No. 25

The Services

CASUALTIES IN THE MEDICAL SERVICES Acting Major JOHN EWART EDSON, R.A.M.C., died on June 10. Acting Major John EWART EDSON, R.A.M.C., died on June 10. He was educated at the University of Sheffield and King's College Hospital and graduated B.Sc. (with first-class honours in physiology) in 1929, proceeding M.Sc. in 1930, M.B., Ch.B. (with honours) in 1931, and M.D. in 1940. He was also admitted M.R.C.P.Lond. in 1936. He had held house posts at Sheffield Royal Hospital, and in 1935 was appointed assistant medical officer to the Mayday Hospital, Thornton Heath, Surray later becoming the conjour assistant medical officer of Surrey, later becoming the senior assistant medical officer of the hospital. He entered the R.A.M.C. as temp. lieut. in May, 1940, and was promoted capt. a year later. He was a member of the B.M.A.

EPIDEMIOLOGICAL NOTES **Discussion of Table**

In England and Wales, with the exception of measles, of which there were 244 fewer cases than in the preceding week, there was a general rise in the notifications of infectious diseases. The largest increases were those of dysentery, acute pneumonia, and diphtheria, with 80, 62, and 59 more cases than in the previous week, the two latter diseases being evenly distributed throughout the country.

Although the figure for whooping-cough was only 5 in excess Although the figure for whooping-cough was only 5 in excess of that for the preceding week, individual counties displayed considerable fluctuations. Rises were recorded in Yorks West Riding, Lancashire, and Kent of, respectively, 35, 30, and 24, and a fall of 81 was reported in Hertfordshire. The heaviest falls in the incidence of measles occurred in Middlesex 129, Hampshire 63, Surrey 57, and Hertfordshire 54, but, in contrast to the general trend, rises were reported from Kent and Nottinghamshire of 94 and 75. The increase of 80 cases of dysentery was the biggest differ-

The increase of 80 cases of dysentery was the biggest difference between two consecutive weeks since last August. Fresh outbreaks occurred in Cumberland 38 cases (Penrith U.D. 31, Ennerdale R.D. 7) and Denbighshire 20 cases (Colwyn Bay M.B. 11, Ruthin R.D. 6, Wrexham R.D. 3). In Yorks West Riding 28 cases were recorded (16 from the outbreak in Wortley R.D., and the remainder distributed through five areas): 13 cases from five administrative areas were recorded in Lancashire.

In Scotland the notifications of measles were 253 fewer than in the preceding week, Glasgow having 477, a fall of 223.

Small-pox

Six deaths from the outbreak in Glasgow have been recorded up to July 10. A vigorous campaign for vaccination has been carried out and over 400,000 of the inhabitants have been vaccinated. The cost of the outbreak has been estimated at £30,000. In Swindon the local authorities have made chickenpox a notifiable disease, and over 18,000 people have been vaccinated.

Returns for the Week Ending July 4

The notifications of infectious diseases during the week in England and Wales included: scarlet fever 1,396, whooping-cough 1,457, diphtheria 728, measles 7,581, acute pneumonia 734, cerebrospinal fever 105, dysentery 242, paratyphoid 14, typhoid 4.

Vital Statistics of New York

The New York Tuberculosis and Health Association, with the co-operation of the various United States Bureaux, has issued a handbook containing the recent statistics of New York and the five boroughs of the city. The birth rate in New York, which had been declining (it was halved between 1915 and 1936), has during the last five years shown a tendency to a slight increase, and the rate of 14.4 per 1,000 of the population recorded in 1940 was the highest rate since 1933. The infant mortality was 33.3 per 1,000 live births for the white popula-tion and 54.7 for the coloured. The general death rate for 1940 was 10.2 per 1,000, 0.2 above the value for 1938, which was the lowest death rate ever recorded. The principal causes of death were heart disease and cancer, which accounted for one-third and one-sixth respectively of the total deaths.

The report consists of 17 tables and 14 diagrams, without any text at all. In the foreword it is stated: "Comparative death rates have been computed bringing out areas of the city where special attention is needed." This is hardly the case, as no attempt has been made at standardization for age or sex distribution; the rates are all crude rates. The diagrams, although of artistic merit, are not informative and are often confusing. The tabulation of leading causes of death by rank is unwieldy and makes it very difficult to follow the trend of mortality by age: in one table this method resulted in 18 lists of 10 causes of death.

INFECTIOUS DISEASES AND VITAL STATISTICS

We print below a summary of Infectious Diseases and Vital Statistics in the British Isles during the week ended June 27.

Figures of Principal Notifiable Diseases for the week and those for the corre-sponding week last year, for: (a) England and Wales (London included). (b) London (administrative county). (c) Scotland. (d) Eire. (e) Northern Ireland.

London (administrative county). (c) Sectuated, (u) Ener. (c) restance relations Figures of Births and Deaths, and of Deaths recorded under each infectious disease, are for: (a) The 126 great towns in England and Wales (including London), (b) London (administrative county). (c) The 16 principal towns in Scotland. (d) The 13 principal towns in Eire. (e) The 10 principal towns in Northern Ireland.

A dash — denotes no cases ; a blank space denotes disease not notifiable or no return available.

<u> </u>							_				
Disease		1942					1941 (Corresponding Week)				
	(a)	(b)) (d)	(e)	(a)	(b)	(c)	(d)	(e)	
Cerebrospinal fever Deaths	108	3 -	7 2	9 4 3	4	7 21				14	
Diphtheria Deaths	719 12				5 19 5 1			5 184 6		21 2	
Dysentery	151	_	94	1 _	=	113	9	27	=	=	
Encephalitis lethargica, acute Deaths		5 <u>-</u>		2	I	6	12		-		
Enteric (typhoid and paratyphoid) fever Deaths						127	_1	19	_4	=	
Erysipelas Deaths		_	3	7 9	3	3	=	39 	8	3	
Infective enteritis or diarrhoea under 2											
years Deaths	31		5 1:	2 6	5 2	32	1	10	9	2	
Measles Deaths	6,375 7	74		7 49		8,958 10	293 —	107 1	8	10	
Ophthalmia neonatorum Deaths	94	94	1	4		75	1	8	1	1	
Paratyphoid fever Deaths	8	=	-	3 3							
Pneumonia, influenzal* Deaths (from in- fluenza)	655				2	668 6	22	14	2	1	
Pneumonia, primary Deaths		22	216		15			2 206	 11 10		
Polio-encephalitis, acute Deaths	1					-	-				
Poliomyelitis, acute Deaths	12	-	1	-		9	_	1			
Puerperal fever Deaths	-	_4	14	4	2	1	_1	10	3	1	
Puerperal pyrexia Deaths	184	8	17		6	115	2	9		4	
Relapsing fever Deaths	-	-,			-	-	-			i	
Scarlet fever Deaths	1,320	64	211	48 	23 	955	36	124	75	13	
Small-pox	_ 2	_	2		Ξ	_	_	=	_	_	
Typhoid fever Deaths	6	_	_6	- 7	_1						
Typhus feverDeaths		-	-	_	Ξ	-		=	=	_	
Whooping-cough Deaths	1,394 8	132	34 1	48 .2	29 1	4,837 34	160 3	263 4	_	_7	
Deaths (0-1 year) Infant mortality rate (per 1,000 live births)	288	38	58	25	23	278	16	67	35	17	
Deaths (excluding still- births) Annual death rate (per 1,000 persons living)	3,886	566	552 12·4	187 12·5	117 †	4,214	512	626 13·6 1		145	
Live births Annual rate per 1,000 persons living	5,976	656	952 19·7	464 31·0	299 †	4,612		881 17·9 2		187	
Stillbirths Rate per 1,000 total births (including stillborn)	239	17	33			213	17	25			
stillborn)	·		34					28		_	

* Includes primary form for England and Wales, London (administrative county), and Northern Ireland.

† Owing to evacuation schemes and other movements of population, birth and death rates for Northern Ireland are no longer available.