

PUBLIC HEALTH  
AND  
POOR-LAW MEDICAL SERVICES.

THE TRUE DEATH-RATES OF LONDON DISTRICTS DURING THE FIRST QUARTER OF 1888.

In the accompanying table will be found summarised the vital and mortal statistics of the forty-one sanitary districts of the metropolis, based upon the Registrar-General's returns for the first quarter of this year. The mortality figures in the table relate to the deaths of persons actually belonging to the respective sanitary districts, and are the result of a complete system of distribution of deaths occurring in the institutions of London among the various sanitary districts in which the patients had previously resided. By this means the precise number of deaths of persons actually belonging to the respective sanitary districts is known, as all deaths occurring in institutions of persons who had previously resided in another district have been excluded from the total number of deaths in the district in which the institution is situated, and credited to the districts from which they came. By this means alone can trustworthy data be secured upon which to calculate reliable rates of mortality.

The births registered in London during the first quarter of the current year were equal to an annual rate of 32.2 per 1,000 of the population of the metropolis, estimated at 4,282,921 persons, and showed a further decline from the rates recorded in the corresponding periods of recent years. The birth-rates in the various sanitary

districts last quarter showed the usual wide variations, the age and sex distribution of the population differing greatly. In St. James Westminster, Kensington, London City, and Hampstead the birth-rates were considerably below the average, while in East London, St. Luke's, Southwark, and Fulham, where the population contains a large proportion of young married persons, the birth-rates showed a marked excess.

The 23,164 deaths of persons belonging to London registered during the quarter under notice were equal to an annual rate of 21.7 per 1,000, which, although it exceeded the low rate recorded in the corresponding period of 1887, was below the mean rate in the first quarter of the ten preceding years, 1878-87. The lowest death-rates among the forty-one sanitary districts last quarter were 13.9 in Hampstead, 16.7 in Kensington, 17.5 in Plumstead, 17.8 in Battersea, and 18.1 in Camberwell; in the other districts the rates ranged upwards to 28.3 in Bethnal Green, 28.9 in London City, 29.9 in St. George-in-the-East, 30.2 in Fulham, and 32.8 in Holborn. During the quarter under notice 2,965 deaths resulted from the principal zymotic diseases in London; of these, 1,617 were referred to whooping-cough, 412 to scarlet fever, 307 to diphtheria, 238 to measles, 238 to different forms of "fever" (including 4 to typhus, 224 to enteric or typhoid fever, and 10 to simple and ill-defined forms of fever), 149 to diarrhoea, and 4 to small-pox. These 2,965 deaths were equal to an annual rate of 2.8 per 1,000, which exceeded that recorded in the corresponding quarter of any year since 1882. The lowest zymotic death-rates during the three months under notice were recorded in Hampstead, Strand, St. Giles, Plumstead, Marylebone, St. George Southwark, Woolwich, St. George Hanover Square, Ken-

Analysis of the Vital and Mortal Statistics of the Sanitary Districts of the Metropolis, after Complete Distribution of Deaths occurring in Public Institutions, during the First Quarter of 1888.

Sanitary Areas.	Estimated Population middle of 1888.	Births.	Deaths.	Annual Rate per 1,000 Living.			Deaths from Principal Zymotic Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping-cough.	Typhus.	Enteric Fever.	Simple and Unde-fined Fever.	Diarrhoea.	Deaths of Children under one year of age to 1,000 births.
				Births.	Deaths.	Principal Zymotic Diseases.											
LONDON	4,282,921	34,368	23,164	32.2	21.7	2.8	2,965	4	238	412	307	1,617	4	224	10	149	143
<i>West Districts</i>																	
Paddington	112,781	753	582	26.8	20.7	2.6	72	—	3	9	26	22	—	9	—	—	3
Kensington	193,247	1,016	803	21.1	16.7	1.9	92	—	13	11	8	48	—	9	—	—	3
Hammersmith	98,833	730	520	29.6	21.1	3.4	83	—	3	6	5	60	—	7	—	—	2
Fulham	82,556	787	471	50.5	30.2	5.0	78	—	13	7	4	41	1	5	—	—	7
Chelsea	102,108	793	543	31.2	21.3	2.3	58	—	5	9	5	32	—	2	1	—	4
St. George, Hanover Square	82,024	480	455	21.9	20.7	1.8	39	—	3	6	5	16	—	3	—	—	5
Westminster	58,406	417	359	30.2	28.0	4.1	57	—	3	12	7	33	—	1	—	—	1
St. James, Westminster	27,528	137	156	20.0	22.7	2.5	17	—	3	2	2	3	—	5	—	—	1
<i>North Districts</i>																	
Marylebone	150,053	1,113	837	29.8	22.4	1.7	62	—	4	12	8	26	—	4	—	—	6
Hampstead	56,565	343	196	24.3	13.9	0.9	13	—	4	2	4	—	—	2	—	—	1
St. Pancras	244,703	1,895	1,284	31.1	21.1	2.2	134	—	14	17	15	62	—	19	—	—	3
Islington	332,183	2,488	1,629	29.8	19.7	2.9	248	—	27	24	13	154	—	15	—	—	9
Hackney	238,374	1,688	1,102	28.4	18.6	2.8	169	—	27	18	19	82	1	13	—	—	9
<i>Central Districts</i>																	
St. Giles	40,001	329	258	33.0	25.9	1.5	15	—	3	3	5	2	—	2	—	—	106
St. Martin-in-the-Fields	15,125	93	101	24.7	26.8	3.5	13	—	2	4	2	—	—	1	—	—	2
Strand	28,309	204	201	27.9	27.5	1.4	10	—	2	1	1	3	—	2	—	—	1
Holborn	30,489	283	249	34.6	32.8	2.0	15	—	—	1	1	1	—	4	—	—	3
Clerkenwell	70,308	627	438	35.8	24.9	3.4	50	—	—	8	5	39	—	2	—	—	3
St. Luke's	52,000	523	329	40.4	25.4	3.8	47	—	1	2	3	37	—	1	—	—	2
London City	38,628	210	277	21.9	28.9	2.0	19	—	—	4	2	10	—	2	—	—	129
<i>East Districts</i>																	
Shoreditch	125,396	1,256	839	40.2	26.9	3.6	114	—	6	8	11	84	—	2	—	—	3
Bethnal Green	131,347	1,308	928	40.0	28.3	5.6	182	1	10	29	6	127	—	4	—	—	5
Whitechapel	67,389	693	460	41.3	27.4	3.0	51	—	—	9	4	28	—	4	—	—	170
St. George-in-the-East	48,229	479	344	41.6	29.9	2.8	32	—	2	3	2	21	—	3	—	—	1
Stepney	58,502	577	393	39.4	26.8	4.0	58	—	3	12	5	35	—	2	—	—	149
Mile End Old Town	114,444	1,123	641	39.4	22.5	4.3	124	1	11	22	2	72	—	10	—	—	6
Poplar	186,200	1,595	994	34.4	21.4	2.9	138	—	11	15	9	80	—	13	—	—	125
<i>South Districts</i>																	
St. Saviour, Southwark	27,230	254	190	37.4	28.0	1.9	13	—	—	4	1	5	—	2	—	—	1
St. George, Southwark	59,864	573	387	38.4	24.6	1.7	28	—	—	6	5	8	1	4	—	—	4
Newington	121,123	1,049	616	34.7	20.4	2.2	68	—	—	17	4	37	—	2	—	—	4
St. Olave, Southwark	10,053	104	64	41.5	25.5	3.8	9	—	—	2	1	4	—	3	—	—	144
Bermondsey	89,802	811	511	38.2	22.8	2.0	45	—	2	10	4	19	—	10	—	—	142
Rotherhithe	43,072	355	246	33.1	22.9	2.7	29	—	—	3	5	9	—	4	—	—	6
Lambeth	284,809	2,298	1,440	32.4	20.3	2.0	140	—	13	27	20	62	—	8	—	—	126
Battersea	160,377	1,404	712	35.1	17.8	3.0	120	—	4	15	7	78	—	9	—	—	9
Wandsworth	128,448	1,024	638	32.0	19.8	3.0	97	—	—	12	19	49	—	6	—	—	127
Camberwell	256,404	1,825	1,159	38.6	18.1	2.6	165	1	5	41	24	70	1	12	1	—	10
Greenwich	156,169	1,341	897	34.5	23.1	3.6	141	1	18	15	16	78	—	8	—	—	134
Lewisham	59,837	432	353	29.0	23.7	4.8	71	—	—	1	1	38	—	3	—	—	1
Woolwich	37,098	356	240	38.5	26.0	1.8	37	—	—	2	1	—	—	2	—	—	1
Plumstead	80,739	642	351	32.1	17.5	1.6	13	—	2	1	3	23	—	1	—	—	3

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sington, and St. Saviour Southwark, in each of which it was below 2.0 per 1,000. In the other districts the zymotic death-rate ranged upwards to 4.0 in Stepney, 4.1 in Westminster, 4.3 in Mile End Old Town, 4.8 in Lewisham, 5.0 in Fulham, and 5.6 in Bethnal Green. Compared with the preceding quarter, the fatality of each of the principal zymotic diseases, except whooping-cough, showed a decline. Only 4 deaths from small-pox were recorded in London during the first three months of this year, of which 1 belonged to Bethnal Green, 1 to Mile End Old Town, 1 to Camberwell, and 1 to Greenwich sanitary districts. The number of small-pox patients in the Metropolitan Asylums Hospitals, which had been 7 at the beginning of the year, had increased to 17 in the middle of March, but declined to 9 at the end of the quarter; the admissions were 38 during the quarter, against 37 in the last six months of 1887. Measles showed the highest proportional fatality in Greenwich, Lewisham, Fulham, and St. James Westminster; scarlet fever in Mile End Old Town, Westminster, Bethnal Green, Camberwell, and Greenwich; diphtheria in Westminster, St. Giles, Paddington, and Lewisham; whooping-cough in Fulham, Shoreditch, St. Luke's, and Bethnal Green; and "fever" in Poplar and St. James Westminster. The number of scarlet fever patients in the Metropolitan Asylums Hospitals, which had been 2,049 at the beginning of the year, steadily declined to 1,087 at the end of March; the admissions to these hospitals of persons suffering from this disease, which had risen from 531 to 2,186 in the four quarters of 1887, declined to 1,416 during the three months ending March last.

Infant mortality last quarter, measured by the proportion of deaths under one year of age to births registered, averaged 143 per 1,000, against 133, 149, and 131 in the corresponding periods of the three preceding years, 1885-6-7. Among the various sanitary districts the rates of infant mortality were lowest in Hampstead, St. Giles, Wandsworth, Mile End Old Town, and Lambeth; whereas they showed the largest excess in Lewisham, Woolwich, Rotherhithe, Fulham, Bethnal Green, and Hammer-smith.

**HEALTH OF ENGLISH TOWNS.**—During the week ending Saturday, April 14th, 6,177 births and 3,952 deaths were registered in the twenty-eight largest English towns, including London, which have an estimated population of 9,398,273 persons. The annual rate of mortality per 1,000 persons living in these towns, which had been 21.5 and 19.9 in the two preceding weeks, rose again to 21.9 during the week under notice. The rates in the several towns ranged from 16.8 in Portsmouth, 17.7 in Huddersfield, 17.8 in Sunderland, and 18.4 in Norwich to 26.2 in Plymouth, 28.1 in Blackburn, 30.0 in Wolverhampton, and 34.9 in Manchester. The mean death-rate in the twenty-seven provincial towns was 23.1 per 1,000, and exceeded by 2.5 the rate recorded in London, which was 20.6 per 1,000. The 3,952 deaths registered during the week under notice in the twenty-eight towns included 358 which were referred to the principal zymotic diseases, against 388 and 371 in the two preceding weeks; of these, 172 resulted from whooping-cough, 46 from scarlet fever, 38 from diarrhoea, 33 from diphtheria, 32 from measles, 21 from "fever" (principally enteric), and 16 from small-pox. These 358 deaths were equal to an annual rate of 2.0 per 1,000; in London the zymotic death-rate was 2.2, while in the twenty-seven provincial towns it averaged 1.8 per 1,000, and ranged from 0.4 and 0.5 in Sunderland and Preston to 3.2 in Salford, 3.4 in Plymouth and in Sheffield, and 3.5 in Blackburn. Measles caused the highest proportional fatality in Nottingham and Plymouth; scarlet fever in Birkenhead, Hull, and Oldham; whooping-cough in London, Leicester, Blackburn, and Salford; and "fever" in Derby. The 33 deaths from diphtheria in the twenty-eight towns included 19 in London, 4 in Liverpool, and 2 in Sheffield. Of the 16 fatal cases of small-pox recorded during the week under notice, 11 occurred in Sheffield, 3 in Blackburn, 1 in Bristol, and 1 in Manchester. The Metropolitan Asylums Hospitals contained 15 small-pox patients on Saturday, April 14th, of whom 7 had been admitted during the week. These hospitals also contained 1,002 scarlet fever patients on the same date, showing a further decline from recent weekly numbers; there were 92 admissions during the week. The death-rate from diseases of the respiratory organs in London was equal to 5.4 per 1,000, and was slightly below the average.

**HEALTH OF SCOTCH TOWNS.**—In the eight principal Scotch towns, 849 births and 526 deaths were registered during the

week ending Saturday, April 14th. The annual rate of mortality, which had been 23.7 and 21.8 per 1,000 in the two preceding weeks, further declined to 20.8 during the week under notice, and was 1.1 per 1,000 below the mean rate during the same period in the twenty-eight large English towns. Among these Scotch towns the lowest rates were recorded in Leith and Greenock, and the highest in Aberdeen and Perth. The 526 deaths in these towns during the week under notice included 49 which were referred to the principal zymotic diseases, equal to an annual rate of 1.9 per 1,000, which almost corresponded with the mean zymotic death-rate during the same period in the large English towns. The highest zymotic rates were recorded in Edinburgh, Glasgow, and Perth. The largest proportional fatality of whooping-cough occurred in Glasgow and Edinburgh. The three deaths from diphtheria included 2 in Edinburgh; and 5 fatal cases of "fever" were recorded in Glasgow. The mortality from diseases of the respiratory organs in these towns was equal to 5.1 per 1,000, against 5.4 in London.

**HEALTH OF IRISH TOWNS.**—During the week ending Saturday, April 14th, the deaths registered in the sixteen principal districts of Ireland were equal to an annual rate of 26.9 per 1,000. The lowest rates were recorded in Sligo and Galway, and the highest in Kilkenny and Lisburn. The death-rate from the principal zymotic diseases in these towns averaged 2.9 per 1,000, and was highest in Lisburn and Lurgan. The 187 deaths registered in Dublin during the week under notice were equal to an annual rate of 27.6 per 1,000, which showed a slight further decline from the rates recorded in the two preceding weeks. The 187 deaths included 15 from the principal zymotic diseases (equal to an annual rate of 2.2 per 1,000), of which 7 were referred to whooping-cough, 3 to measles, 3 to "fever," 1 to scarlet fever, and 1 to diarrhoea.

#### BELVIDERE FEVER HOSPITAL, GLASGOW.

FURTHER improvements are proposed at Belvidere Hospital, with a view to increase the administrative department. It is proposed to erect new washing houses, with all necessary appliances, and so arranged as to isolate officials, patients, and hospital clothing, a point strongly urged by the medical staff. The present washing houses would then be reconstructed for the accommodation of the house steward's department, stores, etc. The total cost of the new work is estimated at £10,000. It will also provide for the erection of dwelling-house accommodation for the employees other than the nursing staff, who should reside in the hospital.

#### THE MARGARINE ACT IN OPERATION.

A SECOND prosecution under this Act has occurred in Glasgow, in which a penalty has been imposed. The shopkeeper was fined for having lumps of margarine exposed for sale unticketed. Beside the margarine there was butter labelled as such. The suggestion was that the lumps of margarine were meant to be covered by the butter label.

#### THE GOVERNMENT SANITARY SURVEY.

MR. J. DAVIES.—The sanitary survey in question was made by the Medical Department of the Local Government Board. It was begun in the summer of 1884, when cholera first began to threaten us from the Continent, and it was continued until the close of 1886. It did not include every sanitary area in the kingdom, but that was not the fault of the Department. It embraced, however, all the coast districts, and such of the inland areas as were specially liable to the importation of infection, or had shown by their sickness and other records evidence of doubtful sanitation. The results of the survey have not been issued in an absolutely separate form, but are contained in the Papers on Cholera, published as a supplement to the Fifteenth Annual Report of the Local Government Board (Command Paper 4,873, Session 1886, price 2s.), and in the Report of the Medical Department, published as a supplement to the Sixteenth Report of the Board (Command Paper 5,171, Session 1887, price 7s.). These reports can be obtained from the Queen's Printers, or from any of the agents who sell Parliamentary papers. An article on this subject will be found at page 787 of the JOURNAL for April 9th, 1887.

#### DUTIES OF MEDICAL OFFICERS OF HEALTH WITH REGARD TO NUISANCES.

ALPHA asks: 1. What is my duty with regard to nuisances if the inspector of nuisances is under the control exclusively of the Sanitary Committee? 2. Am I responsible for the reporting of all nuisances?

\*.\* It is your duty to report generally as to the necessity for removal of nuisances in your district, and you would necessarily call attention to any special causes of ill-health, but the duty cannot be performed in the detailed way that is required of an inspector of nuisances, and we hold you have no responsibility for reporting all.