

at a sitting. Haemorrhage has so far caused no great trouble in his 165 cases, but, as would be expected, tuberculous pleurisy has often supervened—occurring in 22 cases (13.3%). In 11 of these the infection matured to form frank pus; a staphylococcal empyema formed in one other case. Total or partial pleural obliteration occurred in 40%. In spite of this high incidence of complications the method deserves serious study, and we therefore recommend the book to specialists in thoracic disease.

R. C. BROCK.

HEALTH EDUCATION

Health Facts for College Students. A Textbook of Individual and Community Health. By Maude Lee Etheredge, M.D., D.P.H. Fifth edition. (Pp. 439; 75 figures. 12s. 6d.) Philadelphia and London: W. B. Saunders Company. 1947.

Dr. Etheredge states in her preface that "college students are naturally interested in the facts of physiology and hygiene." That her book has reached its fifth edition testifies to the truth of this statement. The writer sets out first to persuade the university student that health is essential for the full enjoyment of life and then that active steps must be taken to achieve and maintain health. The thirteen chapters on elementary physiology are excellent and constitute a useful text for sixth-formers or the intelligent layman. Those on food and its relation to health, the locomotor system, and the origins of faulty posture are particularly well done. The author then considers some of the special emotional problems of the university student in chapters on "Friendship, Love, and the Preparation for Marriage" and "Marriage, the Home and Parenthood." She discusses these problems in a straightforward way, and her treatment of them carries conviction on account of the high moral values on which she clearly bases it. The remaining ten chapters cover public health, genetics, allergy, infective agents, and cancer, and the book ends with a useful chapter on first aid.

The scope of this work is wide, but on the whole the author considers the various topics adequately. She might have devoted more space to discussing mental health and less to the signs and symptoms of organic disease. Her account of heart disease, for example, receives three pages, but that of psycho-neurosis, hysteria, and neurasthenia only one. The style is on the whole clear and concise, though occasional exhortations and slogans, of which the following are examples, may slightly irritate English readers: "Try these study thoughts: A wanting to learn goes nine-tenths of the way," and "Community pride is a great hill climber."

The great need for more health education in the U.S.A. as in this country is indicated by some of the facts about drug addiction and venereal disease that the author gives. We are told, for example, that there are 750,000 addicts to alcohol in the U.S.A., and it is estimated that 20% of all mental patients are alcoholics. The problem of drug addiction is not confined to adults, however, for the book mentions a New York clinic for children addicted to marihuana. In the chapter on venereal disease the author writes, "Nearly seven million of our people have syphilis."

Considerable attention has been paid to the problems of student health in Britain recently, and a report on this subject prepared by a subcommittee of the Association of University Teachers has included in its recommendations that "a voluntary course of instruction in personal and social hygiene open to all members of the university" should be provided. *Health Facts for College Students*, with modifications necessitated by the differences between our two countries, would provide a useful basis for such a course. The work would also be instructive to teachers and others responsible for the training and education of young people. There is an extensive bibliography.

JOHN PEMBERTON.

The first new edition since the beginning of the war of *Diseases of the Nervous System*, by Dr. W. Russell Brain, has now appeared, published by the Oxford University Press at 37s. 6d. There has long been a demand for this book, and Dr. Russell Brain has brought it up to date by adding new sections and altering old to include the changes in knowledge and thought that the war years have brought about. The main body of the text needs no introduction and no further recommendation.

BOOKS RECEIVED

[Review is not precluded by notice here of books recently received]

Neurological Complications After Spinal Anaesthesia. By Gunnar Thorsén. (Pp. 272. No price.) Stockholm: Ab Nordiska Bokhandeln. 1947.

A monograph with extensive bibliography; in English.

Surgical Disorders of the Chest. By J. K. Donaldson, B.S., M.D., F.A.C.S. 2nd ed. (Pp. 485. 42s.) London: Henry Kimpton. 1947.

A short account intended for the general surgeon, physician, and student.

The Postnatal Development of the Human Cerebral Cortex. By J. LeRoy Conel. Vol. III. (Pp. 148. 70s.) London: Geoffrey Cumberlege. 1947.

An account of the cortex of the three-months-old infant.

Diagnostic Agents. By T. D. Whittet, Ph.C., D.B.A. (Pp. 32. 2s. 6d.) London: The Pharmaceutical Press. 1947.

A summarized account for pharmacists of the preparation and use of certain diagnostic agents.

Pathological Histology. By Robertson F. Ogilvie, M.D., F.R.C.P.Ed., F.R.S.Ed. 3rd ed. (Pp. 459. 37s. 6d.) Edinburgh: E. and S. Livingstone. 1947.

A textbook of morbid histology for the student and graduate.

Housing and the Family. By M. J. Elsas. (Pp. 135. 8s. 6d.) London: Meridan Books. 1947.

An inquiry into housing carried out in 1944-5.

Medical Addenda. By various authors. (Pp. 158. 10s. 6d.) New York: The Commonwealth Fund. 1947.

Essays on the doctor, psychosomatic and social medicine, convalescence, and chronic disease.

Medicine, Psychiatry and their Borderland. By Alexander Frank, M.D. (Pp. 238. 21s.) London: Shakespeare Head Press. 1947.

Essays on various themes in medicine.

A Textbook on Pathology of Labor, the Puerperium and the Newborn. By Charles O. McCormick, A.B., M.D., F.A.C.S. 2nd ed. (Pp. 514. 42s.) London: Henry Kimpton. 1947.

A textbook intended primarily for the medical student.

Safety Rules for Use in Chemical Works. Part I, Model Rules. 3rd ed. (Pp. 71. 7s. 6d. cash with order.) London: The Association of British Chemical Manufacturers. 1947.

A manual summarizing the rules, with indexes and blank pages for additions.

Catalogue of Medical Films. Compiled by the Royal Society of Medicine and the Scientific Film Association. (Pp. 125. 7s. 6d.; 6s. to members of Aslib or the S.F.A.) London: Aslib. 1948.

About 800 titles are listed, and details of 200 given.

Psychiatric Research. By Cecil K. Drinker *et al.* (Pp. 113. 11s. 6d.) London: Geoffrey Cumberlege. 1947.

Includes papers on biochemical problems of psychiatry and on psychical seizures.

Infant Nutrition. By P. C. Jeans, A.B., M.D., and W. McK. Marriott, B.S., M.D. 4th ed (Pp. 516. 32s. 6d.) London: Henry Kimpton. 1947.

A textbook of infant feeding for students and practitioners.

The Doctor and the Difficult Child. By William Moodie, M.D., F.R.C.P., D.P.M. (Pp. 231. 11s. 6d.) London: Geoffrey Cumberlege. 1947.

An account of disturbances of personality and behaviour in children

Breathing in Irrespirable Atmospheres. By Sir Robert H. Davis, F.R.S.A. (Pp. 386. 25s.) London: The Saint Catherine Press. 1947.

The physiology of breathing in irrespirable atmospheres and the apparatus required.

Pathology of Tumours. By R. A. Willis, D.Sc., M.D., F.R.C.P. (Pp. 992. 63s.) London: Butterworth. 1948.

A textbook intended primarily for pathologists and research workers.

Medical Notes in Parliament

THE PLEBISCITE

In the House of Commons on Jan. 29 Mr. TIFFANY asked the Minister of Health whether he was aware of the nature of the plebiscite in which doctors were being asked to participate in regard to the National Health Service Act, and if he had any statement to make.

The Minister of Health, Mr. BEVAN, replied: I understand that each doctor has to sign his name on the voting paper, with his address and professional particulars, and the Association conducting the ballot is itself engaged in a campaign to induce the doctor to vote one way. This House may well feel that this procedure is a long way removed from the secret ballot and the workings of democracy as we know it in this country and that it is bound to cast doubt on the validity of the result.

Mr. SOMERVILLE HASTINGS: Will my right honourable friend take steps to see that all the doctors concerned have knowledge of what he has just told the House?

Mr. BEVAN: The doctors, of course, will be informed when they receive the plebiscite form itself, because there they will see that it is not a secret vote but an open ballot.

Mr. BAIRD: As the doctors seem to be taking the law into their own hands in this matter, does my right honourable friend not think that this House should have an opportunity of expressing its views on this attempted blackmail?

Mr. BEVAN: This is a question which ought properly to be addressed either to the Prime Minister or to the Leader of the House because it involves procedure and giving an opportunity for debate. So far as I am concerned, the Government's case is so strong that I should welcome an opportunity of deploying it.

Mr. CHURCHILL: There is no compulsion, of course, on any medical man to take any notice of this paper unless he likes?

Mr. BEVAN: None at all, as I understand it, but of course open votes of this description always give rise to the possibility of intimidation.

Mr. CHURCHILL: Intimidation?

Mr. BEVAN: It was because open votes of this sort were removed from our constitutional practice that the secret ballot was established. Fear of intimidation is the reason for the secret ballot.

Col. ELLIOT: Is that the reason why—

HON. MEMBERS: Order.

Dr. STROSS: In view of the great importance of this matter to everyone, may I ask the Leader of the House in his presence whether he will not now give us an early date so that we shall have an opportunity of debating the matter?

Mr. SPEAKER: I must point out here that there must be responsibility of a Minister, and a Minister is not responsible for the form in which this ballot has gone out. Therefore a debate is rather awkward at the present moment.

Col. STODDART-SCOTT: Why should signing a ballot form invalidate a vote? In the university elections you sign your ballot form. Any doctor, whether he is a member of the B.M.A. or not, and I myself am not, has no need to vote unless he wishes, and if he does not wish to sign his ballot form he need not do so. Therefore I do not see that it makes any difference whether you sign it or not.

Mr. SIDNEY SILVERMAN: Is there not all the difference in the world between signing a ballot paper in a university election, where the university takes no part in the election and is indifferent to the result, and signing a ballot paper to be sent to an Association which has already taken sides, indicated a preference, and hopes for a result?

Mr. SPEAKER: That would seem to be a little hypothetical. The point has been made, and I should think we had better leave it at that now.

Mr. GALLACHER: May I put a point to the Minister?

Mr. SPEAKER: My decision was that we should carry on with the next business.

Mr. TIFFANY: On a point of Order, Mr. Speaker, may I point out that I put down this Question on the Order Paper and have had no opportunity of putting a supplementary?

Mr. SPEAKER: If the honourable gentleman wishes to put a supplementary, seeing he put the question down, I am prepared to allow it.

Mr. TIFFANY: May I ask the Minister whether this form of taking a plebiscite is not reminiscent of pre-war Germany, and should we not place the same value on the results of the election as we did upon those?

Later the Lord President of the Council was asked by Mr. T. REID if in view of these questions and answers he would arrange a day for discussion of the doctors' ballot.

Mr. HERBERT MORRISON said that if a debate took place it would have to be on a somewhat wider issue than the plebiscite. It might cover outstanding issues in dispute between the Minister of Health and the British Medical Association. The Government would not be unsympathetic towards a debate as early as possible.

Health and Rations

Mr. SHINWELL on Jan. 27 stated that the change of environment of Army recruits, and the regular meals, graduated exercise, and comparative open-air life, stimulated the young recruit so that he made full use of the energy provided by his rations and any additional food available from N.A.A.F.I. and other sources. The initial result of training was a reduction in weight owing to loss of fat. This was followed by a gain in weight due to the improved mechanical efficiency of the body with a consequent saving in energy expenditure, and the diversion of the energy value of the diet to the building up of the heavier muscle tissues instead of fat. The end-result in six weeks on the average was a gain in weight of four pounds.

On the following day Mr. A. V. ALEXANDER announced changes in the rations of the Army, Navy, and R.A.F., to bring Service rations broadly into line with the food available to the civilian labourer. The amount of meat and offal would be reduced by 12½ oz. a week, bacon and ham by 4½ oz. a week, and cheese by 1½ oz. a week. By way of compensation, and to make good the existing deficiencies in those items, the amount of fats would be increased by 2½ oz. a week, and sugar by 3½ oz. a week. The net calorie reduction that would result from these adjustments would fall to be met partly by an increase of bread and partly by additional purchases of fish, vegetables, and such other unrationed items as were available. These adjustments applied only to the Forces stationed at home. The calorie value of the ration would remain at 2,900 for men and 2,600 for women.

Dr. EDITH SUMMERSKILL said on the same day that no reductions in the scale of rations for the Forces at home or abroad had been made during 1947.

Alien Doctors

Mr. HASTINGS on Jan. 29 asked how soon any of the doctors covered by Section 3 of the Medical Practitioners and Pharmacists Act could hope to secure permission to practise in this country.

Mr. BEVAN replied that applications for registration under the Section were a matter for the General Medical Council. Certain preliminary work had been necessary before formal applications could be invited. This was nearly complete.

Permission to Publish

On Jan. 29 Col. STODDART-SCOTT inquired if the doctors and dentists who entered the National Health Service would have complete freedom to publish articles and books without having to seek permission. He asked Mr. Bevan for an assurance that there would be no attempt to suppress freedom of publication.

Mr. BEVAN replied that so far as he was concerned there would be no restriction whatsoever in the National Health Service on the publication of scientific or clinical writings.

Practice after the Appointed Day

Sir HENRY MORRIS-JONES on Jan. 27 asked what would be the position on July 5 of panel practitioners who found themselves unable to take up service under the National Health Act but who intended to continue to practise.

Mr. BEVAN said that these practitioners would be able, if they wished, to take part in the new National Health Service. The old National Health Insurance Service would be superseded by the new arrangements at that date, but a doctor could confine himself entirely to private practice.

Universities and Colleges

ROYAL FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW

Dr. James W. Affleck, F.R.F.P.S., will deliver the James Watson Prize Lecture in the Hall of the Faculty (242, St. Vincent Street, Glasgow) on Wednesday, Feb. 11, at 5 p.m. The title of the lecture is "Administrative and Clinical Problems of Chronic Sickness and the Diseases of Later Life." Medical practitioners are invited to attend.

SOCIETIES AND LECTURES

Monday

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, W.—Feb. 9, 8.30 p.m. "*Folic Acid*," Prof. J. F. Wilkinson. "*The Differential Diagnosis of Tuberculous Cervical Adenitis*," Mr. Hamilton Bailey. "*Potassium Thiocyanate in Hypertension*," Dr. Geoffrey Evans.

ROYAL SOCIETY OF ARTS, John Adam Street, Adelphi, London, W.C.—Feb. 9, 4.30 p.m. "*Fats in the Life of the Nation*," Cantor Lecture by Sir Jack Drummond, D.Sc., F.R.S.

Tuesday

CHELSEA CLINICAL SOCIETY.—At South Kensington Hotel, 47, Queen's Gate Terrace, London, S.W., Feb. 10, 7 for 7.30 p.m. "*Some Difficulties in the Science of Crime Detection*." Discussion to be opened by Dr. C. Keith Simpson.

INSTITUTE OF DERMATOLOGY, 5, Lisle Street, Leicester Square, London, W.C.—Feb. 10, 5 p.m. "*Diseases of the Nails*," by Dr. H. Corsi.

ROYAL COLLEGE OF PHYSICIANS OF LONDON, Pall Mall East, S.W.—Feb. 10, 5 p.m. "*The Public Health Laboratory Service*," Milroy Lecture by Prof. G. S. Wilson.

UNIVERSITY COLLEGE LONDON: DEPARTMENT OF PHARMACOLOGY, Gower Street, W.C.—Feb. 10, 5.15 p.m. "*The Pharmacological Chemistry of Enzymes (i)*," Mr. F. Bergel.

Wednesday

SOCIETY OF CHEMICAL INDUSTRY: FOOD GROUP.—At Chemical Society's Rooms, Burlington House, Piccadilly, London, W., Feb. 11, 6.30 p.m. "*Some Effects of Fumigants upon Foods*," Drs. A. B. P. Page and O. F. Lubatti.

Thursday

HUNTERIAN SOCIETY.—At Grosvenor House, Park Lane, London, W., Feb. 12. *Annual dinner*.

INSTITUTE OF DERMATOLOGY, 5, Lisle Street, Leicester Square, London, W.C.—Feb. 12, 5 p.m. "*Psychosomatic Dermatoses*," by Dr. W. J. O'Donovan.

ROYAL COLLEGE OF PHYSICIANS OF LONDON, Pall Mall East, S.W.—Feb. 12, 5 p.m. "*The Public Health Laboratory Service*," Milroy Lecture by Prof. G. S. Wilson.

ROYAL PHOTOGRAPHIC SOCIETY OF GREAT BRITAIN (SCIENTIFIC AND TECHNICAL GROUP), 16, Prince's Gate London, S.W.—Feb. 12, 7 p.m. "*The Importance of Illumination in Photomicrography*," R. McV. Weston, M.A., F.R.P.S.

ST. GEORGE'S HOSPITAL MEDICAL SCHOOL, Hyde Park Corner, S.W.—Feb. 12, 4.30 p.m. *Psychiatric lecture-demonstration*, Dr. D. Curran.

Friday

BIOCHEMICAL SOCIETY.—At Westminster Hospital Medical School, 17, Horseferry Road, London, S.W., Feb. 13, 2 p.m. *Communications and demonstrations*.

LEEDS AND WEST RIDING MEDICO-CHIRURGICAL SOCIETY.—At Leeds General Infirmary, Feb. 13, 8.30 p.m. "*The Home, the Family Doctor and the Hospital in Relation to Child Care*," Prof. W. S. Craig.

LONDON CHEST HOSPITAL, Victoria Park, E.—Feb. 13, 5 p.m. "*Acute Respiratory Infections*," Dr. R. Sleigh Johnson.

ROYAL MEDICAL SOCIETY, 7, Melbourne Place, Edinburgh.—Feb. 13, 8 p.m. "*Princess Charlotte and the Uterine Haemorrhage of Pregnancy*," Address by Prof. R. J. Kellar.

UNIVERSITY COLLEGE LONDON: DEPARTMENT OF PHYSIOLOGY, Gower Street, W.C.—Feb. 13, 5 p.m. "*The Evolution of the Surgeon*," Dr. E. A. Underwood.

Saturday

KENT PAEDIATRIC SOCIETY.—At Farnborough County Hospital, Feb. 14. Discussion: "*Tuberculosis in Childhood*," Section I, 11 a.m. "*Symptomatology and Diagnosis*," Dr. D. G. Madigan; "*Orthopaedic*," Mr. J. H. Mayer. Section II (open to non-medical persons interested in the subject), 2 p.m. "*Epidemiology and Prevention*," Dr. R. Cruickshank.

BIRTHS, MARRIAGES, AND DEATHS

BIRTH

Shaw.—On Jan. 25, 1948, at the Christopher Nursing Home, Wigan, to Doris May (née Annett), wife of George Hubert Shaw, M.B., Ch.B., a daughter.

DEATHS

Bray.—On Jan. 26, 1948, Frederick Richard Bray, M.R.C.S., L.R.C.P., of Hagg Lane, Sandygate, Sheffield, aged 79.

Hill.—On Jan. 25, 1948, at Oxford, William Hugh Hill, M.D.Ed.

Howley.—On Jan. 28, 1948, at Sunningdale, Henry Edward Howley, L.R.C.P.&S.I. and L.M., Lieutenant-Colonel, R.A.M.C., retired.

James.—On Jan. 29, 1948, at Southampton Borough Hospital, Henry Walter James, M.R.C.S., L.R.C.P.

Lunham.—On Jan. 28, 1948, in London, John Lumsden Lunham, M.B., B.Ch., F.R.C.S.I., Lieutenant-Colonel, I.M.S., retired, aged 69.

Prichard.—At Menai Bridge, J. Llewelyn Prichard, M.D., D.P.H., late M.O.H. and School Medical Officer, Aberdeen.

Steele.—On Jan. 6, 1948, at Geranium Cottage, Reigate, Florence Harriett Steele, aged 90.

White.—On Jan. 27, 1948, Ernest White, L.D.S., M.R.C.S., L.R.C.P., of 17, Chesterford Gardens, Hampstead, N.W., and 86, Brook Street, London, W.

INFECTIOUS DISEASES AND VITAL STATISTICS

We print below a summary of Infectious Diseases and Vital Statistics in the British Isles during the week ended Jan. 17.

Figures of Principal Notifiable Diseases for the week and those for the corresponding week last year, for: (a) England and Wales (London included). (b) London (administrative county). (c) Scotland. (d) Eire. (e) Northern Ireland.

Figures of Births and Deaths, and of Deaths recorded under each infectious disease, are for: (a) The 126 great towns in England and Wales (including London). (b) London (administrative county). (c) The 16 principal towns in Scotland. (d) The 13 principal towns in Eire. (e) The 10 principal towns in Northern Ireland.

A dash — denotes no cases; a blank space denotes disease not notifiable or no return available.

Disease	1948					1947 (Corresponding Week)				
	(a)	(b)	(c)	(d)	(e)	(a)	(b)	(c)	(d)	(e)
Cerebrospinal fever ..	47	3	13	2	—	58	6	31	2	1
Deaths ..	2	—	—	—	—	2	—	—	—	—
Diphtheria ..	203	21	59	19	9	256	18	78	40	10
Deaths ..	5	1	1	—	—	5	—	1	—	—
Dysentery ..	96	4	37	2	—	72	4	17	1	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Encephalitis lethargica, acute ..	1	—	2	—	—	1	—	1	—	—
Deaths ..	—	1	—	—	—	—	1	—	—	—
Erysipelas ..	—	—	55	12	7	—	—	48	5	3
Deaths ..	—	—	—	—	—	—	—	—	—	—
Infective enteritis or diarrhoea under 2 years ..	—	—	—	28	—	—	—	—	39	—
Deaths ..	49	5	15	6	2	96	13	14	8	—
Measles* ..	3,304	240	899	137	16	11,087	378	276	61	890
Deaths† ..	—	—	—	—	—	15	—	1	—	3
Ophthalmia neonatorum ..	39	5	13	1	—	69	6	21	—	2
Deaths ..	—	—	—	—	—	—	—	—	—	—
Paratyphoid fever ..	4	—	1 (B)	—	—	6	—	2 (B)	—	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Pneumonia, influenzal ..	787	67	5	10	8	1,223	73	53	13	6
Deaths (from influenza)‡ ..	13	1	4	2	2	85	13	23	—	—
Pneumonia, primary ..	—	—	253	38	—	—	—	413	30	—
Deaths ..	468	50	—	9	9	—	94	—	—	14
Polio-encephalitis, acute ..	2	—	—	—	—	1	1	—	—	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Poliomyelitis, acute ..	47	3	6	2	—	9	2	—	15	—
Deaths§ ..	5	1	—	—	—	—	—	—	—	—
Puerperal fever ..	—	3	11	—	—	—	2	12	—	1
Deaths ..	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia ..	102	5	13	—	2	153	9	31	1	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Relapsing fever ..	—	—	—	—	—	—	—	—	—	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Scarlet fever ..	1,754	109	377	24	49	1,226	106	276	22	29
Deaths† ..	—	—	—	—	—	—	—	—	—	—
Smallpox ..	—	—	—	—	—	—	—	—	—	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Typhoid fever ..	2	—	1	4	—	4	—	2	4	—
Deaths ..	—	—	—	—	—	1	—	—	—	—
Typhus fever ..	—	—	—	—	—	—	—	—	—	—
Deaths ..	—	—	—	—	—	—	—	—	—	—
Whooping-cough* ..	2,343	160	46	49	7	2,192	158	488	107	62
Deaths ..	6	1	—	—	—	18	7	7	1	2
Deaths (0-1 year) ..	415	55	66	27	12	622	81	72	39	9
Infant mortality rate (per 1,000 live births) ..	—	—	—	—	—	—	—	—	—	—
Deaths (excluding stillbirths) ..	5,248	850	617	198	124	6,579	1056	785	277	155
Annual death rate (per 1,000 persons living) ..	—	—	12.8	12.4	—	—	17.3	—	—	—
Live births ..	8,510	1397	920	412	285	10,628	1721	1260	404	269
Annual rate per 1,000 persons living ..	—	—	18.5	25.8	—	—	25.3	—	—	—
Stillbirths ..	252	29	25	—	—	291	32	29	—	—
Rate per 1,000 total births (including stillborn) ..	—	—	26	—	—	—	22	—	—	—

* Measles and whooping-cough are not notifiable in Scotland, and the returns are therefore an approximation only.

† Deaths from measles and scarlet fever for England and Wales, London (administrative county), will no longer be published.

‡ Includes primary form for England and Wales, London (administrative county), and Northern Ireland.

§ The number of deaths from poliomyelitis and polio-encephalitis for England and Wales, London (administrative county), are combined.

|| Includes puerperal fever for England and Wales and Eire.