortality. In Bakarganj district, 87 cases with 8 deaths from epidemic dropsy were reported from Swarupkati, Matbaria, Barguna, Amtali and Kaukhali thanas, but the outbreak subsided after disinfection of affected houses and stopping the consumption of the suspected articles of diet were resorted to. Samples of oil and rice were sent for examination, but nothing suspicious was detected in them. Thirty-two deaths from measles and five cases of diphtheria were also reported from the same district, so also a few cases of a ankylostomiasis. A few cases of beri-beri occurred in Faridpur district with three deaths. As mentioned in the previous year's report, filariasis was not common in Bankura district, where leprosy cases were also found scattered throughout, even amongst the well-to-do people.

Miscellaneous.

112. Registration of Vital Statistics in the Chittagong Hill Tracts.—Up to the present, there exists no system of registering births and deaths in the Chittagong Hill Tracts. These tracts were constituted a district by India Regulation No. 1 of 1900, otherwise called the Chittagong Hill Tracts Regulation, 1900. By virtue of sub-section (2) of section 4 of this Regulation, the operation of all enactments, such as the Bengal Births and Deaths Registration Act, 1873, the Bengal Vaccination Act, 1880, the Bengal Municipal Act, 1884, the Bengal Local Self-Government Act, 1885, the Bengal Village Self-Government Act, 1919, has been excluded from this district. As a matter of fact, no vital statistics of any kind are available for such a large and difficult tract of country with the inevitable result that

no reliable information exists as to the actual condition of the area and its population. According to the census of 1901, which was held a year after the extension of the above Regulation to the Chittagong Hill Tracts, it was found that the district covered a total area of 5,138 square miles and contained only 124,762 souls. The two subsequent censuses showed that its population had been increasing rapidly, the number rising to 153,830 in 1911 and 173,243 in 1921. It is the common complaint that, in the absence of any system of registration of births and deaths, it is impossible to make any comparison of its vital statistics, nor is it possible to keep any information as to its sanitary condition, nor to do anything to protect its people from epidemic diseases. Up till 1908, no attempt was made to introduce any such system. In that year, the Sanitary Commissioner of Eastern Bengal and Assam endeavoured to have some form of registration introduced in the hill tracts, but, for want of competent and suitable agency, this question had to be postponed for an indefinite period. In the year 1917, the subject was revived by the then Civil Surgeon of the district, at whose instance the question was reopened with the Commissioner of the Chittagong Division. Having consulted the Chakma Chief, the then Superintendent of the Chittagong Hill Tracts reported that it was not possible to obtain vital statistics of the district without special staff. The Divisional Commissioner also reported that Mr. Ascoli had been deputed on special duty by the Government of Bengal to make certain enquiries in the Chittagong Hill Tracts, including the subject of the registration of vital occurrences. Mr. Ascoli proposed the appointment of a better class of headmen and the Commissioner promised that, when this reform was brought about, it would be easy to introduce the registration of vital statistics. Since then the question remained in abeyance for another seven years, but a belated indirect report of a cholera outbreak emphasised the necessity of some definite steps being taken without further postponement. With this object in view, Lt.-Colonel Stewart addressed the local authorities in September 1925 to see if anything could be done in the matter. The Deputy Commissioner of the Chittagong Hill Tracts reported that he would endeavour to make an

experiment in this direction with the mauza headmen by the beginning of the financial year of 1926, and that a standing order had already been issued to headmen to keep such statistics and to send them to the thana officers, who had been instructed to make it easier for headmen to communicate with them by sending constables to specified places within the thanas on definite dates every month. The Deputy Commissioner has recently reported that a beginning has been made. Headmen have been instructed to report births and deaths to the thanas; in some places they are doing this work regularly, but in others they neglect this duty. Actually, about half the headmen report whatever they know, but the other half report nothing. The figures are at present unreliable, and it will take a year or two more to attain any result of any value.

A quarter of a century has passed since the introduction of the Chittagong Hill Tracts Regulation. It may be hoped that, with the long contact with the population of the adjoining districts, the hill population has made some advance in rudimentary civilisation sufficient to carry out some elementary registration of vital occurrences. In fact, in the Lushai Hills district in

the contiguous province of Assam, which forms a part of the eastern boundary of the Chittagong Hill Tracts district, the registration of births and deaths is carried on under the executive orders of the Superintendent of the district through the agency of the village writers. They submit a monthly report to the Circle Inspectors, who incorporate them in their monthly diaries and submit them to the office of the Superintendent for compilation of returns.

113. Births and deaths in railway limits.—No reports were received on vital statistics in railway limits from the 24 Parganas, Darjeeling, Rangpur, Malda, Pabna, Mymensingh, Nadia, Khulna, Jessore and Faridpur. Of these the first five are those which failed to report any such occurrence in 1924 also. Bakarganj district has no railway running through it. In 1925, 609 births and 646 deaths were reported from the remaining 16 districts as against 551 births and 637 deaths registered in these areas in 1924. No death was reported from Burdwan and Noakhali, 5 unclassified deaths were returned by Rajshahi, 2 by Dacca, Hooghly, Howrah and Bogra each, and 1 by Dinajpur (within Parbatipur railway limits). Deaths in other districts were due to the following causes:—

Causes of deaths.

Districts.	Cholera.	Small-pox.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	Injuries.	Other causes.	Total from all causes.
Birbhum	..	..	2	3	5	2	..	12
Bankura	..	..	..	..	..	2	..	2
Midnapur	30	2	22	19	122	..	324	519
Murshidabad ..	1	2	5	..	1	..	..	9
Jalpaiguri	2	..	48	2	..	..	12	64
Chittagong	..	..	..	..	1	..	4	5
Tippera	4	..	8	2	1	1	5	21
Total	37	4	85	26	130	5	345	632

The arrangement for the registration of vital occurrences within railway limits remained practically the same as was originally initiated in pursuance of the Government order of 1899. In the majority of the railway areas in Bengal, the work of collection of statistics has been left to the station masters, who perform the duties of a registrar of births and deaths, though not under any

statutory obligation. In a few railway administrations, the responsibility for the correctness of the reports has been put on to the District Medical Officers or the Chief Medical Officer. In a municipal area, the station master sends reports of births and deaths to the municipal commissioners either direct or through the district medical officer of the railway concerned, and in rural areas

such reports are sent to the civil surgeons for incorporation in the district returns. At Kharagpur in the district of Midnapur, where there is a large railway settlement and where the public health administration is in charge of the Kharagpur Station Committee, the statistics are collected by an officer who is specially deputed by the Committee to go round and collect information from the Presidents of the Muhammadan Burial Ground and of the Hindu Burning Ghat. However, it is expected that with the recent extension of the Bengal Births and Deaths Registration Act, 1873, to the rural areas in Bengal, the whole system of registration of vital occurrences within railway limits might take a better turn, if the provisions are strictly followed both by the local bodies and by the railway authorities.

114. Asansol Mines Board of Health.—The following table shows the vital occurrences reported from the Asansol Mining Settlement for the year 1925:—

	1924.	1925.
Births	8,568	9,510
Infant deaths	1,248	1,114
Infant death-rate (per mille) ..	146.0	117.0
Child deaths (1-5)	560	510
Child death-rate (per mille) ..	65.0	54.0
Total deaths	6,155	5,305
Cholera	317	89
Small-pox	10	83
Fever	739	648
Dysentery and diarrhoea	233	191
Plague	..	..
Influenza	..	2
Respiratory diseases	1,207	1,067
Snake-bite	16	9
Other causes	3,633	3,216

The birth-rate was 29.0 per mille in 1925 as against 26.0 per mille during the previous year showing an increase of 11.5 per cent. It is believed that all births were recorded. The death-rate was less as compared with the preceding year, the decrease being 13.8 per cent.; in fact, it was the lowest on record for the settlement during the last 8 years; 9,510 births and 5,305 deaths were checked during the year and no omissions were detected. There was only one

birth and no death recorded in areas of the settlement within railway limits. Both the infant deaths and child deaths were comparatively less in 1925 as compared with 1924. This low mortality under these two heads has been ascribed to the local satisfactory hygienic conditions, as well as to the activities of the staff of midwives maintained by the Board. Cholera occurred in sporadic form, but its spread was successfully prevented by the various routine measures of disinfection and the regular administration of the essential oils cholera prophylactic to all contacts. Smallpox assumed epidemic form in Raniganj Municipality due to the large number of unvaccinated children within municipal limits. The settlement was almost free from malaria during the year and the tanks found to be infested with malaria-carrying mosquitoes were cleansed of weeds. Other diseases were less prevalent than in the previous year. During the hot and rainy season of the year, the wells in the collieries were sterilised almost daily with chloride of lime and infected village tanks were sterilised when necessary.

115. Sanitation in the ports of Calcutta and Chittagong.—(a) *Port of Calcutta.*—The Town and Port of Calcutta were not officially declared to be infected with plague during the year 1925, hence the routine disinfection of clothing and bedding of Asiatic and African members of the crew and of third class deck passengers of vessels leaving for any port beyond British India was not enforced in this year. The admission rate of European seamen to hospitals for all causes calculated on arrival figure (21,605) was 31.89 per mille and the death-rate 18 per mille as compared with 47.15 and 65, respectively, of the previous year. Four hundred and eighty one cases were admitted in the Presidency General Hospital, 3 in the Campbell Hospital and 205 in the Howrah Hospital. Of these 12 were due to diarrhoea, 22 to dysentery, 2 to enteric, 38 to malaria, one to simple fever, 9 to influenza, 3 to small-pox, one to heat apoplexy and 601 to other causes. Only 4 deaths occurred, one from enteric, one from heat apoplexy and 2 from other causes. Seventy European seamen were admitted as suffering from venereal diseases. Eighty-three Asiatic seamen were admitted to the various hospitals in Calcutta and Howrah, 9 from cholera, 2

from diarrhoea, 3 from malaria, 4 from simple fever, 4 from small-pox and 61 from other causes; 11 deaths were reported, one from cholera, one from simple fever and 9 from other causes. Ninety deaths or 4.88 per mille were reported among the Asiatic floating population of the port against 143 or 7.75 per mille in the previous year. No death was reported from any epidemic disease. Seventeen cases of infectious diseases were found on board incoming ships; the patients were removed to hospital and necessary precautionary measures were taken. No case of infectious disease was reported to have occurred on undecked native sea-going crafts; no case of sleeping sickness was found on any vessel nor any alien leper observed entering the country through the Port of Calcutta. Twenty-seven sea-going vessels, 9 inland steamers, flats and launches and 35 lighters, *bhars* and *dinghis* were disinfected and 70 sea-going vessels were fumigated with Clayton apparatus. During the year 2,027 deck passengers of 71 ships for the Straits were vaccinated at the request of the shipping agents, and about a thousand free vaccinations among the floating population of the port were also carried out.

(b) *Port of Chittagong*.—There was no outbreak of cholera, small-pox or plague in any vessel lying in the port and the general sanitation of the port was satisfactory. The admission rate to hospitals of European seamen, from all causes calculated on the arrival rate (2,117) was 11.8 per mille. There was 1 admission from diarrhoea, 3 from dysentery, 3 from malaria, 4 from simple fever and 14 from other causes. No deaths were reported in hospitals. Fifty admissions from various causes without a single death were reported amongst Asiatic seamen. During the year, 65 crew were vaccinated, and personal effects of 243 Asiatic crew of the foreign-going ships were disinfected, disinfection being carried out in the disinfector established in the Chittagong Port Trust Workshop. No alien leper entered the country through the Port of Chittagong.

116. **Public Health Laboratories.**—*The Bengal Public Health Laboratory.*—Altogether 8,944 examinations were made, comprising of 3,182 in the chemical, 4,361 in the bacteriological

and 1,401 in the food section, as against 7,505, 2,927, 3,817 and 761, respectively, in 1924, showing an increase of 19.2 per cent. in the total number of examinations and of 8.7, 14.2 and 84.1 per cent., respectively, in the abovenamed three sections individually. In addition to the District Boards and Municipalities of Bengal and some private bodies, 48 jute mills sent samples of water for examination, as against 45 during the previous year. As a result of systematic monthly examinations of 163 tube wells, it was found (1) that their hardness and salinity do not vary at different times of the year to any appreciable extent; (2) that the distance from the river had possibly no definite influence on the degree of their salinity; (3) that water from tube wells situated in the extreme north of Calcutta showed only moderate hardness, very low salinity and very high organic purity; (4) that in the Kharda and Titagarh areas, the quality of water was still nearly the same except that the salinity showed a slight rise; (5) that tube wells south of Calcutta had very hard waters, with chlorine as high as 40 to 140 parts per 100,000; (6) that in many cases the water was bacteriologically of the highest standard of purity, though it was not so in others; (7) that the sugar tests revealed the presence of harmless organisms belonging to "cloacæ" and "aerogenes" groups, which pointed to some defect in the construction of tube wells, e.g., leaking joints. Twenty-five samples of tube well water from the Howrah district and 8 samples of the same from Barui-pur were examined both chemically and bacteriologically at the laboratory.

117. Further research on the working of mechanical filters was continued during 1925. An investigation into the working of 20 filters, from which over 500 samples were analysed, led to the conclusion that a definite relation existed between the bacterial contents of the filtered and unfiltered water and that it was thus possible to find out the degree of bacterial purity that could be achieved from these filters under varying conditions: 1,711 samples of sewage effluents were examined. Samples of sludge effluent from Dr. Fowler's plant for purifying sewage on the activated sludge principle were regularly examined once a week throughout the year but it has not yet been possible to arrive at any definite conclusion.

118. The following statement shows the adulteration in the food samples analysed in 1925:—

Articles.	Total samples.	Adulterated samples.	Percent- age of adulterated samples.
1. Milk ..	623*	66	10.6
2. Ghee ..	353	125	35.4
3. Butter ..	10	8	80.0
4. Ice-cream ..	11	11	100.0
5. Puri ..	2	1	50.0
6. Luchi ..	8	1	12.0
7. Nimki and kachuri	15	6	40.0
8. Mustard oil ..	130	18	13.8
9. Groundnut ..	10	..	..
10. Katar oil ..	2	..	..
11. Vegetable product	2	..	..
12. Flour ..	70	18	25.7
13. Tea ..	27	8	29.6
14. Balushahi ..	1	..	..
Total ..	1,264	262	

* Out of these 623 samples of milk, about 500 samples were sent by the School of Tropical Medicine, the majority of which were satisfactory and hence the low percentage of adulteration. In addition to the above, 17 special samples were also examined for standardisation purposes.

119. The following special work was undertaken in 1925:—

(1) Research on the working of the mechanical filters, as described above.

(2) Work in connection with "Activated Sludge".

(3) A series of experiments was made to show the effect of hard water on the cooking of different kinds of Indian lentils (*dals*) and the results formed the subject of a paper accepted by the Science Congress held in Bombay.

(4) A series of experiments were conducted to determine the age of milk by methylene blue reductose test, which is based on the reduction of blue colour imparted to milk by the addition of methylene blue solution of a certain strength, the length of time taken depending on the bacterial content of the milk. No definite conclusion has been arrived at as yet.

(5) Systematic examination of rice mill effluents was carried out to know their quality and to devise economic means of their purification.

(6) *Chhana*, a food stuff common in Bengal, its mode of preparation and analysis with a suggestion for standards of purity, formed the subject of a paper by Lt. Colonel Stewart and Mr. Das Gupta (Assistant Analyst) read before the Science Congress.

(7) Coconut oil, a note on its analysis and suggestion for the chemical standards of purity, was the subject matter of another paper by the same two workers submitted to the Science Congress.

(8) 110 samples of goat's milk were examined and analysed for standardisation.

120. *Dacca Public Health Laboratory*.—1,877 samples were examined during the year, as compared with 1,281 in 1924, showing an increase of 46.5 per cent.; 295 samples of water from the different municipalities and jails in the Dacca and Chittagong Divisions were examined chemically and 616 bacteriologically against 212 and 545, respectively, in the previous year. Five samples of tube well water from Dacca and Narayanganj were examined, and 6 samples of alum were analysed. In addition to this, 445 samples of sewage from the Dacca sewerage works. The total number of samples of food-stuffs analysed was 503 against 311 done in the previous year. Of these, 285 or 56.6 per cent., were found adulterated. The following table gives the details of samples of food-stuffs examined.

Articles.	Total samples.	Adulterated samples.	Percentage of adulterated samples.
Ghee ..	87	51	58.6
Mustard Oil ..	108	31	28.7
Milk ..	255	186	72.9
Tea ..	33	13	39.3
Flour, sago and others	20	4	20.0

121. *Darjeeling Municipal Public Health Laboratory*.—1,355 samples were examined as detailed below:—

(1) Water—296 samples, of which 76 were examined chemically and 220 bacteriologically against 270, 66 and 204, respectively in 1924.

(2) Sewage and effluents—60 samples against 84 in the previous year.

(3) Food-stuffs—332 samples, as compared with 328 in the preceding period. In addition to this 154 samples of genuine milk and 43 samples of tea were also examined to determine the normal percentage constituents of these substances in that area.

(4) Clinical section—470 specimens of urine, blood, stool, sputa, throat swabs and other discharges and hair were examined against 518 in 1924.

(5) During the last two years, a total of 277 samples of milk have been examined from individual cows of all available strains, young and old at different stages of lactation and yielding varying amounts of milk per day. As a result of these examinations, it was found that the Siri and Nepali cows contained a very high percentage of fat, 5.7 per cent. on an average as compared with 5.0 per cent. in milk from cross breeds and 4.4 per cent. in that of the English breed, although the yield of milk from the former is much lower than that obtained from English cows, but not below the fair average of 5 lbs. a day or 750 lbs. per lactation. It was also observed that other constituents of milk from the Siri and Nepali cows underwent very slight variations, in fact the milk constituents were practically as high as the majority of buffaloes.

122. School Hygiene.—The work of medical inspection of school children proceeded apace in 1925. The district boards of Faridpur, Noakhali, Birbhum, Burdwan and Chittagong appointed inspectors for this purpose during the year. In Calcutta, the Prabodh Memorial Institution appointed a doctor to teach hygiene in the school as well as to carry out the work of school medical inspection. Two private medical practitioners voluntarily took up this work in the Hindu and the Hare Schools.

State of vaccination.—An inspection of 3,993 students out of a total of 5,770 in 114 primary boys' schools in Calcutta brought to light the fact that 25 per cent. of them were unvaccinated.

Sanitary condition of schools.—Out of a total of 78 schools examined, only 29 had sufficient accommodation, 45 were insufficiently lighted and 8 improperly ventilated; 35 were without latrines and urinals. Only 25 schools possessed play-grounds for organised games. During the year 5,078 boys were examined including 2,036 examined by the Sub-Assistant Surgeon in charge of schools under the Asansol Mines Board of Health. The results of the examination of 5,078 boys is detailed below:—33.4 per cent. of the school boys inspected were under 10 years of age, 49.9 per cent. between the ages of 10 and 15 and 16.7 per cent. over 15 years of age. With regard to their physical condition 23.9 per cent. were well nourished, 61.8 per cent. fairly nourished and 14.3 per cent. ill

nourished. Only 54.4 per cent. wore shoes, 21.6 per cent. were well clad, 65.2 per cent. had fairly good clothing, while 13.2 per cent. were very poorly clothed. With regard to height, Bengal youths compared very favourably with European standards, but in the matter of weight, age for age, they weigh on an average 7 lbs. less than the European boys.

Skin.—3.6 per cent. had skin disease and 18 per cent. were dirty.

Teeth.—8.5 per cent. had defective teeth.

Ears.—3 per cent. had ear trouble.

Eyes.—13.7 per cent. had defective vision and 1.6 per cent. had other eye troubles.

Nose.—7 per cent. had either nasal catarrh or some other nose trouble.

Throat.—About 2.6 per cent. had enlarged tonsils and .3 per cent. adenoids.

Glands.—1.8 per cent. showed enlarged cervical or submaxillary glands.

Bony deformities and paralysis were present in .4 per cent.

Speech.—37 per cent. had defective speech of some form or other, mostly stammering.

Vaccination.—6.6 per cent. of the boys were unvaccinated.

Heart.—4 per cent. showed organic disease of the heart.

Spleen.—2.8 per cent. had enlarged spleen.

Infectious diseases.—2.6 per cent. were found suffering from the following diseases: Measles .52 per cent., whooping cough .03 per cent., diphtheria .05 per cent., small-pox .15 per cent., dysentery .69 per cent., malaria or kala-azar .76 per cent.

Bodily defects.—62.7 per cent., had some kind of bodily defects.

Besides the inspection work, 65 plans for educational institutions and 43 hygiene books and two charts intended for text books in the schools of Bengal were examined by the Assistant Director of Public Health in charge of School Hygiene, who also advised the Education Department in regard to the drawing up of hygiene syllabus for the secondary schools. The School Hygiene branch also organised *dai-training* classes throughout Bengal.

123. Dai-training.—519 *dais* were awarded certificates and bags after

receiving their training at 38 centres in 14 local bodies during the year.

Grants-in-aid were made during the year to the various local bodies for the starting of 40 training centres. Owing to the delay in receiving the grant, the Central Co-operative Anti-Malaria Society was not able to complete the classes. The Budge Budge Municipality could not undertake the work, owing to the resignation of its Health Officer, and the Khulna District Board, owing to a misunderstanding as to the proper mode of procedure for the line of work to be followed. Applications for grants were received from 85 local bodies for starting 137 centres. Some local bodies were unable to hold two sessions for the classes (10 *dais* a session). It has therefore been decided to adapt the requirements to suit those local bodies, which find it difficult to secure the minimum number of *dais* to enable them to arrange for two sessions at a particular centre.

124. Infant welfare work and Baby Week.—A distinct advance in the matter of infant welfare work throughout the province is clearly evidenced by the keen interest shown by almost all the District Boards, the majority of municipalities and other local bodies organising Baby Week Shows within their jurisdictions. The Bengal Baby Week, as a part of the All-India movement, as initiated by the Countess of Lytton, is now being appreciated by the whole province. No less than 26 Baby Week Shows were organised in the mufassal during the year under review, besides the Calcutta Exhibition.

As a result of the movement, it might be stated that the people are realising the great havoc that ignorance of hygienic rules causes in their homes, and their deep-seated prejudices on matters of infant welfare are being gradually shaken off. People are now more or less willing to spend something on baby clinics and other allied institutions. The work of the existing baby clinics continued to be very satisfactory. A full report of the work accomplished by the voluntary organisations established by the Countess of Lytton for the the purpose of Baby Week has already been published.

The Public Health Department helped almost all the organisers of baby shows, including the Calcutta Exhibition, with

departmental exhibits, charts, lantern slides, cinematograph films and lecturers.

125. Educational propaganda and publicity.—The activities of the Publicity Branch have been continuously on the increase. The Publicity Officer made extensive tours and gave lectures, bioscopic and magic lantern demonstrations in numerous towns and villages, fairs and festivals, besides attending 12 Baby Week Shows. He visited 126 places and was out on tour for 300 days during the year as compared with 90 places and 190 days on tour during the year 1924. 102 lectures were delivered with the aid of magic lantern slides and if an average of even 600 attendance were computed, the number of people benefited and educated on health subjects would number 61,200. The growing popularity of this branch may be gauged by the fact that the services of this single officer was in request not only by official and non-official bodies during the local shows and exhibitions, but even the Congress and the Swarajist parties not infrequently availed themselves of the help of this branch during their various exhibitions. The Central Co-operative Anti-malaria Society, the various Ladies' Associations in the province, public institutions such as the Viswavarathi of Dr. Rabindra Nath Tagore, the missionary schools and the Y. M. C. A. College Branch, have constantly utilised the services of the Publicity Officer. Several public health and anti-malaria societies have been organised during the course of the year.

126. This branch has also designed and prepared many magic lantern slides and multi-coloured posters on various preventible diseases, such as malaria, cholera, small-pox, kala-azar, hook-worm, and maternity and child welfare. Leaflets and pamphlets on different diseases have been prepared and published for distribution. The demand for the above materials is very great not only in the province itself but requisitions have been made from various other parts of India for them. The branch is now equipped with several magic lanterns and three portable bioscopic outfits, including 15 reels of films on malaria, cholera, small-pox, rabies, the fly, the rat and also popular films on maternity and child welfare.

The long-felt want of an additional officer has been removed by Government sanctioning an Assistant Publicity Officer and two publicity assistants. It is expected that this branch will be able to meet the long-standing requests from various bodies for lectures and shows, which had to be shelved year after year for paucity of staff.

127. Septic tank latrines.—There was 189 septic tank latrines in operation during the year 1925 in 82 factories situated within 30 miles of Calcutta. Of these, 9 were constructed during the year under review and there are at present 10 under construction.

The British India Workshops, Howrah, have closed down and removed their plant to the Garden Reach Workshops. The Hartikool Oil Co., have also closed down owing to bad trade.

During the year, 1,711 samples of effluent were sent to the Bengal Public Health Laboratory for analysis. Of these samples, 1,200 were examined chemically and 511 bacteriologically. Fifty per cent. of the samples were found sterile. Special attention has been paid to the efficient sterilising of the final effluents, renewal of filter beds, cleaning of tanks and the construction of sterilising chambers.

Qualified Sanitary Inspectors are now employed by the Kamarhati, Ludlow, Ganges, Nuddea, and the Gouripur Jute Mills and generally speaking mill managers and engineers take an active interest in seeing that the septic tank installations conform to all requirements.

128. Fairs and Mêlas.—(a) *The Ganga Sagar Mêla.*—The Ganga Sagar Mêla was held on the 13th, 14th and 15th January 1925. It was especially important this year on account of the solar eclipse occurring during the mêla period. The Port Health Officer was, as usual, in charge of the embarkation and disembarkation of pilgrims at Calcutta. He was assisted by the Corporation staff and two Assistant Surgeons and six Sub-Assistant Surgeons deputed by the Public Health Department: 29,528 pilgrims were carried by steamers from Calcutta. On the downward voyage, there was no infection or sickness except two cases of acute diarrhoea which were handed over to the mêla authorities at Sagar. On the return journey, 16 cases of cholera were reported, of which 5

died, while 6 occurred among the returned pilgrims in Calcutta.

The arrangements at Sagar itself were under the supervision of the Assistant Director of Public Health, Presidency Circle, assisted by four District Board Sanitary Inspectors and volunteers with the District Health Officer at their head along with six doctors lent by the Director of Public Health for the purpose. A number of associations sent their volunteers, except the Ram Krishna Mission. Sanitary Inspectors were placed in charge of disinfection of the surface water tanks and immediate supervision of the conservancy, while the volunteers were allotted other duties. Ten jemadars, 84 mehtars and 11 domes formed the menial staff. From 1,11,534 to 1,25,000 pilgrims attended the fair. The mêla ground, including the beach, was divided into eight blocks and 1,000 latrine seats were provided. In spite of the number of pilgrims being much larger, both the beach and the vacant lands within the mêla area were far cleaner than even in the preceding year.

Water was pumped from reserved tanks to iron cisterns provided with taps. Brahman water carriers were also placed at the ghats to supply water direct to those who applied for it there. The water was chlorinated at the pumping station before being passed into the pipes. The bathing and washing tanks were treated with bleaching powder thrice daily, while the three drinking water tanks were so treated morning and evening. In spite of increasing the pumps and cisterns and guarding against wastage, the supply proved inadequate at the height of congestion on the mêla day.

(b) *Nangalband Fair.*—The mêla commenced on the 1st April 1925 and lasted for three days. Owing to the Budhas-tami Joga, there was an unusual heavy rush of pilgrims and the total number roughly amounted to about five lakhs. The District Health Officer was present on the occasion with necessary disinfectants and a staff consisting of three doctors, two sanitary inspectors, one sanitary supervisor, one compounder, three vaccinators, twenty-two sweepers, five coolies and two domes. Besides the District Board staff, voluntary aid was given by the Ram Krishna Mission, the Chaitanya Asram, the Jagannath Hall Social Service League and the National Medical College volunteers. The most remarkable feature of the mêla was the

installation by the District Board of a new system of water-works, which was opened by the Divisional Commissioner on the occasion. It consisted of a newly excavated tank fitted with a motor pump and a line of pipes leading up to 33 cisterns with 70 taps. The tank was chlorinated prior to distribution.

Nine cases of cholera came to the notice of the District Health Officer, of which only one ended fatally. Forty contacts and the volunteers were given anti-cholera inoculation.

SECTION VII.

129. **History of Vaccination.**—This subject is dealt with in a separate annual report.

SECTION VIII.

130 **Sanitary Works (Military).**—This is now excluded from provincial sanitary reports.

SECTION IX.

Sanitary Works (Civil).

131. **General Remarks.**—The next three paragraphs dealing with the financial aspect of public health administration in the urban and rural areas refer to the financial year 1924-25.

132. **Municipalities, their income and expenditure.**—The total number of municipalities in Bengal during the year 1924-25, excluding Calcutta, was 115 and their aggregate population was 2,006,545. Thus the average population for each municipality was 17,448. Their total income, excluding the opening balance and bad debts, was Rs. 79,65,135 in the year under review as compared with Rs. 83,28,730 in the previous year. The average income of each municipality was Rs. 69,175-1-4; while the average income per head of population was Rs. 3-10-8. The total receipts from all sources including opening balances amounted to Rs. 1,06,03,381 against Rs. 1,14,86,449 in 1923-24. There was thus a decrease of Rs. 3,63,595 or 4-4 per cent. in the total income and of Rs. 8,83,068 or 7-7 per cent. in the total receipts. The opening balance was Rs. 16,16,271 or a little less than Re. 1 per head of the population, while the extraordinary and bad debts amounted to Rs. 10,21,975 or about 8½ annas per head.

The total expenditure during the year was Rs. 73,05,253 against Rs. 80,01,405 in the previous year, showing a decrease of Rs. 6,96,152 or 8-7 per cent. The proportion of the total municipal income spent in 1924-25 on certain main heads of expenditure is shown below:—

Allotment of income.	Percentage.	
	1923-24.	1924-25.
Sanitary works	40-7	39-7
Public safety	6-0	4-9
Roads	7-6	8-3
All other requirements ..	16-5	30-2

133. **Municipal expenditure on sanitation.**—The average expenditure per head of municipal population on certain sanitary works is shown below:—

Heads.	Average expenditure per head.					
	1923-24.			1924-25.		
	Rs.	Rs.	A. P.	Rs.	Rs.	A. P.
Conservancy	1-015-	1	0 2½	·971-	0	15 6½
Water-supply	·432-	0	6 11	·559-	0	8 11½
Drainage	·341-	0	5 5½	·238-	0	3 9½
Disposal of dead	·015-	0	0 2½	·017-	0	0 3½
Markets and slaughter-houses.	·015-	0	0 2½	·015-	0	0 2½
Medical relief	·153-	0	2 5½	·150-	0	2 4½
Vaccination	·010-	0	0 2	·014-	0	0 2½
Other sanitary works ..	·098-	0	1 6½	·094-	0	1 6
Total	2-079-	2	1 2½	2-058-	2	0 11

Compared with the previous year, there was a decrease of 4-3 per cent. under conservancy, 30-2 per cent. under drainage, 1-9 per cent. under medical relief and 4-1 per cent. under other sanitary works, while there was an increase of 29-4 per cent. under water-supply, 13-3 per cent. under disposal of death and 40-0 per cent. under vaccination. The average expenditure on sanitation per head of population was Rs. 2-0-11 as compared with Rs. 2-1-2½ during the preceding year. Nearly one half of the total expenditure on sanitation was allotted to conservancy, about one-fourth to water-supply about one-ninth to drainage, about one-fourteenth to medical relief and about one-hundred and fiftieth to vaccination.

134. **Sanitary works in towns and rural areas.**—The expenditure on sanitary works by Government, municipalities, and district boards during 1924-25 amounted in aggregate to Rs. 33,51,595 against Rs. 28,54,742 in the previous year, showing an increase of about 17 per cent. over the preceding

year. The most important items costing Rs. 5,000 or more are shown below :—

	Rs.
(1) Part of Dacca sewerage scheme and cost of acquiring land for drainage works ..	5,32,744
(2) Comilla water-works ..	2,93,000
(3) Tittaghar sewerage scheme ..	2,50,000
(4) Suri water-works scheme ..	1,60,400
(5) Improvement and extension of the Bankura water-works ..	49,596
(6) Contai Local Board water-supply ..	15,835
(7) Chittagong water-supply ..	15,325
(8) Burdwan water-works ..	15,200
(9) Budge-budge flood-flush drainage scheme ..	10,200
(10) Excavation of Baneswari tank in Rajshahi ..	9,157
(11) Construction of a drain on the Jalpaiguri Sainihat Road ..	8,610
(12) Diagram recorder and a meter at the Senchal Lake in Darjeeling ..	7,652
(13) Pumping plant by the Khulna Municipality at the river side ..	5,253

135. Municipal sanitary administration.—Excepting in Calcutta, which has its own medical and sanitary staff, 20 health officers and 96 sanitary inspectors were employed in 115 municipalities. The total number of sanctioned appointments for health officers and sanitary inspectors for the province was 20 and 96, respectively. What has been said in the last annual report about the laxity in enforcing provisions of the Births and Deaths Registration Act, the Vaccination Act, and the Food Adulteration Act still continues though signs of improvement are not wanting in a few municipalities so far as food supplies are concerned.

136. Sanitary administration in rural areas.—The total income of district boards, excluding opening balances and debts, amounted to Rs. 1,22,08,951 against Rs. 1,16,72,500 in the previous year, the average income per head of population being 4 annas 6 pies against 4 annas 4 pies in the year preceding. The average incidence of taxation per head was 2 annas 9 pies. Nearly half the income was spent on public works, including 28 per cent. on communications, 8 per cent. on water-supply and 4·1 per cent. on buildings against 30·8, 4·5 and 3·9 per cent., respectively, in the previous year; 24·4 per cent. of the income was spent on education against 25 per cent. in the previous year, while only 14·8 per cent. or about 8 pies a head was available for medical relief, vaccination and sanitation against 14·5 per cent. or 7 pies a head during the preceding year; vaccination receiving only 1·4 per cent. of the total income as its share or ·8 pies a head of population.

There were 26 district boards all under non-official chairmen except that of Darjeeling, as in the previous year. All the district boards except Darjeeling are provided with qualified Health Officers, in addition to a number of trained sanitary inspectors. The whole of this staff was kept especially busy during the year, with the suppression of small-pox and cholera epidemics, in addition to performing their other public health duties, including kala-azar suppression and malaria control.

137. Village Self-government.—2,762 union boards were sanctioned up to the end of the year, of which nearly 1,500 were in working order, showing an increase of 28·0 per cent. and 15·4 per cent., respectively, over the previous year. Out of an income of Rs. 20 lakhs, Rs. 16 lakhs were spent on establishment and Rs. 4 lakhs only on communications, water-supply and other sanitary measures as compared with Rs. 3 lakhs spent on the latter items in the previous year. Some union boards maintained regular dispensaries, distributed quinine free, organised anti-malarial societies, took measures for the improvement of rural water-supply and sanitation and generally evinced a keen interest in the welfare of the village population.

138. Activities of District Health Officers and District Sanitary Inspectors.—(1) **ANTI-MALARIAL MEASURES IN RURAL AREAS.**—Free distribution of quinine and cinchona by district boards through their dispensaries and special anti-malaria and public health centres and propaganda by magic lantern lectures, and distribution of lectures constituted the main activities of the district boards in this direction.

There were 23 permanent dispensaries in Burdwan district in 1925, while 13 more were opened for 4 months from the 15th September 1925 to the 15th January 1926; of these latter the term of 4 was extended, of 3 up to 15th February 1926 and of the 4th up to March 1926. Besides these, a number of union board dispensaries and a large number of anti-malarial societies had been started in the district with the help of the district board grant. In Birbhum 20 anti-malaria societies were established to prevent the spread of malaria by cutting jungle, kerosening tanks and ditches, treating the carriers

with cinchona and filling up pools and small collections of water; doctors were deputed to the affected localities for free treatment, cinchona febrifuge tablets were distributed to the presidents of the affected areas, besides giving magic lantern demonstrations. In Bankura quinine tablets were distributed throughout the affected areas by Health Officer and his staff. In Howrah, a fairly good number of co-operative anti-malaria societies had been organised and some of them registered, each registered society getting a monthly subsidy of Rs. 10 a month from the district board, besides getting help towards water-supply and drain cutting and free supply of quinine and cinchona. Temporary epidemic dispensaries were also opened in malaria affected localities. In Hooghly, several anti-malaria societies were organised, of which only 24 were registered. These carried on anti-malaria operations, viz., cleaning of tanks, filling up of *dobas*, construction of drains, cutting of jungle and distribution of quinine. Many union boards also carried on anti-malarial operations. In Midnapur, 13 co-operative anti-malaria societies were established and were helped by grants made by district board and Government. Four subsidised doctors of the board were posted in malarious places for free distribution of quinine. School children with enlarged spleens were treated free of cost by these doctors within their jurisdiction. Other temporary men were deputed for medical relief in malarious places during the malaria season. The preliminary malaria survey of the eight villages in Contai was finished. In Khulna, there were 22 health societies, who were supplied with necessary disinfectants and medicine by the district board, four of these were registered under the Co-operative Act, two of these societies opened two dispensaries while the other two continued to distribute quinine and other remedies as in previous years. The Government grant of Rs. 1,950 was distributed among these four registered societies. The district board opened six malaria free-treatment centres under two doctors in Khulna police-station where there was a severe outbreak of malaria due to overgrowth of water hyacinth, in whose interspaces mosquitoes were found to be breeding. Larvae of *Anopheles Sinensis* and *A. Fuliginosus* were discovered in the water,

while adult mosquitoes of the above two varieties were detected in the houses of malaria infected families. In a large number of cases malignant tertian parasite was found. No attempt was made to eradicate the water hyacinth. District board also granted Rs. 200 to Assasoni Seba Asram to distribute quinine and to take anti-malarial measures in Assasoni police-station. In Jessore, nothing particular was done except propaganda works, distribution of pamphlets, quinine and cinchona. Union committees and union boards did jungle cutting. Several anti-malaria societies have been started under the guidance of the district board and the Central Co-operative Anti-malaria Society of Calcutta. In the 24-Parganas, 39 centres with two or three sub-centres under each were opened to treat malaria and kala-azar patients free. These were placed under 39 medical officers. The services of 22 dispensary doctors were also utilised in attending two more sub-centres each for the treatment of malaria and kala-azar in addition to their respective centres. Malaria and kala-azar cases were also treated in the remaining six district board dispensaries. Grants were made to the Central Anti-malaria Society and the Bengal Health Association for starting societies and treatment centres. In Nadia, quinine was distributed through 39 dispensaries and 16 district board kala-azar centres, and 7 aided kala-azar centres. One hundred and thirty-seven pounds of quinine tablets were distributed among over 14,000 people through various agents including the Government sanitary inspectors and sub-assistant surgeons, district board assistant sanitary inspectors and sub-inspectors of vaccination, medical practitioners, co-operative societies union boards and volunteers of the Nadia Sebak Sangha. Fifteen rural anti-malarial societies were registered including the Chuadanga Central Health Association. In Murshidabad, quinine was distributed through Government sanitary inspectors and epidemic doctors in the affected areas, but owing to the widespread nature of the disease and due to the fact that the 200 lbs. of quinine given by the Government was received too late to be of any use that year, all anti-malarial operations had to be abandoned and nothing of permanent nature could be attempted. In Rajshahi, malaria patients were

treated at the district board dispensaries and also by epidemic doctors. Quinine and cinchona febrifuge were freely distributed among the people of the malaria affected area. In Dinajpur, no measure worth mentioning was taken in this direction on account of financial stringency. Quinine was distributed free and lantern lectures were given to the public. In Darjeeling, no anti-malarial operations were carried out during the year. In Jalpaiguri, the sanitary inspectors and district board supernumerary doctors were sometimes deputed to distribute quinine tablets free to the malaria stricken people. Medical officers of district board and aided dispensaries also were supplied with sugar coated quinine tablets for free distribution. Efforts made to establish anti-malarial co-operative societies failed. In Rangpur, one anti-malaria co-operative society was established, while several others were in the course of formation during the year. Sanitary inspectors and the Health Officer gave instructions to the people regarding anti-malaria measures, occasionally with the help of lantern slides. It is reported that the earthquake of 1897 raised the level of the whole of this district with the result that almost all the rivers and water channels have undergone a considerable change. A major portion of this district is bil-land and with the alteration in the water channels, these bil lands have also been materially affected. According to the District Health Officer, this accounts for malaria, which is one of the two great scourges of the district, the other being kala-azar. In Bogra, an anti-malaria society was established at Khanjanpur, it undertook jungle clearing, reclamation of drains and intensive treatment of chronic malaria cases within its jurisdiction. Propaganda work was conducted in various other places, but no other society was formally started. In Pabna, no anti-malaria operation on a large scale was carried out except clearing ditches and tanks, filling up of ditches, minor drainage works, kerosenisation of small ditches, jungle cutting and quinine distribution by anti-malarial and public health societies in some parts of the district. In Malda, already four anti-malaria societies were working and two new ones were registered. Thirteen more were opened during the year, though none of them

have been registered as yet. Quinine was distributed free in addition to cutting of jungles, kerosenising of *dobas* in many of the badly affected villages. Anti-malarial work in schools was carried out as per established plan. The District Health Officer lays stress again on some relationship between the prevalence of malaria and mango crops, as evidenced by the fact that the year 1925 as marked by a bad outbreak of malaria as well as a total failure of the mango crops in the district. In Dacca, four centres were opened by the district board. Quinine and cinchona were distributed through presidents of union boards. In Mymensingh, the doctors deputed on kala-azar also treated malaria patients by distribution of quinine. In Bakarganj, attempts made for the creation of anti-malarial operations proved fruitless. One hundred and eighty-four pounds of quinine and 313 pounds of cinchona were distributed through dispensary doctors. In Faridpur, some anti-malaria societies were organised and they undertook minor anti-malaria measures in their own locality. In Chittagong, two registered anti-malaria societies have been opened very recently. In Noakhali, nine anti-malaria societies have been organised and registered and more were in the course of formation. In Tippera, the dispensaries and hospitals consumed 203 lbs. of quinine and cinchona and treated 57,797 malaria patients. Besides these, the district board epidemic doctors attended malaria epidemics in several unions and treated 6,545 cases and consumed about 44 lbs. of quinine and cinchona. Other works undertaken included improving the drainage of villages and clearing tanks.

(2) ANTI-KALA-AZAR MEASURES.—With the increase of incidence of kala-azar in the majority of the districts of Bengal, the activities of the local sanitary authorities have augmented consisting in taking the necessary steps to eradicate the disease so far as possible. In Khulna, all the district board dispensaries were converted into kala-azar centres. Special centres were also opened under epidemic doctors. As a result of the measures taken to combat the disease, kala-azar has not been able to make a fair advance over the preceding year. Kala-azar has been increasing in the district of Murshidabad, but according to the District Health Officer too much reliance cannot be placed on the

numbers reported by the chowkidars, who do not understand the classification of fevers. In Rajshahi, kala-azar centres were increased to 24, each under a district board sub-assistant surgeon trained for this purpose. Medicines and instruments worth about Rs. 1,350 were supplied by the district board to the kala-azar centres during the year under report. In Dinajpur, all the district board doctors have been trained in the treatment of kala-azar cases. Practically there are as many centres as there are district board dispensaries and it is proposed to open centres under the district board dispensary doctors who would attend to kala-azar cases twice weekly within a radius of 10 miles from their respective dispensaries. In Bogra, a large number of endemic centres of kala-azar have been thoroughly sterilised. Malda district was badly infected with kala-azar to combat which vigorous attempts were being made by the district board helped by Government grants. During the year, 2,610 new and 364 old cases were treated in 34 centres including 8 dispensaries. In Dacca, kala-azar survey was taken up by the district board in one thana. In Mymensingh, the number of deaths from kala-azar increased. The Health Officer reports that the district has become the abode of kala-azar which is spreading by leaps and bounds. Eighty-one kala-azar centres were opened in addition to all the district board dispensaries for treatment of kala-azar cases. In Bakarganj, in addition to the special arrangements made in all the 29 dispensaries of the Board, 27 out-centres were opened for treatment of kala-azar cases. Of these, four have since been closed owing to the insufficiency of cases in the locality. These centres are run by a staff of 12 temporary doctors employed by the district board, of whom two are private practitioners in receipt of small remuneration from the board. Altogether 12,986 kala-azar cases were treated of whom 4,180 were cured, 261 died and 3,389 are undergoing treatment; the rest 5,756 appear to have discontinued the treatment. *Formol Gel* test was used to diagnose the disease. The kala-azar survey started the year previous under four doctors was completed by the middle of this year, as a result of the survey 828 cases were detected in Sadar subdivision, 383 in Pirojpur, 2,324 in Bhola and 2,510 in Patuakhali. Propaganda work and magic lantern exhibitions were also undertaken. In Chittagong special kala-azar centres

were opened where 607 patients were treated. In Tippera, kala-azar existed in an epidemic form during the year 1925, 13,311 cases were treated at the dispensaries against 10,538 cases in the previous year. There were 12 kala-azar centres which along with the sub-centres formed a total of 33. At these centres 5,349 kala-azar cases were treated thus making a total of 18,660 cases treated in the district, of which 1,436 were old cases.

(3) ANTI-CHOLERA MEASURES.—Anti-cholera inoculation, disinfection of water-supplies and cholera infected houses, treatment of patients by epidemic doctors, sinking of tube-well, excavation and re-excavation of tanks, propaganda by lectures and magic lantern demonstrations were the chief measures undertaken to combat outbreaks of cholera in the various districts; 18,015 wells and 5,060 tanks were disinfected throughout the province. In Bankura, prompt attendance, through disinfection, reservation of tanks and three wells, isolation of patients wherever possible, treatment of cholera cases, disposal of dead bodies, propaganda work with magic lantern lectures, distribution of pamphlets, posters, etc., were adopted. In Burdwan, a number of wells and tanks were disinfected, but the District Health Officer could not find out their actual number. In Jessore, frequent visits were paid to the affected areas for instructing the people on preventive measures, disinfection of water sources and the affected households, distribution of leaflets, medicines and disinfectants, providing medical aid to the affected persons and the contacts, anti-cholera inoculations, postponement of *mêlas*, prosecution of jute-steepers, inspection of hâts and bazars to check sale of obnoxious food-stuffs, especially rotten fish. Suggestions were also made to the authorities for checking pollution of river water by washing of the cholera infected clothes and throwing in of cholera dead bodies therein. In the 24-Parganas, tube wells were being put up wherever possible, while anti-cholera vaccine was pushed on vigorously. In Nadia, chlorination of water-supplies, house to house disinfection, anti-cholera inoculation and propaganda work were done. In Murshidabad, cholera vaccine was used in many places with satisfactory results, none of the inoculated suffering from the disease. The general practice in this district is to throw dead bodies of cholera or small-pox infected persons in the river. In

Rajshahi, the district board established 29 sanitary centres in the rural areas, where epidemics of cholera are generally apprehended every year. Each centre was under the charge of a sub-assistant surgeon and supplied with sufficient stocks of disinfectants. These centres combated epidemics of cholera within a radius of five miles. Prophylactic inoculation proved a miraculous safeguard against the spread of the disease: 29,721 persons were inoculated with satisfactory results. Disinfection of tanks and wells with bleaching powder, and potassium permanganate was undertaken as well as strict protection against contamination of water sources, free distribution of cholera posters and pamphlets supplied by the Public Health Department. In Dinajpur, 1,382 inoculations were performed, seven doctors and three sanitary inspectors were deputed to combat the epidemic. In Rangpur, 14,572 inoculations were performed, usually only one dose was given, but not a single inoculated person suffered from cholera. The *chaukidars* have a tendency of suppressing the information about outbreaks of cholera until they become alarming; for fear that in that case they will have to make daily reports of such cases to the *thana*; hence the information furnished by the *chaukidars* about the first cases of cholera is unreliable. The cholera epidemics in this district are more or less dependent on the innumerable *mêlas* held from time to time and it is expected that with proper improvements in the sanitation of these *mêlas*, the cholera incidence of the district will decrease. In Bogra, the *fakirs* played a great part in disseminating the disease at Gabtoli and Shariakandi, but their activities were quickly suppressed. All contacts were thoroughly inoculated and the infected houses and water-supplies disinfected. In Pabna, the chief measures undertaken were disinfection and sterilisation of the sources of water-supply of the affected villages; securing early information about the occurrence of cholera by distribution of stamped cards to suitable persons in the rural areas; inoculation and distribution of preventive medicine, education of the people by means of leaflets, posters, magic lanterns, etc., and taking steps for controlling the sanitation of important *mêlas* held during the cholera season. In Malda, 40 cholera centres were started throughout the district and owing to prompt steps taken cholera did not assume an epidemic

form. More centres could not be started for want of funds. Public wells were periodically disinfected. Cholera pamphlets were distributed freely and the people were taught to take preventive steps against cholera and other epidemic diseases with the help of magic lantern lectures. In Bakarganj, 212 tanks were disinfected and 9,074 persons inoculated, affected houses were disinfected and magic lantern exhibitions were given and cholera leaflets were distributed. Eight epidemic doctors, one sanitary inspector and one compounder were employed in suppressing cholera epidemic; 312 persons were treated. Six tanks were excavated during the year, making up a total of 315 tanks excavated upto the end of the year 1925. Sites for 13 tanks were selected in areas where cholera usually prevails. In Chittagong, 12,935 persons were inoculated during the year. In Tippera, 9,007 persons were inoculated. Tube wells were sunk in some of the cholera centres.

(4) ANTI-SMALL-POX MEASURES.—

Vigorous campaigns of vaccination and revaccination are reported to have been organised in 1925 by the Health Officers in their respective districts. The Murshidabad District Health Officer reports that the outbreak of small-pox was severe in Beldanga, because the Musalman population stubbornly refuse revaccination and do not even understand the contagious nature of the disease; it was not uncommon to find persons with newly appeared pox or scabs moving about and sometimes selling wares in markets and fairs, without hitch or hindrance. Extra vaccinators were appointed and paid out of the Government grant. Intensive anti-small-pox campaigns were started in the worst affected areas and gangs of vaccinators with female vaccinators visited house to house. In Bogra, gang vaccination was carried out during the epidemic but no improvement in mortality was possible due to financial stringency which not only disallowed an increase in the number of vaccinators but actually led to a reduction of the staff. Besides the financial stringency resulting in a large number of persons remaining unprotected, the control of a small-pox epidemic in the district was rendered more difficult on account of (1) the convalescent patients with unhealed scars frequently associating with other peoples and occasionally frequenting markets in surrounding villages, (2)

the voluntary nature of revaccination and (3) the vaccination of *purdah* ladies. In Pabna, vaccination and revaccination could not be carried on during the recess season on an extensive scale on account of financial stringency and public opposition; besides, a very heavy flood rendered it almost impossible for the vaccinators to carry on their work without prohibitive boat allowances which the board could not afford. Hence the vaccination work could not be started on an extensive scale earlier than the first week of November. The staff available for work and supervision is also not adequate. Early information was obtained through official and non-official agencies as far as practicable. Educational propaganda and distribution of medicated oil for small-pox patients were other measures undertaken in this district. In Malda, in addition to vaccination and revaccination, the houses were disinfected with formalin. In Bakarganj, the scheme for free and compulsory vaccination with centres for free vaccination, was continued throughout the district. No fee was realised for house-to-house vaccination. The steamer companies issued notices to their serangs not to allow small-pox patients on board and thus the epidemic was easily controlled. Contact vaccination and disinfection were also resorted to. The District Health Officer of Tippera reports that information about the outbreaks of small-pox reached him too late, when the epidemic was already well established.

(5) **DAI-TRAINING.**—Twelve indigenous *dais* attended labour class in Birbhum district and were trained in the modern aseptic methods. Two *dai*-training centres were opened in the rural areas in Dacca district and two similar centres in Chittagong district at two district board dispensaries. In Hooghly district, two classes for training *dais* were held during the year. In the 24 Parganas, two midwives have been appointed to train village *dais* and ladies. In Nadia, nine *dais* were trained and granted certificates, another class was opened with six *dais*. In Rajshahi, training of indigenous *dais* in elementary midwifery was introduced since the previous year.

139. **SUGGESTIONS MADE BY DISTRICT HEALTH OFFICERS.**—(1) *Registration of vital statistics.*—The District Health Officer of Hooghly suggests that the registration of vital statistics

should be transferred to District Health Officers. Dinajpur suggests the entrusting of the registration of births and deaths to the presidents of union boards. Faridpur wants the registration of vital statistics to be done in union board office and the District Health Officer to be authorised to check births and deaths systematically union by union. Tippera suggests the granting of rewards to the vaccination staff for the largest number of detections and successful prosecutions for omission of registration. Dacca Municipal Health Officer suggests an amendment of the law so as to extend the responsibility to the *dais* in view of the obstructive attitude taken up by the *dais* as a class towards the registration of vital statistics.

(2) *Information about outbreaks of epidemic diseases.*—Hooghly District Health Officer suggested that notification of infectious diseases should be made compulsory. Tippera wants the union boards to regularly report epidemic diseases by means of service post-cards printed for the purpose and the presidents to submit to his office a copy of vital statistics of infectious diseases and fevers showing the villages where such deaths occur.

(3) *Malaria.*—Bakarganj suggests extension of the Adhuna khal and re-excavation of the Shibipasa khal in Gournadi thana and of the Bakshir khal in Nalchiti thana to diminish the chances of malaria due to over-logging of water in these. Jessore recommends the formation of union boards and a network of anti-malarial and social service societies. Dinajpur suggests the improvement of the *Gharrah nala* in the municipality, the distribution of quinine on a large scale and the convincing of the district board members of the injuriousness of making district board roads very high. Pabna suggests that the rural co-operative anti-malaria and public health societies should receive recurring grants every year from combined district board and Government funds.

(4) *Kala-azar.*—Bakarganj suggests the opening of more kala-azar centres. Chittagong suggests that seizure and death reports of kala-azar may be submitted to the District Health Officer in the epidemic report form to enable him to check these as well as to take prompt effective measures, if the chaukidars' reports are found to be

correct by local kala-azar survey work. Tippera requires liberal grants from Government to enable the district board to undertake extensive anti-kala-azar measures; besides the dispensaries should submit monthly post-cards similar to the malaria cards to the District Health Officer showing the new admissions from kala-azar, the names of villages and union boards and the number of cases received from each village noting the days of the week fixed for injections during each month and average attendance on injection days. Rangpur wants early notification of kala-azar cases and legislation for their compulsory treatment to complete the cure if necessary. Pabna wants the continuance of liberal grants from Government towards the expenses of anti-kala-azar work.

(5) *Small-pox*.—Tippera recommends compulsory revaccination and that the magistrates should take a serious view of the vaccination prosecutions. Dinajpur also suggests compulsory re-vaccination and better arrangement for getting the first information; he also wants the question of vaccination of females to be solved. Pabna suggests liberal Government grants for free vaccination.

(6) *Water-supply*.—Mymensingh requires a liberal supply of good pure drinking water by the provision of a sufficient number of wells and tanks every year and the encouragement of wealthy citizens and zemindars to dig wells and excavate tanks. The Magistrate of Mymensingh recommends a tube well in every village and a dispensary in every union.

(7) *Sanitary education*.—Mymensingh suggests that people should be taught hygiene through the help of lessons in text books used in schools. Dinajpur suggests propaganda work in the mufassal for the education of the people in the elementary principles of sanitation and the introduction of hygiene as a compulsory subject in the primary as well as the high schools in the district.

(8) *Food-stuffs*.—Jessore, Bogra and Hooghly recommend the introduction of the Bengal Food Adulteration Act in rural areas.

(9) *Sanitation of fairs and mēlas*.—Rajshahi suggests that no mēla should

be held without a license from the district board and no license should be granted unless prostitutes are prevented from attending such fairs and proper sanitary arrangements are made. Dinajpur suggests strict sanitary and medical arrangements of fairs and hāts. Rangpur suggests proper arrangements for the control of sanitary arrangements of mēlas which not only play a great part in the spread of cholera, but in the propagation of venereal disease through prostitutes attending these fairs in large numbers. Pabna wants statutory powers for the district board to compel the owners of mēlas and fairs within its jurisdiction to contribute towards the expenses of sanitary arrangements, temporary or permanent, such as tube wells, etc.

(10) *Legislation*.—Chittagong wants statutory powers for the district board to enable it to deal with the insanitary problems of fairs, markets, food-stuffs, tanks, etc. Jessore and Bogra recommend the passing of a Public Health Act to enforce sanitary measures. Dinajpur wants executive powers for the District Health Officer.

(11) *Miscellaneous*.—Pabna wants the provincialisation of the service of District Health Officers, also that the temporary staff of Government sanitary inspectors should be made permanent and the incomes of the district boards should be enhanced, the enhanced portion being spent on sanitation only. Dinajpur wants a sanitary inspector for every subdivision.

140. SUGGESTIONS MADE BY DISTRICT MAGISTRATES AND SUPERINTENDENTS OF POLICE.—(1) *Registration of vital statistics*.—Bankura Magistrate suggests the introduction of reward system in rural areas to improve the registration of vital statistics, the same as is prevalent in three municipalities of his district.

(2) *Securing early and prompt information about epidemics*.—The Dacca Superintendent of Police suggests that chaukidars and dafadars should be made responsible for such reports. Mymensingh, Faridpur and Burdwan Magistrates suggest the introduction of reward system to village chaukidars for reporting epidemic diseases under Rule 85, of the Chowkidari Manual. Faridpur suggests that four annas should be paid to dafadars for each first information, which should be given by means of

sending red printed cards for cholera and yellow for small-pox direct to District Health Officer. Birbhum Magistrate suggests the announcement to the public of an outbreak of epidemic by means of beat of drum. Hooghly suggests that epidemic cases should at once be reported by the chaukidars to the union board presidents, who should immediately notify the same by means of post-cards to the District Health Officers and the thana officers concerned. Midnapur expects a speedier report of epidemics from villages if the president panchayats and dafadars are supplied with a sufficient number of post-cards by district and union boards. The 24-Parganas Magistrate suggests that each union board should be supplied with printed post-cards addressed to the District Health Officer, which should contain reports of outbreaks, names of villages being put in by the president.

141. **Personal proceedings.**—The office of the Director of Public Health was held by me from the 1st January until I proceeded on leave on the 20th March. From the latter date until the end of the year, Lt.-Colonel A. D. Stewart, I.M.S., officiated in the appointment. During this time, the latter examined and reported on the following schemes: (a) Jabuna Project Section I, (b) Bhairab Anti-malaria Scheme, (c) Howrah-Amta Drainage Scheme, and (d) Anjona Anti-malaria Scheme. The departmental anti-malaria schemes in the Bengal Duars, at Singaran, Jangipur and in the civil station of Burdwan were also visited and reported on by him. He also toured a considerable part of the Dacca district, including the Dacca city, and visited the Rangpur and Rajshahi municipalities submitting reports of his inspections. He visited numerous villages in the 24-Parganas, Hooghly

and Howrah districts in connection with anti-malaria and kala-azar work and especially in respect of the schemes for combating malaria and kala-azar initiated by the District Board of the 24-Parganas. At the invitation of the District Magistrate of Burdwan, and along with him, Lt.-Colonel Stewart toured some of the subdivisions of the Burdwan district investigating conditions of malaria and encouraging the promotion of village societies for combating malaria. The question of a site for an infectious diseases hospital at Howrah was considered and reported on by him. As Professor of Hygiene, he delivered the annual course of lectures and demonstrations to the students of the Calcutta Medical College. He attended by invitation the meetings of the Sub-Committee of the Calcutta Corporation on the definitions and standards of purity for food-stuffs.

During the year, the post of the Director of the Bengal Public Health Laboratories was held by Dr. Khambata and the posts of Assistant Directors of Public Health by Drs. Sufi, Brahmachari, Sur, Roy, Mitra and Batra and I have to thank all these officers for their very willing and generous assistance to Lt.-Colonel Stewart and myself. Rai Sahib K. P. Ray continued to perform the duties of the Publicity Officer with his customary ability and energy while I must again thank Mr. Elias, the personal assistant, for his untiring attention and for the great assistance which his office experience enabled him to give Lt.-Colonel Stewart and myself.

C. A. BENTLEY,

Director of Public Health, Bengal.

CALCUTTA:

The 15th March, 1927.

Part II

Annual Report of the Sanitary Board, Bengal, 1925

142. The constitution of the Board remained the same as reconstituted in September 1924 until about the end of the year, when the following gentlemen were appointed to be non-official members:—

- (1) Rai Upendra Nath Brahmachari Bahadur.
- (2) Dr. K. Ahmad.
- (3) Rai Gopal Chandra Chatterjee Bahadur.
- (4) Rai Chuni Lal Basu Bahadur.
- (5) Dr. Santiram Chatterjee, L.M.S.
- (6) Dr. Jitendra Nath Maitra, M.D.

Dr. C. A. Bentley, Director of Public Health, Joint-Secretary to the Board, went on leave on 20th March 1925 and Major A. D. Stewart officiated for him during the rest of the year. Mr. F. C. Griffin officiated as *ex-officio* Joint-Secretary until 21st June, when Mr. G. B. Williams returned from leave and held charge of the office during the remainder of the year. The Board held four meetings in Calcutta during the year.

143. The following sketch projects were considered and recommended to Government for administrative approval:—

	Estimated Cost. Rs.
(1) Patuakhali water-supply	66,000
(2) Darjeeling water-works Improvement	35,630
(3) Rajshahi water-supply	1,04,800
(4) Brahmanbaria water-supply	1,09,300

In the cases of Patuakhali and Rajshahi schemes, which provide for supplies through street standposts only, alternative projects for larger supplies through house connections were also considered but these were not recommended.

144. Revised proposals were made by the Brahmanbaria Municipality for financing their water-supply scheme and the Board reconsidered this scheme and approved of a larger supply which provides for house connections. This project was forwarded to Government with a recommendation that a grant of Rs. 25,550 be given on condition that the Municipality would increase the rate of house connection fees to Rs. 250 and collect Rs. 18,750 from this source in advance.

145. The following detailed schemes were forwarded to Government with recommendation for final sanction:—

	Estimated Cost. Rs.
(1) Bhatpara sewerage	13,10,000
(2) Bhatpara water-supply	3,92,500
(3) Naihati water-supply extension	1,57,607
(4) Khulna water-supply improvement	58,400
(5) Pabna water-supply	1,67,600

146. During the year under report the experiments on anti-malarial measures on specific lines were continued in Meenglas, Singaran, Jangipur and Banka Valley and the results were carefully watched. These schemes will be discussed in detail in the annual Public Health Report of 1925.

J. G. DRUMMOND,

President.

A. D. STEWART,

G. B. WILLIAMS,

Joint-Secretaries.

CALCUTTA:

The 22nd February 1926.

Part III

Thirteenth Annual Report of the Chief Engineer, Public Health Department, Bengal, 1925

Establishment.

147. Mr. F. C. Griffin, Executive Engineer, Dacca Sanitary Works Division, officiated as Chief Engineer, until the 22nd June, when I took over charge on my return from leave. Mr. Griffin was on leave from the above date until the end of the year. Rai Saheb S. N. Roy, Assistant Engineer, officiated as Executive Engineer, Dacca Sanitary Works Division, throughout the year.

Messrs. S. N. Ghose and W. J. Berry and Rai Saheb K. C. Banerjee, Executive Engineers, were in charge of the Central, Western and Presidency Divisions, respectively.

At the end of the year the Upper Subordinate establishment consisted of three permanent and three temporary assistant engineers and one permanent and six temporary supervisors.

Schemes Prepared.

WATER-SUPPLY SCHEMES.

148. The following sketch projects were drawn up during the year by the department:—

	Estimated cost.
	Rs.
(i) Rishra-Konnagar water-supply—Supply from two 5-inch diameter tube-wells.	3,10,000
(ii) Naihati water-supply—Extension (revised).	1,72,860
(iii) Satkhira water-supply extension	59,000

149. The schemes in the list below were revised, tube-wells being substituted for the sources of supply previously proposed—

	Estimated cost.
	Rs.
(i) English Bazar water-supply ..	1,48,200
(ii) Nawabganj water-supply ..	37,700
(iii) Kamarhati water-supply ..	1,25,000
(iv) Kalna water-supply ..	1,30,000
(v) Faridpur water-supply ..	1,43,100
(vi) Tamluk water-supply ..	19,512

DRAINAGE SCHEMES.

150. (i) A sketch project was prepared for the drainage of the Chatra Ward of the Serampore Municipality at an estimated cost of Rs. 41,800.

(ii) After a joint inspection of the town of Dinajpur by the Director of Public Health and the officiating Chief Engineer, plans and estimates were prepared for various alternative drainage projects. These included:—

- (a) Making the Gagra and Kachya nullas pucca at an estimated cost of from Rs. 1,07,300 to Rs. 1,52,200.
- (b) Intercepting sewers for sullage—costing from Rs. 89,200 to Rs. 1,97,500.
- (c) Anti-malarial schemes estimated at Rs. 7,900.

151. A project for an unfiltered water-supply to provide flushing water for the Dacca Sewerage System and also to increase the water-supply was prepared, the cost being estimated at Rs. 67,600.

DETAILED SCHEMES.

152. The following schemes were prepared in detail:—

	Estimated cost.
	Rs.
(i) Narayanganj water-supply extension—revised scheme for a supply from a tube-well.	2,07,500
(ii) Pabna water-supply—initial scheme (revised).	1,55,000
(iii) Naihati water-supply extension ..	1,57,607
(iv) Kotrung water-supply—Supply from a tube-well (revised).	61,400
(v) Khulna water-supply improvement—Supply from a tube-well.	58,000
(vi) Patuakhali water-supply (revised)	66,000
(vii) Jessore waterworks improvement ..	11,000
(viii) Bhatpara water-supply ..	3,92,500
(ix) Dacca sewerage extension (revised).	7,10,000
(x) Bhatpara sewerage ..	13,10,000
(xi) Budge-Budge drainage improvement—Chitraganj sluice (revised).	14,100
(xii) Improvement of the sanitation of Munshiganj town (revised).	36,409
(xiii) Improvement of the sanitation of the Gurkha Guards Quarters at Government House, Darjeeling.	6,500

153. A project for the construction of two settling tanks in connection with the Howrah waterworks, estimated to cost Rs. 51,450, submitted by the Municipal Engineer, was examined and approved.

A scheme for the water-supply in Asansol Municipality prepared by the local authority was examined.

Works under construction.

154. The progress made during the year with schemes in course of construction under the control and supervision of the department may be briefly summarised as follows:—

WATERWORKS.

(i) *Dacca water-supply improvement.*—Hardly any progress was made with this work during the year. The position is complicated by the law-suit instituted by Babu A. C. Ghose, Contractor, against the Secretary of State. The scheme for the extra unfiltered water-supply was held up for various reasons, amongst others the opposition by the hospital authorities to the site of the proposed unfiltered water pumping station near the hospital.

(ii) *Comilla water-supply.*—These works were practically completed before the end of the year. Water was turned on to the town in July 1925. The original scheme has been completed within the estimated cost, and there is a balance in hand for expenditure on further pipe lines, etc.

(iii) *Rangamati water-supply.*—An experimental boring was made, and it was proved that water is available at a depth below ground (in the dry weather) of about 60 feet. It was decided to construct two or three small deep tube-wells with hand pumps, and the work in connection with one of these was put in hand, but was not completed by the end of the year.

(iv) *Chandpur water-supply.*—A contract for a tube-well was let to the Swedish Trading Company, but the methods of this firm have been hitherto extremely dilatory, and in spite of the pressure brought upon them they failed to make a start with the work before the end of the year.

(v) *Burdwan water-supply improvement.*—In November the piston of new engine No. 1 fractured as the result of a defect in the design and a new piston and liner had to be ordered from Messrs. Tangye & Co., the makers.

The accident to No. 1 engine caused doubts regarding the soundness of the piston of No. 2 engine, so the contractors were ordered to supply a new piston and liner for this engine also. This and

other breakdowns of the plant caused great delay in the completion of this work which has also been hindered by shortage of funds.

(vi) *Raniganj water-supply.*—Late floods and the shifting of the dry weather channel of the Damodar caused considerable delay in starting the work. After it was commenced, abnormal rain in March and April resulted in frequent freshets which rendered efforts to restart the work abortive. For the present season's work Simplex piling and a steam piling hammer were borrowed from the Behar Government. These arrived at site at the end of December since when the work has been in progress.

The pipe laying for the initial scheme was completed.

(vii) *Midnapore water-supply.*—Additional funds having been provided by the municipality, the 8-inch and 7-inch mains to feed the northern end of the town, the 6-inch main for supplying water to the jail, and the mains for several sections of the bazar were laid. The District Board failed to fulfil their promise to contribute a further donation of Rs. 50,000, so the scheme is still incomplete. Borings were started to investigate the possibilities of constructing an infiltration gallery to improve the yield of well No. 1.

(viii) *Bankura water-supply improvement.*—Owing to the reluctance of the Municipal Commissioners to accept steel mains for the distribution system, the extension of the pipe lines could not be taken in hand before the end of the year. The new engine was erected, set to work, and tested satisfactorily.

(ix) *Suri water-supply.*—Experimental borings showed that tube-wells are impossible as a source of supply for these works and an infiltration gallery under the river was finally adopted. Contract drawings, specifications, etc., were prepared. Land acquisition proceedings were commenced and tenders were called for for the supply of machinery and steel pipes for the rising main and distribution system.

(x) *Sanitation scheme for the Armed Reserved Police Lines, Burdwan.*—The septic tank latrine, water tower and engine house were completed and contracts let for the supply of the machinery and filters and also for the laying of the distribution system.

(xi) *Serampore water-supply extension*.—This scheme was completed during the year with the exception of some minor works.

(xii) *Kalimpong water-supply*.—The extension of the distribution system to Development Area No. 1 and the new conduit from Thokchu were under construction and have been completed since the end of the year.

SEWERAGE.

(i) *Dacca sewerage—initial portion*.—This work was completed and in full operation during the year.

(ii) *Dacca sewerage extension*.—The progress of this work was hindered by the omission of the provision of Rs. 3,50,000 asked for by this department from the budget for the year 1925-26. Work had to be consequently carried on with the balance remaining of the grant given during the previous year. Delay was also caused by the time taken to acquire the land required for the outfall works. The department was not given possession of the whole of this until the beginning of the present year. Work on the excavation of tanks and preparation of the land for irrigation was carried on as far as it could be under the circumstances. About 1,550 feet of the 2 feet 9-inch arterial sewer was completed.

(iii) *Tittaghar sewerage scheme*.—The larger portion of the land for the outfall works was not handed over to the department until the end of the year, and in consequence the progress of the works was hindered considerably. About three-quarters of the total length of sewers were completed during the year. Contracts were let for the receiving well, engine house and staff quarters. Works to the value of nearly two and half lakhs of rupees were completed.

(iv) *Kurseong sewerage*.—The alterations to the detritus tank and reconstruction of the roof over the septic tanks were completed. The work is now complete and is being handed over to the Municipality.

TUBE-WELLS.

(i) *Bogra*.—The boring at Bogra was carried down to a depth of nearly 400 feet, and as no suitable water bearing stratum was found below 100 feet,

the tube was withdrawn to this depth at which a satisfactory supply was obtained.

(ii) *English Bazar*.—The boring at English Bazar could not be completed during the year owing to the dilatory methods of the contractors.

(iii) *Experimental boring operations*.—A boring plant and a temporary staff for sinking small experimental tube-wells in rural areas in the province were sanctioned by Government and a boring subdivision was formed. Experimental tube-wells were sunk at the following places:—

- (a) North Dum Dum.
- (b) Tamluk, and
- (c) Jhargram.

Of these (a) and (c) proved successful and (b) a failure, the water being saline.

Expenditure on new works.

155. (1) As will be seen from Appendix I of this report, the total capital expenditure on construction of water-works during the year was Rs. 6,81,452.

(2) The total capital expenditure on drainage and sewerage works during the year was Rs. 4,08,369—*vide* Appendix II.

Maintenance of Waterworks and Drainage Works.

156. (1) The total number of water-works in operation during the year was the same as last year. The number of persons served was 927,650, the total quantity of water supplied averaging 10,998,559 gallons per day.

(2) The diagrams in Appendix III show the comparative figures for coal and oil consumption at the various water-works and sewage pumping stations in the Presidency. The advantage of crude oil engines over steam engines for small and medium sized installations is clearly evident from these diagrams.

(3) The most important work maintained by the department was the outfall works of the Dacca sewerage system, which continued to be under departmental control during the year. The Dacca Municipality paid the cost of the pumping; the cost of working the sewage farm was defrayed from the balance of the funds remaining from the previous year.

The disposal of the sewage had to be undertaken at these works under the greatest possible difficulties. It now contains the night-soil collected from all the accessible privies in the town which must be the excreta of some 70,000 persons, whereas the septic tanks were only designed for the sewage of 45,000 persons. The latter have therefore been continually overworked and the amount of purification effected by them has greatly diminished. Moreover the sewage is extremely strong, and owing to the time the privies are allowed to retain their contents before they are emptied, is septic and offensive. Owing to the delay in acquiring the land for the extension of the irrigation area only a very small portion of this could be laid out and put into operation during the year; consequently large quantities of sewage had to be discharged, practically untreated, into a *khal*. This became a serious nuisance, but attempts to divert the effluent in other directions were met by strenuous opposition. Nevertheless, in spite of these difficulties, the scheme as a whole worked extremely well. The sewerage system worked without a hitch, no blocking of the sewers occurred and there are signs that the advantages of the water-carriage system are beginning to be realised by the better class inhabitants of Dacca. The public latrines and urinals are an immense sanitary improvement and the dumping of night-soil was carried on without any serious nuisance. At the sewage farm excellent crops were grown, especially of sugarcane, guinea grass, and jute. Comparatively large quantities of very strong sewage were applied to clay land without any serious signs of sewage sickness. It has been proved that sludge can be easily dried throughout the dry season without nuisance or fly trouble, and that when dry it becomes a valuable fertiliser. An accident occurred to one of the 50 h.p. pumping engines, which necessitated putting this out of commission for several months whilst a new cylinder end was obtained from England.

These works will it is hoped be in full operation within the next 18 months, after which the difficulties hitherto experienced will almost, if not quite, disappear.

(4) The result of roofing the Kurseong septic tanks with reinforced concrete has been most satisfactory. Mosquitoes have entirely ceased to breed. No nuisance

has been experienced from this installation and the latest analyses of the effluent show that the tanks are remarkably efficient.

(5) The Berhampur waterworks continued to be managed by this department during the year. The financial position was greatly improved and as a result of the various economies effected it was found possible to sanction 20 additional house connections.

(6) The Kalimpong waterworks remained under the management of this department during the year. The repairs to the conduit were taken up and have been completed since the end of the year. The Deola reservoir could not be repaired for want of funds. About 30 meters were put in to the house connections. The remainder of the connections have been metered since the end of the year.

(7) The Kalimpong Bazar water-supply, the management of which has been transferred to this department, was maintained during the year at a cost of Rs. 1,500 made over from the Darjeeling Improvement Fund.

(8) The activated sludge installation at the Bengal Engineering College did not function as well as could be desired during the year. The main cause of its inefficiency was clearly that the capacity of the aeration tank was far in excess of that required for the quantity of sewage being dealt with. This conclusion has been concurred in by Dr. G. Fowler who has visited the works this year and the works have been altered; the capacity of the aeration tank being reduced to one-third of that previously utilised.

(9) The annual and half-yearly inspections of machinery and filters at the various waterworks were as usual made by Messrs. Worthington-Simpson, Limited, whose reports were scrutinized by this department before being forwarded to the local bodies concerned for necessary action.

(10) The Mechanical Assistant Engineer of this department also carried out inspection of the waterworks machinery wherever these were necessary.

(11) As a result of the sudden failure of the feed pump at the Hooghly-Chinsura waterworks, the machinery there ceased to function for a few days. The services of the Mechanical Assistant

Engineer were requisitioned by the local authority and he inspected the machinery and located the defect. The plant was put into working order and the town supply restored.

(12) The monthly returns of the various waterworks in the province were checked and the cases of abnormal consumption of coal were brought to the notice of the Superintendents concerned, requisite instructions being given.

(13) Reports on analyses of water-supplies in municipalities, issued by the Director of Bengal, Public Health Laboratory, and the Medical Officer of Health, Darjeeling, were regularly scrutinized by this department, and in the case of unsatisfactory reports necessary instructions given for chlorination of water or other measures of improvements. On the whole the quality of the water supplied is very satisfactory when measured by Indian standards.

Miscellaneous.

157. (1) At the request of the President of the Reception Committee of the Faridpur Provincial Conference, a scheme for a temporary water-supply to tents on the conference ground, estimated to cost Rs. 1,280, was prepared and sent to him.

(2) At the instance of the Director of Public Health, Bengal, a scheme for the sanitation of Rajshahi College Hostel, estimated at Rs. 25,200, was prepared and forwarded to the Assistant Director of Public Health, School of Hygiene.

(3) At the request of the Director of Agriculture, Bengal, a scheme for supplying water to the Piasbari Sericultural Nursery from a tube-well, estimated at Rs. 1,100, was drawn up.

(4) Under orders of Government estimates and plans for sewerage connections to the following Government buildings at Dacca were prepared:—

	Estimated cost.
	Rs.
1. Jagannath Intermediate College Hostel.	19,700
2. Dacca Collegiate School ..	6,300
3. Dacca Madrasa and Dufferin Hostel	16,900
4. Moslem High School	6,100
5. Normal School	5,700
6. Eden High School for Girls ..	12,000
7. General Post Office and Post-master's Quarters.	4,900
8. Government House	32,000

(5) At the request of the Officer-in-charge of the Medical Mission Hospital at Sarenga in the district of Bankura, a preliminary survey was made with a view to see what improvements could be made in the water-supply in the hospital.

(6) In pursuance of the decision arrived at at a joint inspection of the Sardah Police Training College by the Director of Public Health, Executive Engineer, Public Works Department, Rajshahi Division, and officiating Chief Engineer of this department, plans and estimates, amounting to Rs. 19,600 for a septic tank latrine for the College, were prepared and sent to the Executive Engineer, Rajshahi Division.

(7) An estimate amounting to Rs. 1,660 for additions and alterations to the existing engine house at the Satkhira waterworks was prepared at the request of the Municipality and sent to them.

(8) Plans and estimates, amounting to Rs. 4,428, prepared by Messrs. J. B. Norton & Sons, for the construction of a 5-seated flush latrine and urinal for the Belvedere Estate were forwarded to this department by the Superintendent, Viceregal Estate, for approval. These were examined, and alternative estimates were prepared.

(9) The Mayor of Chandernagar forwarded plans and estimates for a scheme for the disposal of night-soil of the town for my opinion. These were examined, and a fresh design for a dumping chute and septic tanks at an estimated cost of Rs. 22,400 was sent to him.

(10) At the request of the Chairman, Rajbari Municipality, tenders for sinking a tube-well at Rajbari were called for and scrutinized by this department. The tender of the Bengal Chemical and Pharmaceutical Works, Ltd., was recommended for acceptance.

(11) Temporary waterworks were installed at Sagor Island in connection with the fair which is annually held at this place and sterilized water was supplied to the pilgrims. These were successful in preventing any epidemic of water-borne diseases amongst the pilgrims during the *melâ* time.

(12) Two student engineers of the Bengal Engineering College, Sibpur, and two passed overseers of the Ashanulla School of Engineering, Dacca,

finished their practical training under this department; and one new student from each was taken in.

(13) Training in Elementary Sanitary Engineering was given to the students of the 16th and 17th sessions of the Sanitary Inspectors Class during the year and examinations held.

Conclusion.

158. The result of the year's working of the department may be summarised as being the most successful in its history. It is probably but little realised how far the activities of the department extend. It acts as the consulting engineer to local authorities, carries out all sanitary engineering works for them and for other departments of Government, advises Government on questions of public health, maintains waterworks and sewage works when necessary and assists the municipalities and other local authorities in Bengal whenever an expert engineering opinion is desired by them. The work done by the department is that which corresponds, so far as comparison is possible, with that undertaken in England by Government engineering inspectors, consulting engineers, and municipal engineers and surveyors whose total number must run into thousands. Practically, every municipal waterworks in Bengal has either been designed and constructed by the department during the past seventeen years or else entirely remodelled under its control and advice during that period.

The introduction of modern methods of sanitation and sewage disposal into Bengal mufassal towns has been also mainly due to the department. When it is considered that all these works after completion have to be handed over to a very imperfectly trained staff and run under the control of elected bodies who have no technical knowledge and hardly any training in practical work of any kind, it can only be said that it is surprising that the work of the department has been as successful as it has been.

159. In conclusion I wish to place on record that Mr. Griffin successfully carried out the duties of Chief Engineer during his period of officiation, and I desire to commend the services of Messrs. S. N. Ghose, W. J. Berry and Rai Saheb K. C. Banerjee, Executive Engineers, of Rai Saheb S. N. Roy, officiating Executive Engineer, Babu S. C. Ghose Babu R. S. Das Gupta, Babu B. R. Bhattacharjee and Babu S. C. Hore, Assistant Engineers, and also of Babu C. C. Seal, Personal Assistant to the Chief Engineer, to whose willing and hard-working assistance the Chief Engineer is much indebted.

G. B. WILLIAMS, M.INST.C.E.,

M.I.MECH.E., F.R.SAN.I., M.I.E.(IND.),

Chief Engineer, Public Health

Department, Bengal.

CALCUTTA,

The 20th April 1926.

APPENDICES.

APPENDIX I.

Statistics with regard to Municipal Water Works in Bengal, 1925.

No.	Name of Municipality.	Year of completion.	Area served.	Approximate population served.	Average daily supply in gallons.	Average daily supply per head of population in gallons.	Total capital expenditure up to 1925.	Total capital expenditure during 1925.	Annual cost of maintenance.	Cost of delivery of 1,000 gallons (working charges only).	Source of supply.	Type of filters employed.	Type of engines and pumps.
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	Barisal	1912	Sq. M. 3.50	26,744	95,598	3.50	Rs. 2,13,817	Rs. 1,397	Rs. 10,664	Annas. 4.88	River Barisal	Slow sand filters	Tandem compound surface-condensing engines and double acting pumps.
2	Borthampore	1899	6.00	26,670	284,754	10.67	3,70,269	Nil	27,441	4.22	River Bhagirathi	Ditto	One compound duplex direct acting Worthington vertical engine with pump and a centrifugal pump on a barge. Two compound duplex horizontal condensing engines and direct acting pumps.
3	Burdwan	1884	3.25	20,000	413,380	11.81	5,10,297	4,727	21,333	2.26	River Banka	Ditto	Two horizontal single cylinder Rotary engines with direct acting pump and two horizontal compound Worthington condensing engines with direct acting pumps. (New machinery being installed.)
4	Dacca	1910	6.77	120,000	1,543,880	12.86	11,67,696	9,784	70,370	1.90	River Buriganga	Jewel gravity filters	Worthington triple expansion engines with double acting high and low lift pumps.
5	Howrah	1896	10.10	195,301	3,333,411	17.12	34,32,749	2,94,540	1,70,352	2.23	River Hooghly	Slow sand filters	Duplex compound condensing engines with vertical single acting plunger pumps for low lift and Worthington double acting pumps for high lift.
6	Mymensingh	1893	2.50	25,329	348,634	13.77	4,41,286	1,609	38,147	4.79	River Brahmaputra	Ditto	Three condensing Worthington engines of which one is triple expansion and double acting high and low lift pumps.
7	Narailaganj	1908	3.00	30,602	274,588	8.96	2,35,312	Nil	23,213	3.70	River Sitakalkya	Jewel gravity filters	Worthington horizontal triple expansion surface-condensing engines with double acting high and low lift pumps.
8	Darjeeling	1912	4.85	20,935	520,000	24.84	6,25,584	6,639	11,181	0.94	30 springs on Senchal spur.	....	
9	Kurseong	1913	2.00	5,000	80,000	16.00	1,05,964	6,376	12,017	6.58	Spring in the forest of Sepoydhara.	Jewel pressure filters.	
10	Khulna	1914	2.00	8,000	30,113	3.75	49,145	891	4,757	6.92	Reserved tank	Slow sand filters	One Pelometer and one Tangye's special duplex pump.
11	Chandpur	1912	.093	6,000	11,493	1.91	27,583	Nil	2,967	11.25	River Meghna	Jewel pressure filters	Horizontal Worthington duplex pump.
12	Mushiganj	1911	1.00	4,000	10,726	2.68	33,802	Nil	2,996	12.25	River Dhakeswar	Ditto	Ditto.
13	Faridpur	1908	2.00	6,000	20,000	3.33	12,000	Nil	1,721	3.77	Reserved tank	Slow sand filters	Kite motion hand pumps.
14	Firojpur	1913	0.50	2,283	2,500	1.71	29,468	Nil	776	13.60	Ditto	Ditto	Ditto.
15	Patuakhali	1898	2.00	5,000	10,000	2.00	23,299	4,341	435	3.34	Ditto	Ditto	Quadruple acting wing pumps.
16	Jessore	1914	4.00	8,000	38,816	4.85	2,17,732	Nil	8,781	9.91	Ditto	Paterson's gravity filters.	Tangye's special oil engines and centrifugal pumps.

17	Hooghly-Chinsura ..	1914	5-00	29,938	401,121	13-30	6,20,016	1,084	34,453	3-70	River Hooghly ..	Show sand filters ..	Triple expansion Worthington condensing engines with high lift duplex pump and vertical high lift engines with medium lift centrifugal pumps.
18	Serampore ..	1914	1-07	22,500	202,157	8-98	2,86,564	98,666	30,333	6-50	Ditto	....	Compound duplex condensing engines with direct acting pump.
19	Barkura ..	1916	1-50	8,470	69,413	8-19	1,08,339	21,708	6,969	4-40	Filtration gallery in the bed of river Gandowari.	....	Small-Diesel oil engines with horizontal duplex pumps.
20	Chittagong ..	1916	4-00	36,074	440,028	12-20	3,64,881	3,400	48,920	4-86	Bore holes	Paterson's iron eliminating plant and filter.	Two horizontal triple expansion condensing fly-wheel engines double acting plunger pumps for high lift, air compressor for low lift.
21	Nahaty ..	1911	1-30	23,306	93,443	4-00	58,851	4,919	....	....	....	....	....
22	Bhatpara ..	1906	1-50	45,000	82,424	1-83	30,723	1,677	....	....	....	....	....
23	Tittaghar ..	1905	1-50	52,454	1,457,000	27-70	17,929	Nil	....	....	....	....	....
24	Garulia ..	1904	1-00	12,000	118,000	9-83	8,590	Nil	....	....	Supplied from local mills.	....	....
25	Bhadreswar ..	..	0-50	17,000	137,534	8-08	....	....	....	....	....	....	....
26	Chandpur ..	..	2-80	26,500	381,266	55-50	....	....	....	....	....	....	....
27	Baranagar ..	1918	0-82	8,000	19,767	2-49	15,173	Nil	....	....	....	....	....
28	Tollygunge ..	1909	5-00	20,000	45,298	2-20	47,971	7,917	....	....	Supplied from Calcutta Water Works.	....	....
29	South Suburban ..	1904	2-50	16,000	23,759	1-50	65,368	1,061	....	....	....	....	....
30	Uttarpara ..	1918	0-75	8,660	82,365	9-30	1,91,541	6,886	7,530	4-00	River Hooghly ..	Mechanical gravity filters.	Two sets of centrifugal pumps, consisting of three in each set, driven by two Tangye's patent semi-Diesel crude oil engines.
31	Nator ..	1919	1-50	7,000	14,334	2-13	94,942	7,076	4,648	13-64	Reserved tank	Jewel pressure filter.	Ingeco oil engines and Worthington double acting pump, type A.
32	Satkhira ..	1919	1-50	7,250	10,000	1-38	73,269	216	3,693	13-58	Ditto	Mather & Platt's mechanical pressure filter.	Messrs. Mather & Platt's one centrifugal pump and Campbell Gas Engine Co.'s high compression type 2 oil engines.
33	Rajbari ..	1919	0-75	3,000	13,560	4-52	54,087	Nil	2,403	7-76	Ditto	Jewel pressure filter.	Two 1½ horse-power Tangye's oil engine and two Worthington horizontal double acting single cylinder power pumps.
34	Naokhall ..	1920	..	2,500	5,644	2-25	32,172	Nil	3,401	26-41	Ditto	Chlorinating apparatus.	One vertical boiler and one Worthington duplex non-condensing pump.
35	Kalimping ..	1922	1-50	7,216	118,000	16-30	7,36,609	5,965	5,859	2-17	River Billi	....	Gravity supply.
36	Krishnagar ..	1922	6-00	19,013	119,725	6-30	4,09,066	2,242	12,863	4-75	River Jalangi	Jewel mechanical gravity filter.	Two 15 horse-power crude oil engine and four centrifugal pumps with two common suction and two delivery pipes.
37	Midnapore ..	..	2-00	20,000	87,601	4-38	5,25,439	37,507	7,923	3-96	Wells on the bank of River Cosaye.	....	40 horse-power Campbell crude oil engines driving vertical treble ram pumps.
38	Comilla ..	1925	2-58	25,914	57,027	2-20	3,40,875	131,441	3,776	5-56	River Goomdi	Paterson's pressure filter.	Three Campbell Gas Engine Co.'s high compression type oil engines and centrifugal pumps, two for high lift and one for low lift.
39	Ranganj ..	In progress.	..	....	....	....	2,44,399	18,000	....	....	....	....	....
40	Suri ..	..	..	....	....	....	1,323	1,323	....	....	....	....	....
Total		..	..	927,650	10,998,559	....	1,18,22,100	6,81,462	....	....	....	....	....

APPENDIX II.

Total expenditure on drainage and sewerage works in the Municipalities in Bengal up to
31st December 1925.

No.	Name of Municipality.	Area served.	Approximate population served.	Total capital cost up to 31st December 1925.	Total capital expenditure during 1925.	Annual cost of mainte- nance.
1	2	3	4	5	6	7
		Sq. M.			Rs.	Rs.
1	Darjeeling ..	4.85	20,935	1,49,898	371	2,489
2	Howrah ..	2.55	85,378	12,33,903	8,449	492
3	Burdwan ..	4.00	28,000	1,76,758	571	5,085
4	Kurseong ..	2.00	4,000	2,52,958	9,692	2,641
5	Khulna ..	1.00	5,000	11,924	194	Nil
6	Bhatpara ..	3.00	50,000	2,00,357	3,774	9,425
7	Tittagarh ..	1.50	52,454	3,64,240	1,29,481	7,387
8	Garulia ..	1.13	12,000	52,566	Nil	Nil
9	Budge Budge ..	2.00	5,612	50,423	756	1,171
10	Basirhat ..	8.50	19,268	9,576	Nil	488
11	Baraset ..	3.50	5,500	24,809	Nil	870
12	Baruipur ..	1.20	4,508	17,209	Nil	Nil
13	Baranagar ..	0.82	17,750	67,894	676	3,538
14	Krishnagar ..	....	16,000	28,000	Nil	Nil
15	Berhampore ..	6.00	26,670	50,526	1,906	2,465
16	English Bazar ..	2.00	11,000	27,809	23	770
17	Ranaghat ..	1.50	8,000	41,796	450	465
18	Kushtea ..	0.55	5,000	33,866	217	621
19	Uttarpara ..	0.38	2,300	17,864	Nil	Nil
20	Chandpur ..	.059	2,450	1,723	Nil	865
21	Bankura ..	.04	4,000	10,002	Nil	Nil
22	Katwa ..	1.00	6,822	53,483	Nil	235
23	Bhadreswar ..	0.16	2,422	26,391	Nil	43
24	Tangail ..	2.00	3,000	21,531	66	52
25	Champdany ..	3.75	22,500	1,06,141	Nil	Nil
26	Serampore ..	0.06	7,400	17,891	383	183
27	Dacca ..	2.10	65,000	18,44,310	2,48,313	21,217
28	Rangpur ..	....	....	*91,591	3,047	..
29	Jangipur ..	....	....	47,254	Nil	..
	Total ..	....	....	50,32,693	4,08,369	

* Reconstruction of Goghat Bridge.

WATER WORKS & SEWERAGE PUMPING STATIONS IN BENGAL
 DIAGRAM SHOWING CONSUMPTION OF COAL PER PUMP HORSE POWER PER HOUR

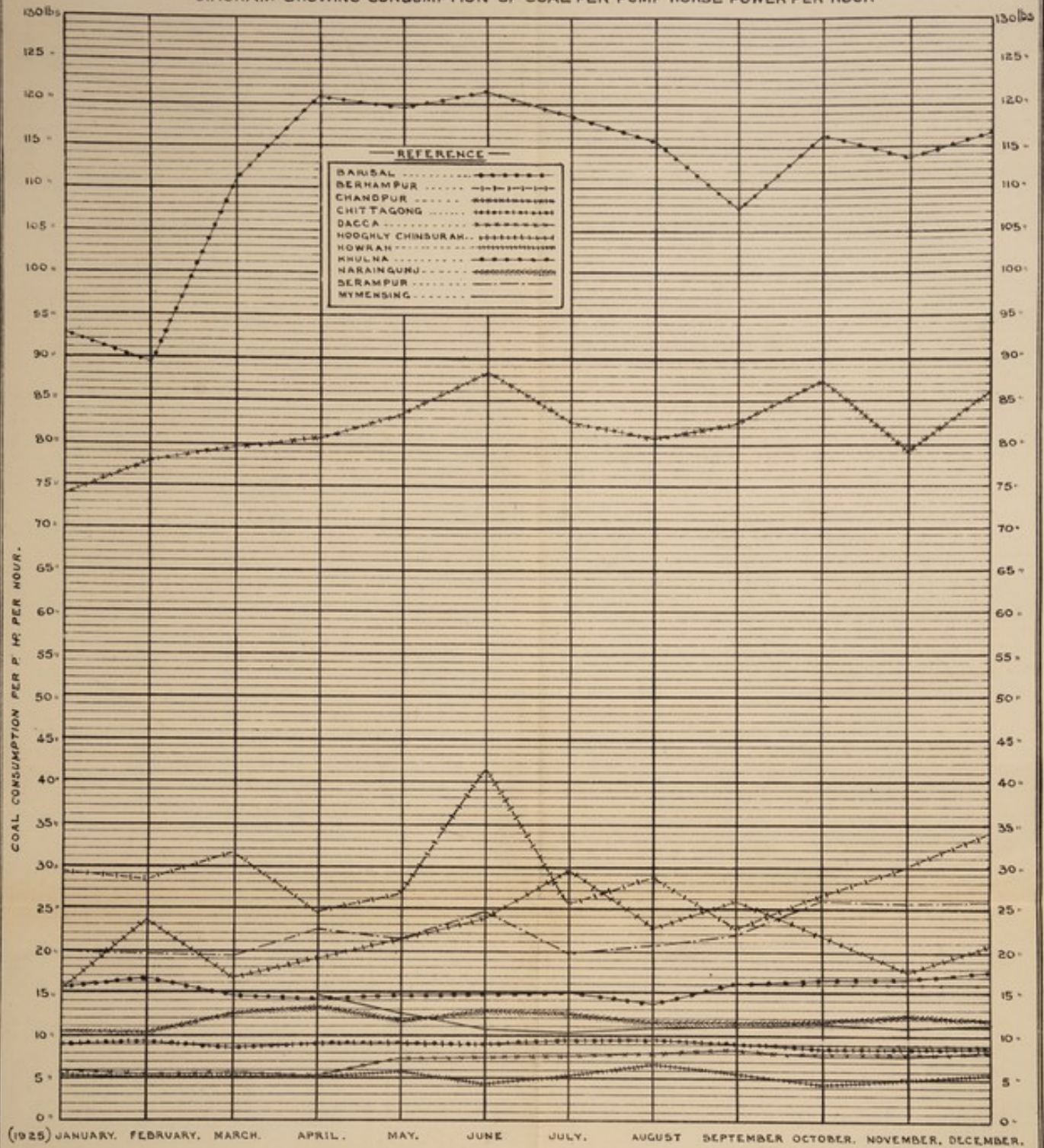
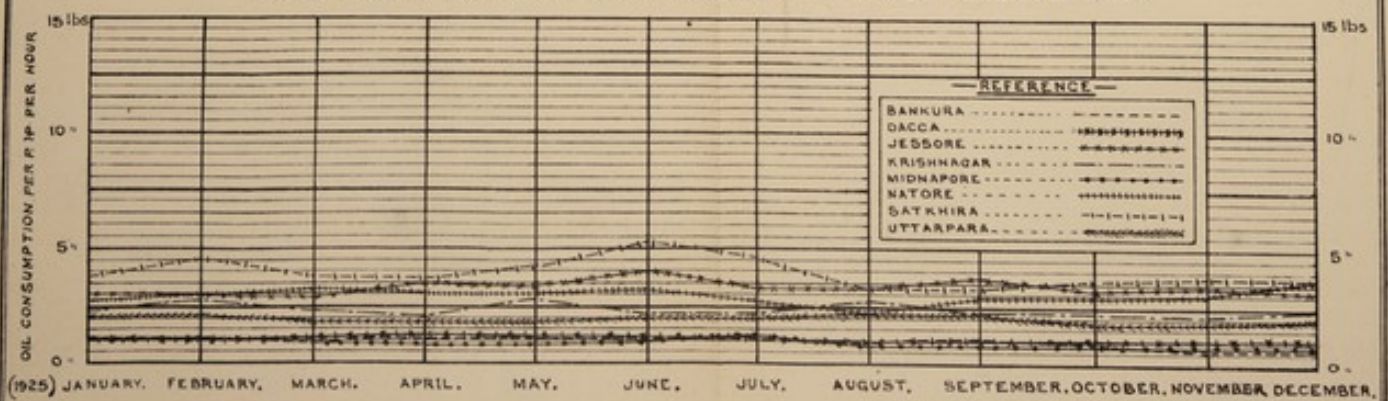
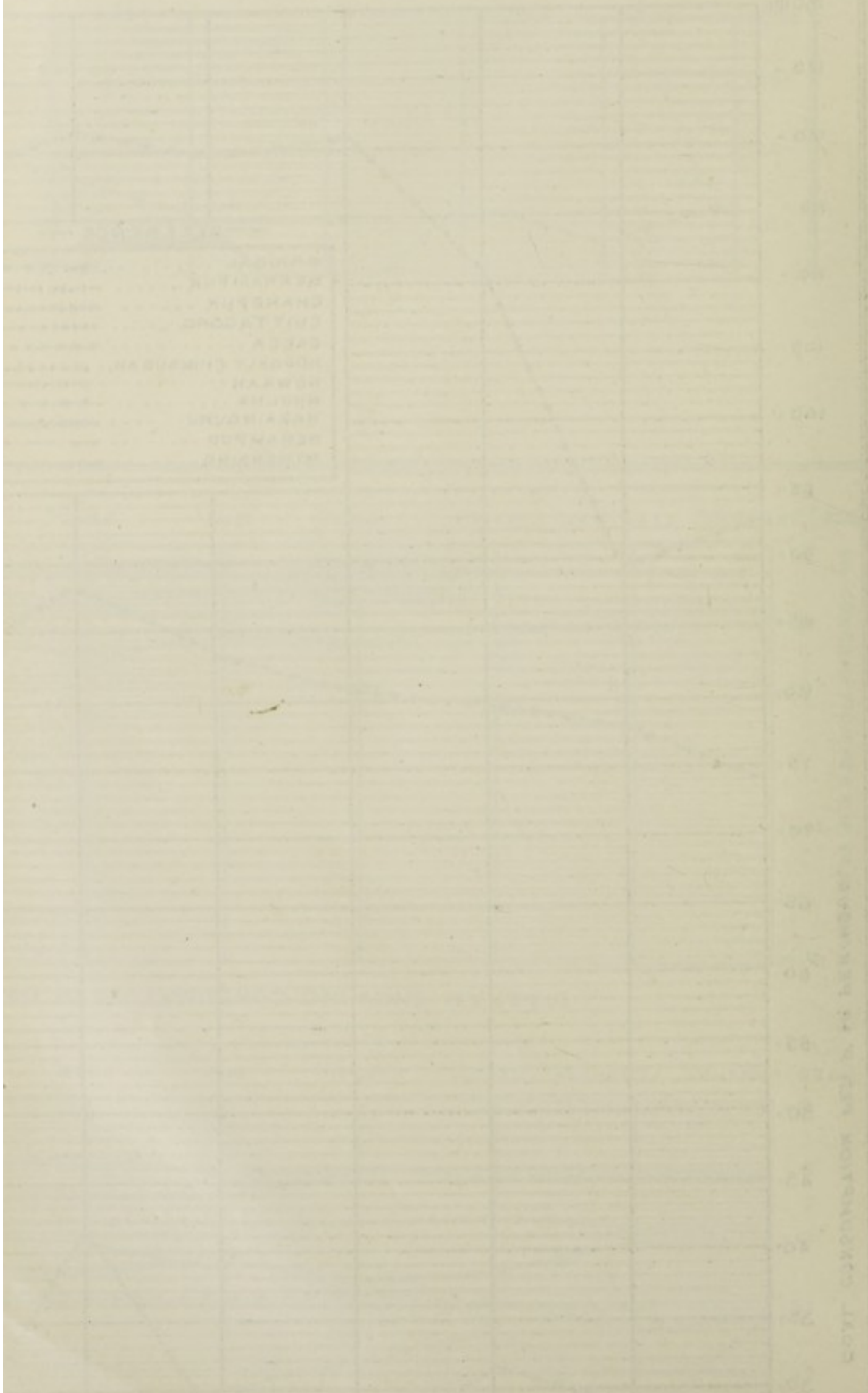


DIAGRAM SHOWING CONSUMPTION OF OIL PER PUMP HORSE POWER PER HOUR



WATER WORKS CONSTRUCTION
DIAGRAM SHOWING CONSTRUCTION OF



1917

Part IV

Appendices

Part IV
Appendices

and the following are the results of the census of 1925.

District	Population in 1925			Population in 1911			Increase or Decrease
	Total	Male	Female	Total	Male	Female	
Bahar	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Burdwan	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Chittagong	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Dacca	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Dhaka	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Faridkot	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Ferozepur	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Gurgaon	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Hoshiarpur	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Jalandhar	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Karnal	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Kashmir	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Khanna	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Ludhiana	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Maharaja	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Muzaffargarh	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Narwal	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Rawalpindi	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Sialkot	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Tarn Taran	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Thanesar	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Wazirpur	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Yamuna	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400
Total	1,17,737	57,457	60,280	1,12,337	55,237	57,100	5,400

Appendix No. I

Vital Statistics of the Districts of Bengal, 1925

Annual Form No. I.—BIRTHS registered in the

1	2	3			4		
Number.	Districts.	Population according to Census of 1921.			Number of births registered (exclusive of still-births.)		
		Male.	Female.	Total.	Male.	Female.	Total.
	<i>Burdwan Division.</i>						
1	Burdwan ..	732,369	706,557	1,438,926	24,544	22,824	47,368
2	Birbhum ..	422,986	424,584	847,570	18,866	18,144	37,010
3	Bankura ..	509,334	510,607	1,019,941	19,729	18,539	38,268
4	Midnapur ..	1,339,652	1,327,008	2,666,660	40,594	38,679	79,273
5	Hooghly ..	561,268	518,874	1,080,142	15,219	13,612	28,831
6	Howrah ..	535,151	462,252	997,403	14,525	12,981	27,506
	<i>Presidency Division.</i>						
7	24-Parganas ..	1,324,060	1,134,732	2,458,792	32,050	28,439	60,489
8	Calcutta ..	724,248	353,016	1,077,264	10,631	9,715	20,346
9	Nadia ..	761,345	726,227	1,487,572	31,086	28,826	59,912
10	Murshidabad ..	628,742	633,772	1,262,514	30,825	28,987	59,812
11	Jessore ..	893,592	828,627	1,722,219	23,696	21,755	45,451
12	Khulna ..	757,524	695,510	1,453,034	22,231	20,568	42,799
	<i>Rajshahi Division.</i>						
13	Rajshahi ..	767,370	722,305	1,489,675	27,212	25,605	52,817
14	Dinaipur ..	896,400	808,953	1,705,353	33,778	31,556	65,334
15	Jalpaiguri ..	503,397	432,872	936,269	14,568	13,880	28,448
16	Darjeeling ..	149,094	133,654	282,748	4,861	4,678	9,539
17	Rangpur ..	1,316,840	1,191,014	2,507,854	37,989	35,293	73,282
18	Bogra ..	538,727	509,879	1,048,606	15,252	14,173	29,425
19	Pabna ..	706,702	682,792	1,389,494	20,481	18,293	38,774
20	Malda ..	492,822	492,843	985,665	20,644	19,283	39,927
	<i>Dacca Division.</i>						
21	Dacca ..	1,572,220	1,553,747	3,125,967	43,373	39,260	82,633
22	Mymensingh ..	2,510,450	2,327,280	4,837,730	64,494	58,950	123,444
23	Faridpur ..	1,147,742	1,102,116	2,249,858	33,310	30,003	63,313
24	Bakarganj ..	1,343,163	1,280,593	2,623,756	37,068	33,496	70,564
	<i>Chittagong Division.</i>						
25	Chittagong ..	777,882	833,540	1,611,422	26,053	23,073	49,126
26	Noakhali ..	738,722	734,064	1,472,786	23,603	21,431	45,034
27	Tippera ..	1,406,134	1,336,939	2,743,073	30,648	27,724	58,372
	Total for the Bengal Presidency ..	24,057,936	22,464,357	46,522,293	717,330	659,767	1,377,097

districts of the Bengal Presidency during the year 1925.

5			6	7	8	9		
Ratio of births per 1,000 of population.			Number of males born to every 100 females born.	Excess of births over deaths per 1,000 of population.	Excess of deaths over births per 1,000 of population.	Mean ratio of births per 1,000 during previous five years.		
Male.	Female.	Total.				Male.	Female.	Total.
17.1	15.9	32.9	107	8.4	..	14.8	13.7	28.5
22.3	21.4	43.7	103	18.8	..	17.8	16.9	34.7
19.3	18.2	37.5	106	13.8	..	17.2	16.3	33.5
15.2	14.5	29.7	104	7.2	..	14.3	13.6	27.9
14.1	12.6	26.7	111	1.0	..	13.9	12.7	26.6
14.6	13.0	27.6	111	3.1	..	14.4	13.1	27.5
13.0	11.6	24.6	112	2.3	..	12.4	11.0	23.4
9.9	9.0	18.9	109	..	13.8	8.8	7.6	16.3
20.9	19.4	40.3	107	5.7	..	18.1	17.0	35.1
24.4	23.0	47.4	106	16.5	..	20.5	19.3	39.8
13.7	12.6	26.4	108	..	2.8	14.1	13.1	27.2
15.3	14.1	29.4	108	5.6	..	14.8	13.6	28.4
18.3	17.2	35.4	106	..	2.0	17.5	16.6	34.1
19.8	18.5	38.3	107	5.0	..	17.8	16.8	34.6
15.5	14.8	30.4	104	3.3	..	16.6	15.7	32.3
17.2	16.5	33.7	103	1.2	..	15.9	15.3	31.2
15.1	14.1	29.2	107	..	0.6	15.9	15.0	30.9
14.5	13.5	28.1	107	4.4	..	12.6	11.6	24.2
14.7	13.2	27.9	111	3.5	..	14.1	12.8	26.9
20.9	19.6	40.5	107	11.5	..	17.0	15.8	32.8
13.9	12.6	26.4	110	5.8	..	14.4	13.5	27.8
13.3	12.2	25.5	109	5.7	..	14.0	12.9	26.9
14.8	13.3	28.1	111	4.4	..	14.4	13.2	27.6
14.1	12.8	26.9	110	3.7	..	17.0	14.3	31.3
16.2	14.3	30.5	112	8.8	..	16.1	14.5	30.6
16.0	14.5	30.6	110	7.2	..	16.5	14.9	31.4
11.2	10.1	21.3	110	4.9	..	11.6	10.7	22.2
15.4	14.2	29.6	108	4.7	..	14.9	13.9	28.8

ANNUAL FORM No. II—BIRTHS and DEATHS registered

1	2	3	4	5			6				
Number.	Districts.	Area in square miles.	Average population per square mile.	Population (Census 1921).			Births.				Male.
				Male.	Female.	Total.	Male.	Female.	Total.	Birth-rate per 1,000 of population.	
	<i>Burdwan Division.</i>										
1	Burdwan ..	2,703	532	732,369	706,557	1,438,926	24,544	22,824	47,368	32·9	18,311
2	Birbhum ..	1,753	483	422,986	424,584	847,570	18,866	18,144	37,010	43·7	10,949
3	Bankura ..	2,025	388	509,334	510,607	1,019,941	19,729	18,539	38,268	37·5	12,626
4	Midnapur ..	5,055	528	1,339,652	1,327,008	2,666,660	40,594	38,679	79,273	29·7	30,730
5	Hooghly ..	1,188	909	561,268	518,874	1,080,142	15,219	13,612	28,831	26·7	14,502
6	Howrah ..	530	1,882	535,151	462,252	997,403	14,525	12,981	27,506	27·6	13,047
	<i>Presidency Division.</i>										
7	24-Parganas ..	4,845	507	1,324,060	1,134,732	2,458,792	32,050	28,439	60,489	24·6	29,906
8	Calcutta ..	30	35,174	724,248	353,016	1,077,264	10,631	9,715	20,346	18·9	19,641
9	Nadia ..	2,778	535	761,345	726,227	1,487,572	31,086	28,826	59,912	40·3	26,294
10	Murshidabad ..	2,121	595	628,742	633,772	1,262,514	30,825	28,987	59,812	47·4	19,853
11	Jessore ..	2,904	583	893,592	828,627	1,722,219	23,696	21,755	45,451	26·4	26,686
12	Khulna ..	4,730	307	757,524	695,510	1,453,034	22,231	20,568	42,799	29·4	18,315
	<i>Rajshahi Division.</i>										
13	Rajshahi ..	2,620	569	767,370	722,305	1,489,675	27,212	25,605	52,817	35·4	29,686
14	Dinajpur ..	3,946	432	896,400	808,953	1,705,353	33,778	31,556	65,334	38·3	30,149
15	Jalpaiguri ..	2,931	319	503,397	432,872	936,269	14,568	13,880	28,448	30·4	13,727
16	Darjeeling ..	1,164	243	149,094	133,654	282,748	4,861	4,678	9,539	33·7	4,947
17	Rangpur ..	3,496	717	1,316,840	1,191,014	2,507,854	37,989	35,293	73,282	29·2	40,466
18	Bogra ..	1,379	760	538,727	509,879	1,048,606	15,252	14,173	29,425	28·1	13,379
19	Pabna ..	1,678	828	706,702	682,792	1,389,494	20,481	18,293	38,774	27·9	18,413
20	Malda ..	1,833	538	492,822	492,843	985,665	20,644	19,283	39,927	40·5	14,779
	<i>Dacca Division.</i>										
21	Dacca ..	2,723	1,148	1,572,220	1,553,747	3,125,967	43,373	39,260	82,633	26·4	34,398
22	Mymensingh ..	6,238	77	2,510,450	2,327,280	4,837,730	64,494	58,950	123,444	25·5	52,386
23	Faridpur ..	2,371	949	1,147,742	1,102,116	2,249,858	33,310	30,003	63,313	28·1	28,506
24	Bakarganj ..	3,490	752	1,343,163	1,280,593	2,623,756	37,068	33,496	70,564	26·9	32,886
	<i>Chittagong Division.</i>										
25	Chittagong ..	2,497	645	777,882	833,540	1,611,422	26,053	23,073	49,126	30·5	18,049
26	Noakhali ..	1,515	972	738,722	734,064	1,472,786	23,603	21,431	45,034	30·6	17,867
27	Tippera ..	2,560	1,072	1,406,134	1,336,939	2,743,073	30,648	27,724	58,372	21·3	24,238
	<i>Total for the Bengal Presidency</i> ..	71,703	648	24,057,936	22,464,357	46,522,293	717,330	659,767	1,377,097	29·6	614,736

in the districts of the Bengal Presidency during the year 1925.

7		8	9										10			11	
Deaths.		Number of male deaths to every 100 female deaths.	Deaths per 1,000 of population from—										Mean ratio of deaths per 1,000 during previous five years.			Number.	
Female.	Total.		Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	Injury.	All other causes.	All causes.			Male.	Female.		Total.
											Male.	Female.	Total.				
16,965	35,276	107	·3	1·0	..	17·3	·4	·6	·3	4·5	25·0	24·0	24·5	31·6	30·0	30·8	
10,127	21,076	108	·1	·2	..	18·8	·1	·1	·4	5·1	25·9	23·8	24·9	35·3	32·2	33·7	2
11,575	24,201	109	·3	·5	..	14·8	·7	·8	·3	6·2	24·8	22·7	23·7	32·4	29·6	31·0	3
29,314	60,044	104	·6	·5	..	16·1	·4	·5	·5	4·0	22·9	22·1	22·5	27·6	26·6	23·4	4
13,302	27,804	109	·5	1·0	..	17·5	1·2	1·0	·5	3·9	25·8	25·6	25·7	29·4	29·0	29·2	5
11,387	24,434	114	1·0	1·8	..	10·5	2·7	3·3	·6	4·5	24·4	24·6	24·5	26·8	27·3	27·0	6
25,054	54,960	119	·8	·9	..	15·3	·5	1·0	·6	3·2	22·6	22·1	22·3	25·5	25·3	25·4	7
15,554	35,195	126	·9	3·6	·01	5·1	2·9	9·2	·7	10·3	27·1	44·0	32·7	23·7	36·2	27·8	8
25,124	51,418	104	1·3	·2	..	26·6	·3	·4	·6	5·1	34·5	34·6	34·6	35·3	33·6	34·3	9
19,223	39,076	103	·4	·3	..	23·7	·1	·1	·5	5·7	31·6	30·3	30·9	34·5	30·6	32·5	10
23,657	50,343	112	·9	·1	..	24·9	·1	·1	·5	2·5	29·9	28·5	29·2	30·6	29·3	30·0	11
16,304	34,619	112	·4	·1	..	17·0	·1	·2	·6	5·4	24·2	23·4	23·8	26·8	25·3	26·1	12
25,981	55,667	114	1·1	·03	..	32·0	·1	·1	·5	3·5	38·7	36·0	37·4	37·9	36·9	37·4	13
26,661	56,810	113	·1	·2	..	30·7	·1	·1	·3	1·8	33·6	32·9	33·3	34·4	33·5	34·0	14
11,631	25,358	118	·1	·01	..	23·5	·8	·9	·1	1·4	27·3	26·9	27·1	29·0	29·7	29·3	15
4,237	9,184	116	·1	·1	..	22·9	2·3	1·6	·4	5·0	33·2	31·7	32·5	38·3	38·1	38·2	16
34,289	74,755	118	1·1	·1	..	27·6	·1	·1	·3	·5	30·7	28·8	29·8	28·7	27·8	28·3	17
11,501	24,880	116	·3	·3	..	20·3	·1	·4	·5	1·7	24·8	22·5	23·7	30·1	28·7	29·5	18
15,517	33,930	118	·7	·2	..	21·3	·1	·1	·4	1·6	26·1	22·7	24·4	29·7	26·8	28·3	19
13,795	28,574	101	·1	·2	..	24·6	·1	·1	·3	3·5	30·0	28·0	29·0	28·4	24·1	26·2	20
29,893	64,291	115	1·0	·2	..	14·2	·8	·4	·3	3·6	21·9	19·2	20·6	25·7	23·6	24·5	21
45,767	98,153	114	·7	·1	..	15·8	·3	·2	·3	3·0	20·9	19·7	20·3	24·5	23·4	24·0	22
24,830	53,336	114	·8	·1	..	18·8	·3	·1	·4	3·2	24·8	22·5	23·7	27·7	25·8	26·8	23
27,903	60,789	117	·6	·04	..	16·0	·2	·1	·5	5·6	24·5	21·8	23·2	28·6	25·9	27·3	24
16,905	34,954	106	1·1	·2	..	18·3	·2	·2	·5	1·2	23·2	20·3	21·7	27·5	24·3	25·9	25
16,535	34,402	108	·9	·2	..	18·2	·1	·02	·6	3·2	24·2	22·5	23·4	26·5	24·4	25·5	26
20,706	44,944	117	1·2	·1	..	11·4	·5	·3	·2	2·6	17·2	15·5	16·4	19·4	17·5	18·5	27
543,737	1,158,473	113	·7	·4	·0002	18·8	·5	·6	·4	3·5	25·5	24·2	24·9	28·4	27·0	27·7	

Annual Form No. III—DEATHS registered in the districts of the Bengal Presidency during each month of the year 1925.

1	2	3												4
Number.	Districts.	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Total deaths registered during the year 1925.
<i>Burdwan Division.</i>														
1	Burdwan ..	2,934	2,321	3,660	3,038	2,448	2,544	2,154	2,501	2,192	3,082	4,029	4,373	35,276
2	Birbhum ..	1,408	1,367	2,001	1,683	1,433	1,682	1,455	1,786	1,439	1,856	2,251	2,715	21,076
3	Bankura ..	1,837	1,598	2,235	2,428	2,052	2,142	1,849	2,074	1,782	1,651	2,139	2,414	24,201
4	Midnapur ..	5,578	4,902	6,450	5,033	3,877	3,841	3,960	4,711	4,663	4,680	5,383	6,966	60,044
5	Hooghly ..	2,531	2,171	2,854	1,918	1,931	1,978	1,437	2,238	1,870	2,280	3,338	3,258	27,804
6	Howrah ..	1,868	1,674	2,211	2,235	1,903	1,676	1,536	1,824	1,799	2,121	2,532	3,055	24,434
<i>Presidency Division.</i>														
7	24 Parganas ..	6,074	5,018	5,127	3,938	3,908	3,125	3,214	4,368	3,656	4,714	5,627	6,191	54,960
8	Calcutta ..	3,211	3,332	4,487	3,409	2,706	2,098	2,191	2,484	2,457	2,634	2,998	3,188	35,195
9	Nadia ..	3,427	3,116	3,026	2,672	3,306	2,658	2,263	3,005	3,303	5,515	9,898	9,229	51,418
10	Murshidabad ..	1,946	1,931	2,537	2,425	2,068	2,382	2,067	3,052	3,058	5,058	6,131	5,821	39,076
11	Jessore ..	4,779	3,733	3,630	3,463	3,286	2,856	2,845	3,224	3,256	5,298	6,672	7,301	50,348
12	Khulna ..	3,378	2,756	2,672	2,172	1,989	2,124	2,189	2,770	2,731	2,966	4,508	4,364	34,619
<i>Rajshahi Division.</i>														
13	Rajshahi ..	4,061	3,513	4,190	3,348	3,049	4,360	3,695	4,118	4,291	6,161	7,590	7,381	55,667
14	Dinajpur ..	4,020	4,079	5,091	4,146	3,968	4,975	3,917	4,671	4,788	4,572	5,737	6,846	50,810
15	Jalpaiguri ..	1,908	1,467	2,073	1,639	2,357	2,722	2,178	1,798	1,871	2,497	2,460	2,388	25,358
16	Darjeeling ..	609	607	788	827	931	972	778	835	664	794	719	660	9,184
17	Rangpur ..	6,919	4,970	5,538	4,920	5,628	7,095	5,556	4,721	5,313	6,929	8,083	9,083	74,755
18	Bogra ..	2,407	1,926	1,661	2,465	1,963	1,623	1,860	1,923	1,243	2,756	2,615	2,438	24,880
19	Pabna ..	2,913	2,441	3,101	2,564	2,675	2,621	2,034	1,993	2,015	3,427	4,069	4,077	33,930
20	Malda ..	1,532	1,342	2,015	1,761	1,450	1,986	1,721	2,126	2,752	3,211	4,145	4,533	28,574
<i>Dacca Division.</i>														
21	Dacca ..	6,762	5,679	5,172	5,222	4,282	3,981	3,800	3,891	4,003	5,020	8,248	8,231	64,291
22	Mymensingh ..	10,195	7,882	7,680	7,415	7,279	7,914	6,699	6,166	6,828	8,050	10,266	11,779	98,153
23	Faridpur ..	5,291	3,710	4,779	3,804	3,433	3,359	3,192	3,461	3,687	4,889	6,494	7,237	53,336
24	Bakarganj ..	7,899	6,037	6,798	4,484	4,104	3,732	3,691	3,387	3,656	3,972	5,631	7,398	60,789
<i>Chittagong Division.</i>														
25	Chittagong ..	3,490	3,012	3,978	2,757	2,673	3,513	2,857	2,584	2,213	2,158	2,850	2,869	34,954
26	Noakhali ..	4,092	3,466	3,773	2,901	2,569	2,991	2,411	2,187	2,216	1,854	2,506	3,445	34,402
27	Tippera ..	5,802	4,551	4,398	3,905	3,765	3,005	2,649	2,910	2,717	3,540	3,960	3,742	44,914
Total for the Bengal Presidency.		106,871	88,601	101,925	86,572	81,024	83,955	74,198	80,808	80,973	101,685	130,879	140,982	1,158,473
Ratio of deaths per 1,000 of population.		2.3	1.9	2.2	1.9	1.7	1.8	1.6	1.7	1.7	2.2	2.8	3.0	24.2

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Annual Form No. IV.—Deaths registered according to AGE

1	2	3												4	
Number,	Districts.	Under 1 year.												1 year and under 5 years.	
		Under one month.			Between 1 and 6 months.			Between 6 and 12 months.			Total				
		Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.		
		Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.
Burdwan Division.															
1	Burdwan ..	3,556	3,009	6,565	925	804	1,729	534	504	1,038	5,015	4,317	9,332	1,636	1,701
2	Birbhum ..	2,651	2,216	4,867	591	536	1,127	408	335	743	3,650	3,087	6,737	1,257	1,240
3	Bankura ..	2,714	2,152	4,866	658	570	1,228	289	272	561	3,661	2,994	6,655	1,070	1,142
4	Midnapur ..	3,779	3,469	7,248	1,378	1,390	2,768	1,339	1,310	2,649	6,496	6,169	12,665	2,643	2,689
5	Hooghly ..	1,861	1,461	3,322	588	466	1,054	456	444	900	2,905	2,371	5,276	1,307	1,322
6	Howrah ..	1,718	1,277	2,995	702	642	1,344	690	597	1,197	3,020	2,516	5,536	1,492	1,490
Presidency Division.															
7	24 Parganas ..	2,886	2,323	5,209	1,248	1,144	2,392	804	770	1,574	4,938	4,237	9,175	3,325	3,274
8	Calcutta ..	1,773	1,486	3,259	973	808	1,871	812	695	1,507	3,558	3,079	6,637	1,875	2,142
9	Nadia ..	4,355	3,678	8,033	1,359	1,447	2,806	1,010	1,211	2,221	6,724	6,336	13,060	4,034	4,271
10	Murshidabad ..	3,417	2,873	6,290	1,256	1,235	2,491	820	814	1,634	5,493	4,922	10,415	3,943	4,134
11	Jessore ..	1,802	1,648	3,450	1,170	1,175	2,345	965	1,092	2,057	3,937	3,915	7,852	3,683	3,671
12	Khulna ..	2,401	2,092	4,493	988	980	1,968	842	787	1,629	4,231	3,859	8,090	1,852	1,815
Rajshahi Division.															
13	Rajshahi ..	2,904	2,420	5,324	1,706	1,673	3,469	1,841	1,712	3,553	6,541	5,805	12,346	3,912	3,857
14	Dinajpur ..	4,248	3,671	7,919	2,408	2,129	4,537	1,056	1,063	2,119	7,712	6,863	14,575	4,127	3,874
15	Jalpaiguri ..	1,080	900	1,980	1,222	1,115	2,337	644	532	1,176	2,946	2,547	5,493	1,434	1,273
16	Darjeeling ..	235	193	428	223	204	427	367	339	706	825	736	1,561	553	459
17	Rangpur ..	3,973	3,221	7,194	2,332	2,161	4,693	2,116	1,921	4,037	8,621	7,393	15,924	4,438	4,246
18	Bogra ..	1,445	1,168	2,613	768	648	1,416	558	497	1,055	2,771	2,313	5,084	1,438	1,423
19	Pabna ..	1,696	1,374	3,070	801	803	1,604	820	798	1,618	3,317	2,975	6,292	2,552	2,508
20	Malda ..	1,652	1,461	3,113	779	761	1,540	675	837	1,512	3,166	3,059	6,165	2,735	2,830
Dacca Division.															
21	Dacca ..	3,789	3,124	6,913	1,880	1,683	3,563	1,259	1,181	2,440	6,928	5,968	12,916	5,504	4,979
22	Mymensingh ..	6,700	5,612	12,312	2,430	2,106	4,536	2,505	2,171	4,676	11,635	9,889	21,524	6,465	6,057
23	Faridpur ..	1,837	1,572	3,409	1,576	1,428	3,004	2,533	2,231	4,764	5,946	5,231	11,177	4,502	4,041
24	Bakarganj ..	4,464	3,500	7,964	2,078	1,658	3,736	1,440	1,264	2,704	7,982	6,422	14,404	4,777	4,221
Chittagong Division.															
25	Chittagong ..	1,087	889	1,976	867	750	1,617	1,456	1,320	2,776	3,410	2,959	6,369	2,605	2,517
26	Noakhali ..	1,718	1,388	3,106	846	808	1,654	850	819	1,669	3,414	3,015	6,429	3,313	3,278
27	Tippera ..	2,899	2,149	5,048	980	815	1,795	552	498	1,050	4,431	3,462	7,893	3,081	2,914
Total for the Bengal Presidency.		72,640	60,326	132,966	33,022	30,029	63,051	27,551	26,014	53,565	133,213	116,369	249,582	79,553	77,368
Population (Census of 1921).		..	..	..	..	..	..	..	..	..	681,205	688,771	1,370,066	2,223,523	2,382,988
Ratio per 1,000 of population.		..	..	..	..	..	..	..	..	..	185.7*	176.4*	181.2*	35.8	32.5

* Ratio per one thousand of births.

in the districts of the Bengal Presidency during the year 1925.

5		6		7		8		9		10		11		12	
5 years and under 10 years.		10 years and under 15 years.		15 years and under 20 years.		20 years and under 30 years.		30 years and under 40 years.		40 years and under 50 years.		50 years and under 60 years.		60 years and upwards.	
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
946	915	687	596	755	1,051	1,742	2,027	1,991	1,649	1,731	1,261	1,542	1,282	2,266	2,166
652	650	374	348	410	598	876	1,022	896	804	811	604	780	628	1,234	1,146
652	565	468	406	538	640	1,197	1,315	1,279	1,017	1,159	802	1,090	955	1,521	1,739
1,774	1,641	1,373	1,058	1,555	1,815	3,241	3,769	3,496	3,207	3,135	2,358	2,778	2,452	4,239	4,156
890	909	724	566	708	929	1,503	1,631	1,603	1,363	1,410	1,032	1,222	1,043	2,230	2,136
879	849	708	554	770	689	1,408	1,244	1,260	953	1,066	709	892	719	1,552	1,664
2,503	2,149	1,746	1,100	1,624	1,847	3,573	3,506	3,311	2,392	2,680	1,748	2,139	1,441	4,067	3,360
850	852	650	551	781	867	2,836	1,926	2,593	1,451	2,200	1,042	1,500	770	2,798	2,874
2,422	2,120	1,264	886	1,621	1,365	2,126	2,638	2,350	1,922	2,013	1,507	1,757	1,473	2,583	2,597
1,751	1,602	912	710	686	827	1,377	1,689	1,547	1,215	1,248	926	1,076	1,030	1,820	2,168
2,540	2,125	1,505	1,120	1,546	1,708	2,988	3,187	3,036	2,426	2,515	1,757	2,075	1,561	2,861	2,187
1,424	1,182	923	684	960	1,384	1,915	2,100	1,691	1,412	1,452	961	1,332	929	2,535	1,678
2,805	2,050	1,714	1,160	1,727	1,986	3,427	3,844	3,388	2,643	2,403	1,633	1,608	1,303	2,161	1,700
2,551	1,988	1,330	978	1,370	1,618	2,962	3,858	3,107	2,668	2,571	1,829	1,876	1,364	2,543	1,621
797	594	666	511	703	910	1,583	2,046	1,782	1,500	1,341	844	1,053	636	1,422	770
406	324	278	236	301	287	606	581	591	551	504	342	346	270	537	451
3,237	2,518	1,905	1,443	2,090	2,667	4,782	5,636	5,056	3,783	3,766	2,489	2,758	1,914	3,813	2,290
1,356	1,128	845	511	690	923	1,491	1,852	1,548	1,197	1,171	773	864	656	1,205	725
2,072	1,499	1,292	771	1,017	1,101	1,877	2,087	1,957	1,363	1,535	960	1,084	808	1,710	1,445
1,696	1,309	912	596	649	675	1,293	1,375	1,327	1,083	1,039	809	707	678	1,315	1,381
3,083	2,375	1,763	1,192	1,719	2,087	3,270	3,731	3,002	2,493	2,566	1,744	2,119	1,556	4,444	3,748
4,573	3,733	2,993	2,035	2,709	3,614	5,181	6,600	5,107	4,149	4,105	2,745	3,596	2,644	6,022	4,301
2,724	2,115	1,639	1,099	1,573	1,899	2,622	3,197	2,569	2,018	2,171	1,514	1,804	1,397	2,956	2,319
3,123	2,906	1,745	1,156	1,667	2,133	3,128	3,887	2,537	2,153	2,128	1,465	2,050	1,457	3,740	2,703
1,458	1,391	883	607	913	1,091	1,843	2,641	1,746	1,475	1,533	1,109	1,509	1,099	2,149	2,016
1,908	1,735	1,221	833	1,016	1,259	1,706	2,152	1,352	1,279	1,148	860	1,017	746	1,772	1,378
1,932	1,622	1,253	803	1,177	1,477	2,747	3,436	2,381	1,972	2,035	1,325	1,774	1,188	3,427	2,507
51,004	42,255	31,773	22,510	30,675	37,447	63,300	73,277	62,503	50,138	51,427	35,148	42,357	31,999	68,031	57,226
3,714,610	3,603,543	3,005,655	2,316,573	2,156,731	2,327,598	4,182,759	4,354,228	3,571,497	2,882,285	2,311,237	1,825,377	1,240,878	1,114,873	969,771	968,171
13.7	11.7	10.6	9.7	14.2	16.1	15.1	16.8	17.5	17.4	22.2	19.2	34.1	28.7	71.1	59.1

Annual Form No. V.—Deaths registered according to CLASS in the

1	2	3											
		Population according											
		Christians.			Hindus.			Muhammadans.			Buddhists.		
Number.	Districts.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
	<i>Burdwan Division.</i>												
1	Burdwan ..	2,292	1,894	4,186	569,896	552,335	1,122,231	136,518	129,763	266,281	24	..	24
2	Birbhum ..	239	229	468	287,578	289,172	576,750	105,881	106,579	212,460	..	..	..
3	Bankura ..	748	673	1,421	439,368	441,071	880,439	24,064	22,537	46,601	..	..	..
4	Midnapur ..	3,172	2,666	5,838	1,183,637	1,168,233	2,351,870	89,698	90,974	180,672	17	18	35
5	Hooghly ..	579	287	866	460,159	424,650	884,809	89,890	83,743	173,633	41	1	42
6	Howrah ..	1,888	1,310	3,198	426,546	364,195	790,741	105,976	96,499	202,475	59	2	61
	<i>Presidency Division.</i>												
7	24-Parganas ..	9,537	7,679	17,216	855,950	724,864	1,580,814	451,896	397,107	849,003	89	11	100
8	Calcutta ..	22,306	18,070	40,376	498,899	250,933	749,832	191,116	78,733	269,849	2,792	676	3,468
9	Nadia ..	4,438	4,095	8,533	296,023	285,740	581,763	459,827	435,363	895,190	5	5	10
10	Murshidabad ..	254	271	525	284,585	284,205	568,790	335,289	340,968	676,257	10	1	11
11	Jessore ..	1,140	1,111	2,251	335,486	320,857	656,343	556,917	506,638	1,063,555	34	16	50
12	Khulna ..	1,203	1,014	2,217	378,514	348,347	726,861	377,237	345,650	722,887	28	1	29
	<i>Rajshahi Division.</i>												
13	Rajshahi ..	506	494	1,000	166,885	151,500	318,385	584,523	555,733	1,140,256	11	1	12
14	Dinajpur ..	2,612	2,397	5,009	401,213	350,648	751,861	435,901	400,902	836,803	2	..	2
15	Jalpaiguri ..	4,476	4,250	8,726	280,367	234,735	515,102	125,091	106,592	231,683	3,281	2,817	6,098
16	Darjeeling ..	4,121	3,977	8,098	106,716	94,609	201,316	5,139	3,377	8,516	26,456	25,513	51,969
17	Rangpur ..	580	534	1,114	425,463	365,680	791,143	885,136	821,041	1,706,177	18	..	18
18	Bogra ..	222	179	401	93,909	80,557	174,466	439,994	425,004	864,998	1	..	1
19	Pabna ..	215	240	455	168,347	165,985	334,332	537,435	516,136	1,053,571	4	..	4
20	Malda ..	292	256	548	202,051	198,469	400,520	251,652	256,033	507,685	..	..	..
	<i>Dacca Division.</i>												
21	Dacca ..	6,269	7,108	13,377	531,908	537,034	1,068,942	1,033,824	1,009,422	2,043,246	31	1	32
22	Mymensingh ..	2,142	1,981	4,123	620,057	553,958	1,174,015	1,869,890	1,753,829	3,623,719	4	..	4
23	Faridpur ..	3,287	3,012	6,299	409,206	406,428	815,634	735,200	692,639	1,427,839	3	..	3
24	Bakarganj ..	3,754	3,820	7,574	385,789	368,671	754,460	948,132	903,107	1,851,239	5,425	4,938	10,363
	<i>Chittagong Division.</i>												
25	Chittagong ..	701	660	1,361	180,162	183,733	363,895	563,162	610,043	1,173,205	33,527	38,875	72,402
26	Noakhali ..	400	383	783	168,528	160,609	329,137	569,576	572,892	1,142,468	218	180	398
27	Tippera ..	261	196	457	361,550	345,987	707,537	1,043,397	989,845	2,033,242	855	851	1,706
	Total for the Bengal Presidency.	77,634	68,786	146,420	10,518,792	9,653,196	20,171,988	12,952,361	12,251,149	25,203,510	72,935	73,907	146,842

districts of the Bengal Presidency during the year 1925.

						4											Number.	
to Census of 1921.						Number of deaths registered among—												
Other Classes.			Total.			Christians.			Hindus.			Muhammadans.						
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.				
23,639	22,565	46,204	732,369	706,557	1,438,926	10	9	19	13,959	13,119	27,078	3,524	3,162	6,686				
29,288	28,604	57,892	422,986	424,584	847,570	..	3	3	7,676	7,137	14,813	2,412	2,222	4,634				
45,154	46,326	91,480	509,334	510,607	1,019,941	13	9	22	10,918	10,975	20,993	584	516	1,100				
63,128	65,117	128,245	1,339,652	1,327,008	2,666,660	16	28	44	26,846	25,801	52,647	2,014	1,882	3,896				
10,599	10,193	20,792	561,268	518,874	1,080,142	5	3	8	11,721	10,808	22,529	2,427	2,224	4,651				
682	246	928	535,151	462,252	997,403	2	..	2	9,938	8,685	18,623	3,097	2,696	5,793				
6,588	5,071	11,659	1,324,060	1,134,732	2,458,792	111	117	228	17,895	15,983	32,978	11,861	9,821	21,682				
9,135	4,604	13,739	724,248	353,016	1,077,264	528	478	1,006	13,705	10,390	24,095	5,373	4,653	10,026				
1,052	1,024	2,076	761,345	726,227	1,487,572	101	101	202	9,470	9,141	18,611	16,686	15,840	32,526				
8,604	8,327	16,931	628,742	633,772	1,262,514	3	1	4	8,330	8,119	16,449	11,289	10,899	22,188				
15	5	20	893,592	828,627	1,722,219	22	21	43	9,841	8,998	18,839	16,823	14,638	31,461				
542	498	1,040	757,524	695,510	1,453,034	15	10	25	8,501	7,765	16,266	9,789	8,514	18,303				
15,445	14,577	30,022	767,370	722,305	1,489,675	8	3	11	4,791	4,392	9,183	24,255	21,103	45,358				
56,672	55,006	111,678	896,400	808,953	1,705,353	42	48	90	13,194	11,365	24,559	14,241	13,093	27,334				
90,182	84,478	174,660	503,397	432,872	936,269	45	58	103	6,587	5,452	12,039	3,701	3,294	6,995				
6,662	6,187	12,849	149,094	133,654	282,748	53	33	86	3,747	3,196	6,943	174	132	306				
5,643	3,759	9,402	1,316,840	1,191,014	2,507,854	3	4	7	13,212	11,019	24,231	27,024	23,108	50,132				
4,601	4,139	8,740	538,727	509,879	1,048,606	7	10	17	1,974	1,714	3,688	11,025	9,479	20,504				
701	431	1,132	706,702	682,792	1,389,494	..	1	1	4,290	3,889	8,179	14,117	11,619	25,736				
38,827	38,085	76,912	492,822	492,843	985,665	..	3	3	5,946	5,577	11,523	7,591	7,942	14,633				
188	182	370	1,572,220	1,553,747	3,125,967	197	171	368	12,107	11,066	23,173	22,094	18,656	40,750				
18,357	17,512	35,869	2,510,450	2,327,280	4,837,730	12	7	19	13,676	12,544	26,220	37,732	32,463	70,195				
46	37	83	1,147,742	1,102,116	2,249,858	41	37	78	9,818	8,707	18,525	18,647	16,086	34,733				
63	57	120	1,343,163	1,280,593	2,623,756	43	37	80	8,212	7,284	15,496	24,615	20,571	45,186				
330	229	559	777,882	833,540	1,611,422	14	10	24	4,001	3,843	7,844	13,354	12,430	25,784				
..	..	..	738,722	734,064	1,472,786	9	2	11	3,494	3,305	6,799	14,364	13,228	27,592				
71	60	131	1,406,134	1,336,939	2,743,073	3	2	5	6,697	6,233	12,930	17,525	14,438	31,963				
436,214	417,319	853,533	24,057,936	22,464,357	46,522,293	1,303	1,206	2,509	260,546	234,707	495,253	336,338	293,829	630,167				

Annual Form No. V.—Deaths registered according to CLASS in the

Number.	Districts.	4									Ratio of deaths		
		Number of deaths registered among—									Christians.		
		Buddhists.			Other Classes.			Total.					
		Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
<i>Burdwan Division.</i>													
1	Burdwan ..	..	..	..	818	675	1,493	18,311	16,965	35,276	4.4	4.7	4.6
2	Birbhum ..	..	..	..	861	765	1,626	10,949	10,127	21,076	..	13.1	6.4
3	Bankura ..	..	..	..	1,111	975	2,086	12,626	11,575	24,201	17.4	13.4	15.5
4	Midnapur ..	..	..	..	1,854	1,603	3,457	30,730	29,314	60,044	5.0	10.5	7.5
5	Hooghly ..	..	..	..	349	267	616	14,502	13,302	27,804	8.6	10.4	9.2
6	Howrah ..	2	..	2	8	6	14	13,047	11,387	24,434	1.0	..	.6
<i>Presidency Division.</i>													
7	24-Parganas ..	2	..	2	37	33	70	29,906	25,054	54,960	10.8	14.1	12.3
8	Calcutta ..	16	10	26	19	23	42	19,641	15,554	35,195	23.7	26.4	24.9
9	Nadia ..	..	..	..	37	42	79	26,294	25,124	51,418	22.7	24.7	23.7
10	Murshidabad ..	..	..	..	231	204	435	19,853	19,223	39,076	11.8	3.7	7.6
11	Jessore ..	..	..	..	..	..	..	26,686	23,657	50,343	19.3	18.9	19.1
12	Khulna ..	..	..	..	10	15	25	18,315	16,394	34,619	12.5	9.9	11.3
<i>Rajshahi Division.</i>													
13	Rajshahi ..	1	..	1	631	483	1,114	29,686	25,981	55,667	15.8	6.1	11.0
14	Dinajpur ..	..	..	..	2,672	2,155	4,827	30,149	26,661	56,810	16.1	20.0	18.0
15	Jaipalguri ..	25	10	35	3,369	2,817	6,186	13,727	11,631	25,358	10.0	13.6	11.8
16	Darjeeling ..	719	671	1,390	254	205	459	4,947	4,237	9,184	12.9	8.3	10.6
17	Rangpur ..	1	..	1	226	158	384	40,466	34,289	74,755	5.2	7.5	6.3
18	Bogra ..	..	..	..	373	298	671	13,379	11,501	24,880	31.5	55.9	42.4
19	Palna ..	..	..	..	6	8	14	18,413	15,517	33,930	..	4.2	2.2
20	Malda ..	..	..	..	1,242	1,173	2,415	14,779	13,795	28,574	..	11.7	5.5
<i>Dacca Division.</i>													
21	Dacca ..	..	..	..	..	..	..	34,398	29,893	64,291	31.4	24.0	27.5
22	Mymensingh ..	..	..	..	966	753	1,719	52,386	45,767	98,153	5.6	3.5	4.6
23	Faridpur ..	..	..	..	..	..	..	28,506	24,830	53,336	12.5	12.3	12.4
24	Bakarganj ..	16	11	27	..	..	..	32,886	27,903	60,789	11.4	9.7	10.6
<i>Chittagong Division.</i>													
25	Chittagong ..	680	622	1,302	..	..	..	18,049	16,905	34,954	20.0	15.2	17.6
26	Noakhali ..	..	..	..	..	..	..	17,867	16,535	34,402	22.5	5.2	14.0
27	Tippera ..	13	13	26	..	..	..	24,238	20,706	44,944	11.5	10.2	11.0
Total for the Bengal Presidency.		1,475	1,337	2,812	15,074	12,658	27,732	614,736	543,737	1,158,473	16.8	17.5	17.1

districts of the Bengal Presidency during the year 1925—concluded.

5															6
per 1,000 of population.															
Hindus.			Muhammadans.			Buddhists.			Other Classes.			Total.			Number.
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	
24.5	23.7	24.1	25.8	24.4	25.1	..	..	..	34.6	29.9	32.3	25.0	24.0	24.5	1
26.7	24.7	25.7	22.8	20.8	21.8	..	..	..	29.4	26.7	28.1	25.9	23.8	24.9	2
24.8	22.8	23.8	24.3	22.9	23.6	..	..	..	24.6	21.0	22.8	24.8	22.7	23.7	3
22.7	22.1	22.4	22.4	20.7	21.6	..	..	..	29.4	24.6	26.9	22.9	22.1	22.5	4
25.5	25.4	25.5	27.0	26.5	26.8	..	..	..	32.9	26.2	29.6	25.8	25.6	25.7	5
23.3	23.8	23.5	29.2	27.9	28.6	33.9	..	32.7	11.7	24.4	15.1	24.4	24.6	24.5	6
19.3	19.8	19.5	24.3	23.3	23.8	18.9	..	16.8	20.9	20.9	20.9	20.9	20.9	20.9	7
27.5	41.4	32.1	28.1	59.1	37.1	5.7	14.8	7.5	2.1	5.0	3.0	27.1	44.0	32.7	8
25.2	39.0	32.0	36.3	36.4	36.3	..	..	..	35.2	41.0	38.0	31.9	37.3	34.6	9
29.3	28.6	28.9	33.7	32.0	32.8	..	..	..	26.8	24.5	25.7	31.6	30.3	30.9	10
29.3	28.0	28.7	30.2	28.9	29.6	..	..	..	..	..	..	29.9	28.5	29.2	11
23.7	22.3	22.4	25.9	24.6	25.3	..	..	..	18.4	30.1	24.0	24.2	23.4	23.8	12
28.7	29.0	28.8	41.5	38.0	40.8	90.9	..	83.3	40.8	33.1	37.1	38.7	36.0	37.4	13
32.9	32.4	32.7	32.7	32.6	32.7	..	..	..	47.1	39.2	43.2	33.6	32.9	33.3	14
23.5	23.2	23.4	29.6	30.9	30.2	7.6	3.5	5.7	37.3	33.3	35.4	27.3	26.9	27.1	15
35.1	33.8	34.5	33.8	39.1	35.9	27.2	53.5	26.7	38.1	33.1	35.7	33.2	31.7	32.5	16
31.0	30.1	30.6	30.5	28.1	29.4	55.5	..	55.5	40.0	42.0	40.8	30.7	28.8	29.8	17
21.0	21.3	21.1	25.0	22.3	23.7	..	..	..	81.1	72.0	76.8	24.8	22.5	23.7	18
25.5	23.4	24.5	26.3	22.5	24.4	..	..	..	8.6	18.6	12.4	26.1	22.7	24.4	19
29.4	28.1	28.8	30.2	27.5	28.8	..	..	..	32.0	30.8	31.4	30.0	28.0	29.0	20
22.8	20.6	21.7	21.4	18.5	19.9	..	..	..	..	..	..	21.9	19.2	20.6	21
22.0	22.6	22.3	20.2	18.5	19.4	..	..	..	52.6	43.0	47.9	20.9	19.7	20.3	22
24.1	21.4	22.7	25.4	23.2	24.3	..	..	..	..	..	..	24.8	22.5	23.7	23
22.3	19.7	20.5	26.0	22.8	24.4	29.5	22.3	26.0	..	..	..	24.5	21.8	23.2	24
22.2	20.9	21.6	23.7	20.4	22.0	20.3	16.0	18.0	..	..	..	23.2	20.3	21.7	25
20.7	20.6	20.6	25.2	23.1	24.2	..	..	..	..	..	..	24.2	22.5	23.4	26
18.5	18.0	18.2	16.8	14.6	15.7	15.2	15.3	15.2	..	..	..	17.2	15.5	16.4	27
24.8	24.3	24.5	26.0	24.0	25.0	20.2	18.1	19.1	34.5	30.3	32.5	25.5	24.2	24.9	

ANNUAL FORM No. VI.—Deaths registered from DIFFERENT CAUSES in the

1	2	3	4	5	6	7	8	9	10				
Number.	Districts and Towns.	Population according to Census of 1921.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	In				
									Suicide.		Wounds or accidents.	Snake-bite or killed by wild beasts.	
									Male.	Female.			
DISTRICTS (EXCLUDING TOWNS.)													
Burdwan Division.													
1	Burdwan ..	1,343,185	330	1,359	..	24,312	479	578	24	50	227	140	
2	Birbhum ..	838,655	103	203	..	15,930	89	85	22	22	146	118	
3	Bankura ..	964,487	330	412	..	14,872	686	692	37	33	136	120	
4	Midnapur ..	2,595,071	1,517	1,197	..	42,452	939	1,104	47	54	648	417	
5	Hooghly ..	900,802	370	836	..	17,715	898	717	25	45	330	88	
6	Howrah ..	778,893	795	933	..	9,274	1,915	1,453	46	80	269	87	
Presidency Division.													
7	24-Parganas ..	1,998,318	1,460	1,483	..	34,113	628	1,488	94	144	728	323	
8	Nadia ..	1,390,704	1,880	246	..	38,654	329	448	80	136	335	242	
9	Murshidabad ..	1,182,983	459	316	..	28,956	87	67	41	62	272	266	
10	Jessore ..	1,700,924	1,519	253	..	42,592	94	243	107	207	313	325	
11	Khulna ..	1,421,116	547	87	..	24,413	148	224	74	150	426	241	
Rajshahi Division.													
12	Rajshahi ..	1,457,037	1,661	48	..	47,342	141	82	74	100	223	316	
13	Dinajpur ..	1,687,328	123	286	..	52,172	126	175	35	46	225	282	
14	Jalpaiguri ..	921,749	142	6	..	21,937	756	843	..	..	137	..	
15	Darjeeling ..	254,045	30	13	..	6,286	621	295	14	6	77	16	
16	Rangpur ..	2,482,722	2,864	357	..	69,118	133	138	20	21	325	276	
17	Bogra ..	1,032,300	331	366	..	21,132	157	417	24	46	275	153	
18	Pabna ..	1,344,633	997	210	..	29,154	87	59	32	61	213	201	
19	Malda ..	955,830	37	229	..	24,045	10	40	25	30	124	145	
Dacca Division.													
20	Dacca ..	2,975,915	3,032	731	..	43,225	2,205	424	96	146	443	179	
21	Mymensingh ..	4,710,669	3,317	428	..	75,521	996	597	123	139	851	233	
22	Faridpur ..	2,202,783	1,788	218	..	41,989	595	129	70	137	524	273	
23	Bakarganj ..	2,563,849	1,449	108	..	41,731	645	156	63	78	1,082	193	
Chittagong Division.													
24	Chittagong ..	1,570,760	1,729	342	..	29,363	318	247	9	8	722	45	
25	Noakhali ..	1,465,071	1,384	280	..	26,689	247	26	10	30	841	66	
26	Tippera ..	2,678,627	3,385	242	..	31,080	1,351	844	22	30	336	91	
Total of Districts		43,418,456	31,579	11,189	..	854,067	14,680	11,571	1,216	1,861	10,228	4,836	
TOWNS.													
Burdwan District.													
1	Burdwan ..	34,616	6	82	..	261	93	105	2	3	22	2	
2	Kalna ..	8,424	27	5	..	142	12	52	1	..	2	..	
3	Katwa ..	6,823	3	4	..	41	..	6	..	..	1	..	
4	Dainhat ..	4,843	..	9	..	65	1	10	..	..	4	..	
5	Raniganj ..	14,536	15	40	..	51	10	29	..	..	2	..	
6	Asansol ..	26,499	7	4	..	47	6	28	..	..	11	..	
Birbhum District.													
7	Suri ..	8,915	..	..	..	33	7	13	1	..	1	..	
Bankura District.													
8	Bankura ..	25,412	10	131	..	54	20	36	3	1	6	3	
9	Vishnupur ..	19,398	9	8	..	87	33	30	1	1	6	..	
10	Sonamukhi ..	10,644	..	1	..	48	23	27	..	2	1	1	

Districts and Towns of the Bengal Presidency during the year 1925.

		11	12	13										14
jury.		All other causes.	Total deaths from all causes.	Ratio of deaths per 1,000 of population.										Number.
Rabies.	Total.			Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	Injury.	All other causes.	From all causes.		
												For the year.	Mean of previous five years.	
12	453	6,139	33,650	·2	1·0	..	18·1	·4	·4	·3	4·6	25·0	31·6	1
4	312	4,297	21,019	·1	·2	..	19·0	·1	·1	·4	5·1	25·1	38·6	2
2	328	6,053	23,373	·3	·4	..	15·4	·7	·7	·3	6·3	24·2	31·6	3
40	1,206	10,352	58,767	·6	·5	..	16·4	·3	·4	·5	4·0	22·6	27·3	4
6	494	3,633	24,663	·4	·9	..	19·7	1·0	·8	·5	4·0	27·4	31·4	5
14	496	2,640	17,506	1·0	1·2	..	11·9	2·4	1·9	·6	3·4	22·5	25·6	6
6	1,295	6,699	47,166	·7	·7	..	17·1	·3	·7	·6	3·3	23·6	27·4	7
32	825	7,117	49,499	1·3	·2	..	27·8	·2	·3	·6	5·1	35·6	35·5	8
12	653	6,827	37,365	·4	·2	..	24·5	·1	·1	·5	5·8	31·6	33·2	9
..	952	4,338	49,991	·9	·1	..	25·0	·1	·1	·6	2·5	29·4	30·1	10
5	896	7,829	34,144	·4	·1	..	17·2	·1	·1	·6	5·5	24·0	26·3	11
13	726	4,938	54,938	1·1	·03	..	32·5	·1	·05	·5	3·4	37·7	37·9	12
11	599	3,086	56,567	·1	·2	..	30·9	·1	·1	·3	1·8	33·5	34·2	13
..	137	1,291	25,112	·1	·01	..	23·8	·8	·9	·1	1·4	27·2	29·5	14
1	114	1,145	8,504	·1	·05	..	24·7	2·4	1·2	·4	4·5	33·5	39·5	15
23	665	1,133	74,408	1·1	·1	..	27·8	·1	·1	·3	·4	30·0	28·4	16
6	504	1,744	24,651	·3	·3	..	20·4	·1	·4	·5	1·7	23·9	29·5	17
2	509	2,057	33,073	·7	·1	..	21·7	·1	·04	·4	1·5	24·6	28·5	18
6	332	3,375	28,068	·04	·2	..	25·1	·01	·04	·3	3·5	29·4	26·4	19
26	890	9,631	60,138	1·0	·2	..	14·5	·8	·1	·3	3·2	20·2	24·4	20
21	1,367	13,850	96,076	·7	·1	..	16·0	·2	·1	·3	2·9	20·4	24·1	21
14	1,018	7,019	52,756	·8	·1	..	19·1	·3	·05	·5	3·2	23·9	27·0	22
1	1,417	14,510	60,016	·6	·04	..	16·3	·3	·1	·5	5·6	23·4	27·7	23
4	788	1,687	34,474	1·1	·2	..	18·7	·1	·1	·5	1·1	21·9	26·1	24
..	947	4,738	34,311	·9	·2	..	18·2	·1	·02	·6	3·2	23·4	25·5	25
..	479	6,799	44,180	1·3	·1	..	11·6	·4	·3	·2	2·5	16·5	18·6	26
261	18,402	142,927	1,084,415	·7	·2	..	19·7	·3	·3	·4	3·3	25·0	28·0	
..	29	114	690	·2	2·4	..	7·5	2·7	3·0	·8	3·3	19·9	22·8	1
..	3	60	301	3·2	·6	..	16·8	1·4	6·2	·3	7·1	35·7	32·5	2
..	1	12	67	·4	·6	..	6·0	..	·9	·1	1·8	9·8	11·0	3
..	4	23	112	..	1·8	..	13·4	·2	2·1	·8	4·7	23·1	27·2	4
..	2	100	247	1·0	2·7	..	3·5	·7	2·0	·1	6·9	17·0	17·7	5
..	11	106	209	·3	·1	..	1·8	·2	1·1	·4	4·0	7·9	13·5	6
..	2	2	57	..	..	..	3·7	·8	1·5	·2	·2	6·4	8·2	7
1	14	93	358	·4	5·1	..	2·1	·8	1·4	·5	3·7	14·1	14·4	8
..	8	83	258	·5	·4	..	4·5	1·7	1·5	·4	4·3	13·3	22·6	9
3	7	106	212	..	·1	..	4·5	2·1	2·5	·6	9·9	19·9	25·9	10

ANNUAL FORM No. VI.—Deaths registered from DIFFERENT CAUSES in the

1	2	3	4	5	6	7	8	9	10			
Number.	Districts and Towns.	Population according to Census of 1921.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	In			
									Suicide.		Wounds or accidents.	Snake-bite or killed by wild beasts.
									Male.	Female.		
TOWNS—contd.												
Midnapur District.												
11	Midnapur ..	28,965	5	9	..	82	53	93	1	2	4	1
12	Ghatat ..	10,770	5	2	..	64	24	33	..	..	5	1
13	Kharar ..	6,580	2	30	..	49	18	30	..	..	..	..
14	Chandrakona ..	6,470	7	1	..	79	24	50	..	..	1	2
15	Ramjibanpur ..	6,700	2	1	..	35	35	45	..	..	3	1
16	Kharpai ..	3,756	..	..	..	42	13	41	..	..	..	..
17	Tamluk ..	8,348	8	..	..	25	9	16	..	..	4	1
Hooghly District.												
18	Hooghly-Chinsura	29,938	27	27	..	378	80	94	..	1	6	..
19	Banseria ..	6,382	4	..	..	57	4	20	..	..	1	..
20	Arambagh ..	7,857	3	1	..	49	25	25	..	..	5	..
21	Serampur ..	33,197	27	87	..	113	124	117	5	1	25	..
22	Rishra-Konnagar	23,250	33	59	..	80	41	46	..	..	4	1
23	Uttarpara ..	8,657	8	13	..	62	25	15	..	..	1	..
24	Kotrung ..	6,846	12	13	..	27	13	12	..	..	1	..
25	Baidyabati ..	16,471	20	27	..	142	51	21	2	1	5	..
26	Bhadreswar ..	22,081	26	29	..	166	48	36	..	..	2	1
27	Chamdani ..	24,652	28	13	..	108	42	20	1	..	..	..
Howrah District.												
28	Howrah ..	195,301	228	865	..	1,083	761	1,785	4	8	109	2
29	Bally ..	23,209	8	37	..	102	37	53	1	2	3	2
24-Parganas District.												
30	South Suburban	33,345	38	35	..	273	66	101	2	2	3	..
31	Tollyganj ..	21,637	6	12	..	145	33	45	..	1	1	3
32	Budge-Budge ..	25,723	72	11	..	169	115	30	2	1	7	6
33	Baranagar ..	32,084	57	49	..	168	173	131	2	1	4	1
34	Kamarhati ..	23,018	12	65	..	96	65	29	1	..	12	..
35	Rajpur ..	11,412	7	4	..	93	21	36	2	..	3	..
36	Baruipur ..	5,114	..	2	..	59	5	19	..	1	..	..
37	Jaynagar ..	8,408	3	7	..	117	16	29	1	..	2	..
38	North Dum Dum	8,224	4	21	..	58	13	32	..	..	2	..
39	South Dum Dum	14,030	19	17	..	66	35	42	1	1	3	2
40	Khardah ..	5,486	3	2	..	34	9	12	..	..	..	..
41	Barrakpur ..	22,460	1	6	..	69	15	27	..	..	6	..
42	Panihati ..	10,161	7	9	..	83	30	33	..	..	4	..
43	North Barrakpur	15,433	23	14	..	100	32	50	1	..	1	1
44	Titagarh ..	52,451	12	45	..	493	19	12	..	..	8	..
45	Garulia ..	13,096	11	6	..	88	20	15	..	1	4	..
46	Naihati ..	23,286	10	38	..	63	25	36	..	1	4	7
47	Halisahar ..	7,318	18	7	..	60	12	36	..	..	1	1
48	Kanchrapara ..	10,332	..	13	..	54	6	12	1	1	..	1
49	Bhatpara ..	65,609	91	261	..	658	66	147	2	..	10	1
50	Barasat ..	8,211	8	5	..	70	8	25	1	..	3	1
51	Gobardanga ..	5,112	4	..	..	47	..	3	2	..	1	..
52	Basirhat ..	19,267	15	8	..	206	18	63	..	1	2	1
53	Baduria ..	14,057	3	..	..	166	11	14	1	..	1	..
54	Taki ..	5,200	6	2	..	72	6	18	1	..	4	2
City of Calcutta.												
55	Calcutta ..	1,077,264	996	3,923	9	5,453	3,132	9,872	44	42	623	5
Nadia District.												
56	Krishnagar ..	22,309	13	4	..	173	17	47	..	1	4	..
57	Navadwip ..	15,584	22	6	..	118	46	16	2	1	2	1
58	Ranaghat ..	9,652	1	3	..	84	17	17	..	1	..	..
59	Birnagar ..	2,305	..	1	..	28	..	3	..	..	1	..
60	Santipur ..	24,792	37	14	..	247	23	72	4	9	5	1

Districts and Towns of the Bengal Presidency during the year 1925—continued.

		11	12	13										14
Jury.		All other causes.	Total deaths from all causes.	Ratio of deaths per 1,000 of population.										Number.
Rabies.	Total.			Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	Injury.	All other causes.	From all causes.		
												For the year.	Mean of previous five years.	
..	8	155	405	·2	·3	..	2·8	1·9	3·2	·3	5·3	14·0	16·6	11
..	6	38	172	·5	·2	..	5·9	2·2	3·1	·5	3·5	16·0	25·7	12
1	1	37	167	·3	4·6	..	7·4	2·7	4·6	·1	5·6	25·4	22·5	13
..	3	41	205	1·1	·1	..	12·2	3·7	7·7	·5	6·3	31·7	35·7	14
..	4	10	132	·3	·1	..	5·2	5·2	6·7	·6	1·5	19·7	28·3	15
..	..	2	98	..	..	..	11·2	3·4	10·9	..	·5	26·1	29·5	16
..	5	35	98	·9	..	..	3·0	1·1	1·9	·6	4·2	11·7	17·5	17
..	7	25	638	·9	·9	..	12·6	2·7	3·1	·2	·8	21·3	23·3	18
..	1	16	102	·6	..	..	8·9	·6	3·1	·1	2·5	16·0	19·1	19
..	5	41	149	·4	·1	..	6·2	3·2	3·2	·6	5·2	19·0	27·1	20
1	32	123	623	·8	2·6	..	3·4	3·7	3·5	1·0	3·7	18·8	20·1	21
..	5	88	352	1·4	2·5	..	3·4	1·8	2·0	·2	3·8	15·1	15·0	22
..	1	33	157	·9	1·5	..	7·2	2·9	1·7	·1	3·8	18·1	18·4	23
..	1	24	102	1·7	1·9	..	3·9	1·9	1·7	·1	3·5	14·9	17·1	24
1	9	74	344	1·2	1·6	..	8·6	3·0	1·3	·5	4·5	20·9	22·0	25
..	3	129	437	1·2	1·3	..	7·5	2·2	1·6	·1	5·8	19·8	14·3	26
..	1	25	237	1·1	·5	..	4·4	1·7	·8	·04	1·0	9·6	12·3	27
..	123	1,746	6,591	1·2	4·4	..	5·5	3·9	9·1	·6	8·9	33·7	33·7	28
..	8	92	337	·3	1·6	..	4·4	1·6	2·3	·3	4·0	14·5	18·3	29
..	7	76	596	1·1	1·0	..	8·2	1·9	3·0	·2	2·3	17·9	19·6	30
..	5	45	291	·3	·5	..	6·7	1·5	2·1	·2	2·1	13·4	12·5	31
..	16	44	457	2·8	·4	..	6·6	4·5	1·2	·6	1·7	17·8	16·3	32
..	8	179	765	1·8	1·5	..	5·2	5·4	4·1	·2	5·6	23·8	27·8	33
..	13	53	333	·5	2·8	..	4·2	2·9	1·3	·6	2·3	14·5	15·8	34
..	5	40	206	·6	·3	..	8·1	1·8	3·1	·4	3·5	18·0	22·6	35
..	1	4	90	..	·4	..	11·5	1·0	3·7	·2	·8	17·6	25·0	36
..	3	..	175	·3	·8	..	13·9	1·9	3·4	·3	..	20·8	21·3	37
..	2	26	156	·5	2·5	..	7·0	1·6	3·9	·2	3·2	19·0	20·1	38
..	7	47	233	1·3	1·2	..	4·7	2·4	3·0	·5	3·3	16·6	20·5	39
..	..	14	74	·5	·4	..	6·2	1·6	2·2	..	2·5	13·5	14·6	40
..	6	20	144	·04	·3	..	3·1	·6	1·2	·3	·9	6·4	8·4	41
..	4	54	220	·7	·9	..	8·2	3·0	3·2	·4	5·3	21·6	22·6	42
..	3	49	271	1·5	·9	..	6·5	2·0	3·2	·2	3·2	17·5	18·4	43
..	8	176	765	·2	·8	..	9·4	·4	·2	·1	3·3	14·6	18·9	44
..	5	18	163	·8	·4	..	6·7	1·5	1·1	·4	1·4	12·4	6·7	45
..	12	59	243	·4	1·6	..	2·7	1·0	1·5	·5	2·5	10·4	11·1	46
..	2	2	137	2·5	·9	..	8·2	1·6	4·9	·3	·3	18·7	16·8	47
..	3	1	89	..	1·2	..	5·2	·6	1·2	·3	·1	8·6	9·2	48
..	13	203	1,439	1·4	4·0	..	10·0	1·0	2·2	·2	3·1	21·9	10·6	49
..	5	10	131	1·0	·6	..	8·5	·9	3·0	·6	1·2	15·9	13·6	50
..	3	..	57	·8	..	..	9·2	..	·6	·6	..	11·1	23·3	51
..	4	105	419	·8	·4	..	10·7	1·0	3·3	·2	5·4	21·7	26·4	52
..	2	2	198	·2	..	..	11·8	·7	1·0	·1	·1	14·1	16·9	53
..	7	31	142	1·1	·4	..	13·8	1·2	3·5	1·3	6·0	27·3	25·4	54
26	740	11,070	35,195	·9	3·6	·01	5·1	2·9	9·2	·7	10·3	32·7	27·8	55
1	6	47	307	·6	·2	..	7·7	·7	2·1	·3	2·1	13·8	11·7	56
..	6	56	270	1·4	·4	..	7·6	3·0	1·0	·4	3·6	17·3	19·9	57
..	1	44	167	·1	·3	..	8·7	1·7	1·8	·1	4·6	17·3	19·0	58
..	1	24	57	..	·4	..	12·1	..	1·3	·4	10·4	24·7	23·0	59
..	19	214	626	1·5	·6	..	10·0	·9	2·9	·8	8·6	25·2	25·3	60

ANNUAL FORM No. VI.—Deaths registered from DIFFERENT CAUSES in the

1	2	3	4	5	6	7	8	9	10			
Number.	Districts and Towns.	Population according to Census of 1921.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	In-			
									Suicide.		Wounds or accidents.	Snake-bite or killed by wild beasts.
									Male.	Female.		
	<i>TOWNS—contd.</i>											
	<i>Nadia District—</i> <i>co. old.</i>											
61	Chakdaha ..	5,216	..	..	..	100	6	21	..	..	5	..
62	Kushtia ..	7,849	26	2	..	38	17	9	..	..	1	..
63	Kumarkhali ..	3,763	7	2	..	57	15	24	..	1	1	..
64	Meherpur ..	5,398	6	1	..	76	1	6	..	..	3	..
	<i>Murshidabad District.</i>											
65	Berhampur ..	26,670	19	15	..	254	46	66	1	2	5	..
66	Murshidabad ..	10,669	9	..	..	278	29	11	..	..	..	..
67	Azimganj ..	11,231	38	6	..	138	19	17	..	2	5	..
68	Kandi ..	11,787	8	14	..	118	8	14	1	..	1	..
69	Jangipur ..	10,739	12	2	..	91	20	10	..	..	1	..
70	Dhulian ..	8,435	1	2	..	106	7	3	..	..	4	..
	<i>Jessore District.</i>											
71	Jessore ..	10,139	3	1	..	106	22	22	..	..	..	..
72	Kotchandpur ..	7,545	2	1	..	76	3	5	..	1	2	1
73	Maheshpur ..	3,611	3	..	..	53	..	2	..	..	2	..
	<i>Khulna District.</i>											
74	Khulna ..	16,049	10	9	..	119	23	12	..	2	5	1
75	Satkhira ..	10,299	13	1	..	116	7	17	1	..	4	1
76	Debhata ..	5,570	..	..	..	45	12	27	3	2	1	..
	<i>Rajshahi District.</i>											
77	Rajshahi ..	24,598	40	3	..	224	48	25	..	1	6	1
78	Nator ..	8,040	..	..	..	103	12	34	..	1	..	..
	<i>Dinajpur District.</i>											
79	Dinajpur ..	18,025	4	..	..	114	28	45	..	..	2	..
	<i>Jalpaiguri District.</i>											
80	Jalpaiguri ..	14,520	1	..	..	113	39	50	..	..	3	..
	<i>Darjeeling District.</i>											
81	Darjeeling ..	22,258	..	4	..	93	17	116	1	..	2	1
82	Kurseong ..	6,445	..	1	..	98	17	58	..	..	..	..
	<i>Rangpur District.</i>											
83	Rangpur ..	19,076	8	4	..	107	35	22	..	1	1	..
84	Gaibandha ..	6,056	3	..	..	31	13	9	..	..	4	..
	<i>Bogra District.</i>											
85	Bogra ..	12,322	3	3	..	60	5	10	..	..	1	2
86	Sherpur ..	3,984	11	2	..	49	12	13	..	..	..	1
	<i>Pabna District.</i>											
87	Pabna ..	19,343	12	2	..	114	26	7	..	1	2	..
88	Sirajganj ..	25,518	32	24	..	396	47	22	5	4	35	7

Districts and Towns of the Bengal Presidency during the year 1925—continued.

		11	12	13										14
jury.				Ratio of deaths per 1,000 of population.										
Rabies.	Total.	All other causes.	Total deaths from all causes.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	Injury.	All other causes.	From all causes.		Number.
												For the year.	Mean of previous five years.	
..	5	15	147	..	..	..	19.2	1.1	4.0	1.0	2.9	28.2	22.2	61
..	1	12	105	3.3	.2	..	4.8	2.2	1.1	.1	1.5	13.4	14.4	62
..	2	18	125	1.9	.5	..	15.1	3.9	6.4	.5	4.8	33.2	26.0	63
..	3	22	115	1.1	.2	..	14.1	.2	1.1	.5	4.1	21.3	13.1	64
1	9	144	553	.7	.6	..	9.5	1.7	2.5	.3	5.4	20.7	22.3	65
..	..	..	327	.8	..	..	26.0	2.7	1.0	..	..	30.6	31.4	66
..	7	75	300	3.4	.5	..	12.3	1.7	1.5	.6	6.7	26.7	26.1	67
..	2	77	241	.7	1.2	..	10.0	.6	1.2	.2	6.5	20.4	19.3	68
..	1	7	143	1.1	.2	..	8.5	1.9	.9	.1	.6	13.3	15.3	69
..	4	24	147	.1	.2	..	12.6	.8	.3	.5	2.8	17.4	18.8	70
..	..	35	189	.3	.1	..	10.4	2.2	2.2	..	3.4	18.6	15.7	71
..	4	9	100	.3	.1	..	10.1	.4	.7	.5	1.2	13.2	26.5	72
..	2	3	63	.8	..	..	14.7	..	.5	.5	.8	17.4	18.5	73
..	8	20	201	.6	.6	..	7.4	1.4	.7	.5	1.2	12.5	14.8	74
..	6	22	182	1.3	.1	..	11.3	.7	1.6	.6	2.1	17.7	13.8	75
..	6	2	92	..	..	..	8.1	2.2	4.8	1.1	.4	16.5	21.4	76
1	9	168	517	1.6	.1	..	9.1	1.9	1.0	.4	6.8	21.0	17.4	77
..	1	62	212	..	..	..	12.8	1.5	4.2	.1	7.7	25.4	18.0	78
..	2	50	243	.2	..	..	6.3	1.5	2.5	.1	2.8	13.5	10.9	79
..	3	40	246	.1	..	..	7.8	2.7	3.4	.2	2.7	16.9	16.0	80
..	4	182	416	..	.2	..	4.2	.7	5.2	.2	8.2	18.7	22.7	81
..	..	90	264	..	.1	..	15.2	2.6	9.0	..	14.0	41.0	40.6	82
..	2	102	280	.4	.2	..	5.6	1.8	1.1	.1	5.3	14.7	14.9	83
..	4	7	67	.5	..	..	5.1	2.1	1.5	.7	1.1	11.1	..	84
..	3	47	131	.2	.2	..	4.9	.4	.8	.2	3.8	10.6	25.3	85
..	1	10	98	2.8	.5	..	12.3	3.0	3.3	.2	2.5	24.6	27.1	86
..	3	60	224	.6	.1	..	5.9	1.3	.4	.1	3.1	11.6	14.6	87
..	51	61	633	1.2	.9	..	15.5	1.8	.9	2.0	2.4	24.8	29.4	88

ANNUAL FORM No. VI.—Deaths registered from DIFFERENT CAUSES in the

1	2	3	4	5	6	7	8	9	10			
Number.	Districts and Towns.	Population according to Census of 1921.	Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	In-			
									Suicide.		Wounds or accidents.	Snake-bite or killed by wild beasts.
									Male.	Female.		
	TOWNS—concl'd.											
	<i>Malda District.</i>											
89	English Bazar ..	14,057	1	..	..	102	35	33	..	1	3	2
90	Malda ..	3,145	..	..	..	53	14	15	..	1	..	..
91	Nawabganj ..	12,633	20	6	..	97	3	13	..	..	3	..
	<i>Dacca District.</i>											
92	Dacca ..	119,450	36	1	..	931	355	727	6	12	47	4
93	Narayanganj ..	30,602	33	16	..	313	85	49	..	..	15	..
	<i>Mymensingh District.</i>											
94	Mymensingh ..	25,287	13	2	..	246	36	49	..	..	12	..
95	Muktagacha ..	6,770	21	..	..	39	1	5	..	..	1	..
96	Netrakona ..	8,687	12	..	..	67	11	10	1	..	11	..
97	Jamalpur ..	23,113	6	3	..	318	31	39	1	..	6	..
98	Sherpur ..	17,813	20	6	..	162	23	16	..	1	1	..
99	Kishorganj ..	19,518	4	1	..	63	47	22	..	..	3	1
100	Bajitpur ..	11,568	7	1	..	59	18	8	..	..	..	..
101	Tangail ..	14,305	39	1	..	85	16	21	..	..	1	..
	<i>Faridpur District.</i>											
102	Faridpur ..	14,503	5	..	..	115	11	18	..	1	2	..
103	Madaripur ..	25,297	35	2	..	123	30	23	1	..	1	..
104	Rajbari ..	7,275	..	..	..	62	4	7	1	..	1	2
	<i>Bakarganj District.</i>											
105	Barisal ..	26,744	24	1	..	229	49	7	..	..	..	..
106	Jhalakati ..	5,955	11	..	..	21	14	9	..	..	4	..
107	Nalchiti ..	1,858	..	..	..	12	5	6	..	..	1	..
108	Pirojpur ..	13,841	3	1	..	53	4	7	..	..	..	..
109	Patuakhali ..	6,984	11	..	..	71	14	3	..	..	4	..
110	Bhola ..	4,525	3	..	..	14	2	..	1	..	4	..
	<i>Chittagong District.</i>											
111	Chittagong ..	36,030	22	..	..	129	28	25	2	..	3	..
112	Cox's Bazar ..	4,632	7	..	..	28	1	1	..	..	..	..
	<i>Noakhali District.</i>											
113	Sudharam ..	7,715	2	..	..	57	11	7	..	..	3	1
	<i>Tippera District.</i>											
114	Comilla ..	25,914	23	18	..	50	21	5	..	..	4	..
115	Brahmanbaria ..	23,414	30	..	..	155	55	36	..	..	3	..
116	Chandpur ..	15,118	9	1	..	52	12	4	..	..	5	..
	Total of Towns	3,103,837	2,697	6,247	9	20,161	7,156	15,754	117	121	1,190	77
	Total for the Bengal Presidency.	46,522,293	34,276	17,436	9	874,228	21,836	27,325	1,333	1,982	11,418	4,913

Districts and Towns of the Bengal Presidency during the year 1925—concluded.

		11	12	13										14
jury.		All other causes.	Total deaths from all causes.	Ratio of deaths per 1,000 of population.										Number.
Rabies.	Total.			Cholera.	Small-pox.	Plague.	Fever.	Dysentery and diarrhoea.	Respiratory diseases.	Injury.	All other causes.	From all causes.		
												For the year.	Mean of previous five years.	
..	6	55	232	·1	..	..	7·2	2·4	2·3	·4	3·9	16·5	19·6	89
..	1	17	100	..	..	..	16·8	4·5	4·8	·3	5·4	31·8	28·3	90
..	3	32	174	1·6	·5	..	7·7	·2	1·0	·2	2·5	13·8	18·0	91
2	71	1,138	3,259	·3	·01	..	7·8	2·9	6·1	·6	9·5	27·3	28·3	92
..	15	383	894	1·1	·5	..	10·2	2·7	1·6	·5	12·5	29·2	24·2	93
..	12	129	487	·5	·1	..	9·7	1·4	1·9	·5	5·1	19·3	15·9	94
..	1	21	88	3·1	..	..	5·8	·1	·7	·1	3·1	13·0	15·1	95
..	12	42	154	1·4	..	..	7·7	1·3	1·1	1·4	4·8	17·7	21·7	96
1	8	74	479	·3	·1	..	13·7	1·4	1·7	·3	3·2	20·7	28·5	97
1	3	128	358	1·1	·3	..	9·1	1·3	·9	·2	7·2	20·1	19·4	98
..	4	31	172	·2	·1	..	3·2	2·4	1·1	·2	1·6	8·8	13·1	99
..	..	32	125	·6	·1	..	5·1	1·5	·7	..	2·8	10·8	13·6	100
..	1	51	214	2·7	·1	..	5·9	1·1	1·5	·1	3·6	15·0	19·1	101
..	3	40	192	·3	..	..	7·9	·7	1·2	·2	2·7	13·2	21·0	102
..	2	85	300	1·4	·1	..	4·9	1·2	·9	·1	3·4	11·8	17·9	103
..	4	11	88	..	..	..	8·5	·5	1·0	·5	1·5	12·1	2·2	104
1	1	73	384	·9	·03	..	8·6	1·8	·3	·03	2·7	14·3	8·7	105
..	4	20	79	1·8	..	..	3·5	2·3	1·5	·7	3·3	13·3	11·4	106
..	1	3	27	..	..	..	6·4	2·6	3·2	·5	1·6	14·5	14·5	107
..	..	52	120	·2	·1	..	3·8	·3	·5	..	3·7	8·6	11·3	108
..	4	31	134	1·5	..	..	10·2	1·9	·4	·6	4·4	19·2	20·5	109
..	5	5	29	·7	..	..	3·1	·4	..	1·1	1·1	6·4	5·3	110
2	7	222	433	·6	..	..	3·6	·7	·7	·2	6·2	12·0	18·0	111
..	..	10	47	1·5	..	..	6·0	·2	·2	..	2·1	10·1	17·7	112
..	4	10	91	·3	..	..	7·4	1·4	·9	·5	1·3	11·8	13·9	113
..	4	59	180	·9	·7	..	1·9	·8	·2	·1	2·3	6·9	8·1	114
..	3	162	441	1·3	..	..	6·6	2·4	1·5	·1	6·9	18·8	22·5	115
..	5	60	143	·6	·1	..	3·4	·8	·3	·3	4·0	9·4	9·6	116
43	1,548	20,486	74,058	·9	2·0	·003	6·5	2·3	5·1	·5	6·6	23·9	24·2	
304	19,950	163,413	1,158,473	·7	·4	·0002	18·8	·5	·6	·4	3·5	24·9	27·7	

Supplementary Annual Form No. VI A.—Deaths registered from DIFFERENT

1	2	3	4	5	6	7	8						
Number.	Districts and towns.	Malaria.		Enteric Fever.		Measles.		Relapsing Fever.		Kala-Azar.		Other Fevers.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
DISTRICTS (EXCLUDING TOWNS).													
BURDWAN DIVISION.													
1	Burdwan	16,526	12.3	19	.01	17	.01	35	.02	55	.04	7,660	5.7
2	Birbhum	1,780	2.2	4	.005	5	.01	4	.005	4	.005	14,133	16.8
3	Bankura	1,657	1.7	53	.05	17	.02	8	.01	14	.01	13,123	13.6
4	Midnapur	21,299	8.2	67	.02	30	.01	94	.03	103	.04	20,859	8.0
5	Hooghly	14,831	16.5	133	.1	19	.02	18	.01	217	.2	2,497	2.8
6	Howrah	3,260	4.3	448	.6	6	.01	376	.5	461	.6	4,623	5.9
PRESIDENCY DIVISION.													
7	24-Parganas	11,031	5.5	25	.01	29	.01	202	.1	2,122	1.1	20,704	10.4
8	Nadia	28,524	20.5	165	.1	58	.04	111	.1	210	.1	9,586	6.9
9	Murshidabad	26,042	22.0	50	.04	10	.01	10	.01	5	.005	2,838	2.4
10	Jessore	38,057	22.4	46	.02	13	.01	3	.002	268	.1	4,205	2.5
11	Khulna	20,255	14.2	66	.04	2	.001	27	.02	489	.3	3,574	2.5
RAJSHAHI DIVISION.													
12	Rajshahi	45,958	31.5	37	.02	15	.01	21	.01	535	.4	776	.5
13	Dinajpur	36,902	21.9	52	.03	11	.01	5	.003	88	.05	15,114	8.9
14	Jalpaiguri	20,301	22.0	..	..	..	..	..	..	..	..	1,636	1.8
15	Darjeeling	3,202	12.6	24	.1	7	.02	5	.01	42	.2	3,006	11.8
16	Rangpur	52,732	21.2	1,318	.5	295	.1	335	.1	217	.1	14,221	5.7
17	Bogra	14,818	14.3	117	.1	56	.05	284	.3	1,074	1.0	4,783	4.6
18	Pabna	25,741	19.1	15	.01	1	.001	26	.02	18	.01	3,353	2.5
19	Malda	21,654	22.6	478	.5	24	.02	214	.2	17	.02	1,658	1.7
DACCA DIVISION.													
20	Dacca	6,595	2.2	2,116	.7	43	.01	131	.04	1,123	1.5	33,217	11.2
21	Mymensingh	16,856	3.6	35	.01	54	.01	167	.03	1,714	.4	56,695	12.0
22	Faridpur	41,310	18.7	25	.01	10	.004	18	.01	54	.02	572	.2
23	Bakarganj	3,868	1.5	124	.04	33	.01	61	.02	321	.1	37,324	14.5
CHITTAGONG DIVISION.													
24	Chittagong	7,867	5.0	915	.6	76	.1	195	.1	871	.6	19,439	12.4
25	Noakhali	2,909	2.0	3	.002	20	.001	319	.2	1,380	.9	22,058	15.6
26	Tippura	6,725	2.5	397	.1	127	.05	361	.1	3,312	1.2	20,158	7.5
Total of Districts ..		490,800	11.3	6,732	.2	978	.02	3,030	.1	14,715	.3	337,812	7.8
TOWNS.													
BURDWAN DISTRICT.													
1	Burdwan	221	6.4	1	.02	..	..	..	..	39	1.1	..	..
2	Kalna	97	11.5	..	..	..	..	3	.3	11	1.3	31	3.7
3	Katwa	3	.4	3	.4	..	..	..	..	1	.1	34	5.0
4	Dainhat	60	12.4	..	..	..	..	..	..	..	..	5	1.0
5	Raniganj	..	..	..	..	..	..	..	..	..	..	51	3.6
6	Asansol	3	.1	4	.1	1	.03	..	..	..	..	39	1.5
BIRBHUM DISTRICT.													
7	Suri	2	.2	2	.2	..	..	..	..	..	..	29	3.2
BANKURA DISTRICT.													
8	Bankura	2	.1	2	.1	..	..	..	..	2	.1	48	1.0
9	Vishnupur	..	..	..	..	1	.05	..	..	..	..	86	4.4
10	Sonamukhi	19	1.8	..	..	..	..	1	.1	..	..	28	2.6
MIDNAPUR DISTRICT.													
11	Midnapur	2	.1	2	.1	..	..	..	..	1	.03	77	2.6
12	Ghatal	8	.7	1	.1	..	..	..	..	..	..	55	5.1
13	Kharar	26	3.9	..	..	..	..	..	..	1	.1	22	3.3
14	Chandrakona	17	2.6	1	.1	..	..	2	.03	4	.6	55	8.5
15	Ranjanpur	11	1.6	..	..	..	..	..	..	2	.3	22	3.3
16	Khirpai	36	9.6	..	..	..	..	..	..	..	..	6	1.6
17	Tamluk	..	..	..	..	..	..	..	..	1	.1	24	2.9
HOOGHLY DISTRICT.													
18	Hooghly-Chinsura	14	.5	24	.8	1	.03	..	..	20	.7	319	10.6
19	Bansberia	41	6.4	1	.1	1	.1	..	..	8	1.2	6	.9
20	Arambagh	48	6.1	..	..	..	..	..	..	..	..	1	.1
21	Serampur	15	.4	18	.5	4	.1	..	..	15	.4	61	1.8
22	Rishra-Konnagar	5	.2	4	.2	..	..	1	.04	5	.2	65	2.8
23	Uttarpara	21	2.4	6	.7	..	..	..	..	3	.3	32	3.7
24	Kotrung	4	.6	..	..	..	..	..	..	3	.4	20	2.0
25	Baidyabati	139	8.4	..	..	..	..	..	..	3	.3	..	..
26	Bhadreswar	9	.4	1	.04	..	..	4	.2	5	.2	147	6.6
27	Chandpur	16	.6	..	..	..	..	..	..	1	.04	91	3.7

* Deaths during or within

CAUSES in the districts and towns of the Bengal Presidency during the year 1925.

9		10		11		12		13		14		15	16			17	18
Dysentery.		Diarrhoea.		Influenza.		Pneumonia.		Phthisis.		Other respira- tory diseases.		Deaths from child-birth.	Deaths under one year.			Invent. mortal- ity rate.	Number.
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths from child-birth.	Male.	Female.	Total.		
257	-2	222	-2	43	-03	324	-2	104	-1	107	-1	25	4,807	4,228	9,125	197-6	1
39	-04	50	-1	5	-05	39	-04	17	-02	24	-03	31	3,644	3,084	6,728	182-1	2
231	-05	455	-5	29	-03	278	-3	173	-2	212	-2	6	3,557	2,909	6,466	175-0	3
590	-06	349	-1	91	-03	592	-3	198	-1	223	-1	115	6,400	6,092	12,492	160-9	4
432	-06	466	-5	29	-03	390	-4	157	-1	161	-2	25	2,585	2,106	4,691	186-0	5
483	-6	1,432	-8	187	-2	441	-6	377	-5	448	-6	158	2,264	1,816	4,080	183-2	6
320	-2	308	-1	64	-03	812	-4	250	-1	382	-2	128	4,291	3,692	7,983	152-4	7
278	-2	51	-03	28	-02	218	-1	111	-1	91	-1	227	6,517	6,165	12,682	220-4	8
50	-04	37	-03	6	-005	41	-03	9	-01	11	-01	63	5,286	4,762	10,048	174-7	9
60	-03	34	-02	2	-001	92	-05	92	-05	57	-03	64	3,917	3,896	7,813	172-8	10
100	-1	48	-03	14	-01	65	-04	91	-1	54	-04	242	4,205	3,836	8,041	189-4	11
84	-05	57	-04	2	-001	22	-01	17	-01	41	-03	127	6,469	5,736	12,205	234-2	12
93	-05	33	-02	6	-003	84	-05	35	-02	49	-03	93	7,696	6,852	14,548	223-3	13
400	-4	356	-4	166	-2	442	-5	199	-2	36	-03	..	2,944	2,546	5,490	194-0	14
460	-4	131	-5	10	-1	108	-4	102	-4	66	-2	..	773	694	1,467	166-7	15
105	-04	28	-01	34	-01	60	-2	9	-003	35	-01	246	8,600	7,286	15,886	217-8	16
120	-1	37	-03	178	-2	101	-1	68	-1	70	-1	123	2,746	2,292	5,038	172-3	17
59	-04	28	-02	..	..	23	-02	21	-01	15	-01	1	3,255	2,922	6,177	162-1	18
8	-01	2	-002	6	-01	10	-01	16	-02	8	-08	34	3,057	3,017	6,074	155-1	19
1,707	-6	498	-2	25	-01	69	-02	153	-05	177	-1	108	6,267	5,489	11,756	151-4	20
699	-1	297	-1	19	-004	134	-03	198	-04	246	-05	160	11,438	9,731	21,169	174-9	21
548	-3	47	-02	4	-001	39	-01	41	-01	54	-02	25	5,900	5,189	11,089	177-2	22
506	-2	139	-1	7	-002	28	-01	56	-02	65	-02	99	7,881	6,365	14,246	203-8	23
247	-1	71	-04	9	-01	165	-1	39	-02	34	-02	55	3,353	2,908	6,261	129-3	24
190	-1	57	-04	1	-01	3	-002	6	-004	16	-01	107	3,411	3,008	6,419	142-8	25
947	-3	404	-1	195	-1	77	-03	302	-1	270	-1	237	4,329	3,379	7,708	134-7	26
9,043	-2	5,637	-1	1,169	-03	4,648	-1	2,802	-1	2,952	-1	2,499	125,682	110,000	235,682	179-1	
16	-5	77	-2	1	-02	61	-1-8	13	-4	30	-9	..	7	4	11	60-8	1
7	-8	5	-6	1	-1	31	-3-7	4	-5	16	-1-9	..	34	28	62	319-6	2
..	..	..	..	..	..	4	-6	..	..	2	-3	..	6	7	13	213-1	3
3	-03	1	-2	..	..	11	-7	..	..	2	-4	..	18	6	24	269-6	4
5	-03	1	-04	..	..	12	-4	..	9	18	-1-2	3	31	21	52	156-6	5
..	..	..	..	..	..	..	..	..	..	7	-3	6	22	23	45	132-3	6
5	-6	2	-2	..	..	3	-3	2	-2	8	-9	1	6	3	9	125-0	7
5	-2	15	-6	..	..	18	-7	5	-2	13	-5	..	31	32	63	128-8	8
11	-4	26	-1-3	..	..	15	-8	4	-02	11	-6	..	32	23	55	121-1	9
11	-1-0	12	-1-1	..	..	12	-1-1	2	-03	13	-1-2	..	41	30	71	188-8	10
25	-9	28	-1-0	..	..	61	-2-1	13	-4	19	-6	..	22	16	38	62-7	11
3	-3	21	-1-9	..	..	17	-1-6	7	-6	9	-8	..	17	20	37	100-8	12
1	-1	17	-0-6	1	-1	17	-2-6	4	-6	8	-1-2	..	11	14	25	173-6	13
6	-9	18	-0-8	1	-1	35	-5-4	3	-3	12	-1-8	..	15	16	31	191-5	14
7	-1-0	28	-4-2	5	-7	20	-3-0	2	-3	18	-2-7	..	12	6	18	138-4	15
12	-5	11	-2-9	1	-3	37	-9-8	1	-5	1	-3	..	14	3	17	186-8	16
4	-5	5	-6	..	..	6	-7	3	-4	7	-8	..	5	2	7	50-0	17
50	-1-7	39	-1-0	3	-1	48	-1-6	18	-6	25	-8	3	71	43	114	147-4	18
4	-6	..	..	..	..	14	-2-2	2	-3	4	-6	..	6	15	21	221-0	19
15	-1-9	10	-1-3	..	..	15	-1-9	4	-5	6	-8	3	12	17	29	141-4	20
54	-1-6	70	-2-1	7	-2	45	-1-3	15	-4	59	-1-5	1	50	43	93	134-2	21
25	-1-1	16	-7	1	-04	18	-8	12	-5	15	-6	..	45	33	78	297-4	22
12	-1-4	13	-1-5	1	-1	7	-8	5	-6	2	-2	..	16	11	27	138-4	23
3	-4	10	-1-5	1	-1	8	-1-2	..	..	3	-4	..	11	9	20	122-7	24
32	-1-9	19	-1-1	1	-1	..	..	20	-1-2	..	..	..	34	34	68	148-8	25
39	-1-8	9	-4	1	-04	8	-4	4	-2	23	-1-0	3	63	43	106	269-7	26
..	-2	37	-1-5	..	..	..	..	..	..	20	-8	..	12	17	29	106-6	27

fourteen days of labour.

Supplementary Annual Form No. VI A.—Deaths registered from DIFFERENT

1	2	3		4		5		6		7		8	
		Malaria.		Enteric Fever.		Measles.		Relapsing Fever.		Kala-Azar.		Other Fevers.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	TOWNS—contd.												
	HOWRAH DISTRICT.												
28	Howrah	243	1.2	103	.5	..	..	..	..	108	.5	629	2.3
29	Bally	33	1.4	..	..	1	.04	..	.01	1	.04	65	2.6
	24-PARGANAS DISTRICT.												
30	South Suburban ..	86	2.6	..	..	1	.03	..	..	12	.4	174	5.2
31	Tollyganj	18	.8	21	1.0	..	..	1	.04	..	..	105	4.8
32	Budge-Budge	9	.3	..	..	..	..	..	..	10	.4	159	5.8
33	Baranagar	22	.7	6	.2	5	.1	..	..	23	.7	112	3.5
34	Kamarkhat	10	.4	..	..	..	..	..	..	3	.1	83	3.6
35	Rajpur	27	2.4	1	.1	..	..	1	.1	7	.6	57	5.0
36	Barnipur	55	10.7	1	.2	..	..	..	..	..	..	3	.6
37	Jaynagar	35	4.2	14	1.7	8	.9	15	1.8	5	.6	40	4.7
38	North Dum Dum ..	30	3.6	..	..	1	.1	..	..	6	.7	21	2.5
39	South Dum Dum ..	33	2.3	4	.3	..	..	..	..	2	.1	27	1.9
40	Khardah	..	..	..	..	..	..	..	..	..	..	34	6.2
41	Barrakpur	47	12.1	..	..	1	.04	..	..	1	.04	20	.9
42	Pandhati	30	12.9	12	1.2	..	..	12	1.2	17	1.7	12	1.2
43	North Barrakpur ..	31	12.0	11	.7	..	..	..	..	13	.8	45	2.9
44	Titagarh	10	.12	1	.02	..	..	..	..	..	..	482	9.2
45	Garulia	88	6.7	..	..	..	..	..	..	..	..	..	..
46	Naihati	11	.5	1	.04	1	.04	..	..	1	.04	49	2.1
47	Halisahar	52	7.1	..	..	..	..	..	..	12	.3	6	.8
48	Kanchrapara	22	2.1	5	.5	..	..	15	1.5	..	..	12	1.2
49	Bhatpara	62	.9	17	.3	..	..	..	..	7	.1	572	8.7
50	Barasat	51	6.2	..	.2	..	..	..	..	8	1.0	9	1.1
51	Gobardanga	47	9.2	..	..	..	..	..	..	..	..	..	..
52	Basirhat	36	1.9	23	1.2	1	.05	..	..	60	3.1	86	4.5
53	Baduria	87	6.2	..	..	..	..	..	..	122	1.6	57	4.0
54	Taki	18	3.5	..	..	..	..	..	..	4	.8	50	9.6
	CITY OF CALCUTTA.												
55	Calcutta	2,011	1.9	613	.6	67	.1	..	..	823	.8	1,030	1.8
	NADIA DISTRICT.												
56	Krishnagar	108	4.8	2	.1	1	.05	7	.3	6	.3	49	2.12
57	Navadwip	111	7.1	..	..	..	..	..	..	4	.2	3	.2
58	Ranaghat	83	8.6	..	..	..	..	..	..	1	.1	..	..
59	Birnagar	26	11.3	..	..	1	.4	..	..	1	.4	..	..
60	Santipur	76	3.1	..	..	2	.1	..	..	7	.3	162	6.5
61	Chakdaha	85	16.3	..	..	..	..	15	2.9	..	..	..	..
62	Kushtia	8	1.0	..	..	..	..	..	..	4	.5	26	3.3
63	Kumarkhali	16	4.2	5	1.3	1	.3	..	..	3	.8	32	8.5
64	Meherpur	40	7.4	..	..	5	.9	9	1.7	..	..	22	4.1
	MURSHIDABAD DISTRICT.												
65	Berhampur	135	5.1	14	.5	1	.04	1	.04	14	.5	89	3.3
66	Murshidabad	8	.7	2	.2	..	..	..	..	1	.1	267	25.0
67	Azimganj	133	11.8	..	..	..	..	..	..	1	.1	4	.3
68	Kandi	2	.2	..	..	..	..	..	..	..	..	116	9.8
69	Jangipur	..	..	1	.1	..	..	..	..	1	.1	89	8.3
70	Dhulian	105	12.4	..	..	..	..	..	..	..	..	1	.1
	JESSORE DISTRICT.												
71	Jessore	79	7.8	1	.1	..	..	..	..	24	2.4	2	.2
72	Kotechandpur	75	9.9	..	..	..	..	..	..	1	.1	..	..
73	Maheshpur	52	14.4	..	..	..	..	..	..	..	..	1	.3
	KHULNA DISTRICT.												
74	Khulna	66	4.1	..	..	2	.1	..	..	16	1.0	35	2.2
75	Satkhira	70	6.8	..	..	..	..	..	..	3	.3	43	4.2
76	Debhata	11	2.0	..	..	..	..	6	1.1	16	2.9	12	2.1
	RAJSHAHI DISTRICT.												
77	Rajshahi	50	2.0	3	.1	..	..	4	.2	56	2.3	111	4.5
78	Nator	64	8.0	..	..	3	.4	..	..	7	.9	29	3.6
	DINAJPUR DISTRICT.												
79	Dinajpur	5	.3	..	..	..	..	..	..	8	.4	101	5.6
	JALPAIGURI DISTRICT.												
80	Jalpaiguri	113	7.8	..	..	..	..	..	..	..	..	..	..

* Deaths during or within

CAUSES in the districts and towns of the Bengal Presidency during the year 1925—continued.

9		10		11		12		13		14		15	16			17	18
Dysentery.		Diarrhoea.		Influenza.		Pneumonia.		Phthisis.		Other respira- tory diseases.		Deaths from child-birth.	Deaths under one year.			Infant mortality rate.	Number.
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
507	2.6	254	1.3	..	..	929	4.7	167	.8	689	3.5	36	721	678	1,399	291.2	28
23	1.0	14	.6	1	.04	18	.8	16	.7	18	.8	..	35	22	57	130.4	29
15	.4	51	1.5	1	.03	57	1.7	21	.6	22	.7	1	40	45	85	86.6	30
17	.8	16	.7	..	..	19	.9	2	.1	24	1.1	..	28	40	68	137.3	31
87	3.4	28	1.1	1	.04	3	.1	5	.2	21	.8	..	8	10	18	64.3	32
121	3.8	32	1.6	1	.1	66	2.0	30	.9	30	.9	3	75	69	144	178.6	33
52	2.3	13	.6	8	.3	14	.6	4	.2	3	.1	..	20	15	35	108.7	34
14	1.2	12	.7	..	..	24	1.1	4	.3	8	.7	1	21	20	41	164.5	35
3	.6	12	.7	..	..	14	.7	1	.2	12	.4	1	5	6	11	166.6	36
10	1.2	6	.7	..	..	3	.3	5	.6	16	1.0	..	11	14	25	203.2	37
8	1.0	5	.6	..	..	27	3.3	..	..	5	.6	..	13	9	22	244.4	38
30	2.1	5	.3	..	..	16	1.1	11	.8	15	1.1	1	18	21	39	126.6	39
9	1.6	..	..	..	..	1	.2	..	..	11	2.0	..	5	6	11	114.6	40
12	.5	3	.1	1	.04	14	.6	2	.1	10	.4	..	13	13	26	133.3	41
16	1.6	14	1.4	..	..	23	2.3	5	.5	5	.5	2	21	22	43	172.0	42
25	1.6	7	.4	1	.1	25	1.6	4	.3	20	1.2	4	15	24	39	118.9	43
3	.05	16	.3	..	..	1	.02	2	.04	9	1.0	..	73	55	128	165.8	44
20	1.5	..	..	1	.1	1	.1	..	..	13	1.0	..	16	15	31	177.1	45
10	.4	15	.6	..	..	21	.9	8	.3	4	.2	..	16	16	32	105.6	46
11	1.5	1	.1	..	..	19	2.6	3	.3	8	1.1	..	13	9	22	164.1	47
6	.6	..	..	..	..	6	.6	3	.3	3	.3	1	12	8	20	86.5	48
31	.5	35	.5	22	.3	81	1.2	23	.3	21	.3	7	150	66	216	205.3	49
6	.7	2	.2	..	..	16	1.9	2	.2	7	.8	..	4	9	13	108.2	50
..	..	..	..	..	..	..	..	3	.6	..	..	..	1	1	2	54.0	51
11	.6	7	.4	..	..	50	2.6	12	.6	1	.05	1	37	33	70	155.5	52
2	.1	9	.6	..	..	10	.7	2	.1	12	.1	..	12	11	23	132.2	53
5	1.0	1	.2	..	..	1	.2	5	1.0	12	2.3	..	24	12	36	214.3	54
1,971	1.8	1,161	1.1	551	.5	3,830	3.5	2,460	2.3	3,031	2.8	93	3,558	3,079	6,637	326.2	55
16	.7	1	.04	7	.3	21	.9	6	.3	13	.6	3	34	15	49	165.1	56
40	2.6	6	.4	..	..	6	.4	..	..	10	.6	..	22	18	40	191.4	57
10	1.0	7	.7	..	..	11	1.1	6	.6	..	..	1	21	13	34	132.3	58
..	..	..	..	..	..	2	.9	1	.4	..	..	..	10	5	15	277.7	59
12	.5	11	.4	..	..	35	1.4	21	.8	16	.6	8	81	75	156	165.0	60
6	1.1	..	..	..	..	18	3.4	3	.6	..	..	..	6	12	18	160.7	61
7	.9	10	1.3	..	..	4	.5	3	.4	2	.2	1	5	8	13	105.7	62
10	2.6	5	1.3	1	.3	13	3.4	3	.8	7	1.9	..	9	6	15	234.3	63
1	.2	..	..	..	..	1	.2	1	.2	4	.7	..	19	19	38	269.5	64
37	1.4	9	.3	..	..	34	1.3	12	.4	20	.7	2	63	50	113	203.2	65
27	2.5	10	.6	..	..	10	.9	1	.1	..	..	..	41	32	73	206.2	66
12	1.1	5	.4	..	..	8	.7	7	.6	2	.2	..	42	22	64	182.8	67
3	.2	5	.4	..	..	7	.6	1	.1	6	.5	..	31	25	56	188.5	68
15	1.4	5	.5	..	..	5	.5	5	.5	..	..	2	10	12	22	57.6	69
5	.6	12	.2	..	..	..	..	3	.3	..	..	1	20	19	39	161.8	70
21	2.1	1	.1	1	.1	15	1.5	1	.1	5	.5	..	5	5	10	97.1	71
2	.3	1	.1	2	.3	3	.4	..	..	..	..	..	8	8	16	160.0	72
..	..	..	..	..	..	2	.5	..	..	..	..	..	7	6	13	342.1	73
19	1.2	4	.2	..	..	7	.4	3	.2	2	.1	..	7	6	13	87.8	74
6	.6	1	.1	..	..	12	1.2	1	.1	4	.4	..	14	13	27	200.0	75
11	2.0	1	.2	9	1.6	..	..	3	.5	15	2.7	..	5	4	9	125.0	76
45	1.8	3	.1	1	.04	10	.4	10	.4	4	.2	..	50	47	97	177.0	77
8	1.0	4	.5	..	..	22	2.7	6	.7	6	.7	..	22	22	44	248.5	78
26	1.4	2	.1	6	.3	26	1.4	2	.1	11	.6	..	16	11	27	126.2	79
27	1.9	12	.8	..	..	..	..	..	..	50	3.4	..	2	1	3	19.0	80

fourteen days of labour.

Supplementary Annual Form No. VI A.—Deaths registered from DIFFERENT

1	2	3		4		5		6		7		8	
		Malaria.		Enteric Fever.		Measles.		Relapsing Fever.		Kala-Azar.		Other Fevers.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	DARJEELING DISTRICT.												
81	Darjeeling	23	1.0	..	..	1	.04	..	..	4	.5	65	2.0
82	Kurseong	13	2.0	..	..	..	..	..	..	3	.5	82	12.7
	RANGPUR DISTRICT.												
83	Rangpur	59	3.1	2	.1	..	..	1	.05	26	1.4	19	1.0
84	Gaibandha	5	.8	1	.2	..	..	..	..	9	1.5	16	2.6
	BOGRA DISTRICT.												
85	Bogra	7	.6	1	.1	..	..	..	..	11	.9	41	3.3
86	Sherpur	36	9.0	..	..	..	..	..	..	13	3.3	..	..
	PAUNA DISTRICT.												
87	Pauna	114	5.9	..	..	..	..	..	..	..	..	..	..
88	Sirajganj	396	15.5	..	..	..	..	..	..	..	..	..	..
	MALDA DISTRICT.												
89	English Bazar ..	62	4.4	..	..	..	..	..	..	6	.4	34	2.4
90	Malda	53	16.8	..	..	..	..	..	..	..	..	..	..
91	Nawabganj	43	3.4	..	..	..	..	..	..	..	..	54	4.3
	DACCA DISTRICT.												
92	Dacca	25	.2	29	.2	38	.3	..	..	218	1.8	621	5.2
93	Narayanganj ..	10	.3	3	.1	13	.4	..	..	4	.1	283	9.2
	MYMENSINGH DISTRICT.												
94	Mymensingh ..	4	.1	..	..	2	.1	..	..	7	.3	233	9.2
95	Muktagacha ..	1	.1	..	..	..	..	..	..	2	.3	36	5.3
96	Netrakona ..	..	..	..	..	..	..	..	..	1	.1	66	7.6
97	Jamalpur	52	2.2	26	1.1	..	..	..	..	178	7.7	62	2.7
98	Sherpur	27	1.5	4	.2	..	..	1	.05	20	1.1	110	6.2
99	Kishoreganj ..	..	..	..	..	..	..	..	..	..	..	63	3.2
100	Bajitpur	2	.2	..	..	..	..	..	..	2	.2	55	4.7
101	Tangail	18	1.3	..	..	..	..	..	..	18	1.3	49	3.4
	FARIDPUR DISTRICT.												
102	Faridpur	79	5.4	..	..	..	..	..	..	11	.7	25	1.7
103	Madaripur ..	28	1.1	17	.7	1	.03	..	..	34	1.3	43	1.7
104	Rajbari	39	5.4	..	..	1	.1	2	.3	5	.7	15	2.1
	BAKARGANJ DISTRICT.												
105	Barisal	..	..	..	..	..	..	..	..	..	..	229	8.6
106	Jhalakati	..	..	..	..	..	..	..	..	3	.5	18	3.0
107	Nalchiti	1	.5	..	..	..	..	..	..	1	.5	10	5.3
108	Pirojpur	..	..	..	..	..	..	..	..	..	.1	51	3.7
109	Patuakhali ..	15	2.1	..	..	1	.1	..	..	12	1.7	43	6.1
110	Bhola	3	.7	..	..	..	..	..	..	1	.2	10	2.2
	CHITTAGONG DISTRICT.												
111	Chittagong ..	9	.2	2	.1	..	..	1	.03	..	..	117	3.2
112	Cox's Bazar ..	..	..	..	..	..	..	..	..	..	..	28	6.0
	NOAKHALI DISTRICT.												
113	Sadharan	..	..	..	..	..	..	27	3.5	17	2.2	13	1.7
	TIPPERA DISTRICT.												
114	Comilla	5	.2	2	.08	..	..	..	..	..	.1	41	1.6
115	Brahmanbaria ..	..	..	..	..	1	.04	..	..	..	.3	147	6.3
116	Chandpur	..	..	..	..	..	..	..	..	..	..	52	3.4
	Total of Towns ..	6,673	2.1	1,020	.3	168	.2	131	.04	2,051	.7	10,118	3.3
	TOTAL FOR THE BENGAL PRESIDENCY.	497,473	10.7	7,752	.2	1,146	.02	3,161	.1	16,766	.4	347,930	7.5

* Deaths during or within

CAUSES in the districts and towns of the Bengal Presidency during the year 1925—concluded.

9		10		11		12		13		14		15	16			17	18
Dysentery.		Diarrhoea.		Influenza.		Pneumonia.		Phthisis.		Other respiratory diseases.		Deaths from child-birth.	Deaths under one year.			Infant mortality rate.	Number.
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
5 16	2.2 5.5	12 1	.5 .1	7 15	.3 2.8	18 12	.8 1.9	47 26	2.1 4.0	44 5	2.0 .8	..	37 15	23 19	60 34	118.1 145.0	81 82
27 5	1.4 .8	8 8	.4 1.3	2 ..	.1 ..	14 6	.7 1.0	6 2	.3 .3	.. 1	.. .2	.. 1	14 7	15 2	29 9	96.0 219.5	83 84
4 11	.3 2.8	1 1	.1 .6	.. ..	.. ..	5 13	.4 3.3	5 ..	.4 ..	.. ..	.. ..	1 ..	11 14	16 5	27 19	200.0 339.2	85 86
26 46	1.3 1.8	.. 1	.. .04	1 1	.05 .04	.. ..	.. ..	.. ..	.. ..	6 21	.3 .8	.. ..	21 41	19 34	40 75	177.7 167.7	87 88
26 4 3	1.8 1.3 .2	9 10 ..	.6 3.2 ..	.. .. ..	.. .. ..	20 12 4	1.4 3.8 .3	4 .. 5	.3 .. .4	9 3 4	.6 .9 .3	.. .. ..	23 9 17	19 12 11	42 21 28	123.5 223.4 84.8	89 90 91
255 59	2.1 1.9	100 26	.8 .8	38 ..	.3 ..	277 22	2.3 .7	79 11	.7 .4	333 16	2.8 .5	48 13	491 170	401 98	892 268	222.0 267.2	92 93
15 1 6 18 14 10 13 13	.6 .. .7 .8 .8 .5 1.1 .9	21 .. 5 13 9 37 5 3	.8 .. .6 .6 .5 1.9 .4 .2	2 1	04	9 1 3 24 3 18	.3 .1 .3 1.0 .2 1.3	6 1 2 6 6 1 1 3	.2 .1 .2 .3 .3.....2	32 3 5 8 7 21 5 ..	1.3 .4 .6 .3 .4 1.1 .4 ..	2 11 1 ..	60 7 15 33 21 22 15 24	46 2 14 33 30 9 7 17	106 9 29 66 51 31 22 41	236.0 70.3 133.0 151.3 117.8 109.5 130.9 131.4	94 95 96 97 98 99 100 101
9 23 4	.6 .9 .5	2 7 ..	.1 .3 ..	.. .. ..	.. .. ..	12 9 4	.8 .3 .5	 1	 1	4 12 2	.3 .5 .3	 1	11 23 2	10 21 11	21 54 13	98.1 115.9 228.1	102 103 104
45 12 4 1 13 2	1.7 2.0 2.1 1.1 1.8 .4	4 2 1 3 1 ..	.1 .3 .5 .2 1 ..	.. .. .. .. .. ..	.. .. 1.1	.. 5 4 5 2 ..	.. .8 2.1 .4 .3 ..	.. 1 .. 1	.. .2 .. 1	.. 3 .. 1	.3 .5	 3 1 1	50 5 4 27 12 3	35 2 3 7 8 2	85 7 200 34 169.5 208.3	457.0 159.1 200 125 169.5 208.3	105 106 107 108 109 110
27 1	.7 .2	1 ..	.02 ..	.. ..	.. ..	17 ..	.5 ..	2 ..	.05 ..	6 1	.2 .2	.. ..	52 5	48 3	100 8	163.9 89.9	111 112
8	1.0	3	.4	..	..	..	..	1	.1	6	.8	..	3	7	10	114.9	113
16 37 5	.6 1.6 .3	5 18 7	.2 .8 .5	.. .. ..	.. .. ..	1 3 ..	.04 .1 ..	.. 2 ..	.. .1 ..	4 31 4	.1 1.3 .3	.. .. ..	17 66 19	13 48 22	30 114 41	116.3 157.2 234.3	114 115 116
4,521	1.5	2,635	.8	732	.2	6,611	2.1	3,277	1.1	5,134	1.7	291	7,531	6,369	13,900	226.2	
13,564	.3	8,272	.2	1,901	.04	11,259	.2	6,079	.1	8,086	.2	2,790	133,213	116,369	249,582	181.2	

fourteen days of labour.

ANNUAL FORM No. VII.—Deaths registered from CHOLERA in the

1	2	3		4		5					
		Circles of Registration.		Villages.		January.	February.	March.	April.	May.	June.
		Number in each district.	Number from which deaths from cholera were reported.	Number in each district.	Number from which deaths from cholera were reported.						
	<i>Burdwan Division.</i>										
1	Burdwan	29	28	2,817	238	3	13	51	24	73	43
2	Birbhum	10	8	2,302	90	4	..	5	20	9	5
3	Bankura	22	20	4,003	101	10	15	36	14	18	16
4	Midnapur	33	32	10,351	575	41	142	301	148	119	63
5	Hooghly	27	25	2,197	180	37	23	95	67	61	36
6	Howrah	13	13	863	66	6	18	60	148	150	68
	<i>Presidency Division.</i>										
7	24 Parganas ..	61	58	3,427	721	311	253	215	129	128	41
8	Calcutta	1	1*	1	1*	56	75	98	212	219	52
9	Nadia	30	27	2,353	139	11	18	12	10	23	2
10	Murshidabad ..	33	30	1,974	138	8	20	6	34	3	3
11	Jessore	22	21	3,613	310	161	168	161	495	274	21
12	Khulna	26	25	2,011	213	139	57	64	66	19	14
	<i>Rajshahi Division.</i>										
13	Rajshahi	26	23	4,487	322	57	36	107	168	122	57
14	Dinajpur	31	15	6,612	27	5	4	22	9	12	10
15	Jalpaiguri	18	13	722	36	3	1	4	16	28	24
16	Darjeeling	6	1	304	7	..	..	1	1	18	4
17	Rangpur	32	29	4,102	326	560	223	86	207	290	620
18	Bogra	14	14	2,780	163	88	16	19	61	50	17
19	Pabna	19	18	2,539	230	..	1	8	98	239	28
20	Makda	18	8	2,239	20	..	1	..	..	4	..
	<i>Dacca Division.</i>										
21	Dacca	14	14	4,737	607	563	284	298	625	131	35
22	Mymensingh ..	59	59	7,354	1,116	1,006	313	191	775	542	181
23	Faridpur	17	16	3,363	395	118	105	266	298	21	11
24	Bakarganj	22	21	2,990	211	331	148	341	278	101	16
	<i>Chittagong Division.</i>										
25	Chittagong	22	22	870	186	67	120	440	343	278	131
26	Noakhali	15	15	1,719	217	217	178	444	224	112	46
27	Tippera	15	15	4,018	951	555	591	900	685	386	88
	Total for the Bengal Presidency.	635	571	84,748	7,586	4,357	2,823	4,231	5,155	3,430	1,632

*The whole town.

districts of the Bengal Presidency during each month of the year 1925.

						6			7			8	9
July.	August.	Septem-ber.	October.	Novem-ber.	Decem-ber.	Total.			Ratio of deaths per 1,000 of population.			Mean ratio per 1,000 during previous five years.	Number.
						Male.	Female.	Total.	Male.	Female.	Total.		
41	18	7	18	51	46	203	185	388	·3	·3	·3	·8	1
13	20	6	4	4	13	55	48	103	·1	·1	·1	·6	2
41	96	77	4	19	3	174	175	349	·3	·3	·3	·6	3
145	156	127	53	38	213	816	730	1,546	·6	·5	·6	1·4	4
27	39	23	19	50	81	313	245	558	·5	·5	·5	·8	5
68	51	58	131	144	129	585	446	1,031	1·1	1·0	1·0	1·6	6
61	68	44	64	144	432	1,033	857	1,890	·8	·7	·8	2·2	7
36	30	22	32	100	64	670	326	996	·9	·9	·9	1·4	8
2	1	2	325	1,103	483	985	1,007	1,992	1·3	1·4	1·3	·9	9
3	14	55	97	164	139	286	260	546	·4	·4	·4	·5	10
19	3	2	17	100	106	808	719	1,527	·9	·9	·9	1·5	11
7	5	5	7	65	122	320	250	570	·4	·4	·4	1·3	12
29	..	21	267	624	213	886	815	1,701	1·1	1·1	1·1	1·3	13
2	2	..	3	54	4	71	56	127	·1	·1	·1	·3	14
36	5	5	13	5	3	78	65	143	·1	·1	·1	·7	15
..	6	..	..	..	..	11	19	30	·1	·1	·1	·01	16
218	121	77	78	238	157	1,493	1,382	2,875	1·1	1·2	1·1	·8	17
..	6	2	5	35	46	183	162	345	·3	·3	·3	1·1	18
3	8	30	123	362	141	572	469	1,041	·8	·7	·7	1·3	19
20	16	..	5	12	..	40	18	58	·1	·04	·1	·3	20
12	8	9	83	502	551	1,632	1,469	3,101	1·0	·9	1·0	1·7	21
41	22	·6	23	130	209	1,716	1,723	3,439	·7	·7	·7	1·8	22
17	1	13	166	430	382	956	872	1,828	·8	·8	·8	·9	23
3	2	..	7	63	211	817	684	1,501	·6	·5	·6	1·2	24
63	43	46	61	99	67	850	908	1,758	1·1	1·1	1·1	·2	25
19	6	2	4	26	108	686	700	1,386	·9	·9	·9	1·3	26
17	12	8	22	69	114	1,763	1,684	3,447	1·2	1·2	1·2	1·3	27
943	759	647	1,631	4,631	4,037	18,002	16,274	34,276	·7	·7	·7	1·2	

ANNUAL FORM No. VIII.—Deaths registered from SMALL-POX in the districts

1 Number.	2 Districts.	3 Circles of Registration.		4 Villages.		5						
		Number in each district.	Number from which deaths from small-pox were reported.	Number in each district.	Number from which deaths from small-pox were reported.	January.	February.	March.	April.	May.	June.	July.
	<i>Burdwan Division.</i>											
1	Burdwan ..	29	29	2,817	437	81	116	307	251	167	148	97
2	Birbhum ..	10	8	2,302	150	8	16	16	26	24	14	22
3	Bankura ..	22	22	4,003	209	16	13	52	92	99	112	71
4	Midnapur ..	33	30	10,351	490	42	65	152	219	166	134	136
5	Hooghly ..	27	26	2,197	165	64	74	183	217	174	163	70
6	Howrah ..	13	13	863	42	50	122	380	418	271	202	114
	<i>Presidency Division.</i>											
7	24-Parganas ..	61	58	3,427	433	202	308	383	335	250	138	106
8	Calcutta ..	1	1*	1	1*	252	682	1,474	981	331	96	35
9	Nadia ..	30	25	2,353	75	7	19	39	56	55	26	6
10	Murshidabad ..	33	23	1,974	114	2	6	9	38	18	39	31
11	Jessore ..	22	18	3,613	83	7	10	46	46	35	31	10
12	Khulna ..	26	19	2,011	49	5	12	30	27	16	1	3
	<i>Rajshahi Division.</i>											
13	Rajshahi ..	26	17	4,487	24	3	4	8	12	7	3	8
14	Dinajpur ..	31	19	6,612	102	..	4	29	34	66	74	28
15	Jalpaiguri ..	18	4	722	4	..	1	1	2	..	2	..
16	Darjeeling ..	6	3	304	11	..	..	..	11	5	1	1
17	Rangpur ..	32	21	4,102	103	1	14	22	55	58	61	53
18	Bogra ..	14	13	2,780	212	14	19	33	97	69	32	32
19	Pabna ..	19	13	2,539	98	9	9	22	31	43	21	8
20	Malda ..	18	15	2,239	104	40	50	34	31	13	17	11
	<i>Dacca Division.</i>											
21	Dacca ..	14	13	4,737	225	24	73	128	169	131	83	48
22	Mymensingh ..	59	35	7,354	213	43	26	70	65	67	45	26
23	Faridpur ..	17	15	3,363	87	11	12	33	50	34	43	6
24	Bakarganj ..	22	15	2,990	41	6	7	34	23	13	9	13
	<i>Chittagong Division.</i>											
25	Chittagong ..	22	14	870	80	22	41	54	32	31	7	11
26	Noakhali ..	15	11	1,719	71	8	12	28	33	36	34	20
27	Tippera ..	15	14	4,018	76	3	8	20	47	37	36	23
	Total for the Bengal Presidency.	635	494	84,748	3,699	920	1,723	3,587	3,398	2,216	1,572	989

* The whole town.

of the Bengal Presidency during each month of the year 1925. JAUNTA

					6			7		8			9	10
August.	Septem-ber.	October.	Novem-ber.	Decem-ber.	Total.			Number of those deaths among children.		Ratio of deaths per 1,000 of population.			Mean ratio per 1,000 during previous five years.	Number.
					Male.	Female.	Total.	Under one year.	One year and under ten years.	Male.	Fe-male.	Total.		
71	55	60	53	97	758	745	1,503	84	244	1.0	1.0	1.0	.2	1
21	8	12	15	21	107	96	203	6	10	.2	.2	.2	.2	2
36	15	7	19	20	277	275	552	43	160	.5	.5	.5	.1	3
104	52	19	47	104	644	596	1,240	68	212	.5	.4	.5	.3	4
59	20	11	21	49	583	522	1,105	3	12	1.0	1.0	1.0	.3	5
107	42	35	15	79	1,033	802	1,835	68	256	1.9	1.7	1.8	.4	6
97	59	48	56	140	1,191	931	2,122	152	495	.9	.8	.9	.3	7
26	10	5	9	22	2,185	1,738	3,923	505	1,524	3.0	4.9	3.6	.7	8
11	7	4	18	31	142	137	279	..	..	.2	.2	.2	.2	9
12	16	9	62	113	155	200	355	49	108	.2	.3	.3	.4	10
14	4	13	14	25	134	121	255	..	3	.1	.1	.1	.1	11
1	..	..	2	..	58	39	97	8	10	.1	.05	.1	.03	12
..	..	3	1	2	28	23	51	1	10	.03	.03	.03	.2	13
37	2	..	7	5	143	143	286	..	15	.2	.2	.2	.3	14
..	..	..	..	..	4	2	6	..	..	.01	.004	.01	.7	15
..	..	..	..	..	12	6	18	..	..	.1	.04	.1	.02	16
26	22	16	10	23	207	154	361	1	9	.1	.1	.1	.2	17
15	2	9	10	39	183	188	371	21	77	.3	.4	.3	.5	18
14	6	15	22	36	131	105	236	..	..	.2	.1	.2	.1	19
3	..	2	7	27	119	116	235	14	33	.2	.2	.2	.2	20
33	9	16	11	23	419	329	748	..	..	.3	.2	.2	.4	21
13	5	10	37	35	216	226	442	..	..	.1	.1	.1	.3	22
5	7	3	11	5	126	94	220	8	28	.1	.1	.1	.2	23
5	..	..	..	..	75	35	110	3	2	.05	.02	.04	.05	24
23	22	1	88	10	173	169	342	44	109	.2	.2	.2	.3	25
23	9	11	16	50	136	144	280	5	10	.2	.2	.2	.1	26
20	30	17	11	9	147	114	261	..	..	.1	.1	.1	.1	27
776	402	326	562	965	9,386	8,050	17,436	1,083	3,327	.4	.3	.4	.3	

ANNUAL FORM No. IX.—Deaths registered from FEVERS in the districts

1	2	3		4		5					
Number.	Districts.	Circles of Registration.		Villages.		January.	February.	March.	April.	May.	June.
		Number in each district.	Number from which deaths from fevers were reported.	Number in each district.	Number from which deaths from fevers were reported.						
<i>Burdwan Division.</i>											
1	Burdwan	29	29	2,817	2,645	2,274	1,750	2,503	2,008	1,576	1,660
2	Birbhum	10	10	2,302	2,100	1,124	1,096	1,696	1,356	989	1,191
3	Bankura	22	22	4,003	3,905	1,284	1,089	1,432	1,537	1,218	1,125
4	Midnapur	33	33	10,351	10,287	3,971	3,435	4,550	3,628	2,694	2,733
5	Hooghly	27	27	2,197	2,075	1,773	1,552	1,863	1,185	1,235	1,222
6	Howrah	13	13	863	743	904	610	815	784	772	611
<i>Presidency Division.</i>											
7	24 Parganas	61	61	3,427	3,033	4,214	3,333	3,334	2,558	2,574	2,094
8	Calcutta	1	1*	1	1*	406	436	527	462	456	385
9	Nadia	30	30	2,353	2,149	2,731	2,444	2,265	1,996	2,381	1,923
10	Murshidabad	33	33	1,974	1,860	1,502	1,487	1,928	1,742	1,481	1,655
11	Jessore	22	22	3,613	3,432	4,004	3,066	2,982	2,530	2,598	2,388
12	Khulna	26	26	2,011	1,918	2,303	1,934	1,822	1,536	1,411	1,533
<i>Rajshahi Division.</i>											
13	Rajshahi	26	26	4,487	4,035	3,571	3,011	3,593	2,801	2,558	3,813
14	Dinaipur	31	31	6,612	6,475	3,773	3,774	4,600	3,797	3,548	4,548
15	Jalpaiguri	18	18	722	685	1,715	1,274	1,810	1,372	2,049	2,339
16	Darjeeling	6	6	304	242	448	455	578	633	673	644
17	Rangpur	32	32	4,102	3,978	6,173	4,582	5,273	4,523	5,114	6,174
18	Bogra	14	14	2,780	2,147	2,059	1,636	1,469	2,063	1,613	1,379
19	Pabna	19	19	2,539	2,017	2,689	2,290	2,843	2,242	2,152	2,329
20	Malda	18	18	2,239	2,089	1,269	1,033	1,650	1,455	1,182	1,626
<i>Dacca Division.</i>											
21	Dacca	14	14	4,737	4,633	4,593	3,870	3,547	3,194	2,974	2,891
22	Mymensingh	59	59	7,354	7,035	7,439	6,124	6,007	5,374	5,539	6,456
23	Faridpur	17	17	3,363	3,045	4,267	2,960	3,584	2,769	2,768	2,653
24	Bakarganj	22	22	2,990	2,781	5,237	3,965	4,502	2,999	2,811	2,666
<i>Chittagong Division.</i>											
25	Chittagong	22	22	870	974	3,097	2,607	3,220	2,141	2,093	3,047
26	Noakhali	15	15	1,719	1,593	3,060	2,600	2,641	2,177	2,033	2,455
27	Tippera	15	15	4,018	3,845	3,832	2,803	2,553	2,402	2,567	2,271
Total for the Bengal Presidency.		635	635	84,748	79,722	79,712	65,216	73,587	61,264	59,059	63,821

* The whole Town.

of the Bengal Presidency during each month of the year 1925.

						6			7			8	9
July.	August.	Septem- ber.	October.	Novem- ber.	Decem- ber.	Total.			Ratio of deaths per 1,000 of population.			Mean ratio per 1,000 during previous five years.	Number.
						Male.	Female.	Total.	Male.	Female.	Total.		
1,398	1,752	1,511	2,213	2,912	3,362	12,681	12,238	24,919	17.3	17.3	17.3	24.1	1
958	1,191	997	1,342	1,805	2,218	8,176	7,787	15,963	19.3	18.3	18.8	28.1	2
980	1,154	1,000	1,055	1,498	1,689	7,511	7,550	15,061	14.7	14.8	14.8	21.6	3
2,757	3,347	3,272	3,482	4,062	4,897	21,705	21,123	42,828	16.2	15.9	16.1	20.3	4
891	1,472	1,323	1,628	2,438	2,315	9,602	9,205	18,807	17.1	17.9	17.5	20.4	5
608	743	861	1,027	1,262	1,462	5,591	4,868	10,459	10.4	10.5	10.5	12.6	6
2,148	3,028	2,591	3,424	4,086	4,236	20,231	17,389	37,620	15.3	15.3	15.3	18.4	7
381	476	462	458	522	482	2,922	2,531	5,453	4.0	7.2	5.1	3.9	8
1,599	2,183	2,439	4,441	7,557	7,616	20,034	19,541	39,575	26.3	26.9	26.6	27.4	9
1,402	2,194	2,755	4,004	4,999	4,792	15,013	14,928	29,941	23.9	23.5	23.7	25.5	10
2,476	2,813	2,936	4,735	5,874	6,425	22,790	20,037	42,827	25.5	24.2	24.9	24.7	11
1,602	2,028	2,029	2,180	3,297	3,018	13,074	11,619	24,693	17.3	16.7	17.0	18.4	12
3,217	3,625	3,711	5,207	6,199	6,363	25,474	22,195	47,669	33.2	30.7	32.0	31.9	13
3,544	4,257	4,436	4,269	5,281	6,459	27,768	24,518	52,286	31.0	30.3	30.7	31.6	14
1,801	1,529	1,604	2,171	2,201	2,185	11,951	10,099	22,050	23.7	23.3	23.5	24.2	15
514	538	463	528	511	492	3,555	2,922	6,477	23.8	21.9	22.9	26.8	16
5,050	4,356	4,951	6,624	7,671	8,765	37,683	31,573	69,256	28.6	26.5	27.6	26.4	17
1,604	1,674	1,053	2,369	2,283	2,039	11,504	9,737	21,241	21.3	19.1	20.3	25.3	18
1,821	1,728	1,768	2,936	3,341	3,515	16,071	13,593	29,664	22.7	19.9	21.3	24.9	19
1,393	1,778	2,364	2,781	3,692	4,074	12,476	11,821	24,297	25.3	24.0	24.6	22.3	20
2,812	2,843	2,975	3,523	5,803	5,444	23,983	20,486	44,469	15.2	13.2	14.2	17.2	21
5,489	5,046	5,495	6,251	7,961	9,379	41,180	35,380	76,560	16.4	15.2	15.8	18.0	22
2,623	2,840	3,017	3,984	5,113	5,711	22,685	19,604	42,289	19.8	17.8	18.8	21.8	23
2,699	2,545	2,779	3,008	4,038	4,882	22,999	19,132	42,131	17.1	14.9	16.0	18.4	24
2,505	2,224	1,931	1,828	2,364	2,463	15,354	14,166	29,520	19.7	17.0	18.3	23.6	25
2,035	1,773	1,831	1,522	2,028	2,591	13,898	12,848	26,746	18.8	17.5	18.2	19.8	26
2,090	2,326	2,147	2,691	2,887	2,768	17,032	14,305	31,337	12.1	10.7	11.4	13.4	27
56,397	61,463	62,701	79,681	101,685	109,642	462,943	411,285	874,228	19.2	18.3	18.8	21.2	

ANNUAL FORM No. X.—Deaths registered from DYSENTERY AND DIARRHŒA

1 Number.	2 Districts.	3 Circles of Registration.		4 Villages.		5 Months.					
		Number in each district.	Number from which deaths from dysentery and diarrhœa were reported.	Number in each district.	Number from which deaths from dysentery and diarrhœa were reported.	January.	February.	March.	April.	May.	June.
	<i>Burdwan Division.</i>										
1	Burdwan	29	28	2,817	347	46	31	64	51	40	31
2	Birbhum	10	10	2,302	90	11	5	5	8	12	9
3	Bankura	22	22	4,003	343	46	61	80	50	68	79
4	Midnapur	33	33	10,351	644	86	114	138	78	-79	84
5	Hooghly	27	27	2,197	479	122	97	178	89	86	88
6	Howrah	13	13	863	803	235	203	232	218	204	171
	<i>Presidency Division.</i>										
7	24 Parganas ..	61	57	3,427	431	165	125	110	89	76	79
8	Calcutta	1	1*	1	1*	318	257	281	256	222	194
9	Nadia	30	29	2,353	80	14	21	28	34	65	26
10	Murshidabad ..	33	26	1,974	66	8	11	19	15	9	12
11	Jessore	22	18	3,613	101	10	8	6	11	7	3
12	Khulna	26	24	2,011	100	18	15	9	14	11	9
	<i>Rajshahi Division.</i>										
13	Rajshahi	26	22	4,487	128	5	9	13	3	8	28
14	Dinajpur	31	20	6,612	61	3	2	7	11	11	7
15	Jalpaiguri	18	16	722	268	42	28	52	41	78	134
16	Darjeeling	6	6	304	210	11	12	37	60	68	138
17	Rangpur	32	23	4,102	158	10	3	13	14	13	20
18	Bogra	14	14	2,780	173	14	14	11	31	16	19
19	Pabna	19	17	2,539	68	6	2	12	22	25	25
20	Malda	18	8	2,239	15	3	3	3	4	7	6
	<i>Dacca Division.</i>										
21	Dacca	14	14	4,737	521	247	210	132	183	155	146
22	Mymensingh ..	59	59	7,354	654	81	49	54	144	90	83
23	Faridpur	17	17	3,363	309	86	54	56	36	47	41
24	Bakarganj	22	22	2,990	302	105	92	95	61	58	43
	<i>Chittagong Division.</i>										
25	Chittagong	22	20	870	153	41	26	44	29	19	41
26	Noakhali	15	13	1,719	211	47	23	28	30	19	26
27	Tippera	15	15	4,018	950	235	140	170	142	133	80
	Total for the Bengal Presidency.	635	574	84,748	7,646	2,015	1,615	1,877	1,724	1,626	1,622

* The whole town.

in the districts of the Bengal Presidency during each month of the year 1925.

July.	August.	Septem-ber.	October.	Novem-ber.	Decem-ber.	6			7			8	9
						Total.			Ratio of deaths per 1,000 of population.			Mean ratio per 1,000 during previous five years.	Number.
						Male.	Female.	Total.	Male.	Female.	Total.		
35	42	49	51	80	81	329	272	601	·4	·4	·4	·6	1
4	27	10	1	..	4	52	44	96	·2	·1	·2	·1	2
56	71	72	59	65	55	411	351	762	·7	·6	·7	·9	3
75	87	84	90	79	121	594	521	1,115	·5	·4	·4	·6	4
72	121	90	128	136	144	667	684	1,351	1·2	1·3	1·2	1·5	5
184	227	215	236	256	332	1,366	1,347	2,713	2·5	2·9	2·7	3·4	6
87	140	96	136	145	199	760	687	1,447	·5	·6	·5	·7	7
212	284	257	267	291	293	1,639	1,493	3,132	2·3	4·2	2·9	2·8	8
24	22	24	62	83	68	264	207	471	·4	·2	·3	·2	9
10	26	17	41	26	22	122	94	216	·1	·1	·1	·1	10
2	6	7	14	32	13	77	42	119	·1	·1	·1	·1	11
16	24	14	18	22	20	108	82	190	·1	·1	·1	·1	12
23	13	15	17	35	32	112	89	201	·1	·1	·1	·1	13
2	14	3	7	73	14	94	60	154	·1	·1	·1	·04	14
110	56	70	74	65	45	417	378	795	·8	·8	·8	1·0	15
96	88	47	48	32	18	365	290	655	2·4	2·2	2·3	2·3	16
22	19	19	22	21	5	105	76	181	·1	·1	·1	·1	17
14	11	9	14	8	13	103	71	174	·1	·1	·1	·2	18
12	11	5	15	17	8	102	58	160	·1	·1	·1	·1	19
4	8	3	8	6	7	34	28	62	·1	·1	·1	·1	20
120	152	144	365	384	407	1,451	1,194	2,645	·9	·8	·8	·7	21
73	68	40	116	211	170	611	568	1,179	·3	·2	·2	·3	22
32	45	50	39	71	83	342	298	640	·3	·2	·3	·3	23
54	34	32	35	51	73	426	307	733	·3	·2	·3	·3	24
25	16	14	15	32	45	191	156	347	·2	·1	·2	·2	25
13	7	9	11	10	35	140	118	258	·1	·1	·1	·2	26
75	53	72	102	132	105	818	621	1,439	·6	·4	·5	·5	27
1,452	1,672	1,467	1,991	2,363	2,412	11,700	10,136	21,836	·5	·4	·5	·5	

ANNUAL FORM No. XI. Deaths registered from RESPIRATORY DISEASE

1	2	3		4		5					
Number.	Districts.	Circles of registration.		Villages.		January.	February.	March.	April.	May.	June.
		Number in each district.	Number from which deaths from respiratory diseases were reported.	Number in each district.	Number from which deaths from respiratory diseases were reported.						
Burdwan Division.											
1	Burdwan	29	29	2,817	399	66	56	114	102	70	49
2	Birbhum	10	10	2,302	97	6	4	13	14	6	9
3	Bankura	22	22	4,003	277	46	73	98	96	75	67
4	Midnapur	33	33	10,351	619	121	112	166	186	121	78
5	Hooghly	27	27	2,197	252	114	102	139	78	58	99
6	Howrah	13	13	863	1,189	230	326	298	231	218	248
Presidency Division.											
7	24 Parganas ..	61	60	3,427	424	297	249	298	221	180	125
8	Calcutta	1	1*	1	1*	1,039	934	1,126	703	659	651
9	Nadia	30	30	2,353	65	45	36	52	41	32	17
10	Murshidabad ..	33	25	1,974	50	20	12	30	16	17	14
11	Jessore	22	22	3,613	164	25	38	29	29	16	11
12	Khulna	26	24	2,011	100	15	13	23	17	10	14
Rajshahi Division.											
13	Rajshahi	26	19	4,487	79	19	8	10	8	9	10
14	Dinajpur	31	27	6,612	72	17	22	21	11	12	21
15	Jalpaiguri	18	14	722	182	65	89	119	109	76	78
16	Darjeeling	6	6	304	284	41	55	41	39	39	45
17	Rangpur	32	21	4,102	65	18	12	10	14	7	9
18	Bogra	14	14	2,780	213	41	40	17	35	22	38
19	Pabna	19	16	2,539	30	4	7	11	2	17	3
20	Malda	18	12	2,239	43	3	7	14	7	16	7
Dacca Division.											
21	Dacca	14	14	4,737	135	104	92	78	120	86	94
22	Mymensingh ..	59	57	7,354	495	101	83	72	55	54	52
23	Faridpur	17	15	3,363	117	17	9	23	19	6	9
24	Bakarganj	22	19	2,990	97	18	13	14	14	16	9
Chittagong Division.											
25	Chittagong ..	22	18	870	40	22	19	24	17	7	21
26	Noakhali	15	6	1,719	19	3	1	3	4	1	2
27	Tippera	15	15	4,018	315	154	103	53	64	96	44
Total for the Bengal Presidency ..		635	569	84,748	5,823	2,651	2,515	2,896	2,252	1,926	1,824

* The whole town.

in the districts of the Bengal Presidency during each month of the year 1925.

						6			7			8	9
July.	August.	Septem-ber.	October.	Novem-ber.	Decem-ber.	Total.			Ratio of deaths per 1,000 of population.			Mean ratio per 1,000 during previous five years.	Number.
						Male.	Female.	Total.	Male.	Female.	Total		
62	50	30	59	69	81	587	221	808	·8	·3	·6	·7	1
3	14	3	12	9	5	62	36	98	·1	·1	·1	·3	2
42	54	55	54	63	62	558	227	785	1·1	·4	·8	1·0	3
85	87	98	92	135	131	929	483	1,412	·7	·4	·5	·7	4
81	70	78	75	102	127	764	359	1,123	1·4	·7	1·0	1·1	5
235	253	263	268	307	414	1,970	1,321	3,291	3·7	2·8	3·3	2·4	6
181	206	169	141	229	189	1,686	799	2,485	1·3	·7	1·0	1·0	7
642	721	683	750	934	1,030	5,822	4,050	9,872	8·0	11·5	9·2	8·6	8
34	28	17	87	127	147	494	169	663	·6	·2	·4	·5	9
20	13	5	16	10	15	129	59	188	·2	·1	·1	·3	10
16	17	13	21	33	24	194	78	272	·2	·1	·1	·2	11
14	47	15	27	41	44	204	76	280	·3	·1	·2	·1	12
4	5	8	16	24	20	103	38	141	·1	·05	·1	·1	13
9	25	10	25	28	19	147	73	220	·2	·1	·1	·1	14
60	45	48	73	61	70	539	354	893	1·1	·8	·9	·9	15
31	30	26	52	37	33	257	212	469	1·7	1·6	1·6	2·8	16
11	22	30	21	8	7	119	50	169	·1	·04	·1	·05	17
44	24	33	52	25	69	284	156	440	·5	·3	·4	·4	18
3	7	2	8	11	13	66	22	88	·1	·03	·1	·1	19
6	8	7	7	9	10	66	35	101	·1	·1	·1	·1	20
133	105	74	61	126	127	728	472	1,200	·5	·3	·4	·2	21
47	51	36	64	71	81	547	220	767	·2	·1	·2	·2	22
7	14	13	17	21	22	126	51	177	·1	·04	·1	·1	23
33	11	13	17	11	19	137	51	188	·1	·03	·1	·2	24
28	13	22	25	33	42	170	103	273	·2	·1	·2	·1	25
..	1	4	4	6	4	22	11	33	·03	·01	·02	·04	26
44	43	59	68	80	81	548	341	889	·4	·2	·3	·2	27
1,875	1,964	1,814	2,112	2,610	2,886	17,258	10,067	27,325	·7	·4	·6	·6	

ANNUAL FORM No. XII.—Deaths registered from PLAGUE in the districts

1 Number.	2 Districts.	3 Circles of Registration.		4 Villages.		5					
		Number in each district.	Number from which deaths from plague were reported.	Number in each district.	Number from which deaths from plague were reported.	January.	February.	March.	April.	May.	June.
	<i>Burdwan Division.</i>										
1	Burdwan	29	..	2,817	..	..	..	..	..	..	..
2	Birbhum	10	..	2,302	..	..	..	..	..	..	..
3	Bankura	22	..	4,003	..	..	..	..	..	..	..
4	Midnapur	33	..	10,351	..	..	..	..	..	..	..
5	Hooghly	27	..	2,197	..	..	..	..	..	..	..
6	Howrah	13	..	863	..	..	..	..	..	..	..
	<i>Presidency Division.</i>										
7	24-Parganas ..	61	..	3,427	..	..	..	..	..	..	..
8	Calcutta	1	1*	1	1*	1	..	..	..	..	2
9	Nadia	30	..	2,353	..	..	..	..	..	..	..
10	Murshidabad ..	33	..	1,974	..	..	..	..	..	..	..
11	Jessore	22	..	3,613	..	..	..	..	..	..	..
12	Khulna	26	..	2,011	..	..	..	..	..	..	..
	<i>Rajshahi Division.</i>										
13	Rajshahi	26	..	4,487	..	..	..	..	..	..	..
14	Dinajpur	31	..	6,612	..	..	..	..	..	..	..
15	Jalpaiguri	18	..	722	..	..	..	..	..	..	..
16	Darjeeling	6	..	304	..	..	..	..	..	..	..
17	Rangpur	32	..	4,102	..	..	..	..	..	..	..
18	Bogra	14	..	2,780	..	..	..	..	..	..	..
19	Pabna	19	..	2,539	..	..	..	..	..	..	..
20	Malda	18	..	2,239	..	..	..	..	..	..	..
	<i>Dacca Division.</i>										
21	Dacca	14	..	4,737	..	..	..	..	..	..	..
22	Mymensingh ..	59	..	7,354	..	..	..	..	..	..	..
23	Faridpur	17	..	3,363	..	..	..	..	..	..	..
24	Bakarganj	22	..	2,990	..	..	..	..	..	..	..
	<i>Chittagong Division.</i>										
25	Chittagong	22	..	870	..	..	..	..	..	..	..
26	Noakhali	15	..	1,719	..	..	..	..	..	..	..
27	Tippera	15	..	4,018	..	..	..	..	..	..	..
	Total for the Bengal Presidency ..	635	1	84,748	1	1	..	..	..	..	2

* The whole town.

of the Bengal Presidency during each month of the year 1925.

						6			7			8	9
July.	August.	Septem-ber.	October.	Novem-ber.	Decem-ber.	Total.			Ratio of deaths per 1,000 of population.			Mean ratio per 1,000 during previous five years.	Number.
						Male.	Female.	Total.	Male.	Female.	Total.		
..	..	..	..	..	..	..	..	..	..	..	..	..	1
..	..	..	..	..	..	..	..	..	..	..	..	..	2
..	..	..	..	..	..	..	..	..	..	..	..	..	3
..	..	..	..	..	..	..	..	..	..	..	..	·0004	4
..	..	..	..	..	..	..	..	..	..	..	..	·003	5
..	..	..	..	..	..	..	..	..	..	..	..	·001	6
..	..	..	..	..	..	..	..	..	..	..	..	·001	7
5	..	..	..	..	1	8	1	9	·01	·003	·01	·1	8
..	..	..	..	..	..	..	..	..	..	..	..	..	9
..	..	..	..	..	..	..	..	..	..	..	..	..	10
..	..	..	..	..	..	..	..	..	..	..	..	..	11
..	..	..	..	..	..	..	..	..	..	..	..	..	12
..	..	..	..	..	..	..	..	..	..	..	..	·0007	13
..	..	..	..	..	..	..	..	..	..	..	..	..	14
..	..	..	..	..	..	..	..	..	..	..	..	..	15
..	..	..	..	..	..	..	..	..	..	..	..	..	16
..	..	..	..	..	..	..	..	..	..	..	..	..	17
..	..	..	..	..	..	..	..	..	..	..	..	..	18
..	..	..	..	..	..	..	..	..	..	..	..	..	19
..	..	..	..	..	..	..	..	..	..	..	..	..	20
..	..	..	..	..	..	..	..	..	..	..	..	·001	21
..	..	..	..	..	..	..	..	..	..	..	..	..	22
..	..	..	..	..	..	..	..	..	..	..	..	..	23
..	..	..	..	..	..	..	..	..	..	..	..	..	24
..	..	..	..	..	..	..	..	..	..	..	..	..	25
..	..	..	..	..	..	..	..	..	..	..	..	..	26
..	..	..	..	..	..	..	..	..	..	..	..	..	27
5	..	..	..	..	1	8	1	9	·0003	·00004	·0002	·002	

of the General Assembly during the year 1911

No.	Name	Age	Sex	Mar.	Prof.	Rel.	Edu.	Val.	Asses.	Prop.	Tot.
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GOVERNMENT OF BENGAL.

LOCAL SELF-GOVERNMENT DEPARTMENT.

Public Health.

DARJEELING, THE 22ND JUNE 1927.

RESOLUTION—No. 154 T.—P.H.

Minister-in-charge: The Hon'ble Hadji Mr. A. K. Abu Ahmed Khan Ghuznavi.

READ—

The Report of the Director of Public Health, the Sanitary Board, and the Chief Engineer, Public Health Department, for the year 1925.

READ ALSO—

The Thirteenth Triennial Report on Vaccination in Bengal for the years 1923-24, 1924-25 and 1925-26.

1. **Public Health** (Statistical, Epidemiological and General Health Administration)—

Population.—For the purposes of this review, the total population of Bengal, excluding the Chittagong Hill Tracts, is taken as 46,522,293 (1921 census).

2. **Birth-rate and death-rate.**—In 1925, the total number of births recorded in Bengal was 1,377,097 against 1,203,244 in the preceding year, while the number of recorded deaths fell from 1,203,244 in 1924 to 1,158,473 in 1925. The provincial birth-rate in 1925 was 29·6 per mille, showing an increase of 34 per cent. over that of the previous year, while it was about one per cent. less than the decennial average of 29·98 per mille. In this connection the Director of Public Health remarks as follows :—

“The registration of vital occurrences being highly unsatisfactory, it would be safe to assume the actual birth and death-rates of the province for the year 1925 to be 37·6 per mille and 31·6 per mille, respectively, allowing for a recognised omission of 27 per cent. in each case.”

It is regrettable that the commissioners of certain municipalities are still remiss in administering the Registration of Births and Deaths Act, although their attention has been drawn year after year to their slackness in this respect.

The North-West Frontier Province, Assam and Burma returned lower birth-rates than Bengal.

The provincial death-rate in 1925 was 24·9 per mille against 25·9 per mille in the preceding year. The mortality rate was thus 3·86 per cent. less than that of the previous year and 10·1 per cent. less than the quinquennial average. It was 16·7 per cent. below the decennial mean.

Infant mortality.—In 1925, 249,582 infants died under the age of one year as compared with 252,337 during the previous year. The rate of mortality was thus 1·6 per cent. less than in the previous year.

During the year under review 2,790 deaths from child-birth were reported as compared with 1,972 in 1924, 1,185 in 1923, 2,567 in 1922 and 1,656 in 1921. The Director of Public Health remarks that the registration of such deaths is still far from complete and estimates that the figure for the year 1925 should be 4,197.

During the year 1925, 62,281 still-births were reported against 64,159 in the previous year, showing a decrease of 2·9 per cent. Local authorities showed a growing interest in maternity and child welfare work, and increased advantage was taken of the Government grant for holding *dai*-training classes. Twenty-six baby week shows were organized in mufassal centres during the year under report.

There is no doubt that there has been a stirring up of the public conscience in the matter of maternal and infant welfare and that deep-seated prejudices are being gradually uprooted. There are grounds for expecting a material reduction in the rate of infant mortality in the near future as a result of progressive enlightenment and increased interest in a subject which is of such importance for the well-being of Bengal.

Cholera.—The mortality from cholera was 34,276 in 1925 as compared with 48,514 in 1924, showing a decrease of 32·7 per cent. The steps taken to cope with epidemics included inoculation and the disinfection of sources of water-supply. Fifty Sanitary Inspectors sanctioned by Government for this purpose and Assistant and Sub-Assistant Surgeons attached to the Public Health Department were deputed from time to time to help local bodies in suppressing outbreaks, while the Circle Assistant Directors gave the benefit of their advice to the sanitary authorities of the affected districts.

Small-pox.—In 1925 the mortality from small-pox was 17,436 against 5,567 in the previous year, showing an increase of 233·3 per cent. The death-rate increased by 17·6 per cent. as compared with the previous decennium.

The total number of vaccinations reported in 1925-26 was 3,030,178 as compared with 2,662,966 in 1924-25. Of the total operations, 1,751,091 were recorded as primary and 1,279,087 re-vaccinations, against 1,655,201 primary and 1,007,765 re-vaccinations during the year 1924-25. There was thus during the year 1925-26 an increase of 5·8 per cent. in primary and 26·9 per cent. in re-vaccination operations. In this connection the Assistant Director of Public Health, Vaccination and Vital Statistics, remarks as follows :—

“The substitution of free vaccination by house to house visitation in most of the districts in place of the old licensed system, the increased activities of the local bodies through their District Health Officers and the Vaccination staff, coupled with the financial help by way of the Government contribution of Rs. 25,000 found the District Board ready to meet the quinquennial onslaught of the anticipated small-pox epidemic, which in consequence enacted a smaller toll of lives in the present than in the previous quinquennium. The gradual increase in the number of vaccinations performed can be taken as a fair index of the rousing of the sanitary conscience of the people, who at present are not so apathetic as they were in former times.”

During 1925-26, out of 1,162,322 infants requiring vaccination 3,13,286 or 269·5 per mille were reported to have been successfully vaccinated in the rural areas, as compared with 306,344 or 275·4 per mille during the preceding year. In five districts including Calcutta, the proportion protected was said to have been over 500 per mille.

Fever.—In 1925 the mortality from fever was 874,228 against 912,408 in 1924, giving a ratio of 18·8 per mille against 19·6 per mille in the previous year. In comparison with the year 1924 the mortality decreased in 1925 by 4·08 per cent., while it was less than the decennial mean by 15·7 per cent. As usual, deaths from fever represented 75·5 per cent. of the total mortality. A remarkable feature of the year under review as compared with 1924 was that the percentage of mortality from fever in this Presidency decreased in rural areas while it increased in towns.

Kala-azar.—The number of reported deaths from this disease was 16,766 in 1925, against 9,997 in 1924, 4,565 in 1923, 1,531 in 1922 and 1,552 in 1921. The number of Kala-azar cases treated at hospitals, dispensaries and special centres was 188,949 in 1925 against 139,085 in 1924, 57,238 in 1923, 13,317 in 1922 and 7,689 in 1921. It is gratifying to note that in 1925 every endeavour was made by District Boards to eradicate the disease by utilizing District-Board dispensaries and Kala-azar centres and by opening special centres in addition to those started by voluntary organizations such as the Central Co-operative Anti-malarial Society and the Bengal Health Association.

Sanitary Engineering.—Fourteen water-supply and drainage schemes were prepared, and thirteen detailed projects of municipal water-supply and sewerage were drawn up by the Chief Engineer, Public Health Department, in 1925. Sixteen water-supply and sewerage projects were under consideration, four water-supply and two sewerage schemes were completed, and

two water-supply and two sewerage projects were partially completed during the year under review. The total capital expenditure on water-supply in 1925 was Rs. 6,81,452, while the total expenditure on municipal drainage and sewerage works was Rs. 4,08,369.

Personal.—The Government of Bengal have recently lost the services of Mr. G. Bransby Williams, who had held the post of Chief Engineer, Public Health Department (formerly called Sanitary Engineer) since 1909, and who has had to retire under the age-limit.

The Engineering branch of the Public Health Department is practically the creation of Mr. Bransby Williams, and it is largely due to his ability and the example set by him that so much sanitary engineering work of a high order of excellence has been carried out by the branch.

The fact that Mr. Bransby Williams's services were freely requisitioned to advise on schemes outside Bengal is itself evidence of the high reputation which his professional skill had earned for him.

Mr. F. C. Griffin officiated successfully as Chief Engineer during half the year under report.

In Dr. C. A. Bentley the Public Health Department has a Director of great enthusiasm, imagination, professional knowledge and ability to inspire his subordinates with his own zeal. Lieutenant-Colonel Stewart, I.M.S., acted as Director of Public Health with remarkable efficiency for the most part of 1925 and in particular showed the greatest energy in visiting all sorts of out of the way places to investigate health conditions.

Government in the Ministry of Public Health associate themselves with the tributes which the Director of Public Health and the Chief Engineer have paid to the assistance given by officers subordinate to them. Special mention should be given to the propaganda work carried out by Rai Sahib K. P. Roy.

It is however considered that future reports should contain a more critical estimate of the efficiency of the Health staffs employed under Government and local bodies and of other Health agencies such as Co-operative Anti-malarial Societies. Under the recently sanctioned scheme for rural health organization, there will be a rapid expansion of staff and its duties will not be confined solely to public health work, but much new administrative work will fall upon it. The closest attention to efficiency will be necessary if the staff is to be properly utilized.

By order of the Government of Bengal

(Ministry of Public Health),

A. J. DASH,

Secretary to the Government of Bengal (offg.).

Nos. 1448-1458P.H.

Copy of the resolution (with copies of reports) forwarded to (1) all Commissioners of Divisions for information and communication to all District Officers and all Chairmen of District Boards in their respective divisions, (2) the Surgeon-General with the Government of Bengal, the Inspector-General of Prisons and the Inspector-General of Police, Bengal, for information, (3) the Director of Public Health, the Chief Engineer, Public Health Department, and the Secretary to the Sanitary Board, Bengal, for information.

By order of the Government of Bengal

(Ministry of Public Health),

G. C. SEN,

Assistant Secretary to the Government of Bengal.

CALCUTTA ;
The 16th July 1927.



