The Hygiene of the Home.

By A. J. Bacon.

(Continued from p. 314.)

VI. Sanitation—Infant Mortality—Epilogue.

Our friends the registered, certificated, or authorised plumbers would perhaps feel slighted if no reference were made to their important branch of usefulness in connection with our subject. In their case, however, stricture is hardly possible. Neglect in their craft entails other and more serious ills than mere debility and general pallor or lassitude, ills which the man in the street is quite cognisant of and will not endure. So their work is under the direct supervision of both architect and surveyor, not to mention the local authorities, medical officers of health, and others. The laws of the land provide that a landlord shall be compelled to keep his drains and sanitary fittings up to a certain standard of excellence. When he fails, the authorities have power to step in and do what is necessary for him and at his expense. Hence to-day we have all our sewers cut off from our dwellings; slops and dirty water have to enter them through gullies, open to the outside air; the drain-pipes themselves are laid on concrete foundations of prescribed thickness, to prevent their fracture through settlement of the ground, and may not be covered in until after inspection. Soil-pipes are all ventilated by tubes running above the roof, and foul fittings, such as pan-closets, stone sinks (which, however clean they might be kept, had always a nauseous odour, owing to the porosity of their material), D traps, &c., have at last become merely unpleasant memories. Even enclosed baths and closets are doomed, including their leaden safes, which, though they were all drained, were nothing less than evaporating pans of filthy water and worse *within the house*. Acts of Parliament have stepped between us and these horrors, for pests, plagues, and epidemics are things too fearful to be wantonly courted or even risked. Therefore, as our allotted space is coming to an end, we may safely leave this important branch of our subject to our worthy plumbers and sanitary engineers, satisfied that the authorities, who watch and hedge them round with endless restrictions, will see to it that things are as they should be.

Would that the same care were paid to the salubrity of the air within our dwellings. Looking casually over a book, written in 1859, entitled "The Physiology of Common Life," and written by G. H. Lewes (published in Edinburgh), the writer came across the following startling chronicle (Vol. I., p. 373), so startling, indeed, that he may be excused for giving every detail respecting chapter and verse. Here is the textual copy:—

"The deaths of new born infants between the ages of one and fifteen days, which in a Dublin Lying-in Hospital amounted in the course of four years to 2,944 out of 7,650 births, were suddenly reduced to only 279 deaths during the same period *after a new system of ventilation had been adopted.* Thus more than 2,500 deaths, or one in every three, must be attributed *to the previous bad ventilation.*"

This record refers to a period since which two generations have added vast stores to our knowledge about these and other matters, and the reader will no doubt think that we have altered all this. We have done much, but even our last returns are far from being pleasant reading and afford much food for reflection. Here is an extract from the last of the decennial tables issued by the Registrar-General, who kindly afforded every facility at Somerset House for their inspection. They refer to the records for England and Wales for the years 1881—1890, and show the number of survivals out of 1,000,000 births at the end of each of the first five years, after ten, and also twenty years, and, as a matter of interest, the age is shown when half the original number have passed over to the great majority. For the sake of comparison, the corresponding figures for the previous decade are also given, but it will be noticed that then the "mixed sexes" column was omitted:—

	1871 to 1880.		1881 to 1890.		
Age.	Survivals in 1,000,000 Males.	Survivals in 1,000,000 Females.	Survivals in 1,000,000 Males.	Survivals in 1,000,000 Females.	Survivals in 1,000,000 of both Sexes.
0	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
1	841,417	871,262	838,964	868,874	853,645
2	790,201	820,480	790,891	823,072	806,686
3	763,737	793,359	772,046	804,142	787,799
4	746,587	775,427	760,167	791,973	775,778
5	734,068	762,622	751,494	783,244	767,078
10	708,990	738,382	733,477	766,151	749,514
20	680,033	707,949	712,555	744,321	728,147

47 years, 504,836; 52 years, 504,188, 51 years, 507,398; 56 years, 505,583; 54 years, 500,210; 48 years, 495,761; 53 years, 495,645; 52 years, 496,827; 57 years, 494,343.

When comparing the figures for the two decades, we find a distinct improvement at every stage, and that the mean age of the surviving moiety has advanced as much as four years, but the loss of life in early infancy still remains startling. Confining ourselves solely to the study of the last column, we find the losses during the first five years are as follows:—

During the first year,	146,355	or 14·63	per cent.
,, second ,,	46,959	or 4·70	,,
,, third ,,	18,887	or 1·89	,,
,, fourth ,,	12,021	or 1·20	,,
,, fifth ,,	8,700	or 0·87	,,

During the following five years the loss amounts to 17,564 altogether, which is equivalent to an annual waste of 0·35 per cent. only, and during the

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