ANNUAL REPORT

OF THE

Medical Officer of Gealth

FOR THE

URBAN DISTRICT

OF

BECKENHAM

_ BY _

George Carpenter, M.D. (Lond.)

Chairman of the Council of the Society for the Study of Disease in Children;

Membre Correspondant de la Société de Pédiatre de Paris;

Physician to the Queen's Hospital for Children;

Formerly Physician to the Evelina Hospital for Sick Children;

Editor and Founder of the British Journal of Children's Diseases;

Editor of the Reports of the Society for the Study of Diseases in Children;

Membre de la Société d'Ophtalmologie Française;

&c., &c.

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ANNUAL REPORT

OF THE

HEALTH OF BECKENHAM

FOR THE

Year ending December 31st, 1907,

BY THE

MEDICAL OFFICER OF HEALTH

FOR THE

URBAN DISTRICT OF BECKENHAM.

To the Chairman and Members of the Beckenham Urban District Council.

GENTLEMEN,—

At the end of another year I have pleasure in submitting the following as my Annual Report for the Urban District of Beckenham for the year 1907.

Once again I am enabled to announce a further reduction in the actual deaths which is now 7.3 per 1,000. Last year the actual rate was one of the lowest on record, viz.: 7.5 per 1,000, and in spite of a considerable estimated increase in the population during that time, Beckenham is nevertheless in a better position than it was in 1906. In 1905 it was 8.7; in 1904, 9.3; in 1903, 7.7; and in 1902, 7.7.

The number of deaths which took place in the District, including the deaths of four non-residents, was 242, of which 121 were males and 121 were females, showing a death rate of 7.4 per 1.000. Four of these deaths occurred to people who were not resident in the District. One was that of a female resident at Hayes, aged 61 years, who was suffering from cancer of the bowel and succumbed to an operation at the Cottage Hospital.

Another female, aged 63, living at Sydenham, died at the Brooklyn Nursing Home, Sydenham Avenue, of chronic heart disease.

The third was that of a man from Walworth, aged 35, who met his death by being run over by a train on the South Eastern Railway at Elmers End.

The fourth was a female, aged 65, who came from Dawlish, and died of cancer of the liver.

After deducting these four deaths and adding 21 others of former Beckenham residents which have occurred in Institutions outside the District, the number of deaths upon which the corrected death rate is based, is 263, which gives a mortality rate of 8 per 1,000.

This is the same rate as that announced for the year 1906 with 594 less inhabitants. The number of deaths occurring outside the District among former residents was five in excess of that of 1906, and there were two more fatalities among non-residents who died in the District.

Principal Features of the Vital Statistics.

Census Population, March, 1901	• • •	26,331
Estimated Population to middle of 1907	• • •	32,809
Birth Rate per 1,000 of the Population	• • •	20.2
General Death Rate		8.0
Zymotic Death Rate		0.3
Infantile Mortality Rate (under one year),	J.,	
1,000 births registered	• • •	75.3
Child Mortality Rate (under five years),	per	
cent of deaths registered	• • •	28.5

Birth Rate.

The total number of births registered in the District during the year was 664, of which 316 were males and 348 females. This shows a birth rate of 20.2 per 1,000.

Amongst the registered births four males and five females were illegitimate, or 1.3 per cent of the total number of births registered.

The birth rate for 1907 is 0.6 below the rate for the previous year, and is 1.3 below the average for the past ten years.

In 1889, the birth rate was 22.2; 24.5 in 1890; 25.01 in 1891; 23.4 in 1892; 26.0 in 1893; 22.2 in 1894; 21.5 in 1895; 21.8 in 1896; 22.0 in 1897; 22.08 in 1898; 21.25 in 1899; 21.4 in 1900; 23.6 in 1901; 21.1 in 1902; 21.19 in 1903; 21.2 in 1904; 20.5 in 1905; and 20.8 in 1906.

The average for the ten years, viz.: 1897—1906, was 21.5.

The birth rate in the different Wards into which the District has been divided for 1906 and 1907 is:—

		Numb 1906.	er of	Births.		1906.	1907.		
Copers Cope		3 I		32	• • •	10.3	• • •	10.5	
Eden Park		48	• • •	63		12.6	• • •	16.4	
Langley Park	• • •	23	• • •	33		I I.4		16.5	
Shortlands		29	• • •	24		IO.I		12.5	
Manor House		220		218	• • •	26.1		24.6	
Kent House		162		I 52		24.8	• • •	22.9	
Laurie Park		I 57		142		23.6	• • •	20.2	

Birth Rate for the whole District, 20.2.

This year the lowest birth rate was in Copers Cope Ward (last year it was Shortlands Ward), Manor House, however, still retains the highest birth rate, viz.: 24.6.

Death Rate.

The total number of deaths of Beckenham residents registered in the District was 238, of which number 119 were males and 119 females, which gives a death rate of 7.2 per 1,000.

To this number must be added 21 deaths which occurred in the Union Workhouse, at Locksbottom, and 4 deaths at the Infectious Diseases Hospital, Skym Corner, Bromley Common, of former Beckenham residents, making a total of 263; this shows a death rate of 8 per 1,000, the same as for 1906 and 1.2 below that of 1905.

Comparing this death rate with those of preceding years the following interesting figures will be noted:—

In 1889 the death rate was 10.5; 10.9 in 1890; 10.5 in 1891; 10.1 in 1892; 11.2 in 1893; 10.7 in 1894; 11.0 in 1895; 9.7 in 1896; 9.9 in 1897; 10.1 in 1898; 10.8 in 1899; 10.1 in 1900; 9.9 in 1901; 8.4 in 1902; 7.8 in 1903; 9.5 in

1904; 9.2 in 1905; and 8.0 in 1906.

The best record therefore was in 1903, with a total of 7.8, when the deaths were 234 as against 263 for this year.

Beckenham has always been exceedingly fortunate in relation to its mortality rate, for even in its worst year in this respect, viz.: in 1893, it was only 11.2, with a total of 245 persons.

The difference between the highest and the lowest death rate is only a matter of eleven deaths.

In 1893, the time of the highest death rate, the estimated population was 21,840, and for this year it is 32,809.

Infantile Mortality Rate.

The Infantile Mortality Rate this year shows a decided falling.

Last year it was 94.0 per 1,000, and this year it is 75.3.

In 1898 it was 136.6; in 1899, 144.4; in 1900, 87.8; in 1901, 129.6; in 1902, 92.2; in 1903, 96.9; in 1904, 126.8; in 1905, 96.9; in 1906, 94.0; and in 1907, 75.3.

This year therefore shows the lowest infantile mortality rate with the largest population.

It is now well-known to those who study my Annual Reports that the infantile mortality rate has been a feature of these Reports for some years.

The wastage of infant life is in the main due to improper feeding, to the use of Proprietary Foods, and to the lack of knowledge on the part of the mothers.

Last year I drew up a scheme of infant management and feeding, a copy of which will be found below.

ADVICE TO MOTHERS IN THE FEEDING AND CARE OF THEIR INFANTS.

- I. Breast milk is the food designed by Nature for the feeding of infants. Cows' milk is a makeshift and should be used only in the event of the mother's milk failing. If the mother have plenty of breast milk the infant should not have any other food whatever until it is eight months old when it may be gradually weaned.
- 2. If the mother have only a little milk the child may be suckled twice daily, night and morning, and the mother should take a cup of milk gruel or of milk half an hour before nursing.
- 3. Nursing mothers should not take alcoholic beverages—beer, stout, wines and spirits—to produce a flow of milk, alcohol improves neither the quantity nor the quality of the milk, but it does pass into the infant's system.
- 4. Mothers who are nursing require a sufficiency of nourishing food, plenty of fresh air and exercise, and if they be accustomed to do household work the domestic duties should not be discontinued during nursing.
- 5. To produce good nourishing milk, mothers should avoid worry and anxiety, and should not give way to temper.
- 6. If the infant must be brought up by hand, it should be fed with unskimmed cows' milk warmed and diluted with water. Begin with one part cows' milk and two parts water and sweeten the mixture with a little sugar. Gradually increase the quantity of milk until when the child is six months old it can be taking two parts milk and one part water. Sometimes it assists the digestion of cows' milk to dilute with barley water instead of plain water. To make barley water, put four teaspoonfuls of pearl barley with a quart of cold water, boil down to two-thirds of a quart, and strain through muslin. Keep this in a cool place. It must be made daily, as it will not keep longer.

- 7. Feed at regular intervals—this is most important. The last feed at night should be at 10 p.m., the first in the morning at 5 a.m. Do not give any food in between these hours. This interval of time allows the mother to obtain a good night's repose and the infant's stomach a necessary rest from its labours. Infants must not be permitted to bolt their food. Twenty minutes should be allowed for each feeding.
- 8. Do not boil the milk except in the very hot summer months, when this should be done immediately on obtaining it from the milkman. Milk is readily tainted. It should be placed in a scrupulously clean vessel in the cool and away from all sources of contamination, such as bad smells, flies, and so on.
- 9. If cows' milk cannot be digested after a fair trial then condensed milk may be used—the "Milkmaid" or "Viking" brand—but do not continue to use it for a long period. After a month or two try cows' milk again.
- 10. Never use a feeding bottle with a tube. The boat shaped bottle with the teat fitting directly upon it is the best. Bottles and teats must be washed once a day at least with boiling water to which a little washing soda has been added. Rinse with cold water and keep them there until used when they should again be thoroughly rinsed.
- one or two meals a day, slightly thickened with good malted food, groats, entire wheaten flour, tops and bottoms, or rusks. Whichever is used the pap should be thin enough to go easily through the bottle. As the child grows older the pap may be used oftener and thicker.
- 12. Do not give Proprietary Foods. Proprietary foods are very harmful to young nurslings.
- 13. Never put gin or whisky or beer into an infant's feeding bottle. Teething powders contain injurious drugs and must not be given. Gripe water and such like remedies are very harmful to babies. If the infant has stomach-ache and offensive motions seek the

cause in some maternal indiscretion in the way of food or in the quantity and quality or state of the cows' milk.

- 14. A baby requires plenty of sleep for the proper development of its growing nervous system. A healthy baby should desire to sleep after being fed, and it should be put to sleep in its crib and not be rocked and hushed to sleep.
- 15. A baby requires plenty of fresh air and sunlight to make good healthy blood. It should be put to sleep out of doors if the weather be fine, but it should not be taken out at night. The windows of the room should always be open at the top and the room should be thoroughly aired twice a day. Open the windows freely at least twice every day. Children should be taken out every day.
- 16. Infants in arms, when taken out for an airing, should be kept in arms or be placed in a suitable baby carriage in which they can lie at full length. Therefore do not use the contrivance known as the upright baby carriage which is most harmful to infants.
- 17. Do not omit to encourage the baby to take daily exercise. Loosen its clothes, place it on a rug or blanket, play with it and induce it to kick its legs and move its limbs.
- 18. Infants should be washed all over with soap and water daily. They will not take cold if carefully dried.
- Do not use flannelette, it is highly inflammable. It must be loose, so as not to impede the movements of the limbs, the action of the heart and the breathing. There should be a flannel binder round the belly and warm drawers. Stockings should reach above the knees, and the arms should be covered. No part of the leg should be bare.
- 20. During the period of suckling the mother should see that her bowels and those of the infant act daily.

- 21. Educate the infant to regular habits in regard to its evacuations. This training should be commenced immediately after birth.
- and bad traits of character from their parents and forbears, it must be clearly understood that a mother can accomplish much in eradicating the bad and fostering the good by early training. Proper feeding is of great importance, but good training is no less a necessity, and mothers should make use of their unrivalled oportunities for moulding the national character as well as improving the physique of the nation.
- 23. If the baby be attacked by stomach-ache with green and curd-containing motions of longer than temporary duration, seek the advice of a doctor.

It is possible that this pamphlet has proved serviceable because there is a marked diminution in the infantile mortality rate, but after an experience of twenty years as physician at two of the leading Children's Hospitals in London, I am no firm believer in medical literature for the poor.

It is the custom at all the Children's Hospitals, and it has been so for years, to present out-patients with practical instructions in relation to this and kindred subjects.

But something more than this is required. It is necessary to go further than thrusting pamphlets into their often unwilling hands. These people require practical demonstrations. They must be approached when they are at a receptive age, not during their adult lives when they are full of their own importance. It cannot be expected that the unmarried Health Visitor will be

The young woman who has been presented with a baby feels that its presentation to her carries with it a profundity of knowledge as to its feeding and treatment, and no amount of literature or health visiting will alter that feeling.

What is required is to teach young un-married girls how to manage infants—that should be part of their school curriculum. They should be taught how to feed, clothe, wash and dress a baby. Not only must they learn how to do these things but they must be taught the hygiene of the Nursery.

There are so many things that are important to the young mother and indirectly most important to the baby. The young mother must know how to lead a healthy life how to so regulate herself that she produces the best breast milk. If she be not able to nurse her own child, then she must learn how to keep the milk she has procured for her infant fresh and uncontaminated. And if she be not a good housewife then her infant and her young children must suffer, and all these things are not to be learnt by the distribution of tracts but by practical demonstrations to a class which is often not highly endowed with intelligence and therefore not over receptive, but one practical demonstration is worth thousands of tracts indiscriminately distributed.

I therefore think the Council will be well-advised if they attack this problem from two situations. viz.:—
(1) The School Girl; (2) The Young Mother.

The school girl should be taught all the things that I have just drawn attention to at the school, and the

young mother should have an opportunity given her of attending practical classes on the subject of wifehood, motherhood, housekeeping.

Of the two I look upon the school girl as the most fruitful soil and the one which should give the best results for the time and trouble and money expended upon it.

Not only will the Infantile Mortality Rate be reduced thereby, but the happiness and prosperity of the English Cottage will be increased a thousand fold.

But it must not be supposed that the woman is the sole human factor in the Mortality Rate Question. The boy must not be neglected. There are two vices which are productive of harm to the Infantile Population, and these vices are *Betting* and *Drinking*. Boys at school must be taught how to develop into good citizens, and if they be good citizens they cannot fail to become exemplary fathers.

No home can be happy, no wife or children can be well cared for if the father does not perform his part in this complex question—the lowering of the *Infantile Mortality Rate*.

During the year 664 children were born, and of these 50, or 7.5 per cent., died before the year ended.

Table V. at the end of this Report deals exclusively with Infantile Mortality. From this Table it will be seen that out of a total of 50 infants who died before attaining the age of one year, 22 did not live one month, but no less than 9 of these were of premature birth.

Forty-one of these infants were legitimate and nine illegitimate.

Eight of these deaths were attributed to diarrhæa, seven to enteritis, one to gastritis; all gastro-intestinal diseases and probably caused by improper feeding.

The child death rate is less than last year, viz.: 28.5 per cent. In 1906 it was 28.9 per cent., which was the lowest previous record.

Out of a total of 263 deaths, 75 occurred before reaching the age of five years.

Table IV. shows in addition to the particulars just related of deaths under five years, 9 occured between the ages of 5 and 15 years; 9 between 15 and 25; 86 between 25 and 65; while 84 were between 65 and upwards.

Of these latter, 25 occurred between 80 and 90 years, and no less than 5 lived to be 90 years, the same number as last year. From this Table it will be seen that the principal causes of deaths have been: Heart disease 37; Cancer 25; Bronchitis 22; Senile decay 21; diseases of the Nervous system 21; Pneumonia 18; and Tuberculous diseases 13.

The number of deaths from Phthisis is 4 as against 21 in 1906 and 1905. Last year Cancer destroyed 28 people, this year 25. Pneumonia this year killed 18 persons, last year 10 people, and the year before 24.

Table I. at the end of this Report gives particulars of the population, the number of births, the birth rate, and particulars of deaths under one year and at all ages, also the death rate and particulars of deaths which have occurred in public institutions in and beyond the District.

This Table is also a record showing the area of Beckenham, the number of inhabited houses, and the average number of persons per occupied house.

Table II. gives particulars of the population, the births registered, the deaths at all ages, and the deaths under one year, for the seven Wards into which the District is divided.

Table III. gives particulars of infectious Diseases notified during the year; at various ages; the Wards in which they occurred; and the Wards from which they were removed to the Infectious Diseases Hospital. Later on in the Report these matters will be dealt with specifically.

Table V. gives particulars of Infantile Mortality, and this has already been amply dealt with.

Death Rate in the Seven Wards.

	Popu	lation.	Deaths	from		e per
	1906.	1907.	1906.	1907.	1906.	1907.
	3,000	3,025	20	16	6.6	5.2
	3,808	3,821	35	32	9. I	8.3
• • •	1,927	1,994	18	18	9.3	9.0
• • •	1,893	1,915	5	Ι2	3.2	б.2
• • •	8,426	8,840	7 I	72	8.4	8.1
	6,530	6,616	бі	56	9.3	8.4
	6,651	6,998	48	57	7.2	8.1
		1906 3,000 3,808 1,927 1,893 8,426 6,530	3,000 3,025 3,808 3,821 1,927 1,994 1,893 1,915 8,426 8,840 6,530 6,616	Population. Deaths all cau 1906. 1907. 1906 3,000 3,025 20 3,808 3,821 35 1,927 1,994 18 1,893 1,915 5 8,426 8,840 71 6,530 6,616 61	all causes. 1906. 1907. 1906. 1907. 3,000 3,025 20 16 3,808 3,821 35 32 1,927 1,994 18 18 1,893 1,915 5 12 8,426 8,840 71 72 6,530 6,616 61 56	Population. Deaths from all causes. 1906. 1907. 1906. 1907. 1906. 3,000 3,025 20 16 6.6 3,808 3,821 35 32 9.1 1,927 1,994 18 18 9.3 1,893 1,915 5 12 3.2 8,426 8,840 71 72 8.4 6,530 6,616 61 56 9.3

Corrected death rate for the whole District, 8.o.

It will be seen that the highest Ward death rate was again in Langley Park Ward, where it was 9.0. Last year it was 9.3.

The Zymotic death rate was 0.3; a trifle more than that of 1906, when it was 0.2, the lowest recorded for Beckenham.

This rate was 1.6 in 1889; 1.5 in 1890; 0.6 in 1891; 0.8 in 1892; 0.8 in 1893; 0.4 in 1894; 0.5 in 1895; 0.3 in 1896; 0.7 in 1897; 0.3 in 1898; 0.3in 1899; 0.8 in 1900; 0.7 in 1901; 0.5 in 1902; 0.3 in 1903; 0.4 in 1904; 0.4 in 1905; and 0.2 in 1906.

Zymotic Death Rate.

The following deaths have been referred to Zymotic Diseases:—

MEASLES. No deaths were notified.

WHOOPING COUGH. Four deaths occurred, three under one year and one under five years. Two deaths were registered in Manor House Ward and two in Laurie Park Ward.

DIPHTHERIA. Two deaths were notified from the Infectious Diseases Hospital; one was a boy aged two years resident in Manor House Ward, the other was a girl aged five years living in Laurie Park Ward.

Two other fatal cases were treated at their own homes. One a girl aged three years, the other a girl aged two years, both being in Kent House Ward.

ENTERIC FEVER. No deaths resulted from this complaint.

SCARLET FEVER. Two children died; one a girl, age six years, from Eden Park Ward, the other a boy of five years living in Manor House Ward. The ten deaths occurring from whooping cough, diphtheria, and scarlet fever, give a Zymotic death rate of less than 0.3 per 1,000.

Population

The estimated population of the District up to the middle of 1907 is 32,809, which shows an increase over the previous year of 594.

Last year the estimated increase was quite trifling, only 66 persons.

The estimate is based upon the number of occupied houses, and the number of persons per occupied house as demonstrated by the Census returns for 1901 in the seven Wards into which the District has been divided.

The population for the District has increased 594 above the estimated population for 1906, but it has fluctuated in the different Wards as the following table will show. This gives the number of occupied houses, the average number in each Ward per occupied house, and the estimated population for each Ward.

Ward.		occu	of spied ses.	Average No. of persons per occupied house		o. of pants.
		1906.	1907.	Census Figures.	1906.	1907.
Copers Cope		477	481	6.29	3,000	3,025
Eden Park		690	692	5.52	3,808	3,821
Langley Park		317	328	6.08	1,927	1,994
Shortlands		307	314	6.10	1,873	1,915
Manor House		1486	1559	5.67	8,426	8,840
Kent House	* * *	1288	1305	5.07	6,530	6,616
Laurie Park		1207	1270	5.51	6,651	6,998

Provision Shops.

Attention is specially drawn to the Butchers, Fishmongers and Poulterers of the District.

Many of these tradesmen have open fronted shops, and therefore expose their wares to the windswept street, which invites the deposit of road sweepings and other noxious matter on the food. Food is not improved by such treatment, and an inspection of the meat and fish on a windy day in Beckenham affords a demonstration of the necessity for abandoning this ancient and quite unnecessary custom.

Provision shops should have closed fronts, and an attempt should be made to keep the food free from dust and dirt.

In the winter there is no necessity for such exposure, the atmospheric conditions even with closed doors being sufficient to preserve the food, and in the summer such provisions should be kept in a cool chamber specially provided for the purpose.

The floor of all shops in which perishable provisions are exposed should be covered with an impervious and easily washable material. All the corners of such premises should be rounded. With wooden floors animal matter is apt to soak into the boards, and such cannot be properly cleansed short of scraping, which, of course, is not feasible. In fish shops where there is much water slopping about the danger of contamination is more obvious. Further, fish is a far more perishable article than meat.

The House Fly.

The house fly is a frequent carrier of disease. This insect is a great scavenger and takes a delight in decomposing animal and vegetable matter; dirt and moisture are its great attractions.

Wherever there are numerous house flies there it can be safely assumed that there is a want of cleanliness. In their larval stage they are to be found in stable middens and ashpits. These in the summer months should be more frequently emptied than at present. An application of Paris Geen or of crude Atoxyl are destructive to their larvæ and should be applied to these receptacles. The attention of dairymen, milk-vendors, butchers, fishmongers, grocers, confectioners, and fruiterers, is drawn to this matter, and they must realize that the house fly is inimical to the Public Health and take steps to prevent its intrusion on their wares.

Bakehouses.

In past years we have been in a position to compliment the bakers on the way they have conducted their businesses. But this year they have not lived up to their reputation and they must look to their laurels.

The bakehouses are not kept as clean as they should be. They are not properly ventilated. Bakers must not throw the refuse of their trade—eggshells and general débris—on to the coals which are usually to be seen in the corner of the bakehouse, giving a dust-hole appearance to their establishments. Dough is apt to find its

way upon the floors and then to be trodden underfoot. A much higher standard of cleanliness will in the future be required.

Bakers must throw the débris of their trade into a suitable receptacle, and coals must not be kept in the bake-house.

The bakers themselves are clean and their troughs are fairly well kept.

Master bakers should provide their employeés with white linen washable caps and overalls.

There are fourteen bakeries in the District, one being underground.

Inspection of the District.

The District has been systematically inspected during the year, but no occasion has arisen for reporting any particular insanitary area to the Council.

Attention has been specially paid to the effluent of the Croydon Sewage Farm, and on these several occasions its naked eye and other features have been satisfactory. In order to check these observations I have had the effluent analysed with similar results.

Cowsheds.

The cows in Beckenham are kept as clean as the law compels. The Sanitary Officials cannot compel a state of cleanliness which is essential to the comfort and well-being of the animals, and so necessary to the production of a clean milk.

There is no doubt that a large percentage of milch cattle are tuberculous. It is beginning to be recognized by the public that overcrowding among human beings is favourable to the development of Phthisis and other tuberculous lesions. But what is important for human beings, viz.: plenty of fresh air and breathing space, is no less necessary to animals, and although Beckenham cowkeepers comply with the law, nevertheless their cattle are not provided with that amount of air space that makes for health and freedom from Tubercle. Not only are the animals not as clean as they might be, but the men are no less unsavoury. In my rounds I see no provisions made for the men to wash their hands or any attempt on the part of the proprietors to provide the men with clean overalls. From dirty men and dirty cattle we cannot expect clean milk.

Dairies and Milkshops.

There are two classes of milk shops in Beckenham. One class is smartly got up—it has a tiled interior with a porcelain stork or other emblem in the window, and in letters of white enamel on its window panes it in no unblushing manner calls the public attention to its wares. But while it looks clean and nice the milk that is sold there is not so. It is delivered dirty to the shop, and it is generally exposed in open pans to the dust of the street and to the attention of flies which take their morning bath there.

The other class does not look smart and attractive, nor is it so. In this variety of shop, cheese and pickles, dried fish, potatoes, onions, and many other savoury and

unsavoury articles are exposed for sale along with the milk. This is where the poor Beckenham residents obtain their milk—the other shops are patronized by the wealthy residents.

All shops selling milk are required by law to be registered. Small shops such as I have indicated should not be registered for the sale of milk.

Assuming that the milk reach such a shop in a clean state, it would quickly become contaminated under such unfavourable circumstances. It is from these shops that the poor obtain their infants' milk supply, and it is the infant of the poor that suffers worst in the Infantile Mortality Rate, and the small milk shops must be looked upon as a contributory cause.

Cows' Milk.

Quite recently the Council were approached by the Beckenham Ratepayers Association with the object of inaugurating Municipal Milk Depôts in the District.

What is required is not Milk Depôts where milk is sterilized or Pasteurized, but improved methods of cowkeeping and milk distribution.

Milk of the present day is often little better than dilute sewage, and the Council rather than embarking in an expensive enterprise to effect a harmful object should seek increased powers to prevent such noxious fluid being distributed to the public. Sterilizing and Pasteurizing dirty milk kills the germs, but it does not destroy the poisons which these germs have formed and left in the

milk prior to their destruction. The higher the temperature of the atmosphere, the more quickly do these bacteria grow and multiply. It happens therefore that cows' milk is more poisonous in the summer months than in the winter. Pasteurizing and sterilizing milk are processes most harmful to nurslings. Infants fed on such milk are apt to become anaemic and ill developed, and they not infrequently develop scurvy.

Therefore treating milk in this manner is a serious menace to the health of our Infantile population. cows' milk is the staple article of diet for children up to two years of age, tampering with the children's milk is in reality a serious offence. Householders are advised to decline to accept any milk that has been Pasteurized or sterilized, or to which boracic acid or other preservativehas been added without their knowledge or consent. There is a firm in Beckenham which treats milk by Pasteurization which has been brought from various parts of the country to its receiving depôt. From this place it is distributed to the customer in this altered state. I am of opinion that not only the Council should seek increased powers for its milk supply, but I think they might also consider whether it would not be feasible to prosecute milk vendors for supplying milk to the public which has been deprived by heat of its most important principle, viz.: its antiscorbutic and other health giving properties. Milk thus treated becomes therefore of the nature of a fraud upon the customer.

Juvenile Smoking.

The scramble by children for cigarette and cigar stumps thrown into the dust and dirt by adult passers

by is no unusual sight. The transference of the spoil to the victor's mouth is not only an unwise but a hazardous proceeding, inasmuch as there is considerable danger of conveying disease germs to youthful systems which are possibly not over robust. This steadily growing habit of smoking pervades all classes of juveniles from the tiny tot in the gutter to the well-groomed public school-boy, and the form the vice takes is that of cigarette smoking, perhaps the worst form of smoking that can be indulged in. I knew a golf caddie who admitted to smoking no less than 60 cheap cigarettes a day. Until the Legislature takes action parents should exert their authority to put a stop to this practice. stunts the growth, lowers the vitality, rendering the organism a readier prey to disease, and it depresses the mental capacity and moral tone. Boys who habitually smoke become tired, stupid, lazy and irritable, and smoking leads them to tell lies and even to steal.

New York has an Institution called the Anti-Cigarette League which has branches in other American Cities. The League is composed of school boys who have banded themselves together to discourage the smoking of cigarettes by precept and by example, but chiefly by the latter. Each boy is granted a badge which he is expected to wear openly so that his light may shine before his companions. This League has been productive of immense good in the United States, and it is one that could be instituted with advantage by our children.

Juvenile Smoking is penalized in France, Germany, Norway, a large number of the States of America, Prince Edward's Island, and Bermuda, and there is every prospect that laws will shortly be enacted in this country which will put a stop to this growing evil among the young.

Infectious Diseases.

The total number of Infectious Diseases notified in the District during the year have been 198—65 more than was notified in 1906.

For the last ten years the numbers have been as follows:—1906, 133; 1905, 128; 1904, 87; 1903, 97; 1902, 143; 1901, 123; 1900, 161; 1899, 175; 1898, 76; 1897, 111.

This is therefore a record for the last ten years.

Of the 198 cases, 168 were removed to the Infectious Diseases Hospital.

Of this number 115 were scarlet fever. Scarlet fever was generally very prevalent and this therefore accounts for the unusual number of infectious cases notified.

Scarlet Fever.

During the year 115 cases of scarlet fever were notified and 106 were removed to hospital. Two children died, one an infant aged 6 years and another a boy aged 5 years. This represents a very low mortality rate and shows that the disease was mild.

When scarlet fever is prevalent in London and in the environs of Beckenham, the District cannot be expected to escape its fair share of unwelcome attention, and this is the explanation for the increasing number of scarlet fever cases which have been notified during the year. Every precaution has been taken to prevent its spread and in no cases have these precautions proved abortive.

Diphtheria.

Seventy-three cases of Diphtheria occurred and, 62 were removed to Hospital. There were four deaths; two occurred at the Infectious Diseases Hospital, one a boy aged two years and the other a girl aged five years

The other two fatal cases were treated at home, one was a girl aged three years and the other a girl aged two years.

The case mortality was .05.

Typhoid Fever

No cases of Typhoid fever were notified during the year.

Erysipelas.

Nine cases of Erysipelas were notified against 15 the previous year. They were all treated at home.

Puerperal Fever.

There was one case of Puerperal fever and the patient recovered.

Measles and Whooping Cough.

There were no deaths from Measles during the year, but four children died from Whooping cough—three under one year and one under five years.

Summary.

		t: at	No. reated home		No. sent to Hospit	al.	Total.	Fa Cas	tal ses.
Scarlet Fever	• • •		9		106		115		2
Diphtheria	• • •	• • •	ΙΙ	• • •	62	• • •	73		4
Typhoid Fever	•	• • •	Ο	• • •	0	• • •	О	• • •	0
Erysipelas		• • •	9		0		9		О
Puerperal Feve	r	• • •	I		0	• • •	I		О
Total			30		168		198		б

Factories and Workshops.

These premises have been inspected as in pevious years.

Seventy-four Inspections of Workshops and Workplaces have been made during the year.

Two cases of overcrowding and four cases of insufficient sanitary accommodation were discovered, and these are receiving attention.

Full enquiries similar to those made in 1906 in respect to Outworkers have again been instituted this year,

but no Outworkers have been found to be employed by the Tradespeople in the District.

Twenty-eight Lists have been received from other Councils giving particulars of Outworkers in this District employed by persons outside the District.

There are 12 of such Outworkers, and these have been frequently inspected.

I am, Gentlemen,

Your obedient Servant,

GEORGE CARPENTER.

Medical Officer of Health.

ANNUAL REPORT

OF THE

SANITARY INSPECTOR

For the Year ending December 31st, 1907.

To the Chairman and Members of the General Purposes

Committee.

GENTLEMEN,--

I have the honour to submit the Annual Report for the year 1907.

As I have only be associated with the work of the Department for the last four months of the year, it will be readily understood that the matters herein dealt with are chiefly upon the lines of previous Reports.

The work in connection with collection of house refuse has been specially reported upon, and several alterations have been made, the effect of which will be dealt with at the expiration of the present year.

It will be noticed that the Sale of Food and Drugs Acts have not been so vigorously worked as in previous years, but this is not due from a laxity on the part of the Department, but is rather the result of instructions given by your Committee in consequence of certain action by the Kent County Council, and which is at present receiving your consideration.

Cowsheds Cleansed	3
Drains Cleansed	33
Dwelling Houses Cleansed	28
Accumulations of Manure and offensive matte	r
removed	. 12
New Drains (only) provided to Dwelling	
Houses	. 54
New Drains to Stables	
New Galvanized iron Sanitary Dustbins pro)
vided	. 49
Yards paved or re-paved	
New Soil Pipes, W.C's., and fittings	. 28
New W.C. fittings only	. 22
Cases of Overcrowding in Dwelling House	S
dealt with	. 11
Cases of Overcrowding in Workshops deal	
with	. 0
Miscellaneous Works, new Rainwater Pipe	
and Channelling repairs to Roofs, dampnes	S
in Dwelling Houses remedied	. 133
Premises in which the Drainage and Sanitary	
fittings have been entirely re-constructed, so	0
as to conform with modern requirements in	a
Sanitation	. 91
Total	. 514

Paving Notices.

Paving Notices have been served requiring the owners of premises to proceed to form and flag asphalte

or pave the yards or open spaces for at least 150 square feet immediately adjoining their houses under Section 121 of the Beckenham Urban District Council Act, 1903.

Application to Examine Drains.

Applications for authority to enter premises and examine drains have been made to the Council under Section 41 of the Public Health Act 1875, Section 19 of the Public Health Amendment Act 1890, and Section 144 of the Beckenham Urban District Council Act 1903, for 42 houses, 30 of which upon examination were found to be in bad condition or to require alteration and amendment.

Magisterial Proceedings.

It has not been necessary to institute Magisterial proceedings, as Notices to abate nuisances have invariably been complied with, and the drainage works executed by the owners.

Inspection of Slaughter Houses, Cowsheds, Dairies and Bakehouses.

The slaughter-houses, cow-sheds, dairies and bake-houses, have been regularly inspected during the year.

Complaints.

Twenty complaints relating to house refuse have been made, and attended to.

Disinfection.

During the year 264 rooms were disinfected after cases of infectious and malignant diseases, or upon the removal of persons suffering from notified diseases to the hospital; of this number two were disinfected upon application being made by medical practitioners atending cases of phthisis, cancer, influenza and measles.

The Disinfecting Chamber has been in constant use throughout the year; the bedding from 115 rooms in addition to the surgical dressings from the Cottage Hospital, have passed through the Disinfecting Chamber.

Sale of Food and Drugs Acts.

Thirty-five samples of food were obtained and submitted to the Public Analyst for analysis, pnder the Sale of Food and Drugs' Acts, which are summarized as follows:—

Butter	•••	• • •	• • •	• • •	7	samples
New Milk	• • •	•••	• • •	•••	15))
Coffee	•••	•••	• • •	• • •	6	,,
Ground Gi	nger	•••	• • •	• • •	I	. 33
Condensed	Milk	• • •	• • •	• • •	2	"
Olive Oil	• • •		• • •	• • •	2	"
Cheese	• • •		• • •		I	,,
Skim Milk		• • •	• • •	•••	I	,,
		Total	•••	• • •	35	

Two of the samples of New Milk were found to be slightly below the limit for non-fatty solids. All the other samples were genuine.

Gipsies.

Thirty encampments of Gipsies have been removed during the year.

I am, Gentlemen,

Your obedient Servant,

ERNEST JACKLING.

Sanitary Inspector.



TABLE I.

DISTRICT OF BECKENHAM.

Vital Statistics for Whole District during 1907 and previous years.

	Population	Birt		DEATHS	ATHS REGIST UNDER ONE OF AGE.	DEATHS	E DISTRICT. AT ALL TOTAL.	Deaths IN	Deaths of Non-	Deaths of Residents	DEATHS AT ALL AGES NETT.		
YEAR.	estimated to middle of each year	Number. Rate.		Number.	Rates per 1,000 Births registered	Number.	Rate.*	Public Institutions.	Residents registered in District		Number.	Rate.	
I	2	3	4	5	6	7	S	9	10	II	12	13	
1897	24,200	533	21.0	63	118.3	231	9.2	•••		10	241	9.9	
1898	24,730	57 ^I	23.08	78	136.6	252	10.1	• • •	7	7	252	IO.I	
1899	26,075	554	21.25	80	144.4	271	10.4	• • •	4	17	284	10.8	
19 0 0	26,556	569	21.4	50	87.8	258	9.7	• • •	8	19	269	10.1	
1901	26,600	625	23.6	81	129.6	249	9 .3	12	3	22	265	9.9	
1902	28,24 9	596	21.1	55	92.5	218	7.7	14	6	21	240	8.4	
1903	29,672	629	21.19	61	96•9	230	7.7	9	5	17	234	7.8	
1904	30,701	662	21.5	84	126.8	286	9.3	20	5	13	294	9.2	
1905	32 ,1 4 9	660	20.2	64	96.9	281	8.7	14	3	18	296	9.5	
1906	32,215	670	20.8	63	94.0	245	7.5	8	2	16	259	8·o	
Averages for years 1897-1906	28,114	боб	21.2	67	112.3	252	8.9	7	4	16	263	9.3	
1907	32,809	664	20.5	50	75.3	240	7.3	9	2	25	263	8·o	

^{*} Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

Note.—The deaths to be included in Column 7 of this Table are the whole of those registered during the year as having actually occurred within the district or division. The deaths to be included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public" institutions" to be taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses and lunatic asylums. A list of the Institutions in respect of the deaths in which corrections have been made should be given on the backof this Table.

Area of District in acres)
(exclusive of area	3,881
covered by water).)

Total population at all ages		•••	• • •	26,331	sus r.
Number of inhabited houses				26,331 4,704	
Average number of persons per b	ouse	• • •	• • •	5.74	At



TABLE II.

DISTRICT OF BECKENHAM

Vital Statistics of separate Localities in 1907 and previous years.

Names of Localities.	Соре	ers Co	pe W	ard.	Ede	n Par	ek Wa	ırd.	Lang	cley P	ark V	Vard.	Shortlands Ward.			Mar	or Ho	use W	Vard.	Kent House Ward.				Laurie Park Ward.				
Year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under r year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under r year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under r year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under I year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under I year.	Population estimated to middle of each year.	Firths registered.	Deaths at all ages.	Deaths under 1 year.	l opulation esti- mated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
	а.	Ъ.	<i>C</i> .	d.	a.	b.	<i>c</i> .	d.	a.	<i>b</i> .	С.	đ.	a.	<i>b</i> .	<i>c</i> .	d.	a.	<i>b</i> .	<i>c</i> .	d.	a.	Ъ.	<i>c</i> .	d.	а.	<i>b</i> .	<i>c</i> .	d.
			Ward us to 1																									
1900	3118	• • •	16	3	3 7 76	• • •	38	6	1743	•••	Ι2	O	1696	• • •	7	O	4717	• • •	44	3	5016		48	Ι2	6490	• • •	85	20
1901	2815	* * *	18	4	3432	• • •	26	8	1773	• • •	13	3	1785	• • •	14	I	5021	• • •	48	26	5027	• • •	46	15	6747	• • •	78	24
1902	2836	• • •	19	4	3532	• • •	27	4	1842	• • •	ΙΙ	3	1775	• • •	7	O	5902	• • •	42	12	5475	• • •	47	ΙΙ	6887		65	19
1903	2875	• • •	16	2	3555	• • •	26	4	1801		IO	3	1781	• • •	10	О	6872	• • •	51	20	5967	• • •	52	16	6821	• • •	5 ²	15
1904	2906	• • •	21	4	3632	• • •	29	3	1848		14	3	1818	• • •	16	2	7654	• • •	76	28	6231	• • •	63	23	6612	• • •	75	
1905	2919	• • •	15	О	3610	* * *	36	6	1927	• • •	15	ī	1769	• • •	IO	I	8448	•••	70	22	6550	• • •	72	18	6926	• • •		16
1906	3000	31	20	2	3808	48	35	5	1927	23	18	3	1873	20	6	I	8426	220	71	27	6530	161	61	14	6651	157	48	
Averages of Years 1900 to 1906.	2924	• • •	17	2	3620	•••	31	5	1837	•••	13	2	1785	•••	01	O	6720	•••	57	19	58 2 8	• • •	55	15	6733		68	
1907	3025	32	16	2	3820	63	32	3	' 1994	33	18	3	1915	24	12	3	8840	218	72	17	6616	152	56	5	6997	142	57	17

Notes.—Deaths of residents occurring beyond the district are included in sub-columns c of this table, and those of non-residents registered in the district excluded.

Deaths of residents occurring in public institutions are allotted to the respective localities according to addresses of deceased.



TABLE III.

DISTRICT OF BECKENHAM.

Cases of Infectious Disease notified during the Year 1907.

		Cas	ES NOTIFIE	ED IN WHO	LE DISTRIC	T.		Total Cases notified in each Locality.							No. of	Cases RI	EMOVED I	о Hospii	AL FROM	EACH LO	CALITY.	
Notifiable Disease				At Ages-	-Years			Cope d.	ark d.	Park 1.	nds 1.	Iouse	ouse 1.	Park 1.	Cope	ark L	Park		louse	ouse I.	Park	TOTAL FROM WHOLE DISTRICT.
	At all ages	Under 1.	I to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.	Copers Cop Ward.	Eden Park Ward.	Langley Ward	Shortlands Ward.	Manor Hou Ward.	Kent Hous Ward.	Laurie Parl Ward.	Copers Cop Ward.	Eden Park Ward.	Langley P Wald.	Shortla	Manor Hor Ward	Kent Hous Ward	Luurie Park Ward.	DISTRICT
Small-pox		• • •	• • •	• • •	* * *	•••	• • •	•••	• • •	• • •	• • •	• • •	•••	• • •	• • •	• • •	• • •	• • •	• • •	• • •		• • •
Cholera		• • •	• • •	•••	• • •	• • •	• • •	• • •	• • •		• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •
Diphtheria (including Membraneous Croup)	73	I	19	45	5	3		•••	6	8	2	2 I	18	18		6	5	I	20	14	16	62
Erysipelas	9	1	I	•••	I	6	•••	• • •	I	• • •		2	2	4	• • •	• • •	• • •	• • •	• • •	• • •	• • •	
Scarlet Fever	115	I	19	81	6	8	• • •	4	22	5	4	51	16	13	4	21	4	I	50	I 5	II	106
Typhus Fever	•••		•••	• • •	• • •	• • •	• • •		• • •	•••	•••	• • •	. • •	•••	• • •	• • •	• • •	• • •	• • •	• • •	• • •	•••
Enteric Fever		•••	• • •	4 • •	* • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •		• • •	• • •	•••	• • •	
Relapsing Fever			• • •	•••	• • •	• • •	•••	• • •	•••		• • •	• • •	• • •	• •	• • •	• • •	• • •	• • •		• • •	• • •	
Continued Fever			s • •	•••		•••		• • •	•••	• • •	• • •	• • •	• • •	• • •	• • •	• • •		• • •	• • •	•••	• • •	
Puerperal Feyer	I	•	• • •	• • •	• • •	I		• • •		• • •	I	•••	•••	• • •	• • •	• • •	• • •	• • •	• • •	• • •	•••	•••
Plague	• • •	• • •		• • •	• • •			• • •		• • •	• • •	• • •	•••	•••	•••	• • •	• • •	• • •	• • •	•••	•••	•••
Totals	198	3	39	126	I 2	18		4	29	13	7	74	36	35	4	27	9	2	70	29	27	168

Note.—The Isolation Hospital used by the sick of this District is the Infectious Diseases (Joint) Hospital, Skym Corner, Bromley Common, in Bromley Rural District.



BECKENHAM OF DISTRICT

1907 during Death at, Ages and of,

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Honorary Tuber- S	:		I		:	:	:	:	:	;	:	:	:	:	H	:	:
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	•		2	,		7	7		40		34			72	50	57	6

Notes.—(a)

(9)

—(a) The deaths of residents occurring beyond the limits of the district are included in this table, and deaths of non-residents occurring in the districts are excluded. See note on Table I. as to the meaning of "Residents" and "Non-residents."

(b) Deaths of residents occurring in public institutions are allotted to the respective localities according to the addresses of the decease as given by the Registrars, and in addition, are classified under "Public Institutions."

of the decease as given by the Registrars, and in addition, are classified under "Public Institutions."

Indeed the heading of "Diarrheaa" are included deaths certified from diarrheaa alone or in combination with some Epidemic enteritis;

Zymotic enteritis;

Zymotic enteritis;

Epidemic diarrheaa;

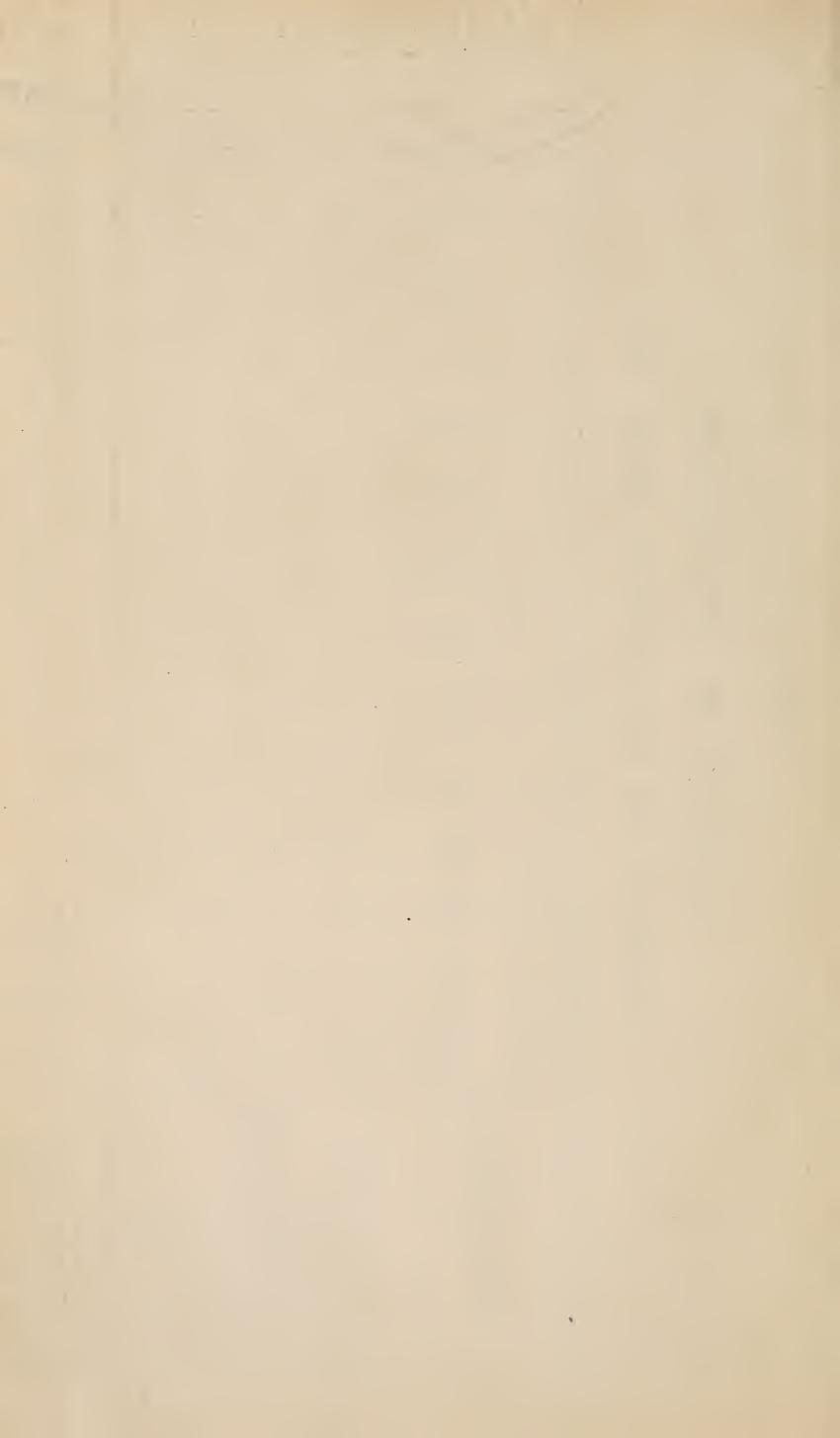
Upsentery and dysenteric diarrhea;

Under the heading of "Enteritis" are included those certified as from gastro-enteritis, muco-enteritis and gastric catarrh, unless from information obtained by enquiry from the certifying practitioner or otherwise, the Medical Officer of Health shall have reason for including such deaths, especially those of infants, under the specific Lerm "Diarrheaa."

Deaths from diarrhea secondary to some other well-defined disease are included under the latter.

In recording the facts under the various heading of Tables I., III., and IV., attention has been given to the notes on the Tables.

GEORGE CARPENTER, M.D., Medical Officer of Health.



DISTRICT OF BECKENHAM.

Infantile Mortality during the Year 1907.

Deaths from stated Causes in Weeks and Months under One Year of Age.

(SEE NOTES AT FOOT OF TABLE IV).

	Cause of Death.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	I-2 months.	2-3 months.	3-4 months.	4-5 months.	5-6 months.	6-7 months.	7-8 months.	8-9 months.	9-10 months.	10-11 months.	II-12 months.	Total Deaths under One Year.
All Causes.	Certified Uncertified		•••	• • •	• • •	•••	• • •	• • •	• • •	• • •	• • •	• • •	•••		• • •	•••	· • •	
Common Infectious	Small-pox	•••	• • •	• • •	···		• • •	•••	• • •	• • •	•••		• • •	• • •	• • •	• • •	• • •	•••
Diseases.	Scarlet Fever		• • •	• • •	•••		•••	•••	• • •	 I	• • •			•••	· · · · · · · · · · · · · · · · · · ·	• • •	• • •	
Diarrhœal Diseases.	Diarrhœa, all forms Enteritis, Muco- & Gastro-enteritis Gastritis, Gastro-intestinal Catarrh	•••	• • •	•••	• • •	•••	 2 I	• • •	· · · · · · · · · · · · · · · · · · ·	3	• • •	• • •	I	• • •	• • •	• • •	•••	1 6
Wasting Diseases.	Premature Birth Congenital Defects Injury at Birth Want of Breast-milk, Starvation	5 2	I 1	• • •	2 	8 3 	İ I	• • •	• • •	• • •	• • •	•••	• • •	• • •	• • •	• • •	• • •	9 4
Tuberculous	Atrophy, Debility, Marasmus (Tuberculosis Meningitis	2	1 2 	··· 2	•••	6 	•••		•••	•••	• • •	• • •	• • •	•••	• • •	•••	•••	7
Diseases.	Tuberculosis Peritonitis: Tabes Mesenterica Other Tuberculous Diseases	• • •	• • •	• • •	•••	•••	•••		•••	•••	• • •	 I			• • •	• • •	• • •	 I
	Erysipelas Syphilis Rickets Meningitis (not Tuberculous)	• • •	• • •	• • •	• • •	•••		I	• • •	•••	• • •	•••	• • •	•••	• • • •	• • •	• • •	I
Other Causes.	Convulsions Bronchitis Laryngitis	I I	•••	•••	•••	I I	 I	•••	I	 I	•••	•••	• • •	ı 	• • •	 t	 I	1 2 5
	Pneumonia Suffocation, overlying Other causes	 I	•••	• • •		 I	•••	I	•••	• • •	• • •	I	· · · · · · · · · · · · · · · · · · ·	•••	• • •	 I 	• • •	+ 2
		13	5	2	2	22	7	4	2	5		3	2	I	I	2	I	50

Births in the Year—Legitimate, 655: Illegitimate, 9; Total, 664. Deaths from all Causes at all Ages, 263.

Population estimated to middle of 1907, 32,809.

Deaths in the year of

Legitimate Infants ... 47
Illegitimate " ... 3