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Small-Pox In London

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# BRITISH MEDICAL ASSOCIATION: SUBSCRIPTIONS FOR 1876.

SUBSCRIPTIONS to the Association for 1876 became due on January 1st. Members of Branches are requested to pay the same to their respective Secretaries. Members of the Association not belonging to Branches, are requested to forward their remittances to Mr. FRANCIS FOWKE, General Secretary, 36, Great Queen Street, London, W.C.

## BRITISH MEDICAL JOURNAL.

SATURDAY, OCTOBER 14TH, 1876.

### SMALL-POX IN LONDON.

THE great amount of attention that the present outbreak of small-pox in the metropolis has excited indicates to how much greater an extent the public attention has been directed of late years towards the means of preventing disease and diminishing the annual death-rate. As we shall show by a comparison of the death-rates from small-pox since 1840, this outbreak has not at present assumed alarming proportions, as it has not as yet caused a mortality equal to that in any year since 1861. To what, then, do we attribute the alarm which it has created in South London and in Islington? We think that this has been chiefly caused by the removal of a large number of cases to the hospitals of the District Asylum Board, which would have hitherto been treated at home, so that the progress of the disease is measured at the present time more by the number of cases and less by the number of deaths. The disease is reported to be of a severe character, as a considerable proportion of the patients are suffering from the hæmorrhagic and confluent forms, which is well known to be an ordinary occurrence at the commencement of an epidemic. The type of the disease, and the progress it has made since the end of May, and especially during the last three weeks, certainly indicate the approach of an epidemic, which we shall attempt to gauge by a careful consideration of the past.

As the population of London has increased every year, it might lead to erroneous conclusions if we gave the total number of deaths for the different periods, we have, therefore, calculated the deaths from small-pox per million population for each year. In 1840 and 1841, when the disease was epidemic, there were respectively 673 and 561 deaths per million. In 1842, the mortality fell to 188; increased in 1843 to 224; and in 1844, when there was an epidemic, to 887 per million. In 1845, it was 438; in 1846, 121; in 1847, 435; and in 1848, another epidemic year, 720 per million. In 1849, the rate fell to 226; in 1850, to 213; in 1851, it rose to 461; in 1852, to 483; and in 1853, an epidemic year, it was as high as 893 per million. After this, we entered upon a period of comparatively low mortality, lasting, with one exception, for five years; the rate in 1854 being 270; in 1855, 403; in 1856, 211; and in 1857, the smallest number recorded between 1840 and 1873, which was 58. The next year, 1858, it was 92; after which it became epidemic, causing a death-rate of 420 in 1859, and 316 in 1860. In 1861, another very low rate occurred—viz., 76—which rapidly increased to 693 per million in 1863, which was the most severe epidemic for ten years. In the years 1864-67, the rates were 182, 216, 454, and 432; in 1868, it fell to 191; and in 1869 rapidly rose to 861 per million. In 1870, it was 295; and in 1871, the death-rate from this disease alone reached the formidable number of 2,413 per million inhabitants, and then fell to 538 in 1872. Since that time, it may be said to have died out until the present epidemic, as the death-rate in 1873 was only 34, and in 1874 it was lower still, having been 16 only.

The epidemic wave, as may be gathered from the preceding figures, varied greatly in height and duration, as the time occupied by its passage from its highest point in 1841 to the highest in 1845 was four

years; thence to 1848, only three years. The decline towards the end of 1848 was sharp, although not to a very low point, when it remained at a comparatively uniform level for two years, so that the period of greatest mortality did not occur again until 1853, a period of five years. We next had a wave of six years' length, which described a very low curve, without at any time reaching a very high point. This was followed by one of three years' length; then of four; and then of five, viz., from 1868 to 1872 inclusive, with a very considerable rise in 1869; so that this may be said to have included two epidemics, as the figures given readily show. The mean mortality for each of the earlier epidemic periods was singularly close, as in 1842-45 it was 434 per million population; in 1846-48, 425; in 1849-53, 455; but in 1854-60 it was 253; in 1861-63, 397; in 1864-7, 328; in 1868-69, 526; and in 1870-72, no less than 1,082. But, if we take the period of 1854-72 as one long completed wave, broken up by smaller undulations, we find the average mortality to have been 451 annually per million population; or, taking the whole of the period 1842-72, it was 437 per million per year.

Since 1872, the disease has been almost in abeyance, as in the month of January in the present year no death was recorded in London; but in February there were 3, and in March 7. At the end of May, deaths occurred in Lambeth, Camberwell, and Chelsea, and happened chiefly in the south side of London until the outbreak took place in Islington, which caused 1 death in the thirty-sixth week, 5 in the thirty-seventh, 1 in the thirty-eighth, and 9 in the thirty-ninth week. The returns of the Registrar-General are not sufficiently definite to state the districts from which the persons who died in the Stockwell Hospital were brought; but, as far as can be ascertained, there were 27 deaths amongst inhabitants of Lambeth, 7 of Camberwell, 3 of St. Olave's District, 6 of Wandsworth, 11 of St. Saviour's, as well as 30 in the hospital returned as from the south of London, 18 of Islington, 3 of Chelsea, 2 of Stepney, 3 of St. Pancras, and 1 each of Marylebone, Hackney, Kensington, Mile End Old Town, Poplar, Bethnal Green, and Shoreditch; so that deaths have occurred almost all over London, which is a very important fact. There were only 7 deaths registered during the first quarter, 26 in the second, and 110 in the third; so that, unless very active measures are taken, especially those of isolation of the sick, early vaccination of infants, and revaccination of all above fourteen or fifteen who have not been revaccinated or who do not possess good marks from former vaccinations, a severe epidemic must be looked for. It will, therefore, be necessary that larger accommodation be immediately provided by the District Asylum Board at Hampstead; and that directions be given by the various boards of guardians to their vaccination-officers to make a house-to-house inspection of the infected localities, especially in the subdistrict of Brixton, which has furnished a very large proportion of the deaths in Lambeth, and in Islington. The discussion at the Islington Board certainly does not indicate that proper measures will be adopted for stamping out the epidemic; but, on the contrary, a timidity bordering on ludicrousness seems to have taken possession of some of its members. It is no time for half-measures; and we therefore hope that those who have accepted the responsible position of guardians of the poor will prove themselves to be guardians of the public health rather than of their individual crotchets. Such precautions as cleanliness, diminution of overcrowding, disinfection or destruction of infected articles of bedding and clothing, we need not dwell upon, as all admit their value; but what we do insist upon is, that efficient vaccination of the whole population is the best preservative against death from small-pox.

The irregularities in the height and length of the epidemic wave in past years, and the violence with which the disease explodes in particular localities, as compared with the quiescence which it manifests on other occasions, prevent us from making at present any forecast as to the probable duration and intensity of the present epidemic; but the unusually low death rate for the past three years, and the great rapidity of its rise in September, induce us to fear that a severe outbreak is to be apprehended.