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LETTER to the REGISTRAR GENERAL on the CAUSES of DEATH in ENGLAND, by WILLIAM FARR, Esq., M.D., F.R.S.

YEAR 1867.

SIR,

Epidemic cholera ended last year, and left few traces of its existence except in London, Liverpool, and Durham. Diarrhoea, upon the other hand, was very frequent and fatal all over the face of the country, except in Wales and some of the mountainous regions supplied with pure water.

The rate of mortality, as shown in your report, differed little from the average; but in general the mortality of children was lower, of people of advanced ages higher, than the average of 30 years. The cold weather of January was exceedingly fatal to the aged. On the night of January 5-6 the thermometer at Greenwich fell to 14° centigrade below the freezing point of water,* and the deaths in London alone registered during the subsequent week suddenly rose to 1891. The excess was 385 deaths over the deaths of the same week of the year before, and of that excess 395 occurred in people above the age of 40. The same chill frost extinguished thousands of lives in other parts of the kingdom, where it penetrated the hut on the mountain side, the cottage in the valley, and here and there the mansion in the ancestral park.

What are Causes of Death.

The human organism, although the force with which it is animated is indestructible, dies inevitably under a great variety of conditions. In one instance death is the direct effect of mechanical violence; a mere shock of arrested motion converts the life force into a new form: in another instance blood is lost and the processes of nutrition are stayed: then agents like fire or frost disintegrate the parts, or chemical forces like opium still for ever the living action in sleep. Submersion under water or stoppage of the air-ways shuts out oxygen, and with the cessation of the supply of this element life is extinguished as suddenly as the light of a lamp; so also life slowly goes out when the supply of food is insufficient, as the flame of a lamp dies when oil is withheld.

Adverse living molecular forms too assert their powers over the structure, and, as in small-pox, syphilis, glanders, cholera, and the other zymotic diseases, transform the body into their own substance and habitation, so that it can live no longer its own life, but is transformed first into multitudes of organic particles, and then mayhap, after many transmutations, into air, water, and earth. What was a living nature of the highest form becomes a dull cloud of matter, again after cycles of changes to be incarnated.

The constitution of the tissues undergoes transformations in cancer and tubercle and other analogous diseases as the blood does apparently in diabetes.

The most common form of disease is inflammation and its results in the several organs of which the body is a confederation; and upon taking up these organs singly each is found to have its well characterized diseases: the brain, no longer the seat of intelligence, sensibility, and reason, becomes the seat of madness; the heart loses its wonderful hydraulic precision; the

* It was 60.6 of Fahrenheit, which has its zero 32° of its own scale below the freezing point of water.

lungs neither drink up nor discharge breath; the stomach transmutes its aliments no longer or transmutes them amiss; the liver and the kidneys fail to supply their specific distillations; the joints decay; the muscular system, once finely adjusted in its movements, is paralysed; the skin loses its fresh colour, and changes into ulcer and leprosy. The formative forces in some cases go wrong, or stop and leave organs unfinished. The reproductive system, too, which creates and perpetuates generations in endless succession, itself kills the parent and the child in one flood,—one throe of agony.

Now, when it is considered how multitudinous and complex the causes are, not of the one phenomenon, but of the many phenomena of death, for death has its many phases as well as life, it can scarcely be surprising to find that out of nearly half a million of deaths no causes were assigned in eight thousand or more instances. In 4630 cases no causes were specified; in 3506 cases it is only inferred that the deaths were sudden, as in them inquests were usually held.

Through the cooperation of the medical practitioners of England and Wales the majority of cases are certified on forms supplied by the Registrar General. In London about 93 per cent. of the deaths are certified, as far as the causes are concerned, by the medical attendants, 5 by the coroners, leaving only 2 in 100 uncertified. Out of 1578 deaths in London recently analysed 26 were uncertified, of which 4 only are recorded where the deceased had no medical attendant. One of the counties, Northampton, taken at hazard, yielded this result: out of every 100 deaths 91 were certified, 7 were uncertified; 2 died without medical attendance. In some few counties many of the people get no qualified medical advice during life, the medical man lives at great distances, or the people, ignorant themselves, apply for relief to irregular practitioners, men sometimes of natural ability, but often possessing no claim to confidence, except that founded on boundless faith in their own nostrums, which perform the same amazing miracles now as were performed in the dark ages by relics, charms, and exorcisms.

It must be stated, moreover, that the causes of death assigned are often inadequate, and frequently erroneous. A person is dead. What was the cause of his death? is the question addressed to the medical attendant. He has all the information to guide him in his answer that he employed during life in the treatment; but that may be insufficient. Some few years ago "dropsy" would have been returned, and was accepted in medical science as a disease, a cause of death. It is still used rightly in some cases. But many cases are traced back further; the dropsy is found (1) to be associated with albuminous urine, and affections of the kidney, such as Bright's disease; or (2) it is the result of retarded circulation from organic disease of the heart; or (3) it is *ascites*, an effusion into the peritoneal sac from obstructed circulation through the liver; or (4) it is hydrocele, perhaps from injury; or (5) it is ovarian dropsy; or (6) it is a consequence of scarlet fever; or (7) it is anæmic; or (8) it comes on suddenly with fever; or (9) it is general and associated with scurvy. Now after the first step is made in defining the seat and source of the "dropsy" we have got at one link of the chain of causes. The dropsy of scurvy, or anæmia, may be traced to famine, or to insufficiency of some elements of diet; that cause is primary. Then the scarlet fever is the cause of the dropsy; but what is the cause of the first disease? how was the dead child infected? *Ascites*, the cirrhosis of the liver, may be traced to alcoholism as its primary cause; or the heart disease may be derived from rheumatic fever. And the rheumatic fever may be the result of exposure to malaria of a specific kind. Now in many cases the primary cause can, but in many cases it cannot, be discovered. Yet to be able to prevent death, the primary cause is of first importance, as it sets the rest in motion.

There are affections of the brain, of the chest, and of other internal parts, which can be distinguished by the pathologist on actual inspection, but not otherwise; while other fatal functional derangements cannot, under the most favourable conditions, in some cases, be connected with any changes in the material structure of organs, even with the help of the best available instruments.

Observers, with excellent intentions, are not always competent, or do not devote the required time to their investigations. Their means of observation are sometimes restricted; they only see the patient for a few moments in his last hours, or for a few minutes at a public dispensary; while from children the subjective symptoms cannot be gathered.

Where the organic injury is evident in the dead body, and is the proximate cause of death, the inquiry after the first cause only commences. Thus a man is found dead in the road in blood, with a wound through his head; that was lethal; but with what instrument was the wound inflicted? A pistol. Who fired the pistol? The man now dead, or another man? Himself. Then was it an accident or a suicide? What were the motives of suicide? Another man. Is the manslayer a soldier fighting, or a duellist? or is he guilty of murder, manslaughter, or justifiable homicide? In a railway accident the question "who is to blame?" involves "what was the cause," what were the circumstances of the overthrow or collision?

On inquiries into the causes of this class the great tribunals of European justice are occupied. To these causes of death by the violence or malice or recklessness of men importance is everywhere attached. But the causes of the whole deaths of a nation partially inquired into everywhere have nowhere been published, except in England. Your returns are at present, it is to be regretted, unique. And while they are avowedly incomplete, as the chain of causes is not always traced, and the true cause is sometimes mistaken, I hope to be able to show that the returns are of use in their imperfect state, that they require improvement in the present day, and that they are of incalculable interest to mankind.

It is true that 48,634 persons died at the age of 75 and upwards in the year, and thus attained advanced ages; 650 lived to the age of 95 and upwards; of whom 70 lived a hundred years and upwards, which is the term of human life. But how fared it with the multitude? 134,187 persons died in ripe manhood at the age of 25 and under 65 years; while 242,325, under the age of 25, were cut off and perished in childhood and youth! Of the total recorded deaths only 392 were referred to homicide; and paramously important as the deaths from this cause unquestionably are, occupying too so large a portion of our juridical force, and testifying as the reduced number does to law and police efficiency, it brings out with still greater force the magnitude of the sacrifices of life from other agencies. What these agencies are is assuredly well worth careful inquiry. Death is inevitable, but why is life cut short? Why do the people of England live only a mean lifetime of 41 years?

Biology includes in its sphere of research death, which like birth is common to man and to every living thing; so the extension of that science will shed light on the causes of death. The laws of life involve the laws of death; and every forward step of the biologist will open new fields in vital statistics. In the meantime the existing knowledge admits of so many practicable applications as to justify us in asking for its extension by all the means of accurate observation. It places at the disposal of men now an incalculable control over the duration and happiness of their lives; and it opens to the future a prospect of discovering not indeed elixirs of life, not secrets of earthly immortality to any individual, but protection against many of the dangers which beset the human race.

Science will naturally advance, and the extension of skilful practitioners to the remoter parts of the country will supply good observers. To them we must trust. Where death happens in such circumstances as render it impossible to obtain a satisfactory certificate from a medical man in attendance, the cause, I submit, in the interests of science and of human safety should be investigated by a medical officer specially appointed in each registration district.*

One important step has been taken by a committee nominated by the Royal College of Physicians, who have drawn up a complete nomenclature of the pathological causes of death. This will be distributed among the practitioners of the United Kingdom, and will thus facilitate the identification of that great class of causes. Synonymes are given in the Latin, French, Italian, and German languages.

Progress of Public Health possible.

Malthus maintained at one time that attempts to prevent the ravages of epidemical diseases are hopeless, inasmuch as the population always presses on the means of subsistence. Now population is dependent on two factors, the yearly births of children and the number of years the children live; and if subsistence is limited population is also limited. The population of England may be less, but can never be greater, than the subsistence it can command. It is not, however, necessary that the subsistence itself should be produced in England: other products of the same exchangeable value can in the present state of transport in the world always be converted into subsistence. Manchester lives as well as a county consisting of farmers and agricultural labourers. A nation then is not "cabined, cribbed, confined" by its acres; it can create on one acre of land produce worth the agricultural products of a thousand acres. Subsistence is a limited but not a fixed quantity. Its extension may keep pace with the extension of population. Then the births of the present day suffice to sustain a population much larger than the population existing; and yet the births might be increased by one third, as will be evident when it is considered that more than two million women of the age of 15—55 are unmarried, and that the three million women of that age married, "or otherwise to the same extent as married women bearing children," bear on an average only 22 children annually to every 100 women.† The reproductive power of the nation is thus under "restraint," as Mr. Malthus called it, and the experience of France implies that without diminishing the number of persons in the married state the annual births may here fall very considerably below the present numbers. Then there is the great opening of emigration. Vast regions of America, Australia, Asia, and Africa are unpeopled, or are peopled by unsettled unproductive savages. Colonial settlements,—plantations, as Bacon called them,—are the glory of England. Other races have transiently conquered the nations of the earth; England has planted Englishmen on continents from which time cannot dislodge them. These plantations call perpetually for recruits.

To dread, therefore, any ill consequences from arresting epidemics, or to argue on *a priori* grounds that it is impossible in opposition to nature to save life, to prolong life, to strengthen, and in every respect to improve the English race, is illogical; for give them health, and if the increased numbers cannot be sustained on subsistence by their industry within the shores of those islands, the births will naturally decline; but the natural remedies are increased industry to command produce from abroad, and emigration to seek after subsistence on the vast trans-oceanic territories.

Then the very conditions which diminish the numbers killed in the battle of life diminish the numbers wounded; and as every single death

* See 27th Annual Report of Reg. Gen., App.

† See Census Reports, Vol. II. pp. xxii and xxiv, and Vol. III. p. 21.

by violence implies the injury or mutilation of survivors, so nearly all the zymotic diseases leave irreparable traces in the blind, the deaf, the weak in body or brain. By removing the discovered causes of death you at the same time remove conditions which prevent the progress towards perfection of the English race. We have, therefore, everything to hope, and nothing to dread from measures of public health and of public safety.

I. ZYMOTIC DISEASES.

There are four orders in this class, which includes the whole series of epidemic, endemic, and contagious diseases. The miasmatic order (1) includes fevers and all the diseases affecting man by specific matters through air and water; scarlatina and ague are types of its two sections. Small-pox connects this order with (2), enthetic affections, such as syphilis and glanders, which are propagated by inoculation.

(3) The dietic order includes, as causes of death, whatever is the direct result either of the want of the natural elements of food, or of the consumption as diet of noxious matters. Famine, scurvy, want of breast milk, alcoholism are types. (4) Parasitic diseases differ from those of the two first orders, inasmuch as the organisms which give rise to them have a well defined, independent existence, and a distinct place in the animal and vegetable kingdom; their propagation has many points of analogy with the action of molecular multiplication in zymoses. Trichina, tenia, (tape-worm), acarus scabiei (itch), oidium albicans (thrush), sarcina ventriculi are types of 55 parasites giving rise to diseases.*

This class of diseases was fatal to 90,989 persons. It occasioned 20 in every 100 deaths, and the deaths to the population were in the proportion of 4.288 deaths to 1000 persons living. The mortality of zymotic diseases, except in 1860, has never in any year since 1851 been lower. 1860 was a year of exceptionally low temperature, and of abundant rainfall. In the present year the temperature was also below, and the rainfall was above the average. The year 1867 also followed an epidemic year, and as a general rule the deaths in years after epidemic years fall below the standard. The cholera, which to every 1,000,000 living was fatal to 685 in 1866, was fatal to only 43 in 1867; the deaths from diarrhoea in the same number rose from 818 to 937; the mortality from almost every other disease, except diarrhoea, subsided (Table 12). Comparing the deaths to a million living in the three quinquennials (1850—64), deaths from small-pox fell from 279 to 191; deaths by measles rose from 406 to 478: by scarlatina and diphtheria the deaths rose from 891 to 1190; by croup from 225 to 279; by whooping-cough from 497 to 527. The increase by these causes in the fifteen years did much more than counter-vail the decrease in the deaths from small-pox. Diarrhoea and cholera in the two years, 1865 and 1866, sustained the high mortality. In 1867 there was, notwithstanding eruptions of some forms, a decisive fall of zymotic activity; even fever declined. The storm was followed by a calm.

Several of the zymotic diseases, as a rule, only occur once in life, and they attack the young, following each other as age advances in a certain order of developed intensity. Thus whooping-cough is most fatal in the first year of age, so is diarrhoea; measles is most lethal in the second year, croup in the second year, diphtheria in the second year, scarlatina in the third year or the fourth. Then few deaths from whooping-cough, few from measles happen after childhood; none from croup. Few deaths from these causes occur past five years of age. Afterwards scarlatina and diphtheria overtake the young travellers in life, and slay one-third of their victims. Vaccination interferes with small-pox, which is fatal to nearly equal numbers over and under five years of age; for many adults still die of small-pox.

* In Nomenclature of Diseases, prepared by College of Physicians, pp. 232—235, fifty-five human parasites are enumerated. See Sir H. Holland on Hypothesis of Insect Life as a cause of Disease, in Med. Notes and Reflections, p. 567.

Fever, erysipelas, carbuncle, influenza, dysentery, ague, rheumatism, and puerperal fever (metria), are most fatal to adults.

To prevent the ravages of these causes we have to go beyond their pathological phenomena; and it must be recollected that every death represents several occurrent cases, varying with age, with hygienic condition, and with medical treatment. The exact determination of the factors of mortality in the several types of disease lies at the foundation of therapeutics, yet it has been strangely neglected. The new Clinical Society might well take this in hand. To illustrate what is here meant Dr. Murchison shows that in the ten years, 1848-57, at the London Fever Hospital the mortality of cases of continued fever was at the rate of 10 per cent. at the age of 15-25, and 15 per cent. at the age of 25-35; so to 10 and to 15 deaths at the two ages there were 100 cases of fever. Proceeding further in the analysis of the three forms of such fever he shows that the mortality from typhus at the same two ages is 7 and 16, from enteric fever 18 and 22, from relapsing fever next to nothing. That is in the London Fever Hospital.* The rates vary in private houses according to the condition of those houses; and we may assume that the danger varies under different lines of medical treatment. Here is a wide field for interfering with the operation of pathological causes of death. It is the great function of the medical profession. They arrest, they render less lethal, zymotic diseases, by drugs, diet, and hygienic regulation. The force Physic has at its command is undetermined, but it will increase as the science and the art increase, and as the distribution and the organization of the profession are improved.

Intermittent and remittent fevers are known to be generally induced by marshes. Dr. Salisbury endeavours to trace ague to the pollen of a palmella. Whatever the direct agent may be we know that the danger from these diseases is obviated in two ways; (1) by avoiding marshy tracts altogether, and (2) by draining and converting the marshes into cultivated land, as has been done partially in England. On the undrained lands of the lower valleys of the Thames, and of other English rivers, where their waters are slow, sluggish, thrown out of their channels by milldams, thousands of the population suffer from ague, rheumatism, and neuralgia, while many die of these and of other diseases. Drainage of the marsh land, removal of obstructions to rivers, and engineering improvements of the water channels will obliterate countless evils.

The mere aggregation of people together in close apartments generates or diffuses the zymotic matter. Thus, place lying-in women in close proximity to each other, or mix them up with the patients of a general hospital and they die of puerperal fever; place many wounded men in a ward where cleanliness is neglected, and erysipelas, pyæmia, gangrene spring up; imprison men within narrow walls, or crowd them in rooms and typhus breaks out. The general and special hospitals of the country have been, until quite recently, erected without any special reference to the dangers accruing from the assemblage of great masses of sick people within the walls of one building, so that the efforts of the most skilful medical officers are frequently defeated; but a better system of hospital construction, with more cubic space, is likely to prevail, with due provision for effective changes of air, and then the evils of agglomeration will be mitigated. It is only recently that the subject has attracted the attention of surgeons,† who will no doubt anxiously watch the results of

* Murchison on Fever, pp. 221, 369, and 531.

† Sir Astley Cooper, in his lectures as reported in the *Lancet*, refers to cold and other causes of gangrene, but has no reference, as far as I can find, to its origin in the poison of hospitals. Under erysipelas this passage occurs: "In hospital practice surgeons were formerly exceedingly afraid to operate in autumn and spring, for it has often happened that the stimulating effects of adhesive plaster have produced this disease, and have led to the death of the patient. Sometimes it is epidemic and sometimes contagious." *Lancet*, Vols. I., II., edited by T. Wakley, surgeon, 1826, p. 247. Pyæmia is not referred to specifically by the great surgeon.

the new arrangements. Sir Henry Thomson and Sir James Simpson will, we may hope, continue their researches so as to determine accurately the mortality after the various kinds of amputation in hospitals and in private houses.

To limit the operation of zymotic diseases overcrowding in towns must be absolutely prohibited: the mere accumulation of masses of living people within narrow limits either generates or insures the diffusion of epidemic disease. The plague which almost destroyed Athens was aggravated by the policy of Pericles when he brought the outlying country population within the walls. It is now as then a conflict of difficulties; for the question arises, where can the people live if you turn them out of cellars or garrets; and the alternative is in appearance cruel. But as a healthy city of a limited number of inhabitants enjoys life and fulfils the destiny of its race, while a crowded, suffering, sickly, degenerated city of twice the population only drags on a wretched existence in violation of the principles of life and the operations of nature, laws against over-crowding must be rigorously enforced. A wise humanity involving self-preservation is the law of every city.

Small-pox.

To render the body insusceptible of one zymotic disease of a disfiguring and distressing nature is in itself a good thing, and there is no evidence to show, nor is it likely, that pure vaccine lymph induces any other disease than cowpox. The number of deaths after vaccination is inconsiderable. It bears no comparison with the number of deaths by natural small-pox. And the opposition to vaccination on any of these grounds is irrational.

It is, however, by no means proved, that the general mortality under unfavourable sanitary conditions is much reduced by rendering a child insusceptible of one type, while he remains exposed to all other types of zymotic disease. This was clearly pointed out in a remarkable treatise by Dr. Robert Watt, lecturer on the theory and practice of medicine in Glasgow. The work was dedicated to Sir Gilbert Blane. Dr. Watt found that, in accordance with his own experience, the Glasgow burial registers showed a decisive decline of the deaths by small-pox after the introduction of vaccination. His researches extended over the 30 years 1783-1812,* which he divided into *five* equal periods of six years each. In the first three periods (1783-1800), before "vaccination could have had any influence," the deaths by small-pox in 100 deaths from all causes were 20, 18, 19; in the fourth period (1801-6), vaccination had nearly reached its maximum, and the deaths by small-pox fell to 9; in the fifth period (1807-12), when vaccination had "been pretty fully established," perhaps as much so as in any other city in the empire," the proportion fell to 4. This gratifying result was to some extent counterbalanced by a slight increase in the proportion of deaths by whooping-cough, and a great increase in the deaths by measles. What was still more strange, Dr. Watt found that the proportion of deaths under 10 years of age, to the deaths at all ages, was rather greater in the last than in the first 6 years. He does "not see the smallest ground for the hypothesis that "vaccination does positive harm" "by infusing some peccant . . . humor "into the constitution." But in the first period, "when a third of all the "deaths under 5 years of age were caused by small-pox," a child had the best chance of reaching its tenth year. Dr. Watt was far from expecting this result. He had found that "more than 50 per cent. of the "human species died before they were 10 years of age," and that 20 out of 100 born, excluding still-born, "perished by this dreadful malady."†

* Appendix to Treatise on Chincough, by Robert Watt, M.D. (1813), pp. 375-379.

† Dr. Watt describes vividly his astonishment, pp. 334-336:—

"I began to reflect how different the case must be now! In eight years little more than 600 had died of the small-pox; whereas in 1784 the deaths by that disease alone

This is an important point in pathology; and it must be admitted that although there were defects in his data Dr. Watt succeeds in showing (1) that small-pox was one of the great causes of death in Glasgow down to the year 1800, (2) that the deaths by small-pox were reduced to a fifth of their original number by vaccination, and (3) that the children died in nearly the same numbers as before, but of other forms of disease.

Glasgow was then rapidly increasing, and it is possible that the births were then increasing; the mortality is therefore less than it appears to be by Dr. Watt's method. But this does not invalidate his induction. Glasgow has always been famous for its statistics, and these unfortunately show an increase of the mortality of children. Thus in the five years 1821-5 the mortality of boys under five years of age was 8.08, in 1831-5 it was 9.78. In the year 1865 the mortality of boys in Glasgow was 11.48, of girls 10.36.† These recent returns confirm the principle. Small-pox is no longer so fatal as it was before vaccination was introduced; in Glasgow it caused in the year 1864 no longer 20 but 2 in 100 deaths; only 180 in 6054 deaths, that is 3 per cent. of the deaths under 5 years of age; yet the mortality of children is certainly as high, probably higher, than it was in the last 18 years of the last century.

The compulsory vaccination in England has reduced further the fatality of small-pox, but since 1853 other diseases have so prevailed as to counter-balance the gain under this head. The mortality of children has not declined in a corresponding degree.

It is singular that Dr. Watt, evidently a practitioner of great sagacity, and a philosophical professor of medicine, does not at all advert to the wretched sanitary condition in which the increasing population of Glasgow lived at the time he was writing. Yet a part of Glasgow, so late as 1841, is thus described by M'Culloch.‡ "It consists of a labyrinth of narrow lanes or wynds, whence numberless entrances lead off to small squares, courts, or closes, which usually have a dunghill [human] in the centre. These wynds and courts are formed of old, ill-ventilated, and mostly dilapidated houses, varying from two to four stories in height, without water, and let out in stories or flats; one of the latter often serving for the residence of two or three families. Frequently, however, the flats are let out in lodgings, as many as 15 or 20 individuals being occasionally found huddled together in a single room. . . . Filth, destitution, and misery prevail to a frightful extent." I cite this passage to

amounted to 425, and in 1791 to 607, which on both occasions exceeded the fourth of the whole deaths in the year.

"To ascertain the real amount of this saving of infantile life, I turned up one of the later years, and by accident that of 1808, when to my utter astonishment, I found that still a half or more than a half perished before the tenth year of their age! I could hardly believe the testimony of my senses, and therefore began to turn up other years, when I found that in all of them the proportion was less than in 1808; but still in taking an average of several years, it amounted to nearly the same thing as at any former period during the last 30 years. This was a discovery I by no means expected, and how it could have come to pass appeared to me inexplicable.

"From every circumstance which had come under my observation, the efficacy of vaccine inoculation appeared certain. The experience of 13 years' pretty extensive practice had confirmed me fully in this opinion. But still the question recurred, how are we to account for the same or nearly the same number of deaths under 10 years of age? As no new disease has appeared, the deficiency occasioned by the want of the small-pox must have been made up by a greater mortality among the other diseases of children. Has it been equally divided among them, or has a greater share fallen to some than to others?" ["An inquiry into the relative mortality of the principal diseases of children in Glasgow. Appendix to Treatise on Chincough, pp. 334-336. By Robert Watt, M.D. (1813)."]

* M'Culloch; Statistics of British Empire, Vol. II. p. 547. Lancet, 1835-6, No. 12., paper by Mr. Edmonds.

† Report by Dr. Stark, F.R.S.E., 10th Report of Registrar General of Scotland, p. xxxiv.

‡ Geographical Dictionary, Vol. I, pp. 904-5, Art. Glasgow.

show under what circumstances the suppression of a most fatal type of disease did not diminish the mortality in Glasgow. And it is under unfavourable conditions of the same kind, although less in degree, that the mortality is now sustained in England, where the town populations are constantly increasing, without equivalent arrangements for drainage and for accommodation in dwellings, are every year exposed to increasing dangers.

There are two diseases, scarlatina, and diphtheria itself a new type of disease, which have been exceedingly fatal since the year 1855, when diphtheria was first distinguished in the returns. Up to 1857 it was apparently confounded with cynanche maligna; but in 1858 it became popular, and in that year 4836 deaths, in 1859 no less than 9587 deaths, were ascribed to diphtheria. In 1858 and 1859 the deaths from scarlatina and diphtheria together were 30,317 and 29,494; in the two years 1863-4 the deaths from the same causes rose to 36,982 and 35,164. The mortality in 1858-9, from small-pox, had fallen to 3.35 and 1.97 annually in 10,000 living, while from scarlatina and diphtheria the mortality had risen in the two years to 15.72 and 15.13. In 1863-4 the mortality from small-pox was 2.93 and 3.73, from scarlatina and diphtheria 18.18 and 17.08.* While small-pox dwindled, these two zymotic diseases flourished at the expense of the growing population.

Small-pox, as a general rule, occurs only once in life; some children enjoy immunity against attack; they cannot be vaccinated, they cannot be inoculated; others are infected by the slightest exposure; and under infection some take the disease slightly, some malignantly, fatally. So it is with scarlatina, which now sweeps away a family of children, and is then slight or even unperceived in other families during the same epidemic; epidemics, however, varying in intensity and character from time to time, from place to place.†

It is impossible, in the present state of science, to reduce under any simple law the phenomena of disease development; but disease development is evidently associated with the life development of species, and has with it some analogies. It is, for instance, found by the English Life Table that of 1000 children born alive, 703 live to the end of the tenth year, 297 die in the 10 years of current life; and the deaths, frequent at first, become less frequent as the age of puberty is approached. The deaths run down rapidly from 149 in the first year to 5 in the tenth year of life; and they are the results of many types of disease, springing up in a certain order. The rate of death is, under the same conditions over a series of years, nearly constant. There is a determinable law of morbidity, as there is a determined law of mortality.

While the living units of the generation have fallen in the proportion of three tenths, their constituent elements have augmented by growth: thus while, according to the determinations of M. Quetelet, the weight of 703 children of the age of 10 years is 17,702 kilograms,‡ the weight of 1000 children at birth is only 3055 kilograms; and going back to the ova, of which 1,000,000 would not be of the bulk of a cubic inch, or still further to their germ cells and sperm cells, which are microscopic points, we arrive at the elementary units of which these 1000 live-born children are the survivors. The embryo in its development is subject to casualties which probably increase as we approach its origin. But with this we have nothing to do. It contains in little elements which it has derived from both its parents, and which will or

* See Tables, pp. 234-9.

† Sydenham describes simple scarlatina distinctly: he does not refer to the throat affections, and says the patient can only die by the doctor's default. Joseph Frank describes the disease now as the most dreadful scourge in Europe. See *Maladies éteintes et maladies nouvelles* par C. Anglada, 1869, pp. 304-50.

‡ Quetelet sur l'homme, Vol. II. p. 37, 1 kilogram = 2.2 lbs. avoirdupois.

may reproduce their nature, the nature of their ancestors, and what is more immediately to our present purpose, the diseases by which they perished. To explain various phenomena in reproduction hitherto inexplicable, Mr. Darwin advances the theory of Pangenesis, in which he assumes that all the organs of the parents are represented by gemmules in the embryo.* It is a species of atomic theory in biology. Adopting the hypothesis for the moment, let us suppose that certain gemmules or corpuscles, or "germinal matters," are in the system of a child, capable of becoming the small-pox "granulations" of Chaveau, alone or after coalescence with the granulations of a small-pox patient, then it is conceivable that their metamorphosis, having exhausted the material, may leave the system insusceptible of any further invasion. The same reasoning will apply to measles, scarlatina, typhus, and other types of disease not recurrent.†

The human frame is built up of molecules passing through the evolutions which constitute the various phases of human life. But these molecules are completely deranged by other molecules of lower forms of life, such as the small-pox "granulations," *variolads* as they may be named, which convert variable quantities of the substance of the child's body into their forms, to be finally transformed into pus or into other corpuscles according as the child's life survives or succumbs in the struggle. Each zymotic disease is generated, we may conceive, by species of living molecules, which may be of a twofold nature, bearing some such relation to each other as the germ and sperm plasms of plants and animals, and becoming prolific after coalescence, give rise to the various forms of epidemic disease. The danger of bringing great numbers of people into close proximity is well known; it evidently increases the chances of the coalescence, propagation, and diffusion of the various active disease molecules.

The life of these zymotic generations is the death of the elemental part of the human organism, and yet their development depends on its existence. This to some extent limits epidemics. The black death destroyed according to some accounts half the population of England; and the very force of its zymotic principle destroyed the pasture on which the death fed;

* Animals and Plants under Domestication. Darwin, Vol. II., pp. 357-404.

† Mr. Darwin gives a correct and succinct account of the current doctrine of the functional independence of the elements of the body:—

"Physiologists agree that the whole organism consists of a multitude of elemental parts, which are to a great extent independent of each other. Each organ, says Claude Bernard, has its proper life, its autonomy; it can develop and reproduce itself independently of the adjoining tissues. The great German authority, Virchow, asserts still more emphatically that each system, as the nervous or osseous system, or the blood, consists of an 'enormous mass of minute centres of action Every element 'has its own special action, and even though it derive its stimulus to activity from other parts, yet alone effects the actual performance of its duties Every single epithelial and muscular fibre-cell leads a sort of parasitical existence in relation to the rest of the body Every single bone-corpuscle really possesses conditions of 'nutrition peculiar to itself.' Each element, as Mr. Paget remarks, lives its appointed time, and then dies, and after being cast off or absorbed, is replaced * * * Whether each of the innumerable autonomous elements of the body is a cell or the modified product of a cell, is a more doubtful question, even if so wide a definition be given to the term, as to include cell-like bodies without walls and without nuclei. * * * * Physiologists maintain, as we have seen, that each cell, though to a large extent dependent on others, is likewise, to a certain extent, independent or autonomous. I go one small step further, and assume that each cell casts off a free gemmule, which is capable of reproducing a similar cell. * * An atom of small-pox matter, so minute as to be borne by the wind, must multiply itself many thousandfold in a person thus inoculated. It has recently been ascertained that a minute portion of the mucous discharge from an animal affected with rinderpest, if placed in the blood of a healthy ox, increases so fast that in a short space of time 'the whole mass of blood, weighing many pounds, is infected, and every small particle of that blood contains enough poison to give, within less than 48 hours, the disease to another animal.' [Animals and Plants under Domestication. By C. Darwin, M.A., F.R.S. Vol. II. pp. 368-9-70-77-78.]

it put an end to a mass of the people living; and to this extent at least it diminished its own mass; it burnt up in a few years its elements in those surviving; and it encountered other organizations, whose career it could not arrest. So every year recent epidemics subside on this ground; or they are limited by the operation of conflicting disease molecules. For if there is a struggle for existence among the visible forms of life, and if the struggle is the severer, the nearer these forms are allied, is there not also the same struggle among the elementary independent particles of life, to which epidemics are due? Theirs is also a struggle for subsistence.*

The constituent units of the body, however independent they may be in their action, are not independent in the same sense as infusorial units, but form parts of one whole, of one *microcosm*, on whose life they depend. As the one may be called the corpuscular life the other may be called the cosmical life of the species: and each species has conditions favourable to its own existence, unfavourable to other existences; alter these conditions essentially, and the life of a given species, gains or loses its ascendancy; the matter of which it disposed, no longer employed in its further development towards perfection, is abstracted and appropriated by other forms of life. The Glasgow victims were gathered together from all quarters, from the Highlands, from Ireland, and from elsewhere; they were lodged in conditions unsuitable to human life; but excessively favourable to the generation of disease molecules, which abounded in the air, water, and food, as well as in their own structures. To render them unassailable by *variolads*—the matter of small-pox—was not enough, for it left them exposed to the other forms of disease. Thus in a garden where the flowers are neglected, to keep off thistle-down merely leaves the ground open to the world of surrounding weeds.

The spread of small-pox, scarlet fever, and diseases of that kind is analogous to many chemical and natural phenomena. Thus a spark falls, the fire spreads, and a city is in flames. The process of combustion, like a plague, is propagated. Atoms of hydrogen and oxygen combine the instant they touch a kindred flame, and combustion goes on self-sustained so long as those elements are supplied. Water is the product. But the flame may be kindled by other elements in combustion; and water will not generate water; not so with fermentation. A little leaven leavens the whole lump; and the leaven left propagates other leaven. Yeast in wort converts its sugar into alcohol; wines ferment and undergo various changes; so do milk, butter, cheese, and other animal products; each fermentation has at least one specific chemical product, be it alcohol, acetic acid, lactic acid, or butyric acid; and also one ferment. It is the great merit of Pasteur to have established by ingenious and experimental research, that all these ferments consist of organic molecules, propagated from previous molecules of the same kind. He has shown not that spontaneous generation is impossible, on the confines of the three kingdoms, under every possible condition, but that the fermentations in all the cases he examined were set in motion by specific pre-existing germs; multiplying indefinitely by reproduction under given conditions.

Through self-propagating chemical action, as instanced in combustion, we enter the region of fermentations, where there is also chemical combination, but in dependence on the action of living corpuscles on lifeless matter of organic origin.

Again, we find living molecules in living animals inducing series of changes in the cosmical life, as for example in the ox or in the silkworm.† This differs from fermentation; it is a case of strange corpuscles at work

* Thucydides notices that during the plague of Athens other diseases declined: "And besides this, none of those diseases to which they were accustomed afflicted them at that time; or whatever there was ended in this." Hist. L. ii. 51. He refers to this twice, and it has been since matter of common observation.

† See Pasteur on Silkworm disease.

in the midst of the constituent corpuscles of a living being. The struggle and the reaction of the conflicting elements produce the phenomena of diseases, such as small-pox. Granules of vaccine lymph, for example, inserted in the arm of a child, give rise to heat, swelling, redness, pustules, maturation, cicatrix; in cows they produce a disease of another form, cow-pox; in horses they give rise to grease. The corpuscles are specific in their nature, as is shown by the reactions, nearly uniform, which follow in the same animals; reproducing themselves in the same structures; and giving rise to indelible modifications of the corpuscles (biads) of which individuals affected are built up. The diseases of this nature are called zymotic diseases; the peculiar processes zymoses; to distinguish them from fermentations, with which they have more points of contact than they have with combustion, or any common propagated chemical action. This class of diseases may be designated by a letter; or by an arbitrary word invented for the purpose; and so may the process; but it is quite in accordance with English practice to designate a class of phenomena by a name derived from the Greek, without thereby implying that the new name is either limited or defined by the Greek root.*

Each disease has its peculiar germinal matter; which can sometimes be isolated, as in the case of small-pox, cow-pox, syphilis, glanders, purulent ophthalmia, cholera; while in other cases, as in influenza, its existence is assumed by analogy and hypothesis. It is useful for the sake of explanation and discussion to give these various matters names; thus the vaccine lymph is called *vaccinine*; the granulations of Chaveau, *vaccinads*; variola lymph, *varioline*; and its corresponding elements, *variolads*. Instead of cells, globules, germs, granules, gemmules, protoplasm, germinal matter, or other descriptive names which have been given to the organic units, it will be convenient to adopt some such generic word as the "atom" of chemists. Monad has been appropriated in another sense, and "biad" from bios, (*βίος*, life, evidently allied to *βίαι* force) the root of biology, may be conveniently employed. The ultimate organic atom of chemists, like the inorganic atom, is beyond the reach of the microscope; but these *biads* may be, or become visible. Physically they are like blood-corpuscles (*hæmads*).

The zymotic elements differ essentially in their powers, but it is not likely that they can all be distinguished by the microscope. They are known by their effects. By them and by other causes out of 1000 born in Liverpool, 518 children were destroyed in the first ten years of their life; some by small-pox, many by measles, scarlatina, whooping-cough, many by typhus and enteric fever; one disease prevailing in one year, another disease prevailing in another, but still yielding the like fatal results. This represents what Dr. Watt found at Glasgow long ago. Out of 1000 children born in London, 351 die under ten years of age by zymotic diseases and other causes; the deaths are less by 167 than the deaths in Liverpool. How much less is the loss of life by these diseases in the healthy districts of England! There, out of 1000, only 205 children die in the first ten years of life. The enormous difference cannot be ascribed to vaccination, as common in town as in country; the protection of life against small-pox alone leaves it still at the mercy of the other dangerous diseases of the insalubrious city. There the conditions are in favour of disease-life, and in the highest degree unfavourable to human life.

* Lavoisier called a well-known gas *oxygen*, on the ground that it forms in combination all the acids with which chemists were then acquainted. *ὄξος* is "sour wine," "vinegar"; and "vinegarmaker" would be a tolerably literal translation of "oxygen," but by no means a good definition of that wonderful element. Some writers have foolishly objected to the name, since the discovery of hydrochloric, and other acids containing no oxygen. So when *zymosis* derived from the Greek root *ζύμη* *leaven* is employed to designate a series of disease processes in men and animals, it is not intended to confound these processes with fermentation. If fermentation expressed the idea, that word would be used. *ζύμη* is probably drawn by a similar process from ΖΕΩ to boil, seethe, bubble; the bubbling of boiling water, and fermentation presenting some points of resemblance; intestine motion and heat.

Protection against small-pox, and against all forms of imported disease, if that were practicable, should not be neglected; the isolation of the invaded individual; the destruction of the secretions by chemical agencies; chlorine, ozone (permanganate of potash), carbolic acid, sulphurous acid, vinegar, camphor, and other substances, found by experience to be destructive, or prejudicial to the zymotic elements, should all be brought into play. These elements are causes of death, but an order of causes lies still higher.

The primary object to aim at, is placing a healthy stock of men in conditions of air, water, warmth, food, dwelling, and work most favourable to their development. The vigor of their own life is the best security men have against the invasion of their organization by low corpuscular forms of life; for such the propagating matters of zymotic diseases may be held to be. Vaccinate by all means; but at the same time provide streets, spaces, dwellings, water, drainage. Do not leave the dirt in rookeries, in pits, in dunghills. What are municipal bodies, town councillors, aldermen, mayors, provosts good for, if they cannot by administrative measures displace rookeries by healthy habitations, supply the people with water, and with the means of "cleanliness," which stands proverbially "next to godliness"?

If we ascend from zymotic disease to its generating element, and from this to bad dwellings, bad habits, and bad municipal organization, causes are often found lying beyond these in bad laws. A city becomes the seat of trade and manufactures, in which many workmen from the country are required: families are brought together, and are crowded in existing houses; and it is found impossible to extend the house accommodation by building new houses, on account of the existing land tenures. The owners, whether corporations or individuals, hold on limited tenures, and as they cannot sell the freehold, or grant leases for long terms of years, the land is unavailable for building purposes. Houses are not built to meet the demand, and the want of decent dwellings is inevitable. To abolish all the rookeries is possible now, with free and cheap locomotion, if the law give facilities to the acquisition of that necessity of healthy life—sites for dwelling-houses. A bad land tenure is a cause of death.

Again, as properties are often let on lease for terms of years at stipulated rents, under covenants by tenants to pay rates and taxes, the tenant cannot justly be called upon to pay within his term the cost of permanent improvements, which will pass into the landlord's hands when the lease expires; the landlord should by law pay the capital, the tenant the interest.

The study of the causes of death in the zymotic class enables us to lay down some rules for the limitation of their ravages.

1. This is a primary rule: place the population in the sanitary conditions found by experience to be most favourable to health. Without this preliminary, all the other measures are futile. The elements of the body fall into decay and degeneracy of themselves, under unfavourable conditions, without any external infection.

2. Fortify the body by a mild disease, if any such is known, against a severe disease. Vaccination, or even inoculation, if vaccination had not been discovered, is properly practised under this rule. But it should be universal to be really successful. The inoculation of a few spreads small-pox among the many. To operate on the mortality, protection against *every one of the fatal zymotic diseases is required*; otherwise the suppression of one disease-element opens the way to others.

3. The suppression of zymotic action by specific applications in the earliest stage of invasion is sometimes possible, as in the diarrhoeal stage of cholera. Careful experiments on this matter are required; for the prodromal stage is not always detected, and treatment is either not tried, or, if successful, the existence of the disease itself is questioned.

4. The suppression of the generating beds of disease in unhealthy populations can scarcely fail to be efficacious. To suppress plague, suppress the wretched sanitary conditions of Egypt; to suppress yellow fever, go to St. Thomas, New Orleans, and its other breeding grounds; to put a stop to pandemic outbreaks of cholera, cleanse the waters of India, and improve the condition of the population; to extinguish enteric fever and typhus in our cities extinguish the rookeries.

5. Syphilis is dealt with on this principle under the Contagious Diseases Act. The forcible detention of infecting women in hospitals is humane and justifiable; but why is the principle not extended to both sexes? Here, to be successful, all the ascertainable sources must be stopped.

6. The destruction of the zymotic germs by chemical agents, by fire, and by disinfectants should in all cases be enforced.

7. Water in rivers charged with sewage, or shallow wells, conveys the germs unchanged (zymads) of some zymotic diseases, as it conveys animalcules and the ova of worms. The pure water of the hills is the safest.

8. The diffusion of several zymotic diseases, among them small-pox, measles, and scarlatina, is probably effected by detached flakes floating in the air. This danger is lessened by some such treatment as Dr. W. Budd has suggested.*

The chemical destruction of the dejections in these diseases, and especially in enteric fever and cholera, are measures of precaution which should never be neglected.

Earth is a great disinfectant, and the changes going on in the soil soon convert the excreta into harmless manures. There is no evidence to show that the disturbed cemeteries of the dead in past plagues have ever given rise to new outbreaks; and the dry earth applied on Mr. Moule's system is as safe a disinfectant as can be used, but in epidemic seasons the stuff should be buried and not be scattered on the ground. It would be well too, as in dangerous times such precautions cannot be adopted in dealing

* The following is a summary of the precautions recommended by Dr. W. Budd:

1. The room [in which the patient is detached] is dismantled of all needless woollen or other draperies which might possibly serve to harbour the poison.

1*. Thorough ventilation of the room to be maintained by an open fire and other means added.

2. A basin, charged with chloride or carbolate of lime or some other convenient disinfectant, is kept constantly on the bed for the patient to spit into.

3. A large vessel, containing water impregnated with chlorides or with Condy's fluid, always stands in the room for the reception of all bed and body linen immediately on its removal from the person of the patient.

4. Pocket-handkerchiefs are proscribed, and small pieces of rag are used instead for wiping the mouth and nose. Each piece, after being once used, is immediately burnt.

5. As the hands of nurses of necessity become frequently soiled by the specific excreta, a good supply of towels and two basins, one containing water with Condy's fluid or chlorides, and another plain soap and water, are always at hand for the immediate removal of the taint.

6. All glasses, cups, or other vessels used by or about the patient are scrupulously cleaned before being used by others.

7. The discharges from the bowel and kidney are received on their very issue from the body into vessels charged with disinfectants.

8. About the fourth day of the eruption the surface of the body, scalp included, to be anointed twice a day with olive oil slightly impregnated with camphor; the oiling to be continued until the patient is well enough to take a warm bath, in which the whole skin is well scrubbed, disinfecting soap being abundantly used. The baths to be repeated every other day until four have been taken.

9. Ten days after health is quite re-established the patient may, in new clothes, without risk, re-enter his family.

10. The children of the poor, who have no means of isolating their children, to be treated in small model hospitals or houses set apart by towns or parishes for the purpose.

11. The sewers to be kept in a state of permanent disinfection where the disease prevails. This is done in Bristol under the direction of the Health Officer.

with sewage, to disinfect it in the houses and in the sewers on its way to irrigation fields.

9. The assembly of large masses of men in pilgrimages, or in any way, produces often coalescences of zymotic elements, which thus acquire intense activity, and spread far and near: conditions for the regulation of such assemblages may be therefore fairly enforced.

10. The vessels which place distant shores in communication should be under strict sanitary regulation, to intercept the transit of epidemics.

11. The interception of the intercourse and commerce of nations by quarantine is injurious to their vital interests. It should be kept within the narrowest limits; and England should carefully abstain from treading in the steps of the fanatical populations of the Mediterranean. They should be invited to follow her example by its success.

12. As zymotic diseases of domestic animals are governed by the same general laws as the corresponding diseases of men, similar methods of prevention should be pursued in dealing with live stock.

By observing these simple rules we shall limit the ravages of common epidemics and perhaps avert those secular plagues which have several times depopulated Europe. New species of diseases,—of zymads may be generated, and these may under unfavourable conditions spread with destructive virulence among men, but never, we may hope, so as to recal the ravages of the Athens plague, of the Antonine plague in the second century, of the Gallus plague in the third century, of the dreadful Justinian plague of the sixth century, of the devastating black death of the fourteenth century, of the sweating sickness so fatal to Englishmen, and, still more recently, the great plagues of the seventeenth century. Cholera has been virtually subdued, and we have no reason to despair of success in the future encounters of science with these impalpable but fell destroyers.

II. CONSTITUTIONAL DISEASES.

Constitutional diseases are of variable and uncertain seat. They are characterised by the production of matters, not its natural constituents, from the elements of the body, which they deteriorate or destroy. Cancer is a type; in its different forms it was fatal in the year to 2,650 males and to 5,895 females, chiefly after the age of growth—of reproduction—was over. Mortification occurs still later in life, and is more fatal to men than to women.

The Tubercular order occurs in some of its forms in early childhood. Then supervenes hydrocephalus, with tubercles on the brain and its membranes; or tabes mesenterica, with similar deposits in the mesenteric glands; or scrofula, with deposits in the bones and the integumentary system.

Phthisis is the most fatal not only of this order, but of all the forms of disease. It is especially the disease of youth and early manhood.

III. LOCAL DISEASES.

These include the inflammations of all parts of the body. By the production of pus they are associated with the second class of diseases. They include all the mechanical changes, such as hernia, as well as functional diseases, such as insanity. In England four tenths of the deaths fall under this great class.

The deaths ascribed to diabetes have increased of late years; the increase is very observable since 1858; and the mortality rose to its maximum in 1864, while since that year down to 1867 it has been stationary (see Table 12, p. 236). Diabetes is characterized by an

abundant flow of urine containing grape sugar, which has been traced to the blood, and by Bernard to a secretion in the liver of *glycogene* or *amyline*, transformed into sugar by the aid of a ferment.*

The Tables 26, 27, show the deaths in England from diabetes extending over a period of 20 years. In the first period (1848-54) the annual deaths were 405, in the second period 557: the mortality to a million living in the two periods was 23 and 28. The mortality of males in the second period was nearly the same as the mortality of females at all ages up to 15: then it became as 21 to 14 at the ages 15-25; in middle life and onwards (25-65) as 2 to 1; after 65 the disparity became as 4 males to one female. The deaths of children were few; the mortality doubled every 5 years up to 15; and then went on increasing up to the age of 75; when the fatal process gave way to others as life wore away.

IV. DEVELOPMENTAL DISEASES.

The child is prematurely born, is ill-formed, feeble; the mother perishes in giving birth to her children; or the body decays, and its elements fade away. The deaths under these heads are in the proportion of 17 in 100 deaths from all causes.

I have singled out one cause of death for investigation, on account of its special importance. It is childbirth.

The weddings of each year are followed, as the months roll on, by the births, and in some unhappy circumstances the births are darkened by the funeral pall of death. That does not often happen, but the cases are sufficiently numerous to attract attention on this ground alone. 3412 mothers died by childbirth in the year.

For 21 years on an average, 50 in 10,000 childbearing mothers died. It is 199 chances to 1 that the mother will survive; but at the bottom of the urn lies that one fatal black ball. Then risk is incurred five times by mothers on an average.

The chances of death vary from year to year: thus in 1848, out of 10,000, 61 mothers, while in 1857 42, died; in 1862-7 the proportion was 48 out of the same number bearing children. The mortality is greatest in first pregnancies.

Two grave defects in the registers of the United Kingdom deprive them of much of their utility as pedigrees, and as records of facts for the solution of the great problems of population. Neither the age of mothers at the births of each of their children, nor the order of birth, is recorded; so that the number of children borne by women at different ages, and in the course of their lives, cannot be ascertained. This defect was supplied in the first schedule of the Scotch Act, but the important parts of the schedule were unfortunately discontinued after 1855. Dr. Stark turned some of the precious results of that year's registration to account; and so has Dr. Duncan in his valuable work on Fecundity.† Dr. Duncan proves from various sources that the mortality in the first pregnancy is to that in subsequent pregnancies nearly as two to one; and from the data he has collected it may be assumed, until further observations are made, that about 1 wife in 8 or 10 is sterile.

How can we determine the number of firstborn children in England annually? It must evidently bear some relation to the marriages. Now the annual number of legitimate children in the six years 1862-67 was 695,597, and the annual marriages in the six years 1856-61, with which they may be fairly compared, were 162,681, of which 147,804 were mar-

* See a good account of the pathology of diabetes in Dr. J. H. Bennett's excellent lectures on clinical medicine, 4th ed., p. 909. See also Dr. Pavy's careful researches on the nature of diabetes, 2d ed., 1869. For a masterly exposition of the phenomena of the disease, see Sir Thomas Watson's lectures.

† See Dr. Stark's 1st Report to Registrar General of Scotland, p. xviii; also Dr. Duncan on Fecundity, Fertility, Sterility, &c. Black, Edinburgh, 1866, pp. 241-7.

riages of spinsters: so that the births to a marriage are 4.276; the births to each woman married are 4.706. The births to each procreant wife—if only 133,024, or *nine* in *ten* wives, have living children—must be 5.229. Consequently as families consist of one, two, three, four, up to ten or more children, and every family has one firstborn child, it is evident that the firstborn children in wedlock will be to the total children so born as 133,024 to 695,597; or as 1 to 5.229. We can from these proportions infer that about 19 per cent. of the children in wedlock are firstborn; but to get the number of women bearing first children, the mothers of the children born out of wedlock must be brought into account, and some corrections must be made. This being done, it will be found that the 3600 annual deaths in childbirth during the six years 1862-67 imply about 48 deaths to 10,000 delivered; and if, as is found by other observations, the mortality in first deliveries is proportionally to the mortality in subsequent deliveries as 2 to 1, the mortality among English mothers will be 80 in 10,000 for first children, and 40 for subsequent deliveries, taken in the aggregate.*

There were 1066 deaths in the year 1867 referred to metria (puerperal fever), and 2346 to the other dangers of childbearing, including, specifically, miscarriages 55, abortion 75, puerperal mania 85, puerperal convulsions 366, phlegmasia dolens 65, extra-uterine foetation 11, retention of placenta 34, breast abscess 9, flooding 483, placenta prævia 149, rupture of uterus 41, deformed pelvis 10, operation for craniotomy 1, Caesarian operation 4; the particular causes of 958 deaths being unassigned. In addition to these deaths by childbirth, the particulars of 521 deaths by other diseases after childbearing are given, as these other diseases were the main causes of death. Then 16 other deaths by diseases are specified as having occurred to pregnant women. There are about 576,262 women† with child, and the deaths among them would amount to 6339, at the rate common to their age. It is not likely that early pregnancy is mentioned in the certificates, unless it had a direct connexion with the death; so as 3949 of the deaths are here accounted for, the deaths from other diseases must have been less than the deaths among men from those other diseases at the corresponding ages. Small-pox, scarlet fever, enteric fever, typhus, cholera, are almost invariably fatal to the women with child attacked; but whether they enjoy a certain immunity from attacks of disease, well deserves inquiry.

I have endeavoured to show in the Tables 19-25 the mortality of childbearing women at different ages during the 7 years 1848-54, and 13 years 1855-67. In the former period 5.31, in the latter period 4.83 women in 1000 delivered died. The mortality was lowest in the middle of the childbearing age (25-35): then about 4 in 1000 died; at the earlier age (15-25) the mortality was 6 or 7 in 1000; so at the later age (35-45) it was 6; and at the extreme age of 45-55 it ranged up to 7 or 9.

The mortality is shown from *metria*, and from all other causes. It is twice as high from *metria* at the earlier age 15-25 as it is at the subsequent ages: thus the rate is then 2.66, and afterwards 1.38 in the 13 years 1855-67. The mortality from all other causes is higher in the early than in the middle period; but it increases rapidly as age advances. The higher mortality from *metria* in early life can scarcely be explained, without taking into account the element of non-recurrence in zymotic diseases. Few recover from severe attacks of *metria*, but may not those who have had slight attacks be to some extent exempt for the future? The first deliveries test the mother's physical capacity as a child-bearer. And for obvious reasons, as where the pelvis is narrow, some succumb in the hour of trial.

* See Note on Firstborn, page 226.

† Equal to three-fourths of the annual births, pregnancy running about nine months.

In England the mortality by childbirth to every 10,000 women living, in the four decennials of age from 15 to 55, was 3.96, 8.96, 8.66, and 0.65 in the period from 1855-67; in the preceding period it was higher at all ages. The excess in the middle age 25-35 is due to the great proportion of married childbearing women at that age, and to the number of pregnancies then occurring. The excess of violent deaths among males of 15 and under 35 does not raise the mortality from all causes to the same pitch as the mortality of females. At the age 25-35 the deaths to 10,000 living men are 95.5, while the mortality of women at the corresponding age is 98.7; the excess is 3.2, with which the mortality by childbearing, 8.96, may be compared.

The mortality by childbirth is much less under the age of 35 in the healthy districts than it is in London and the large towns; but after 35 the women in the country die by childbearing in larger numbers than the women in the towns. In towns they are more exposed to puerperal fever; in the country many, probably, perish for want of skilful help. During the ten years 1851-60, to 10,000 births in the Eastern Division (Essex, Suffolk, Norfolk), 41 mothers died in childbirth, in London 49, in Lancashire and Cheshire 54, in Wales and Monmouthshire 61: in the healthy districts the mortality in childbearing was 43, in the large towns 49. Nothing in England approaches the fatality to mothers in Wales, where they must be greatly mismanaged.*

In the English and Welsh healthy districts the mortality at the ages 15-45 of women is higher than the mortality of men from all causes: thus, of 1000 living at the age 25-35, the men die at the rate of 8.18, the women at the rate of 8.94; the excess on women is 0.76; and the excess is nearly the same through the whole of the procreant part of life.†

How can the dangers of childbearing, which have been traced to various causes, be alleviated? This question was asked many years ago, and was answered by the establishment of lying-in hospitals. Many of the mothers are poor married women; and some of them, unmarried, abandoned, inexperienced, repudiated by society, incur double dangers. What seemed more likely to save these women in travail from peril than the Maternity? Unfortunately, experience has proved that the assemblage of childbearing women under one roof gives rise to fatal epidemics of childbirth fever; and the mortality is almost invariably in excess of the mortality in detached dwellings. No help is to be expected from Maternities.

There is hope, however, to see the mortality sensibly reduced by the progress of midwifery. The mechanism is better understood. And various difficult problems will no doubt be solved, as has been the case in *placenta previa*.

Cases in country places are in the hands of midwives and men, who are sometimes skilful by instinct, but are often not well versed in the art as it is now practised by the skilful. Educated nurses as well as physicians are required to secure the best chance of life to mother and child. And it is satisfactory to know that this want is now attracting attention. The Lady who has done so much good in other directions is, I believe, directing her attention to this question.

Young mothers themselves require instruction and special care. By living naturally and in conformity with the laws of life, they save at the same time themselves and their offspring. Few women in advanced pregnancy can stand hard work, to which they are sometimes exposed.

The utmost care on the part of medical men who practise as accoucheurs is indispensable. That puerperal fever has been transmitted from patient to patient is deplorably true. No precautions can be too great.

* See Tables 23, 24, p. 244.

† See Table 22, p. 243.

Then the contagion of scarlatina evidently in some cases lights up a puerperal disease, which has not yet been distinguished from puerperal fever. So does erysipelas, and so do perhaps other diseases. The dangers of a general hospital to puerperal women have been revealed by recent experience. Students cannot study in the dissecting room and at the same time practise midwifery without risk.

Nurses are often mediums of disease. Nothing is more fatal than any of the forms of dirt and uncleanness in the lying-in chamber. Where fever comes on, disinfectants should be strenuously used.

By the greater attention this subject will attract, now its full importance is precisely known, we may hope to see a great diminution in the risks of childbirth.

At present the mortality is greater among women whose lives are insured at the childbearing age than it is among men. And the premium for the insurance of a pregnant woman is generally higher than the common tabular rates. The previous data show that the general risk of a first delivery in England is covered by a premium of 16s. on 100*l.*, and of subsequent deliveries by a premium of 8s.; the premium of 10s. for each of 200 deliveries taken indiscriminately covers the common risks. It has been noticed that after a woman has borne nine children*, the pregnancies often follow each other in rapid succession, probably from an obvious physical cause, and that the danger increases; age advancing is itself a danger.

V. VIOLENT DEATHS.

This class of deaths by electrical, chemical, and mechanical agencies presents in the first instance distinct changes in the body. A living man thrown into the flames of a fiery furnace is consumed as instantly as so much coal, and is converted into nearly the same chemical products. An actress is scorched by her clothes taking fire, and dies in a few hours; or a burnt child lives for some days, and then dies of ulcer of the duodenum. The ulcer of the duodenum is the immediate cause of death; but we ascend from the ulcer to the burn; from the burn to the combustible dress; and from that, perhaps, to the negligence of the mother. Poisons give rise to trains of morbid processes, which are easily confounded with zymotic and with local diseases. Mechanical injuries produce physical, chemical, and vital changes; if not immediately fatal, they are generally followed by inflammation and its consequences. Thus the deaths of this class are allied on the one hand to local diseases by their pathology, and to zymotic diseases by their external causation; but this is their distinctive character: they can always be referred to some external cause, and that external cause is generally controllable by human agency.

It is only correct to say, that deaths by violence are more frequent in civilized than in barbarous communities, when we leave out of sight the slaughters of war, and the perils of starvation. But as the progress of civilization depends very much upon the free application and employment of the vast forces of nature in the intercourse and arts of life, it is found practically in this country that deaths by violence are rapidly increasing in England. Special precautions are demanded.

There is no increase of death from murder and manslaughter in the 10 years 1858-67, nor is there any increase in the deaths ascribed to suicide; but in the deaths said to be by accident or negligence the increase is too manifest. Thus 7 in 10,000 died by violence in the year 1857; and 8 in 10,000 in the year 1867. The deaths by violence to the same population ranged from 7.16 to 7.60 in the four years 1851-54; from 7.95 to 8.35 in the four years 1864-67.

* See Duncan on Fecundity, Fertility, Sterility, &c., pages 131 and 247.

To get at the primary causes, the violent deaths for each of the five years 1863-67 are given in a series of tables (pp. 174-204), under various heads. The deaths of males and females are classed under the heads of (1) railways, (2) mines, (3) mechanical injuries elsewhere, (4) chemical injuries elsewhere, and (5) asphyxia, with a great variety of sub-divisions. A great increase in the deaths on railways and in coal mines is noticeable.

I have the honour to be,
Sir,
Your obedient servant,
WILLIAM FARR.
The Registrar General.

NOTE ON FIRSTBORN (referred to on page 223).

To get the number of firstborn children by mother from the total number of children *c* born in wedlock to *w* wives: let *0.9* or any fraction *s* be the co-efficient of fertility, then it is evident that $sw = w' =$ number of procreant wives out of *w* wives. $\frac{c}{w'} = \frac{c}{sw} = f = \frac{695,597}{133,024} =$ average number of children in the family of a fertile mother, made up of families compounded variously of one, two, three . . . *n* children; unless the wife has before marriage borne children every family thus constituted has necessarily one firstborn child to mother: and the number of firstborns in the legitimate births of a year are thus determinable, as they = $w' = \frac{c}{f}$.

To determine from the English returns the mortality from childbirth, on the assumption that the first child-bearing is twice as fatal as those following, we have this equation:

$$2ax + xb = d = \text{deaths by childbirth} \therefore x = \frac{d}{2a + b} = \frac{3,600}{905,590} = .003975$$

where *2a* represents the rate of mortality in the first pregnancy, *a* represents the number of such childbirths in the given year, and *b* = the childbirths of all other orders from second to last inclusive.

Let *d* include the mothers either married or single dying in childbirth. Then to complete the estimate of the firstborn children born out of wedlock must be brought into account; their average numbers in the six years were 46,181. What numbers of children in the aggregate do these mothers bear out of wedlock? not two probably on an average: and if the proportion of the first-born among the children is taken at two in three it will imply that two such women bear on an average three illegitimate children; that two-thirds of the illegitimate are firstborn.

ANNUAL BIRTHS IN ENGLAND IN THE SIX YEARS 1862-67.

	Total Children Born.	First-born.	Second-born and others.
	(a + b)	(a)	(b)
Children born -	741,778	163,812	577,966
Legitimate -	695,597	133,024	562,573
Illegitimate -	46,181	30,788 ²	15,393 ²

ENGLAND. ANNUAL MARRIAGES in the 6 years 1856-61 = 162,682

HUSBANDS marrying for FIRST TIME	139,930
WIDOWERS -	22,752
WIVES marrying for FIRST TIME	147,805
WIDOWS -	14,877
CHILDREN BORN ANNUALLY, 1862-67	741,778
IN WEDLOCK	695,597
OUT OF WEDLOCK	46,181

(d) ANNUAL DEATHS of MOTHERS by CHILD-BEARING in the 6 years 1862-67 } 3,600

The above reasoning supplies us with the means of answering this question approximately: What is the proportion of firstborn to mothers in the population? Among the portion of the population born in wedlock nearly 1 in 5, or 19 in 100, are firstborn. This proportion could only be disturbed to any extent by emigration or by a difference between the rate of mortality among the firstborn and the subsequent born children of families. The proportions among the children not born in wedlock would be very different; and there is reason to believe that the casualties of infancy cut down their numbers.

The number of men exceeds the number of women who marry more than once; hence the proportion of firstborn children to total children of fathers is less than the proportion of firstborn children to mothers. Thus the mean annual number of children born in wedlock in England (1862-67) was 695,597; the mean annual number of marriages (1856-61) was 162,682; that is 162,682 men married 162,682 women in those years; now if we divide 695,597 by the annual number of husbands marrying one or more times in their lives, namely, about 139,930, the mean number of legitimate children by one wife or more to each husband is 4.971.

Thus if the fathers marrying at 28, aged 34 when their children are born, divide their property equally among their legitimate children, and nine in ten fathers have children, the nine fathers will have on an average 5.52 children, and will leave at death, taken at the age of 64, about 3 children, so the property will be divided into 3 parcels on an average. This is exclusive of the sub-divisions of the property of childless fathers.

In France the proportions of children are much lower: to each husband only 3.637 children are born to his one or more marriages; and, taking nine in ten as fertile, the average family will consist of 4.041 children; so, taking the proportions to survive as the same, the property will only be divided into two parcels.

The firstborn to fathers in 100 of the population will be 18 in England, 25 in France; one in five or six in England, one in four in France, is a firstborn child.

Second-born children are fewer in number than firstborn; and firstborn = last-born children.

TABLE 1.—Excess or Defect of Annual Rate of Mortality per 1000 of Males and Females in England in the Year 1867 over or under the Mean Annual Mortality of the 30 Years 1838-67.

	AGES.—MALES.												
	ALL AGES.	0-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85-	95 & upwds
MEAN of 30 YEARS	23.33	72.42	8.79	4.95	7.90	9.93	13.03	18.16	31.53	68.54	147.74	309.22	446.87
YEAR 1867	23.40	67.98	6.60	4.07	7.26	10.80	14.34	17.61	31.59	73.91	157.44	355.38	521.54
EXCESS of 1867	0.07	-4.44	-2.19	-0.88	-0.64	0.87	1.31	-0.55	0.06	10.37	9.70	46.16	74.67

The Table may be read thus:—The Mortality per 1000 of Males in the Year 1867, at ages 25 and under 35, exceeded the Mean Mortality per 1000 of 30 Years by .87, while, on the contrary, at the age 15 and under 25 the Mortality in the Year 1867 was less than the Mean Mortality of 30 Years by .64; the deficiency being indicated by prefixing the minus sign thus (-0.64).

	AGES.—FEMALES.												
	ALL AGES.	0-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85-	95 & upwds
MEAN of 30 YEARS	21.51	62.46	8.67	5.10	8.22	10.15	12.30	15.67	23.56	57.52	135.36	283.07	432.05
YEAR 1867	20.65	58.41	6.29	3.91	7.33	9.31	11.49	16.10	31.14	51.19	148.42	299.25	442.22
EXCESS of 1867	-0.86	-4.05	-2.38	-1.19	-0.89	-0.84	-0.81	0.43	2.58	-6.33	13.06	16.18	10.17

TABLE 2.—Deaths in England from Scarlatina, Cynanche Maligna, and Diphtheria, for each of the Years 1855 to 1867.*

YEARS.	TOTAL.	SCARLATINA.	CYNANCHE MALIGNA, and DIPHTHERIA.	CYNANCHE MALIGNA.	DIPHTHERIA.
1855	17,314	16,929	385	199	186
1856	14,180	13,557	603	374	229
1857	14,229	12,646	1,583	1,273	310
1858	30,317	23,711	6,606	1,770	4,836
1859	29,494	19,310	10,184	597	9,587
1860	14,517	9,305	5,212	376	4,836
1861	13,594	9,077	4,517	303	4,214
1862	19,737	14,834	4,903	341	4,562
1863	36,982	30,475	6,507	384	6,123
1864	35,164	29,700	5,464	366	5,098
1865	21,845	17,700	4,145	193	3,952
1866	14,685	11,685	3,000	226	2,774
1867	15,063	12,300	2,763	163	2,600
Total	277,101	221,229	55,872	6,565	49,307

* Previously to 1859 Diphtheria was referred to Scarlatina. Previously to 1861 Cynanche Maligna was referred to Scarlatina; since that time to Diphtheria.

TABLE 3.—Deaths in England from Diphtheria and Cynanche Maligna, at different AGES, in each of the Years 1855-67.

YEARS.	ALL AGES.	Under 1 Year.	1-	2-	3-	4-	Under 5 Years.	5-	10-	15-	25-	35-	45-	55-	65-	75-	85-	95 and upwards.
1855	385	56	52	47	45	33	233	84	17	20	8	7	8	7	1	-	-	-
1856	603	44	62	81	54	57	298	175	65	33	8	11	6	4	3	-	-	-
1857	1583	109	138	137	152	160	696	512	224	86	31	19	8	6	-	1	-	-
1858	6606	552	741	692	695	635	3315	1897	686	361	134	80	56	42	26	7	2	-
1859	10184	878	1122	1103	1116	1081	5300	2751	1091	536	213	122	69	50	37	11	4	-
1860	5212	448	558	500	621	551	2678	1413	542	321	79	69	43	36	17	14	-	-
1861	4517	361	528	501	507	471	2368	1217	419	258	93	60	41	35	16	10	-	-
1862	4903	412	645	594	560	513	2724	1242	432	264	91	54	39	29	18	9	1	-
1863	6507	585	903	744	813	664	3709	1651	515	291	121	78	61	48	27	6	-	-
1864	5464	527	694	681	661	535	3098	1292	425	300	130	82	60	46	26	4	1	-
1865	4145	387	518	459	476	446	2286	1053	328	227	95	43	41	38	20	11	3	-
1866	3000	282	420	404	355	296	1757	706	194	135	71	44	38	27	21	6	1	-
1867	2763	317	394	325	332	250	1618	690	154	122	65	29	35	23	20	5	2	-
Total	55,872	4,963	6,775	6,268	6,387	5,692	30,080	14,683	5092	2954	1139	698	505	391	232	84	14	-

TABLE 4.—Deaths in England from Scarlatina (exclusive of Deaths by Diphtheria and Cynanche Maligna), at different AGES, in each of the Years 1855-67.

YEARS.	ALL AGES.	Under 1 Year.	1-	2-	3-	4-	Under 5 Years.	5-	10-	15-	25-	35-	45-	55-	65-	75-	85-	95 and upwards.
1855	16929	1181	2306	2700	2537	1957	10631	4523	1078	438	128	71	36	15	8	1	-	-
1856	13557	985	1930	2161	2085	1669	8830	3419	800	332	88	55	20	10	3	-	-	-
1857	12846	855	1790	2032	1988	1462	8127	3252	766	321	104	40	23	7	3	3	-	-
1858	23711	1444	3468	3980	3638	2860	15390	6160	1325	557	159	69	33	10	6	2	-	-
1859	19310	1294	2824	3062	2992	2379	12551	4987	1050	469	174	80	26	12	7	4	-	-
1860	9305	636	1378	1499	1409	1146	6068	2329	477	287	77	37	19	7	4	-	-	-
1861	9077	572	1288	1490	1423	1119	5892	2317	447	264	91	31	21	10	-	4	-	-
1862	14834	903	2158	2454	2268	1786	9569	3893	818	364	117	42	16	9	2	3	1	-
1863	30475	1761	4050	4886	4683	3842	19222	8192	1820	805	267	113	34	15	5	2	-	-
1864	29700	1778	3915	4682	4571	3763	18709	8027	1711	796	280	102	44	20	7	4	-	-
1865	17700	1118	2497	2914	2613	2140	11232	4759	953	448	158	56	23	14	7	-	-	-
1866	11685	690	1741	2038	1835	1415	7719	2964	571	267	109	30	19	5	1	-	-	-
1867	12300	805	1806	2064	1961	1457	8093	3269	551	251	97	26	9	1	2	1	-	-
Total	221229	13,972	31,151	35,962	34,003	26,995	142,083	58,041	12367	5599	1849	752	323	135	55	24	1	-

TABLE 5.—Deaths in each of the Counties of England from Scarlatina for each of the Years 1853-1867.

REGISTRATION COUNTRIES.	DEATHS BY SCARLATINA. (See Note.)															
	1853	1854	1855	1856	1857	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867	
ENGLAND & WALES	15,999	18,528	17,314	14,160	14,229	30,317	19,907	9,681	9,077	14,834	30,475	29,700	17,700	11,685	12,300	
I.—LONDON	2,016	3,477	2,611	1,819	1,599	4,184	3,481	2,017	2,381	3,492	4,955	3,244	2,179	1,892	1,451	
II.—SOUTH EASTERN COUNTIES.																
1 Surrey (extra-metropol.)	81	118	137	103	89	355	188	79	53	151	390	314	246	71	67	
2 Kent (extra-metropol.)	350	444	404	393	218	651	423	259	287	297	687	709	374	180	157	
3 Sussex	66	188	337	153	173	514	283	85	40	71	363	483	251	138	43	
4 Hampshire	87	303	727	378	311	444	350	83	24	368	744	238	387	184	81	
5 Berkshire	125	161	153	136	122	353	93	18	17	70	153	151	286	32	25	
III.—SOUTH MIDLAND COUNTIES.																
6 Middlesex (extra-metro.)	51	296	164	78	59	134	157	131	55	139	345	160	85	50	71	
7 Hertfordshire	40	84	145	89	22	84	90	40	26	110	411	377	92	33	35	
8 Buckinghamshire	59	73	244	21	23	95	93	43	99	166	39	114	79	13	9	
9 Oxfordshire	23	50	62	20	110	393	114	18	19	24	153	244	90	10	36	
10 Northamptonshire	38	256	198	63	85	158	171	39	10	53	377	803	143	25	28	
11 Huntingdonshire	14	28	59	29	98	33	26	17	5	10	146	61	43	29	8	
12 Bedfordshire	5	69	338	143	25	95	53	26	11	30	153	382	113	32	38	
13 Cambridgeshire	9	157	532	171	53	86	85	83	25	55	366	245	50	22	43	
IV.—EASTERN COUNTIES.																
14 Essex	103	262	433	346	162	355	178	101	83	388	775	231	165	105	67	
15 Suffolk	48	50	111	190	164	376	119	76	41	108	820	353	86	40	206	
16 Norfolk	45	60	113	284	534	738	281	81	113	202	235	568	320	128	155	
V.—SOUTH WESTERN COUNTIES.																
17 Wiltshire	45	191	177	74	75	239	222	60	40	116	292	260	251	54	56	
18 Dorsetshire	31	83	73	70	256	375	179	61	6	42	147	138	112	295	81	
19 Devonshire	103	376	564	620	527	891	391	73	75	353	778	1,054	321	77	36	
20 Cornwall	254	198	230	407	291	425	234	153	162	165	995	572	97	13	33	
21 Somersetshire	76	108	155	218	159	479	398	91	49	126	773	1,013	355	73	29	
VI.—WEST MIDLAND COUNTIES.																
22 Gloucestershire	125	124	86	136	257	731	553	142	102	111	1,162	453	142	95	68	
23 Herefordshire	80	66	83	46	73	106	34	19	7	12	39	206	48	8	1	
24 Shropshire	237	303	141	77	156	196	127	148	135	234	223	147	122	37	44	
25 Staffordshire	1,571	917	430	358	641	1,194	1,186	303	194	807	1,147	1,134	907	703	670	
26 Worcestershire	242	382	192	71	105	227	316	138	40	81	353	584	193	111	101	
27 Warwickshire	731	574	194	371	337	1,185	518	170	96	354	676	966	475	477	782	
VII.—NORTH MIDLAND COUNTIES.																
28 Leicestershire	212	75	39	62	215	452	204	34	15	33	524	164	66	59	70	
29 Rutlandshire	3	12	28	2	3	45	30	3	2	8	54	48	22	-	2	
30 Lincolnshire	347	1,312	598	123	124	651	200	128	139	193	495	662	415	82	60	
31 Nottinghamshire	567	516	143	71	76	752	414	76	50	68	123	467	389	76	35	
32 Derbyshire	470	506	136	56	276	622	376	60	31	50	179	381	150	75	68	
VIII.—NORTH WESTERN COUNTIES.																
33 Cheshire	693	336	260	269	650	568	390	229	192	400	952	393	300	553	475	
34 Lancashire	3,110	2,189	3,058	2,651	2,761	6,226	2,337	1,143	1,259	2,793	4,580	4,354	3,634	3,150	3,115	
IX.—YORKSHIRE.																
35 West Riding	1,554	1,511	1,009	1,059	1,405	2,931	2,962	1,192	475	963	2,218	3,135	2,273	870	630	
36 East Riding (with York)	383	220	104	97	231	250	89	133	275	204	638	470	131	56	72	
37 North Riding	105	253	235	100	64	166	74	46	90	241	316	179	33	28	86	
X.—NORTHERN COUNTIES.																
38 Durham	549	430	635	1,045	458	417	458	533	1,015	861	1,216	403	179	283	1,293	
39 Northumberland	358	148	249	543	303	334	164	480	768	356	235	140	61	553	974	
40 Cumberland	66	352	413	152	74	207	213	163	150	116	191	110	94	152	415	
41 Westmorland	61	95	32	28	14	12	6	10	18	54	34	33	8	2	68	
XI.—MONMOUTHSHIRE AND WALES.																
42 Monmouthshire	142	346	230	133	33	233	277	161	43	21	243	773	257	55	53	
43 South Wales	122	561	605	462	349	798	1,014	449	181	127	501	1,990	1,533	277	75	
44 North Wales	302	318	447	443	499	557	361	287	179	211	274	244	238	537	393	

NOTE.—In the years 1853 to 1858 the above numbers include diphtheria and cynanche maligna. In the years 1859 and 1860 they include cynanche maligna; and in the years 1861 to 1867 the numbers relate only to scarlatina.

TABLE 6.—Ages of the Persons who Died from Fever (Typhus, Typhia, and Typhina) in England in the Year 1867.

—	ALL AGES.	0-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85-	95 and upwards.
Persons	16,862	3224	2192	1504	3095	1815	1548	1290	1075	803	278	37	1
Males	8,261	1578	1057	671	1510	879	754	650	586	420	137	19	-
Females	8,601	1646	1135	833	1585	936	794	640	489	383	141	18	1

TABLE 7.—Deaths in England from Fever in the Twenty Years 1848-67, and Annual Rate of Mortality to 10,000 Persons living.

AGES.	DEATHS in the 20 Years 1848-67.		AVERAGE ANNUAL RATE of MORTALITY to 10,000 Persons living at each Age.	
	Males.	Females.	Males.	Females.
ALL AGES	177,500	183,992	9.38	9.29
Under 5 Years	35,298	35,717	13.68	13.94
5-	21,298	24,072	9.42	10.65
10-	13,971	17,548	6.80	8.69
15-	30,732	33,4		

TABLE 9.—Deaths from Fever—Typhus, Typhia, and Typhinia—in England to 10,000 Persons living, and Proportional Number to 1000 Deaths, in each of the Years 1850-67.

YEARS.	Number of Deaths registered.	Deaths to 10,000 Persons living.*	Proportional Number to 1000 Deaths.
1850	15,374	8.66	43
1851	17,930	10.15	46
1852	18,641	10.41	47
1853	18,554	10.25	45
1854	18,893	10.23	44
1855	16,470	8.89	39
1856	16,182	8.60	42
1857	19,016	9.97	46
1858	17,883	9.23	40
1859	15,877	8.14	36
1860	13,012	6.63	31
1861	15,440	7.76	36
1862	18,721	9.31	43
1863	18,017	8.86	38
1864	20,106	9.77	41
1865	23,034	11.09	47
1866	21,104	10.05	43
1867	16,862	7.95	36
Mean -	17,840	9.23	41

* The mortality from Fever here given is taken from Table 12, and inasmuch as it includes a proportion of the mortality from causes not specified it differs from that given in Table 8.

TABLE 10.—Deaths by Erysipelas at different Ages in England in each of the Years 1862-67.

SEX	YEARS.	AGES.																		
		ALL AGES.	Under 1 Year.	1-	2-	3-	4-	Total under 5 Years.	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	85-	95 & upwds.
Persons	1862	1523	458	49	36	13	7	563	29	36	43	30	70	113	143	166	182	128	20	-
	1863	1920	612	62	31	22	18	745	25	31	39	49	112	137	177	216	213	146	30	-
	1864	2104	618	55	30	15	15	733	15	22	38	61	110	171	194	274	271	180	34	1
	1865	1963	579	58	29	8	8	682	31	27	42	42	96	154	190	237	242	183	36	1
	1866	1675	527	64	26	10	10	637	35	22	33	44	73	129	146	187	159	189	21	-
	1867	1450	467	35	18	13	11	544	23	31	25	31	82	115	127	169	167	115	21	-
Males	1862	790	233	22	14	9	2	280	14	19	22	16	35	51	90	97	90	70	6	-
	1863	1039	302	32	12	15	10	371	9	18	19	29	58	74	108	131	123	81	18	-
	1864	1129	309	32	14	8	9	372	10	10	19	29	56	94	100	168	160	93	18	-
	1865	1047	279	25	9	6	4	323	18	14	25	18	55	81	111	148	126	114	14	-
	1866	845	235	32	13	3	5	288	20	9	25	22	35	66	86	115	61	108	10	-
	1867	797	252	15	8	6	6	287	17	19	19	13	35	70	81	95	89	61	11	-
Females	1862	733	225	27	22	4	5	283	15	17	21	14	35	62	53	69	92	53	14	-
	1863	881	310	30	19	7	8	374	16	13	20	20	54	63	69	85	90	65	12	-
	1864	975	309	23	16	7	6	361	5	12	19	32	54	77	94	106	111	87	16	1
	1865	916	300	33	20	2	4	359	13	13	17	24	41	73	79	89	116	69	22	1
	1866	830	292	32	13	7	5	349	15	13	8	22	38	63	60	72	98	81	11	-
	1867	653	215	20	10	7	5	257	6	12	6	18	47	45	46	74	78	54	10	-

TABLE 11.—Causes of Death registered in England in each of the Ten Years 1858-1867.

Class.	CAUSES OF DEATH.	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
	ALL CAUSES - - -	449,656	440,781	422,721	435,114	436,566	473,837	495,531	490,909	500,689	471,075
	SPECIFIED CAUSES - -	440,922	432,476	414,060	427,360	429,000	465,874	487,732	482,509	492,111	462,939
	(CLASSES.)										
I.	ZYMOTIC DISEASES -	110,971	106,645	75,849	87,986	91,539	119,731	118,325	113,948	115,972	90,989
II.	CONSTITUTIONAL ,, -	82,416	81,788	82,088	84,987	83,024	84,393	87,190	88,504	89,907	89,423
III.	LOCAL ,, -	163,489	159,686	171,087	167,454	170,651	174,603	189,039	184,877	192,444	187,571
IV.	DEVELOPMENTAL ,, -	69,895	69,708	70,311	71,948	68,842	71,467	75,660	77,806	76,373	78,090
V.	VIOLENT DEATHS -	14,151	14,649	14,775	14,985	14,944	15,680	17,018	17,374	16,915	16,866
	(ORDERS.)										
I.	1. MIASMATIC DISEASES -	106,278	101,639	71,304	83,324	86,881	114,538	113,051	107,650	110,059	84,985
	2. ENTHETIC ,, -	1,195	1,273	1,252	1,355	1,449	1,578	1,793	1,914	1,893	1,909
	3. DIETIC ,, -	2,112	2,301	2,206	2,095	2,149	2,456	2,810	2,957	2,888	2,760
	4. PARASITIC ,, -	1,386	1,372	1,087	1,212	1,060	1,159	1,171	1,427	1,132	1,335
II.	1. DIATHETIC ,, -	16,790	16,433	16,404	16,233	16,412	16,651	17,392	17,437	17,482	17,520
	2. TUBERCULAR ,, -	65,626	65,355	65,684	68,754	66,612	67,742	69,798	71,037	72,425	71,903
III.	1. DISEASES OF NERVOUS SYSTEM -	53,961	54,531	55,577	55,625	55,692	57,428	59,627	60,264	61,164	60,367
	2. ,, ORGANS OF CIRCULATION -	16,426	17,133	18,768	18,076	18,709	19,505	22,419	22,272	22,190	22,784
	3. ,, RESPIRATORY ORGANS -	65,516	59,853	63,408	64,310	67,565	67,280	75,376	69,952	77,249	72,183
	4. ,, DIGESTIVE ORGANS -	19,246	19,842	19,718	20,327	19,421	20,516	20,969	21,774	21,084	21,006
	5. ,, URINARY ORGANS -	4,683	4,736	4,990	5,222	5,323	5,578	6,104	6,274	6,621	6,933
	6. ,, ORGANS OF GENERATION -	1,148	1,199	1,118	1,129	1,227	1,219	1,294	1,241	1,241	1,316
	7. ,, ORGANS OF LOCOMOTION -	1,164	1,235	1,466	1,624	1,588	1,765	1,860	1,860	1,642	1,747
	8. ,, INTEGUMENTARY SYSTEM -	1,345	1,107	1,002	1,141	1,121	1,312	1,390	1,240	1,253	1,235
IV.	DEVELOPMENTAL DISEASES										
	1. ,, OF CHILDREN	12,412	12,300	12,706	13,116	12,787	13,498	13,921	14,360	14,634	14,666
	2. ,, ADULTS -	2,114	2,314	2,233	2,168	2,198	2,503	2,607	2,576	2,596	2,461
	3. ,, OLD PEOPLE	28,509	27,104	28,442	27,373	26,780	27,268	29,498	28,709	28,546	28,646
	4. DISEASES OF NUTRITION	26,800	27,990	26,930	29,291	27,077	28,193	29,634	32,161	31,097	32,317
V.	1. ACCIDENT OR NEGLIGENCE -	12,523	13,056	12,991	13,187	13,055	13,772	15,001	15,232	14,866	14,848
	2. BATTLE - - -	†	†	†	†	†	†	†	†	†	†
	3. HOMICIDE - - -	344	338	377	320	418	399	412	443	480	392
	4. SUICIDE - - -	1,275	1,248	1,365	1,347	1,317	1,319	1,340	1,392	1,329	1,316
	5. EXECUTION † - -	9	7	10	11	17	21	21	6	12	11
	VIOLENT DEATHS NOT CLASSED - - -	..	..	32	120	137	169	154	301	208	299
	SUDDEN DEATHS, CAUSE UNASCERTAINED - -	3,096	2,821	2,894	2,697	2,778	3,008	3,321	3,173	3,585	3,506
	CAUSES NOT SPECIFIED -	5,638	5,484	5,767	5,057	4,788	4,955	4,478	5,227	4,993	4,630
I.	ORDER I.										
	1 Small-pox - - -	6,460	3,848	2,749	1,320	1,628	5,964	7,684	6,411	3,029	2,513
	2 Measles - - -	9,271	9,548	9,557	9,055	9,800	11,349	8,323	8,562	10,940	6,588
	3 Scarlatina - - -	30,317	19,907	9,681	9,077	14,834	30,475	29,700	17,700	11,685	12,300
	4 Diphtheria - - -	§	9,587	5,212	4,517	4,903	6,507	5,464	4,145	3,000	2,600
	5 Quinsy - - -	623	426	319	342	323	334	378	319	271	201
	6 Croup - - -	6,220	5,636	4,380	4,397	5,667	6,957	6,777	5,921	5,168	4,387
	7 Whooping-cough -	11,648	8,976	8,555	12,309	12,272	11,275	8,570	8,647	15,764	11,873
	8 Typhus - - -	17,883	15,877	13,012	15,440	18,721	18,017	20,106	23,034	21,104	16,862

† Order 2, comprising Violent Deaths in Battle, is omitted, as inapplicable to the civil population.
 ‡ The number of persons executed in the several years will not necessarily correspond with that in the same years of the "Criminal Returns," inasmuch as the executions recorded in each year in the latter are derived from the dates of conviction, while the numbers in this Table are classed under the years in which the deaths are registered.
 § The cases of angina membranacea which would now be put to diphtheria were formerly classed under the same head as scarlatina, but were distinguished in the notes.

TABLE 11.—Causes of Death registered in England in each of the Ten Years 1858-1867—continued.

Class.	CAUSES OF DEATH.	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
	9 Erysipelas - - -	2,026	1,954	1,665	1,542	1,523	1,920	2,104	1,963	1,675	1,450
	10 Metria - - -	1,068	1,238	987	886	940	1,155	1,484	1,333	1,197	1,066
	11 Carbuncle - - -	246	236	247	193	206	237	266	265	228	235
	12 Influenza - - -	1,478	1,379	1,156	1,416	1,044	1,051	1,000	1,072	651	607
	13 Dysentery - - -	13,853	18,331	9,702	18,746	11,112	14,943	16,432	23,531	17,170	19,851
	14 Diarrhoea - - -	673	887	327	837	511	807	934	1,291	1,473	922
	15 Cholera - - -	207	233	203	149	150	141	117	135	121	86
	16 Ague - - -	569	400	314	254	284	198	202	80	123	86
	17 Remittent Fever - - -	1,942	2,124	1,998	1,982	1,943	2,175	2,559	2,530	2,338	2,256
	18 Rheumatism - - -	..	..	110	116	105	114	152	133	107	105
	19 Other Zymotic Diseases	..	..	110	116	105	114	152	133	107	105
	ORDER 2.										
	1 Syphilis - - -	1,006	1,089	1,067	1,177	1,245	1,386	1,550	1,647	1,662	1,698
	2 Stricture of Urethra - - -	186	177	178	168	199	183	229	244	191	197
	3 Hydrophobia - - -	2	4	3	4	1	4	12	19	36	10
	4 Glanders - - -	1	3	4	6	4	5	2	4	4	4
	ORDER 3.										
	1 Privation - - -	62	52	68	63	73	54	106	74	74	109
	2 Want of Breast-milk - - -	997	1,017	1,002	970	1,006	1,158	1,253	1,410	1,410	1,437
	3 Purpura and Scurvy - - -	341	342	361	405	353	409	392	424	471	471
	4 Alcoholism { a Del. Trem. b Intemp.	424 288	545 345	457 318	415 242	471 246	471 364	592 467	612 437	487 446	369 374
	ORDER 4.										
	1 Thrush - - -	1,236	1,217	920	1,055	904	961	1,006	1,244	966	1,163
	2 Worms, &c. - - -	150	155	167	157	166	198	165	183	166	172
II.	ORDER 1.										
	1 Gout - - -	245	238	268	247	284	248	309	361	359	377
	2 Dropsy - - -	8,758	8,119	7,823	7,801	7,247	7,414	7,386	7,567	7,332	7,095
	3 Cancer - - -	6,433	6,676	6,827	7,276	7,396	7,479	8,117	7,922	8,233	8,545
	4 Noma - - -	161	159	122	174	197	180	165	181	172	174
	5 Mortification - - -	1,193	1,241	1,364	1,235	1,288	1,330	1,415	1,406	1,326	1,329
	ORDER 2.										
	1 Scrofula - - -	3,004	2,995	2,360	3,457	3,416	3,277	3,111	2,963	2,901	2,938
	2 Tabes Mesenterica - - -	5,017	4,982	4,680	5,692	5,203	5,377	5,941	6,698	6,377	6,882
	3 Phthisis - - -	50,442	50,149	51,024	51,931	50,962	51,072	53,046	53,734	55,714	55,042
	4 Hydrocephalus - - -	7,163	7,229	7,120	7,674	7,031	7,516	7,700	7,672	7,433	7,041
III.	ORDER 1.										
	1 Cephalitis - - -	3,463	3,451	3,518	3,426	3,580	3,369	4,014	4,199	4,146	4,220
	2 Apoplexy - - -	8,629	8,631	9,181	8,795	9,136	9,721	10,322	10,215	10,297	10,406
	3 Paralysis - - -	8,980	9,189	9,752	9,812	9,733	9,762	10,609	10,693	10,504	10,810
	4 Insanity - - -	535	446	536	529	535	555	662	558	650	640
	5 Chorea - - -	53	55	66	71	52	63	73	88	63	50
	6 Epilepsy - - -	2,359	2,219	2,454	2,464	2,443	2,574	2,406	2,468	2,468	2,312
	7 Convulsions - - -	25,488	25,954	25,205	25,423	25,286	26,008	26,382	26,722	27,431	26,258
	8 Brain Disease, &c. - - -	4,454	4,586	4,865	5,105	4,927	4,376	5,159	5,321	5,605	5,671
	ORDER 2.										
	1 Pericarditis - - -	586	616	575	541	559	597	629	566	543	592
	2 Aneurism - - -	350	371	368	387	373	418	479	499	450	503
	3 Heart Disease, &c. - - -	15,490	16,146	17,315	17,148	17,777	18,490	21,311	21,207	21,197	21,689
	ORDER 3.										
	1 Laryngitis - - -	1,439	1,319	1,166	1,253	1,478	1,561	1,610	1,382	1,286	1,285
	2 Bronchitis - - -	29,093	25,998	32,347	30,986	32,526	32,025	38,969	36,428	41,334	40,373
	3 Pleurisy - - -	846	916	882	781	833	907	941	866	858	865
	4 Pneumonia - - -	26,486	24,514	25,264	22,914	23,713	24,181	24,470	22,489	25,155	21,118
	5 Asthma - - -	4,513	4,224	4,325	3,892	4,087	3,699	4,223	3,975	3,682	3,748
	6 Lung Disease, &c. - - -	3,139	2,882	4,424	4,484	4,928	4,907	5,158	4,812	4,934	4,794
	ORDER 4.										
	1 Gastritis - - -	789	827	704	809	765	838	883	802	765	742
	2 Enteritis - - -	3,309	3,416	3,154	3,333	2,911	3,234	3,164	3,239	2,928	2,858
	3 Peritonitis - - -	1,466	1,555	1,551	1,563	1,488	1,637	1,736	1,633	1,504	1,571
	4 Ascites - - -	665	766	750	728	745	735	719	749	702	724
	5 Ulceration of Intestines - - -	860	776	847	856	870	858	907	851	858	923
	6 Hernia - - -	766	762	817	852	827	848	805	890	874	927
	7 Ileus - - -	1,107	1,139	1,170	1,199	1,091	1,166	1,154	1,141	1,172	1,179
	8 Intussusception - - -	239	271	245	276	280	246	292	258	295	296
	9 Stricture of Intestines - - -	264	239	301	272	257	288	295	265	315	278
	10 Fistula - - -	116	99	115	115	109	89	108	88	108	100
	11 Stomach Disease, &c. - - -	2,750	2,698	2,866	2,786	2,730	2,300	2,747	2,381	2,930	2,948
	12 Pancreas Disease, &c. - - -	11	22	12	18	16	12	10	12	17	18
	13 Hepatitis - - -	1,353	1,488	1,329	1,386	1,262	1,402	1,429	1,474	1,401	1,319
	14 Jaundice - - -	1,203	1,255	1,262	1,344	1,202	1,426	1,533	1,566	1,464	1,493
	15 Liver Disease, &c. - - -	4,285	4,417	4,531	4,704	4,630	4,853	5,121	5,309	5,659	5,532
	16 Spleen Disease, &c. - - -	63	62	64	86	98	84	66	66	92	93

* Classed with Erysipelas.

† Classed with Disease of Stomach.

TABLE 11.—Causes of Death registered in England in each of the Ten Years 1858-1867—continued.

Class.	CAUSES OF DEATH.	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
	ORDER 5.										
	1 Nephritis - - -	265	284	245	306	273	335	390	381	406	442
	2 Ischuria - - -	118	103	96	102	104	143	126	140	121	106
	3 Nephria - - -	1,105	1,258	1,390	1,448	1,541	1,700	1,793	1,860	2,039	2,203
	4 Diabetes - - -	514	480	536	537	574	551	665	669	678	680
	5 Stone - - -	199	191	179	168	196	172	184	189	193	201
	6 Cystitis - - -	256	276	299	343	342	340	383	325	393	381
	7 Kidney Disease, &c. - - -	2,226	2,144	2,245	2,318	2,298	2,337	2,563	2,710	2,791	2,920
	ORDER 6.										
	1 Ovarian Dropsy - - -	239	277	244	235	280	255	259	209	218	247
	2 Uterus, &c. Disease - - -	909	922	874	894	947	964	1,035	1,032	1,023	1,069
	ORDER 7.										
	1 Arthritis - - -	77	81	68	79	70	73	89	74	70	75
	2 Joint Disease, &c. - - -	1,087	1,204	1,398	1,545	1,518	1,692	1,771	1,786	1,572	1,672
	ORDER 8.										
	1 Phlegmon - - -	711	466	413	454	409	530	550	453	482	430
	2 Ulcer - - -	332	364	332	401	387	435	433	424	403	443
	3 Skin Disease, &c. - - -	302	277	257	286	325	347	377	363	368	362
IV.	ORDER 1.										
	1 Premature Birth - - -	7,307	7,432	7,642	7,610	7,706	8,121	8,339	8,791	8,943	8,990
	2 Cyanosis - - -	386	403	398	420	459	466	465	483	514	481
	3 Spina Bifida - - -	313	356	350	394	386	402	371	377	413	391
	4 Other Malformations - - -	385	379	420	441	424	403	461	438	471	504
	5 Teething - - -	4,021	3,730	3,896	4,251	3,812	4,116	4,285	4,271	4,293	4,300
	ORDER 2.										
	1 Paramenia - - -	51	56	47	59	61	75	75	86	111	115
	2 Childbirth (see Metria) - - -	2,063	2,258	2,186	2,109	2,137	2,433	2,532	2,490	2,485	2,346
	ORDER 3.				</						

TABLE 12.—Causes of Death registered in England in each of the Seventeen Years 1851-1867. To 1,000,000 PERSONS LIVING the DEATHS from each CLASS of CAUSES, and from each CAUSE.

Class.	CAUSES OF DEATH.	1851	1852	1853	1854	1855	1856	1857	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
	ALL CAUSES - - -	21987	22363	22882	23520	22659	20504	21745	23032	22323	21239	21626	21467	23053	23855	23387	23606	21983
	SPECIFIED CAUSES - -	21659	22023	22526	23157	22277	20152	21447	22872	22178	21093	21490	21329	22906	23693	23234	23433	21818
	(CLASSES.)																	
I.	ZYMOTIC DISEASES	5089	5366	4940	6367	4759	4310	4901	5757	5469	3863	4424	4551	5887	5770	5489	5522	4288
II.	CONSTITUTIONAL "	4570	4637	4874	4570	4568	4224	4297	4275	4194	4182	4273	4128	4150	4237	4261	4281	4215
III.	LOCAL "	7623	7568	8132	7815	8452	7576	7925	8480	8189	8712	8420	8484	8584	9182	8903	9162	8840
IV.	DEVELOPMENTAL "	3661	3696	3820	3646	3739	3303	3599	3626	3575	3582	3619	3423	3513	3678	3746	3661	3680
V.	VIOLENT DEATHS -	716	756	760	759	759	739	725	734	751	754	754	743	772	826	835	807	795
	(ORDERS.)																	
I.	1. MIASMATIC DISEASES -	4882	5154	4723	6128	4521	4106	4681	5513	5215	3633	4191	4319	5632	5489	5184	5241	4005
	2. ENTHETIC "	49	50	48	67	64	56	60	62	65	63	67	72	77	87	94	90	90
	3. DIETIC "	92	93	103	107	112	90	99	110	119	112	105	107	121	137	142	137	130
	4. PARASITIC "	66	69	66	65	62	58	61	72	70	55	61	53	57	57	69	54	63
II.	1. DIATHETIC "	945	942	973	916	924	832	849	871	842	836	816	816	819	845	839	832	826
	2. TUBERCULAR "	3625	3695	3901	3654	3644	3392	3448	3404	3352	3346	3457	3312	3331	3392	3422	3449	3389
III.	1. DISEASES OF NERVOUS SYSTEM -	2792	2806	2845	2802	2827	2662	2705	2800	2796	2831	2797	2769	2824	2896	2902	2912	2845
	2. " OF ORGANS OF CIRCULATION -	668	699	760	734	786	726	775	852	879	956	909	930	959	1089	1072	1056	1074
	3. " OF RESPIRATORY ORGANS -	2759	2646	3118	2856	3439	2812	3057	3399	3069	3484	3233	3358	3308	3663	3369	3678	3402
	4. " OF DIGESTIVE ORGANS -	1052	1063	1041	1036	1011	993	1005	998	1018	1004	1022	966	1008	1017	1049	1004	990
	5. " OF URINARY ORGANS -	180	191	201	205	214	219	217	242	243	254	263	265	274	297	302	315	327
	6. " OF ORGANS OF GENERATION -	54	49	53	55	56	55	56	59	61	57	57	61	60	63	60	59	62
	7. " OF ORGANS OF LOCOMOTION -	62	64	67	81	76	71	68	60	66	75	82	79	87	90	90	78	82
	8. " OF INTEGUMENTARY SYSTEM -	56	50	47	46	43	38	42	70	57	51	57	56	64	67	59	60	58
IV.	1. DEV. DIS. OF CHILDREN	1866	1861	1853	1805	1232	1203	1267	644	681	647	660	636	663	676	691	696	691
	2. " OF ADULTS -	184	182	181	116	106	100	105	110	119	114	109	109	124	127	124	123	116
	3. " OF OLD PEOPLE	1471	1474	1614	1441	1606	1271	1409	1479	1390	1449	1377	1331	1340	1434	1382	1361	1350
	4. DISEASES OF NUTRITION	690	729	722	784	795	729	818	1393	1435	1372	1473	1347	1386	1441	1549	1481	1523
V.	1. ACCIDENT OR NEGLIGENCE								649	670	662	663	649	677	734	733	709	700
	2. BATTLE*								*	*	*	*	*	*	*	*	*	*
	3. HOMICIDE								18	17	19	16	21	20	20	23	23	18
	4. SUICIDE								66	64	70	68	65	66	64	67	64	62
	5. EXECUTION								5	4	5	6	1	1	1	3	6	5
	VIOLENT DEATHS NOT CLASSED								..	..	2	6	7	8	7	14	10	14
	SUDDEN DEATHS, CAUSE UNASCERTAINED	196	201	222	217	223	185	178	160	145	146	136	138	147	162	153	173	165
	CAUSES NOT SPECIFIED	132	139	134	146	159	167	120	†	†	†	†	†	†	†	†	†	†

* Order 2, comprising Violent Deaths IN BATTLE, is omitted as inapplicable to the civil population.
† See note relating to Causes not specified, page 189.

TABLE 12.—Causes of Death registered in England in each of the Seventeen Years 1851-67. To 1,000,000 PERSONS LIVING the DEATHS from each CLASS of CAUSES, and from each CAUSE—cont.

Class.	CAUSES OF DEATH.	1851	1852	1853	1854	1855	1856	1857	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
I.	ORDER 1.																	
	1. Small-pox - - -	396	409	174	153	136	121	206	335	197	140	63	81	293	373	309	144	118
	2. Measles - - -	530	326	270	505	397	379	313	481	490	487	455	487	558	404	412	521	310
	3. Scarlatina - - -	771	1055	867	1008	935	752	746	1572	1021	493	436	738	1498	1443	852	556	580
	4. Diphtheria - - -									492	265	227	244	320	265	200	143	123
	5. Quinsy - - -	21	22	23	19	20	22	25	32	22	16	16	16	18	15	13	9	9
	6. Croup - - -	236	227	202	218	239	277	277	323	289	223	221	282	342	329	285	246	207
	7. Whooping-cough - -	447	448	619	532	550	490	531	604	460	436	619	610	554	416	416	751	559
	8. Typhus - - -	1015	1041	1025	1023	889	860	997	928	814	663	776	931	886	977	1109	1005	795
	9. Erysipelas - - -	113	116	100	105	122	113	83	105	100	85	78	76	94	102	95	80	68
	10. Metria - - -	57	54	44	52	58	57	44	54	63	50	45	47	57	72	64	57	50
	11. Carbuncle - - -	9	13	14	16	14	13	13	13	12	13	10	10	12	13	13	11	11
	12. Influenza - - -	122	76	99	58	193	55	73	93	57	58	38	45	45	39	29	31	29
	13. Dysentery - - -	124	154	104	106	78	71	89	77	71	59	71	52	52	49	52	52	45
	14. Diarrhoea - - -	833	984	784	1091	689	734	1111	719	940	494	944	552	735	798	1133	818	937
	15. Cholera - - -	64	77	244	1094	45	40	60	35	45	17	42	25	40	45	62	685	43
	16. Ague - - -	9	8	10	10	8	7	10	11	12	10	7	7	7	7	6	6	6
	17. Remittent Fever - -	34	37	39	35	31	9	14	30	21	16	13	14	10	10	4	6	4
	18. Rheumatism - - -	101	107	105	98	117	106	89	101	109	102	100	97	107	124	122	111	106
	19. Other Zymotic Diseases	..	..	..	..	..	..	..	..	..	6	6	5	6	7	6	5	5
	ORDER 2.																	
	1. Syphilis - - -	34	35	34	52	51	47	50	52	56	54	59	62	63	75	79	79	80
	2. Stricture of Urethra -	14	14	13	14	12	9	10	10	9	9	10	9	10	11	12	9	9
	3. Hydrophobia - - -	1	8	6	9	1	3	2	1	2	2	2	2	2	2	2	2	2
	4. Glanders - - -	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	ORDER 3.																	
	1. Privation - - -	3	3	4	5	5	4	3	3	3	3	3	4	3	5	4	4	5
	2. Want of Breast Milk -	31	33	35	40	46	37	43	52	52	52	49	50	57	61	68	67	68
	3. Purpura and Scurvy -	14	13	15	15	17	12	13	18	18	18	20	18	20	19	20	22	22
	4. Alco- } a Del. Tremens holism } b Intemperance	28	27	23	30	29	24	25	22	28	23	21	23	23	29	29	23	17
		16	17	21	17	15	13	15	15	18	16	12	18	23	21	21	21	18
	ORDER 4.																	
	1. Thrush - - -	66	69	66	65	62	58	61	64	62	53	45	47	49	60	46	55	8
	2. Worms, &c. - - -	..	..	..	..	..	..	..	8	8	9	8	8	10	8	8	8	8
II.	ORDER 1.																	
	1. Gout - - -	12	12	12	13	15	14	12	13	12	14	12	14	12	15	17	17	18
	2. Dropsy - - -	558	547	569	511	505	436	443	454	416	399	367	360	365	359	364	349	334
	3. Cancer - - -	295	306	313	317	325	311	325	334	342	348	366	368	368	381	381	395	403
	4. Noma - - -	5	5	6	7	10	9	10	8	8	6	9	10	9	8	9	8	8
	5. Mortification - - -	75	72	73	68	69	62	59	62	64	69	62	64	65	69	68	63	63
	ORDER 2.																	
	1. Scrofula - - -	147	144	151	142	161	150	146	156	154	146	174	170	161	151	143	138	138
	2. Tabes Mesenterica - -	255	262	274	307	257	253	282	260	255	238	286	259	289	289	323	304	32

TABLE 12.—Causes of Death registered in England in each of the Seventeen Years 1851-67. To 1,000,000 PERSONS LIVING the DEATHS from each CLASS of CAUSES, and from each CAUSE—cont.

Class.	CAUSES OF DEATH.	1851	1852	1853	1854	1855	1856	1857	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
	9. Stricture of Intestines -	14	16	13	14	13	13	15	14	15	15	14	13	14	14	13	15	13
	10. Fistula -	7	5	6	6	5	4	5	6	5	6	6	5	4	5	4	5	5
	11. Stomach Disease, &c. -	126	121	110	110	127	125	128	143	138	146	140	136	138	133	139	140	139
	12. Pancreas Disease, &c. -	5	3	5	7	3	6	1	1	1	6	9	1	1	5	1	6	8
	13. Hepatitis -	82	89	84	82	78	76	76	70	76	68	70	63	69	69	71	67	62
	14. Jaundice -	73	72	68	69	70	76	76	62	64	64	68	64	70	74	75	70	70
	15. Liver Disease, &c. -	210	220	229	217	206	192	203	222	238	231	236	233	239	249	280	269	261
	16. Spleen Disease, &c. -	4	4	4	4	3	3	4	3	3	3	4	5	4	3	3	4	4
	ORDER 5.																	
	1. Nephritis -	10	11	13	11	13	14	14	14	15	12	15	14	16	19	18	19	21
	2. Ischuria -	6	6	6	6	6	4	5	6	5	5	5	5	7	6	7	6	5
	3. Nephria -	27	32	35	42	43	51	52	57	65	71	73	77	84	87	90	97	104
	4. Diabetes -	23	21	23	24	24	23	25	27	25	27	27	29	27	32	32	32	32
	5. Stone -	12	12	12	10	13	12	10	10	9	8	10	8	9	9	9	9	9
	6. Cystitis -	12	13	13	15	15	14	14	13	14	15	17	17	17	19	16	19	18
	7. Kidney Disease, &c. -	90	96	99	97	100	101	97	115	109	115	118	113	115	125	130	133	138
	ORDER 6.																	
	1. Ovarian Dropsy -	11	10	12	12	11	11	12	14	12	12	12	14	13	13	10	10	12
	2. Uterus Disease, &c. -	43	39	41	43	45	44	44	47	47	45	45	47	47	50	50	49	50
	ORDER 7.																	
	1. Arthritis -	4	5	4	5	4	4	3	4	4	3	4	3	4	4	4	3	4
	2. Joint Disease, &c. -	58	59	63	76	72	67	65	56	62	72	78	76	83	86	86	75	78
	ORDER 8.																	
	1. Phlegmon -	27	20	17	13	14	7	9	37	24	21	23	21	26	27	22	23	20
	2. Ulcer -	18	17	19	19	15	15	16	17	19	17	20	19	21	22	20	19	21
	3. Skin Disease, &c. -	11	13	11	14	14	16	17	16	14	13	14	16	17	18	17	18	17
IV.	ORDER 1.																	
	1. Premature Birth†	1072†	1066†	1048†	1016†	964†	956†	1004†	379	382	390	383	383	399	405	423	426	423
	2. Cyanosis -	13	16	16	16	16	18	18	20	21	20	21	23	22	23	23	24	23
	3. Spina Bifida -	12	14	15	13	13	16	17	16	18	18	20	19	20	18	18	20	18
	4. Other Malformations -	20	19	16	22	20	19	20	19	21	22	21	20	22	21	22	21	24
	5. Teething -	249	246	258	238	219	194	209	209	191	198	214	190	202	208	206	204	203
	ORDER 2.																	
	1. Paramenia -	5	5	6	4	3	3	3	3	3	2	3	3	4	4	4	5	5
	2. Childbirth (see Metria) -	129	127	125	112	103	97	102	107	116	112	106	106	120	123	120	118	111
	ORDER 3.																	
	1. Old Age -	1471	1474	1614	1441	1606	1271	1409	1479	1390	1449	1377	1331	1340	1434	1382	1361	1350
	ORDER 4.																	
	1. Atrophy and Debility†	690†	729†	722†	784†	795†	729†	818†	1393	1435	1372	1473	1347	1386	1441	1549	1481	1523
V.	ORDER 1.																	
	(ACCIDENT OR NEGLIGENCE.)																	
	1. Fractures and Contusions -	*	*	*	*	*	*	*	267	282	277	281	267	283	316	330	317	310
	2. Gunshot -	*	*	*	*	*	*	*	7	5	5	6	6	5	6	5	6	6
	3. Cut, Stab -	*	*	*	*	*	*	*	4	4	4	2	3	4	6	4	5	5
	4. Burns and Scalds -	*	*	*	*	*	*	*	162	163	161	154	138	136	145	131	121	123
	5. Poison -	*	*	*	*	*	*	*	15	14	12	13	13	14	13	13	13	13
	6. Drowning -	*	*	*	*	*	*	*	110	128	115	118	122	122	132	136	133	126
	7. Suffocation -	*	*	*	*	*	*	*	47	49	54	51	61	56	61	63	60	64
	8. Otherwise -	*	*	*	*	*	*	*	37	35	34	38	39	52	55	51	54	53
	ORDER 3.																	
	(HOMICIDE.)																	
	1. Murder and Manslaughter -								18	17	19	16	21	20	20	21	23	18
	ORDER 4.																	
	(SUICIDE.)																	
	1. Gunshot Wounds -	*	*	*	*	*	*	*	3	3	3	3	3	3	3	3	3	3
	2. Cut, Stab -	*	*	*	*	*	*	*	13	14	14	13	11	13	12	12	13	13
	3. Poison -	*	*	*	*	*	*	*	6	6	8	6	6	6	7	7	6	6
	4. Drowning -	*	*	*	*	*	*	*	10	11	11	11	10	12	10	11	10	11
	5. Hanging -	*	*	*	*	*	*	*	30	27	30	30	30	28	27	28	25	22
	6. Otherwise -	*	*	*	*	*	*	*	4	3	4	5	5	4	5	6	7	7
	ORDER 5.																	
	(EXECUTION.)																	
	1. Hanging -	*	*	*	*	*	*	*	5	4	5	6	1	1	1	3	6	5
	Violent Deaths (not classed)	716	756	760	759	759	739	725	..	..	2	6	7	8	7	14	10	14
	Sudden Deaths (cause unascertained)	196	201	222	217	223	185	178	160	145	146	136	138	147	162	153	173	165
	Causes not specified or ill-defined	132	139	134	146	159	167	120	†	†	†	†	†	†	†	†	†	†

† In the years 1851-57 cases of so-called "debility" and "premature birth" were classed together; when the new classification was introduced "premature birth" was kept apart, and "debility" and "atrophy" were thrown into one line.
‡ For the years 1858-67 the number of deaths in which the cause was not specified was distributed pro rata over all the causes in the Table.

TABLE 13.—Causes of Death in England in 1867. Proportional Numbers dying from each Class of Causes, and from each Cause.

Class.	CAUSES OF DEATH.	1867		Class.	CAUSES OF DEATH.	1867		Class.	CAUSES OF DEATH.	1867	
		Deaths to 1,000,000 Persons living.	Proportional Number in 1,000,000 Deaths.			Deaths to 1,000,000 Persons living.	Proportional Number in 1,000,000 Deaths.			Deaths to 1,000,000 Persons living.	Proportional Number in 1,000,000 Deaths.
	ALL CAUSES -	21,983	1,000,000		12 Influenza -	29	1,301		ORDER 5.		
	(CLASSES.)				13 Dysentery -	45	2,062		1 Nephritis -	21	948
I.	ZYMOTIC DISEASES	4,288	195,070		14 Diarrhoea -	937	42,559		2 Ischuria -	5	227
II.	CONSTITUTIONAL	4,215	191,712		15 Cholera -	43	1,977		3 Nephria -	104	4,723
III.	LOCAL	8,840	402,128		16 Ague -	6	259		4 Diabetes -	32	1,458
IV.	DEVELOPMENTAL	3,680	167,415		17 Remittent Fever -	4	184		5 Stone -	9	431
V.	VIOLENT DEATHS	795	36,159		18 Rheumatism -	106	4,837		6 Cystitis -	18	817
	SUDDEN DEATHS, CAUSE UNASCERTAINED -	165	7,516		19 Other Zymotic Dis. -	5	225		7 Kidney Disease, &c. -	138	6,260
	(ORDERS.)				ORDER 2.				ORDER 6.		
I.	1. MIASMATIC DISEASES	4,005	182,198		1 Privation -	5	234		1 Ovarian Dropsy -	12	530
	2. ENTHETIC	90	4,093		2 Stricture of Urethra -	9	422		2 Uterus, &c. Disease -	50	2,291
	3. DIETIC	130	5,917		3 Hydrophobia -	5	21		ORDER 7.		
	4. PARASITIC	63	2,862		4 Glanders -	2	9		1 Arthritis -	4	161
	ORDER 4.				ORDER 3.				2 Joint Disease, &c. -	78	3,584
II.	1. DIATHETIC	826	37,561		1 Privation -	5	234		ORDER 8.		
	2. TUBERCULAR	3,389	154,151		2 Want of Breast-milk -	68	3,080		1 Phlegmon -	20	922
III.	DISEASES OF--				3 Purpura and Scurvy -	22	1,010		2 Ulcer -	21	950
	1. NERVOUS SYSTEM -	2,845	129,419		4 Alcohol. { a Del.Trem. -	17	791		3 Skin Disease, &c. -	17	776
	2. ORGANS OF CIRCULATION -	1,074	48,846		ORDER 4.				ORDER 1.		
	3. RESPIRATORY ORGANS -	3,402	154,751		1 Thrush -	55	2,493		1 Premature Birth -	423	19,272
	4. DIGESTIVE ORGANS -	990	45,034		2 Worms, &c. -	8	369		2 Cyanosis -	23	1,031
	5. URINARY ORGANS -	327	14,864		ORDER 1.				3 Spina Bifida -	18	838
	6. ORGANS OF GENERATION -	62	2,821		1 Gout -	18	808		4 Other Malformations -	24	1,081
	7. ORGANS OF LOCOMOTION -	82	3,745		2 Dropsy -	334	15,211		5 Teething -	203	9,219
	8. INTEGUMENTARY SYSTEM -	58	2,648		3 Cancer -	403	18,320		ORDER 2.		
IV.	1. DEV. DISEASES OF CHILDREN -	691	31,441		4 Noma -	8	373		1 Paramenia -	5	247
	2. " ADULTS -	116	5,276		5 Mortification -	63	2,849		2 Childbirth (see Metria) -	111	5,029

TABLE 14.—Mean Annual Rate of Mortality in England from each CLASS of CAUSES and from each CAUSE during Three Periods of Five Years; and Rate of Mortality in the Year 1867.

CLASSES.	CAUSES OF DEATH.	ANNUAL DEATHS to 1,000,000 LIVING.					CLASSES.	CAUSES OF DEATH.	ANNUAL DEATHS to 1,000,000 LIVING.				
		15 Years 1850-54.	5 Years 1855-59.	5 Years 1860-64.	Year 1867.	15 Years 1850-54.			5 Years 1855-59.	5 Years 1860-64.	Year 1867.		
	ALL CAUSES	22200.2*	22299.3	22052.6	22248.7	21,983	I.	ORDER 1.					
	SPECIFIED CAUSES	21921.5*	21877.3	21784.8	22102.5	21,818		1 Small-pox	222.9	279.0	199.0	190.6	118
	(CLASSES.)							2 Measles	432.1	406.0	412.0	478.2	310
I.	ZYMOTIC DISEASES	5064.0	5234.1	5039.5	4899.3	4288		3 Scarletina	1061.4	890.8	1108.6	925.6	580
II.	CONSTITUTIONAL	4368.0	4598.6	4311.6	4194.0	4215		4 Diphtheria				264.2	123
III.	LOCAL	8148.8	7644.6	8124.4	8676.6	8840		5 Quinsy	21.1	22.4	24.2	16.6	9
IV.	DEVELOPMENTAL	3595.1	3553.8	3568.4	3563.0	3680		6 Croup	261.9	225.2	281.0	279.4	207
V.	VIOLENT DEATHS	752.5	746.2	741.6	769.6	795		7 Whooping-cough	516.9	496.6	527.0	527.0	559
	SUDDEN DEATHS, CAUSE UNASCERTAINED	177.2	207.2	178.2	146.2	165		8 Typhus	913.1	995.0	897.6	846.6	795
	CAUSES NOT SPECIFIED		214.8	149.0†				9 Erysipelas	101.1	111.6	104.6	87.0	68
	(ORDERS.)							10 Metria	54.5	54.0	55.2	54.2	50
I.	1. MIASMATIC DISEASES	4830.7	5019.2	4807.2	4652.8	4005		11 Carbuncle	12.2	12.0	13.0	11.6	11
	2. ENTHETIC	62.3	51.5	61.7	73.5	90		12 Influenza	75.3	86.6	94.2	45.0	29
	3. DIETIC	106.7	97.6	106.0	116.4	130		13 Dysentery	84.8	120.6	77.2	56.6	45
	4. PARASITIC	64.3	65.8	64.6	56.6	63		14 Diarrhoea	803.5	867.4	838.6	704.6	937
II.	1. DIATHETIC	877.8	943.6	863.6	826.4	826		15 Cholera	128.2	305.8	45.0	33.8	43
	2. TUBERCULAR	3490.2	3655.0	3448.0	3367.6	3389		16 Ague	8.7	9.2	9.6	7.2	6
III.	DISEASES OF—							17 Remittent Fever	22.9	35.2	21.0	12.6	4
	1. NERVOUS SYSTEM	2786.3	2777.0	2758.0	2823.4	2845		18 Rheumatism	104.1	101.8	104.4	106.0	106
	2. ORGANS OF CIRCULATION	824.1	700.0	803.6	968.6	1074		19 Other Zymotic Dis.				6.0	5
	3. RESPIRATORY ORGANS	3111.1	2769.0	3155.2	3409.2	3402		ORDER 2.					
	4. DIGESTIVE ORGANS	1015.8	1039.0	1005.0	1003.6	990		1 Syphilis	50.7	37.2	51.2	63.6	80
	5. URINARY ORGANS	229.4	190.6	227.0	270.6	327		2 Stricture of Urethra	10.9	13.4	10.0	9.4	9
	6. ORGANS OF GENERATION	56.5	52.4	57.4	59.6	62		3 Hydrophobia	5	9	4	3	5
	7. ORGANS OF LOCOMOTION	72.4	66.2	68.2	82.6	82		4 Glanders			5.13	2	2
	8. INTEGUMENTARY SYSTEM	53.2	50.4	50.0	59.0	58		ORDER 3.					
IV.	1. DEV. DISEASES OF CHILDREN	995.6	1335.0	995.4	656.4	691		1 Privation	3.7	3.8	3.6	3.6	5
	2. " ADULTS	117.6	128.0	108.0	116.6	116		2 Want of Breast-milk	44.3	33.0	46.0	53.8	68
	3. " OLD PEOPLE	1437.0	1493.8	1431.0	1386.2	1350		3 Purpura and Scurvy	16.3	14.4	15.6	19.0	22
	4. DIS. OF NUTRITION	1044.9	697.0	1034.0	1403.8	1523		4 Alcohol	26.0	28.6	25.6	23.8	17
V.	1. ACCIDENT OR NEGLIGENCE	691.8	696.2	694.8	677.0	700		a Del. Trem.	16.4	17.8	15.2	16.2	18
	2. BATTLE	‡	‡	‡	‡	‡		b Intem.					
	3. HOMICIDE			17.5	19.2	18		ORDER 4.					
	4. SUICIDE			65.0	66.6	62		1 Thrush	58.4	65.8	61.4	48.0	55
	5. EXECUTION			5	8	5		2 Worms, &c.			3.2	8.6	8
	OTHER VIOLENT DEATHS NOT CLASSED	26.8	50.0	22.7	6.0	14	II.	ORDER 1.					
								1 Gout	13.0	12.4	13.2	13.4	18
								2 Dropsy	456.7	549.4	450.8	370.0	334
								3 Cancer	332.8	302.2	327.4	368.8	403
								4 Noma	7.8	6.0	9.0	8.4	8
								5 Mortification	67.5	73.6	63.2	65.8	63
								ORDER 2.					
								1 Scrofula	152.9	144.8	153.4	160.4	138
								2 Tabes Mesenterica	266.1	264.8	261.4	272.2	324
								3 Phthisis	2675.1	2811.2	2647.6	2566.4	2595
								4 Hydrocephalus	396.1	434.2	385.6	368.6	332

* The Mean Annual Mortality in the 15 years from All Causes and from Specified Causes is the mean of the three quinquennial periods, and does not correspond exactly with the totals of the Orders and Classes; because under certain heads, for example, Homicide, Suicide, and Causes not specified, &c., the complete details cannot be given for the entire period.

‡ Mean of 3 years.

‡ Order 2, comprising Violent Deaths in Battle, is omitted, as inapplicable to the civil population.

§ Mean of 2 years.

NOTE.—In a certain number of cases in each year the cause of death was not stated. In calculating the proportional numbers, since 1855, they have been distributed pro rata over all the causes in the Table.

TABLE 14.—Mean Annual Rate of Mortality in England from each CLASS of CAUSES and from each CAUSE during Three Periods of Five Years; and Rate of Mortality in the Year 1867—continued.

CLASSES.	CAUSES OF DEATH.	ANNUAL DEATHS to 1,000,000 LIVING.					CLASSES.	CAUSES OF DEATH.	ANNUAL DEATHS to 1,000,000 LIVING.				
		15 Years 1850-54.	5 Years 1855-59.	5 Years 1860-64.	Year 1867.	15 Years 1850-54.			5 Years 1855-59.	5 Years 1860-64.	Year 1867.		
II.	ORDER 1.							ORDER 8.					
	1 Cephalitis	187.5	199.0	180.6	182.8	199		1 Phlegmon	20.7	20.2	18.2	23.6	20
	2 Apoplexy	456.7	454.2	447.4	468.6	490		2 Ulcer	18.2	18.4	16.4	19.8	21
	3 Paralysis	466.5	440.2	465.4	493.8	509		3 Skin Disease, &c.	14.3	11.8	15.4	15.6	17
	4 Insanity	27.0	29.2	23.8	28.0	30		ORDER 1.					
	5 Chorea	3.3	3.6	3.0	3.2	2		1 Premature Birth	724.2	1043.6	737.0	392.0	423
	6 Epilepsy	114.7	105.8	115.4	122.8	109		2 Cyanosis	18.1	14.0	18.6	21.8	23
	7 Convulsions	1313.3	1352.6	1311.2	1276.0	1239		3 Spina Bifida	16.1	13.2	16.0	19.0	18
	8 Brain Disease, &c.	217.3	192.4	211.2	248.2	267		4 Other Malformations	20.2	20.0	19.4	21.2	24
	ORDER 2.							5 Teething	217.0	244.2	204.4	202.4	203
	1 Pericarditis	30.6	32.6	30.4	28.8	28		ORDER 2.					
	2 Aneurism	18.1	16.2	17.8	20.2	24		1 Paramenia	3.9	5.4	3.0	3.2	5
	3 Heart Disease, &c.	775.4	651.2	755.4	919.6	1022		2 Childbirth (see Metria)	113.7	122.6	105.0	113.4	111
	ORDER 3.							ORDER 3.					
	1 Laryngitis	66.0	59.0	69.0	70.0	61		1 Old Age	1437.0	1493.8	1431.0	1386.2	1350
	2 Bronchitis	1344.4	1016.4	1358.6	1658.2	1902		ORDER 4.					
	3 Pleurisy	47.9	51.4	49.2	43.2	41		1 Atrophy and Debility	1044.9	697.0	1034.0	1403.8	1523
	4 Pneumonia	1244.1	1239.0	1294.2	1199.2	995		ORDER 1.					
	5 Asthma	232.5	258.2	238.0	201.2	177		(ACCIDENT OR NEGLIGENCE.)					
	6 Lung Disease, &c.	176.2	145.0	146.2	237.4	226		1 Fractures and Contusions				285.8	310
	ORDER 4.							2 Gunshot				5.6	6
	1 Gastritis	39.9	37.2	42.6	39.8	35		3 Cut, Stab				3.8	5
	2 Enteritis	180.3	209.0	174.6	157.2	135		4 Burns and Scalds				146.8	123
	3 Peritonitis	75.5	72.4	75.0	79.2	74		5 Poison				13.0	13
	4 Ascites	38.5	39.6	39.4	36.6	34		6 Drowning				121.8	126
	5 Ulceration of Intestines	46.5	50.8	45.8	43.0	44		7 Suffocation				56.6	64
	6 Hernia	42.1	41.2	43.8	41.4	44		8 Otherwise				43.6	53
	7 Ileus	60.5	63.8	60.2	57.4	55		ORDER 3.					
	8 Intussusception	13.4	13.6	13.4	13.2	14		(HOMICIDE.)					
	9 Stricture of Intestines	14.1	14.2	14.0	14.0	13		1 Murder and Manslaughter				19.2	18
	10 Fistula	5.3	5.8	5.0	5.2	5		ORDER 4.					
	11 Stomach Disease, &c.	129.8	118.6	132.2	138.6	139		(SUICIDE.)					
	12 Pancreas Disease, &c.	1.7	1.6	1.8	1.8	1.8		1 Gunshot Wounds				3.0	3
	13 Hepatitis	75.5	83.6	75.2	67.8	62		2 Cut, Stab				12.6	13
	14 Jaundice	69.1	69.6	69.6	68.0	70		3 Poison				6.6	6
	15 Liver Disease, &c.	221.0	215.2	210.2	237.6	261		4 Drowning				10.8	11
	16 Spleen Disease, &c.	3.6	3.8	3.2	3.8	4		5 Hanging				29.0	22
	ORDER 5.							6 Otherwise				4.6	7
	1 Nephritis	13.4	11.0	14.0	15.2	21		ORDER 5.					
	2 Ischuria	5.5	5.8	5.2	5.6	5		(EXECUTION.)					
	3 Nephria	54.7	32.0	53.6	78.4	104		1 Hanging				8	5
	4 Diabetes	25.4	23.0	24.8	28.4	32		Other Violent Deaths (not classed)				6.0	14
	5 Stone	10.6	12.0	11.0	8.8	9		Sudden Deaths (Cause unascertained)	177.2	207.2	178.2	146.2	165
	6 Cystitis	14.7	13.0	14.0	17.0	18		Cause not specified or ill-defined				214.8	

TABLE 15.—Causes of Death in England in the Year 1867, arranged in the order of Mortality.

CAUSES OF DEATH.	Number of Deaths registered in the Year 1867.	Proportional Number from each Cause to 1,000,000 Deaths from All Causes.	CAUSES OF DEATH.	Number of Deaths registered in the Year 1867.	Proportional Number from each Cause to 1,000,000 Deaths from All Causes.
Phthisis - - - - -	55,042	118,003	Ulceration of Intestines - -	928	1,990
Bronchitis - - - - -	40,373	86,554	Hernia - - - - -	927	1,987
Atrophy and Debility - -	32,317	69,284	Cholera - - - - -	922	1,977
Old Age - - - - -	28,646	61,414	Pleurisy - - - - -	865	1,854
Convulsions - - - - -	26,258	56,294	Gastritis - - - - -	742	1,591
Heart Disease - - - - -	21,689	46,499	Ascites - - - - -	724	1,552
Pneumonia - - - - -	21,118	45,275	Diabetes - - - - -	680	1,458
Diarrhœa - - - - -	19,851	42,559	Insanity - - - - -	640	1,372
Typhus - - - - -	16,862	36,150	Influenza - - - - -	607	1,301
Scarlatina - - - - -	12,300	26,370	Pericarditis - - - - -	592	1,269
Whooping-cough - - - -	11,873	25,454	Other Malformations - - -	504	1,081
Paralysis - - - - -	10,810	23,175	Aneurism - - - - -	503	1,078
Apoplexy - - - - -	10,406	22,309	Hanging (Suicide) - - - -	488	1,046
Premature Birth - - - -	8,990	19,272	Cyanosis - - - - -	481	1,081
Cancer - - - - -	8,545	18,320	Purpura and Scurvy - - - -	471	1,010
Dropsy - - - - -	7,095	15,211	Ulcer - - - - -	443	950
Hydrocephalus - - - - -	7,041	15,095	Nephritis - - - - -	442	948
Tabes Mesenterica - - - -	6,882	14,754	Phlegmon - - - - -	430	922
Fracture and Contusion } (Accident) - - - - - }	6,596	14,141	Murder and Manslaughter - -	392	840
Measles - - - - -	6,588	14,124	Spina Bifida - - - - -	391	832
Brain Disease, &c. - - - -	5,671	12,158	Cystitis - - - - -	381	817
Liver Disease, &c. - - - -	5,532	11,859	Gout - - - - -	377	808
Lung Disease, &c. - - - -	4,793	10,278	Intemperance - - - - -	374	802
Croup - - - - -	4,387	9,405	Delirium Tremens - - - - -	369	791
Teeth - - - - -	4,300	9,219	Skin - - - - -	332	776
Cephalitis - - - - -	4,220	9,047	Other Violent Deaths (not } classified) - - - - - }	299	641
Asthma - - - - -	3,748	8,035	Intussusception - - - - -	296	635
Sudden Deaths (Cause unas- } certained) - - - - - }	3,506	7,516	Poison (Accident) - - - - -	281	602
Stomach Disease, &c. - - - -	2,948	6,320	Stricture of Intestines - - -	278	596
Scrofula - - - - -	2,938	6,299	Cut, Stab (Suicide) - - - -	268	575
Kidney Disease, &c. - - - -	2,920	6,260	Ovarian Dropsy - - - - -	247	530
Enteritis - - - - -	2,858	6,127	Carbuncle - - - - -	235	504
Drowning (Accident) - - - -	2,676	5,737	Drowning (Suicide) - - - - -	228	489
Burns and Scalds (Accident) -	2,600	5,574	Stone - - - - -	201	431
Diphtheria - - - - -	2,600	5,574	Quinsy - - - - -	201	431
Small-pox - - - - -	2,513	5,388	Stricture of Urethra - - - -	197	422
Childbirth - - - - -	2,346	5,029	Noma - - - - -	174	373
Epilepsy - - - - -	2,312	4,957	Worms - - - - -	172	369
Rheumatism - - - - -	2,256	4,837	Otherwise (Suicide) - - - -	140	300
Nephria - - - - -	2,203	4,723	Poison (Suicide) - - - - -	135	289
Syphilis - - - - -	1,698	3,641	Gunshot (Accident) - - - - -	124	266
Joint Disease, &c. - - - - -	1,672	3,584	Ague - - - - -	121	259
Peritonitis - - - - -	1,571	3,368	Paramenia - - - - -	115	247
Jaundice - - - - -	1,493	3,201	Privation - - - - -	109	234
Erysipelas - - - - -	1,450	3,109	Ischuria - - - - -	106	227
Want of Breast Milk - - - -	1,437	3,080	Other Zymotic Diseases - - -	105	225
Suffocation (Accident) - - -	1,352	2,899	Cut, Stab (Accident) - - - -	103	221
Mortification - - - - -	1,329	2,849	Fistula - - - - -	100	214
Hepatitis - - - - -	1,319	2,828	Spleen Disease, &c. - - - - -	93	199
Laryngitis - - - - -	1,285	2,755	Remittent Fever - - - - -	86	184
Ileus - - - - -	1,179	2,528	Arthritis - - - - -	75	161
Thrush - - - - -	1,163	2,493	Gunshot wounds (Suicide) - -	57	122
Otherwise (Accident) - - - -	1,116	2,393	Chorea - - - - -	50	107
Uterus Disease, &c. - - - - -	1,069	2,291	Pancreas Disease - - - - -	18	39
Metria - - - - -	1,066	2,285	Hanging (Execution) - - - -	11	24
Dysentery - - - - -	962	2,062	Hydrophobia - - - - -	10	21
			Glanders - - - - -	4	9

Note.—The causes of 4,630 deaths were not specified. In calculating the proportional numbers they have been distributed pro ratâ over all the causes in the Table.

TABLE 16.—Deaths in England of Women after Childbearing in 1867 classed under the Diseases in Column 1., and neither referred to Childbirth nor to Metria in the Abstracts.

CAUSES OF DEATH.	ALL AGES.	A G E S.				
		15—	20—	25—	35—	45 and upwards.
Col. 1.	2.	3.	4.	5.	6.	7.
TOTAL - - - - -	521	12	101	222	181	5
CLASS I.						
Small-pox - - - - -	34	2	10	12	10	-
Measles - - - - -	2	-	1	1	-	-
Scarlet Fever - - - - -	37	3	12	20	2	-
Diphtheria - - - - -	1	-	-	-	1	-
Typhus - - - - -	31	1	8	13	9	-
Erysipelas - - - - -	2	-	-	1	1	-
Influenza - - - - -	1	-	-	1	-	-
Dysentery - - - - -	3	-	1	2	-	-
Diarrhœa - - - - -	23	1	2	9	10	1
Cholera - - - - -	2	-	-	1	1	-
Remittent Fever - - - - -	1	-	-	1	-	-
Rheumatism - - - - -	10	-	5	3	1	1
Syphilis - - - - -	2	-	1	1	-	-
Purpura - - - - -	1	-	-	1	-	-
CLASS II.						
Dropsy - - - - -	12	-	2	4	6	-
Cancer - - - - -	3	-	-	2	1	-
Scrofula - - - - -	1	-	-	1	-	-
Phthisis - - - - -	131	2	28	61	40	-
CLASS III.						
Cephalitis - - - - -	2	-	-	2	-	-
Apoplexy - - - - -	4	-	1	1	2	-
Paralysis - - - - -	4	-	-	3	-	1
Epilepsy - - - - -	1	-	-	-	1	-
Brain Disease - - - - -	6	-	1	3	1	1
Pericarditis - - - - -	2	-	1	-	1	-
Heart Disease - - - - -	57	2	7	22	25	1
Laryngitis - - - - -	1	-	-	1	-	-
Bronchitis - - - - -	41	-	9	10	16	-
Pleurisy - - - - -	3	-	1	1	1	-
Pneumonia - - - - -	38	-	5	15	18	-
Asthma - - - - -	5	-	-	2	2	-
Lung Disease - - - - -	11	-	1	3	8	-
Gastritis - - - - -	2	-	-	2	-	-
Enteritis - - - - -	4	-	-	1	3	-
Ileus - - - - -	2	-	-	-	2	-
Stomach Disease - - - - -	3	-	2	1	-	-
Hepatitis - - - - -	5	-	-	-	5	-
Jaundice - - - - -	3	-	-	2	1	-
Liver Disease - - - - -	6	-	-	4	2	-
Nephria - - - - -	13	1	2	4	6	-
Kidney Disease - - - - -	9	-	1	3	5	-
Joint Disease - - - - -	2	-	-	2	-	-

TABLE 17.—Deaths in England of Women in 1867 who were returned as pregnant, classed under the Diseases in Column 1.

CAUSES OF DEATH.	ALL AGES.	A G E S.				
		15—	20—	25—	35—	45 and upwds.
Col. 1.	2.	3.	4.	5.	6.	7.
TOTAL - - - - -	16	-	1	7	8	-
CLASS I.						
Measles - - - - -	1	-	-	-	1	-
Typhus - - - - -	2	-	-	-	2	-
CLASS II.						
Cancer - - - - -	1	-	-	-	1	-
Phthisis - - - - -	3	-	-	2	1	-
CLASS III.						
Cephalitis - - - - -	1	-	-	1	-	-
Apoplexy - - - - -	1	-	-	-	-	-
Heart Disease - - - - -	1	-	-	-	1	-
Gastritis - - - - -	1	-	-	1	-	-
Enteritis - - - - -	1	-	-	-	1	-
Stomach Disease - - - - -	1	-	-	-	-	-
Nephria - - - - -	2	-	1	1	-	-
Kidney Disease - - - - -	1	-	-	1	-	-

TABLE 18.—Deaths in England of Women in Childbirth in each of the Years 1847-67.

YEARS.	NUMBER OF DEATHS FROM			DEATHS OF MOTHERS TO 10,000 CHILDREN BORN ALIVE.
	METRIA AND CHILDBIRTH.	METRIA.	ACCIDENTS OF CHILDBIRTH.	
1847 - -	3226	784	2442	60
1848 - -	3445	1365	2080	61
1849 - -	3339	1165	2174	58
1850 - -	3252	1113	2139	55
1851 - -	3290	1009	2281	53
1852 - -	3247	972	2275	52
1853 - -	3063	795	2268	50
1854 - -	3009	954	2055	47
1855 - -	2979	1079	1900	47
1856 - -	2888	1067	1821	44
1857 - -	2787	836	1951	42
1858 - -	3131	1068	2063	48
1859 - -	3496	1238	2258	51
1860 - -	3173	987	2186	46
1861 - -	2995	886	2109	43
1862 - -	3077	940	2137	43
1863 - -	3588	1155	2433	49
1864 - -	4016	1484	2532	54
1865 - -	3823	1333	2490	51
1866 - -	3682	1197	2485	49
1867 - -	3412	1066	2346	44
21 years 1847-67 -	68,918	22,493	46,425	50

TABLE 19.—Mortality of Women by Childbearing at different Ages in England, in the 7 Years 1848-54, and in the 13 Years 1855-67.

AGES of WOMEN.	FEMALE POPULATION at the Middle of the Years		ANNUAL RATE OF MORTALITY.						AGES of WOMEN.
			To every 1,000 WOMEN living, the NUMBER of DEATHS by						
	1851.	1861.	Child-birth and Metria.	Child-birth.	Metria.	Child-birth and Metria.	Child-birth.	Metria.	
			7 Years 1848-54.			13 Years 1855-67.			
15-25	1,746,854	1,898,742	*411	*240	*171	*396	*233	*163	15-25
25-35	1,417,298	1,538,756	*986	*643	*343	*896	*575	*321	25-35
35-45	1,072,611	1,245,887	*981	*742	*239	*866	*648	*218	35-45
45-55	782,010	893,779	*085	*069	*016	*065	*052	*013	45-55
15-55	5,018,773	5,622,164	*645	*435	*210	*589	*393	*196	15-55

TABLE 20.—Deaths of Mothers bearing Children at different Ages in England, in the 7 Years 1848-54, and in the 13 Years 1855-67.

AGES.	Estimated Number of Women bearing Children.		DEATHS registered in the 7 Years 1848-54.						DEATHS registered in the 13 Years 1855-67.						AGES.
			CHILDBIRTH and METRIA.		CHILDBIRTH.		METRIA.		CHILDBIRTH and METRIA.		CHILDBIRTH.		METRIA.		
	1851.	1861.	In the 7 Years 1848-54.	An-nually.	In the 7 Years 1848-54.	An-nually.	In the 7 Years 1848-54.	An-nually.	In the 13 Years 1855-67.	An-nually.	In the 13 Years 1855-67.	An-nually.	In the 13 Years 1855-67.	An-nually.	
15-25	107,440	116,474	5,025	717.9	2,940	420.0	2,085	297.9	9,754	750.3	5,731	440.8	4,023	309.5	15-25
25-35	328,720	368,487	9,779	1397.0	6,378	911.1	3,401	485.9	18,504	1423.3	11,880	913.8	6,624	509.5	25-35
35-45	166,140	192,979	7,359	1051.3	5,568	795.4	1,791	255.9	14,026	1079.0	10,493	807.2	3,533	271.8	35-45
45-55	7,545	8,623	466	66.6	380	54.3	86	12.3	760	58.5	604	46.5	156	12.0	45-55
15-55	609,845	686,563	22,629	3232.8	15,266	2180.8	7,363	1052.0	43,044	3311.1	28,708	2208.3	14,336	1102.8	15-55

TABLE 21.—Mortality of Mothers by Childbearing at different Ages in England, in the 7 Years 1848-54, and in the 13 Years 1855-67.

AGE of MOTHER.	ANNUAL RATE OF MORTALITY.						AGE of MOTHER.
	To every 1000 MOTHERS bearing CHILDREN, the NUMBER of DEATHS by						
	Childbirth.	Metria.	Childbirth and Metria.	Childbirth and Metria.	Childbirth.	Metria.	
	7 Years 1848-54.			13 Years 1855-67.			
15-25	3.91	2.77	6.68	6.44	3.73	2.66	15-25
25-35	2.77	1.43	4.25	3.86	2.43	1.38	25-35
35-45	4.79	1.54	6.33	5.59	4.18	1.41	35-45
45-55	7.20	1.63	8.83	6.73	5.39	1.39	45-55
15-55	3.58	1.73	5.31	4.83	3.22	1.61	15-55

From the Swedish returns (1776-1855) it appears that 100 childbearings produced 101.62 children, viz., 2.82 stillborn, 98.80 quickborn; consequently 100 quickborn children imply 101.21 childbearings. In the year 1852 in England 624,012 children were born alive by 617,902 mothers; of whom 6,036 bore twins, 37 bore triplets. So 99 mothers bore 100 live children; or 100 live children implied 99 childbearings. To these should be added the childbearings yielding still-births unregistered.

TABLE 22.—Relative Mortality of Men and Women at different Ages in England in the Years 1851-60; in the 64 Healthy Districts of England in the Years 1849-53; and in Sweden in the Years 1830-35.

AGES.	MEN.		WOMEN.			EXCESS of MORTALITY of WOMEN over MORTALITY of MEN.			AGES.	
	ENGLAND, 1851-60.*	HEALTHY DISTRICTS of ENGLAND, 1849-53.	SWEDEN, 1830-35.	ENGLAND, 1851-60.*	HEALTHY DISTRICTS of ENGLAND, 1849-53.	SWEDEN, 1830-35.	ENGLAND, 1851-60.	HEALTHY DISTRICTS of ENGLAND, 1849-53.		SWEDEN, 1830-35.
	ANNUAL MORTALITY FROM ALL CAUSES TO 1,000 LIVING.									
15-25	7.68	6.91	6.55	8.08	7.65	5.64	+ .40	+ .74	- .91	15-25
25-35	9.55	8.18	11.50	9.87	8.94	8.89	+ .32	+ .76	- 2.61	25-35
35-45	12.61	9.23	16.45	11.83	9.98	12.59	- .73	+ .70	- 3.86	35-45
45-55	17.59	12.73	25.09	15.06	11.92	18.21	- 2.53	- .81	- 6.88	45-55
55-65	30.35	22.94	40.23	27.54	21.62	31.74	- 2.81	- 1.32	- 8.54	55-65
65-75	66.82	54.86	78.26	55.84	49.92	69.50	- 10.98	- 4.94	- 8.76	65-75

* The mortality has been re-calculated from the population—corrected for erroneous statements of age—as given at p. 109, Vol. 3, Census Report, 1861.

TABLE 23.—Annual Mortality from Childbirth and Metria in the 10 Years 1851-60 in England, in the 64 Healthy Districts, and in 11 Large Towns.

AGES.	ANNUAL MORTALITY TO 1000 WOMEN LIVING.		
	ENGLAND, 1851-60.	HEALTHY DISTRICTS, 1851-60.	LONDON and TEN LARGE TOWN DISTRICTS, 1851-60.
15-25	*383	*274	*371
25-35	*881	*778	*835
35-45	*884	*821	*766
45-55	*070	*079	*053

TABLE 24.—Deaths of Women in Childbirth, during the 10 Years 1851-60, in the Registration Divisions of England, in the 64 Healthy Districts, and in the 11 Large Towns.

	BIRTHS in the 10 Years, 1851-60.	DEATHS from CHILD BIRTH and METRIA in 10 Years, 1851-60.	DEATHS of MOTHERS to 10,000 Children born alive.
ENGLAND - - -	6,471,650	31,060	48
Division I - - -	864,563	4,239	49
Division II - - -	536,806	2,301	43
Division III - - -	414,329	1,795	43
Division IV - - -	361,970	1,491	41
Division V - - -	564,805	2,483	44
Division VI - - -	810,100	3,550	44
Division VII - - -	426,038	2,019	47
Division VIII - - -	999,820	5,351	54
Division IX - - -	695,439	3,365	48
Division X - - -	385,888	1,968	51
Division XI - - -	411,892	2,497	61
In 64 Healthy Districts -	312,402	1,356	43
In 11 Large Towns - -	1,402,304	6,862	49

TABLE 25.—Childbearings at FOUR PERIODS of LIFE in Sweden (1830-35).*

AGE.	WOMEN living at Two Enumerations 1830 & 1835.	CHILD BEARINGS in Five Years 1831-35.	Proportional Numbers	
			Of 100 Women living the Numbers bearing Children annually.†	Women living to One Annual Childbearing.
1	2	3	4	5
15-25	515,257	79,225	6.15	16.26
25-35	428,718	248,589	23.19	4.31
35-45	383,771	148,610	15.49	6.46
45-55	298,047	7,189	.96	103.65
15-55	1,625,793	483,613	11.90	8.40

* See Registrar General's Sixth Annual Report, pp. 268-71, and p. 281.
 † This column is derived by multiplying the number of childbearings in the five years 1831-5 (col. 3.) by 100, and then dividing by 2½ times the women living at the two enumerations 1830 and 1835 (col. 2).

TABLE 26.—Population 1851 and 1861, and Deaths registered from Diabetes in England at different Ages in the 7 Years 1848-54, and in the 13 Years 1855-67.

AGES.	POPULATION (corrected for errors of Age).				DEATHS registered from DIABETES, 1848-54.					DEATHS registered from DIABETES, 1855-67.						
	1851.		1861.		In the 7 Years 1848-54.			Annually in the 7 Years 1848-54.*		Annually in the 13 Years 1855-67.*			In the 13 Years 1855-67.			
	Males.	Females.	Males.	Females.	Persons.	Males.	Females.	Males.	Females.	Persons.	Males.	Females.	Persons.	Males.	Females.	
ALL AGES	8,808,662	9,174,187	9,301,152	10,318,162	2,833	1,935	898	276.4	128.4	404.8	557.1	366.4	190.7	7,247	4,764	2,483
Under 5 Years	1,180,430	1,174,915	1,358,356	1,349,561	45	25	20	3.6	2.9	6.5	6.5	3.9	2.6	85	51	34
5 -	1,053,510	1,045,298	1,175,945	1,174,316	57	34	23	4.9	3.3	8.2	9.8	5.0	4.8	128	65	63
10 -	967,007	952,248	1,062,588	1,048,152	104	63	41	9.0	5.9	14.9	19.6	10.4	9.2	255	135	120
15 -	1,671,634	1,746,854	1,826,796	1,893,742	376	248	128	35.4	18.3	53.7	65.1	38.5	26.6	846	500	346
25 -	1,323,621	1,417,298	1,395,508	1,588,756	486	316	170	45.1	24.3	69.4	88.7	55.2	33.5	1,154	718	436
35 -	1,017,018	1,072,611	1,108,592	1,245,887	495	336	159	48.0	22.7	70.7	93.5	59.8	33.7	1,215	777	438
45 -	734,314	782,010	883,311	893,779	464	322	142	46.0	20.3	66.3	96.3	65.5	30.8	1,253	852	401
55 -	482,788	528,185	581,158	580,966	411	300	111	42.9	15.9	58.8	96.2	68.0	28.2	1,251	884	367
65 -	268,052	311,135	289,555	387,730	312	225	87	32.1	12.4	44.5	65.8	48.2	17.6	856	627	229
75 -	97,008	123,610	106,306	134,630	81	65	16	9.3	2.3	11.6	14.4	11.2	3.2	188	146	42
85 -	12,745	19,009	12,582	19,656	2	1	1	.1	.1	.2	1.2	.7	.5	16	9	7
95 & up-wards	535	1,014	455	987	-	-	-	-	-	-	-	-	-	-	-	-

* These results have been slightly adjusted in the decimal place, in order that they should cast.

TABLE 27.—Mortality from Diabetes at different Ages in England in the 7 Years 1848-54, and in the 13 Years 1855-67.

AGES.	ANNUAL RATE of MORTALITY from DIABETES.						AGES.
	NUMBER of DEATHS to every 100,000 of POPULATION.						
	In the 7 Years 1848-54.			In the 13 Years 1855-67.			
	Males.	Females.	Persons.	Persons.	Males.	Females.	
ALL AGES -	3.1	1.4	2.3	2.8	3.7	1.9	ALL AGES.
Under 5 Years	.3	.2	.3	.2	.3	.2	Under 5 Years.
5 -	.5	.3	.4	.4	.4	.4	5 -
10 -	.9	.6	.8	.9	1.0	.9	10 -
15 -	2.1	1.0	1.6	1.7	2.1	1.4	15 -
25 -	3.4	1.7	2.5	3.0	4.0	2.1	25 -
35 -	4.7	2.1	3.4	4.0	5.4	2.7	35 -
45 -	6.3	2.6	4.4	5.4	7.4	3.5	45 -
55 -	8.9	3.0	5.8	8.3	11.7	4.9	55 -
65 -	12.0	4.0	7.7	9.7	16.7	4.5	65 -
75 -	9.6	1.8	5.2	6.0	10.6	2.4	75 -
85 -	1.1	.8	.9	3.8	5.5	2.7	85 -

TABLE 28.—Deaths in England of Males at different Ages returned at Inquests as resulting from Murder and Manslaughter in the Year 1867.

CAUSES OF DEATH.	ALL AGES.	AGES.																	
		Total under 1 Year.	1-4				Total under 5 Years	5-85											85 and upwards.
			1	2	3	4		5-	10-	15-	25-	35-	45-	55-	65-	75-	85-		
MURDER AND MANSLAUGHTER -	238	85	2	2	3	1	93	6	6	30	34	30	20	13	1	3	2	-	
MURDER - - - - -	126	78	1	1	1	1	82	5	1	11	7	6	8	4	1	-	1	-	
MANSLAUGHTER - - - -	112	7	1	1	2	-	11	1	5	19	27	24	12	9	-	3	1	-	
MURDER—																			
Fractures - - - - -	9	4	-	-	-	4	-	-	1	-	2	-	1	1	-	-	-	-	
Blow - - - - -	6	2	-	-	-	2	-	-	1	2	-	1	-	-	-	-	-	-	
Cut, Stab - - - - -	3	-	-	-	-	-	-	-	1	2	-	-	-	-	-	-	-	-	
Cut Throat - - - - -	7	2	-	-	1	3	3	-	-	-	-	-	1	-	-	-	-	-	
Gun Shot - - - - -	5	-	-	-	-	-	-	-	2	-	1	1	1	-	-	-	-	-	
Explosion of Gunpowder -	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	
Poison (not stated what kind)	2	1	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	
Drowning - - - - -	10	5	1	1	1	8	2	-	-	-	-	-	-	-	-	-	-	-	
Suffocation - - - - -	17	17	-	-	-	17	-	-	-	-	-	-	-	-	-	-	-	-	
Strangling - - - - -	7	7	-	-	-	7	-	-	-	-	-	-	-	-	-	-	-	-	
Infanticide - - - - -	31	31	-	-	-	31	-	-	-	-	-	-	-	-	-	-	-	-	
Neglect - - - - -	3	3	-	-	-	3	-	-	-	-	-	-	-	-	-	-	-	-	
Exposure to Cold - - - -	2	2	-	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	
Navel Hemorrhage - - - -	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Starvation - - - - -	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	
(Not stated how)	21	3	-	-	-	3	-	-	5	3	3	5	1	-	-	-	1	-	
MANSLAUGHTER—																			
Fall - - - - -	2	-	-	-	-	1	1	2	-	-	-	2	-	-	-	-	-	-	
Horse Conveyance - - - -	5	-	-	1	-	1	-	-	-	-	1	1	-	-	-	-	-	-	
Fractures - - - - -	7	-	-	1	-	1	-	-	-	1	1	1	3	-	-	-	-	-	
Blow, &c. - - - - -	14	-	-	-	-	-	-	-	2	2	7	1	2	-	-	-	-	-	
Fight - - - - -	4	-	-	-	-	-	-	-	1	1	2	-	-	-	-	-	-	-	
Cut, Stab - - - - -	8	-	-	-	-	-	-	-	4	2	2	-	-	-	-	-	-	-	
Gun Shot - - - - -	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	
Agricultural Machinery -	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Drowning - - - - -	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	
Suffocation - - - - -	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Neglect - - - - -	4	2	-	-	-	2	-	-	1	-	-	-	1	-	-	-	-	-	
Exposure to Cold - - - -	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Railways—Run over on Line -	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	
Collision - - - - -	6	-	-	-	-	-	-	-	3	2	1	-	-	-	-	-	-	-	
(Manner not stated)	2	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	
Coal Mines—Fall in Pit or Shaft	4	-	-	-	-	-	-	-	1	3	1	-	-	-	-	-	-	-	
Explosion of Fire Damp	2	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	
(Not stated how)	48	3	1	-	-	4	-	3	7	16	7	4	3	-	3	1	-	-	

TABLE 29.—Deaths in England of Females at different Ages returned at Inquests as resulting from Murder and Manslaughter in the Year 1867.

CAUSES OF DEATH.	ALL AGES.	AGES.																	
		Total under 1 Year.	1-4				Total under 5 Years	5-85											85 and upwards.
			1	2	3	4		5-	10-	15-	25-	35-	45-	55-	65-	75-	85-		
MURDER AND MANSLAUGHTER -	154	91	2	3	1	1	98	4	2	5	19	10	6	4	4	2	-	-	
MURDER - - - - -	122	88	2	2	-	1	93	3	2	-	12	4	2	2	4	-	-	-	
MANSLAUGHTER - - - - -	32	3	-	1	1	-	5	1	-	5	7	6	4	2	-	2	-	-	
MURDER—																			
Fractures - - - - -	2	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	
Blow, &c. - - - - -	6	4	-	-	-	4	-	-	-	1	1	-	-	-	-	-	-	-	
Cut, Stab - - - - -	2	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	
Cut Throat - - - - -	8	3	-	1	-	5	1	-	-	-	-	-	1	-	-	-	-	-	
Gun Shot - - - - -	1	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	
Explosion of Gunpowder -	3	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Poison (not stated what kind)	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Drowning - - - - -	7	4	-	-	-	4	-	-	-	2	1	-	-	-	-	-	-	-	
Suffocation - - - - -	18	17	-	-	-	17	-	-	-	-	-	-	-	-	1	-	-	-	
Strangling - - - - -	5	5	-	-	-	5	-	-	-	-	-	-	-	-	-	-	-	-	
Infanticide - - - - -	37	37	-	-	-	37	-	-	-	-	-	-	-	-	-	-	-	-	
Neglect - - - - -	14	13	-	-	-	13	-	1	-	-	-	-	-	-	-	-	-	-	
Exposure to Cold - - - -	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Navel Hemorrhage - - - -	1	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
(Not stated how)	16	3	2	-	-	5	1	1	-	5	-	1	2	1	-	-	-	-	
MANSLAUGHTER—																			
Fall - - - - -	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	
Horse Conveyance - - - -	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	
Fractures - - - - -	2	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	
Blow, &c. - - - - -	5	1	-	-	-	1	-	-	1	1	2	-	-	-	-	-	-	-	
Cut, Stab - - - - -	2	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	
Gunshot - - - - -	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	
Poison (not stated what kind)	1	-	-	-	-	1	-	-	-	-	-	-	2	-	-	-	-	-	
Railways—Collision - - - -	3	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	
(Not stated how)	16	2	-	-	-	2	1	-	3	3	4	1	-	-	-	2	-	-	

TABLE 30.—Proportion of Suicides consummated to every 1,000,000 of the Population of England, 1858-67.

MEANS EMPLOYED.	1858	1859	1860	1861	1862	1863	1864	1865	1866	1867
Gunshot Wounds - - -	3	3	3	3	3	3	3	3	3	3
Cutting, Stabbing - - -	13	14	14	13	11	13	12	12	13	13
Poisoning - - - - -	6	6	8	6	6	6	7	7	6	6
Drowning - - - - -	10	11	11	11	10	12	10	11	10	11
Hanging - - - - -	30	27	30	30	30	28	27	28	25	22
Otherwise - - - - -	4	3	4	5	5	4	5	6	7	7
All Ways - - - - -	66	64	70	68	65	66	64	67	64	62

TABLE 31.—Deaths and Mortality in England by Burns and Scalds in the Years 1848-67.

AGES.	DEATHS				AVERAGE ANNUAL DEATHS in the 19 Years 1848-66.		AVERAGE ANNUAL RATE of MORTALITY in the 19 Years 1848-66 to 100,000 Living.		RATE of MORTALITY to 100,000 Living in 1867.	
	In the 19 Years 1848-66.		In 1867.		Males.	Females.	Males.	Females.	Males.	Females.
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
ALL AGES - - -	26,668	27,025	1,379	1,221	1,404	1,424	14.9	14.4	13.3	11.0
Under 5 Years - - -	14,926	12,270	749	602	786	646	61.3	50.8	50.2	40.4
5- - - - -	3,678	6,329	139	222	194	333	17.2	29.6	11.0	17.8
10- - - - -	1,015	1,646	64	67	53	87	5.2	8.6	5.7	5.9
15- - - - -	2,013	1,246	119	55	106	66	6.0	3.6	6.2	2.7
25- - - - -	1,661	685	107	31	87	36	6.3	2.4	7.7	1.8
35- - - - -	1,195	608	85	27	63	32	5.8	2.7	7.5	2.0
45- - - - -	784	670	45	32	41	35	5.0	4.1	4.5	3.4
55- - - - -	548	735	26	28	29	39	5.3	6.8	4.0	4.8
65- - - - -	386	1,100	24	61	20	58	7.1	16.4	8.3	13.5
75- - - - -	371									

Clitheroe, 479.
Clun, 353.
Clutton, 325.
Cockermouth, 570.
Colchester, 204.
Congleton, 457.
Conway, 622.
Cookham, 129.
Corwen, 615.
Cosford, 213.
Coventry, 400.
Cranbrook, 60.
Credon, 292.
Crickhowell, 601.
Cricklade, 251.
Croydon, 46.
Cuckfield, 83.

D

Darlington, 540.
Dartford, 50.
Davenport, 169.
Depwade, 239.
Derby, 445.
Devizes, 256.
Dewsbury, 502.
Docking, 244.
Dolgelly, 617.
Doncaster, 510.
Dorchester, 275.
Dorking, 43.
Dover, 72.
Downham, 247.
Driffild, 523.
Droitwich, 391.
Droxford, 110.
Dudley, 382.
Dulverton, 313 *b*.
Dunmow, 209.
Durham, 545.
Dursley, 333.

E

Easington, 546.
Easingwold, 527.
East Ashford, 63.
Eastbourne, 78.
East Grinstead, 82.
Easthampstead, 130.
East London, 17.
East Retford, 435.
Eastry, 71.
East Stonehouse, 288.
East Ward, 573.
Ecclesall Bierlow, 507.
Edmonton, 137.
Elham, 73.
Ellesmere, 362.
Ely, 190.
Epping, 195.
Epsom, 37.
Erpingham, 231.
Eton, 149.
Evesham, 389.
Exeter, 282.

F

Falmouth, 308.
Fareham, 98.
Faringdon, 122.
Farnborough, 41.
Farnham, 40.
Faversham, 67.
Festiniog, 618.
Flegg, 229.
Foleshill, 399.
Fordingbridge, 103.
Forehoe, 235.
Freebridge Lynn, 245.
Frome, 321.
Fylde, 483.

G

Gainsborough, 434.
Garstang, 484.
Gateshead, 551.
Glanford Brigg, 433.
Glendale, 562.
Gloucester, 336.
Godstone, 45.
Goole, 512.
Gower, 585 *b*.
Grantham, 427.
Gravesend, 51.
Great Boughton (Chester), 459.
Great Ouseburn, 492 *a*.
Greenwich, 35.
Guildford, 39.
Gulteross, 240.
Guisbrough, 532.

H

Hackney, 11.
Hailsham, 79.
Halifax, 498.
Halstead, 207.
Haltwhistle, 556.
Hambleton, 42.
Hampstead, 8.
Hardingstone, 167.
Hartismere, 218.
Hartlepool, 541 *b*.
Hartley Wintney, 115.
Haslingden, 477.
Hastings, 76.
Hatfield, 143.
Havant, 95.
Haverfordwest, 592.
Hay, 602.
Hayfield, 451.
Headington, 157.
Helmsley, 529.
Helston, 309.
Hemel Hempstead, 146.
Hemsworth, 504 *b*.
Hendon, 135.
Henley, 155.
Henstead, 236.
Hereford, 348.

Hertford, 142.
Hexham, 555.
Highworth, 250.
Hinckley, 412.
Hitchin, 141.
Holbeach, 424.
Holbeck, 500 *c*.
Holborn, 14.
Hollingbourn, 59.
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[In this alphabetical arrangement the principle is adopted of placing the Sub-Districts (or Registrars' Districts) having compound names in the order indicated by the usual pronunciation of those names; thus, East Grinstead will be found under the letter E, and not under G as "Grinstead, East;" St. James under the letter S, and not as "James, St." The number against each Sub-District, in the third column, refers to the order in which it appears in the arrangement of the Districts in the Tables of Abstracts; thus, Abbey Holme (569; 2) is the 2d Sub-District of the Wigton District, No. 569.]

SUB-DISTRICT.	DISTRICT.	No.	SUB-DISTRICT.	DISTRICT.	No.	SUB-DISTRICT.	DISTRICT.	No.
A			B					
Abbey	Bath	326; 3	Ardleigh	Tendring	203; 5	Basford	Basford	438; 3
Abbey Holme	Wigton	569; 2	Ardley	Wakefield	503; 7	Basinstoke	Basinstoke	116; 1
Abbots Bromley	Uttoxeter	374; 2	Ardwick	Chorlton	471; 2	Bassingham	Newark	442; 2
Abbotsbury	Weymouth	274; 4	Arkolme	Lancaster	485; 7	Bathaston	Bath	326; 7
Abbots Langley	Watford	145; 4	Arncliffe	Settle	488; 5	Bathwick	Bath	326; 2
Aberdare	Merthyr Tydfil	582; 4	Arnold	Basford	438; 5	Batley	Dewsbury	502; 2
Aberdaron	Pwllheli	619; 3	Artillery	Whitechapel	22; 1	Battersea	Wandsworth	32; 2
Aberford	Tadcaster	514a; 1	Arundel	Worthing	90; 3	Battle	Battle	77; 3
Abergavenny	Abergavenny	578a; 3	Ashborne	Ashborne	447; 3	Battlefield	Atcham	359; 6
Abergele	St. Asaph	613; 2	Ashburton	Newton Abbot	283; 4	Bawdeswell	Mitford	242; 3
Abergwessin	Builth	599; 1	Ashby-de-la-Zouch	Ashby-de-la-Zouch	414; 3	Bawtry	Doncaster	510; 5
Aberystwith	Aberystwith	597; 2	Ashford	West Ashford	62; 2	Beaconsfield	Amersham	148; 5
Abingdon	Abingdon	123; 2	Ashley	Clifton	330; 2	Beaminstor	Beaminstor	277; 4
Abthorpe	Towcester	165; 1	Ashover	Chesterfield	448; 1	Beaumaris	Bangor	621; 1
Accrington	Haslingden	477; 5	Ashton-in-Makerfield	Wigan	465; 7	Beccles	Wangford	226; 2
Acton	Brentford	134; 5	Ashton Town	Ashton-under-Lyne	474; 2	Beckley	Rye	75; 2
Addingham	Skipton	489; 6	Askrigg	Askrigg	537; 1	Bedale	Bedale	535; 1
Alderbury	Atcham	359; 4	Aslackby	Bourn	422; 2	Bedford and Cardington	Bedford	179; 6
Albrighton	Shiffnal	357; 1	Aspull	Wigan	465; 2	Bedford and Kempston	Bedford	179; 5
Albury	Guildford	39; 3	Aston Clinton	Aylesbury	151; 3	Bedlington	Morpeth	558; 2
Alcester	Alcester	405; 2	Aswarby	Sleaford	426; 5	Bedminster	Bedminster	328; 1
Aldbrough	Richmond (Yrks.)	539; 4	Atcham	Atcham	359; 7	Begelly	Narberth	590; 6
Aldbrough	Skirlaugh	522; 3	Atcham	Atcham	359; 7	Beighton	Rotherham	509; 1
Aldeburgh	Plomesgate	224; 5	Atherstone	Atherstone	397; 1	Belbroughton	Bromsgrove	392; 2
Aldeby	Loddon	238; 1	Atherton	Leigh	467; 4	Belford	Belford	560; 1
Alderbury	Alderbury	263; 1	Attercliffe	Sheffield	508; 6	Belford George	St. George Hanover-sq.	3; 3
Alderley	Macclesfield	453; 8	Attleborough	Wayland	241; 1	Bellingham	Bellingham	557; 1
Aldgate	Whitechapel	22; 7	Audenshaw	Ashton-under-Lyne	474; 3	Belper	Belper	446; 3
Aldington	East Ashford	63; 1	Audley	Newcastle-under-Lyme	369; 3	Bennington	Boston	425; 2
Aldridge	Spilsby	430; 5	Aughton	Ormskirk	464; 2	Bennington	Newark	442; 4
Alford	Belper	446; 5	Axbridge	Axbridge	324; 4	Bentham	Settle	488; 1
Alfreton	Hexham	555; 3	Axminster	Axminster	279; 2	Bere Regis	Wareham	273; 4
Allendale	Pickering	530; 4	Aycliffe	Darlington	540; 2	Berkeley	Thornbury	332; 3
All Saints	Birmingham	394; 9	Aylesbury	Aylesbury	151; 2	Berkhampstead	Berkhampstead	147; 1
All Saints	Hastings	76; 2	Aylesford	Malling	55; 1	Berwick	Berwick	561; 2
All Saints	Maldon	202; 3				Berwick Street	St. James West-minster	6; 1
All Saints	Newcastle-on-Tyne	552; 4				Bettwsycoed	Llanrwst	614; 2
All Saints	Northampton	168; 2				Beverley	Beverley	518; 2
All Souls	Marylebone	7; 1	Bacton	Tunstead	230; 4	Bewdley	Kidderminster	384; 5
Almondsbury	Huddersfield	497; 7	Bainton	Driffield	523; 3	Bexhill	Battle	77; 1
Alnwick	Thornbury	332; 1	Bakewell	Bakewell	449; 1	Bexley	Dartford	50; 1
Alphington	Alnwick	559; 2	Bala	Bala	616; 1	Bibury	Northleach	341; 1
Alresford	St. Thomas	281; 8	Baldock	Hitchin	141; 1	Bicester	Bicester	159; 2
Alston	Alresford	113; 2	Balsham	Linton	188; 3	Bickerstaffe	Ormskirk	464; 1
Alston	Alston	564; 1	Bamptton	Tiverton	293; 6	Bideford	Bideford	297; 1
Alston	Preston	482; 4	Bampton	Witney	161; 2	Bidford	Alcester	405; 4
Altarnon	Launceston	301; 1	Banbury	Banbury	163; 4	Biggleswade	Biggleswade	180; 2
Alton	Alton	114; 1	Bangor	Bangor	621; 2	Billesdon	Billesdon	410; 1
Alton	Cheadle	373; 1	Banham	Guiltcross	240; 1	Billingshay	Sleaford	426; 1
Altrincham	Altrincham	454; 2	Banwell	Axbridge	324; 3	Billingshurst	Petworth	88; 1
Alverstoke	Alverstoke	97; 1	Barford	Bedford	179; 7	Billington	Blackburn	480; 1
Alverthorpe	Wakefield	503; 6	Barham	Bridge	64; 2	Bilston	Wolverhampton	379; 7
Ambleside	Kendal	575; 1	Barking Town	Romford	197; 3	Bilton	Bramham	514b; 3
Amersham	Amersham	148; 3	Barnbrough	Doncaster	510; 2	Binbrook	Louth	431; 3
Amesbury	Amesbury	262; 2	Barnmouth	Dolgelly	617; 2	Bingham	Bingham	443; 1
Amlwch	Anglesey	623; 4	Barnstaple	Stamford	421; 2	Bingley	Keighley	494; 1
Amphill	Amphill	181; 2	Barnstaple	Teesdale	543; 2	Binstead	Alton	114; 2
Amroth	Narberth	590; 3	Barnstaple	Barnstaple	295; 1	Birkenhead	Birkenhead	460b; 1
Amwell	Clerkenwell	15; 2	Barrow	Barrow-upon-Soar	416; 1	Birtle	Bury	469; 4
Ancoats	Manchester	473; 1	Barrowden	Uppingham	420; 3	Bishop Auckland	Auckland	542; 1
Andover	Andover	118; 3	Barton	Barton-upon-Irwell	470; 2	Bishops Cannings	Devizes	256; 1
Anston	Worksop	436; 3	Barton	Glanford Brigg	433; 3	Bishops Castle	Clun	353; 2
Antony	St. Germans	302; 1	Baschurch	Ellesmere	362; 4	Bishops Frome	Bromyard	350; 2
Appleby	East Ward	573; 1				Bishops Lydeard	Taunton	315; 5
Appleton Roebuck	Bramham	514b; 1				Bishopstow	Barnstaple	295; 6
Appleton-upon-Wisk	Northallerton	534; 1				Bishopstone	Wilton	265; 2

Table with 6 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Lists various sub-districts and districts with their corresponding numbers.

Table with 6 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Lists various sub-districts and districts with their corresponding numbers, including a section labeled 'E'.

Table with 6 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Includes sections for F, G, and H.

Table with 6 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Includes sections for I, K, and L.

Table with 9 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Includes entries for Llanllechid, Llannon, Llanrhaidr, etc.

Table with 9 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Includes entries for North Collingham, North Curry, North Elmham, etc.

Table with 6 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Lists various sub-districts and their corresponding districts and population numbers.

Table with 6 columns: SUB-DISTRICT, DISTRICT, No., SUB-DISTRICT, DISTRICT, No. Lists various sub-districts and their corresponding districts and population numbers, including a section for 'T' and 'U'.

SUB-DISTRICT.	DISTRICT.	No.	SUB-DISTRICT.	DISTRICT.	No.	SUB-DISTRICT.	DISTRICT.	No.
West Sheffield .	Sheffield	508; 1	Wimbledon .	Kingston	47; 1	Wootton Bassett	Cricklade	251; 1
West Sunderland .	Sunderland	549; 4	Wimborne .	Wimborne	271; 3	Wootton Wawen	Stratford-on-Avon	404; 5
West Worcester	Worcester	387; 1	Wincanton .	Wincanton	320; 3	Worfield	Bridgnorth	356; 3
West Wycombe	Wycombe	150; 3	Winchester .	Winchester	109; 3	Workington	Cockermouth	570; 3
West Wymer	Norwich	234; 5	Windsor .	Windsor	131; 2	Worksop	Worksop	436; 1
Wetheral	Carlisle	568; 1	Wing .	Leighton Buzzard	183; 2	Worlington	Mildenhall	216; 1
Wetherby	Wetherby	492c; 1	Wingham .	Eastry	71; 2	Worsbrough	Barnsley	505; 4
Weymouth .	Weymouth	274; 2	Winkleigh .	Torrington	296; 2	Worsley	Barton-upon-Irwell	470; 1
Whalley .	Clitheroe	479; 5	Winlaton .	Gateshead	551; 4	Worth	East Grinstead	82; 3
Wheatley .	Headington	157; 1	Winslow .	Winslow	152; 1	Worthys .	Winchester	109; 2
Whickham .	Gateshead	551; 3	Winterbourne	Amesbury	262; 3	Wortley .	Kirkstall	500a; 1
Whitby .	Whitby	531; 2	Winterton .	Glanford Brigg	433; 2	Wortley .	Wortley	506; 4
Whitchurch	Cardiff	581a; 1	Winwick .	Warrington	466; 2	Wotton-under-Edge	Dursley	339; 1
Whitchurch	Whitchurch (Salop)	363b; 1	Wirksworth .	Belper	446; 6	Wragby .	Horncastle	429; 1
Whitchurch	Whitchurch (Hants)	117; 1	Wisbech .	Wisbech	193; 2	Wray .	Lancaster	485; 5
Whitchurch	Bridport	278; 3	Witchampton	Wimborne	271; 2	Wrenbury .	Nantwich	455; 4
Whitchurch	Canonicorum		Witham .	Witham	206; 2	Wrexham .	Wrexham	611; 4
Whitechapel	Whitechapel	22; 5	Witheridge .	South Molton	294; 1	Writtle .	Chelmsford	200; 3
Whitechapel	Whitechapel	22; 4	Withern .	Louth	431; 1	Wrotham .	Malling	55; 3
Whitecross Street	St. Luke	16; 3	Withyham .	East Grinstead	82; 1	Wuerdle .	Rochdale	476; 8
Whitehaven	Whitehaven	571; 2	Witley .	Hambleton	42; 1	Wybunbury	Nantwich	458; 1
Whitford	Holywell	610; 1	Witney .	Martley	386; 2	Wye .	East Ashford	63; 3
Whitkirk .	Kirkstall	500a; 4	Witton .	Witney	161; 3	Wyke .	Westhampnett	91; 2
Whitley .	Pontefract	504a; 4	Wivelscombe	Blackburn	480; 7	Wymondham	Forehoe	235; 2
Whitmore .	Newcastle-under-Lyme	369; 1	Wivenhoe .	Wellington (Somers.)	314; 1			
Whitstable .	Blean	66; 3	Woburn .	Lexden	205; 1			
Whittlesey .	Whittlesey	192; 1	Woking .	Woburn	182; 1			
Whitwick .	Ashby-de-la-Zouch	414; 4	Wokingham	Guildford	39; 1			
Whitworth .	Rochdale	476; 10	Wolsingham	Wokingham	128; 1			
Whixley .	Great Ouseburn	492a; 2	Wolstanton .	Weardale	544; 3			
Wickford	Billericay	199; 3	Wolverhampton Eastern	Wolstanton	370; 1			
Wickhambrook	Risbridge	211; 2	Wolverhampton Western	Wolverhampton	379; 5			
Wickham Market	Plomesgate	224; 3	Wolverley .	Wolverhampton	379; 4			
Wigan	Wigan	465; 3	Wombourn .	Kidderminster	384; 2			
Wiggenhall .	Downham	247; 1	Wombridge .	Wolverhampton	379; 2			
Wigston .	Blaby	411; 1	Wombridge	Wellington (Salop)	365; 3			
Wigton .	Wigton	569; 1	Woodbridge and Wilford	Wellington	223; 3			
Willford .	Basford	438; 7	Woodbridge Out	Woodbridge	223; 4			
Willenhall .	Wolverhampton	379; 6	Woodbury .	St. Thomas	281; 3			
Willesden .	Hendon	135; 3	Woodchurch .	Wirral	460a; 3			
Willingham .	Chesterton	186; 1	Woodstock .	Woodstock	160; 2			
Willingham .	Gainsborough	434; 5	Woodton .	Loddon	238; 3			
Williton .	Williton	313a; 3	Wooler .	Glendale	562; 2			
Wilmslow .	Altrincham	454; 1	Woolwich Arsenal	Greenwich	35; 6			
Wilden .	Bradford (Yrks.)	499; 9	Woolwich Dock-yard	Greenwich	35; 5			
Wilton .	Wilton	265; 1						

Y

Yalding .	Maidstone	58; 1
Yapton .	Westhampnett	91; 3
Yarkhill .	Ledbury	346; 2
Yarm .	Stockton	541a; 1
Yarmouth	Yarmouth	228; 2
Yarmouth Northern	Yarmouth	228; 1
Yarmouth Southern	Yarmouth	228; 1
Yatton .	Bedminster	328; 3
Yeaton .	Wharfedale	493b; 1
Yealmpton .	Plympton St. Mary	286; 1
Yeovil .	Yeovil	319; 4
Yetminster .	Sherborne	276; 1
Yoxall .	Lichfield	377; 2
Yspsyty .	Llanrwst	614; 3
Ystradgumlais	Neath	584; 4
Ystradvelley	Neath	584; 3
Ystradyfodwg	Pontypridd	581b; 3

INDEX OF CERTAIN TOWNS.

TOWNS of which the Names differ from those of the District and Sub-district in which they are respectively situated.

NAME OF TOWN.	SUPERINTENDENT REGISTRAR'S DISTRICT.	SUB-DISTRICT.	Number of District and Sub-district.
Aberavon .	Neath .	Margam .	584; 1
Bacup .	Haslingden .	Newchurch .	477; 1
Barrow .	Rochdale .	Whitworth .	476; 10
Bedworth .	Ulverston .	Dalton .	486; 4
Blackpool .	Foleshill .	Foleshill .	399; 1
Bognor .	Fylde .	Poulton-le-Fylde	483; 3
Brandon .	Chichester .	South Bersted .	92; 3
Chatham .	Thetford .	Methwold .	249; 1
Chester .	Medway .	Rochester and Gillingham	54; 1, 2
Church (Lanc.)	Great Boughton .	Chester Castle .	459; 2
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