

for overcrowding (whether the persons convicted were or were not the same); under Section 48, when an occupied house is without a proper and sufficient water supply; and under Section 98, an underground room may be closed temporarily or permanently, if there have been two convictions for its occupation within three months.

Defaulting Sanitary Authorities.—There are elaborate provisions with regard to sanitary authorities not doing their duty. Section 100 gives in the specified instances of neglect in the removal of any nuisance, in the institution of any proceedings, or the enforcement of any bye-law, power to the County Council to do the work of the sanitary authority.

The County Council also has the power of complaint (Section 101) to the Local Government Board with respect to a sanitary authority neglecting its duty, and thereupon the Board make the usual inquiry, and then issue an order limiting a time for the performance of such duty. If the duty is not performed within the proper time, then the order may be enforced by mandamus, or the Local Government Board may appoint the County Council to perform such duty. All this reads well on paper, but when it comes to be put into practical operation, those who have had experience of the deliberate ways of the Local Government Board well know that a defaulting authority can hardly be brought to book within eight months.

Appointment of Officers.—Section 106 (3) makes it compulsory for every medical officer of health appointed under the Act to reside in his district, or within one mile of the boundary, the penalty for not doing so is that the office will be declared vacant; the Local Government Board has power to allow in certain cases other residence. The section is an asinine one, and not creditable to the intelligence of either the original drafter or those who approved it. It may be considered a principle that in legislating for the purposes of local government frivolous items of detail should always be left to be arranged by the local body. This residence is just such a detail. Who is the best judge of residence, not the legislature nor the Local Government Board, but the local authority. The idea of compulsory residence was no doubt suggested by the unfortunate fact that certain metropolitan medical officers of health, gentlemen of eminence in other walks of medicine, but taking feeble interest in public health work, and non-resident in their districts, have done precious little work personally. Do-nothing medical officers of health are inimical to the whole public health service—the active suffering for the faults of the indolent; but residence in this or that place is no panacea for the evil; the remedy lies in compelling each medical officer of health to attend at a stated time at an office, and to be given defined duties. With the facilities of modern travel, a metropolitan medical officer of health might sleep each night at

Brighton, and probably be all the better officer for doing so.

Under Section 108, a sanitary inspector appointed after January 1st, 1895, is to be the holder of a certificate granted by examination, or shall have been during three consecutive years preceding 1895 a sanitary inspector of a district in London or of some other urban sanitary district of not less than 20,000 population.

It is a matter of keen disappointment to the Sanitary Institute and its friends that that body which has done so much for the education and for raising the status of sanitary inspectors, was only inferentially and not directly recognised by the Legislature. The House of Lords amended the Bill, and put in the Sanitary Institute rejected by the Commons, but the Commons replaced the words Sanitary Institute by "a certificate of such body as the Local Government Board may from time to time approve," and these words have finally become law.

THE MARY WARDELL CONVALESCENT HOME FOR SCARLET FEVER.

By HERBERT T. BULSTRODE, M.A., M.D. Cam., D.P.H.

THERE are few convalescents more to be pitied or in a worse plight than those recovering from scarlet fever. For the most part they are individuals in fairly good health, and, therefore, active both in mind and body, but owing to the infection which still clings around them, they are prevented from mixing with their fellow creatures. The scarlet fever convalescent is like a leper—shunned by the public; but in few cases does he, like many lepers, possess a sort of quarantine island on which he may, during his exile, consort with his brothers in desquamation. As a rule, the unfortunate victim, if treated at his own home, is at once banished to the top floor, and all communication with the outer world cut off. He has—if he does what is right—to remain a prisoner under these conditions, until all peeling has ceased; and in spite of numerous mechanical and chemical devices to hasten the process, it is often eight, or in some cases ten, weeks before he can once more emerge from his seclusion. The writer himself is at the present moment in the ninth week of his convalescence, and still peeling on his feet. Of course, if the patient elect to enter one of the hospitals for infectious diseases, his lot is comparatively easy, but for obvious reasons this course cannot always be adopted.

The poorer inhabitants of the metropolis are fortunate in possessing a beautiful convalescent home at Winchmore Hill, but admission to it can only be obtained by passing through one of the acute hospitals of the Metropolitan Asylums Board. Owing to this fact, the better classes, and all those who have been treated either at the London Fever Hospital or their own homes, are

practically excluded. It is in the interest of this section of the community that I am venturing to offer to the readers of PUBLIC HEALTH a short account of the Mary Wardell Convalescent Home, at which I am now an inmate. The scarlatinal exile has found in Miss Wardell a sort of Father Damien, to lighten his afflictions. It is entirely owing to the energy of this lady that the Home exists, and she deserves all the pecuniary and moral support which can be given her.

The home is situated at some 450 feet above the level of the sea on Brockley Hill, Stanmore, Middlesex, from which spot there is a charming and extensive view of the surrounding country. The house is built upon a gravelly soil, and is supplied with water from the Colne Valley Company. There is a most complete system of drainage, which was carried out under the supervision of Mr. Rogers Field, C.E. Steam under pressure is used for purposes of disinfection.

The patients are divided into two classes: A first—consisting of those who are able to defray their own expenses, and who pay a similar sum to that charged for private rooms at the London Fever Hospital, viz., £3 3s. a-week. A second class—composed of patients who can contribute only in part to their maintenance. These are charged 10s. or 15s. a-week, according to their ages. The house is surrounded by about four acres of land, in which the inmates while away their time with lawn tennis, etc. Dr. Little, of Elstree, Herts, is the regular medical attendant, and the comfort of the patients is well looked after by a matron with a competent staff under her. There is an omnibus belonging to the institution for the conveyance of convalescents from their homes.

EXPOSURE ON THE HIGHWAY OF A PATIENT SUFFERING FROM SCARLET FEVER.—The Stroud Rural Sanitary Authority recently prosecuted Thomas Pitt, labourer, of Whiteshill, under the Public Health Act for exposing a person in his charge (his child) in the highway, while such person was suffering from scarlet fever. Defendant pleaded guilty. Mr. Albert Bailey, Sanitary Inspector, stated that on August 4th he saw Annie Pitt, aged 10, a child of defendant's, in the street, and noticed that her hands were "peeling." From the child's answers to his questions he found out that she had had the scarlet fever, and he ordered her indoors. The child told him that her mother and father were away from home at work. Dr. Parker, Medical Officer of Health, said he had seen two of defendant's children, one of whom was convalescent from the fever. Mr. Bailey handed in a letter from Mrs. Pitt's employer, who wrote that directly he heard the scarlet fever was in defendant's house he directed the woman to return home. The Bench fined defendant 2s. 6d. including costs.

AN EXAMINATION OF THE WATERS OF DARTMOOR AND EXMOOR,

AND OF THE DEVONSHIRE RIVERS—DART, TEIGN, TAW, OKEMENT, TAVY, PLYM, EXE, AND LYN.

By J. H. GARRETT, M.D., L.S.Sc., etc.

(Continued from page 522, Vol. III.)

A SHORT description of the rivers, each taken from notes made on the spot, may precede the results of the analyses of their waters, which latter will be found in the tables that follow. In no case was the sample taken within thirty-six hours of the last rain, so that the analyses give the composition of the waters in fine weather, and are therefore fairly comparable.

1. The Dart.—The longest head of the Dart has its origin upon Dartmoor, a few hundred yards south of Cranmere Pool. The river takes a southward course to Dartmouth. It commences by small pools or puddles situated in a track. These are at first separated, and ultimately overflow, forming a rill, the sides and bottom of which are at first of peat. After a few score yards, however, the rill has grown to a decided rivulet, and its bottom is covered with granite detritus, and granite blocks of varying size begin to appear in its course, and these ultimately become a chief feature of the river. On April 25th the water in the Dart was alkaline from the point where water was first observed to move in a stream, although in the stagnant pools it was acid. About two miles from Darthead a tributary coming from the direction of the head of the Tavy brings down much iron, which strongly reddens the bottom of the stream and the granite touched by it. At Dartmeet the West Dart brings water from the Princetown side of the Moor. On leaving the granite the river passes over a couple of miles of altered carboniferous shale and some few hundred yards of limestone, and finishes its course upon the Devonian. Four samples were taken from the Dart. No. 1, a hundred and fifty yards below where the Dart first begins to run; surrounding formation, peat and granite. No. 2, fifty yards below Dartmeet; surrounding formation, granite. No. 3, below the weir at Buckfast and above the town and factories of Buckfastleigh; surrounding formation, limestone, Devonian slates, and carboniferous shales. No. 4, at Staverton; surrounding formation, Devonian. At Buckfastleigh, four miles higher up, it has received the washings of paper and wool-combing and dressing mills and a tannery, besides the brook into which has been poured the raw sewage of the town. At Totnes, three miles below Staverton, the river becomes tidal.

2. The Teign.—This river rises by several heads on Dartmoor, one of them being near the head of the Dart, already described, and another in Raybarrow Pool, near Cosdon Beacon. The rocks over which it flows are granitic and carboniferous. Three samples were taken, No. 1 at Raybarrow