

number slightly in excess of that for the previous year. It is refreshing to come across a community whose birth-rate is on the increase. During the year under review the number of births registered was 31,785, showing a birth-rate of 37.6, against 35.0 for the preceding year. The number of deaths during the year was 18,928; the rate per 1,000 estimated population was 22.4, as against 28.3 in the previous year. The mortality amongst children under 5 years of age continues high; 29.4 per cent. of the deaths registered during the year were deaths of children under 1 year of age, and 42.2 per cent. were deaths of children under 5 years—a slight increase on the percentage for the previous year. The death-rate among illegitimate children was higher than among legitimate children. The Registrar states that the greater number of illegitimate children are born of the poorest and most ignorant mothers, and in most insanitary surroundings, while the legitimate children are to a great extent born of the better off and more educated classes. Uncertified deaths form a large proportion of the number of deaths registered during the year. In no less than 14,501, or 76.6 per cent., the cause was not medically certified. This rate, though high, is the lowest since 1897, when it was 75.5 per cent. The principal causes of death in Kingston were phthisis, diarrhoea, enteric fever, and, what bulks very largely in the returns, "ill defined, etc.," under which head 14.0 per cent. of the total deaths were entered. The death-rate of Jamaica compares very favourably with that of the other West Indian Islands. As stated, the Jamaica death-rate per 1,000 is 22.4, that of Barbados is 29, of British Guiana 36.9, of Antigua 29.98, and of Trinidad 22.6. Some of the other islands can, however, show a smaller rate as, for example, Bermuda 18.7, St. Vincent 18.34, and St. Lucia 19.4.

The Registrar mentions in his report that the names of six medical practitioners were added to the Jamaica Medical Register during the year, and one death occurred, leaving a total of 132 names on the Register at March 31st, 1909. The report is furnished with elaborate tables of the causes of death at different periods of life in the whole island for the year under review. One fact might be mentioned in connexion with these tables—that no less than 182 deaths were registered as occurring at 95 and upwards. It would be difficult, however, to verify the ages in many cases.

Straits Settlements.

[FROM OUR SPECIAL CORRESPONDENT.]

ANNUAL REPORT ON MEDICAL DEPARTMENT.

FROM the report for 1908 of the Principal Civil Medical Officer, Straits Settlements, which has recently reached us, it appears that the mean population was estimated at 628,016. The birth-rate for the year was 28.75 per 1,000, as against 26.11 for the previous year. The death-rate, however, shows an increase on that of the previous year, being 43.06 in 1908, while it was only 39.07 in 1907. Penang is responsible for part of this increase, while Malacca comes next. Of the deaths registered in 1908, 5,110 were amongst infants under one year of age, which represents a percentage of 21.07 of the total, an increase on that of the two previous years. Of the 5,110 deaths of infants registered, 3,367 were returned as due to "convulsions." With a view to effecting an improvement in the heavy mortality amongst infants the Government intend bringing in a Midwives Bill at an early date, making it compulsory for all women attending childbirth to hold a certificate of competency.

Plague was accountable for 12 deaths, all the cases occurring in Singapore. There were 198 cases of cholera with 178 deaths. Enteric fever claimed 117 deaths out of 247 cases reported. Beri-beri seems still to be very prevalent in the Settlements—2,777 cases with 1,900 deaths, a considerable increase on the previous year, when only 1,806 cases were notified. Researches are being made by Dr. Fraser on this disease, but so far the causal agent has not been isolated. It is said to have been demonstrated, however, that people living

on parboiled rice do not suffer from beri-beri. The deaths registered from phthisis numbered 2,998, as against 2,709 in 1907, and the disease seems to be steadily on the increase. Malaria claims a good many victims, 3,062 deaths being registered. Evidence of sanitary progress is afforded by an extended water supply and improved drainage. An analyst has been added to the staff of the Municipal Health Department. It would appear that advantage is well taken of vaccination. In 1908 the number of vaccinations was 14,843, an increase of over 1,000 on the previous year. The different hospitals throughout the Settlements continue to do good work, no less than 30,370 cases being admitted during 1908. The medical school continues to give good results, 58 students being on the roll at the end of the year for the full five years' course.

The Principal Civil Medical Officer, Dr. D. K. McDowell, C.M.G., and his staff deserve great credit for the work they have performed in the medical service of the Colony.

Correspondence.

THE TEETH OF SCHOOL CHILDREN.

SIR,—The letter of Dr. Stanley Colyer in the JOURNAL of April 16th, p. 965, seems to call for a reply. He considers that the teeth of school children should remain untreated, on the grounds: (1) That the prevention of dental caries is a matter "of extreme simplicity, and that it is entirely in the hands of the individual"; (2) that "it will recur with almost mathematical certainty and render the scheme economically unsound"; and (3) that "the cost is excessive."

On the first point, I agree with him that a more generally diffused knowledge of the correct diet of young children from 1 to 6 years of age, and regular cleaning of the teeth, would prevent a great deal of dental caries. I emphasized this view at the meetings of the Special Subcommittee on Medical Treatment of the London County Council, and urged that the rising generation should be taught how caries might be largely avoided. But to say that its prevention is a matter of "extreme simplicity" is going a long way, and he would be a bold prophet who would say exactly to what extent prevention might be made to supersede cure under modern conditions of civilization; it will be generally agreed that the attempt to instruct working-class adults in dental hygiene has little prospect of success. The teaching of the children of to-day would give excellent results, in a measure, thirty years hence, but in the meanwhile an incalculable amount of mischief would have been done. Much of the incorrect feeding of young children of all classes is inculcated by the medical profession, I regret to say, and some of the textbooks by recognized authorities here and in America contain some very erroneous information. I have little faith in this dental millennium and counsels of perfection advocated by Dr. Colyer. Dental caries is less a disease of "imprudence," as he says, than of ignorance; but, even if it were so, then many other diseases such as ringworm, cirrhosis of the liver, syphilis, and many gastro-intestinal affections, to name only a few, should remain untreated, except for those who can afford to indulge in those luxuries.

On Dr. Colyer's second point I emphatically disagree with him. The dental profession will, I think, support me in the statement that dental caries is notably a disease of childhood, and that a great number of people who show marked susceptibility in early years need but little attention as adults if treatment has previously been carried out.

It may be, as Dr. Colyer says, that "the importance of dental disease in relation to general health, though great, has been exaggerated." The general appreciation of a hitherto neglected factor is likely to give rise to some exaggeration, but Dr. Colyer himself admits that the importance is great; and when I reflect on the vast amount of permanent harm accruing to the rising generation from septic mouths which simple treatment can easily remedy, I marvel that anyone acquainted with the facts can urge neglect until such time as a problematical