

FIFTIETH ANNUAL REPORT

OF THE

Department of Health

OF THE

STATE OF NEW JERSEY

1927



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Department of Health of the State of New Jersey

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HENRY B. COSTILL, M. D., Director.

The offices of the Department are in the State House,
Trenton, N. J.

TRENTON, N. J., June 30th, 1927.

To His Excellency A. Harry Moore, Governor of New Jersey:

SIR—I am transmitting herewith the Fiftieth Annual Report of the Department of Health of the State of New Jersey for the year ending June 30th, 1927, in accordance with Chapter 288 of the Laws of 1915.

Very respectfully,

H. B. COSTILL,
Director.

Report of the Director

Several notable advances in public health work in New Jersey were made during the year. A State-wide movement was inaugurated to further the adoption of diphtheria immunization, which was begun so successfully by the State Department of Health. A rational treatment for infectious cases of gonorrhoea in women was introduced to the physicians of the State. A method for the direct microscopic examination of milk to detect bovine diseases and insanitary dairy conditions was made practical for field use. The regulation, requiring two negative cultures of both stool and urine as a prerequisite to release of typhoid fever patients from isolation was placed before the local health officials. The oyster industry received the support of the State Department of Health in solving some of its difficult sanitary problems. Many new communities have adopted the continuous child hygiene program under State supervision. A most successful school for employed health workers, was offered jointly by the State University and Department of Health.

These are a few of the achievements of the year. The bureau reports, which follow, summarize the important work for which each division of the Department is responsible; therefore, it is necessary to allude here only to a few outstanding activities of the Department.

The diphtheria prevention program, inaugurated by the Bureau of Local Health Administration, included assistance to local boards of health and education by supplying speakers, motion picture films, and circulars, and by performing the Shick test and supervising the administration of the immunizing treatments. The importance of this missionary work is not easily estimated, for it has introduced this important health protection in communities where little or no health work had ever been attempted in the past—but the demonstration method is slow and diphtheria mortality still unnecessarily high. To further the introduction of diphtheria prophylactic measures, a State-wide conference was called under the authority of His Excellency, the Governor. At this conference representatives of the State Medical Society, Health Officers' Association, Sanitary Association, and most of the social, fraternal, and civic organizations of the State were present, and machinery was set in motion for the conduct of a State-wide campaign which it is hoped will make diphtheria as rare a disease in New Jersey as is smallpox.

A limiting factor in preventing the spread of gonorrhoea has been the hitherto unsuccessful attempts to treat the disease in women. When women sources of gonorrhoea have been named by the patients whom they infected and have been brought in for examination and medical treatment by the local health officials, failure to diagnose or treat adequately such women has been the common result. The special home treatments given to and administered by the patient and weekly treatments administered by the physician, when combined with adequate supervision of the patient by local health officials, have been proved effective. The method has been advocated not only for the use of physicians treating such cases for local boards of health, but for the medical profession generally.

An activity which assumes a new importance, now that effective treatment of gonorrhoea in the female has been achieved, is the disposition of infected prostitutes detected in houses of prostitution. Case reports from practicing physicians of the State have given us the location of numerous brothels in which some infected prostitute has transmitted the disease to others. As a check upon the information received from practicing physi-

cians, the Department has employed investigators to determine whether or not reputed places do, in fact, carry on the business of public prostitution. Information secured through these channels is transmitted to the State, county or municipal police officials, depending upon the location of the brothel. It is a pleasure to report that with very few exceptions the law enforcing officials have been quick to respond to our request that the possible dissemination of venereal diseases through such channels be prevented by them. It is gratifying to record, as well, that this part of the program of venereal disease prevention has been endorsed by the present Governor as it was by his predecessor.

The dairy inspection service carried on by the Bureau of Food and Drugs has been greatly strengthened by the introduction of a method for the direct microscopic examination of the milk as it is delivered by the producer to the distributor. When microscopic examinations made in the field detect abnormal types or great numbers of bacteria, an immediate dairy inspection is made to find the diseased cows or the insanitary dairy practice presumably responsible for the contamination. This method has been successful for demonstrating forcibly to the dairymen conditions or methods which are responsible for unwholesome or unclean milk.

The enactment of a law (Chapter 233) prohibiting the sale of all milk or cream which has not been pasteurized, except that produced by tuberculin tested cows, should prove a great incentive for the improving of milk supplies. This is an important protective measure against the transmission of bovine tuberculosis through milk, but it must be emphasized, however, that the tuberculin testing of cows and the sale of raw milk therefrom does not protect against other diseases such as scarlet fever and diphtheria, which may be introduced into the milk by the handler and thus spread to the consumer. The pasteurization of all milk except certified is recommended.

The ever-present menace of typhoid fever is brought freshly to our minds by the regrettable epidemic at Montreal, where about 4,500 cases and 450 deaths were reported. With protected municipal water supplies and adequately pasteurized milk, the most fertile source for the spread of the disease is the human

carrier who infects others by direct contact. It is estimated that about five of every hundred cases of typhoid fever develop into carriers of the disease. The importance of the recommendation requiring release cultures of both stools and urine before isolation is terminated is apparent. The State Department of Health, through its bacteriological laboratories, has assisted the local boards of health in carrying out the provisions of the regulation, and every effort has been made to impress upon the local health officials the importance of enforcing this regulation faithfully.

The oyster industry, which is becoming an increasingly important one in New Jersey, has had to face the regulations enacted by the Federal Department of Agriculture regarding the storage of shellfish in water of less salinity than that in which they were grown. The Department of Health, through its Bureau of Chemistry, has attempted to reconcile the peculiar needs of the New Jersey oysterman and the regulations of the Federal bureaus. Oysters grown in the Delaware Bay contain small quantities of silt when they are removed from the growing beds. Although the silt is not hazardous to health, it is objected to by the consumer and may be removed by allowing the oysters to cleanse themselves in clear water. The practice heretofore has been to "float" the oysters in river water. But oysters so floated take in additional quantities of water, which constitutes a violation of the Federal regulations. The Bureau assisted the growers by a sanitary investigation of an area which it is hoped will be clear enough to allow the oysters to cleanse themselves and yet be sufficiently salty to prevent the taking on of demonstrable quantities of added water.

Community demonstrations to stimulate interest in the continuous child hygiene program continue to be the major function of the Bureau of Child Hygiene. The demonstrations are carried on by nurses in the various communities, usually for one year. At the end of the demonstration period, the community is asked to take over the salary of the nurse employed for this work. There are now ninety nurses under State supervision, seventy-three of which are paid by the municipalities, nineteen by the State Department of Health, and seven out of State and

municipal funds. Demonstrations are being conducted in five additional municipalities. The examination of preschool children in order to detect remedial defects before the child enters school has been emphasized in the baby-keep-well stations conducted as a part of the continuous child hygiene program.

No system of public health administration can be superior to the officials who administer it. A defect of health administration—particularly in suburban areas—has been the employment of inadequately trained health officials. Although universities in or near New Jersey offer higher education for health officials, there has been a dearth of educational opportunities for the persons lacking the preliminary qualifications or lacking the time to take such courses. To supply this need, a course in public health administration was prepared for the State Department of Health and offered jointly by the State Department and State University at the Rutgers summer school.

This course, extending over two summer sessions, is held on two days each week for the six weeks of each session. Offered in this way it has been practical for students to attend, commuting to the University each day from as far north as Franklin, in Sussex County, and as far south as Bridgeton, in Cumberland, in order to take advantage of the opportunities offered by the Department and State University. The course is eminently practical and has been shown by experience to be suited to the needs of the great majority of students who have attended it. That it has been enthusiastically received by them is attested in letters received from the students.

As the course is practical and as it is appreciated by the students, there is every reason to believe that it can be continued successfully for years to come, and that through its agency there will gradually be built up in the State a body of health officials, trained in the principles of public health administration, who have been imbued with the policies of the State Department of Health and who will cooperate with the Department because of the sympathetic interest thus established. There can be no greater force for the advancement of health administration in the State than such an interested, trained enthusiastic body of workers.

It is appropriate at this time to express my appreciation of the whole-hearted support of the many members of the staff of the Department, whose loyalty and common interest have done so much for the success of the program of the Department of Health.

Report of Bureau of Administration

CHARLES J. MERRELL, CHIEF.

The terms of Henry Spence, M. D., of Jersey City, and J. O. McDonald, M. D., of Trenton, members of the Department, expired on July 1st, 1927. Dr. McDonald was re-appointed and S. A. Cosgrove, M. D., of Jersey City, was appointed in place of Dr. Spence, who had served as a member of the Department during the past 12 years.

Clyde Potts, C. E., of Morristown, was re-elected Secretary at the reorganization of the Department on July 5th, 1927, and Mr. Charles I. Lafferty, of Atlantic City, was re-elected Vice-President. Mr. D. C. Bowen, who has served the Department as Chief of the Bureau of Local Health Administration for a number of years, was appointed Director of Health in place of Dr. H. B. Costill, of Trenton, who was appointed to fill the unexpired term of Dr. J. C. Price, deceased, beginning his services on October 1st, 1924.

APPROPRIATIONS.

The sum of \$362,190 was appropriated by the Legislature for the work of the Department during the year beginning July 1st, 1927. An appropriation of \$333,780 was granted for the year beginning July 1st, 1926. The additional amount is due largely to the increased appropriation granted for the work of the Bureau of Child Hygiene, the appropriation by the State being increased from \$65,000 to \$94,000. It was believed last year that no further funds from the Federal Government would be available for maternal and infant welfare work, but the provisions of the Sheppard-Towner law were again extended and funds from this source will be available this year.

While funds were appropriated for increases in the salaries of a number of the employees of the Department, requests for money for the employment of new employees was not granted, and the work of the Department will doubtless be hampered along several lines during the year on account of this fact.

BOARD OF EXAMINERS AND EXAMINATIONS.

Andrew J. McGookin, Edwin H. Coward, M. D., James J. Hagan, Raymond S. Patterson and A. I. Goehrig were reappointed on March 1st, 1927, to serve as Members of the Board of Examiners of Health Officers and Sanitary Inspectors for the coming year. The Board, reorganizing for the year, elected Edwin H. Coward, M. D., of Atlantic City, as President, and A. I. Goehrig, of the State Department of Health, Secretary. Four examinations were held during the year ending June 30th, 1927, on the regular scheduled dates, these dates being on the last Fridays of January, April, July and October.

One hundred and thirty-six applicants were examined and licenses were issued to 56 who secured a general average of 70 per cent or more. Licenses were issued as follows: Health Officers, 12; Sanitary Inspectors of the First Class, 20; Sanitary Inspectors of the Second Class, 1; Plumbing Inspectors, 17; Food and Drug Inspectors, 3; Milk Inspectors, 2; Meat Inspectors, 1. Nearly all of the applications received were for examination as Health Officer, Sanitary Inspector of the First Class or Plumbing Inspector. In the case of these three classes, applicants were examined and licenses issued as follows: Health Officers—examined 18, licensed 12; Sanitary Inspectors of the First Class—examined 66, licensed 20; Plumbing Inspectors—examined 38, licensed 17.

While a large percentage of those applying for examination as Health Officer succeeded in passing, less than one-half of those applying as Plumbing Inspector passed the examination and less than one-third of the applicants for license to serve as Sanitary Inspector of the first class obtained the necessary average to pass the examination. This is probably due largely to the fact that very few take the examination for Health Offi-

cers' license without preparation, while in many cases those applying as Sanitary or Plumbing Inspector take the examination without any or at least very little adequate preparation.

During the year 38 applicants for examination for license to serve as Sewage Plant Operator and 11 applicants for license to serve as Water Plant Operator were received. Examinations for these licenses were conducted by the Bureau of Engineering of the State Department of Health at the same time and place of the holding of the examinations by the Board of Examiners for Health Officers and Inspectors.

The summer course for Health Officials is still being continued at New Brunswick, the Department cooperating with Rutgers College in giving the course. While the number of students is not large, several of those taking the course have expressed their appreciation of this opportunity for study and feel that they are being greatly benefited thereby.

ANNUAL HEALTH CONFERENCES.

The Seventeenth Annual Conference of State and Local Health Officials was held on February 18th, 1927, in the State House, Trenton. The first subject on the afternoon program, entitled "Some Problems of Health Administration," was discussed by Dr. Henry B. Costill, Director of the State Department of Health. Following this a very interesting paper was read by C. J. Vaux, M. D., Director of the Department of Health of Pittsburgh, Pa., on the subject of "How Pittsburgh Quarantines Pneumonia Cases." Dr. Vaux is now deceased. This paper, which provoked considerable discussion, was followed by a Pre-School Clinic Demonstration given by Dr. Julius Levy, Consultant to the Bureau of Child Hygiene of the State Department of Health.

In the evening, addresses were given by Charles Browne, M. D., Ex-Congressman of the Fourth District of New Jersey on "The Mortality in Professional Courtesy and Some Other Fateful Social Customs," and by H. O. Reik, M. D., Secretary of the New Jersey State Medical Society, on the subject of "Progress in the Health Examination Campaign." Motion pictures were shown at the beginning and end of the evening session.

On Saturday morning, February 19th, the annual meeting of the Health Officers of New Jersey took place, at which time A. S. Fell, M. D., Health Officer of Trenton, was elected President, and Frank J. Osborne, Health Officer of East Orange, Vice-President. Eugene H. Sullivan, Health Officer of Nutley, was re-elected Secretary, and N. J. R. Chandler, Health Officer of Plainfield, was re-elected Treasurer.

The Fifty-second Annual Meeting of the New Jersey Sanitary Association was held in Asbury Park on December 3d and 4th, 1926. At this meeting Chester G. Wigley, C. E., formerly Chief of the Bureau of Engineering of the State Department of Health, was elected President, and a committee designated as the Special Committee on Re-Organization, consisting of seven members, one of whom is Dr. H. B. Costill, Director of the State Department of Health, was appointed. This committee has held a number of meetings during the year and will present, through the Executive Council, at the Annual Meeting next December, a proposed revised draft of the present constitution and by-laws of the Association, which will, if adopted, provide for the re-organization of the Association along several new lines and for the employment of an Executive Secretary.

SANITARY CODE AND REGULATIONS.

Following a number of conferences and public hearings the Department at its meeting on December 7th, 1926, adopted an amendment to its Sanitary Code to prohibit bathing in potable waters of the State. The following law, however, passed at the 1927 session of the Legislature, Chapter 130 of the Laws of 1927, nullifies the provisions of the amendment of the Code above mentioned:

An Act to permit bathing and swimming in the fresh waters of this State.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. It shall be lawful to bathe or swim in any of the fresh waters of this State: *provided*, that in so doing no trespass be committed.

2. This act shall take effect immediately.

Passed March 23, 1927.

The question of the adoption of a Chapter of the State Sanitary Code to prohibit cross connections, by-passes and auxiliary intakes in connection with potable water supply systems is now under consideration by the Department. A public hearing in reference to the same was given by the Department on June 7th, 1927, at which time representatives of the Manufacturers' Association of New Jersey and various industrial plants in the State petitioned the Department to allow the use of a special check valve in such cases, rather than to require the elimination of such cross-connections.

Rules and regulations governing the handling of shellfish, amending the rules adopted in 1912, together with rules and regulations governing the operation of oyster shucking houses and the sale of shucked oysters, further amending rules adopted August 22d, 1916, and amended September 19th, 1924, were adopted by the Department on February 1st, 1927.

On account of the length of these rules and regulations they are not printed in this report, but copies of the same may be obtained by communicating with the office of the Department in Trenton.

At the meeting of the Department on June 7th, the following regulation was added to the present Milk Pasteurizing Regulations of the Department:

Rule 35: All plants, where pasteurized milk or cream is bottled, shall be provided with mechanical bottle-fillers and cappers for use in filling and capping bottles of milk. Caps shall be obtained in sanitary tubes and kept therein until used.

CEMETERIES AND MAUSOLEUMS.

Mackay and Mackay, Attorneys for Charles E. Walsh, presented application to the Department for reversal of the decision of the Board of Health and Township Committee of Midland Township, Bergen County, in refusing to grant consent to Mr. Walsh to establish and maintain a cemetery in said township. Protests against the granting of permission for establishment of said cemetery were received by the Department from officials of Midland Township and from many residents of the township. The Department, at its meeting on June 7th, 1927, fixed July 5th

as the date for the holding of a public hearing on the application in accordance with requirements of the law, the hearing to be held in the State House, Trenton.

Application was received from the Fairmount Cemetery Association of Newark for approval of plans and permission to construct a mausoleum in the Fairmount Cemetery in the City of Newark. Copy of resolution adopted by the Department of Health of the City of Newark, granting consent for the construction of a mausoleum was also filed with the Department. As the plans were found to comply with the provisions of Section 2 of Chapter 233 of the Laws of 1916, they were approved by the Department and permission was granted to construct the mausoleum, as requested.

A similar application was received from the New York and New Jersey Mausoleum Company, of North Bergen, Hudson County, for permission to build an addition to the mausoleum of said company located in North Bergen Township. The plans submitted were found to comply with the provisions of the law and they were likewise approved and permission given to build said extension in accordance with the application.

TUBERCULOSIS HOSPITALS.

A hearing was given by the Department in Paterson on November 17th, 1926, relative to the application of the Board of Freeholders of Passaic County for permission to establish and maintain a County Tuberculosis Hospital to be located at Preakness, Passaic County, just outside of the City of Paterson. Approval of plans for the hospital buildings, as presented, was also requested. Report in reference to said hearing was submitted at a meeting of the Department on December 7th, 1926, and the following preamble and resolution adopted:

WHEREAS, The Board of Freeholders of Passaic County has made application to the Department of Health of the State of New Jersey in accordance with the provisions of Chapter 66 of the Laws of 1910 for permission to establish a county tuberculosis hospital at Preakness in Passaic County;

WHEREAS, A public hearing has been given by the Department in accordance with the provisions of said act at which those favoring and opposing the granting of the application were given full

opportunity to present their statements and the plans of the hospital buildings which it is proposed to erect at said site were submitted and explained, and

WHEREAS, In the opinion of the members of the Department the site selected is a suitable one for the location of a tuberculosis hospital and plans submitted are acceptable to the Department; therefore be it

Resolved, That the application of the Board of Freeholders of Passaic County for permission to establish and maintain a county tuberculosis hospital at Preakness in Passaic County be granted and the plans for hospital buildings to be erected at this site be approved by this Department.

Application having been received by the Department from Rest Haven, Inc., Newark, for permission to establish and maintain a tuberculosis sanatorium on the Emeline Ayres' Farm on Schooley's Mountain, near Hackettstown, a public hearing relative to said application was given by the Department to interested persons in Hackettstown on December 1st, 1926. A number of objections were presented at the hearing largely on account of the fact that the proposed site is located on a slope of ground above and adjacent to one of the reservoirs of the Water Company of Hackettstown. It was reported at the meeting of the Department on December 7th, that no plans for the hospital or sanatorium had been received by the Department and no information had been submitted by the applicant as to where it is proposed to locate the sewage disposal plant or what provisions will be made for the disposal of sewage. It was therefore on motion voted that the application be laid over until plans are filed with the Department and definite information is received as to proposed methods of disposing of sewage from the institution. No plans or information on the subject referred to have since been received by the Department and therefore no further action has been taken in the case.

A letter was received from A. W. Eames, General Manager of the Somerset Crystal Springs Farm, Inc., of Bernardsville, making application on behalf of said organization for permission to establish and maintain a tuberculosis sanatorium to be located in Bernards Township, about 2 miles from Bernardsville and 5 miles from Morristown. A hearing concerning said application was given by the Department to interested persons on the prem-

ises in question on March 25th, 1927. Protests were submitted at the hearing from officials of the Borough of Bernardsville, Bernards Township, and Harding Township (a portion of the property being located in Harding Township). Residents of these districts also appeared to protest, together with a representative of the Bernardsville Water Company. The supply of water distributed by said Company is drawn from a stream which passes within 125 to 150 feet of the house which it is proposed to convert into a tuberculosis sanatorium. Report in reference to the hearing was presented at a meeting of the Department on April 5th, 1927, and after consideration of the facts, the application was unanimously denied.

LEGISLATION.

The following bills of interest to health officials were introduced at the last session of the Legislature:

Senate Bill No. 38, appropriating \$5,000 to the State Bureau of Vital Statistics for keeping records of births, marriages, etc. This bill, which was introduced by those interested in having old records forwarded to the State Bureau for proper filing and tabulating, failed to become a law.

Senate Bill No. 113, providing for sterilization of insane and feeble-minded persons. This bill failed to pass.

Senate Bill No. 145, validating ordinances and codes of local boards of health not published as required by law. This bill became a law, Chapter 329.

Senate Bill No. 162, making lawful bathing or swimming in fresh waters of the State, provided no trespass be permitted. This bill became a law, Chapter 155.

Senate Bill No. 164, extending jurisdiction of County Mosquito Extermination Commission to fresh water swamps; co-ordination of work through State Agricultural Experiment Station; research on mosquito control; conferring on Mosquito Commission certain powers of local boards of health. This bill became a law, Chapter 143.

Senate Bill No. 166, regulating embalming and funeral directing and controlling issuance of licenses. Establishes Board of

Embalmers and Funeral Directors of five members to be appointed by the Governor. This bill became a law, Chapter 156.

Senate Bill No. 193, providing for appraisal of cattle previous to making tuberculin tests and which shall be made by areas. This bill became a law, Chapter 91.

Senate Bill No. 206, providing for joint construction and maintenance of municipal sewage disposal plants. This bill failed to pass.

Senate Joint Resolution No. 3, purposing to prevent continuance of dumping of garbage at sea by New York City. This resolution passed both houses of the Legislature and was approved by the Governor.

Senate Concurrent Resolution No. 5, amends constitution, giving Legislature power to establish water supply districts, sewerage districts, drainage districts and meadow reclamation districts; to alter and change the boundaries of any such district or districts so established; to provide for the election of commissions for such districts and to prescribe the organization, jurisdiction, powers and duties of such commissions. This resolution passed both houses of the Legislature and was filed with the Secretary of State.

Assembly Bill No. 47, doing away with dual license fees and dual health inspection of a theatre located in two municipalities. This bill became a law, Chapter 183.

Assembly Bill No. 78, increasing contributions to pension fund of employees of boards of health. This bill became a law, Chapter 186.

Assembly Bill, No. 91, preventing owners of land from being deprived of the use thereof without compensation, for the benefit of either public or private water companies. This bill failed to pass.

Assembly Bill, No. 143, providing pensions for sanitary inspectors and other health officers in second-class cities, after twenty-five years' service. This bill failed to pass.

Assembly Bill, No. 160, broadening the definition of "a tenement house" as now defined by law: "A house occupied by more than three families would be a tenement house." This bill finally passed both houses of the Legislature after much opposition by

those interested in the proper enforcement of the tenement house law and was vetoed by the Governor. The bill was passed over the Governor's veto in both houses of the Legislature and became a law, Chapter 337.

Assembly Bill No. 164, providing for licensing, vaccination and muzzling of dogs. This bill, as in the case of similar bills introduced in previous years, was strenuously opposed by representatives of the S. P. C. A. and failed to become a law.

Assembly Bill No. 244, amending the act concerning tubercular animals; where an animal is unjustly condemned, the owner is recompensed. This bill failed to pass.

Assembly Bill No. 261, providing that the roof of any mausoleum erected shall be constructed of natural stone to safeguard sanitary conditions. This bill failed to become a law.

Assembly Bill No. 267, increasing penalty for the removal of shellfish from condemned water, from \$25 to \$100. This bill which was sponsored by the State Department of Health became a law, Chapter 212.

Assembly Bill No. 323, giving State Board of Health power to inspect public restaurants, soda fountains, and other eating places, to prevent sale of food unfit for human consumption. This bill failed to become a law. The State Department of Health, however, already has ample power under existing laws to inspect such places.

Assembly Bill No. 347, removing bonds issued for the construction of plants for the incineration of garbage by joint municipal action, from the joint debt of such municipalities, and places such plants on the same basis as joint sewers. This bill became a law, Chapter 229.

Assembly Bill No. 368, prohibiting the intermarriage of negroes and whites. Provides a penalty of not less than \$1,000 nor more than \$5,000 or imprisonment of not less than one year nor more than five years for violation, either by the marrying person or the persons who become married. This bill failed to become a law.

Assembly Bill No. 369, regulating the sale of milk with a view of protecting children from bovine tuberculosis. This bill became a law, Chapter 233.

Assembly Bill No. 390, permitting Boards of Freeholders to erect hospitals for the treatment of contagious diseases, one hundred feet from highway or inhabited buildings instead of 250 feet. This bill was withdrawn.

Assembly Bill No. 435, placing under control of Board of Health of State, construction of mausoleums and vaults for burial of the dead. This bill failed to pass. Laws now in force provide that mausoleums must be constructed according to certain specifications and that plans for the same must be approved by the State Department of Health.

Report of the Bureau of Local Health Administration

D. C. BOWEN, CHIEF.

There was no change in the functions and duties of the Bureau of Local Health Administration during the fiscal year ending June 30th, 1927. The personnel of the Bureau at the close of the year consisted of the Bureau Chief, two epidemiologists and six clerks. One of the important features of the Bureau's work for the year was the increased amount of time and effort given to diphtheria prevention work. Special reference will be made to this subject later in the report.

EPIDEMICS AND OUTBREAKS OF COMMUNICABLE DISEASES.

Typhoid Fever.—During the year the Bureau was called upon to investigate ten outbreaks of typhoid fever. The only one of these which included more than five cases occurred among residents of a seashore resort and among persons who had visited that place during the period immediately preceding their illnesses. Epidemiologic investigations conducted by the Bureau indicated that a majority of the ninety-five cases included in this outbreak were infected through eating clams which had been unlawfully taken from polluted waters.

Coincident with better supervision of public water supplies, and the extension of public sewerage systems, together with increased use of pasteurized milk in this State, the number of major outbreaks of typhoid fever which occur has decreased year by year. This has resulted in more attention being given to the investigation of smaller outbreaks and single cases of this disease. Such intensive studies have indicated that typhoid carriers are responsible for a greater part of the residual typhoid fever cases than was formerly suspected. One of the functions of the Bureau, therefore, has been to see that local boards of health keep typhoid

carriers, when identified, under supervision to insure that they do not engage in handling food products intended for sale or distribution and that they conduct themselves in such a manner as not to endanger the public health.

Scarlet Fever.—Four outbreaks of scarlet fever were investigated during the year. The largest of these occurred in Washington Borough and Washington Township, Warren County, during the month of May. One hundred and ninety-nine cases were reported over a nine-day period. On the third day of the outbreak at the request of the local officials, an epidemiological investigation was begun by the Bureau which soon established the fact that raw milk distributed by a local dealer was the vector of infection. The sale of milk by this dealer was temporarily prohibited pending the installation of a pasteurizing plant after which the order was withdrawn. Five days after this prohibition order was issued the outbreak terminated. Further investigation to determine the source of infection indicated that a recently employed dairy worker on one of the eight dairies from which the distributor obtained his supply of milk was the original source of infection. This worker came to the dairy from a household in which there was a case of scarlet fever and while employed as a milker developed a nasal affection which is believed to have followed a mild unrecognized attack of this disease.

This outbreak was a concrete illustration of the danger of transmitting infection through raw milk supplies and emphasizes the desirability of requiring the pasteurization of all market milk as a safeguard against outbreaks of communicable disease, the causative agent of which is known to be transmitted in this manner. It further illustrates the inefficiency of local health administration in the rural sections of our State. Had the case of scarlet fever to which the dairy worker was exposed been under supervision of an efficient health officer, he would not have been permitted to leave the premises and seek employment on a dairy. Such conditions are likely to prevail until some radical change in the system of local health administration is made in the smaller municipalities and townships of the State.

Three of the other four outbreaks of scarlet fever investigated by the Bureau occurred in institutions, *i. e.*, seven cases at the State Home for Girls at Trenton, six cases at the Morris County Children's Home at Parsippany, and three cases at the Borden-town Military Academy. At these institutions the inmates were given the Dick test and those who were shown by the test to be susceptible to scarlet fever were given immunizing treatments with scarlet fever toxin. This method seems especially well adapted to control outbreaks of scarlet fever which occur in institutions.

Diphtheria.—Assistance of the Bureau was requested in two outbreaks of diphtheria during the year. One of these occurred in an institution, and prompt isolation of the cases and carriers followed by administration of toxin-antitoxin to susceptibles as shown by the Schick test effectively terminated the outbreak.

Acute Enteritis.—On two occasions during the year the Bureau was requested to investigate outbreaks of acute intestinal disorder. The larger outbreak included sixty-seven cases among persons who attended a church supper. Epidemiological investigation indicated that the causative agent of the illness was contained in chicken meat. Hand-picked, moist chicken meat which had been passed through a meat grinder, packed in a large pan, and heated slightly in an oven prior to serving had apparently afforded a favorable opportunity for the rapid growth of the bacteria presumably responsible for the illness among persons who ate the meat.

Outbreaks of typhoid fever and other intestinal disturbances occur annually among patrons of group or community meals. Two types of food have frequently been found to be the vectors of infection in such outbreaks. First, foods served in the raw state, such as shellfish, or those, like salads, in which only part of their ingredients are thoroughly cooked; and second, cooked foods which have been freely handled during preparation for the table and which have not been reheated to a sterilizing temperature before serving. In fact, in a number of instances it has been found that such foods have been subjected to temperatures usually employed in incubators rather than those that would result in sterilization. The remedy appears to be the elimination from the

menu of foods which must be prepared by many hands and which are of a moist nature, unless adequate equipment is available to sterilize them immediately before service.

Laboratory Specimens.—In conjunction with epidemiological work, representatives of the Bureau collected during the year a total of 308 specimens for laboratory examination.

Communicable Diseases on Dairy Premises.—During the year the Department received reports directly from physicians, as required by Regulation 4, Chapter VI of the State Sanitary Code, of seventy cases of communicable diseases on dairy premises. These cases occurred on fifty-nine premises which were located in forty municipalities or townships in thirteen counties of the State. The distribution of the cases by disease was as follows: scarlet fever, forty-six; diphtheria, sixteen; tuberculosis, five, and typhoid fever, three. On fifty-one of the fifty-nine premises upon which these cases occurred, local health officials instituted measures designed to prevent the transmission of infection through milk. On the eight remaining premises, owing to the fact that the local board of health was not prepared to exercise adequate supervision, representatives of this Bureau directed the establishment of such measures. On only eleven premises was it found necessary to temporarily prohibit the sale of milk.

DIPHTHERIA PREVENTION WORK.

Eleven years ago the Department, through the Bureau of Local Health Administration began to advocate and use the Schick test and immunization of susceptibles with toxin-antitoxin as a diphtheria preventive measure. Since that time the application of this measure has gradually increased until during the past fiscal year this branch of the Bureau's work claimed a sufficient amount of time to make it rank as one of the important features of the year's activity.

Among the ways in which assistance was furnished to local health officials were the following: first, by supplying speakers to give talks on the subject of immunization accompanied by the showing of a moving picture; second, by furnishing circulars informing parents of the value of immunization; and third, by per-

forming Schick tests, reading the results, and supervising the administration of toxin-antitoxin in a number of the smaller municipalities and township of the State in which local health authorities were not equipped to do this work, and requested such assistance. In addition, numerous letters asking for information and advice on this subject were answered.

During the year representatives of the Bureau gave twenty-two public talks on diphtheria prevention and showed the moving picture film on twelve occasions. The film was also loaned to local health and school authorities for showing without a speaker eighteen times. It is estimated that approximately 15,000 persons attended the meetings at which the film was shown.

Owing to its limited personnel, the Bureau was unable to comply with all requests received for field assistance in performing Schick tests, interpreting the results and administering toxin-antitoxin. However, such aid was given during the year to boards of health and education in eleven incorporated municipalities and ten townships, four of which exceeded 5,000 in population. The Bureau also conducted diphtheria immunization work in seven institutions. A total of 6,846 school children, 91 preschool children, and 931 adults were given Schick tests and the results read, while 938 school children and 433 preschool children were given the Park test or began immunizing treatments without preliminary test. The total number of persons who received a complete course of three injections of toxin-antitoxin was 5,094. The health departments and boards of education in many of the larger municipalities of the State carried out diphtheria preventive programs during the year without assistance from the State Department of Health. In addition, a number of physicians have doubtless given immunizing treatments in their private practice. The number of children in this State to whom toxin-antitoxin has been administered should, therefore, soon reach a proportion sufficient to make the effects of the work evident by a marked decrease in diphtheria morbidity and mortality rates. While it is true that to yield the maximum results, diphtheria preventive treatments should be given to children shortly after they reach the age of six months, nevertheless it is believed that at present the conduct of this work

in the schools is necessary as a demonstration of its efficacy, simplicity and absence of harmful effects which will ultimately do much to lead parents to have their children immunized in early life.

SANITARY SURVEYS AND INVESTIGATIONS.

Forty-five special investigations or sanitary inspections, other than those concerned with outbreaks of communicable diseases, were made by the Bureau. Included in these investigations were inspections of twenty-six summer camps located in nine counties. Twenty of these camps had not been previously inspected while six had been surveyed in other years. Following both original inspections and reinspections, letters were addressed to the organizations by which the camps were conducted notifying them of any violations of the State Sanitary Code which were found. The attention of the local boards of health of the municipalities in which the camps were located was also called to such violations and to their duty of enforcing the regulations of the Code.

Each year there is a considerable increase in the number of summer camps established in the mountain, lake and seashore sections of New Jersey. While there is a growing tendency among the organizations which conduct camps in this State to improve sanitary conditions and observe health regulations, in some instances the change from urban to rural life seems to be accompanied by a disregard of the principles of sanitation. As stated in previous reports, owing to limited personnel the State Department of Health has been unable to comply with all requests which have been received for inspection of summer camps. Although under the Regulations of Chapter X of the State Sanitary Code such inspection is a duty of local boards of health, many such boards, especially in the rural sections of the State where most of the camps are located, are unprepared to carry on this work.

Among the surveys and inspections made by the Bureau other than those concerned with camps, were a survey of the methods of garbage and rubbish disposal at a group of seashore resorts, a survey of the shores of Spring Cove, Lake Hopatcong and a reinspection of privies and cesspools along the shores of Culver's Lake.

CORRESPONDENCE.

The duties of this Bureau include cooperation with local health officials in the enforcement of the public health laws and regulations of the State Sanitary Code. In fulfilling this duty it is necessary for the Bureau, owing to its limited personnel, to rely on correspondence in many cases that could be more satisfactorily handled by sending a representative to confer with the local health officials who request advice and personal assistance. The already voluminous correspondence with local health officials carried on by the Bureau has rapidly increased during the past few years as the result of citizens' complaints against alleged insanitary conditions that local boards of health have failed to abate. This correspondence deals with many and diversified health problems, the handling of which calls for an intimate knowledge of public health laws and procedures.

MORBIDITY AND MORTALITY REPORTS FOR THE CALENDAR YEAR 1926.

The number of reports of cases of communicable diseases received from local boards of health and tabulated by the Bureau of Local Health Administration during the calendar 1926 was 87,441. This figure is 33,403 in excess of the number reported in 1925. This increase is accounted for by the unusual prevalence of measles during 1926, a total of 45,913 cases having been recorded.

The records for 1926 show that marked reductions from the 1925 figures took place in the case rates of poliomyelitis, scarlet fever, smallpox, typhoid fever, and whooping cough. There was a slight reduction in the diphtheria and malaria rates while chickenpox, influenza, measles and pneumonia showed considerably higher rates. The tuberculosis rate was slightly higher than in 1925.

Diphtheria.—The diphtheria morbidity and mortality rates for 1926 were the lowest ever recorded in the State. The number of reported cases was 4,002 and the recorded deaths 317, giving a case rate of 112.09 and death rate of 8.87 per 100,000 population. There has been a constant yearly decline in the diphtheria

case and death rates each year since 1921. During this period, however, the indicated fatality rate has remained about the same, averaging 7.76 per cent.

Scarlet Fever.—The number of reported cases decreased from 8,603 in 1925, to 7,271 in 1926. The corresponding case rates were 245.35 and 203.66 per 100,000 population. The number of deaths recorded in 1926 was 78, and the death rate was 2.18. In 1925 the number of recorded deaths was 66 and the death rate 1.88. The indicated fatality rate for 1926 was 1.07, slightly higher than the 1925 rate of 0.76.

Typhoid Fever.—Six hundred and sixty-nine cases of typhoid fever were reported during 1926, a decrease of 104 cases from the 1925 figure. The case rate for 1926 was 18.73 per 100,000 population, which closely approached the lowest rate recorded for the State which was 18.34 in 1923. The death rate for 1926 was 2.71, which with a single exception (1924) is the lowest on record. The indicated fatality rate for 1926 was 14.49. Such a high fatality rate may be taken as an indication that cases of typhoid are not completely reported.

Smallpox.—The number of reported cases of smallpox decreased from 189 in 1925 to 14 in 1926, the corresponding case rates being 5.39 and 0.39 per 100,000 population. While 48 deaths from smallpox occurred in 1925, there were no fatalities in 1926. Histories of the 14 cases reported in 1926 shows that eleven of them occurred in persons who had never been successfully vaccinated. The remaining three were in persons who had been successfully vaccinated more than twenty years prior to their attack.

Measles.—This disease was more prevalent than in any year since it was made reportable in 1918. The number of cases reported was 45,913, giving an unusually high case rate of 1,286.02 per 100,000 population. The number of deaths recorded in 1926 was 410, giving a death rate of 11.48 per 100,000. This high death rate made measles rank fourth highest for the year among the reportable diseases as a cause of death. Reportable diseases with higher death rates were tuberculosis, influenza and pneumonia.

Poliomyelitis.—Only 58 cases of acute anterior poliomyelitis were reported during 1926, the case rate being 1.62 per 100,000. The latter is the lowest case rate for this disease since 1920. Nineteen deaths were recorded in 1926, the death rate being 0.53. The indicated fatality rate was 32.75.

Tuberculosis.—The number of case reports increased from 4,984 in 1925 to 5,371 in 1926, while the number of deaths increased from 2,907 to 3,093. The case rate in 1926 was 150.44 per 100,000 population, the highest recorded since 1923. The death rate for 1926 was 86.63 against 82.90 in 1925. The indicated fatality rate for 1926 was 57.58, which is practically the same as the average annual rate for the past five years. This high fatality rate would indicate that tuberculosis continues to be the most incompletely reported communicable disease.

Whooping Cough.—The number of reported cases decreased from 7,929 in 1925 to 5,162 in 1926. The 1925 case rate was 226.12, while the 1926 rate was 144.58. The latter is the lowest annual case rate for this disease since 1919. The number of deaths recorded in 1926 was 175, a death rate of 4.90 per 100,000 population. This is the lowest death rate since 1919. The indicated fatality rate has remained almost the same during the past five years. In 1926 it was 3.39.

Standard morbidity and mortality tables showing the number of cases and deaths from reportable communicable diseases by months, by age groups and sex, and also tables showing the morbidity rates per 1,000 population, and indicated fatality rates for such diseases by counties and for the State as a whole are appended to this report.

REPORTED CASES OF PNEUMONIA IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

Table with columns for AGE GROUPS, Total, and months (Jan-Dec). Rows include Under 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65 years and over, and Age not stated.

REPORTED CASES AND DEATHS FROM PNEUMONIA IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

Table with columns for AGE GROUPS, Male Cases, Female Cases, Total Cases, Male Deaths, Female Deaths, Total Deaths. Rows include Under 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65 years and over, and Age not stated.

REPORTED CASES OF POLIOMYELITIS IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

Table with columns for AGE GROUPS, Total, and months (Jan-Dec). Rows include Under 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65 years and over, and Age not stated.

REPORTED CASES AND DEATHS FROM POLIOMYELITIS IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

Table with columns for AGE GROUPS, Male Cases, Female Cases, Total Cases, Male Deaths, Female Deaths, Total Deaths. Rows include Under 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65 years and over, and Age not stated.

REPORTED CASES OF SCARLET FEVER IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

Table with columns for AGE GROUPS, Total, and months (Jan-Dec). Rows include Under 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65 years and over, and Age not stated.

REPORTED CASES AND DEATHS FROM SCARLET FEVER IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

Table with columns for AGE GROUPS, Male Cases, Female Cases, Total Cases, Male Deaths, Female Deaths, Total Deaths. Rows include Under 1 year, 1-4 years, 5-9 years, 10-14 years, 15-19 years, 20-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65 years and over, and Age not stated.

REPORTED CASES OF SMALLPOX IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

AGE GROUPS.	NUMBER OF CASES												
	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Under 1 year,	0	0	0	0	0	0	0	0	0	0	0	0	0
1 year,	1	0	0	1	0	0	0	0	0	0	0	0	0
2 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
3 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
4 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
Under 5 years,	1	0	0	1	0	0	0	0	0	0	0	0	0
5 to 9 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
10 to 14 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
15 to 19 years,	2	0	0	2	0	0	0	0	0	0	0	0	0
20 to 24 years,	4	2	0	0	0	0	0	1	1	0	0	0	0
25 to 34 years,	2	0	0	0	0	1	1	0	0	0	0	0	0
35 to 44 years,	1	0	0	1	0	0	0	0	0	0	0	0	0
45 to 54 years,	4	0	0	2	0	2	0	0	0	0	0	0	0
55 to 64 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
65 years and over,	0	0	0	0	0	0	0	0	0	0	0	0	0
Age not stated,	0	0	0	0	0	0	0	0	0	0	0	0	0
Total,	14	2	0	5	1	0	3	2	4	0	0	0	0

REPORTED CASES AND DEATHS FROM SMALLPOX IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

AGE GROUPS.	Male		Female		Total	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Under 1 year,	0	0	0	0	0	0
1 year,	1	0	0	0	1	0
2 years,	0	0	0	0	0	0
3 years,	0	0	0	0	0	0
4 years,	0	0	0	0	0	0
Under 5 years,	1	0	0	0	1	0
5 to 9 years,	0	0	0	0	0	0
10 to 14 years,	0	0	0	0	0	0
15 to 19 years,	2	0	0	0	2	0
20 to 24 years,	4	0	0	0	4	0
25 to 34 years,	1	0	1	0	2	0
35 to 44 years,	1	0	0	0	1	0
45 to 54 years,	4	0	0	0	4	0
55 to 64 years,	0	0	0	0	0	0
65 years and over,	0	0	0	0	0	0
Age not stated,	0	0	0	0	0	0
Total,	13	0	1	0	14	0

REPORTED CASES OF TUBERCULOSIS IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

AGE GROUPS.	NUMBER OF CASES												
	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Under 1 year,	39	4	1	3	5	2	3	4	4	6	0	5	3
1 year,	48	3	2	3	8	7	4	6	1	2	1	3	2
2 years,	41	2	3	4	2	7	3	7	4	4	2	1	2
3 years,	35	3	3	2	5	4	0	1	6	2	2	0	1
4 years,	36	1	1	6	4	5	5	1	5	2	2	3	1
Under 5 years,	199	13	10	18	24	20	26	16	25	13	14	11	12
5 to 9 years,	169	9	8	20	14	13	17	20	13	0	17	11	15
10 to 14 years,	218	15	8	31	21	12	20	26	16	16	17	19	17
15 to 19 years,	445	32	26	37	30	26	44	48	42	43	33	35	39
20 to 24 years,	732	59	54	74	70	71	69	55	63	54	59	76	57
25 to 34 years,	1261	99	105	138	109	108	118	107	92	84	88	102	91
35 to 44 years,	1261	89	83	110	83	83	72	100	82	61	85	93	68
45 to 54 years,	692	70	55	81	57	68	45	57	39	31	65	42	42
55 to 64 years,	382	30	21	43	30	40	23	31	30	26	35	29	34
65 years and over,	196	20	10	19	17	18	20	17	16	17	11	22	12
Age not stated,	14	1	0	1	1	0	0	3	0	1	2	4	1
Total,	5371	451	390	569	468	479	442	480	440	386	484	444	388

REPORTED CASES AND DEATHS FROM TUBERCULOSIS IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

AGE GROUPS.	Male		Female		Total	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Under 1 year,	23	25	16	24	39	49
1 year,	24	22	24	27	48	49
2 years,	19	18	22	15	41	33
3 years,	20	9	15	9	35	18
4 years,	21	7	15	11	36	18
Under 5 years,	107	81	92	86	199	167
5 to 9 years,	86	18	83	21	169	39
10 to 14 years,	109	17	109	31	218	48
15 to 19 years,	153	66	292	153	445	219
20 to 24 years,	323	155	429	227	752	382
25 to 34 years,	618	317	643	316	1261	632
35 to 44 years,	679	359	864	447	1543	945
45 to 54 years,	499	334	193	147	692	482
55 to 64 years,	271	206	111	92	382	298
65 years and over,	123	107	75	73	196	180
Age not stated,	9	0	5	0	14	0
Total,	2977	1690	2394	1403	5371	3993

REPORTED CASES OF TYPHOID FEVER IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

AGE GROUPS.	NUMBER OF CASES												
	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Under 1 year,	0	0	0	0	0	0	0	0	0	0	0	0	0
1 year,	2	0	0	0	0	0	0	0	0	1	1	0	0
2 years,	2	0	0	0	0	0	0	0	0	1	0	1	0
3 years,	7	0	0	0	0	0	0	0	0	3	2	2	0
4 years,	10	1	1	1	1	0	2	1	0	2	1	0	0
Under 5 years,	21	1	1	1	1	0	2	1	1	6	4	3	0
5 to 9 years,	68	2	2	2	2	2	4	5	12	15	15	3	3
10 to 14 years,	112	7	3	4	6	1	4	9	11	30	17	15	5
15 to 19 years,	99	6	5	5	8	3	9	7	11	19	12	9	4
20 to 24 years,	92	7	1	6	4	1	2	3	16	21	14	12	5
25 to 34 years,	113	5	2	3	4	3	2	8	14	17	16	23	6
35 to 44 years,	98	6	1	4	3	8	6	7	9	12	23	16	3
45 to 54 years,	42	1	1	2	2	3	7	4	4	5	3	7	3
55 to 64 years,	14	0	0	0	0	0	1	2	2	2	3	2	2
65 years and over,	7	2	0	0	0	0	1	0	0	1	2	1	1
Age not stated,	3	0	0	0	0	0	0	1	0	2	0	0	0
Total,	669	38	16	27	30	21	38	47	80	139	108	93	32

REPORTED CASES AND DEATHS FROM TYPHOID FEVER IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

AGE GROUPS.	Male		Female		Total	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Under 1 year,	0	0	0	0	0	0
1 year,	2	0	0	0	2	0
2 years,	2	0	0	1	2	1
3 years,	3	0	4	0	7	0
4 years,	7	0	3	3	10	3
Under 5 years,	14	0	7	4	21	4
5 to 9 years,	34	1	34	3	68	4
10 to 14 years,	71	5	41	1	112	6
15 to 19 years,	61	6	38	9	99	15
20 to 24 years,	45	8	47	7	92	15
25 to 34 years,	55	11	58	12	113	23
35 to 44 years,	51	8	47	7	98	15
45 to 54 years,	24	7	18	3	42	10
55 to 64 years,	6	2	8	2	14	4
65 years and over,	5	1	2	0	7	1
Age not stated,	2	0	1	0	3	0
Total,	368	49	301	48	669	97

REPORTED CASES OF WHOOPING COUGH IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

AGE GROUPS.	NUMBER OF CASES												
	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Under 1 year,	414	25	19	32	19	31	39	43	52	47	27	41	39
1 year,	337	36	18	43	42	32	32	42	67	59	43	49	71
2 years,	621	33	49	52	43	38	48	60	56	68	48	54	72
3 years,	639	30	32	54	40	38	42	63	55	72	51	73	89
4 years,	625	34	26	58	33	36	46	64	57	61	53	72	82
Under 5 years,	2836	158	144	241	179	175	207	272	287	298	222	259	334
5 to 9 years,	2626	118	135	170	169	132	152	132	130	185	286	338	
10 to 14 years,	150	4	7	16	10	8	11	9	13	11	24	27	
15 to 19 years,	17	1	3	1	0	2	1	1	0	2	2	4	
20 to 24 years,	11	0	1	0	0	1	0	2	1	0	2	1	
25 to 34 years,	29	0	1	0	0	2	4	1	0	2	3	1	
35 to 44 years,	19	0	2	1	1	1	1	1	3	2	1	4	
45 to 54 years,	2	0	1	0	0	1	0	0	0	0	0	0	
55 to 64 years,	6	0	0	1	0	0	0	1	0	1	2	1	
65 years and over,	5	1	1	0	1	1	0	0	1	0	0	0	
Age not stated,	8	0	2	1	2	0	1	1	0	1	0	0	
Total,	3162	282	297	431	333	341	347	451	432	457	428	606	737

REPORTED CASES AND DEATHS FROM WHOOPING COUGH IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

AGE GROUPS.	Male		Female		Total	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Under 1 year,	207	40	207	53	414	93
1 year,	255	29	272	24	527	44
2 years,	396	4	315	15	621	19
3 years,	4	306	3	333	5	10
4 years,	297	1	328	2	625	3
Under 5 years,	1371	70	1455	90	2826	169
5 to 9 years,	988	0	1110	5	2098	5
10 to 14 years,	68	0	82	1	150	0
15 to 19 years,	10	0	7	0	17	0
20 to 24 years,	3	0	8	0	11	0
25 to 34 years,	6	0	14	0	20	0
35 to 44 years,	4	0	15	0	19	0
45 to 54 years,	2	0	0	0	2	0
55 to 64 years,	3	0	3	0	6	0
65 years and over,	3	0	2	0	5	0
Age not stated,	3	0	5	0	8	0
Total,	2461	70	2701	105	5162	173

REPORTED CASES OF ANTHRAX IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Months.

AGE GROUPS.	NUMBER OF CASES												
	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Under 1 year,	0	0	0	0	0	0	0	0	0	0	0	0	0
1 year,	0	0	0	0	0	0	0	0	0	0	0	0	0
2 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
3 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
4 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
Under 5 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
5 to 9 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
10 to 14 years,	0	0	0	0	0	0	0	0	0	0	0	0	0
15 to 19 years,	1	0	0	1	0	0	0	0	0	0	0	0	0
20 to 24 years,	2	1	0	0	0	0	1	0	0	0	0	0	0
25 to 34 years,	1	0	2	0	0	1	0	1	0	0	0	0	0
35 to 44 years,	3	0	0	1	0	1	0	0	0	1	0	2	
45 to 54 years,	2	0	0	1	0	1	0	0	0	0	0	0	
55 to 64 years,	0	0	0	0	0	0	0	0	0	0	0	0	
65 years and over,	0	0	0	0	0	0	0	0	0	0	0	0	
Age not stated,	0	0	0	0	0	0	0	0	0	0	0	0	
Total,	15	1	2	3	0	3	0	3	0	0	1	0	2

REPORTED CASES AND DEATHS FROM ANTHRAX IN NEW JERSEY

For the Calendar Year 1926 by Age Groups and Sex.

AGE GROUPS.	Male		Female		Total	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Under 1 year,	0	0	0	0	0	0
1 year,	0	0	0	0	0	0
2 years,	0	0	0	0	0	0
3 years,	0	0	0	0	0	0
4 years,	0	0	0	0	0	0
Under 5 years,	0	0	0	0	0	0
5 to 9 years,	0	0	0	0	0	0
10 to 14 years,	0	0	0	0	0	0
15 to 19 years,	1	0	0	0	1	0
20 to 24 years,	2	0	0	0	2	0
25 to 34 years,	4	0	0	0	4	0
35 to 44 years,	5	0	0	0	5	0
45 to 54 years,	2	0	1	1	3	1
55 to 64 years,	0	0	0	0	0	0
65 years and over,	0	0	0	0	0	0
Age not stated,	0	0	0	0	0	0
Total,	14	0	1	1	15	1

REPORTED CASES AND DEATHS, CASE INCIDENCE AND INDICATED FATALITY RATES BY COUNTIES FOR 1926, FOR CHICKENPOX AND DIPHTHERIA.

COUNTIES.	CHICKENPOX.				DIPHTHERIA.			
	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.
Atlantic,	284	3.08	0	0	107	1.16	20	18.69
Bergen,	527	2.03	2	0.37	418	1.80	30	7.21
Burlington,	161	1.75	0	0	33	0.37	9	16.98
Camden,	567	2.54	0	0	418	1.87	41	9.80
Cape May,	18	0.93	0	0	5	0.26	0	0
Cumberland,	123	1.87	0	0	44	0.67	6	13.63
Essex,	3441	4.61	1	0.02	637	0.85	38	5.96
Gloucester,	320	3.76	0	0	39	0.70	7	17.94
Hudson,	491	0.71	0	0	952	1.88	64	6.72
Hunterdon,	45	1.38	0	0	10	0.30	2	20.00
Mercer,	198	1.08	0	0	94	0.51	6	6.38
Middlesex,	138	0.71	0	0	125	0.64	16	12.80
Monmouth,	281	2.51	0	0	49	0.43	5	10.20
Morris,	209	2.37	0	0	27	0.30	1	3.70
Ocean,	29	1.27	0	0	7	0.31	4	37.14
Passaic,	718	2.49	0	0	478	1.66	30	6.27
Salem,	56	1.33	0	0	7	0.20	2	28.57
Somerset,	96	1.77	0	0	18	0.34	1	5.55
Sussex,	14	0.59	0	0	7	0.29	0	0
Union,	730	3.03	0	0	469	1.93	29	6.18
Warren,	5	0.10	0	0	40	0.86	6	15.00
State,	8441	2.36	3	0.03	4002	1.12	317	7.92

REPORTED CASES AND DEATHS BY COUNTIES FOR 1926 FROM DYSENTERY, LEPROSY, OPHTHALMIA NEONATORUM AND PARATYPHOID FEVER.

COUNTIES.	DYSENTERY.		LEPROSY.		OPHTHALMIA NEONATORUM.		PARATYPHOID.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Atlantic,	0	0	0	0	1	0	3	0
Bergen,	0	0	0	0	2	0	2	0
Burlington,	0	1	0	0	1	0	0	0
Camden,	0	0	0	0	3	0	1	0
Cape May,	0	0	0	0	0	0	0	0
Cumberland,	0	2	0	0	1	0	1	0
Essex,	19	4	1	0	24	0	1	0
Gloucester,	0	2	0	0	1	0	0	0
Hudson,	0	2	0	0	3	0	1	0
Hunterdon,	0	0	0	0	0	0	0	0
Mercer,	0	1	0	0	1	0	1	0
Middlesex,	0	2	0	0	0	0	0	0
Monmouth,	0	0	0	0	1	0	0	0
Morris,	2	0	0	0	0	0	0	0
Ocean,	0	0	0	0	0	0	0	0
Passaic,	0	0	0	0	4	0	2	0
Salem,	0	0	0	0	0	0	0	0
Somerset,	0	6	0	0	0	0	0	0
Sussex,	0	1	0	0	1	0	0	0
Union,	0	0	0	0	0	0	1	0
Warren,	0	1	0	0	0	0	0	0
State,	21	16	1	0	43	0	13	0

REPORTED CASES AND DEATHS, DEATH RATES, AND INDICATED FATALITY RATES BY COUNTIES FOR 1926, FOR INFLUENZA AND PNEUMONIA.

COUNTIES.	INFLUENZA.				PNEUMONIA.			
	Cases.	Deaths.	Deaths per 1000 Pop.	Per Cent. Fatality.	Cases.	Deaths.	Deaths per 1000 Pop.	Per Cent. Fatality.
Atlantic,	59	26	0.28	44.06	75	152	1.85	*
Bergen,	77	40	0.15	51.94	431	275	1.06	63.80
Burlington,	89	33	0.35	37.07	121	157	1.70	*
Camden,	44	35	0.24	*	443	378	1.68	84.87
Cape May,	72	8	0.41	11.11	22	35	1.71	*
Cumberland,	10	19	0.29	*	82	75	1.14	91.46
Essex,	582	94	0.12	16.15	3679	916	1.23	24.89
Gloucester,	54	16	0.28	29.62	86	77	1.38	89.53
Hudson,	121	130	0.19	*	656	1019	1.47	*
Hunterdon,	2	8	0.24	*	6	61	1.38	*
Mercer,	157	38	0.20	24.20	416	236	1.40	61.53
Middlesex,	38	35	0.18	82.10	80	238	1.22	*
Monmouth,	27	32	0.28	*	193	151	1.26	73.05
Morris,	39	19	0.21	48.71	156	126	1.43	67.74
Ocean,	7	9	0.39	*	18	81	1.88	*
Passaic,	156	72	0.25	46.15	370	281	0.97	75.94
Salem,	1	17	0.49	*	14	44	1.27	*
Somerset,	3	14	0.25	*	78	144	1.44	*
Sussex,	37	5	0.21	13.51	80	49	2.07	61.25
Union,	24	35	0.14	*	317	330	1.37	*
Warren,	0	25	0.54	*	1	66	1.42	*
State,	1589	730	0.20	45.65	7308	4781	1.84	65.42

* More deaths than cases reported.

REPORTED CASES AND DEATHS, CASE INCIDENCE AND INDICATED FATALITY RATES BY COUNTIES FOR 1926, FOR MALARIA AND EPIDEMIC CEREBROSPINAL MENINGITIS.

COUNTIES.	MALARIA.				EPIDEMIC CEREBROSPINAL MENINGITIS.			
	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.
Atlantic,	0	0	0	0	0	0	2	*
Bergen,	1	0.004	0	0	2	0.007	1	50.00
Burlington,	0	0	0	0	1	0.01	0	0
Camden,	0	0	0	0	1	0.004	2	*
Cape May,	0	0	0	0	0	0	0	0
Cumberland,	0	0	0	0	1	0.01	0	0
Essex,	6	0.008	0	0	30	0.04	6	20.00
Gloucester,	0	0	0	0	0	0	0	0
Hudson,	2	0.005	0	0	30	0.04	7	23.33
Hunterdon,	0	0	0	0	0	0	0	0
Mercer,	0	0	0	0	1	0.005	1	100.00
Middlesex,	0	0	0	0	0	0	0	0
Monmouth,	0	0	0	0	6	0.05	1	16.86
Morris,	0	0	0	0	0	0	1	*
Ocean,	0	0	0	0	0	0	0	0
Passaic,	0	0	0	0	5	0.01	3	60.00
Salem,	0	0	0	0	0	0	0	0
Somerset,	1	0.02	1	100.00	1	0.02	0	0
Sussex,	1	0.004	1	100.00	7	0.03	1	14.28
Union,	0	0	0	0	0	0	0	0
Warren,	0	0	0	0	0	0	0	0
State,	11	0.003	2	18.18	55	0.02	25	23.41

* More deaths than cases reported.

REPORTED CASES AND DEATHS, CASE INCIDENCE AND INDICATED FATALITY RATES BY COUNTIES FOR 1926 FOR MEASLES AND GERMAN MEASLES.

COUNTIES.	MEASLES.				GERMAN MEASLES.			
	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.
Atlantic,	1587	17.04	13	0.82	3	0.03	0	0
Bergen,	4275	16.48	21	0.49	190	0.73	0	0
Burlington,	1048	11.37	11	1.03	17	0.18	0	0
Camden,	1635	7.69	21	1.23	77	0.24	0	0
Cape May,	202	10.48	4	1.98	11	0.37	0	0
Cumberland,	1201	18.33	7	0.33	11	0.16	0	0
Essex,	16050	21.53	114	0.71	474	0.63	0	0
Gloucester,	1077	19.40	9	0.83	8	0.14	0	0
Hudson,	3182	4.37	72	2.27	10	0.01	0	0
Hunterdon,	539	16.62	5	0.92	0	0	0	0
Mercer,	1319	7.21	20	1.51	22	0.12	0	0
Middlesex,	619	2.18	17	2.74	32	0.18	0	0
Monmouth,	1724	15.42	17	0.98	251	2.24	0	0
Morris,	2774	31.31	16	0.37	93	1.05	0	0
Ocean,	362	15.93	1	0.27	0	0	0	0
Passaic,	3210	11.14	9	0.28	5	0.01	0	0
Salem,	513	14.91	6	1.16	1	0.03	0	0
Somerset,	533	9.54	8	1.50	15	0.27	0	0
Sussex,	482	20.28	5	1.03	2	0.08	0	0
Union,	3327	13.54	30	0.90	47	0.19	0	0
Warren,	236	5.09	4	1.69	0	0	0	0
State,	45913	12.86	410	0.89	1269	0.35	0	0

REPORTED CASES AND DEATHS, CASE INCIDENCE AND INDICATED FATALITY RATES BY COUNTIES FOR 1926 FOR ACUTE ANTERIOR POLIOMYELITIS AND SCARLET FEVER.

COUNTIES.	POLIOMYELITIS.				SCARLET FEVER.			
	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.
Atlantic,	3	0.03	2	66.66	201	2.18	7	0.99
Bergen,	3	0.02	5	100.00	720	2.77	2	0.97
Burlington,	3	0.05	0	0	263	2.86	4	1.52
Camden,	3	0.01	0	0	717	3.21	13	1.81
Cape May,	1	0.05	0	0	33	2.85	0	0
Cumberland,	0	0	0	0	272	4.15	3	1.10
Essex,	17	0.02	3	17.64	1895	2.42	12	0.63
Gloucester,	1	0.01	0	0	198	3.56	2	1.01
Hudson,	8	0.01	2	25.00	328	0.76	6	1.13
Hunterdon,	0	0	0	0	40	1.23	1	2.50
Mercer,	0	0	0	0	270	1.48	2	0.74
Middlesex,	0	0	1	0	172	0.88	2	1.16
Monmouth,	1	0.008	1	100.00	293	2.38	3	1.12
Morris,	3	0.03	0	0	256	2.90	2	0.78
Ocean,	0	0	0	0	24	1.05	1	4.16
Passaic,	3	0.01	1	33.33	712	2.47	9	1.26
Salem,	0	0	0	0	59	1.71	1	1.69
Somerset,	3	0.05	0	0	38	1.07	0	0
Sussex,	0	0	0	0	50	2.11	2	4.00
Union,	5	0.02	3	60.00	344	2.26	5	0.91
Warren,	0	0	1	*	61	1.31	1	1.63
State,	58	0.01	19	32.75	7271	2.03	78	1.07

* More deaths than cases reported.

REPORTED CASES AND DEATHS BY COUNTIES FOR 1926 FROM RABIES, TRACHOMA AND TRICHINOSIS.

COUNTIES.	RABIES.		TRACHOMA.		TRICHINOSIS.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Atlantic,	1	1	0	0	0	0
Bergen,	0	0	4	0	0	0
Burlington,	1	1	0	0	0	0
Camden,	0	0	1	0	0	0
Cape May,	0	0	0	0	0	0
Cumberland,	0	0	0	0	0	0
Essex,	0	0	7	0	0	0
Gloucester,	0	0	0	0	0	0
Hudson,	1	1	1	0	0	0
Hunterdon,	1	0	0	0	0	0
Mercer,	0	0	2	0	0	0
Middlesex,	3	3	0	0	0	0
Monmouth,	0	0	0	0	0	0
Morris,	0	0	1	0	3	0
Ocean,	0	0	0	0	0	0
Passaic,	1	1	2	0	0	0
Salem,	0	0	0	0	0	0
Somerset,	0	0	0	0	0	0
Sussex,	0	0	0	0	0	0
Union,	0	0	0	0	0	0
Warren,	0	0	0	0	0	0
State,	7	7	18	0	3	0

REPORTED CASES AND DEATHS, CASE INCIDENCE AND INDICATED FATALITY RATES BY COUNTIES FOR 1926 FOR SMALLPOX AND TUBERCULOSIS.

COUNTIES.	SMALLPOX.				TUBERCULOSIS.			
	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.
Atlantic,	1	0.01	0	0	131	1.42	92	70.22
Bergen,	0	0	0	0	340	1.15	186	62.00
Burlington,	0	0	0	0	107	1.16	73	68.22
Camden,	0	0	0	0	450	1.92	153	42.55
Cape May,	0	0	0	0	24	1.24	20	83.33
Cumberland,	0	0	0	0	86	1.31	53	61.62
Essex,	7	0.000	0	0	1480	1.98	666	45.00
Gloucester,	0	0	0	0	54	0.87	40	74.07
Hudson,	0	0	0	0	945	1.86	333	62.75
Hunterdon,	0	0	0	0	21	0.84	22	*
Mercer,	2	0.01	0	0	269	1.63	198	66.22
Middlesex,	1	0.005	0	0	231	1.19	160	69.26
Monmouth,	0	0	0	0	194	1.73	122	62.88
Morris,	0	0	0	0	159	2.26	120	60.30
Ocean,	0	0	0	0	25	1.10	33	*
Passaic,	3	0.01	0	0	350	1.21	229	65.42
Salem,	0	0	0	0	28	0.81	23	82.14
Somerset,	0	0	0	0	55	1.01	48	87.27
Sussex,	0	0	0	0	26	1.09	22	84.61
Union,	0	0	0	0	360	1.49	180	50.00
Warren,	0	0	0	0	26	0.56	30	*
State,	14	0.004	0	0	5371	1.50	3093	57.58

* More deaths than cases reported.

REPORTED CASES AND DEATHS, CASE INCIDENCE AND INDICATED FATALITY RATES BY COUNTIES FOR 1926 FOR TYPHOID FEVER AND WHOOPING COUGH.

COUNTIES.	TYPHOID FEVER.				WHOOPING COUGH.			
	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.	Cases.	Cases per 1000 Pop.	Deaths.	Per Cent. Fatality.
Atlantic,	75	0.81	9	12.00	109	1.18	13	11.92
Bergen,	43	0.16	7	16.27	380	1.46	5	1.31
Burlington,	32	0.34	5	15.62	93	1.01	1	1.07
Camden,	66	0.29	8	12.12	171	0.76	19	11.11
Cape May,	6	0.31	1	16.66	16	0.83	0	0
Cumberland,	21	0.32	1	4.76	44	0.67	2	4.54
Essex,	81	0.11	12	14.81	2301	3.08	29	1.26
Gloucester,	30	0.54	5	16.66	112	2.01	4	3.57
Hudson,	64	0.09	13	20.31	189	0.27	29	13.34
Hunterdon,	3	0.09	0	0	62	1.81	1	1.61
Mercer,	45	0.24	9	20.00	255	1.39	6	2.35
Middlesex,	36	0.18	8	22.22	90	0.46	16	17.77
Monmouth,	38	0.34	3	7.89	131	1.53	1	0.66
Morris,	13	0.14	0	0	172	1.95	3	1.74
Ocean,	7	0.31	2	28.57	20	0.88	3	25.00
Passaic,	23	0.07	2	8.69	320	1.11	7	2.18
Salem,	7	0.20	1	14.28	18	0.32	3	16.66
Somerset,	12	0.22	1	8.33	38	1.37	3	8.17
Sussex,	6	0.25	0	0	71	3.25	3	3.89
Union,	34	0.22	10	18.51	514	2.14	18	3.50
Warren,	7	0.15	0	0	10	0.21	7	70.00
State,	669	0.18	97	14.49	5162	1.44	175	3.39

Report of the Bureau of Engineering

H. P. CROFT, C. E., CHIEF.

Although the number of water and sewage treatment plants has increased and the degree of treatment and purification at some existing plants has been intensified in the last two years, there have been no radical changes in the duties lodged in the Bureau of Engineering and listed in the annual report of the bureau for the fiscal year of 1925.

In line with the past reports of the bureau, certain pertinent information upon its activities is contained in the following table:

	1915	1919	1924	1925	1926	1927
Number of employees—Clerical,	4	3	3	3	4	4
Technical,	10	7	7	6	5	6
Number of sewage treatment plants,	150	237	334	347	358	371
Total Number of water supplies,	230	256	263	273	301	314
Number of water treatment plants,	55	64	70	78	84	88
Laws enforced by the bureau,	8	14	18	18	18	18
Number of plans examined for sewer systems, sewage treatment plants, sewer extensions, water systems, water treatment plants and mausoleums,	108	86	180	335	448	735

The 735 plans for water and sewage projects, including two sets of plans for mausoleums, were for 162 separate projects in 84 different municipalities in the State, and the cost of the construction work upon these projects totaled \$11,955,230.13.

In addition to the work included in the foregoing table, there have been made during the year the following inspections relating to:

Water supplies,	330
Sewage and trade waste treatment plants,	333
Re-inspection of stream pollutions,	32
Inspection of swimming pools,	4
Complaints on water supplies,	13
Complaints on sewage plants,	21
Complaints on stream pollutions,	27
Water conferences, attendance at,	7
Sewage conferences, attendance at,	32

Seventy-three certificates were prepared for the use of water upon interstate carriers; 428 water tests and 1,271 sewage and trade waste tests were made in the field. Inspections were made on watersheds of Franklin, Hackensack, Mendham, Orange and Skillman. Sanitary surveys were made at Atlantic Highlands, Highlands and vicinity, located upon the Raritan Bay and tributaries; Barrington, located upon Beaver Brook, a tributary of Big Timber Creek; Plainfield and vicinity, located upon Green Brook, and Pleasantville, located upon Lakes Bay. Fifty-one days were spent on these investigations. Seventy-one days were spent on the investigation of bathing waters at the seashore municipalities; seventy-six days were spent on a special investigation of sewage treatment plants at Keansburg and Atlantic City and vicinity; fifteen days were spent upon a special investigation of paper waste treatment at York, Pa.; seven days were spent on a special investigation of sewage treatment plants in New York State; ten days were spent on a special stream investigation of the Pompton and Passaic Rivers; and six days were spent in attending court trials and serving court orders.

Report of the Bureau of Food and Drugs

W. W. SCOFIELD, CHIEF.

The practices and methods of preparing and distributing foods and drugs have undergone radical changes in this country during recent years. There is an ever increasing tendency to prepare food in large factories and to pack the foods in sealed containers which are delivered to the consumer in the original unopened package. In a similar way drugs are being packed in small units in the pharmaceutical establishments for distribution and sale through drug stores to the ultimate consumer.

These practices have brought about corresponding changes in the work of food and drug regulatory bureaus. In past years much effort was placed on the prevention of gross forms of adulteration by the retail vendor, such as the addition of water to milk or the substitution of oleomargarine for butter. The gross contamination of foods such as dried fruits, bakery products and confectionery, with dust, dirt and insects when sold from bulk in retail establishments has been materially reduced by the general sale of such commodities in packages filled at the place of preparation. On the other hand there is an increasing burden placed upon the food official to see that the large establishments are maintained in a sanitary manner and that the operations of these establishments are conducted in such a manner that clean wholesome food is packed. As time passes the educational work of food regulatory bodies becomes more important. In order to give an idea of the volume of the work of the Bureau of Food and Drugs it is of interest to report that there are approximately 10,000 farms in New Jersey where milk is produced for sale in addition to 250 milk receiving stations and pasteurizing plants. The plants where nonalcoholic beverages are prepared number approximately 300. The commercial manufacturing of ice cream is carried on in more than 500

establishments. The service and preparation of foods in thousands of restaurants and hotels of the State demand attention if clean and wholesome food is to be furnished to the consumer. There are approximately 225 establishments where animals are slaughtered for food. The canning industry is growing and includes the packing of fruits and vegetables in approximately 70 factories. In addition to these establishments there are the large cold storage warehouses and many establishments preparing particular foods such as mayonnaise dressings and various kinds of flavoring extracts.

For the inspection of all these establishments and the foods prepared in them the Department of Health employs eleven men. It is obvious that it is impossible for our agents to visit the different establishments as frequently as it seems necessary if clean and wholesome foods are to be available to the final consumer. While local boards of health of the cities supplement this work of the State Department of Health, local boards of health of many communities where food establishments are located do not employ inspectors for this work and are unable to assist us materially. The burden of this work, therefore, falls upon the State Department of Health. It is recommended that additional men be employed by the Department for the sanitary inspection of establishments where foodstuffs are prepared.

The outstanding accomplishment of the past year in the matter pertaining to milk control was the enactment of Chapter 233 of the Laws of 1927. This law provides that no person shall purchase, distribute or sell for human consumption, any milk or cream which has not been pasteurized, excepting milk or cream which has been produced by cows which have successfully passed a tuberculin test within the year of the sale of such milk or cream. The law provides that it shall not be unlawful to sell or deliver milk or cream produced by cows which have not passed a tuberculin test to a person or firm licensed to pasteurize milk or cream and also provides that it shall not be unlawful to sell or deliver milk or cream produced by cows which have not passed a tuberculin test, if an application for an initial test is on file with the Department of Agriculture of New Jersey. The act

requires that containers, in which milk or cream which has been pasteurized is distributed or sold, be marked with the words "Pasteurized Milk" or "Pasteurized Cream," and requires that containers in which milk is sold in the natural condition be marked with the words "Raw milk produced by tuberculin tested cows" or "Raw cream produced by tuberculin tested cows." The act also prohibits the sale or distribution of milk from cows which are affected with any disease or condition which may render the milk injurious to health or which is abnormal in composition. A penalty of twenty-five dollars for a first offense violation and a penalty of fifty dollars for the second and each subsequent offense is provided by the act.

The enactment of this law will afford protection against the sale of raw milk from tuberculous cows and protect the people from transmission of this disease through the medium of milk. It is interesting to review the history of the enactment of this legislation. In the year 1921 the State Department of Health had such a bill introduced in the Legislature. The bill met the active and organized opposition of agriculturists. Although the bill did not receive serious consideration, the State Department of Health advised local boards of health to enact similar provisions in local ordinances. In 1925 the bill was again introduced in the Legislature, but did not become a law.

During the fall of 1926 a group of agriculturists, milk distributors, milk producers and milk control officials organized a council. The purpose of this council was to study milk production, distribution and regulation and to make concerted efforts to change or improve conditions in the marketing of milk. The council approved the bill and it was gratifying to note that it had the united support of all organized groups interested in milk control work.

Mention should be made that the provisions of the law do not afford protection against the possibility of the transmission of diseases other than bovine tuberculosis through raw milk. It was recognized that science has not found means of protecting milk supplies from possible contamination with organisms causing scarlet fever, diphtheria, sore throat and certain other diseases by persons handling milk or from infected udders, other than

by pasteurization. Epidemics of disease caused by consumption of unpasteurized milk continue to occur. The contamination of the milk is generally caused by persons who are apparently normal in health, but who in reality continue to give off the causative germs or by persons who are suffering from diseases in a light and unrecognized form.

The Department recommends the use and purchase of pasteurized milk and cream, but we also recognize the fact that it is impracticable at this time to require the pasteurization of all milk because of the economic burdens in certain cases and also because of the insistent demand on the part of a certain proportion of the populace for unpasteurized milk and cream.

In the sanitary inspection of dairy farms we have followed the plan inaugurated last year in visiting all premises where milk is produced regardless of the place of distribution of the milk or cream. The four men assigned to this work have made one inspection of the dairy farms of seventeen of the twenty-one counties of the State, in the period of about eighteen months. We regard the inspection of dairy premises essential as it is not possible to ascertain with accuracy the conditions or methods employed in any other way. Dairymen are advised regarding the necessity for cleanliness in the maintenance of cows, stables, milk houses and utensils and recommendations are made to cleanse and sterilize milk containers, coolers and strainers. The importance of prompt cooling of milk is stressed. The physical condition of the cows is noted and where abnormal conditions are observed a report is made of the same. In such cases the Veterinarian of the Department follows the dairy inspector and makes diagnoses. In cases where diseased animals are found the veterinarian advises the dairymen and issues instructions to prevent the sale of milk from such animals.

During the year 3,467 inspections have been made of dairy farms where milk is produced for distribution and sale.

In connection with our dairy inspection work an interesting study has been made by our Veterinarian and one of the Chemists in the direct microscopical examination of milk as delivered to consumers or to milk plants, to ascertain whether or not abnormal types or great numbers of bacteria are present in the milk.

Where such abnormalities have been discovered inspections are made immediately of the dairy premises where the milk is produced for the purpose of ascertaining the cause of the contamination. By this method we have been very successful in demonstrating to the dairymen conditions or methods which were responsible for the unclean or unwholesome milk. The interest of the dairymen is generally secured when the inspector is able to point out diseased conditions of the udder, milk abnormal in appearance or some unclean condition which accounts for the abnormal bacterial contamination of the milk as determined by microscopical examination. Experienced health officials who have observed this work in the field endorse it as a valuable addition in dairy supervision. During the coming year we propose to continue the use of this method in our dairy control work.

Creameries and Milk Pasteurizing Plants.—The work of inspecting creameries and checking the efficiency of the process of pasteurization of milk as carried out in the plants in this State has received greater attention than in the past. Commercial pasteurization of milk or cream must be performed in apparatus and by methods which will result in the heating of all milk or cream to the temperature of 142 to 145 degrees F. for a period of thirty consecutive minutes, followed immediately by cooling to 50 degrees F. or below, or the benefits of the treatment are of doubtful value. During the year the Director of Health issued an order that the use of equipment of the continuous-flow type which failed to hold milk the required period of thirty minutes must be replaced by satisfactory equipment before July 1st, 1927. It is believed that there will be little or no trouble in the enforcement of this order, as most of the operators of plants having this type of equipment have recognized the justice of the order and have changed the equipment voluntarily.

We have also made a study of the conditions of the solutions used as detergents in large bottle-washing machines. Our findings indicate that frequently these solutions are not changed over long periods of time and the original value of the solutions may be largely lost by the neutralization or by the accumulation of foreign materials in them. Operators have been advised to

maintain these solutions at a greater alkaline strength and change them more frequently.

Another point which has received our attention is the checking of recording thermometers with more accurate indicating thermometers. As recording thermometers frequently get out of repair or adjustment most unsatisfactory results may be obtained if the inaccuracy of the recording thermometer is not known by the operator of the plant. The use of an accurate indicating thermometer daily by the operator of the plant will insure the heating of milk to the correct temperature.

It is the practice in certain milk plants to place caps on bottles containing pasteurized milk or cream by hand. The possibility of the contamination of milk or cream if it comes in contact with human hands subsequent to pasteurization may nullify the beneficial effects of that process. An additional regulation has been adopted to the rules governing the pasteurization of milk which requires the use of mechanical bottle fillers and cappers in the filling and capping of bottles of pasteurized milk and cream.

During the year 762 inspections have been made of the creameries and milk pasteurizing plants operating in this State.

Investigation of Milk Supplied to Schools.—It is gratifying to report continued improvement in milk furnished to schools for the feeding to children. The cooperation of the school authorities and their prompt and intelligent action upon recommendations with respect to milk supplies, is acknowledged with thanks.

In this investigation 139 schools were visited, inquiry being made into the source of the milk supply, whether raw or pasteurized, whether statements on the bottle caps were correct, the amount of milk distributed to pupils and the method of handling milk at the schools. The total amount of milk handled in the schools visited was 13,602 one-half pints daily. Most of the milk is distributed to the children in the half-pint bottles as received, a straw being furnished with each bottle. At 102 of the schools pasteurized milk is used. At 30 schools raw milk produced by cows which have successfully passed a tuberculin test within one year of the use of the milk is furnished, while seven schools serve raw milk not produced by tuberculin tested cows.

At each school visited samples of milk were taken for chemical analyses. A total of 293 samples were collected and examined. The average total solids content of the milk samples collected was 12.24 per cent, while the average fat content was 3.65 per cent. Nineteen samples, 6.5 per cent, were found to be below the State standard in either total solids or milk fat. In the year 1925 we found 17 per cent of the samples collected to be below the legal standard either in total solids or milk fat.

During the year it has been learned that several of the local boards of health throughout the State have collected and examined samples of milk as delivered to schools as a regular routine procedure.

In general reports received from local boards of health confirm our findings that there is a decided improvement in the quality of milk furnished to the schools for the feeding of children.

Investigation of Creams.—During the year it was learned that heavy cream was being shipped in bulk to milk dealers and ice cream manufacturers in this State from creameries in the middle western States. The source of the cream production and processing could not be inspected by our agents because of the great distance from New Jersey. In order to determine the condition of the cream upon arrival in New Jersey a study was undertaken. Forty-eight samples of heavy cream were collected in various parts of the State, 32 samples representing the product of mid-western dealers. The average fat content of the cream was 41.0 per cent. The product was found to be normal in appearance, sweet and free from lumps.

Fifty-three samples of heavy cream and five of light cream were collected for bacteriological examination. As far as could be determined by appearance, chemical and bacteriological examinations samples of the cream from mid-western points compared favorably with samples of cream produced in our own or nearby states.

REPORT OF PHYSICAL EXAMINATIONS OF DAIRY ANIMALS
BY LICENSED VETERINARIANS.

During the year reports were received from veterinarians showing that 80,822 cows were examined and 230 of these animals were suspected of being affected with tuberculosis. Information in each case was forwarded to the Department of Agriculture of this State.

SPRAY RESIDUE ON FRUITS.

During the harvesting season of peaches, pears, apples and grapes in 1926 New Jersey experienced an unusual amount of rainfall. Because of this excessive washing, which the fruit received in the orchards, the residue of spray materials found on the fruit as offered for sale was extremely small in quantity. No illness was reported from the consumption of fruit which had been sprayed with poisonous residue.

Educational work regarding the proper interval between the last spraying with poisonous materials and the time of harvest was carried on by the agents of the New Jersey Experiment Station and the New Jersey Department of Agriculture. It seems essential that such work be continued during the coming year as weather conditions may not be as favorable during the coming harvest as prevailed in 1926.

Non-Alcoholic Beverages.—The work of the Bureau has been directed toward improving the sanitary conditions of the plants where non-alcoholic beverages are prepared and bottled. The use of hot water and a suitable alkali is essential in the cleansing of bottles and utensils and we have demanded that hot water and alkali be provided and used.

During the year our agents have collected samples of solutions which have been furnished to bottlers for the preparation of chocolate or cocoa beverages. These solutions have been forwarded to bottlers in containers labeled in such a way that no definite information is given as to the character of the solution. Analyses of these preparations prove that they were solutions of hydrogen peroxide. The use of hydrogen peroxide in non-alcoholic beverages is deemed a violation of the food and drug act.

Canning Factories.—Intensive work was performed during 1926 on the inspection of canning factories in cooperation with the Bureau of Chemistry of the United States Department of Agriculture. On the whole the sanitary condition of the factories and the methods of preparing and packing fruits and vegetables were satisfactory. In a few instances where plants were found to be operated in an insanitary condition and where operators failed to sort fruits and vegetables thoroughly hearings were granted by the Director of Health. In one instance it was found that a large quantity of unsound material had been packed. The Bureau of Chemistry of the United States Department of Agriculture, seized most of the output of this factory after shipment to other States and has also successfully prosecuted this packer for violation of the Federal Food and Drug Act. The cooperation between the Bureau of Chemistry and the Department of Health in this work has been very effective and this bureau desires to acknowledge with thanks the material aid rendered by the Federal authorities in this work.

Restaurant and Hotel Kitchen Inspection.—During the year inspections have been made of restaurants and hotel kitchens throughout the State for the purpose of ascertaining the sanitary conditions of such places and for the purpose of ascertaining information regarding the handling of foodstuffs served to consumers. Owing to the limited number of inspectors available to carry on this work it was necessary to enlist the cooperation of the local health officials of those municipalities visited to make reinspections and follow up the initial inspection by our representatives. This cooperation was gladly furnished in most instances.

The necessity of scrubbing the floors daily, keeping the side-walls and ceilings clean, cleansing all tables and utensils thoroughly and the importance of sterilizing dishes and implements used in the preparation of foodstuffs and service of the same were impressed upon the operators. Attention was also given to the cleanliness of refrigerators where foodstuffs are stored and proper care and cleanliness of the same was urged upon the operators.

The question of the physical examination of employees who handle food has been carefully considered and it has been deemed impracticable at this time to undertake this work upon a State-wide scale. The physical examination of individuals by physicians without making laboratory examinations will not eliminate "carriers" of typhoid fever and diphtheria. "Carriers" are probably a greater source of danger in connection with the handling of food than persons who are actually affected with certain diseases. It is common knowledge that workers employed in hotels and restaurants are continually moving from place to place for employment. The laboratory examination of specimens from the multitude of workers handling foodstuffs in these places does not seem possible with the facilities available at this time or likely to be furnished in the near future. It would be extremely difficult to enforce a regulation providing for the thorough physical examination, including laboratory examinations of specimens by physicians.

During the year 5,234 samples of food and drugs were collected for examination to determine if they complied with the law and standards in force in this State, with the following results:

	<i>Above Standard</i>	<i>Below Standard</i>	<i>Total</i>
Milk and cream,	3,922	492	4,414
Foods,	586	97	683
Drugs,	104	33	137
	<hr/> 4,612	<hr/> 622	<hr/> 5,234

The following table shows the kind and number of sanitary inspections made of establishments where foodstuffs are prepared, packed, stored or otherwise handled:

Dairies,	3,467
Creameries,	762
Milk depots,	318
Ice cream factories,	302
Slaughter-houses,	164
Cold storage plants,	127
Bottling establishments,	396

Restaurants and hotel kitchens,	1,754
Meat markets,	5
Egg-breaking establishments,	15
Canning factories,	173

The following table shows the kinds and amounts of meat inspected during the year:

	CARCASSES.		PARTS OF CARCASSES.	
	<i>Passed.</i>	<i>Condemned.</i>	<i>Passed.</i>	<i>Condemned.</i>
Beef,	221	6	Beef, lbs.,	1,050
Calves,	259	....	Pork, lbs.,	150
Sheep,	6	....	
Hogs,	67	....	
	<hr/> 553	<hr/> 6	<hr/> 1,200	<hr/>

The above table represents inspections of meat made in connection with slaughter-house inspection work.

The following table shows the kinds and amounts of foodstuffs held in cold storage warehouses in this State each month during the past year.

DEPARTMENT OF HEALTH.

SUMMARY OF THE KINDS AND AMOUNTS OF FOODS HELD IN COLD STORAGE WAREHOUSES IN NEW JERSEY ON THE LAST DAY OF EACH MONTH DURING THE YEAR 1926-1927.

ARTICLE	July 1926	Aug. 1926	Sept. 1926	Oct. 1926	Nov. 1926	Dec. 1926	Jan. 1927	Feb. 1927	Mar. 1927	April 1927	May 1927	June 1927
Eggs, cases,	516,409	493,219	410,286	305,993	174,755	63,766	32,437	6,139	84,937	281,439	538,936	658,842
Eggs, broken, lbs.,	1,175,510	1,326,054	1,377,615	1,378,746	1,434,065	1,571,032	1,551,653	1,333,125	1,158,647	1,195,160	1,571,421	1,566,381
Cheese, lbs.,	1,343,093	1,468,443	1,405,927	1,174,272	1,032,922	888,625	810,183	672,533	613,207	588,631	529,167	829,032
Butter, lbs.,	4,634,885	4,970,662	4,584,985	3,079,371	1,223,391	567,844	377,815	167,858	103,865	47,110	503,112	3,103,038
Poultry, lbs.,	1,175,899	2,363,071	2,933,257	3,515,189	5,816,021	7,894,678	8,231,386	6,895,289	5,420,831	3,769,951	2,727,624	2,997,440
Fresh meats, lbs.,	4,507,342	3,480,463	5,021,702	3,502,837	3,694,282	4,826,426	5,313,187	5,537,762	5,471,987	5,293,578	5,374,454	5,632,179
Fresh fish, lbs.,	1,332,130	2,269,579	2,107,627	3,708,796	4,259,065	3,678,427	2,612,293	1,299,406	338,122	761,638	1,756,012	1,957,491
Milk and milk products, lbs.,	742,562	574,614	358,220	195,936	83,840	21,675	12,665	13,310	9,400	11,272	626,231	1,036,858
Edible fats and oils, lbs.,	84,394	4,021	5,732	2,710	49,118	6,061	7,021	9,766	1,280	1,640	1,791	1,315
Game, lbs.,	67,580	65,384	64,136	52,850	67,434	61,694	48,710	30,594	10,277	9,365	9,365	9,365
Miscellaneous articles, packages,	51,428	101,759	470,353	864,980	987,658	529,137	525,110	295,957	242,863	131,996	66,163	37,037

Report of the Bureau of Bacteriology

J. V. MULCAHY, CHIEF.

The work of this Bureau for the fiscal year ending June 30th, 1927, has shown increased activity in the routine bacteriological and serological examinations and a tremendous increase in the production of culture media and sterile glassware, not only for use in the bacteriological laboratory but for laboratory and field use by both the Bureau of Chemistry and the Bureau of Engineering. The demands made on the force charged with preparing this culture media, sterile bottles and other glassware make it very difficult with our limited space and sterilizing facilities to meet this demand. Enlarged quarters to relieve the congestion in the preparation and wash room is urgently needed to facilitate the work and to provide more room for additional sterilizers that are needed to take care of the increased work. Each year, for several years, we feel that we have reached our capacity for handling a greater volume of work in all branches of our work, but there has been a marked increase with a corresponding recognition of our inadequate space in which to carry it on.

This condition was gone into quite fully in last year's report so only brief mention of our crowded and cramped quarters is made here, although the need is greater and it is earnestly requested that effort be made to acquire additional space for handling the increased volume of this work.

The examination of blood and spinal fluid specimens for syphilis by means of the Wasserman reaction shows a steady yearly increase. Over 2,000 more of these specimens were examined during the past year than were made for the fiscal year of 1926. Beginning with the fiscal year of 1925 there has been an increase of 8,000 specimens of this character examined, the total Wasserman specimens examined this last year being 23,973.

This work is also performed in a very small room allotted for these tests and is entirely inadequate to provide sufficient working quarters for the four persons engaged in this work. It is earnestly hoped that increased space for this work may be provided.

There has been a larger number of specimens received for examination for gonorrhoea than during any previous year and the miscellaneous examinations, which include many time-consuming examinations, show a decided increase. The classification of these miscellaneous examinations is shown in Table V.

Feces and urine specimens are received from physicians, usually from persons convalescing from typhoid fever for the purpose of releasing these patients from quarantine. A greater number of these specimens, however, are submitted from employees on certified dairy premises to determine if any of these employees should happen to be a typhoid carrier, and who are not allowed to engage in work requiring the handling of milk until a negative report is received from the laboratory. Specimens are also submitted by the epidemiologists connected with the Bureau of Local Health Administration whenever they are investigating the source of typhoid fever infection.

Samples of milk both microscopically and by guinea pig inoculation, usually submitted by the veterinarian connected with the Bureau of Food and Drugs, have been examined from suspected tubercular cows and in a number of instances tubercle bacilli have been found.

Rabies continues to be very prevalent and as shown by the tabulation of the counties from which rabid animals have been received it is an infection that affects eighteen counties of the State, exclusive of Hudson County. Specimens from that county are not received in this laboratory, but examined in the Hudson County Laboratory.

During the last six years there has been a marked increase in the number of cases of rabies amongst animals, principally dogs by whom it is spread. The increasing prevalence of this disease amongst dogs exposes an increasing number of persons to bites and infection with its resultant suffering and possible death from this terrible disease.

The following tabulation shows the increase in the number of animals examined and the number found rabid by the Bureau of Bacteriology for the past ten years:

	*1918	1919	1920	1921	1922	1923	1924	1925	1926	1927
Positive.	27	18	16	36	46	36	125	160	202	164
Negative.	17	23	37	36	41	49	79	116	145	132
Unsatisfactory..	3	5	9	8	18	10	22	18	25	26

This table shows only the number found rabid in this laboratory. A number of heads of animals are examined in the city laboratory of Newark and the Hudson County Laboratory at Jersey City and others from this State are occasionally sent to laboratories in Philadelphia and New York, whereas still others are killed after exhibiting marked symptoms of rabies and no laboratory examinations are deemed necessary to make a diagnosis of rabies.

Our present anti-rabies law does not seem to be effective as a means of controlling this disease and although much has been done with the help of local ordinances to reduce the increase of rabies in some communities, cases of rabies in dogs occur in other sections of the State where better sustained effort is made to eradicate the trouble.

What seems to be needed is a uniform procedure applicable to the whole State. To apply a definite procedure for the control of this serious situation bills have been introduced in our State Legislature, but have failed to be passed principally due to the opposition of those persons who resent any effort to restrict the freedom from regulations that dogs now enjoy.

It is not possible to determine accurately the number of persons bitten during the year by rabid dogs and requiring Pasteur treatment, as bites from dogs are not reported in this State to the State Department of Health and only a few municipalities require the reporting of dog bites, but from information received in the laboratory with the heads submitted for examination practically all of the 164 animals found rabid by this laboratory had infected, by biting or contact with an open abrasion, from one to six per-

* Eight months.

sons in each case. A conservative estimate of the number of persons obliged to undergo Pasteur treatment as the result of bites from rabid dogs in this State would be between 400 and 500.

Since May, 1926, on all mail reports, following the telegraphic report, sent out from the laboratory giving the results of the examination of animals found to be affected with rabies a request is made that information be forwarded giving the names and addresses of all persons bitten or infected through abrasions by each of these rabid dogs. Responses have been received from many of these requests and a tabulation made of these replies shows that during this period a large number of persons have been bitten—those bitten or infected representing individuals residing in twenty counties of the State. A list such as this should convince representatives from these counties that the need is real for adequate control and that whatever legislation is urged for the suppression of this disease is in the interest of public protection from attacks by rabid animals.

Over a period of three years previous to the year 1926, ten human deaths occurred in persons bitten by rabid dogs in this State. Since March, 1926, to June 30th, 1927, eleven deaths from rabies have occurred in this State as the result of bites from rabid dogs, some of these despite the fact that the patients were given the Pasteur treatment.

Considerable work has been done on the isolation of hemolytic streptococci and the production of toxin from these cultures on specimens taken from dairy employees on premises producing milk distributed to residents of Washington, N. J., where over 200 cases of scarlet fever occurred and where the epidemical data obtained showed it to have been transmitted by milk. The toxins upon which skin tests are now being made were prepared both from cultures obtained from the throats of these dairy employees and from hemolytic streptococci isolated from the milk of one of the cows on one of the dairies, which organism was isolated by Dr. Jones of the Rockefeller Institute for Animal Diseases.

During the year there has been an increasing demand for toxin-antitoxin for immunization against diphtheria and for Schick test material, typhoid and triple typhoid vaccine and for other

biological products that have been supplied to the epidemiologists connected with the Bureau of Local Health Administration, State institutions, physicians and local boards of health. These biologicals are supplied at cost.

The tabulations that follow show the various examinations and the number of specimens examined in the laboratory during the year arranged and classified under the name of the disease suspected, from which specimens have been received from physicians and health authorities of the State.

The number and kind of specimens examined are shown in the following table:

TABLE I.

Diphtheria,	11,384	Gonorrhea,	3,895
Tuberculosis,	6,376	Syphilis,	23,973
Typhoid Fever,	2,078	Miscellaneous Diseases,	1,187
Typhoid Bacilli (feces and urine),	2,317	Total,	51,210

The following tables give a summary by months of the specimens examined from July 1st, 1926, to June 30th, 1927, inclusive:

TABLE II.

MONTH.	* DIPHTHERIA.						TUBERCULOSIS.					
	Primary.			Secondary.			Primary.			Secondary.		
	P ¹	N ³	U ²	P	N	U	P	N	U	P	N	U
July,	67	451	27	139	773	18	76	281	1	40	105	1
August,	29	197	13	42	162	10	51	208	.....	48	116	1
September,	40	262	8	70	186	5	61	250	2	68	147	.....
October,	35	338	17	56	289	8	73	321	2	65	150	.....
November,	63	348	25	90	287	13	47	261	2	30	91	1
December,	54	320	33	132	349	16	40	267	5	63	118	.....
January,	63	370	27	114	242	13	48	329	3	27	62	2
February,	50	281	19	104	272	9	52	275	3	59	137	3
March,	60	512	15	105	310	14	64	332	6	70	158	2
April,	48	1332	35	85	618	20	54	302	3	52	154	1
May,	59	379	19	122	322	11	59	323	2	33	112	1
June,	63	338	18	92	336	18	59	307	3	65	151	4
Total,	649	5173	251	1130	4028	155	684	3546	32	620	1479	15

TABLE II—(Continued).

MONTH.	TYPHOID FEVER.						TYPHOID BACILLI (feces and urine).					
	Primary.			Secondary.			Primary.			Secondary.		
	P	N	U	P	N	U	P	N	U	P	N	U
July,	25	141	9	6	11	2	1	133	7	1	10	.....
August,	27	144	15	6	9	5	3	136	2	11	34	.....
September,	41	164	17	26	23	9	2	125	7	13	63	.....
October,	33	156	18	10	14	8	2	167	16	7	59	.....
November,	19	145	13	13	17	9	3	181	6	3	76	.....
December,	6	121	10	4	9	3	2	142	8	9	77	.....
January,	4	76	3	4	7	2	1	107	5	4	26	.....
February,	3	60	.....	3	14	.....	2	86	4	3	10	.....
March,	8	132	2	1	6	2	.....	110	9	3	9	.....
April,	3	135	2	.....	8	5	1	161	12	5	41	.....
May,	2	118	5	8	7	1	.....	113	11	6	22	.....
June,	3	139	2	.....	8	.....	1	148	6	7	59	.....
Total,	176	1551	96	76	133	46	18	1611	94	72	489	33

* During this year 27 tests were made for the virulence of the diphtheria bacillus.
(1) P=Positive. (2) N=Negative. (3) U=Unsatisfactory.

TABLE III.

MONTH.	GONORRHEA.						MISCELLANEOUS					
	Primary.			Secondary.			Primary.			Secondary.		
	P	N	U	P	N	U	P	N	U	P	N	U
July,	77	142	17	13	48	3	41	50	8	6	6	.....
August,	84	139	14	12	49	1	18	40	7	11	7	.....
September,	78	159	15	14	49	4	16	32	4	24	11	.....
October,	73	178	14	8	66	3	30	42	5	11	8	.....
November,	56	148	11	7	50	.....	32	46	2	27	10	.....
December,	56	123	13	8	45	1	25	31	1	8	20	.....
January,	61	161	9	5	56	2	39	31	2	4	3	.....
February,	60	198	9	12	71	8	36	43	2	3	17	.....
March,	77	204	13	13	87	4	45	42	.....	3	2	.....
April,	72	163	10	7	57	5	55	28	3	.....	1	.....
May,	75	157	15	13	59	3	70	53	4	2	1	.....
June,	101	226	14	6	73	2	42	47	2	11	13	.....
Total,	870	2090	154	118	717	36	452	485	40	110	99	1

TABLE IV.

MONTH.	COMPLEMENT FIXATION FOR SYPHILIS. (Guinea pig heart antigen.)														
	Primary.							Secondary.							
	4+	3+	2+	+	±	—	U	4+	3+	2+	+	±	—	U	
July,	148	7	16	10	1	1302	64	74	11	7	6	4	249	11	
August,	169	8	8	7	5	1215	74	48	8	9	7	5	226	10	
September,	147	9	12	6	3	1368	52	68	7	12	11	5	237	15	
October,	134	10	9	14	6	1303	76	94	12	11	10	7	273	27	
November,	132	7	9	4	4	1207	65	121	12	9	4	10	8	227	11
December,	131	7	9	6	5	1210	58	87	9	10	8	1	225	20	
January,	125	5	16	7	2	1225	54	64	4	9	5	.....	239	36
February,	120	8	13	8	3	1241	45	64	4	16	14	4	378	20	
March,	169	5	7	13	14	1724	53	74	6	10	16	18	340	14	
April,	114	8	7	12	10	1450	54	57	8	7	8	10	321	15	
May,	125	13	8	15	16	1418	64	53	12	3	24	13	243	18	
June,	133	24	16	13	12	1709	38	60	8	10	15	19	415	13	
Total,	1657	111	132	115	81	16272	699	866	101	108	134	94	3393	210	

TABLE IV—(Continued).

MONTH.	COMPLEMENT FIXATION FOR SYPHILIS. (Cholesterinized antigen.)													
	Primary.							Secondary.						
	4+	3+	2+	+	±	—	U	4+	3+	2+	+	±	—	U
July,	219	3	2	.....	.....	1262	64	126	8	3	3	1	210	11
August,	214	3	.....	.....	.....	1185	74	105	7	4	1	.....	186	10
September,	201	3	3	2	.....	1234	52	137	11	6	9	.....	209	15
October,	201	11	7	9	2	1246	76	165	7	10	1	8	221	27
November,	217	5	6	4	1	1150	65	199	9	7	5	.....	162	11
December,	217	4	4	3	.....	1140	58	165	9	9	2	.....	155	20
January,	224	7	5	3	.....	1131	54	145	1	8	4	.....	163	36
February,	199	4	7	1	.....	1162	45	159	9	14	11	8	235	20
March,	248	9	6	15	12	1642	53	167	21	16	14	8	238	14
April,	175	10	5	9	3	1399	54	126	7	6	5	10	237	15
May,	204	9	.....	.....	.....	1365	64	127	14	4	13	7	185	18
June,	224	13	11	8	9	1642	38	142	25	11	14	3	332	13
Total,	2533	83	56	66	32	15378	699	1763	128	98	76	34	2597	210

Table V.—The following table shows the number and various kinds of miscellaneous specimens examined from July 1st, 1926, to June 30th, 1927, inclusive:

Specimen for	Positive.	Negative.	Unsatis- factory.
Rabies,	164	132	26
B. tuberculosis (body fluids, feces, urine, milk, pus, etc.),	8	62	..
B. typhosus (bile, blood and water), .....	..	9	..
B. para-typhosus (blood, feces and urine),	1	28	..
Bacterial infection (body fluids, blood, feces, pus, sputum, urine, etc.),	150	88	4
Gonococcus infection (urine),	1	4	..
Malaria, .....	..	102	3
Ophthalmia Neonatorum,	65	17	1
Pneumonia,	2	3	2
Tests on pasteurizing plants with B. prodigiosus,	3	2	..
Treponema Pallida, .....	..	2	..
Vincent's Angina,	165	131	4
Miscellaneous,	3	4	1
Total,	562	584	41

Table VI.—The following table shows the number and species of animals examined for rabies from July 1st, 1926, to June 30th, 1927, inclusive:

Dogs—Positive, 163; negative, 122; unsatisfactory, 25.
Cats—Negative, 5; unsatisfactory, 1.
Cows—Positive, 1; negative, 1.
Hogs—Negative, 2.
Horses—Negative 1.
Rats—Negative, 1.

Table VII.—Following are the towns arranged by counties from which animals found to be rabid were received from July 1st, 1926, to June 30th, 1927, inclusive:

Atlantic County—Atlantic City, 2; Hammonton, 4; Mays Landing, 1.
Bergen County—Garfield, 3; Rochelle Park, 1.
Burlington County—Bordentown, 3; Burlington, 1; Marlton, 1; Moorestown, 1; Mt. Holly, 2; Riverton, 1.
Camden County—Berlin, 2; Brooklawn, 1; Camden, 9; Gloucester, 1; Merchantville, 2; West Collingswood, 2.
Essex County—Orange, 1.

Gloucester County—Clayton, 1; Woodbury, 1.
Hunterdon County—Flemington, 1; Hampton, 1; Stockton, 1.
Mercer County—Hopewell, 2; Princeton, 5; Titusville, 2; Trenton, 13.
Middlesex County—Highland Park, 2; Jamesburg, 1; Metuchen, 5; New Brunswick, 10; South Amboy, 1; South Plainfield, 1; Woodbridge, 1.
Monmouth County—Belford, 1; Asbury Park, 4; Bradley Beach, 1; Cream Ridge, 1; Englishtown, 1; Freehold, 2; Highlands, 1; Imlaystown, 1; Matawan, 1; Neptune, 3; Red Bank, 1; Spring Lake, 3.
Morris County—Boonton, 1; Chatham, 1; Chester, 1; Dover, 1; Hibernia, 1; Lake Hopatcong, 1; Mendham, 2; Morristown, 2; Mt. Freedom, 2; Succasunna, 1.
Ocean County—New Egypt, 1.
Passaic County—Little Falls, 1; Mountain View, 3; Passaic, 1.
Salem County—Alloway, 1; Woodstown, 3.
Somerset County—Belle Mead, 1; Bernardsville, 1; East Millstone, 1; Rocky Hill, 1; Watchung, 1.
Sussex County—Newton, 2.
Union County—Fanwood, 1; Plainfield, 9; Rahway, 4; Union, 1; Westfield, 10.
Warren County—Allamuchy, 1; Blairstown, 1; Hainesburg, 1.

Table VIII.—The following table shows the number of outfits supplied to repositories maintained throughout the State and to physicians who are not conveniently located near repositories, from July 1st, 1926, to June 30th, 1927, inclusive:

Diphtheria—Regular outfits,	12,780
Serum tubes and swabs,	1,095
Extra swabs,	2,079
	15,954
Tuberculosis outfits,	9,466
Typhoid fever outfits,	3,057
Malaria outfits,	649
Gonorrhoea outfits,	4,142
Syphilis outfits, ..	26,358
Feces and urine outfits,	3,029
Ophthalmia Neonatorum outfits,	469
	63,124

Report of the Bureau of Chemistry

JOHN E. BACON, CHIEF.

During the past fiscal year there have been analyzed 5,990 samples of foods and drugs and 5,413 samples of water and sewage, an increase of 800 and 500 samples, respectively, over last year.

Food and Drug Analyses.—The following summary is a tabulation of the number and character of samples analyzed in the food and drug laboratory during the past fiscal year:

TABLE SHOWING THE NUMBER AND CHARACTER OF SAMPLES ANALYZED IN THE
FOOD AND DRUG LABORATORY DURING THE FISCAL YEAR ENDING
JUNE 30TH, 1927.

<i>Character of Sample.</i>	<i>Above Standard.</i>	<i>Below Standard.</i>	<i>Total.</i>
Milk,	3,751	422	4,173
Cream,	416	18	434
Human milk,	21	...	21
Ice cream,	52	6	58
Butter,	99	1	100
Oleomargarine, .....	...	36	36
Meat products,	74	1	75
Tomato products,	56	1	57
Flour,	6	...	6
Cheese,	5	...	5
Syrups,	23	...	23
Oysters,	180	...	180
Soap,	1	4	5
Creamery wash waters,	42	...	42
Fruits for spray poison,	22	...	22
Olive oil,	20	4	24
Soft drinks,	164	2	166
Vinegar,	17	16	33
Alcoholic beverages,	152	...	152
Miscellaneous,	199	13	212
Total foods,	5,300	524	5,824

<i>Drugs.</i>	<i>Above Standard.</i>	<i>Below Standard.</i>	<i>Total.</i>
Tincture iodine,	21	3	24
Citrate of magnesia,	15	16	31
Spirits of camphor,	15	1	16
Flavoring extracts,	16	...	16
Essence of peppermint,	10	...	10
Tinc. ferric chloride,	20	...	20
Witch hazel,	25	...	25
Total drugs,	122	20	142
Number of urinalyses performed,	24	...	24
Total number of foods, drugs, and urine samples examined,	5,446	544	5,990

Nine and one-tenth per cent of the samples analyzed were below the legal requirements.

Water and Sewage Analyses.—The following summary is a tabulation by months of the analytical work performed in the water and sewage laboratory:

TABLE SHOWING THE NUMBER AND CLASSIFICATION OF SAMPLES ANALYZED EACH MONTH IN THE WATER AND SEWAGE LABORATORY DURING THE FISCAL YEAR ENDING JUNE 30TH, 1927.

MONTH.	Total Samples.		Public.		Private.		State Institutions.		County Institutions.		Rural Schools.		Bottled Waters.		Dairy.		Bathing Waters.		Surf.		Sewage.		Trade Wastes.		Sands.		Special Investigations.	
July,	582	267	50	17	5	25	3	22	21	88	166	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
August,	676	233	41	11	6	30	5	12	184	5	30	5	3	5	12	5	12	184	88	76	3	5	1	1	1	1	1	1
September,	610	217	39	11	7	56	4	8	5	255	3	8	8	5	8	5	8	5	255	3	8	3	3	3	3	3	3	3
October,	379	245	35	7	17	34	12	4	2	2	34	12	4	2	4	2	4	2	2	2	2	2	2	2	2	2	2	2
November,	260	183	29	4	8	28	7	7	7	7	28	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
December,	463	156	18	4	2	24	2	13	19	2	24	2	1	19	2	1	19	2	2	2	2	2	2	2	2	2	2	2
January,	209	161	18	4	1	2	2	5	5	5	2	1	2	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
February,	162	128	10	3	4	6	6	19	2	2	6	6	6	19	2	6	19	2	2	2	2	2	2	2	2	2	2	2
March,	401	228	24	4	8	37	78	19	4	4	37	78	19	4	4	19	4	4	4	4	4	4	4	4	4	4	4	4
April,	683	195	27	20	5	314	11	4	1	1	314	11	4	1	1	4	1	1	1	1	1	1	1	1	1	1	1	1
May,	564	207	30	22	6	204	2	2	2	2	204	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
June,	424	220	33	4	4	75	...	...	...	...	75	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals,	5,413	2,440	354	99	75	835	116	115	222	343	304	58	17	435	304	343	222	115	222	343	304	58	17	435	304	343	222	115

School Water Supplies.—A great improvement in the sanitary quality of the waters furnished the rural schools is indicated by comparison of analyses of such supplies made during the past three years. Of the 740 waters examined in 1925, only 46 per cent were considered safe. In 1926, 530 supplies were tested and 65 per cent were found to be safe; whereas, in 1927, of 580 supplies analyzed, 71 per cent were considered satisfactory.

The rural schools derive their water supplies from driven wells, dug wells, springs and cisterns. Half the schools have now installed driven wells, and 86 per cent of these are found to be safe. Defects in piping, the construction of the top of the well, and inadequate facilities for carrying waste water a sufficient distance away are some of the faults which cause the remaining 14 per cent to receive contamination. In the majority of cases it should be possible to protect these supplies against pollution.

Thirty-two per cent of the schools obtain their water from dug wells, less than one-half of which may be considered satisfactory. The lining of the well, the protection to the top, the waste water drainage system and the nearness of leaching privy vaults make the water potentially unsafe for use. Only part of these wells can ever be rendered entirely safe for use, and some of them should be replaced by properly constructed driven wells.

About 10 per cent of the schools still obtain their water supplies from springs, one-third of which are liable to pollution. About 4 per cent of the schools obtain water from cisterns. This type of supply should be satisfactory if the roof of the building on which the water collects is properly flushed before allowing it to enter the cistern.

The table which follows shows the increase, year by year, in the percentage of schools which are obtaining safe water and the improvement in the type of water supplies:

TABLE SHOWING COMPARISON OF RESULTS OF ANALYSES OF SCHOOL WATER SUPPLIES FOR YEARS 1925, 1926, 1927.

	Year		
	1925	1926	1927
Total number of samples examined,	740	530	583
Percentage of all supplies considered safe,	46	65	71
Percentage of schools supplied by dug wells,	32	32	31.9
Percentage of dug wells considered safe,	16	32	45
Percentage of schools supplied by driven wells,	41	47	50
Percentage of driven wells considered safe,	74	86	86
Percentage of schools supplied by springs,	10	8.5	9.4
Percentage of springs considered safe,	31	66.6	63
Percentage of schools supplied by cisterns,	3	4.5	4.2
Percentage of cisterns considered safe,	60	66.6	80
Percentage of school supplies not classified,	14	8	3.2
Percentage of samples that seem to have been contaminated in sampling,	6	1	1.3

The considerable improvement in these supplies, indicated by the chemical and bacteriological examinations, has been brought about by the hearty cooperation of the State Department of Public Instruction and the local boards of education. Representatives of this Department have given papers on rural school water supplies before two meetings of the County Superintendents, and a comprehensive circular on the significance of the chemical and bacteriological findings and methods of abating pollutions has been prepared and distributed to all the interested school officials of the State. In addition sanitary surveys have been made of some supplies where the local school officials were unable to ascertain the cause of contamination as indicated by the repeated bacteriological examinations.

Bottled Waters.—During the past year, it has been found necessary to condemn the spring used as a source of water for a bottled water concern, as the sanitary survey showed the spring was liable to contamination by leachings from distant cesspools. This company has gone to a deep driven well as a source of supply.

The inspections of bottled water establishments show that the regulations of the Department are being complied with, and, with few minor exceptions where some impairment in the quality of the water occurred during handling, the bottled water establishments of the State were found to be in good condition.

Analyses of Seized Liquors.—The provisions of the State Prohibition Act make it mandatory for this Department to analyze samples of seized liquors when so requested by a proper court official. This work has been conducted as in the past and, when suitable, the alcohol and medicinal liquors have been distributed to the free hospitals and institutions of this State. In addition analyses of this character are performed as a matter of courtesy for the New Jersey State Police.

During the past year a number of samples of flour, flavoring extracts and similar food products have been analyzed for the State Purchasing Agent to ascertain if same complied with their specifications.

On March 28th, 1927, the amendment to the Shellfish Act, known as Chapter 212, became effective. This increases the penalty for illicit removal of shellfish from condemned areas from \$25.00 to \$100.00 for the first offense; the imprisonment clause for second offense remains as in the previous act. In the patrol of condemned areas maintained by this Department and also by the Atlantic City Police Department, very few second offenders have been apprehended, and it is hoped that the penalty is now sufficiently large to deter unscrupulous persons from working in prohibited areas.

In the process of floating shellfish in the brackish waters of Maurice River, it has been the practice to take them up at the beginning of flood tide, when the water is of low salt content. Due to osmosis there is incorporated in the tissue of the oyster approximately 25 per cent added water. Under the Food Inspection Decision of the United States Department of Agriculture, no exception was taken to this practice as long as the shellfish were sold in the shell. During the past three or four years, however, a number of shucking houses have located at Maurice River and Bivalve, and a considerable percentage of oysters now harvested from the Maurice River Cove area are commercially shucked and sold by volume in gallon containers. During the past year the Department of Agriculture have taken exception to the practice of floating oysters which are to be subsequently sent to the shucking houses and opened and sold by volume. Various conferences and hearings have been held pertaining to

this matter, and a proposal that all shucked stock should be sold by count instead of by volume has not been accepted. A further complication of the situation has been caused by the insistence of the United States Public Health Service that the storage of these oysters be done in closed floats where the water may be first rendered safe by sterilization, and thus remove the potential danger due to a breakdown in the scavenger system or to human discharges gaining access to these waters from persons working in close proximity to the floats, as pointed out in the report of this bureau for 1926. In cooperation with this branch of the government service, comprehensive investigations were made of a chlorination system whereby the shellfish could be stored in closed containers in sterilized water. Plans of such a system, together with the cost of installation and operation have been submitted to the industry. This Department was led to believe unless the industry adopted this or some other equally effective system that beginning with the oyster season of 1927 approval of certificates for interstate shipment of shellfish would be withheld by the Public Health Service.

Confronted on one hand by a branch of the Federal Government demanding that the storing of shellfish be done in waters which would not result in the incorporation of added water to the oyster, and by another branch of the government service demanding the removal of the potential source of contamination which could only be done by storing in closed systems, the industry requested an investigation of the waters at the mouth of the river, known as Basket Reach. This reach receives water from the bay through the Maurice River direct and through a wide cut-off to the east. Due to these conditions the waters of the Maurice River at this point at high tide are of nearly as high salinity as the bay water. The new location is two miles from the shipping wharves, there is no habitation along the banks below Bivalve, and if approved it is proposed the same sanitary protection afforded by the scavenger service for boats entering the river be maintained, and that all oyster boats will tie up at Bivalve as in the past.

The results of the investigation indicated there is no appreciable increase in volume and slight diminution of solid content of shell-

fish when stored near the mouth of the Maurice River and taken up at high tide, and the former objection of the United States Department of Agriculture to floating shellfish on the grounds of incorporating excess water apparently had been met. In addition, the new area does not contain those potential sources of pollution which made floating in Long Reach, at Bivalve, undesirable, and it is believed that storage of shellfish in these waters would comply with the sanitary requirements of the United States Public Health Service and permit of their certification for interstate shipments, as in the past.

SOLID CONTENT OF OYSTERS FROM MAURICE RIVER COVE AND AFTER FLOATING DIFFERENT PERIODS IN BASKET REACH,
MAURICE RIVER COVE, MAY 25-27, 1927.

Sample No.	Description.	Vol. 200 mls. drained oysters.	Per cent oysters.	Per cent solid content of oysters.	Salinity as per cent NaCl. liquor.	Salinity as per cent NaCl. oyster meat.	Per cent water in final product. (B).	(B) minus (A).
1	From Moss beds; tide, low water; temp., 17.8° C.; density, 1013.5	1440	1.73	15.24	1.77	0.61	.....	.....
2	From Inner Flats; tide, 1 hr. fl.; temp., 17.8° C.; density, 1013.5	1440	1.73	15.24	1.77	0.61	.....	.....
3	From L. & I. Dead Mans; tide, 1½ hr. fl.; temp., 17.8° C.; density, 1013.5	2880	1.72	16.33	1.74	0.59	.....	.....
4	From Peterson; tide, 2 hr. fl.; temp., 17.8° C.; density, 1013.5	2040	1.72	16.33	1.74	0.59	.....	.....
5	From Original Peterson; tide, 3 hr. fl.; temp., 17.8° C.; density, 1012.5	2040	1.70	20.25	1.90	0.50	.....	.....
6	From Adams, tide, 2 hr. fl.; temp., 17.8° C.; density, 1013.5	2740	1.68	20.25	1.74	0.48	.....	.....
(1) 7	Same as (1) taken up after two low waters in Basket Reach; temp., 19° C.; density, 1008	1530	1.10	16.11	1.13	0.24	13.05	6.75
(2) 8	Same as (1) treated as under (7)	2830	0.7	16.33	1.12	0.22	9.2	8.32
(1) 9	Same as (1) taken up after two low waters in Long Reach; temp., 18.9° C.; density, 1008	1070	16.0	13.68	.57	0.14	24.5	8.5
(2) 10	Same as (2) treated as (9)	3540	20.0	14.65	.50	0.13	25.52	7.48
(1) 11	Same as (1) taken up after two low waters and three hr. fl. Basket Reach; temp., 19.5° C.; density, 1008	1080	1.06	16.7	1.08	0.24	17.73	1.03
(2) 12	Same as (2) treated as under (11)	3160	7.0	16.33	1.05	0.17	12.23	1.23
(3) 13	Same as (3) do.	3160	7.0	16.33	1.04	0.17	12.23	1.23
(4) 14	Same as (4) do.	2220	10.4	17.20	.68	0.00	20.75	10.71
(5) 15	Same as (5) do.	2310	13.2	17.31	1.03	0.18	14.40	1.30
(6) 16	Same as (6) do.	3100	33.1	17.60	1.05	0.18	14.40	1.30
(1) 17	Same as (1) taken up at high water after two low waters (Basket Reach); temp., 18.9° C.; density, 1011	1520	5.6	16.88	1.26	0.33	8.9	3.3
(2) 18	Same as (2) do.	2580	5.0	17.00	1.25	0.32	5.45	.45
(3) 19	Same as (3) treated as under (17)	1090	6.0	16.74	1.20	0.23	11.9	5.0
(4) 20	Same as (4) do.	2040	1.5	18.72	1.18	0.16	10.46	2.46
(5) 21	Same as (5) do.	2830	3.3	17.64	1.20	0.31	11.5	8.2
(6) 22	Same as (6) do.	2830	3.3	17.64	1.20	0.31	11.5	8.2
(1) 23	Same as (1) taken up on 1 hr. ebb after two low waters (Basket Reach); temp., 18.9° C.; density, 1010	1780	23.0	17.44	1.30	0.32	5.98	17.83
(2) 24	Same as (2) do.	2950	5.0	17.77	1.32	0.30	2.84	3.83
(3) 25	Same as (3) do.	2090	-1.8	18.46	1.30	0.30	2.84	3.83
(4) 26	Same as (4) do.	2010	0.0	10.45	1.30	0.22	10.77	10.77
(5) 27	Same as (5) do.	1060	-1.4	10.08	1.30	0.27	5.67	10.67
(6) 28	Same as (6) do.	2430	-1.0	12.16	1.35	0.28	3.80	7.80

Shortly following the completion of this investigation and before the results had been tabulated and studied, the United States Department of Agriculture promulgated a new Food Inspection Decision, requiring that the storing of shellfish must be done in waters of the same salinity as that in which they are grown. The data assembled and the results of the investigation concerning the storing of shellfish in the waters of the Maurice River near its mouth have been forwarded to the United States Department of Agriculture for their consideration in order to ascertain if this area may be interpreted as being satisfactory in view of the new Food Inspection Decision issued.

Shellfish Investigations.—Following are tabulations of bacteriological results obtained on water and oyster samples collected from the various shellfish areas.

Raritan Bay.—Samples of water collected from the approved area extending from Mills Creek to Sandy Hook Light:

Number of samples collected, 313
Number of samples showing bacillus coli in 1 cc., .. 104 = 33.2%

Sandy Hook Bay.—Samples of water collected from the approved area north of Plum Island:

Number of samples collected, 260
Number of samples showing bacillus coli in 1 cc., .. 117 = 45%

The matter of the disposal of the sewage from Fort Hancock, Sandy Hook, has been taken up with the United States Public Health Service, and the War Department intend to install a comprehensive sewage plant for the proper treatment of wastes from the Fort.

Maurice River Section.—Samples of water collected from Maurice River Cove:

Number of samples collected, 93
Number of samples showing bacillus coli in 10 cc., .. 24 = 25.8%
Number of samples showing bacillus coli in 1 cc., .. 15 = 16.1%

Samples of water collected from Long Reach, Maurice River (oyster storage grounds):

Number of samples collected, 165
Number of samples showing bacillus coli in 1 cc., .. 116 = 70.3%
Number of samples showing bacillus coli in 0.1 cc., .. 59 = 35.7%

Samples of water collected from Basket Reach, Maurice River (proposed storage area):

Number of samples collected, 80
Number of samples showing bacillus coli in 1 cc., .. 34 = 42.5%

Tabulation showing the range in salinity of the waters of the Maurice River at Long Reach:

<i>Condition of Tide.</i>	<i>Per Cent Salinity as Na Cl.</i>
½ hour before high water	1.22
½ hour ebb tide	1.30
1½ hours ebb tide	1.25
2½ hours ebb tide	1.10
3½ hours ebb tide	0.87
4½ hours ebb tide	0.58
5½ hours ebb tide	0.37
6½ hours ebb tide	0.23
7 hours ebb tide	0.21
1 hour flood tide	0.30
2 hours flood tide	0.45
3 hours flood tide	0.76
4 hours flood tide	1.04

Tabulation showing the specific gravity, per cent salt and bacillus coli present in samples of water from Basket Reach, near the mouth of the Maurice River:

<i>Tide.</i>	<i>Number Samples Collected.</i>	<i>Specific Gravity.</i>	<i>Per Cent Salt as Na Cl.</i>	<i>Per Cent Showing B. Coli in 1 cc.</i>
Low water,	20	1008	1.10	60
One-half flood,	20	1009	1.21	45
High water,	10	1011	1.45	32
One-half ebb,	30	1010	1.36	34.6

Tabulation of the scores of twenty-seven samples of salt oysters and two hundred samples of floated oysters from the Maurice River area:

<i>Number of samples of salt oysters.</i>	<i>Scored.</i>	<i>Number of samples of floated oysters.</i>
6 = 22.2%	0	0
2 = 7.4%	1	2 = 1%
2 = 7.4%	2	0
4 = 14.8%	3	2 = 1%
2 = 7.4%	4	6 = 3%
4 = 14.8%	5	9 = 4.5%
1 = 3.7%	14	21 = 10.5%

<i>Number of samples of salt oysters.</i>	<i>Scored.</i>	<i>Number of samples. of floated oysters.</i>
0	23	19 = 9.5%
2 = 7.4%	32	11 = 5.5%
0	41	18 = 9%
1 = 3.7%	50	17 = 8.5%
0	140	16 = 8%
1 = 3.7%	230	17 = 8.5%
0	320	18 = 9%
1 = 3.7%	410	16 = 8%
1 = 3.7%	500	28 = 14%
27		200

As sanitary conditions existing at the Maurice River have improved each year, the increase in the numbers of samples of floated oysters showing scores in excess of 50 over previous years cannot be satisfactorily explained. During September, October and part of November, 1926, the weather was unusually warm and shellfish did not go into the state of pre-hibernation and hibernation until considerably later than usual.

Cold Spring Inlet.—Samples of water collected from Cold Spring Inlet:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	7 = 70%
Number of samples showing bacillus coli in 1 cc., ..	3 = 30%

Jarvis Sound.—Samples of water collected from Jarvis Sound:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	4 = 40%
Number of samples showing bacillus coli in 1 cc., ..	1 = 10%

Great Channel.—Samples of water collected from Great Channel:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	2 = 20%
Number of samples showing bacillus coli in 1 cc., ..	0

Great Sound.—Samples of water collected from Great Sound:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	2 = 2%
Number of samples showing bacillus coli in 1 cc., ..	1 = 1%

Main Channel.—Samples of water collected from Main Channel, above Townsend's Inlet:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	7 = 70%
Number of samples showing bacillus coli in 1 cc., ..	2 = 20%

Ludlam's Bay.—Samples of water collected from Ludlam's Bay:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	1 = 10%
Number of samples showing bacillus coli in 1 cc., ..	2 = 20%

Peck's Bay.—Samples of water collected from Peck's Bay:

Number of samples collected,	10
Number of samples showing bacillus coli in 10 cc., ..	10 = 100%
Number of samples showing bacillus coli in 1 cc., ..	0

Great Bay.—Samples of water collected from Great Bay:

Number of samples collected,	55
Number of samples showing bacillus coli in 10 cc., ..	11 = 20%
Number of samples showing bacillus coli in 1 cc., ..	0

Scores obtained on eight samples of oysters taken from Great Bay:

4 scored 0
3 scored 1
1 scored 4

Mullica River.—Samples of water collected from Mullica River in vicinity of floating area:

Number of samples collected,	24
Number of samples showing bacillus coli in 10 cc., ..	4 = 16.6%
Number of samples showing bacillus coli in 1 cc., ..	0

Scores obtained on four samples of oysters taken from Mullica River:

1 scored 0
2 scored 1
1 scored 2

Tuckerton Bay.—Samples of water collected from Tuckerton Bay:

Number of samples collected,	15
Number of samples showing bacillus coli in 10 cc., ..	5 = 33.3%
Number of samples showing bacillus coli in 1 cc., ..	0

Samples of water collected from Tuckerton Creek:

Number of samples collected,	30
Number of samples showing bacillus coli in 1 cc., ..	18 = 60%
Number of samples showing bacillus coli in 0.1 cc., ..	8 = 26.6%

West Creek.—Samples of water collected from West Creek:

Number of samples collected,	20
Number of samples showing bacillus coli in 1 cc., ..	9 = 45%
Number of samples showing bacillus coli in 0.1 cc., ..	0

Scores obtained on three samples of oysters taken from Tuckerton Creek:

5, 14, 23.

Scores obtained on six samples of oysters taken from West Creek:

3 scored 1
2 scored 2
1 scored 4

Lakes Bay.—The waters of Lakes Bay were investigated approximately two months after the city of Pleasantville discontinued emptying sewage into this body of water. From the sanitary survey, if a line is drawn from the southern end of Horserace Island, at the mouth of Great Thorofare, to the northern end of Whirlpool Island, it is believed that the area lying north of this imaginary line will represent the least polluted portion of Lakes Bay. Of the 240 water samples collected from the bay, 44 per cent of those taken north of this imaginary line showed colon bacillus to be present in 1 cc. of water, while in the area south of this imaginary line 70 per cent of the 1 cc. samples were found to contain bacillus coli. In addition, it is not believed that the coli found in the area north of this imaginary line present the same sanitary significance as if found to be derived from human origin.

Following this investigation, the Department rescinded its condemnation order of May 7th, 1923, and under date of January 11th, 1927, condemned that portion of Lakes Bay south of the imaginary line above mentioned, and prohibited the floating of shellfish in any of the ditches tributary to the bay.

Report of the Bureau of Child Hygiene

JULIUS LEVY, M. D., CONSULTANT.

STATISTICAL SUMMARY.

Births and deaths under one year and under one month, stillbirths and maternal deaths per 1,000 live births:

1. Deaths under one year per 1,000 live births—
 - a. For entire State, 70.3
 - b. For infants supervised by Bureau, 42.4
 2. Deaths under one month per 1,000 live births—
 - a. For entire State, 35.0
 - b. For infants supervised by Bureau, 14.1
 3. Stillbirths per 1,000 live births—
 - a. For entire State, 41.4
 - b. For infants supervised by Bureau, 27.1
 4. Puerperal deaths per 1,000 live births—
 - a. For entire State, 5.4
 - b. For mothers supervised by Bureau, 5.2
- 99 nurses supervise annually 4,655 expectant mothers, 20,841 babies and 84,677 school children.
19 are paid by the State Department,
73 are paid by municipalities and
7 are paid by State and municipalities.
- 238 communities are carrying on the State Child Hygiene Program under State supervision.
100 baby keep-well stations have been established where mothers can bring their babies and preschool children.
12 nurses supervise 406 midwives who deliver 20 per cent of the births of the State.
120 volunteer physicians give time to work of the keep-well stations.

During the past year 14 communities assumed the salary of the nurse and requested that the State Department of Health, Bureau of Child Hygiene continue supervision.

ANNUAL REPORT OF NURSES' ACTIVITIES JANUARY 1ST, 1926,
TO DECEMBER 31ST, 1926.

<i>Visits made by nurses,</i>	209,728
To expectant mothers,	18,494
To babies,	103,942
Preschool children,	50,849
To school children,	36,443
<i>Baby Keep-Well Stations—</i>	
Baby visits to the stations,	46,187
Preschool children visits to stations,	12,261
<i>Prenatal Care (Expectant Mothers)—</i>	
Supervised prenatal cases during 1926,	4,655
Placed under supervision during 1926,	3,518
Pregnancies ended,	2,850
Miscarriages,	67
Live births,	2,706
Total deaths of babies under 1 year,	115
Total deaths of babies under 1 month,	38
Maternal deaths,	15
Stillbirths,	77
Cases supervised—address changed before delivery,	154
<i>Attendants at Birth—</i>	
Midwife	903
Doctor or Hospital	1,897
<i>Infant Care—</i>	
Babies supervised during 1926,	20,841
Placed under supervision during 1926,	11,422
Infant deaths,	369
<i>Illnesses and Defects—</i>	
Detected (Including babies, preschool children and older members of family, not including the school child),	8,722
Corrected (Including babies, preschool children and older members of family, not including the school child),	4,294
Cases referred to Doctors,	7,271
<i>Contagious Diseases—</i>	
Suspected cases,	1,313
<i>Late Reported Births,</i>	235
<i>Unreported Births Discovered,</i>	98
<i>Bad Housing and Unsanitary Conditions Discovered,</i>	486
<i>Eye Smears Taken by Nurses,</i>	69
<i>Shick Tests,</i>	147
<i>School Hygiene—</i>	
Number communities where school hygiene work is carried on, ...	120
Number school children supervised,	84,677
Inspections (general, classroom, annual, etc., assisting doctor or nurses working alone),	546,139
Defects detected,	71,457

Defects corrected,	26,338
Illnesses detected,	2,023
Illnesses corrected,	1,609
Pupils excluded,	6,382
Pupils re-admitted,	4,967
Home visits in the interest of school children,	36,443
<i>Nose and Throat Cultures for Diphtheria—</i>	
Nurses assisting doctor or working alone,	909

INFANT MORTALITY RATES.

The infant mortality rate for 1926 was 70.3, which is two points higher than that of 1925. The lowest rate reported for New Jersey since 1910 occurred in 1925 when it was 68.8.

In 1918, when the Department began its intensive campaign in preventative child hygiene work, 15 counties of the 21 had an infant mortality rate of over 100, while only one had a rate below 80.

In 1926 one county had an infant mortality rate over 100; two had rates over 90; four had rates over 80 and seven had rates under 70. One county had an infant mortality rate as low as 58.

Among the five cities with a population over 100,000 Camden shows the highest infant mortality rate, 90.2; Paterson is lowest with 64. Newark, with a population of over 400,000, showed an infant mortality rate of 73.8.

Among the cities with a population between 50,000 and 100,000 the lowest infant mortality rate is shown in East Orange with a rate of 41.7 followed by Passaic with a rate of 58.7.

Among the cities with a population between 25,000 and 50,000 the lowest infant mortality rate is in Irvington, with a rate of 45.8; the highest is in Perth Amboy with a rate of 88.4.

Among the cities with a population between 10,000 and 25,000 the lowest infant mortality rate is reported for Morristown, 40.4; the highest for Asbury Park, 108.8.

MATERNAL MORTALITY.

The maternal mortality rate for 1926 was 5.4 which is eight-tenths of a point lower than that of 1925.

There has been a considerable increase in the number of mothers receiving prenatal care, in the number of mothers delivered in hospitals and a continued reduction of mothers delivered by midwives.

None of the methods developed for the reduction of maternal mortality have yielded sufficiently consistent results to warrant their general adoption. With this in mind the bureau will conduct a special study of the problem in two carefully selected communities with the hope of availing for the State a definite program.

EXTENSION.

The basic principle of the work of the Bureau is to have communities in the State assume responsibility for the child hygiene work in their community. The Bureau has continued the practice of accomplishing this purpose by making demonstrations usually for a period of one year for the purpose of stimulating interest in the work and establishing in the community the methods that have now been vindicated by ten years' experience.

We are again pleased to report that all the communities that have adopted the salaries of the nurses after such demonstrations have requested the State Bureau to continue the technical and professional supervision. This not only has made for uniformity in child hygiene work throughout the State but has increased economy and efficiency particularly for the smaller communities.

There are 99 nurses under State supervision. Of this number 19 are paid by the State Department, 73 by the municipalities and 7 by State and municipalities.

During the year 14 communities assumed the salaries of the child hygiene nurses, viz.:

Rutherford (2)	Pitman
Morristown	Clayton
Gibbstown	Washington
Boonton	Monroe Township
Somers Point	Westville
Northfield	Wenonah
Absecon	Ogdensburg

During the first six months of 1927 the following communities assumed the whole salaries of child hygiene nurses, viz.:

Pitman	Palmyra
Deptford Township	Williamstown
Westwood	Maple Shade
Woodstown	

The demonstration of child hygiene work was established in the following communities, viz.:

Maple Shade	Morris Township
East Newark	Downe Township
Riverdale	Fairton
Pequanock	Succasunna
Lincoln Park	Garwood

During the first six months of 1927 the demonstration of child hygiene work was established in the following communities, viz.:

Secaucus	Oradell
Ewing Township	Pensauken Township
New Milford	

SPECIAL CLASSES.

Special courses have been given during the year to nurses connected with the Bureau. Many other nurses have attended these lectures.

CONTINUATION SCHOOLS.

We have continued our work during the past year with the girls in the Continuation Schools in three districts in the State.

These girls are taught the principles of child hygiene and health prevention and the nurses have been very successful in having corrections made on the girls themselves following a physical examination made by the medical inspector in the schools.

NORMAL SCHOOL WORK.

During the year the teaching of preventive health to the student teachers in the Normal Schools of the State has been extended so that all five schools are now covered.

Each class comprised the senior students who were seen once a week for ten weeks. Some follow-up work has also been done on the student teachers themselves.

This instruction familiarizes the future teachers of the State with the Child Hygiene Program of the State Department of Health. They learn in a practical way the essentials in disease detection and prevention and are prepared to cooperate with nurses in school.

PRESCHOOL CLINICS.

Special effort was made for the May Day Program to emphasize the immunization against diphtheria. In the preschool clinics already established this drive was carried on and special preschool clinics were held in six communities. Total number of children immunized was 704.

In most of the school districts in the State where the child hygiene nurses are working, special clinics for school entrants have been held during the spring months. The medical inspector made the examinations and the nurses did the follow-up work during the summer, thus sending into school in the fall a greater number of physically fit children than would otherwise be possible.

LITTLE MOTHERS' LEAGUE.

There were twenty child hygiene classes conducted throughout the State during the past year with an enrolment of 250. There were ten lessons in each course and the children were presented with a certificate upon the completion of the course.

PRENATAL CENTER.

Despite the extension of child hygiene work throughout New Jersey during the past nine years, the maternal mortality rate has not been lowered appreciably.

After giving this careful consideration and surveying the State it was decided to conduct a special piece of work in connection with the care of the expectant mother. As a result two contrasting communities have been chosen, one of which was started on

June 15th. This is in an industrial section where there is a large foreign population, seven doctors and four midwives.

The other field is distinctly rural. There are no midwives in the county; the women are delivered largely in their own homes and are the type who are not convinced that prenatal supervision is essential.

It is hoped to conduct this experiment for a period of at least five years and to use this as a training field for the nurses under supervision or in the employ of the Bureau of Child Hygiene.

In the industrial section a suitable location has been acquired in which to conduct prenatal clinics. This is being equipped as an up-to-date prenatal clinic and contains a waiting room and dressing room for the patients. The doctors in the town will rotate on service and will use a uniform record card both for the clinic service and their private patients. Classes will be held for the expectant mothers during the coming winter, the subjects to embrace all phases of prenatal care. Arrangements will be made with the demonstration station of the State Agricultural College to have a nutrition worker give a course in diets and food values. Cooperation of the Bureau of Venereal Disease Control has been secured.

CLINTON REFORMATORY FOR WOMEN.

For the fourth year classes have been conducted by the district supervisor of the Bureau of Child Hygiene at the State Reformatory for Women at Clinton, New Jersey.

This consists of a course of twelve lessons, most of which are demonstrations. The women are taught the care of the baby, and are instructed in the principles of prevention through prenatal care.

An examination is given at the end of the course, after which the successful candidates are given a certificate issued by the Bureau of Child Hygiene. This is presented to the women as their term expires in the Reformatory.

BOARDING HOMES.

The licensing and supervision of boarding homes has been continued as indicated in previous reports.

Homes licensed by State Department of Health,	194
Homes recommended for licensing to local boards of health,	37
Homes rejected by State Department of Health,	18
Homes recommended for rejection to local boards of health,	3
Total investigations made,	252

Of the 231 homes licensed, 72 homes were licensed for 1 child
 96 homes were licensed for 2 children
 25 homes were licensed for 3 children
 27 homes were licensed for 4 children
 7 homes were licensed for 5 children
 4 homes were licensed for more than 5 children

The 11 homes licensed for 5 children or more were licensed at the request of the Family Welfare Organizations or other social agencies interested in providing temporary shelter for children until they are permanently placed.

Of the 231 homes licensed, 114 were new homes
 117 were renewals

Number of bonds furnished since amendment was added to the Sanitary Code,	87
Number of discontinued boarding homes,	57

As a result of the recent amendment to the Sanitary Code requiring the placing of a \$1,000 surety bond for every out of State child boarded in New Jersey, 87 bonds were furnished and 57 boarding homes were discontinued. The children boarding in these homes were returned to their proper guardians in other States.

During the year of 1926, 2 difficult boarding homes, one in Long Valley and the other in Point Pleasant, were closed. The children were removed from these homes and returned to their parents. The applications for a license were rejected.

During the year Hawthorne, Passaic County and Pitman, Gloucester County, passed boarding home ordinances.

MIDWIFERY.

In 1926 the supervision of the midwives of New Jersey has continued in accordance with methods established in 1918, with special emphasis on certain phases of their work.

The idea of prosecution or detective work has entirely disappeared. Each year we find the midwives more cooperative and we are glad to say this year that suggestions of value concerning their own status have come from them.

UNLICENSED.

There are 406 licensed supervised midwives and the large number of unlicensed women of a few years ago has been reduced to only six. Of these, two are old offenders and persist in their practice despite frequent fines and jail sentences, two have been referred for prosecution and two are being closely watched for the necessary evidence.

CASES ATTENDED.

Of the 72,386 total births in New Jersey for 1926 the midwives delivered 14,739 or 20.3 per cent.

Year.	Total Births.	Percentage of Births Delivered by Midwives.	
		By Midwives.	by Midwives.
1919,	70,935	30,000	42.2
1920,	76,431	21,571	28.
1921,	78,172	21,106	27.
1922,	74,479	19,205	26.
1923,	74,611	18,265	24.5
1924,	76,530	17,645	23.
1925,	74,193	16,077	21.6
1926,	72,386	14,739	20.3

This is a further decrease in the percentage of women delivered by midwives. Without a doubt the number of cases delivered by midwives will continue to be affected as long as restricted immigration lasts in this country. However, it is only too true that in persuading the midwives to refer their patients to physicians and clinics for physical examinations, to refer their Primipara

to family physician or hospital and in every instance to call in a physician for any abnormality in mother and baby, many patients have engaged with physicians and hospitals for delivery.

MATERNAL MORTALITY.

Of 403 puerperal deaths investigated it was found that in 32 instances or 7.9 per cent. midwives were in attendance at some time during the pregnancy or labor. That is, though they attended 20 per cent of the cases, in only 7 per cent of the maternal deaths were they in attendance at any time. The raising of standards of practice among midwives has been accompanied by a reduction of patients attended by them.

COOPERATION, PRENATAL CASES.

The midwives have reported 1,194 prenatal cases to the supervisors during the year. In many instances these prenatal cases are referred by the supervisor, who is also in charge of the Child Hygiene work in the district, to the nurse for follow-up work. In one large city, where a prenatal center has been established and concentrated work is being carried on among the prenatals of the city, the midwives in large number are referring their cases to their supervisor and she in turn refers the cases directly to the supervisor in charge of the prenatal center. In one instance a midwife over a period of six months referred more than 100 prenatal cases in this way.

PHYSICIANS CALLED.

Of 498 abnormal cases reported by the midwives, in 461 or 92.5 per cent instances a physician was called in. These reports have been made subjects for discussion in the homes and at the monthly meetings of the midwives. In many instances under direction of the doctor the midwife has remained in charge.

SUPERVISION.

The supervisors made 3,549 visits in the supervision of midwives. There are 10 county organizations of midwives. During

the year there were 92 monthly organization meetings with an attendance of 1,069. The special subjects taken up at these meetings were "What a Midwife Should Know About Venereal Diseases", "Valuable Points in Our Every Day Food", "Danger Signs of the Prenatal Period", "How the Midwives Can Cooperate with Local Official Agencies", "Problems of the Adolescent Period."

In nine districts a course of three talks with practical demonstrations in cooking was given by representatives of the New Jersey College of Agriculture. This course was most practical and helpful. Through it the midwives learned the proper way to prepare raw and cooked vegetables, how to prepare nutritious foods for preschool children with many hints in how to overcome difficulties. They also learned how to combine everyday foods in a most nutritious way. Not only will this instruction help midwives to take proper care of their own children but it will enable them properly to advise their patients.

During the year a special study was made of the midwives concerning nationality, age, years in U. S. A., preliminary schooling and actual training. It was found that 20 per cent of the licensed supervised midwives are Italian, which is the largest number of any one nationality. The Slavic group was represented by 58 per cent, while the remaining 22 per cent represented those born in this country, together with a few from countries in northern Europe. In most instances, however, it was found that those born in this country were daughters of midwives. It was also found that only 5 per cent of the number studied had been in this country less than 5 years. This indicates that 95 per cent of the midwives of New Jersey have a fair knowledge of the English language.

In studying the ages of the midwives we made the following groups:

Under 25 years of age,	1.5%
25 to 40 years of age,	31%
40 to 65 years of age,	63.5%
Over 65 years of age,	4%

Thus it was found that the large number of active midwives ranged from 40 to 60 years of age.

In studying the preliminary schooling it was found that:

- 6% of the midwives had finished 4 grades
- 45% of the midwives had finished 5 to 8 grades
- 39% of the midwives had finished full 8 grades
- 10% of the midwives had finished high school or equivalent

The actual training of the midwives of New Jersey was acquired from both foreign schools of midwifery and schools in this country. The foreign schools were mostly connected with government hospitals and universities. The training in this country varied anywhere from the splendid school now operating in connection with the Bellevue Hospital, New York City, to various small schools and correspondence courses which are now out of existence. It was found that 37 per cent had attended foreign schools, while 63 per cent attended the American schools. The length of courses ranged anywhere from six weeks to three years. Of those trained in foreign countries 20 per cent of the midwives had a three-year course, while 54 per cent studied over nine months and 26 per cent less than nine months. Of those trained in this country, only 1 per cent studied for three years, or the equivalent, while 78 per cent studied for nine months and 21 per cent studied less than nine months.

PROSECUTIONS.

In 1926 the State Board of Medical Examiners considered for prosecution upon recommendation of this Department the following cases:

- 2 midwives for failure to use 1% Silver Nitrate solution in eyes of newborn babies.
- 4 midwives for failure to call a physician on an abnormal case.
- 8 midwives for practicing without a license.
- 2 midwives for using a hypodermic.
- 1 midwife for administering drugs.
- 1 midwife for treating and cupping a patient.
- 1 midwife for delivering a case during her period of suspension.
- 2 midwives for performing abortions.

Following are the results:

Revocation of license,	3
Suspension of license,	2
Imposition of fines,	2
Reprimands,	1
Suspended sentences,	4
Pending,	9

The Third Annual Conference of the Midwives was held in the Assembly Chamber of the State House, Trenton, New Jersey. The midwives assembled from all parts of the State for the all-day session.

The morning session was devoted to addresses by the representatives of the department and to the annual reports given by the presidents of the different districts. The subjects of the lectures were conditions in the new born, which require medical attention, History of Midwifery and Prevention of Blindness and the Conservation of Sight.

COOPERATION FOR THE CARE OF CRIPPLES.

During the year the Bureau of Child Hygiene was requested to help the New Jersey Commission for the Care of Cripples in making their initial survey. Accordingly, a form card with perforated stub was prepared to cover data desired by the Commission which included name, address, age, present condition, cause of condition if known and where under treatment. A supply of this record was sent to the 109 nurses under State supervision. By return of these forms it was possible to refer 307 cases to the State Commission. The Child Hygiene nurses have made follow-up visits to arrange for the proper care of many of these cripples.

UNMARRIED MOTHERS.

The uniform system of caring for the unmarried mother and her baby as established with the hospitals and social agencies has continued during the year. There were 1,031 reported illegitimate births. It is gratifying to say this year that the whole State is covered in caring for the unmarried mothers according to the principles established by the Department.

In one district we felt it impossible to approach the hospital for the purpose of notifying a responsible agency for the follow-up on cases after the hospital period because the one established social agency was already overcrowded with work. The community has met this responsibility in a splendid way. An appeal was made to the interested women of the churches of all denominations of the city and after several meetings, it was made possible to secure the funds whereby an additional worker has been added to the local social agency for the purpose of following up the unmarried mother cases.

The three principles adhered to in this phase of our work are as follows:

1. *Breast Feeding.*—It was agreed that measures should be used as far as possible to keep the baby breast fed and in this way prevent the early separation of mother and baby.

2. *Agreement with Hospitals.*—The hospitals have agreed to notify within twenty-four hours of the admission of the expectant unmarried mother the proper accredited social agency for the purpose of following up the case after hospital period.

3. *Agreement with Established Social Agency.*—The Social Agencies have been able to get an early start on these cases and have followed them up in the regular way. All records are filed in the local communities. They are available at any time to the State workers. This plan is now well established and is working in a very satisfactory way.

MATERNITY HOMES.

Total number of licensed homes,	25.
Renewals,	18
Newly licensed,	7

These homes have been regularly supervised during the year.

All maternal and infant deaths, together with stillbirths which have occurred within these homes have been thoroughly investigated. It has always been our aim to limit the midwives in conducting homes of this kind.

At the close of the year the licensed maternity homes of the State were conducted by the following:

Physicians,	1
Nurses,	22
Midwives,	2

Report of the Bureau of Venereal Disease Control

A. J. CASSELMAN, M. D., DR. P. H., CONSULTANT.

Venereal disease case finding, medical treatment, and educational measures continue to be the major activities of the Bureau of Venereal Disease Control. We have continued to urge the employment of venereal disease social workers by local health boards, and have helped municipalities in improving follow-up service. In general, this important function is carried out effectively in the cities and some of the larger boroughs. Individual health workers here and there in rural communities are investigating suspected cases of venereal disease referred to them by us, but in many instances it has been necessary for members of the staff of the Bureau to make investigations for inactive health boards. Like other public health activities, effective venereal disease control in rural and suburban areas awaits the inauguration of a satisfactory rural health administration program.

Physicians continue to report venereal infections in increasing numbers, but during the past year there was a slight drop in the number of case reports received in which the source of infection was named. This may be due either to the carelessness of physicians in failing to obtain and record this important information or to the fact that the proportion of recent to total infections is declining. We have continued to urge upon physicians the importance of obtaining this information.

Fewer case reports have been received in which the infection was reputed to have been contracted in a house of prostitution, and the semi-annual check-ups of brothels running openly in the State indicate that with the exception of two places—Penns Grove and Atlantic City—there has been a great reduction in the number of such places. It may be, therefore, that there have been in fact fewer infections recently contracted from the usual sources of the spread of these diseases. That there is less open

prostitution in the State is due to the diligence of the Department of State Police, the several county prosecutors and their staffs, and many municipal police officials. We wish to acknowledge our indebtedness to these officials for their help in ridding the State of the most fertile sources of venereal infection.

The medical work of the Bureau has been focused upon improvement in the diagnosis and treatment of gonorrhoea in women. These cases have in the past proved to be the most difficult to handle both medically and socially, but we believe that the diagnostic and medical measures now available are sufficient to control the disease, if they are effectively applied.

We have urged that the diagnosis of gonorrhoea in women is best confirmed by smears taken at the close of the menstrual period, if the disease appears to have progressed to the chronic stage. Specimens should be taken from the urethra, the cervix, and any inflamed glands by means of tightly wound, cotton applicators, and the smears should be made by rolling the applicator over the slide to make a thin, quickly drying smear. This test repeated only after succeeding menstrual periods will confirm the diagnosis in a large percentage of suspected cases.

We have advocated the following treatment for women known to be infected or suspected of being infected with gonorrhoea. A cleansing chlorine douche, followed by the insertion of a capsule (containing acriflavine) especially prepared for this purpose by the Bureau of Venereal Disease Control. The patient inserts a tampon daily to insure the continued application of the germicide to the affected parts. This local treatment applied by the patient every evening, supplemented by a weekly examination by the attending physician and the application of silver nitrate to inflamed areas, has proved in our experience an effective routine treatment for uncomplicated cases of gonorrhoea of the female sex organs. It is not only effective therapeutically, but it is also effective in rendering the patient less infectious; hence the distinct value of the measure from a public health standpoint.

Sympathetic interest and cooperation of practicing physicians of the State is being sought by presenting the medical phases of venereal diseases before the State and county medical societies.

The educational work has expanded in several lines during 1926-27. Talks on sex hygiene have been given to boys and girls of the junior high school age, although hitherto they had been confined exclusively to pupils in the senior high school. As a different type of talk is necessary for the younger children, and the subject must be handled in a skillful manner, our speakers have hesitated to undertake the more youthful audiences. However, it is gratifying to report that the lectures went over enthusiastically. Teachers and parents were urged to attend whenever possible, although often they were asked to remain out of sight of the children. The Junior high school groups will be included as an integral part of our program hereafter.

A much larger number of men in industries was reached than in any other of the past five years. During the war and immediately afterwards it was comparatively easy to obtain a presentation of the subject of venereal disease to factory hands. Now it is the reverse, but a splendid start has been made through the whole-hearted cooperation of Y. M. C. A. industrial secretaries. Ordinarily, a maximum of fifteen minutes during the noon period is the only time allotted. The speaker has been giving a tabloid edition of the talk he usually gives to a Kiwanis, Rotary, or Lions Club, in which he stresses the need for parents to assume the responsibility for the early sex training of their children and to speak plainly on the subject of the venereal diseases to the older ones. It is a big subject to put over in fifteen minutes, but, judging from the applause that greets the speaker and the demand for social hygiene pamphlets, there is little doubt of the deep impression created in the minds of the listeners.

Our speakers were also welcomed for the first time in some of the summer camps for boys and girls. This is an opening wedge and more talks will undoubtedly be scheduled the coming season.

For the past two summers the Bureau supplied speakers on venereal disease for the New Jersey National Guard Encampment at Sea Girt. It has always been a difficult matter to arrange for the hour of such lectures. Soldiers and officers are busy practically all the time, and the commanding officers want to have a speaker ready to go on duty at almost any minute. This

is impossible unless one were to spend the whole summer at Sea Girt. In the 1926 encampment the commanding general decided to have the lectures given by the medical officer of each unit. The Bureau supplied films and pamphlets on venereal disease, which were handled under the direction of the Y. M. C. A. secretary. The plan seemed to work satisfactorily.

An effort was made to secure a systematic distribution of pamphlets on sex education and venereal diseases through ministers and physicians by sending a letter to each one whose address could be obtained, calling attention to the pamphlets that the Bureau of Venereal Disease Control circulates free of charge. Help was asked in placing them in the hands of parishioners and patients.

During the season of 1926-1927, 307 lectures were given to 35,095 people, and, altogether, 89,354 pamphlets were distributed.

Report of the Bureau of Vital Statistics.

DAVID S. SOUTH, STATE REGISTRAR.

The activities of the Bureau during the fiscal year just closed have been greatly similar to those of previous years.

Systems of checking for completeness of recording have been elaborated and it is felt that a slightly better percentage has been obtained. Efforts have been made to secure greater cooperation from local representatives and to place birth certificates with the parents of new born babies at an earlier date. This is a great factor in strengthening birth registration.

A triple index of marriage records has been devised and started. This will make possible the location of a certificate even though the husband's name is unknown or badly misspelled or the date of a marriage is missed by several years.

While the number of certificates filed with the Bureau during recent years remains almost stationery due to the decreasing birthrate, the number of copies issued is increasing rapidly. Only six years ago the total for the year was 8,896 and fees received, \$4,051. During the present fiscal year the number increased to 14,819 and the fees to \$6,823. Almost half the certificates were issued gratuitously as the law allows no charge in certain instances.

Continued increase in the statistical data prepared by the Bureau is shown by the number of requests received from various individuals and organizations interested in special studies and work along preventive lines.

Only slight improvements appear in the charts and tables which follow, as it is the policy of the Bureau to only publish data for which there is demand.

GENERAL SUMMARY.

	1920.	1925.	1926.
Births registered, indexed and tabulated,	76,431	74,193	72,386
Marriages registered, indexed and tabulated,	31,327	27,672	28,424
Deaths registered, indexed and tabulated,	40,820	41,749	44,396
Stillbirths registered, indexed and tabulated,	3,221	3,010	3,018
<hr/>			
Total records registered, tabulated and permanently preserved,	151,799	146,624	148,224
Certified copies issued and searches made for which fees were received,	4,664	7,100	7,781
Certified copies issued and searches made in pension and other cases for which no fees were received,	4,232	6,605	7,038
Fees returned to State Treasurer for certified copies and searches,	\$4,051	\$6,502	\$6,823

CHARTS AND TABLES, 1926.

Table 1. Births, marriages and deaths reported, with rates, 1879-1926.
Table 2. Deaths by age periods, with percentage of each period of total deaths.
Chart 1. Total deaths per 1,000 population for 48 years.
Table 3. Deaths of infants under five years of age and percentage of total deaths, 1904-1926.
Chart 2. Deaths under five years of age per 10,000 population for 48 years.
Table 4. Deaths under one year and infant mortality rates, 1906-1926.
Table 5. Infant mortality deaths under one month, stillbirths and maternal mortality by counties, 1926.
Table 6. Infant mortality, deaths under one month, stillbirths and maternal mortality for the ten largest cities of New Jersey, 1926.
Table 7. Infant mortality rates, total births and deaths under one year, by counties and cities having 5,000 or more population, 1926.
Chart 3. Deaths from typhoid fever per 10,000 population for 48 years.
Table 8. Comparison between typhoid fever rates in New Jersey and United States Registration Area, 1916-1925.
Table 9. Typhoid fever in urban and rural districts, 1926.
Table 10. Typhoid fever rates in the counties of New Jersey, 1917-1926.
Chart 4. Deaths from scarlet fever per 10,000 population for 48 years.
Chart 5. Deaths from diphtheria per 10,000 population for 48 years.
Table 11. Average annual rates for counties for deaths from all causes and tuberculosis for forty-eight years, with rates for 1926.
Chart 6. Deaths from tuberculosis of lungs per 10,000 population for 48 years.
Table 12. Cancer and other malignant tumors by age periods and organ affected, 1926.
Chart 7. Deaths from cancer per 10,000 population for 48 years.
Table 13. Suicide by age periods and means employed, 1926.
Table 14. Percentage of deaths of each cause of total deaths and of sex of total.
Table 15. Death rate of total population and of white and colored inhabitants by causes.

Table 16. Deaths by months by causes.

Table 17. Deaths by causes, by days, weeks and months of the first year of life.

Table 18. Deaths under one year of age by months and causes.

Table 19. Births, marriages and deaths and infant deaths by counties, cities boroughs and townships.

Table 20. Deaths by counties and cities according to the Detailed International Classification.

Table 21. Deaths by occupation, age groups and certain selected causes.

Table 22. Deaths by causes, sex, color and age periods, New Jersey, each county and the following municipalities (county figures include cities which follow).

Atlantic City—	Essex County—(Con.)	Monmouth County—
Atlantic City,	Nutley,	Asbury Park,
Hammonton.	Orange,	Long Branch,
Bergen County—	South Orange,	Red Bank.
Englewood,	West Orange.	Morris County—
Garfield,	Gloucester County.	Dover,
Hackensack,	Hudson County—	Morristown.
Ridgewood,	Bayonne,	Ocean County.
Rutherford.	Guttenberg,	Passaic County—
Burlington County—	Harrison,	Clifton,
Burlington City.	Hoboken,	Passaic City,
Camden County—	Jersey City,	Paterson.
Camden City,	Kearny,	Salem County—
Gloucester.	Union City,	Salem City.
Cape May County.	Weehawken,	Somerset County—
Cumberland County—	West New York.	North Plainfield,
Bridgeton,	Hunterdon County.	Somerville.
Millville,	Mercer County—	Sussex County.
Vineland.	Princeton,	Union County—
Essex County—	Trenton.	Elizabeth,
Belleville,	Middlesex County—	Plainfield,
Bloomfield,	Carteret,	Rahway,
East Orange,	New Brunswick,	Summit,
Irvington,	Perth Amboy,	Westfield.
Montclair,	South Amboy.	Warren County—
Newark,		Phillipsburg.

Population.—The estimated mid-year population of the State for 1926 is 3,570,159. This is arrived at by the arithmetic method, using the United States census figures of 1910 and 1920. The estimated population of the counties and certain cities of the State having 5,000 or more inhabitants appears at the foot of the mortality tables for these places. It has been customary in the past to use population estimates furnished by the United

States Bureau of the Census. It is necessary to discontinue this practice as the Bureau no longer desires their estimates published.

Births.—The birthrate for 1926 is 20.27, which is about one point lower than the rate for the previous year which was 21.15. The number of reported births declined from 74,193 to 72,386, a decrease of 1,807. The rate for the colored population according to the best population estimate available is 32.86. As it is well known that the colored population of certain New Jersey cities has been rapidly increasing it is probable that the population estimate is too low. The figure is based upon the United States censuses of 1910 and 1920 and is the best estimate available.

Marriages.—The number of persons married during 1926, per 1,000 population was 15.92, which rate is slightly higher than that for the previous year. The ease and rapidity with which marriage licenses can be secured in certain adjacent States materially affects the New Jersey rate. Economic conditions are also a considerable factor and are undoubtedly partly responsible for the gradual decline which has been occurring in the marriage rate during the past ten years.

Deaths.—The deathrate for the past several years has remained almost stationary. It has fluctuated from a low of 11.49 in 1922 to 12.43 in 1926. It seems likely that we shall experience a continuance of these very favorable rates.

TABLE 1.—POPULATION; BIRTHS, MARRIAGES AND DEATHS REPORTED WITH RATES PER 1,000 POPULATION.

YEAR.	Population.*	BIRTHS.		MARRIAGES.		DEATHS.	
		Number of births reported.	Birth rate per 1,000 population.	Number of marriages.	Persons married per 1,000 population.	Number of deaths.	Death rate per 1,000 population.
1879,	1,020,584	23,116	22.65	7,096	13.91	20,440	20.03
1880,	1,130,802	23,680	20.94	7,968	14.08	18,967	16.77
1881,	1,160,275	23,484	20.24	8,109	13.98	20,812	17.94
1882,	1,189,658	23,108	19.42	8,837	14.86	25,959	21.82
1883,	1,209,048	24,430	20.21	9,166	15.16	23,310	19.28
1884,	1,248,224	25,268	20.20	8,968	14.37	21,716	17.40
1885,	1,278,033	24,077	18.84	8,989	14.07	23,907	18.63
1886,	1,310,431	25,497	19.46	12,351	18.85	22,754	17.35
1887,	1,342,829	27,340	20.36	15,416	22.96	24,331	18.12
1888,	1,375,227	28,074	20.41	16,025	23.31	27,173	19.76
1889,	1,407,625	29,099	20.67	15,726	22.34	26,543	18.86
1890,	1,441,017	30,103	20.89	15,564	21.60	28,530	19.80
1891,	1,478,784	28,882	19.53	15,305	20.70	28,840	19.50
1892,	1,511,653	30,627	20.26	16,082	21.28	32,685	21.62
1893,	1,538,799	32,285	20.98	17,178	22.33	30,596	19.88
1894,	1,578,373	33,662	21.33	16,245	20.58	30,004	19.09
1895,	1,672,942	31,742	18.97	15,873	18.98	30,634	18.31
1896,	1,718,543	31,207	18.16	18,370	21.38	30,767	17.90
1897,	1,764,144	31,595	17.91	18,171	20.60	29,822	16.90
1898,	1,810,008	32,515	17.96	13,213	14.59	27,337	15.11
1899,	1,855,872	29,419	15.84	13,336	14.37	30,999	16.70
1900,	1,883,669	32,270	17.13	14,611	15.51	31,474	16.62
1901,	1,925,781	34,812	18.08	16,539	17.18	31,739	16.48
1902,	1,967,893	35,116	17.84	18,150	18.45	31,319	15.91
1903,	2,016,797	37,242	18.47	19,512	19.35	31,820	15.87
1904,	2,058,909	38,751	18.82	18,919	18.38	35,298	17.14
1905,	2,144,143	39,689	18.51	20,572	19.19	33,864	15.79
1906,	2,196,238	42,677	19.43	21,580	19.65	35,670	16.24
1907,	2,248,331	44,651	19.86	23,649	21.04	37,408	16.63
1908,	2,300,427	47,405	20.61	26,155	22.74	35,597	15.47
1909,	2,352,522	47,598	20.19	29,724	25.27	36,359	15.46
1910,	2,537,167	53,942	21.26	27,912	22.00	39,494	15.57
1911,	2,615,772	58,133	22.22	25,014	19.13	38,612	14.76
1912,	2,694,377	60,073	22.30	26,821	19.91	37,772	14.02
1913,	2,772,981	61,432	22.15	27,697	19.98	39,425	14.22
1914,	2,851,586	65,403	22.94	28,528	20.01	39,967	14.02
1915,	2,877,532	66,476	23.10	27,694	19.25	39,435	13.70
1916,	2,948,016	70,211	23.82	31,169	21.15	43,376	14.71
1917,	3,014,193	75,309	24.98	30,060	19.94	43,551	14.44
1918,	3,080,371	74,549	24.20	23,989	15.58	60,852	19.75
1919,	3,146,547	70,935	22.54	29,281	18.61	39,979	12.71
1920,	3,187,767	76,431	23.97	31,327	19.65	40,820	12.80
1921,	3,251,494	78,172	24.04	27,815	17.10	37,362	11.49
1922,	3,315,223	74,479	22.46	27,114	16.35	40,086	12.09
1923,	3,378,963	74,611	22.08	28,730	17.00	41,294	12.22
1924,	3,442,695	76,530	22.22	27,601	16.03	40,531	11.77
1925,	3,506,427	74,193	21.15	27,672	15.78	41,749	11.90
1926,	3,570,159	72,386	20.27	28,424	15.92	44,396	12.43

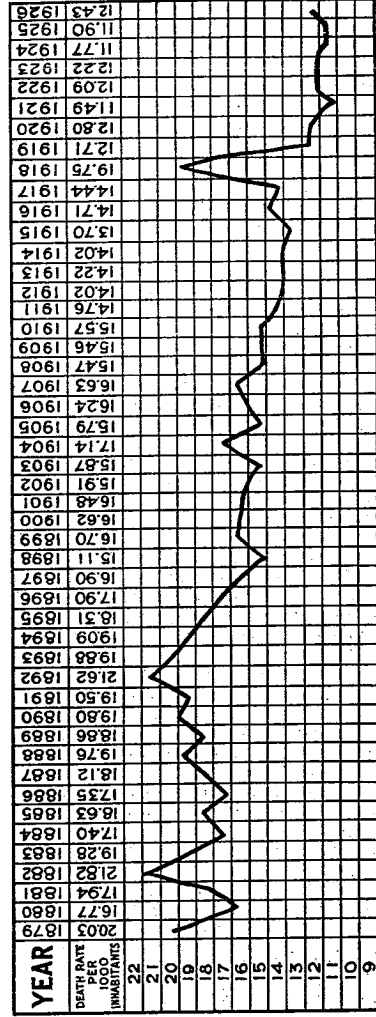
* Estimated except for census years.

41,565

TABLE 2.—TOTAL DEATHS BY AGE PERIODS SHOWING PERCENTAGE OF TOTAL DEATHS.—1924.

		AGE PERIODS.																															
Deaths.....	44,396	Under 1 year.	5,090	1 year.	1,149	2 years.	568	3 years.	302	4 years.	300	5 years.	7,442	5 to 9.	828	10 to 19.	1,388	20 to 29.	2,352	30 to 39.	3,396	40 to 49.	4,505	50 to 59.	6,244	60 to 69.	7,521	70 to 79.	6,015	80 to 89.	3,537	90 and over.	478
	Percentage of total.....	100.0	11.5	2.7	1.3	0.6	0.7	10.8	1.9	3.1	3.1	5.3	7.0	10.4	14.0	10.9	14.0	10.9	14.0	14.0	14.0	10.4	14.0	14.0	14.0	14.0	14.0	14.0	14.0	14.0	14.0	14.0	14.0
Total.	44,396	5,090	1,149	568	302	300	7,442	828	1,388	2,352	3,396	4,505	6,244	7,521	6,015	3,537	478																
Unknown.	3																																

CHART 1.—TOTAL DEATHS PER 1,000 POPULATION FOR 48 YEARS.



Infant Mortality.—The infant mortality rate for 1926 is 70.3, which figure is slightly higher than that for the previous year. While a small increase could naturally be expected to accompany an increased general mortality rate, it is hard to account for an increase of one and one-half points. It is apparent that the declining birthrate is a factor and that increases appear in certain epidemic and respiratory diseases. *Colored Races.*—The infant mortality rate among the colored people of New Jersey during 1926 was 122.1 compared with a rate of 128.3 for the previous year. The colored races have shown excessive mortality rates as long as vital statistics have been collected and analyzed.

Maternal Mortality.—This rate for 1926 is 5.4 and compares with 6.2 for the previous year, 6.0 in 1924 and 5.4 in 1923. It is sincerely hoped that each year will show a gradual decline in deaths from this cause.

Stillbirths.—The number of stillbirths reported annually varies but little, the number during 1926 being 3,018 compared with 3,010 for the previous year. This figure is equivalent to a rate of 41.4 per 1,000 living births, with the rate for the colored population 70.0.

TABLE 3.—NUMBER OF DEATHS AT ALL AGES, UNDER ONE YEAR OF AGE AND UNDER FIVE YEARS OF AGE, AND THEIR PERCENTAGE OF THE TOTAL.

CALENDAR YEAR.	Deaths in New Jersey.				
	All Ages.	Under one year.		Under five years.	
		Number.	Percentage of Total.	Number.	Percentage of Total.
1904.	33,298	7,472	21.2	10,927	31.0
1905.	33,864	6,951	20.5	9,864	29.1
1906.	35,670	7,773	21.8	11,246	31.5
1907.	37,408	7,732	20.7	10,867	29.0
1908.	35,597	7,823	22.0	10,889	30.5
1909.	36,359	7,658	21.1	11,137	30.6
1910.	39,494	8,332	21.1	11,648	29.5
1911.	38,612	7,642	19.8	10,740	27.8
1912.	37,772	7,457	19.7	10,369	27.3
1913.	39,425	7,542	19.1	10,856	27.1
1914.	39,967	7,451	18.6	10,278	25.7
1915.	39,435	7,077	17.9	9,828	24.9
1916.	43,376	7,348	16.9	11,188	25.8
1917.	43,532	7,582	17.4	10,267	23.6
1918.	60,852	8,372	13.8	13,709	22.5
1919.	39,679	6,111	15.3	8,661	21.7
1920.	40,820	6,072	16.3	9,569	23.4
1921.	37,362	5,773	15.4	8,047	21.5
1922.	40,036	5,864	14.6	8,371	20.9
1923.	41,294	5,368	13.0	7,727	18.7
1924.	40,531	5,359	13.5	7,344	21.2
1925.	41,749	5,109	12.3	6,897	16.8
1926.	44,396	5,090	11.5	7,442	16.8

CHART 2.—DEATHS UNDER 5 YEARS OF AGE PER 10,000 POPULATION FOR 48 YEARS.

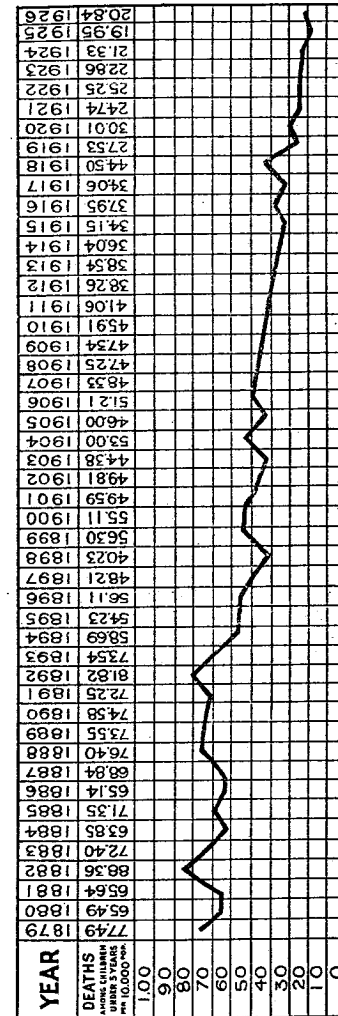


TABLE 4.—BIRTHS REPORTED, DEATHS UNDER ONE YEAR OF AGE AND DEATHS UNDER ONE YEAR PER 1,000 LIVING BIRTHS.

YEAR.	Births reported.	Deaths under 1 year of age.	Infant mortality rates.
1906,	42,677	7,773	182.1
1907,	44,051	7,732	173.2
1908,	47,405	7,823	165.2
1909,	47,508	7,658	161.2
1910,	53,942	8,352	154.8
1911,	58,133	7,642	131.4
1912,	60,073	7,457	124.1
1913,	61,432	7,542	122.7
1914,	65,403	7,431	113.6
1915,	66,476	7,077	106.4
1916,	70,211	7,348	104.7
1917,	75,309	7,582	100.7
1918,	74,549	8,372	112.3
1919,	70,935	6,111	86.1
1920,	70,431	6,672	87.2
1921,	78,172	5,773	73.8
1922,	74,479	5,864	78.7
1923,	74,611	5,368	71.9
1924,	76,530	5,359	70.0
1925,	74,193	5,109	68.8
1926,	72,386	5,090	70.3

TABLE 5.—INFANT MORTALITY, DEATHS UNDER ONE MONTH, STILLBIRTHS AND MATERNAL MORTALITY PER THOUSAND LIVING BIRTHS—1926.

	Deaths Under One Year.	Deaths Under One Month.	Stillbirths.	Puerperal Deaths.
New Jersey,	70.3	35.0	41.4	5.4
Atlantic,	76.8	38.4	47.3	6.1
Bergen,	58.1	32.8	39.2	4.5
Burlington,	80.0	34.4	36.7	4.4
Camden,	79.9	33.7	45.6	7.1
Cape May,	69.3	35.7	37.8	10.5
Cumberland,	87.6	38.2	34.2	8.7
Essex,	66.7	34.3	40.8	5.1
Gloucester,	93.8	50.9	31.5	5.6
Hudson,	66.9	31.8	45.4	5.9
Hunterdon,	93.4	44.9	41.5	3.4
Mercer,	71.7	34.5	42.4	3.8
Middlesex,	71.5	32.3	33.8	3.9
Monmouth,	72.0	38.7	49.0	7.2
Morris,	74.8	45.1	37.1	5.7
Ocean,	102.9	55.9	35.7	11.1
Passaic,	65.0	34.0	42.8	4.5
Salem,	82.6	40.5	49.9	6.2
Somerset,	69.4	38.8	33.3	8.1
Sussex,	86.3	44.9	39.7	6.9
Union,	69.7	37.1	38.5	4.9
Warren,	80.4	31.2	42.0	3.6

TABLE 6.—INFANT MORTALITY, DEATHS UNDER ONE MONTH, STILLBIRTHS AND MATERNAL MORTALITY PER THOUSAND LIVING BIRTHS IN NEW JERSEY AND TEN LARGEST CITIES—1926.

	Deaths Under One Year.	Deaths Under One Month.	Stillbirths.	Puerperal Deaths.
New Jersey,	70.3	35.0	41.4	5.4
Newark,	73.8	37.1	41.6	5.2
Jersey City,	68.4	31.0	47.2	6.9
Paterson,	64.0	30.6	43.2	3.5
Trenton,	79.6	40.0	45.0	2.3
Camden,	90.2	34.0	44.9	5.6
Elizabeth,	79.1	42.3	38.2	6.3
Bayonne,	79.1	42.1	49.3	4.6
Hoboken,	70.4	35.9	28.1	10.1
Passaic,	58.7	22.6	32.7	2.5
Perth Amboy,	88.4	37.7	30.2	1.0

TABLE 7.—INFANT MORTALITY RATES, TOTAL BIRTHS AND DEATHS UNDER ONE YEAR IN THE COUNTIES OF NEW JERSEY AND CERTAIN MUNICIPALITIES HAVING FIVE THOUSAND OR MORE POPULATION—1926.

	Total Births.	Birthrates Per 1,000 Population.	Deaths Under One Year.	Infant Mortality Rates.
Atlantic County,	2131	23.1	162	76.0
Atlantic City,	1152	21.4	83	73.0
Hammonton,	166	22.7	8	48.1
Bergen County,	5658	21.8	329	58.1
Englewood,	292	22.8	15	51.3
Garfield,	682	26.7	48	70.3
Hackensack,	458	22.8	31	67.6
Ridgewood Village,	125	13.8	8	64.0
Rutherford Borough,	159	14.2	2	12.5
Burlington County,	1798	19.5	144	80.0
Burlington,	225	23.6	23	102.2
Camden County,	4626	20.7	370	79.9
Camden City,	2493	19.0	225	90.2
Gloucester City,	259	18.5	22	84.9
Cape May County,	476	24.4	33	69.3
Cumberland County,	1255	19.1	110	87.6
Bridgeton,	293	20.3	19	64.8
Millville,	285	17.6	28	98.2
Vineland,	165	21.1	17	103.0

TABLE 7—Continued.

	Total Births.	Birthrates Per 1,000 Population.	Deaths Under One Year.	Infant Mortality Rates.
Essex County,	15063	20.2	1005	66.7
Belleville Town,	525	26.8	26	49.5
Bloomfield,	565	21.1	33	58.4
East Orange,	862	13.9	36	41.7
Irvington,	786	22.7	36	45.8
Montclair,	612	18.1	34	55.5
Newark,	9539	20.7	704	73.8
Nutley,	299	25.5	37	123.7
Orange,	679	18.9	53	78.0
South Orange,	152	18.7	2	13.1
West Orange,	399	21.3	20	50.1
Gloucester County,	1236	22.2	116	93.8
Hudson County,	13851	20.0	928	66.9
Bayonne,	1945	21.3	154	79.1
Guttenberg,	119	15.9	5	42.0
Harrison,	358	21.6	38	106.1
Hoboken,	1278	18.7	90	70.4
Jersey City,	6734	21.1	461	68.4
Kearny,	631	19.6	37	58.6
Union City,	1032	16.1	57	55.7
Weehawken,	189	11.3	12	63.4
West New York,	754	18.4	39	51.7
Hunterdon County,	578	17.5	54	93.4
Mercer County,	3678	20.1	264	71.7
Princeton,	102	15.8	4	39.2
Trenton,	2575	19.1	205	79.6
Middlesex County,	4051	20.8	290	71.5
Carteret,	267	18.3	23	86.1
New Brunswick,	758	19.4	54	71.2
Perth Amboy,	927	19.2	82	88.4
South Amboy,	149	17.5	8	53.6
Monmouth County,	2220	19.8	160	72.0
Asbury Park,	248	17.8	27	108.8
Long Branch,	329	24.0	24	72.9
Red Bank,	207	19.7	11	53.1
Morris County,	1749	19.8	131	74.8
Dover,	204	17.9	13	63.7
Morristown,	272	21.6	11	40.4
Ocean County,	447	19.6	46	102.9

TABLE 7—Continued.

	Total Births.	Birthrates Per 1,000 Population.	Deaths Under One Year.	Infant Mortality Rates.
Passaic County,	5322	18.4	346	65.0
Clifton,	782	21.5	47	60.1
Passaic,	1192	17.0	70	58.7
Paterson,	2543	17.8	163	64.0
Salem County,	641	14.9	53	82.6
Salem City,	120	15.0	11	91.6
Somerset County,	1108	20.4	77	69.4
North Plainfield,	168	22.5	11	65.4
Somerville,	131	16.7	14	106.8
Sussex County,	579	23.2	50	86.3
Union County,	5086	21.1	355	69.7
Elizabeth,	2198	19.8	174	79.1
Plainfield,	643	19.7	41	63.7
Rahway,	247	20.2	17	68.8
Summit,	203	16.9	13	64.0
Westfield,	214	19.7	6	28.0
Warren County,	833	17.9	67	80.4
Phillipsburg,	355	18.7	28	78.8

Typhoid Fever.—The death rate of this disease for 1926 shows a slight decrease from the rate for the previous year. For 1926, the rate is 0.27 per 10,000 population and for 1925, 0.31. The 1926 rate is considered very favorable, indeed, in view of the 1925 rate of 0.80 for the United States registration area, which area now includes almost the entire population of the country. As is to be expected, the rate in rural communities is considerably higher than that for municipalities of 5,000 or more population. The number of deaths from this disease and others of the international list of classified causes can be secured by counties and cities by referring to Table 20. Table 22 shows the more important causes by sex, color and age periods.

TABLE 8.—COMPARATIVE DEATH-RATES FROM TYPHOID FEVER, PER 10,000 INHABITANTS, IN THE REGISTRATION AREA OF U. S. AND IN N. J. FOR 10 YEARS.

	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925
Registration area of United States,	1.33	1.34	1.25	0.92	0.78	0.90	0.75	0.68	0.67	0.80
New Jersey,	0.66	0.64	0.52	0.29	0.31	0.44	0.38	0.31	0.26	0.31

TABLE 9.—DEATHS FROM TYPHOID FEVER IN URBAN AND RURAL DISTRICTS FOR 1926.

1926.	Estimated population.	Deaths from typhoid fever.	Rate per 10,000 population.
State,	3,570,150	97	0.27
Incorporated municipalities of 5,000 population and above,	2,704,877	67	0.24
Remainder of State,	865,282	30	0.34

CHART 3.—DEATHS FROM TYPHOID FEVER PER 10,000 POPULATION FOR 48 YEARS.

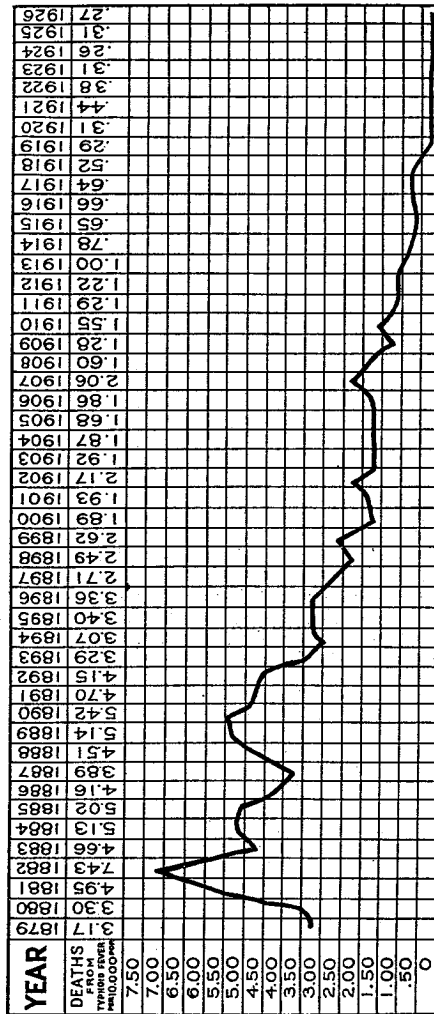


TABLE 10.—DEATHS FROM TYPHOID FEVER, BY COUNTIES, PER 10,000 POPULATION, FOR 10 YEARS.

COUNTIES.										
	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926
Atlantic County,	0.77	0.43	0.42	0.11	0.69	0.57	0.34	....	0.44	0.97
Bergen County,	0.72	0.27	0.16	0.18	0.40	0.17	0.12	0.28	0.23	0.26
Burlington County,	1.65	1.50	0.94	0.82	0.71	1.16	0.45	0.56	0.44	0.54
Camden County,	1.08	0.88	0.52	0.40	0.40	0.49	0.19	0.42	0.36	0.35
Cape May County,	0.41	0.79	....	....	0.51	....	....	0.51	....	0.51
Cumberland County,	1.03	1.88	0.51	0.32	1.92	0.31	0.31	0.31	1.07	0.15
Essex County,	0.37	0.30	0.20	0.18	0.17	0.21	0.22	0.26	0.13	0.16
Gloucester County,	0.75	0.95	0.47	0.20	0.80	0.58	0.95	0.37	0.31	0.60
Hudson County,	0.36	0.30	0.16	0.36	0.34	0.15	0.22	0.19	0.22	0.18
Hunterdon County,	0.91	0.61	....	0.30	0.30	0.30	....	0.91	0.60	....
Mercer County,	0.61	0.46	0.65	0.43	0.60	0.77	0.87	0.22	0.39	0.49
Middlesex County,	0.93	0.70	0.07	0.24	0.35	0.11	0.55	0.27	0.31	0.41
Monmouth County,	1.35	1.71	1.31	0.28	0.75	1.11	0.53	0.36	0.36	0.28
Morris County,	0.61	0.43	0.35	0.36	0.35	0.11	0.93	....	0.34	....
Ocean County,	0.45	....	0.44	0.45	0.89	....	....	0.44	....	0.88
Passaic County,	0.85	0.34	0.18	0.11	0.30	0.25	0.14	0.21	0.24	0.69
Salem County,	1.06	1.06	....	0.80	1.05	1.53	....	0.24	0.47	0.23
Somerset County,	1.86	0.69	....	0.41	1.01	....	....	0.36	0.94	0.18
Sussex County,	0.53	0.69	....	0.40	....	0.78	1.20	....	0.40	....
Union County,	0.47	0.52	0.17	0.44	0.14	0.46	0.31	0.21	0.34	0.41
Warren County, .....	....	0.42	0.41	....	0.44	....	....	....	....	....
The State,	0.64	0.52	0.29	0.31	0.44	0.38	0.31	0.26	0.31	0.27

Malaria.—As the following figures show, deaths during recent years from this affection are practically negligible in this State:

1879,.....	268	1891,.....	180	1903,.....	40	1915,.....	17
1880,.....	293	1892,.....	198	1904,.....	47	1916,.....	10
1881,.....	431	1893,.....	148	1905,.....	21	1917,.....	5
1882,.....	379	1894,.....	162	1906,.....	33	1918,.....	13
1883,.....	290	1895,.....	144	1907,.....	29	1919,.....	2
1884,.....	230	1896,.....	119	1908,.....	30	1920,.....	5
1885,.....	209	1897,.....	132	1909,.....	25	1921,.....	10
1886,.....	243	1898,.....	82	1910,.....	25	1922,.....	3
1887,.....	217	1899,.....	96	1911,.....	25	1923,.....	2
1888,.....	264	1900,.....	84	1912,.....	29	1924,.....	6
1889,.....	203	1901,.....	50	1913,.....	11	1925,.....	3
1890,.....	195	1902,.....	36	1914,.....	10	1926,.....	2

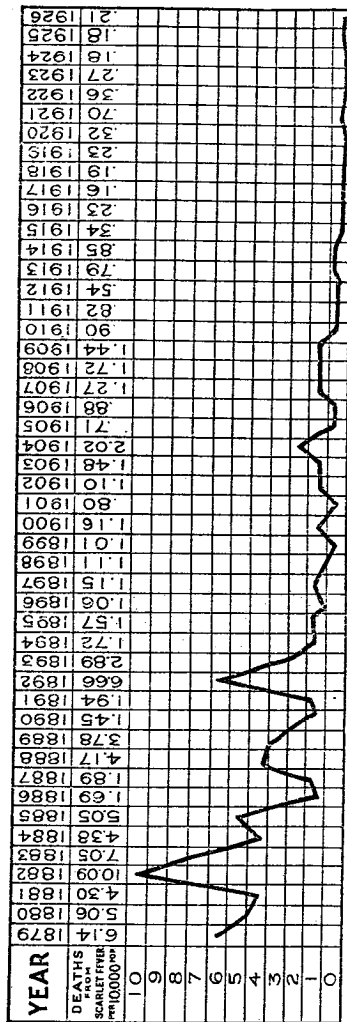
Smallpox.—There were no deaths from smallpox in New Jersey during 1926. During the preceding two years deaths occurred as the disease was prevalent in epidemic form in certain sections of the State.

Measles.—The number of deaths from this affection during 1926 was 410, while during the previous year only 119 deaths were attributed to it. Deaths by age periods follow: Under one

year, 107; one year, 171; two years, 47; three years, 27; four years, 19; five to nine, 35; twenty to twenty-nine, 2; seventy to seventy-nine, 1; eighty to eighty-nine, 1. The experience of a number of years proves that this disease and some others of a similar nature fluctuate greatly from year to year.

Scarlet Fever.—Very little variation is noted in the deathrate from this disease during the past ten years, the average rate for this period being about half of that which prevailed during the previous decade.

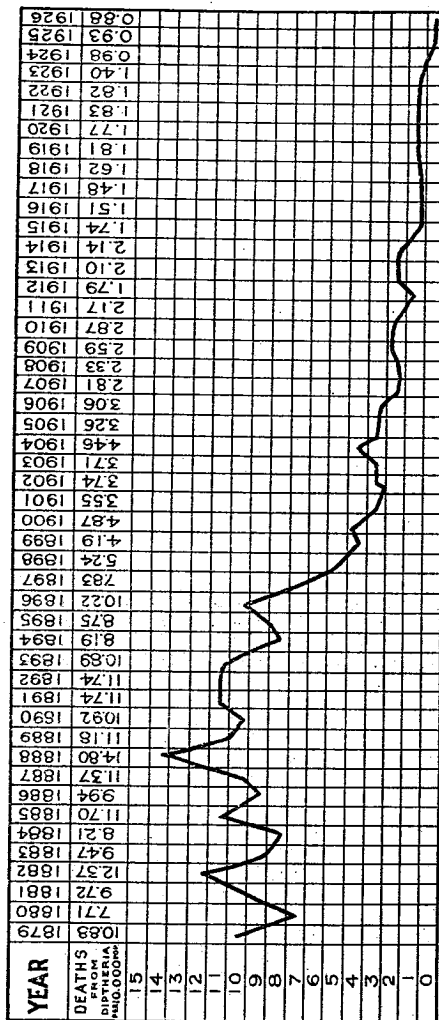
CHART 4.—DEATHS FROM SCARLET FEVER PER 10,000 POPULATION FOR 48 YEARS.



Whooping Cough.—This disease caused 175 deaths during 1926, for 1925 the figure was 245 and for 1924, 267.

Diphtheria.—During 1926, 317 persons died from diphtheria and laryngeal croup, which is equivalent to a rate of 0.88 per 10,000 population, which is the lowest recorded for New Jersey. The rate for the previous year was 0.93. Should the deathrate from diphtheria continue to decrease it will be a splendid tribute to health officials employing the Shick test and immunization when susceptibility is determined.

CHART 5.—DEATHS FROM DIPHTHERIA PER 10,000 POPULATION FOR 48 YEARS.



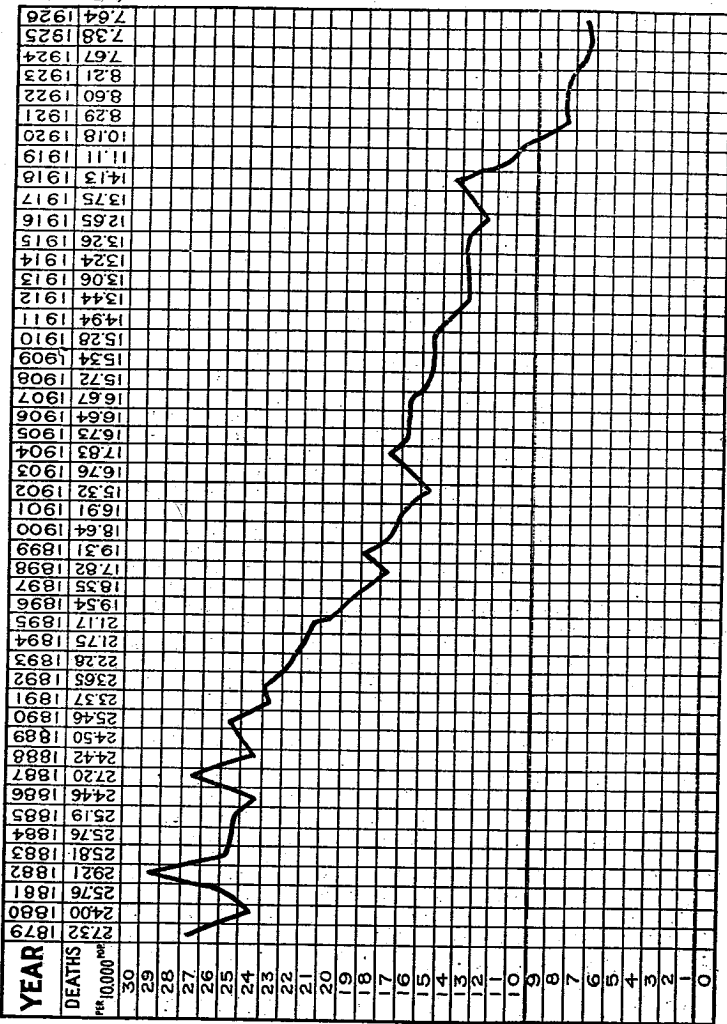
Tuberculosis.—The number of deaths during 1926 from all forms of tuberculosis was 3,093 and from tuberculosis of the lungs alone, 2,731, which is equal to rates per 10,000 population of 86.6 and 76.4. These rates are slightly higher than those for the previous year when the lowest rates in forty-seven years were recorded. The increases are in proportion with the trend of the total deathrate.

TABLE 11.—AVERAGE ANNUAL DEATH-RATES, PER 10,000 POPULATION, FROM ALL CAUSES AND FROM TUBERCULOSIS OF LUNGS FOR 48 YEARS, COMPARED WITH RATES FOR 1926.

COUNTIES.	Average annual death-rate from all causes.	Death-rate from all causes, 1926.	Average annual death-rate from tuberculosis of lungs.	Death-rate from tuberculosis of lungs, 1926.
Atlantic County,	158.8	179.5	13.24	8.80
Bergen County,	132.9	116.9	12.62	6.63
Burlington County,	152.5	136.5	14.51	7.17
Camden County,	168.9	131.8	17.08	7.71
Cape May County,	140.3	193.2	10.84	9.60
Cumberland County,	106.2	143.9	15.64	6.87
Essex County,	159.6	119.5	18.72	8.02
Gloucester County,	144.6	142.3	14.46	5.94
Hudson County,	172.2	114.5	18.86	7.71
Hunterdon County,	139.9	155.6	12.67	6.38
Mercer County,	159.9	121.0	17.97	8.53
Middlesex County,	148.3	111.4	13.07	7.14
Monmouth County,	153.7	169.2	13.64	10.20
Morris County,	121.8	148.1	15.56	9.65
Ocean County,	144.4	194.1	15.84	11.88
Passaic County,	151.9	106.7	15.24	6.94
Salem County,	142.8	106.7	14.62	5.11
Somerset County,	138.2	123.9	12.15	7.57
Sussex County,	125.2	159.8	11.96	6.82
Union County,	131.9	116.4	13.02	6.78
Warren County,	142.4	142.5	11.91	5.83
The State,	154.9	124.3	16.00	7.64

CHART 6.—DEATHS FROM TUBERCULOSIS OF LUNGS PER 10,000 POPULATION FOR 48 YEARS.

1879 1879

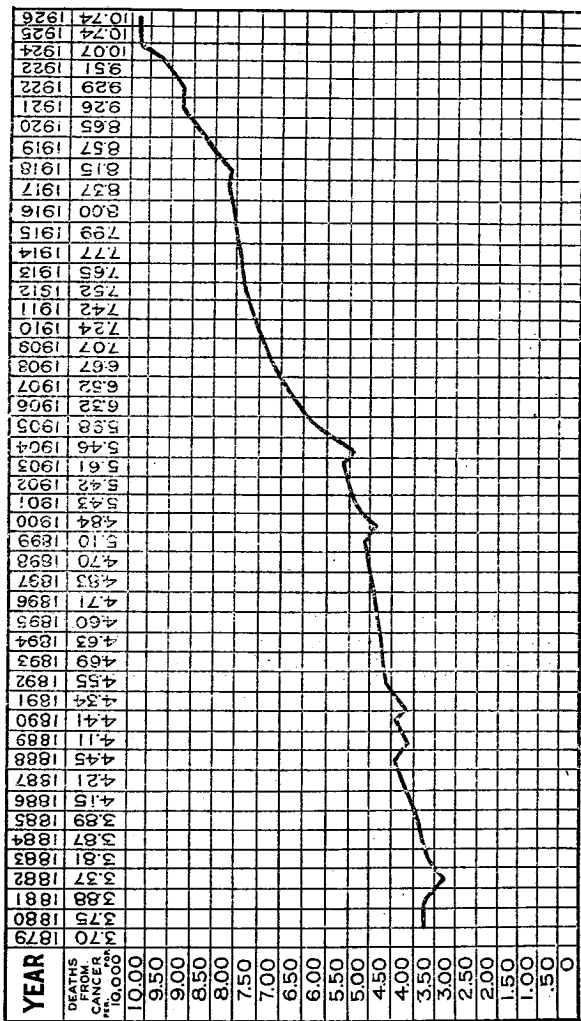


Cancer.—This disease has been steadily increasing during the 48 years of which there is record in New Jersey. Nineteen twenty-six is the first year of the past eight which does not show an increase over the previous year.

TABLE 12.—DEATHS IN NEW JERSEY FROM CANCER AND OTHER MALIGNANT TUMORS, BY ORGAN AFFECTED, 1926.

CANCER AND OTHER MALIGNANT TUMORS.	AGE PERIODS.													Total.					
	Under 1 yr.	1 to 4.	5 to 9.	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.	40 to 44.	45 to 49.	50 to 54.	55 to 59.		60 to 69.	70 to 79.	80 to 89.	90 and over.	
Buccal Cavity,							1	3	8	5	7	18	18	40	28	7	2	125	
Stomach, liver,		2	1		1	1	3	8	29	52	96	7	16	18	40	28	7	2	1403
Peritoneum, intestines, rectum,					6	6	11	23	25	49	60	71	158	122	86	4	4	604	
Female genital organs,					2	2	1	4	20	39	47	73	76	88	131	35	14	1	503
Breast,					2	2	2	9	20	37	43	60	82	75	88	22	5	3	863
Skin,	1		1				1	8	2	1	4	6	20	16	14	5	3	72	
Other organs or organs not specified,	9	4	4	8	7	9	11	24	36	62	66	101	214	162	47	1	785		
Total,	112	7	4	12	17	24	61	140	204	332	434	517	1132	893	229	16	8335		

CHART 7.—DEATHS FROM CANCER PER 10,000 POPULATION FOR 48 YEARS.



Encephalitis Lethargica or Sleeping Sickness.—Fifty-seven deaths are directly attributed to this affection during the year 1926. In 1922, which was the first year that the disease was separately classified, there were 45 deaths, while for 1925, 77 were recorded.

Bright's Disease.—In 1925, for the first time in several years, deaths from acute and chronic nephritis showed a decrease instead of an annual increase of from one to two hundred deaths. The total for that year was 3,511, while for 1926, 3,759 deaths were charged to the disease. This figure is only fifty-nine greater than the 1924 total of 3,700, which was considered true to the trend of the disease.

Suicide.—Deaths by this means increased considerably over the number for the previous year. Hanging or strangulation were responsible for the most deaths with poisonous gases and firearms in second and third places. Below is listed the number of deaths by suicide for the past four years:

1923, 455; 1924, 420; 1925, 398; 1926, 472.

TABLE 13.—DEATHS BY SUICIDE IN NEW JERSEY—1926.

MODE OF DEATH.	AGE PERIODS.											Total.		
	10 to 14.	15 to 19.	20 to 24.	25 to 29.	30 to 34.	35 to 39.	40 to 44.	45 to 49.	50 to 54.	55 to 59.	60 to 69.		70 to 79.	80 to 89.	90 and over.
Solid or liquid poisons,			2	4	5	4	1	3				1		21
Corrosive substances,		1	4	3	5	8	6	2	1	3	7	2		41
Poisonous gas,			1	3	13	5	12	15	19	13	23	7	1	113
Hanging or strangulation,	1	1		7	6	12	13	16	18	14	19	10	1	118
Drowning,					1	1	7	3	6	5	4			27
Firearms,					1	5	7	11	12	11	13	8	9	93
Cutting or piercing instruments,			1	1	1	4	6	5	8	4	4	2	1	34
Jumping from high places,					1	3	2	1	4	2				23
Crushing,				1		1					1			3
Others,														
Total,	2	5	14	27	38	50	63	58	65	43	70	31	6	472

Automobile Fatalities.—The continued increase in the number of motor vehicles in operation in New Jersey is not greatly reflected in the deathrate from automobile accidents. During the year 1926 there were 861 fatalities from the use of automobiles

and seven fatal motorcycle accidents. These figures include deaths due to collision with heavier vehicles, there being 57 persons killed in collisions between automobiles and railroad trains and thirteen in street railway and automobile accidents.

The total of 861 fatalities is 102 greater than for 1923, which is the first year the figures were sufficiently correct to be considered. Pedestrian deaths only increased ten during that period leaving an increase of ninety-two deaths of occupants of vehicles. It is accordingly apparent that either due to better regulation or congestion of traffic deaths are decreasing in the cities and a larger number of drivers and occupants are losing their lives and probably due to accidents upon the open highway where speeding and reckless driving can still be done.

Of the 346 deaths of drivers and occupants of automobiles, 171 or approximately one-half were between fifteen and twenty-nine years of age.

Of the 515 pedestrians who were killed, 179 or 34 per cent were children under fifteen years of age.

PEDESTRIAN DEATHS FROM AUTOMOBILE ACCIDENTS BY AGE PERIODS—1926.

2 Years,	8	15 to 19 Years,	15
3 Years,	14	20 to 24 Years,	7
4 Years,	17	25 to 29 Years,	17
5 Years,	24	30 to 34 Years,	22
6 Years,	28	35 to 39 Years,	34
7 Years,	19	40 to 44 Years,	22
8 Years,	16	45 to 49 Years,	27
9 Years,	16	50 to 54 Years,	33
10 Years,	9	55 to 59 Years,	32
11 Years,	9	60 to 64 Years,	28
12 Years,	11	65 to 69 Years,	45
13 Years,	3	70 Years and over	54
14 Years,	3		

Total, 515

TABLE 14.—PERCENTAGE OF DEATHS BY CAUSES TO TOTAL DEATHS AND BY SEX TO TOTAL, 1925.

Abridged International List Number.	CAUSE OF DEATH.	Percentage of total.	Percentage of total.	
			Males—	Females—
1	Typhoid fever, .....	.2	50.5	49.5
2	Typhus fever,		100.0	
3	Malaria,			100.0
4	Smallpox,			
5	Measles, .....	.9	47.8	52.2
6	Scarlet fever, .....	.2	50.0	50.0
7	Whooping cough, .....	.4	40.0	60.0
8	Diphtheria and croup, .....	.7	48.9	51.1
9	Influenza,	1.6	48.1	51.9
10	Asiatic cholera,			100.0
11	Cholera nostras,			
12	Other epidemic diseases,			
13	Tuberculosis of the lungs,	6.2	54.9	45.1
14	Tuberculous meningitis, .....	.3	48.6	51.4
15	Other forms of tuberculosis, .....	.5	55.8	44.2
16	Cancer and other malignant tumors,	8.6	44.4	55.6
17	Simple meningitis, .....	.3	63.3	36.4
18	Cerebral haemorrhage and softening,	8.6	47.7	52.3
19	Organic diseases of the heart,	18.5	52.0	48.0
20	Bronchitis, .....	.8	45.1	54.0
21	Pneumonia,	6.6	58.8	41.2
22	Other diseases of the respiratory system (tuberculosis excepted),	5.0	54.3	45.7
23	Diseases of the stomach (cancer excepted), .....	.8	67.5	32.5
24	Diarrhoea and enteritis (under 2 years),	1.7	57.5	42.5
25	Appendicitis and typhlitis,	1.3	59.0	41.0
26	Hernia, intestinal obstruction, .....	.8	70.1	29.9
27	Cirrhosis of the liver, .....	.6	68.1	31.9
28	Acute nephritis and Bright's disease,	8.5	50.4	49.6
29	Noncancerous tumors and other diseases of the male genital organs, .....	.5		100.0
30	Puerperal septicaemia (puerperal fever, peritonitis), .....	.3		100.0
31	Other puerperal accidents of pregnancy and labor, .....	.6		100.0
32	Congenital debility and malformations,	5.1	56.3	43.7
33	Senility, .....	.5	37.8	62.2
34	Suicide,	1.1	77.3	22.7
35	Violent deaths (suicide excepted),	6.3	74.3	25.5
36	Other diseases,	11.9	53.7	46.3
37	Unknown or ill-defined diseases, .....	.1	47.8	52.2
38	Total,	100.0	53.1	46.9

TABLE 19—BIRTHS, MARRIAGES AND DEATHS AND DEATHS UNDER ONE YEAR OF AGE BY COUNTIES, CITIES, BOROUGHS AND TOWNSHIPS—1926.

ATLANTIC COUNTY.				
NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Absecon City,	32	18	23	1
Atlantic City,	1152	668	973	83
Buena Vista Township,	61	32	5	2
Corbin City,	4	2	2	1
E. Atlantic City,	1	1	1	1
Egg Harbor City,	71	46	1	12
Egg Harbor Township,	37	6	25	3
Estelle Manor City,	6	1	6	1
Folsom Borough,	4	1	3	1
Galloway Township,	60	9	37	5
Hamilton Township,	39	15	35	2
Hammonctown Township,	166	36	82	8
Linwood Borough,	26	8	21	4
Longport Borough,	1	1	1	1
Margate City,	26	1	1	2
Mullica Township,	31	6	13	1
Northfield City,	36	6	42	3
Pleasantville City,	202	97	158	15
Pt. Republic City,	4	6	7	1
Somers Point City,	29	7	25	1
Venmor City,	65	48	62	10
Weymouth Township,	19	3	11	2
Total,	2131	1016	1651	162

BERGEN COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Allendale Borough,	25	8	19	1
Alpine Borough,	8	8	8	1
Bergenfield Borough,	116	36	49	1
Bogota Borough,	103	31	55	2
Carlstadt Borough,	87	55	52	4
Cliffside Park Borough,	251	49	111	18
Closter Borough,	43	9	6	1
Cresskill Borough,	31	8	17	2
Demarest Borough,	8	8	8	1
Dumont Borough,	81	28	45	5
East Rutherford Borough,	135	48	52	5
East Paterson Borough,	94	27	24	2
Edgewater Borough,	107	34	64	7
Emerson Borough,	23	4	15	1
Englewood City,	292	133	162	15
Englewood Cliffs Borough,	9	4	5	1
Fair Lawn Borough,	63	12	19	1
Fairview Borough,	149	67	93	8
Fort Lee Borough,	137	87	94	7
Franklin Lakes Borough,	3	11	9	1
Garfield Borough,	682	149	219	48
Glen Rock Borough,	40	12	33	3
Hackensack City,	458	238	277	31
Harrington Park Borough,	13	5	7	1
Hasbrouck Heights Borough,	60	17	51	1
Havorth Borough,	11	1	20	2
Hillsdale Borough,	44	11	31	2
Hohokus Borough,	13	10	12	1
Hobokus Township,	18	14	39	1
Leonia Borough,	83	23	45	2
Little Ferry Borough,	62	26	31	6
Lodi Borough,	274	72	100	22
Lodi Township,	31	10	4	4
Lyndhurst Township,	287	94	159	16
Marwood Borough,	47	12	32	1
Midland Park Borough,	71	23	30	4
Midland Township,	26	7	12	1
Montvale Borough,	18	4	16	1
Moonachie Borough,	26	6	15	3
New Milford Borough,	32	14	23	1
North Arlington Borough,	97	23	40	9
Northvale Borough,	15	18	1	1
Norwood Borough,	23	6	8	1
Oakland Borough,	3	7	11	1
Old Tappan Borough,	4	1	4	1

BERGEN COUNTY—Continued.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Oradell Borough,	23	15	22	1
Palisade Park Borough,	97	21	47	6
Paramus Borough,	27	9	19	2
Park Ridge Borough,	19	19	32	3
Ramsey Borough,	38	17	22	2
Ridgefield Borough,	50	21	41	4
Ridgefield Park Borough,	164	64	74	6
Ridgewood Village,	123	57	126	8
Riverside Borough,	31	12	14	1
Rivervale Township,	16	1	12	3
Rockleigh Borough,	1	1	3	1
Rutherford Borough,	159	57	123	2
Saddle River Borough,	45	1	4	1
Saddle River Township,	10	1	19	3
Teaneck Township,	202	54	54	8
Tenafly Borough,	76	40	53	3
Teterboro Borough,	2	1	1	1
Upper Saddle River Borough,	2	4	1	2
Waldwick Borough,	13	13	21	2
Wallington Borough,	203	4	60	13
Washington Township,	4	2	2	1
Westwood Borough,	59	39	39	1
Woodcliff Lake Borough,	13	13	13	1
Woodridge Borough,	35	9	26	1
Wyckoff Township,	35	4	25	2
Total,	5658	1810	3038	329

BURLINGTON COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Bass River Township,	18	4	8	1
Beverly City,	65	17	39	1
Beverly Township,	31	7	23	1
Bordentown City,	84	41	76	9
Bordentown Township,	17	1	19	1
Burlington City,	225	81	192	23
Burlington Township,	51	2	31	8
Chester Township,	94	13	37	4
Chesterfield Township,	7	8	13	1
Cinnaminson Township,	27	8	15	2
Delran Township,	29	2	25	2
Easthampton Township,	11	1	6	2
Edgewater Park Township,	14	6	10	1
Freshum Township,	31	3	14	2
Fieldsboro Borough,	17	1	17	1
Florence Township,	187	36	107	17
Hainesport Township,	15	1	15	1
Lumberton Township,	20	1	12	1
Mansfield Township,	31	13	24	1
Medford Township,	58	12	42	5
Moorestown Township,	121	47	87	11
Mount Laurel Township,	17	4	21	5
New Hanover Township,	34	4	1	2
Northampton Township,	111	48	119	11
North Hanover Township,	13	1	12	1
Palmyra Borough,	101	25	61	5
Pemberton Borough,	11	1	13	1
Pemberton Township,	82	8	29	6
Riverside Township,	150	45	71	7
Riverton Borough,	28	13	28	2
Shamong Township,	7	7	11	2
Southampton Township,	4	1	11	2
Springfield Township,	26	7	25	3
Tabernacle Township,	10	5	10	2
Washington Township,	6	2	13	1
Westampton Township,	8	1	5	1
Willingboro Township,	9	1	11	1
Woodland Township,	10	2	2	1
Wrightstown Borough,	1	2	1	1
Total,	1708	478	1256	144

CAMDEN COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Audubon Borough,	101	31	78	2
Barrington Borough,	49	5	14	1
Bellinawr Borough,	12	...	9	3
Berlin Township,	79	45	38	6
Brooklawn Borough,	28	3	18	4
Camden City,	2493	962	1564	225
Centre Township,	41	7	32	1
Chesilhurst Borough,	7	4	8	...
Clementon Borough,	43	8	28	5
Clementon Township,	1003	310	47	8
Collingswood Borough,	197	51	110	5
Delaware Township,	79	5	42	7
Gibbsboro Borough,	7	7	10	2
Gloucester City,	239	87	191	22
Gloucester Township,	87	18	56	4
Haddonfield Borough,	138	33	96	6
Haddon Heights Borough,	63	13	52	4
Haddon Township,	114	13	79	12
Laurel Springs Borough,	20	6	22	...
Lawnside Borough,	17	4	10	...
Magnolia Borough,	30	7	21	...
Merchantville Borough,	88	41	73	8
Mt. Ephraim Borough,	26	6	8	1
Oaklyn Borough,	51	6	17	1
Pensauken Township,	255	27	144	21
Rummenede Borough,	11	1	11	1
Stratford Borough,	15	4	8	...
Tavistock Borough, .....	...	...	...	...
Voorhees Township,	22	3	17	5
Waterford Township,	54	12	36	4
Winslow Township,	119	7	41	7
Woollylune Borough,	45	7	31	5
Total,	4626	1461	2939	370

CAPE MAY COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Avalon Borough,	5	...	10	...
Cape May City,	31	17	42	3
Cape May Point Borough,	3	...	3	...
Dennis Township,	25	6	28	3
Lower Township,	15	7	18	1
Middle Township,	40	28	45	3
North Wildwood City,	41	6	29	...
Ocean City,	120	48	62	10
Sea Isle City,	13	9	15	2
South Cape May Borough, .....	...	...	...	...
Stone Harbor Borough,	6	...	1	...
Upper Township,	21	12	29	...
West Cape May Borough,	15	2	8	...
West Wildwood Borough,	5	...	2	1
Wildwood City,	93	55	67	7
Wildwood Crest Borough,	10	2	6	...
Woodbine Borough,	27	4	14	1
Total,	476	197	376	33

CUMBERLAND COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Bridgeton City,	293	118	253	19
Commercial Township,	40	22	46	3
Deerfield Township,	33	12	23	3
Downe Township,	27	6	37	2
Fairfield Township,	59	8	34	9
Greenwich Township,	23	4	16	2
Hopewell Township,	45	7	7	3
Lands Township,	108	48	133	13
Lawrence Township,	35	5	28	3
Maurice River Township,	32	6	28	5
Millville City,	285	91	193	28
Stow Creek Township,	19	4	8	1
Upper Deerfield Township,	6	19	23	2
Wineland Borough,	165	66	98	17
Total,	1255	403	943	110

ESSEX COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Belleville Town,	535	163	216	26
Bloomfield Town,	565	217	323	33
Caldwell Borough,	74	30	63	2
Caldwell Township,	10	2	11	...
Cedar Grove Township,	14	5	31	1
East Orange City,	862	378	627	36
Essex Falls Borough,	4	4	8	1
Glen Ridge Borough,	58	16	53	1
Irvington Town,	788	264	409	36
Livingston Township,	25	6	27	1
Maplewood Township,	234	69	120	9
Millburn Township,	811	34	62	3
Montclair Town,	612	287	407	34
Newark City,	9539	4801	5373	704
North Caldwell Borough,	30	2	10	1
Nutley Town,	299	100	168	37
Orange City,	679	314	432	53
Roseland Borough,	6	2	12	...
South Orange Village,	152	48	91	2
Verona Borough,	80	37	59	3
West Caldwell Borough,	28	4	32	2
West Orange Town,	399	81	173	29
Total,	15063	6864	8907	1005

GLOUCESTER COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Clayton Borough,	40	14	32	4
Deptford Township,	61	8	38	8
East Greenwich Township,	28	12	25	2
Elk Township,	15	4	18	3
Franklin Township,	71	10	42	10
Glassboro Township,	86	32	52	7
Greenwich Township,	58	8	23	7
Harrison Township,	23	4	13	2
Logan Township,	23	2	18	1
Mantua Township,	47	8	45	3
Monroe Township,	70	29	48	9
National Park Borough,	42	8	29	9
Newfield Borough,	26	2	8	2
Paulsboro Borough,	159	50	75	12
Pitman Borough,	71	18	66	3
South Harrison Township,	11	1	9	2
Swedesboro Borough,	53	25	37	3
Washington Township,	29	10	19	...
Wenonah Borough,	10	7	11	...
West Deptford Township,	85	5	51	12
Westville Borough,	53	26	32	2
Woodbury City,	152	61	95	14
Woodbury Heights Borough,	11	3	13	...
Woolwich Township,	10	1	9	1
Total,	1236	348	790	116

HUDSON COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Bayonne City,	1945	595	820	154
East Newark Borough,	60	14	83	4
Guttenberg Town,	119	29	63	5
Harrison Town,	358	135	206	38
Hoboken City,	1278	965	871	90
Jersey City,	6734	2398	3673	412
Kearny Town,	631	198	323	37
North Bergen Township,	631	166	315	25
Secaucus Borough,	120	48	73	6
Union City,	1032	726	790	57
Weehawken Township,	160	107	178	12
West New York Town,	754	454	552	89
Total,	13851	6045	7911	928

HUNTERDON COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Alexandria Township,	14	3	11	2
Bethlehem Township,	14	5	5	2
Bloomsbury Borough,	12	1	15	1
Califon Borough,	10	12	7	1
Clinton Town,	8	3	15	1
Clinton Township,	48	11	33	1
Delaware Township,	26	9	38	2
East Amwell Township,	20	7	9	1
Flemington Borough,	46	19	41	8
Franklin Township,	15	3	17	1
Frenchtown Borough,	21	13	17	1
Gen Gardner Borough,	4	3	9	1
Hampton Borough,	15	1	12	1
High Bridge Borough,	22	11	26	3
Holland Township,	18	1	14	3
Kingwood Township,	21	3	9	4
Lamberville City,	106	36	68	11
Lebanon Borough,	2	2	3	1
Lebanon Township,	15	2	20	1
Milford Borough,	11	6	7	1
Raritan Township,	19	2	29	3
Readington Township,	52	18	46	3
Stockton Borough,	13	7	5	1
Tewksbury Township,	10	7	23	2
Union Township,	20	2	16	1
West Amwell Township,	16	3	12	3
Total,	578	189	512	54

MERCER COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
East Windsor Township,	9	2	9	1
Ewing Township,	158	20	75	9
Hamilton Township,	489	79	248	26
Hightstown Borough,	64	14	46	3
Hopewell Borough,	27	13	20	2
Hopewell Township,	61	8	45	5
Lawrence Township,	94	13	66	4
Pennington Borough,	19	7	22	1
Princeton Borough,	102	38	90	1
Princeton Township,	35	4	12	4
Trenton City,	2578	931	1354	205
Washington Township,	21	1	14	1
West Windsor Township,	24	3	16	3
Total,	3678	1153	2212	264

MIDDLESEX COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Carteret Borough,	267	68	125	23
Cranbury Township,	16	4	20	1
Dunellen Borough,	95	44	49	7
East Brunswick Township,	44	1	22	1
Helmetts Borough,	14	15	7	1
Highland Park Borough,	133	36	54	3
Jamesburg Borough,	44	16	40	3
Madison Township,	41	6	21	2
Metuchen Borough,	97	33	69	4
Middlesex Borough,	435	3	3	1
Milltown Borough,	74	29	35	3
Monroe Township,	32	1	8	1
New Brunswick City,	758	377	434	54
North Brunswick Township,	39	4	23	4
Perth Amboy City,	357	367	493	82
Piscataway Township,	147	15	86	8
Plainsboro Township,	18	6	8	1
Raritan Township,	160	19	73	14
Sayreville Borough,	189	40	78	11
South Amboy City,	148	81	97	8
South Brunswick Township,	11	11	37	1
South Plainfield Borough,	42	14	16	2
South River Borough,	192	78	113	16
Spotswood Borough,	16	6	16	6
Woodbridge Township,	476	88	210	38
Total,	4051	1383	2167	290

MONMOUTH COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Allenhurst Borough,	5	2	7	1
Allentown Borough,	8	7	18	2
Asbury Park City,	248	213	226	27
Atlantic Township,	13	7	19	1
Atlantic Highlands Borough,	18	12	19	1
Avenel Borough,	19	10	11	1
Belmar Borough,	59	34	40	3
Bradley Beach Borough,	52	16	48	2
Brielle Borough,	6	1	6	1
Deal Borough,	10	3	11	1
Eatonville Township,	29	15	29	2
Englishtown Borough,	10	11	14	1
Fair Haven Borough,	27	7	29	2
Farmingdale Borough,	12	4	17	1
Freehold Borough,	110	50	108	12
Freehold Township,	25	1	22	1
Highlands Borough,	21	13	28	3
Holmdel Township,	15	5	20	4
Howell Township,	30	16	31	3
Interlaken Borough,	9	1	4	1
Keansburg Borough,	32	24	25	3
Keyport Borough,	62	71	72	2
Little Silver Borough,	15	8	7	1
Long Branch City,	329	149	259	24
Manalapan Township,	23	5	18	1
Manassquan Borough,	43	38	26	1
Marlboro Township,	8	8	27	2
Matawan Borough,	36	22	34	3
Matawan Township,	47	2	22	2
Middletown Township,	102	38	100	10
Millstone Township,	24	5	15	1
Monmouth Beach Borough,	1	1	3	1
Neptune Township,	184	10	153	12
Neptune City Borough,	46	19	17	3
Ocean Township,	21	14	33	2
Oceanport Borough,	3	5	9	1
Raritan Township,	34	8	25	4
Red Bank Borough,	207	112	141	11
Rumson Borough,	26	24	30	2
Sea Bright Borough,	9	12	10	1
Sea Girt Borough,	4	3	7	1
Shrewsbury Borough,	4	2	6	1
Shrewsbury Township,	11	1	9	1
South Belmar Borough,	15	1	9	1
Spring Lake Borough,	28	24	21	1
Union Beach Borough,	21	3	4	1
Upper Freehold Township,	47	4	28	4
Wall Township,	72	19	53	7
West Long Branch Borough,	17	3	20	1
Total,	2220	1093	1891	164

MORRIS COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Boonton Town,	109	47	68	3
Boonton Township,	19	1	5	1
Butler Borough,	82	21	43	8
Chatham Borough,	39	22	44	2
Chatham Township,	8	9	2	1
Chester Township,	12	5	26	1
Denville Township,	26	7	22	2
Dover Town,	204	77	124	13
Florham Park Borough,	14	1	13	2
Hanover Township,	104	52	98	14
Harding Township,	3	2	11	1
Jefferson Township,	24	2	23	2
Kinnelon Borough,	8	1	7	1
Lincoln Park Borough,	28	5	17	1
Madison Borough,	130	42	88	11
Mendham Borough,	19	7	28	5
Mendham Township,	12	2	10	1
Mine Hill Township,	26	2	13	1
Montville Township,	46	8	28	4
Morris Plains Borough,	11	6	14	1
Morristown Town,	272	116	206	11

MORRIS COUNTY—Continued.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Morris Township,	42	15	47	4
Mount Arlington Borough,	12	2	6	...
Mount Olive Township,	10	2	21	...
Mountain Lakes Borough,	17	4	15	3
Netcong Borough,	62	14	26	6
Passaic Township,	38	9	33	3
Pequanock Township,	25	15	15	...
Randolph Township,	26	6	29	2
Rivervale Borough,	24	1	13	2
Rockaway Borough,	23	23	70	6
Rockaway Township,	48	2	39	6
Roxbury Township,	80	19	38	3
Washington Township,	16	4	25	3
Wharton Borough,	69	30	46	8
Total,	1749	572	1304	131

OCEAN COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Barnegat City Borough, .....	...	...	4	...
Bay Head Borough,	8	2	1	...
Beach Haven Borough,	15	6	7	1
Beachwood Borough,	2	1	3	...
Berkeley Township,	15	3	9	2
Brick Township,	18	4	21	3
Dover Township,	51	26	65	3
Eagleswood Township,	6	8	7	1
Harvey Cedars Borough,	1	...	...	...
Island Heights Borough,	9	7	5	...
Jackson Township,	22	6	29	7
Lacey Township,	13	2	12	1
Lakehurst Borough,	15	8	6	...
Lakewood Township,	92	31	115	10
Lavallette Borough,	4	1	2	...
Little Egg Harbor Township,	8	...	13	...
Long Beach Township,	3	1	2	1
Manchester Township,	9	2	8	2
Manitoking Borough, .....	...	...	2	...
Ocean Township,	7	5	...	...
Ocean Gate Borough,	1	1	2	...
Pine Beach Borough,	1	...	...	...
Plumstead Township,	17	9	10	...
Point Pleasant Borough,	46	5	29	6
Point Pleasant Beach Borough,	19	19	18	2
Sea Side Heights Borough,	9	2	2	1
Seaside Park Borough,	7	5	8	2
Ship-Bottom-Beach, Arlington Borough,	3	...	...	...
Stafford Township,	15	6	12	...
Surf City Borough, .....	...	...	...	...
Tuckerton Borough,	23	10	25	2
Union Township,	9	9	20	2
Total,	447	229	441	46

PASSAIC COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Bloomingsdale Borough,	59	23	31	5
Clifton City,	782	192	328	47
Haledon Borough,	57	31	45	7
Hawthorne Borough,	170	70	98	10
Little Falls Township,	75	29	52	7
North Haledon Borough,	28	1	13	...
Passaic City,	1192	639	887	70
Paterson City,	2543	1319	1867	163
Pompton Lakes Borough,	51	17	36	7
Prospect Park Borough,	74	48	41	4
Ringwood Borough,	31	...	18	5
Totowa Borough,	80	9	29	4
Wanaque Borough,	66	16	35	4
Wayne Township,	49	22	43	4
West Milford Township,	31	7	30	4
West Paterson Borough,	53	17	24	5
Total,	5322	2440	3077	346

SALEM COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Alloway Township,	37	5	15	...
Elmer Borough,	17	19	24	...
Elshoboro Township,	5	...	6	1
Lower Alloways Creek Township,	20	2	15	2
Lower Peuns Neck Township,	50	4	41	5
Mannington Township,	33	3	18	4
Oldmans Township,	29	8	17	3
Penns Grove Borough,	133	44	79	16
Pilesgrove Township,	36	11	21	2
Pittsgrove Township,	20	4	24	2
Quinton Township,	27	12	11	1
Salem City,	120	45	122	11
Upper Penns Neck Township,	71	5	29	2
Upper Pittsgrove Township,	22	3	16	4
Woodstown Borough,	25	12	21	...
Total,	641	177	459	53

SOMERSET COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Bedminster Township,	14	4	9	...
Bernards Township,	11	...	21	...
Bernardsville Borough,	60	22	28	5
Bound Brook Borough,	185	74	77	9
Branchburg Township,	15	3	21	...
Bridgewater Township,	29	9	58	7
Far Hills Borough,	7	6	2	...
Franklin Township,	91	14	54	6
Hillsborough Township,	163	21	61	14
Millstone Borough,	2	1	9	...
Montgomery Township,	22	3	20	1
North Plainfield Borough,	168	33	89	11
North Plainfield Township,	7	0	8	...
Peapack-Gladstone Borough,	18	3	16	1
Raritan Borough,	105	33	25	2
Rocky Hill Borough,	8	3	10	3
Somerville Borough,	131	58	130	14
South Bound Brook Borough,	38	3	21	3
Warren Township,	15	6	10	1
Watchung Borough,	3	4	1	...
Total,	1108	353	671	77

SUSSEX COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Andover Borough,	9	5	19	2
Andover Township,	6	1	6	1
Branchville Borough,	8	4	17	1
Byram Township,	8	1	14	2
Frankford Township,	16	1	14	2
Franklin Borough,	110	24	50	14
Fredon Township,	9	1	7	...
Green Township,	11	...	5	...
Hammong Borough,	32	10	7	2
Hampton Township,	12	11	6	1
Hardyston Township,	19	4	9	2
Hopateong Borough,	9	...	8	1
Lafayette Town-ship,	21	3	16	2
Montague Township,	4	...	7	...
Newton Township,	80	34	73	7
Ogdensburg Borough,	31	2	10	2
Sandyston Township,	11	1	13	2
Sparta Township,	17	10	20	1
Stanhope Borough,	17	9	12	...
Stillwater Township,	18	4	5	...
Sussex Borough,	33	17	31	4
Vernon Township,	35	5	22	1
Walpack Township,	2	...	2	...
Wantage Township,	52	6	39	5
Total,	579	152	398	50

UNION COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Clark Township,	22	1	11	...
Cranford Township,	140	48	82	6
Elizabeth City,	2198	827	1216	174
Fanwood Borough,	15	1	12	...
Garwood Borough,	68	10	25	6
Hillside Township,	238	36	100	13
Kenilworth Borough,	49	6	21	5
Linden City,	387	82	124	21
Mountainside Borough,	17	1	6	1
New Providence Borough,	33	6	19	2
New Providence Township,	27	...	11	1
Plainfield City,	643	250	407	41
Rahway City,	247	90	183	17
Roselle Borough,	172	77	95	11
Roselle Park Borough,	142	43	69	8
Scotch Plains Township,	96	20	38	5
Springfield Township,	51	13	38	4
Summit City,	203	77	134	13
Union Township,	144	33	90	21
Westfield Town,	214	71	119	6
Total,	5086	1698	2798	353

WARREN COUNTY.

NAME OF PLACE.	Births.	Marriages.	Deaths.	Deaths under one year.
Allamuchy Township,	14	...	4	...
Alpha Borough,	57	13	14	3
Belvidere Town,	20	11	30	4
Blairstown Township,	24	10	23	1
Franklin Township,	28	2	27	4
Frelinghuysen Township,	11	3	13	2
Greenwich Township,	21	18	15	2
Hackettstown Town,	43	18	54	2
Hardwick Township,	6	3	6	...
Harmony Township,	25	4	19	2
Hope Township,	11	3	12	1
Independence Township,	15	5	10	2
Knowlton Township,	3	5	23	...
Liberty Township, .....	...	...	1	...
Lopatcong Township,	22	3	8	3
Mansfield Township,	12	5	20	2
Oxford Township,	44	9	24	2
Pahaquarry Town, .....	...	...	1	...
Phillipsburg Town,	355	112	285	28
Pohatcong Township,	27	4	23	1
Washington Borough,	57	48	61	4
Washington Township,	13	1	12	...
White Township,	23	6	25	4
Total,	833	282	680	67
State Total,	72386	28424	43286	5080

44, 290

TABLE 20.—DEATHS IN COUNTIES AND CERTAIN SELECTED MUNICIPALITIES, FROM EACH WHICH FOL

Table with columns: State Total, Atlantic County, Atlantic City, Hampton, Bergen County, Englewood, Garfield, Fincenack, Ridgewood, Rutherford, Burlington County, Burlington City, Camden County. Rows list various diseases and death counts.

CAUSE OF DEATH, DETAILED INTERNATIONAL LIST. (COUNTY FIGURES INCLUDE DISTRICTS
LOWS: 1926.

Table with columns: Camden City, Gloucester City, Cape May County, Cumberland County, Bridgeton, Millville, Vineland, Essex County, Haddonfield, East Orange, Irvington, Monclair, Newark, Nutley, Orange, South Orange, West Orange, Gloucester County, Hudson County, Bayonne, Guttenberg, Harrison, Hoboken, Jersey City. Rows list cause of death with detailed counts for each location.

TABLE 20.—DEATHS IN COUNTIES AND CERTAIN SELECTED MUNICIPALITIES, FROM EACH WHICH FOLLOW:

Table with 17 columns representing counties/municipalities and rows listing various diseases such as Pellagra, Diabetes mellitus, and Tuberculosis.

CAUSE OF DEATH, DETAILED INTERNATIONAL LIST. (COUNTY FIGURES INCLUDE DISTRICTS 1926—Continued.

Table with 17 columns representing counties/municipalities and rows listing causes of death such as Aberty Park, Long Branch, and Morris County.

TABLE 20—DEATHS IN COUNTIES AND CERTAIN SELECTED MUNICIPALITIES, FROM EACH WHICH FOLLOW:

Table with columns for various municipalities (e.g., State Total, Atlantic City, Hudson County) and rows listing causes of death (e.g., Diseases of the pharynx and tonsils, Acute nephritis). Includes numerical data for each category.

CAUSE OF DEATH, DETAILED INTERNATIONAL LIST. (COUNTY FIGURES INCLUDE DISTRICTS 1926—Continued.

Table with columns for various municipalities (e.g., Camden City, Gloucester City, Essex County) and rows listing causes of death (e.g., Diseases of the pharynx and tonsils, Acute nephritis). Includes numerical data for each category.

TABLE 20.—DEATHS IN COUNTIES AND CERTAIN SELECTED MUNICIPALITIES, FROM EACH WHICH FOLLOW:

CAUSE OF DEATH, DETAILED INTERNATIONAL LIST. (COUNTY FIGURES INCLUDE DISTRICTS 1923—Continued.

Table with columns for State Total, Atlantic County, Atlantic City, Hamonton, Bergen County, Englewood, Garfield, Hincennesct, Ridgewood, Rutherford, Burlington County, Burlington City, Camden County. Rows list various causes of death such as Congenital malformations, Accidental burns, and Fracture, totaling 44,396 deaths.

Table with columns for Camden City, Gloucester City, Cape May County, Cumberland County, Bridgeton, Millville, Vineland, Essex County, Bellville, Bloomfield, East Orange, Irvington, Montclair, Newark, Nutley, Orange, South Orange, West Orange, Gloucester County, Hudson County, Bayonne, Guttenberg, Harrison, Hoboken, Jersey City. Rows list various causes of death, totaling 15,641 deaths.

TABLE 21.—DEATHS BY OCCUPATIONS

	AGRICULTURE, FORESTRY AND ANIMAL HUSBANDRY.	Farmers.	Farm laborers.	Fishermen and oystermen.	Gardeners, florists, fruit growers and nurserymen.	Other agricultural and animal husbandry pursuits.	EXTRACTION OF MINERALS.	Foremen, overseers and inspectors.	Miners.	Quarry operatives.	MANUFACTURING AND MECHANICAL INDUSTRIES.	Bakers.
Tuberculosis of respiratory system.	10 to 19	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1
Totals	25	10	2	9	5	1	1	1	1	1	7	
Cancer of malignant tumors.	10 to 19	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1
Totals	82	6	7	20	2	3	1	1	1	1	14	
Diseases of the nervous system and organs of special sense.	10 to 19	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1
Totals	161	13	8	24	2	2	2	2	2	2	12	
Diseases of the circulatory system.	10 to 19	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1
Totals	267	29	19	43	10	2	3	2	2	2	33	

AND AGE GROUPS, NEW JERSEY, 1923.

	Blacksmiths, forgemen and hammermen.	Rollermakers.	Brick and stone masons.	Builders and building contractors.	Carpenters, coopers and cabinet makers.	Compositors, linotypers and typesetters.	Dressmakers and seamstresses (not in factory).	Dyers.	Electricians and electrical engineers.	Engineers (stationary).	Gravers.	Millers, grinders, buffers and polishers (metal).	Firemen (except locomotive and fire department).	Glassblowers.	Jewelers, watchmakers, goldsmiths and silver-smiths.	Laborers (general and not specified laborers).	Building and hand trades.	Chemical industries.	City and store industries (excepting potteries).
10 to 19	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals	7	2	16	7	44	2	11	1	11	12	4	1	13	3	10	236	10	4	10
10 to 19	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals	12	3	15	17	97	1	17	1	6	27	2	3	11	1	11	175	4	3	5
10 to 19	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals	13	5	17	19	96	2	6	1	2	25	4	2	10	5	8	236	9	1	3
10 to 19	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20 to 29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
80 and over	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals	37	14	51	23	190	4	20	6	19	47	8	6	27	4	23	471	7	5	6

TABLE 21.—DEATHS BY OCCUPATIONS AND

	Glass industries.	Iron, steel and other metal industries.	Leather industries.	Lumber and furniture industries.	Potteries.	Rubber industries.	Textile industries.	Other industries.	Machinists, millwrights and toolmakers.	Managers, superintendents and foremen (manufacturing).	Manufacturers and officials.	Mechanics (gunsmiths, locksmiths, woodwrights, etc.).
Tuberculosis of the pulmonary system.												
10 to 19												
20 to 29	1											
30 to 39												
40 to 49				1								
50 to 59	1				3							
60 to 69												
70 to 79												
80 and over												
Totals	1	18		1	3	3	1	11	53	18	4	14
Cancer of the malignant tumors.												
10 to 19												
20 to 29												
30 to 39												
40 to 49												
50 to 59												
60 to 69												
70 to 79												
80 and over												
Totals	1	5		1	1	1		4	43	18	17	8
Diseases of the nervous system and the organs of special sense.												
10 to 19												
20 to 29												
30 to 39												
40 to 49												
50 to 59												
60 to 69												
70 to 79												
80 and over												
Totals	1	9		2		1	1	12	50	33	30	12
Diseases of the circulatory system.												
10 to 19												
20 to 29												
30 to 39												
40 to 49												
50 to 59												
60 to 69												
70 to 79												
80 and over												
Totals	15		1	3	3	4	28	99	59	51	28	

AGE GROUPS, NEW JERSEY, 1926—Continued.

	Millers (grain, flour, feed, etc.).	Milliners and millinery dealers.	Molders, founders and casters.	Painters, glaziers, varnishers, enamellers, etc.	Paperhangers.	Plasterers.	Plumbers and gas and steam fitters.	Pressmen (printing).	Roofers and slaters.	Semi-skilled operatives (industry not stated).	Chemical industries.	Cigar and tobacco factories.	Clay and stone industries (excepting potteries).	Clothing industries.	Food industries.	Glass industries.	Iron, steel and other metal industries.	Leather industries.	Lumber and furniture industries.	
10 to 19	1																			
20 to 29	1																			
30 to 39	1																			
40 to 49	1																			
50 to 59	1																			
60 to 69	1																			
70 to 79	1																			
80 and over	1																			
Totals	5	7	34	3	2	12	12	4	25	6	3	3	15	7	7	31	8	2		
10 to 19																				
20 to 29																				
30 to 39																				
40 to 49																				
50 to 59																				
60 to 69																				
70 to 79																				
80 and over																				
Totals	1	3	8	31	8	2	15	9	1	14	5	5	4	14	3	3	26	10	9	
10 to 19																				
20 to 29																				
30 to 39																				
40 to 49																				
50 to 59																				
60 to 69																				
70 to 79																				
80 and over																				
Totals	3	5	35	1	1	13	17	4	4	4	3	2	17	4	5	27	11	9		
10 to 19																				
20 to 29																				
30 to 39																				
40 to 49																				
50 to 59																				
60 to 69																				
70 to 79																				
80 and over																				
Totals	4	7	18	81	2	2	35	22	2	16	10	12	5	30	6	2	47	19	15	

TABLE 21.—DEATHS BY OCCUPATIONS AND

	Motormen.	Officials and superintendents.	Switchmen, enginemen and yardmen.	Ticket and station agents.	Other pursuits.	Express, Post, Telegraph and Telephone.	Express messengers and railway mail clerks.	Lihemen.	Mail carriers.	Telegraph operators.	Telephone operators.	Other pursuits.
Tuberculosis and of the respiratory system.												
10 to 19.....	1		1						1		3	
20 to 29.....	1								1		1	4
30 to 39.....		1										
40 to 49.....												
50 to 59.....			1						1			
60 to 69.....	5											
70 to 79.....												
80 and over.....												
Totals.....	5	5	2	4				3		12	4	
Cancer and other malignant tumors.												
10 to 19.....	1											
20 to 29.....												
30 to 39.....	1									3	1	
40 to 49.....												
50 to 59.....												
60 to 69.....	3											
70 to 79.....	1											
80 and over.....												
Totals.....	1	2	3	6		1	3	2	2	2	1	
Diseases of the stomach and of the organs of special sense.												
10 to 19.....	3											
20 to 29.....	1											
30 to 39.....												
40 to 49.....												
50 to 59.....	1											
60 to 69.....	1											
70 to 79.....												
80 and over.....	1											
Totals.....	5	1	6	11		4		1	2	1	3	
Diseases of the circulatory system.												
10 to 19.....										1	2	
20 to 29.....										1	2	
30 to 39.....												
40 to 49.....	2											
50 to 59.....												
60 to 69.....	1											
70 to 79.....	1											
80 and over.....												
Totals.....	1	2	12	6	16		1	3	9	5	4	7

AGE GROUPS, NEW JERSEY, 1926—Continued.

TRADE.	Bankers, brokers and moneylenders.	Clerks in stores.	Deliverymen.	Laborers.	Rail estate and insurance agents and officials.	Shipmen and stevedores.	Undertakers.	Wholesale and retail dealers.	Other pursuits.	PUBLIC SERVICE (NOT ELSEWHERE CLASSIFIED).	Firemen (fire department).	Laborers (public service).	Marshals, sheriffs, detectives, etc.	Officials and Inspectors (city, county, state, U. S.).	Policemen.	Soldiers, sailors and marines.	Other pursuits.
10 to 19.....	1	2	1		1	13		10				1					3
20 to 29.....	1				1	7		15	1								1
30 to 39.....					1	5		8	1								
40 to 49.....					1	5		8									
50 to 59.....					1	5		8				1					
60 to 69.....	1				1	5		8									
70 to 79.....					1	5		8									
80 and over.....					1	5		8									
Totals.....	2	2	3	2	9	30		55	2		1	3	1	4	2	4	11
10 to 19.....						1		4									
20 to 29.....						1		4									
30 to 39.....						1		4									
40 to 49.....	1	2	1		6	13	1	20						1	2	1	4
50 to 59.....	3				11	20	2	30						5	4	1	19
60 to 69.....	1				3	8	3	20						3	2	1	6
70 to 79.....					2	3	2	6						1			2
80 and over.....					2	3		6						1			2
Totals.....	8	2	3		30	88	3	97	7			2	1	16	7	1	38
10 to 19.....						1		2									
20 to 29.....						2		1									
30 to 39.....						1		2									
40 to 49.....	3				1	3		9						1	1	1	4
50 to 59.....	2				2	3		14						3	3	1	12
60 to 69.....	2	2	2		8	7	1	30						1	4		18
70 to 79.....	1	1	1		3	6		22						4	4		11
80 and over.....	7	2	1		9	7		24						4	4		11
Totals.....	13	6	3	1	31	36	1	122	11		2	3		11	19	1	45
10 to 19.....						1		2									
20 to 29.....	1	2			1	2		4									
30 to 39.....	2				3	1		5									
40 to 49.....	4	1	3	2	5	3	17	29						1	3	3	3
50 to 59.....	6				13	20		70						5	3	1	21
60 to 69.....	2		2		13	22		70						9	7	3	27
70 to 79.....	6	2			11	17	2	58						3	3	1	25
80 and over.....	1				10	3	2	39			1	1		3	1		6
Totals.....	25	10	3	9	57	93	2	277	14		5	9	3	28	16	3	88

TABLE 21.—DEATHS BY OCCUPATIONS AND

	AGRICULTURE, FORESTRY AND ANIMAL HUSBANDRY.	Farmers.	Farm laborers.	Fishermen and oystermen.	Gardeners, florists, fruit growers and nurserymen.	Other agricultural and animal husbandry pursuits.	EXTRACTION OF MINERALS.	Foremen, overseers and inspectors.	Miners.	Quarry operatives.	MANUFACTURING AND MECHANICAL INDUSTRIES.	Bakers.
Pneumonia.	10 to 19,				1			1				
	20 to 29,							1				
	30 to 39,							1				
	40 to 49,							1				
	50 to 59,				1			3				
	60 to 69,	15	3	1	3			1				
	70 to 79,	14	1	1	1			1				
	80 and over,	12										1
Totals,		54	5	3	12	3		6				8
Diseases of the respiratory system (pneumonia and tuberculosis excepted).	10 to 19,											1
	20 to 29,											
	30 to 39,											
	40 to 49,	1	1		1			3				
	50 to 59,	9	3	1	4			1				
	60 to 69,	10	1	1				1				
	70 to 79,	11		1								1
	80 and over,											
Totals,		2	6	2	5	1						3
Diseases of the digestive system.	10 to 19,				1							1
	20 to 29,			1								2
	30 to 39,					2						
	40 to 49,											
	50 to 59,											4
	60 to 69,	1										1
	70 to 79,											1
	80 and over,	6										
Totals,		34	2	1	9	2		1	1			9
Nonvenereal diseases of the genito-urinary system and uretra.	10 to 19,		1	1								
	20 to 29,											
	30 to 39,		1									
	40 to 49,											
	50 to 59,	10		1	4	1						3
	60 to 69,	23						1	1	1		5
	70 to 79,	35						1				3
	80 and over,	24										1
Totals,		103	16	9	12	4		1	4	1		15

AGE GROUPS, NEW JERSEY, 1926—Continued.

	Blacksmith, forgemen and hammermen.	Hollermakers.	Brick and stone masons.	Builders and building contractors.	Carpenters, coopers and cabinet makers.	Compositors, linotypers and typesetters.	Dressmakers and seamstresses (not in factory).	Dyers.	Electricians and electrical engineers.	Engineers (stationary).	Engravers.	Fileers, grinders, buffers and polishers (metal).	Firemen (except locomotive and fire department).	Glassblowers.	Jewelers, watchmakers, goldsmiths and silver-smiths.	Laborers (general and not specified laborers).	Building and hand trades.	Chemical industries.	Clay and stone industries (excepting potteries).
10 to 19,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20 to 29,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
30 to 39,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
40 to 49,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
50 to 59,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
70 to 79,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
80 and over,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Totals,	14	2	18	7	41	1	3	2	11	16			5	9	1	269	8	3	5
10 to 19,																			
20 to 29,																			
30 to 39,																			
40 to 49,	1	1	1	1	3				1							11	1	1	1
50 to 59,	1	1	1	1	3				1							19	1	1	1
60 to 69,	1	1	1	1	3				1							21	1	1	1
70 to 79,	1	1	1	1	3				1							10			
80 and over,	1	1	1	1	3				1							8			
Totals,	2	2	9	4	27		4		2	6		1	1	6	2	1	79	1	3
10 to 19,																			
20 to 29,																			
30 to 39,																			
40 to 49,																			
50 to 59,																			
60 to 69,																			
70 to 79,																			
80 and over,																			
Totals,	4	3	12	11	41		4	3	1	9	16		4	3	1	5	115	3	1
10 to 19,																			
20 to 29,																			
30 to 39,																			
40 to 49,																			
50 to 59,																			
60 to 69,																			
70 to 79,																			
80 and over,																			
Totals,	17	16	22	22	96		1	8	4	7	24		1	5	13	1	7	225	9

TABLE 21.—DEATHS BY OCCUPATIONS AND

Age Group	Occupations											
	Glass industries.	Iron, steel and other metal industries.	Leather industries.	Lumber and furniture industries.	Potteries.	Rubber industries.	Textile industries.	Other industries.	Mechanics, millwrights and toolmakers.	Managers, superintendents and foremen (manufacturing).	Manufacturers and officials.	Mechanics (gunsmiths, locksmiths, wheelwrights, etc.).
Pneumonia.	10 to 19,	1	1				1					
	20 to 29,	3	3				2		3			
	30 to 39,	1	3	1			1		1	6		
	40 to 49,	7	9			2	4		7	9		
	50 to 59,	4	4				1		4	15		
	60 to 69,	4	4				4		3	5		
	70 to 79,	1					1		3	1		
	80 and over,	1					1		2	1		
Totals,	1	38	1		2	5	13	32	23	7	7	
Diseases of the respiratory system (pneumonia and influenza excepted).	10 to 19,											
	20 to 29,						1	1	1			
	30 to 39,				1		3	3	3			
	40 to 49,				1		2	2	2			
	50 to 59,	1	3				1	1	1	8		
	60 to 69,	2	2				1	1	2	2		
	70 to 79,	2	2				1	1	2	1		
	80 and over,	2	2				2	2	3	3		
Totals,	1	8		2	2	6	8	5	8	2		
Diseases of the digestive system.	10 to 19,											
	20 to 29,		1				1	6	1			
	30 to 39,		1				1	4	4	1		
	40 to 49,		3				1	7	3			
	50 to 59,		1				2	4	3			
	60 to 69,		1				2	2	4	2		
	70 to 79,		1				2	1	2	2		
	80 and over,		1				2	2	2	2		
Totals,		5				3	3	27	19	13	4	
Nonvenereal diseases of the genitourinary system and annexa.	10 to 19,											
	20 to 29,		1				1	3	3			
	30 to 39,		1				1	3	3			
	40 to 49,		1				2	2	2			
	50 to 59,		6				1	9	3	4		
	60 to 69,	3	2				3	10	3	3		
	70 to 79,	1	2				3	9	3	11		
	80 and over,	3	1				4	4	4	1		
Totals,	4	11				4	9	41	24	20	15	

AGE GROUPS, NEW JERSEY, 1926—Continued.

Age Group	Occupations																					
	Millers (grain, flour, feed, etc.).	Milliners and millinery dealers.	Molders, founders and casters.	Painters, glaziers, varnishers, enamellers, etc.	Paperhangers.	Plasterers.	Plumbers and gas and steam fitters.	Pressmen (printing).	Roofers and slaters.	Semi-skilled operatives (industry not stated).	Chemical industries.	Cigar and tobacco factories.	Clay and stone industries (except potteries).	Clothing industries.	Food industries.	Glass industries.	Iron, steel and other metal industries.	Leather industries.	Lumber and furniture industries.			
Pneumonia.	10 to 19,																					
	20 to 29,																					
	30 to 39,																					
	40 to 49,																					
	50 to 59,																					
	60 to 69,																					
	70 to 79,																					
	80 and over,																					
Totals,	2	5	20	1	2	17	6	2	12	4	1	2	6	5	2	30	8	1				
Diseases of the respiratory system (pneumonia and influenza excepted).	10 to 19,																					
	20 to 29,																					
	30 to 39,																					
	40 to 49,																					
	50 to 59,																					
	60 to 69,																					
	70 to 79,																					
	80 and over,																					
Totals,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Diseases of the digestive system.	10 to 19,																					
	20 to 29,																					
	30 to 39,																					
	40 to 49,																					
	50 to 59,																					
	60 to 69,																					
	70 to 79,																					
	80 and over,																					
Totals,	1	4	11	1	3	1	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	
Nonvenereal diseases of the genitourinary system and annexa.	10 to 19,																					
	20 to 29,																					
	30 to 39,																					
	40 to 49,																					
	50 to 59,																					
	60 to 69,																					
	70 to 79,																					
	80 and over,																					
Totals,	1	4	24		10	4	1	8		3	1	4	1	1	22	5						

TABLE 21.—DEATHS BY OCCUPATIONS AND

	Potteries.	Rubber Industries.	Textile Industries.	Other Industries.	Shoemakers and cobblers (not in factory).	Stonemasons.	Tailors and tailresses.	Tinsmiths and coppermiths.	Tupholsters.	Other manufacturing and mechanical Industries.	TRANSPORTATION.	Water.
Pneumonia.												
10 to 19.				1						1		
20 to 29.				5								
30 to 39.			1	2								
40 to 49.	1	2	2	2			1					
50 to 59.	1			1						1		
60 to 69.	1			1								
70 to 79.	1			1						1		
80 and over.	1		2	2						1		
Totals.	2	4	15	33	3	2	1	1	3	6		
Disease of the respiratory tract (pneumonia and tuberculosis excepted).												
10 to 19.			1									
20 to 29.			1									
30 to 39.			1		1							
40 to 49.	1		1		1		1					
50 to 59.			1							1		
60 to 69.			1									
70 to 79.	1		1				1			1		
80 and over.	1		1			3						
Totals.	3	1	17	12	4		7	1		1		
Diseases of the digestive system.												
10 to 19.			1									
20 to 29.		1	1									
30 to 39.	1	1	3									
40 to 49.	1		3		1		1					
50 to 59.			3									
60 to 69.		1	3		2							
70 to 79.			6		1		2			2		
80 and over.			6		1		2					
Totals.	2	3	23	14	5		9	1	4	9		
Nonvenereal diseases of the genito-urinary system and annexa.												
10 to 19.		1	1									
20 to 29.			1									
30 to 39.			1									
40 to 49.			4									
50 to 59.	4		10									
60 to 69.	3		16									
70 to 79.	1		4									
80 and over.	1		3									
Totals.	7	3	35	44	14	8	12	2	4	15		

AGE GROUPS, NEW JERSEY, 1928—Continued.

	Boatmen, canal men, sailors and deck hands.	Loughboymen and stovedores.	Other parants.	Road and Street.	Coachmen and hack drivers, draymen, teamsters and expressmen.	Chauffeurs.	Contractors and foremen (road building).	Garage keepers and managers.	Laborers (road building) and street cleaners.	Livery stable keepers and managers, hostlers and stable hands.	Other parants.	Railroad.	Baggage men and freight agents.	Brakemen.	Conductors.	Foremen, overseers and inspectors.	Laborers.	Locomotive engineers.	Locomotive firemen.	
10 to 19.																				
20 to 29.																				
30 to 39.																				
40 to 49.																				
50 to 59.																				
60 to 69.																				
70 to 79.																				
80 and over.	1																			1
Totals.	1	7	4		19	12		1	6	1		2		2	1	1	4	1		1
Disease of the respiratory tract (pneumonia and tuberculosis excepted).																				
10 to 19.																				
20 to 29.																				
30 to 39.																				
40 to 49.																				
50 to 59.																				
60 to 69.																				
70 to 79.																				
80 and over.																				1
Totals.	1	3			5	6		1				1		1	1		6	2		1
Diseases of the digestive system.																				
10 to 19.																				
20 to 29.																				
30 to 39.																				
40 to 49.																				
50 to 59.																				
60 to 69.																				
70 to 79.																				
80 and over.																				2
Totals.	4	4	4		18	16		2	1	2	3	4		1	1	3	2	5	7	
Nonvenereal diseases of the genito-urinary system and annexa.																				
10 to 19.																				
20 to 29.																				
30 to 39.																				
40 to 49.																				
50 to 59.																				
60 to 69.																				
70 to 79.																				
80 and over.																				1
Totals.	6	3	14		17	10		1	2	5				2	3		3	9	5	1

TABLE 21.—DEATHS BY OCCUPATIONS AND

Summary.	All other diseases and deaths.										Violent deaths (suicides excepted).										Totals.							
	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 and over.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 and over.												
883	118	60	174	34																								
10 to 19.	5	5	1	2	1	1	1																					
20 to 29.	13	6	1	1	1	1	1																					
30 to 39.	23	10	1	1	1	1	1																					
40 to 49.	38	14	6	12	4	4	4																					
50 to 59.	112	21	13	38	11	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60 to 69.	207	31	11	63	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
70 to 79.	398	26	16	38	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
80 and over.	214	8	11	15	4																							
Totals.	118	60	174	34																								

AGE GROUPS, NEW JERSEY, 1926—Continued.

Violent deaths (suicides excepted).										All other diseases and deaths.										Summary.											
10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 and over.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 and over.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 and over.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 and over.
1	1	1	1	1	1	1	1																								
1	1	1	1	1	1	1	1																								
1	1	1	1	1	1	1	1																								
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1	1	1	1	1	1	1	1																								
1	1	1	1	1	1	1	1																								
1	1	1	1	1	1	1	1																								

TABLE 21.—DEATHS BY OCCUPATIONS AND

	Motormen.	Officials and superintendents.	Switchmen, flagmen and yardmen.	Ticket and station agents.	Other pursuits.	Express, Post, Telegraph and Telephone.	Express messengers and railway mail clerks.	Linemmen.	Mail carriers.	Telegraph operators.	Telephone operators.	Other pursuits.
Suicide.												
10 to 19,												
20 to 29,					1							
30 to 39,												
40 to 49,					1							
50 to 59,	1				2				1	1		
60 to 69,					1							
70 to 79,					1							
80 and over,												
Totals,	1	1		4					1	1		
Violent deaths (suicide excepted).												
10 to 19,												
20 to 29,						2	2				1	1
30 to 39,		1	10			1	10					
40 to 49,	1		1	1		1	1		1	1		
50 to 59,			1			2	2					
60 to 69,				2		1	1					
70 to 79,						2	2					
80 and over,												1
Totals,	1	11	1	6		3	16	3	3	2	2	2
All other diseases and causes of death.												
10 to 19,												
20 to 29,	1										2	
30 to 39,												
40 to 49,			1					1				
50 to 59,	1											
60 to 69,												
70 to 79,				1				1				
80 and over,	1							1				2
Totals,	3	7	1	5				4	3	2	2	
Summary.												
10 to 19,	3	2	1	1	1	1	1	1	1	1	1	1
20 to 29,	3	1	10	4	7	2	11	1	1	1	1	5
30 to 39,	3	1	15	4	7	2	11	1	1	1	1	5
40 to 49,	4	1	15	4	7	2	11	1	1	1	1	5
50 to 59,	5	1	15	4	7	2	11	1	1	1	1	4
60 to 69,	6	1	26	5	12	3	18	2	2	2	2	6
70 to 79,	3	1	14	3	12	1	11	1	1	1	1	2
80 and over,	1	1	3		10		1	1	1			2
Totals,	28	6	75	20	72	15	26	26	20	23	22	

AGE GROUPS, NEW JERSEY, 1926—Continued.

	TRADE.	Bankers, brokers and moneylenders.	Clerks in stores.	Deliverymen.	Laborers.	Real estate and insurance agents and officials.	Salesmen and saleswomen.	Undertakers.	Wholesale and retail dealers.	Other pursuits.	PUBLIC SERVICE (NOT ELSEWHERE CLASSIFIED).	Firesmen (fire department).	Laborers (public service).	Marshals, sheriffs, detectives, etc.	Officials and inspectors (city, county, state, U. S.).	Police.	Soldiers, sailors and marines.	Other pursuits.	
10 to 19,																			
20 to 29,																			
30 to 39,																			
40 to 49,																			
50 to 59,																			
60 to 69,																			
70 to 79,																			
80 and over,																			
Totals,	2	1	1	1	1	5	14		32	3		1	1			3	2	6	
10 to 19,	7	0	7	8	7	25	2	56	7			5	9	1	6	18	15	33	
20 to 29,	1	1	1	1	1	4	4	16	2			1	1		1	6	4	11	
30 to 39,	1	1	1	1	1	4	4	14	2			1	1		1	3	3	8	
40 to 49,	1	1	1	1	1	3	3	11	1			1	1		1	2	2	6	
50 to 59,	1	1	1	1	1	3	3	10	1			1	1		1	3	3	10	
60 to 69,	1	1	1	1	1	2	2	9	1			1	1		1	2	2	7	
70 to 79,	1	1	1	1	1	2	2	10	1			1	1		1	2	2	8	
80 and over,	1	1	1	1	1	1	1	3	1			1	1		1	1	1	4	
Totals,	6	6	6	6	6	10	42	2	108	9		3	3	1	10	13	2	22	
10 to 19,	10	2	2	2	2	13	4	4	1			2	2		1	1	3	18	
20 to 29,	7	2	2	2	2	43	4	14	3			2	2		1	1	8	11	
30 to 39,	7	2	2	2	2	43	4	14	3			2	2		1	1	8	11	
40 to 49,	11	9	7	7	7	21	45	1	91	9		4	4		1	10	19	33	
50 to 59,	13	9	5	5	5	22	69	4	147	18		8	8		1	19	4	43	
60 to 69,	13	3	3	3	3	49	80	6	243	13		5	5		26	23	2	77	
70 to 79,	17	3	3	3	3	51	78	1	227	16		6	6		25	23	2	117	
80 and over,	24	2	2	2	2	31	41	4	164	9		2	2		21	13	3	65	
Totals,	51	54	31	29	29	384	17	965	70			29	50	11	98	114	34	322	

TABLE 21.—DEATHS BY OCCUPATIONS AND

	PROFESSIONAL SERVICE.											
	Architects.	Authors, editors and reporters.	Chemists, assayers, etc.	Civil and mining engineers and surveyors.	Clergymen.	Dentists.	Designers, draftsmen and inventors.	Lawyers, Judges and Justices.	Musicians and teachers of music.	Photographers.	Physicians and surgeons.	Teachers and other educators.
Suicide.	10 to 19											1
	20 to 29											1
	30 to 39			1								1
	40 to 49											1
	50 to 59		1									1
	60 to 69											1
	70 to 79											1
	80 and over							1			1	
Totals		1	3	1	1	1	1		1	1	4	
Violent deaths (suicide escaped).	10 to 19											
	20 to 29											1
	30 to 39			1								
	40 to 49		1		1							
	50 to 59		1		1		2	2	2		1	
	60 to 69		1		1						1	
	70 to 79		1		1			1	1		1	
	80 and over		1		1						1	
Totals		1		1				1		1		
All other diseases and causes of death.	10 to 19	3	2	1	5	1	3	3	7	1	5	
	20 to 29											
	30 to 39		1	1	1				1		1	
	40 to 49	1	1		1			1			1	
	50 to 59	2	1		1		2	2	1		3	
	60 to 69	1		2	3		1	1	3	1	3	
	70 to 79	1		1	1		2	2	1		1	
	80 and over			4	1		1	4	1		1	
Totals	3	3	1	13	4	1	5	8	2	8	11	
Summary.	10 to 19	3	3	1	13	4	1	5	8	2	8	11
	20 to 29											
	30 to 39	1	1	1	1		3	1	7	3	1	11
	40 to 49	1	4	6	3		3	4	8	2	6	14
	50 to 59	1	5	3	7		5	7	8	11	4	12
	60 to 69	1	4	5	5		3	10	18	6	15	29
	70 to 79	3	10	3	13		3	6	16	12	5	21
	80 and over	5	6	5	23		7	4	23	13	1	36
Totals	13	33	29	97	22	30	79	63	19	67	151	

AGE GROUPS, NEW JERSEY, 1926—Continued.

	AGE GROUPS, NEW JERSEY, 1926—Continued.																				
	Other professional and semi-professional pursuits.	DOMESTIC AND PERSONAL SERVICE.	Barbers, hairdressers and manicurists.	Bartenders.	Hotel keepers and managers.	Housekeepers and stewards.	Janitors and sextons.	Laundresses and laundresses.	Porters (except in stores).	Restaurant, cafe and lunch room keepers.	Saloonkeepers.	Servants.	Waiters.	Other pursuits.	CLERICAL OCCUPATIONS.	Agents, canvassers and collectors.	Bookkeepers, cashiers and accountants.	Clerks (except clerks in stores).	Other clerical pursuits.	Grand Totals.	
10 to 19						6															4
20 to 29						14															36
30 to 39				1		16		1													56
40 to 49						17		1													112
50 to 59						12		1													102
60 to 69						12															56
70 to 79						12															22
80 and over						12															4
Totals	6	5	2		62	5		2	1	1			7	1	5		1	1	6	2	421
10 to 19						4															122
20 to 29						30															391
30 to 39						43															496
40 to 49						46															338
50 to 59						38															357
60 to 69						49															319
70 to 79						38															211
80 and over						34															126
Totals	12	8	1	2	291	7	6	3	2				12	9	12		13	39	8	1894	
10 to 19						19															69
20 to 29						233															391
30 to 39						250															496
40 to 49						205															474
50 to 59						204															494
60 to 69						208															531
70 to 79						149															296
80 and over						57															130
Totals	27	12	3	9	1393	9	10	7	3			15	7	11		3	18	79	13	2869	
10 to 19						77		1	4				17	4							459
20 to 29						745		9	2			50	9	5							2085
30 to 39						2,122		7	11			2	41	22	13						3166
40 to 49						1,311		14	19	18	13	1	80	37	23						4250
50 to 59						917		16	20	14	14	2	41	22	20						3567
60 to 69						811		14	19	14	13	2	66	10	36						6020
70 to 79						449		4	6	6	2	2	47	3	20						4224
80 and over						87						2	16	2	2						1947
Totals	227	119	26	32	10335	134	84	80	52			10	420	98	143		44	265	694	154	27758

TABLE 22.—TABULATION OF DEATHS IN NEW JERSEY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns: Cause of Death, Total, Male, Female, Color, Age Periods (Under 1 year to 5+ years), and Unknown. Includes causes like Typhoid fever, Tuberculosis, and Cancer.

Total resident deaths, 44,390. Estimated population, 3,370,165. Rate per 1,000 population, 12.43.

TABULATION OF DEATHS IN ATLANTIC COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns: Cause of Death, Total, Male, Female, Color, Age Periods (Under 1 year to 5+ years), and Unknown. Includes causes like Typhoid fever, Tuberculosis, and Cancer.

Total resident deaths, 1,657. Estimated population, 91,963. Rate per 1,000 population, 17.55.

TABULATION OF DEATHS IN BERGEN COUNTY FOR 1986, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.		AGE PERIODS.										Total	Color, if other than white.	Female.	Male.	Total.			
	Male.	Female.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.						40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	7	4	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
4	21	0	12	1	4	13	13	20	1	1	1	1	1	1	1	1	1	1	1	1
5	5	1	4	1	1	3	4	4	1	1	1	1	1	1	1	1	1	1	1	1
6	30	13	17	1	1	3	4	17	1	1	1	1	1	1	1	1	1	1	1	1
7	40	22	18	1	4	3	4	18	1	1	1	1	1	1	1	1	1	1	1	1
8	18	6	11	3	2	2	2	9	1	1	1	1	1	1	1	1	1	1	1	1
9	172	89	86	16	1	1	1	20	51	36	28	24	9	3	1	1	1	1	1	1
10	13	8	5	2	1	1	1	4	5	1	1	1	1	1	1	1	1	1	1	1
11	204	190	164	5	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
12	7	4	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
13	223	81	182	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
14	623	306	309	6	2	1	1	6	17	15	30	40	10	10	20	56	80	45	1	1
15	115	5	110	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
16	103	97	90	14	22	13	4	3	1	1	1	1	1	1	1	1	1	1	1	1
17	108	52	59	6	28	10	5	4	2	4	2	4	5	3	13	13	11	1	1	1
18	31	24	7	2	2	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1
19	35	37	18	3	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20	27	20	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
21	236	114	122	9	3	1	1	4	7	2	5	10	4	6	2	6	3	4	1	1
22	29	1	29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
23	18	8	8	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
24	164	90	74	5	182	1	1	164	1	1	1	1	1	1	1	1	1	1	1	1
25	8	8	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
26	202	80	123	10	0	4	8	6	24	11	22	26	18	20	21	23	18	12	1	1
27	47	2	45	1	4	10	5	5	6	11	22	10	20	55	55	85	43	27	4	1
28	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
29	3632	1888	1403	111	329	60	33	23	26	481	50	127	163	191	313	411	530	470	234	26

Estimated population, 559,376. Total resident deaths, 5,033. Rate per 1,000 population, 11.85.

TABULATION OF DEATHS IN ENGLEWOOD FOR 1986, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.		AGE PERIODS.										Total	Color, if other than white.	Female.	Male.	Total.				
	Male.	Female.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.						40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
4	21	0	12	1	4	13	13	20	1	1	1	1	1	1	1	1	1	1	1	1	1
5	5	1	4	1	1	3	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1
6	30	13	17	1	1	3	4	17	1	1	1	1	1	1	1	1	1	1	1	1	1
7	40	22	18	1	4	3	4	18	1	1	1	1	1	1	1	1	1	1	1	1	1
8	18	6	11	3	2	2	2	9	1	1	1	1	1	1	1	1	1	1	1	1	1
9	172	89	86	16	1	1	1	20	51	36	28	24	9	3	1	1	1	1	1	1	1
10	13	8	5	2	1	1	1	4	5	1	1	1	1	1	1	1	1	1	1	1	1
11	204	190	164	5	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
12	7	4	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
13	223	81	182	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
14	623	306	309	6	2	1	1	6	17	15	30	40	10	10	20	56	80	45	1	1	1
15	115	5	110	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
16	103	97	90	14	22	13	4	3	1	1	1	1	1	1	1	1	1	1	1	1	1
17	108	52	59	6	28	10	5	4	2	4	2	4	5	3	13	13	11	1	1	1	1
18	31	24	7	2	2	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
19	35	37	18	3	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
20	27	20	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
21	236	114	122	9	3	1	1	4	7	2	5	10	4	6	2	6	3	4	1	1	1
22	29	1	29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
23	18	8	8	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
24	164	90	74	5	182	1	1	164	1	1	1	1	1	1	1	1	1	1	1	1	1
25	8	8	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
26	202	80	123	10	0	4	8	6	24	11	22	26	18	20	21	23	18	12	1	1	1
27	47	2	45	1	4	10	5	5	6	11	22	10	20	55	55	85	43	27	4	1	1
28	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
29	3632	1888	1403	111	329	60	33	23	26	481	50	127	163	191	313	411	530	470	234	26	1

Estimated population, 12,736. Total resident deaths, 102. Rate per 1,000 population, 12.66.

TABULATION OF DEATHS IN BURLINGTON COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged Interna-tional List No.	CAUSE OF DEATH.	AGE PERIODS.												Total.	Male.	Female.	Color, if other than white.				
		AGE PERIODS.																			
		Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.					60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	Typhoid fever.																				
2	Typhus fever.																				
3	Malaria.																				
4	Smallpox.																				
5	Scarlet fever.																				
6	Diphtheria and croup.																				
7	Whooping cough.																				
8	Epidemic typhus.																				
9	Influenza.																				
10	Cholera nostras.																				
11	Cholera asiatica.																				
12	Other epidemic diseases.																				
13	Tuberculosis of the lungs.																				
14	Tuberculosis meningitis.																				
15	Tuberculosis of the brain.																				
16	Cancer of the stomach.																				
17	Simple meningitis.																				
18	Cerebral hemorrhage and softening.																				
19	Organic diseases of the heart.																				
20	Pneumonia.																				
21	Other diseases of the respiratory system (tuberculosis excepted).																				
22	Disease of the stomach (cancer excepted).																				
23	Appendicitis and typhlitis (under 2 years).																				
24	Hernia, intestinal obstruction.																				
25	Chlorosis of the liver.																				
26	Non-specific and syphilitic diseases of the female genital organs.																				
27	Puerperal septicemia (puerperal fever, peritonitis).																				
28	Other diseases of pregnancy and labor.																				
29	Concealed abortion.																				
30	Septicemia.																				
31	Suicide.																				
32	Violent deaths (suicide excepted).																				
33	Unknown or ill-defined diseases.																				
34	Unknown.																				
Total.		1238	888	350	111	144	31	17	12	3	207	26	41	40	73	120	145	200	216	154	10

Rate per 1,000 population, 1926.

Total resident deaths, 1,256.

Estimated population, 91,881.

TABULATION OF DEATHS IN BURLINGTON CITY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged Interna-tional List No.	CAUSE OF DEATH.	AGE PERIODS.												Total.	Male.	Female.	Color, if other than white.			
		AGE PERIODS.																		
		Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.					60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	Typhoid fever.																			
2	Typhus fever.																			
3	Malaria.																			
4	Smallpox.																			
5	Scarlet fever.																			
6	Diphtheria and croup.																			
7	Whooping cough.																			
8	Epidemic typhus.																			
9	Influenza.																			
10	Cholera nostras.																			
11	Cholera asiatica.																			
12	Other epidemic diseases.																			
13	Tuberculosis of the lungs.																			
14	Tuberculosis meningitis.																			
15	Tuberculosis of the brain.																			
16	Cancer of the stomach.																			
17	Simple meningitis.																			
18	Cerebral hemorrhage and softening.																			
19	Organic diseases of the heart.																			
20	Pneumonia.																			
21	Other diseases of the respiratory system (tuberculosis excepted).																			
22	Disease of the stomach (cancer excepted).																			
23	Appendicitis and typhlitis (under 2 years).																			
24	Hernia, intestinal obstruction.																			
25	Chlorosis of the liver.																			
26	Non-specific and syphilitic diseases of the female genital organs.																			
27	Puerperal septicemia (puerperal fever, peritonitis).																			
28	Other diseases of pregnancy and labor.																			
29	Concealed abortion.																			
30	Septicemia.																			
31	Suicide.																			
32	Violent deaths (suicide excepted).																			
33	Unknown or ill-defined diseases.																			
34	Unknown.																			
Total.		102	108	80	80	23	7	4	3	1	30	6	14	13	23	25	29	28	16	1

Rate per 1,000 population, 1926.

Total resident deaths, 102.

Estimated population, 5,824.

TABULATION OF DEATHS IN ESSEX COUNTY FOR 1896, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns: Abridged Intern-., Cause of Death, Color, Sex, Age Periods, Total. Includes sub-totals for 'Under 1 year', '1 year', '2 years', '3 years', '4 years', 'Under 5 years', '5 to 9', and '10 to 19'.

Estimated population, 74,201.

Total resident deaths, 8,907.

Rate per 1,000 population, 11.95.

TABULATION OF DEATHS IN BELLEVILLE FOR 1896, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns: Abridged Intern-., Cause of Death, Color, Sex, Age Periods, Total. Includes sub-totals for 'Under 1 year', '1 year', '2 years', '3 years', '4 years', 'Under 5 years', '5 to 9', '10 to 19', '20 to 29', '30 to 39', '40 to 49', '50 to 59', '60 to 69', '70 to 79', '80 to 89', and '90 and over'.

Estimated population, 13,521.

Total resident deaths, 216.

Rate per 1,000 population, 11.06.

TABULATION OF DEATHS IN IRVINGTON FOR 1898, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.	AGE PERIODS.										Color, if other than white.	Total.	Male.	Female.	Total resident deaths, 400.	Rate per 1,000 population, 11.92.	
		AGE PERIODS.																
		Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.							40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	Typhoid fever,																	
2	Typhus fever,																	
3	Salaria,																	
4	Malaria,																	
5	Scarlet fever,																	
6	Diphtheria and croup,																	
7	Whooping cough,																	
8	Infuenza,																	
9	Asiatic cholera,																	
10	Cholera nostras,																	
11	Other epidemic diseases,																	
12	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
13	Tuberculosis meningitis,																	
14	Other forms of tuberculosis,																	
15	Cancer and other malignant tumors,																	
16	Simple meningitis,																	
17	Other diseases of the brain and meninges,																	
18	Organic degeneration and softening,																	
19	Brain aneurysm,																	
20	Pneumonia,																	
21	Other diseases of the circulatory system,																	
22	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
23	Diarrhoea and enteritis (under 2 years),																	
24	Appendicitis and typhlitis,																	
25	Cirrhosis,																	
26	Gastric and intestinal obstruction,																	
27	Acute nephritis and Bright's disease,																	
28	Nonconcessous tumors and other diseases of the female genital organs,																	
29	Primary septicaemia (puerperal fever, peritonitis),																	
30	Other puerperal accidents (puerperal fever, peritonitis),																	
31	Other puerperal accidents (puerperal fever, peritonitis),																	
32	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
33	Diarrhoea and enteritis (under 2 years),																	
34	Appendicitis and typhlitis,																	
35	Cirrhosis,																	
36	Gastric and intestinal obstruction,																	
37	Acute nephritis and Bright's disease,																	
38	Nonconcessous tumors and other diseases of the female genital organs,																	
39	Primary septicaemia (puerperal fever, peritonitis),																	
40	Other puerperal accidents (puerperal fever, peritonitis),																	
41	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
42	Diarrhoea and enteritis (under 2 years),																	
43	Appendicitis and typhlitis,																	
44	Cirrhosis,																	
45	Gastric and intestinal obstruction,																	
46	Acute nephritis and Bright's disease,																	
47	Nonconcessous tumors and other diseases of the female genital organs,																	
48	Primary septicaemia (puerperal fever, peritonitis),																	
49	Other puerperal accidents (puerperal fever, peritonitis),																	
50	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
51	Diarrhoea and enteritis (under 2 years),																	
52	Appendicitis and typhlitis,																	
53	Cirrhosis,																	
54	Gastric and intestinal obstruction,																	
55	Acute nephritis and Bright's disease,																	
56	Nonconcessous tumors and other diseases of the female genital organs,																	
57	Primary septicaemia (puerperal fever, peritonitis),																	
58	Other puerperal accidents (puerperal fever, peritonitis),																	
59	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
60	Diarrhoea and enteritis (under 2 years),																	
61	Appendicitis and typhlitis,																	
62	Cirrhosis,																	
63	Gastric and intestinal obstruction,																	
64	Acute nephritis and Bright's disease,																	
65	Nonconcessous tumors and other diseases of the female genital organs,																	
66	Primary septicaemia (puerperal fever, peritonitis),																	
67	Other puerperal accidents (puerperal fever, peritonitis),																	
68	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
69	Diarrhoea and enteritis (under 2 years),																	
70	Appendicitis and typhlitis,																	
71	Cirrhosis,																	
72	Gastric and intestinal obstruction,																	
73	Acute nephritis and Bright's disease,																	
74	Nonconcessous tumors and other diseases of the female genital organs,																	
75	Primary septicaemia (puerperal fever, peritonitis),																	
76	Other puerperal accidents (puerperal fever, peritonitis),																	
77	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
78	Diarrhoea and enteritis (under 2 years),																	
79	Appendicitis and typhlitis,																	
80	Cirrhosis,																	
81	Gastric and intestinal obstruction,																	
82	Acute nephritis and Bright's disease,																	
83	Nonconcessous tumors and other diseases of the female genital organs,																	
84	Primary septicaemia (puerperal fever, peritonitis),																	
85	Other puerperal accidents (puerperal fever, peritonitis),																	
86	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
87	Diarrhoea and enteritis (under 2 years),																	
88	Appendicitis and typhlitis,																	
89	Cirrhosis,																	
90	Gastric and intestinal obstruction,																	
91	Acute nephritis and Bright's disease,																	
92	Nonconcessous tumors and other diseases of the female genital organs,																	
93	Primary septicaemia (puerperal fever, peritonitis),																	
94	Other puerperal accidents (puerperal fever, peritonitis),																	
95	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
96	Diarrhoea and enteritis (under 2 years),																	
97	Appendicitis and typhlitis,																	
98	Cirrhosis,																	
99	Gastric and intestinal obstruction,																	
100	Acute nephritis and Bright's disease,																	
101	Nonconcessous tumors and other diseases of the female genital organs,																	
102	Primary septicaemia (puerperal fever, peritonitis),																	
103	Other puerperal accidents (puerperal fever, peritonitis),																	
104	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
105	Diarrhoea and enteritis (under 2 years),																	
106	Appendicitis and typhlitis,																	
107	Cirrhosis,																	
108	Gastric and intestinal obstruction,																	
109	Acute nephritis and Bright's disease,																	
110	Nonconcessous tumors and other diseases of the female genital organs,																	
111	Primary septicaemia (puerperal fever, peritonitis),																	
112	Other puerperal accidents (puerperal fever, peritonitis),																	
113	Other diseases of the respiratory system (except diphtheria, whooping cough, and influenza),																	
114	Diarrhoea and enteritis (under 2 years),																	
115	Appendicitis and typhlitis,																	
116	Cirrhosis,																	
117	Gastric and intestinal obstruction,		</															

TABULATION OF DEATHS IN WEST ORANGE FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.				AGE PERIODS.										Rate per 1,000 population, 1927.							
	Total.	Male.	Female.	Color, If other than white.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.		40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	1	1	0	1																		
2																						
3	3	3	0	3																		
4	3	3	0	3																		
5	3	3	0	3																		
6	5	5	0	5																		
7	9	9	0	9																		
8	1	1	0	1																		
9	6	6	0	6																		
10	11	11	0	11																		
11	1	1	0	1																		
12	3	3	0	3																		
13	13	13	0	13																		
14	6	6	0	6																		
15	10	10	0	10																		
16	15	15	0	15																		
17	7	7	0	7																		
18	22	22	0	22																		
19	10	10	0	10																		
20	11	11	0	11																		
21	11	11	0	11																		
22	11	11	0	11																		
23	11	11	0	11																		
24	0	0	0	0																		
25	1	1	0	1																		
26	1	1	0	1																		
27	0	0	0	0																		
28	0	0	0	0																		
29	2	2	0	2																		
30	21	21	0	21																		
31	5	5	0	5																		
32	5	5	0	5																		
33	10	10	0	10																		
34	2	2	0	2																		
35	1	1	0	1																		
36	4	4	0	4																		
37	27	27	0	27																		
38	2	2	0	2																		
Total.	173	81	82	4	20	1	8	1	8	1	25	7	5	10	11	11	22	30	34	17	1	

Estimated population, 19,847.

Total resident deaths, 173.

TABULATION OF DEATHS IN GLOUCESTER COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.				AGE PERIODS.										Rate per 1,000 population, 1927.							
	Total.	Male.	Female.	Color, If other than white.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.		40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	9	9	0	9																		
2	2	2	0	2																		
3	1	1	0	1																		
4	0	0	0	0																		
5	4	4	0	4																		
6	6	6	0	6																		
7	10	10	0	10																		
8	7	7	0	7																		
9	10	10	0	10																		
10	1	1	0	1																		
11	11	11	0	11																		
12	1	1	0	1																		
13	1	1	0	1																		
14	23	23	0	23																		
15	8	8	0	8																		
16	65	57	38	1	1																	
17	10	10	0	10																		
18	6	6	0	6																		
19	121	69	55	7	2	1	1	1	2	2	6	10	10	11	7	8	25	32	18	8		
20	40	20	20	0	6	1	1	1	2	1	2	4	4	4	4	0	1	4	4	1		
21	43	22	21	10	13	7	2	1	2	2	2	1	1	1	1	1	2	5	8	2		
22	8	6	2	2	1	1	1	1	2	1	2	1	1	1	1	1	1	7	8	2		
23	13	13	0	13																		
24	13	13	0	13																		
25	25	19	5	1	17	2	1	1	19	1	1	1	1	1	1	1	1	7	10	20		
26	3	3	0	3																		
27	3	3	0	3																		
28	53	44	10	4	9	1	1	1	4	1	1	2	2	2	1	2	1	1	2	1		
29	8	8	0	8																		
30	87	41	46	5	2	2	2	2	5	1	1	1	1	1	1	1	1	1	1	1		
31	1	1	0	1																		
32	2	2	0	2																		
33	52	31	23	11	54																	
34	5	5	0	5																		
35	5	5	0	5																		
36	53	44	10	4	9	1	1	1	4	1	1	1	1	1	1	1	1	1	2	1		
37	81	39	42	12	11	1	1	1	4	1	1	1	1	1	1	1	1	1	2	1		
38	1	1	0	1																		
Total.	700	421	368	81	116	22	8	9	6	101	17	23	22	30	30	70	135	154	93	14		

Estimated population, 65,405.

Total resident deaths, 700.

TABULATION OF DEATHS IN HUDSON COUNTY FOR 1906, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns: Cause of Death, Total, Male, Female, Color, Age Periods (Under 1 year, 1 year, 2 years, 3 years, 4 years, 5 to 9, 10 to 19, 20 to 29, 30 to 39, 40 to 49, 50 to 59, 60 to 69, 70 to 79, 80 to 89, 90 and over), Unknown.

Total population, 890,701.

Total resident deaths, 7,011.

Rate per 1,000 population, 71.46.

TABULATION OF DEATHS IN BAYONNE FOR 1906, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns: Cause of Death, Total, Male, Female, Color, Age Periods (Under 1 year, 1 year, 3 years, 4 years, 5 to 9, 10 to 19, 20 to 29, 30 to 39, 40 to 49, 50 to 59, 60 to 69, 70 to 79, 80 to 89, 90 and over), Unknown.

Total population, 99,060.

Total resident deaths, 820.

Rate per 1,000 population, 8.27.

TABULATION OF DEATHS IN HUNTERDON COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.	AGE PERIODS.													Total	Color, if other than white.	Female.	Male.	Total.										
		Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.						70 to 79.	80 to 89.	90 and over.	Unknown.						
1	Typhoid fever.....																												
2	Typhus fever.....																												
3	Dysentery.....																												
4	Smallpox.....																												
5	Mumps.....																												
6	Scarlet fever.....																												
7	Whooping cough.....																												
8	Diphtheria.....																												
9	Influenza and grip.....																												
10	Asthenic cholera.....																												
11	Cholera nostras.....																												
12	Other epidemic diseases.....																												
13	Tuberculosis of the lungs.....																												
14	Tuberculosis of other organs.....																												
15	Other forms of tuberculosis.....																												
16	Cancer and other malignant tumors.....																												
17	Simple meningitis.....																												
18	Diphtheritic meningitis.....																												
19	Organic disseminated and softening.....																												
20	Epilepsy.....																												
21	Bronchitis.....																												
22	Pneumonia.....																												
23	Other diseases of the respiratory system.....																												
24	Diseases of the esophagus (except cancer).....																												
25	Diarrhea and enteritis (under 2 years).....																												
26	Appendicitis and typhlitis.....																												
27	Diarrhea, intestinal obstruction.....																												
28	Actinomycetosis.....																												
29	Acute rheumatism and Bright's disease.....																												
30	Non-neuracous tumors and other diseases of the female genital organs.....																												
31	Puerperal septicaemia (puerperal fever, peritonitis).....																												
32	Other general accidents of pregnancy and labor.....																												
33	Congenital debility and malformations.....																												
34	Senility.....																												
35	Stroke.....																												
36	Suicide.....																												
37	Other diseases (suicide excepted).....																												
38	Unknown or ill-defined diseases.....																												
	Total.....	512	265	217	5	54	0	2	4	5	72	4	7	10	21	20	108	78	119	102	13								
	Estimated population, 32,888.	Rate per 1,000 population, 15.06.																											

TABULATION OF DEATHS IN MERCER COUNTY FOR 1899, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.	AGE PERIODS.													Total	Color, if other than white.	Female.	Male.	Total.										
		Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.						70 to 79.	80 to 89.	90 and over.	Unknown.						
1	Typhoid fever.....																												
2	Typhus fever.....																												
3	Dysentery.....																												
4	Smallpox.....																												
5	Mumps.....																												
6	Scarlet fever.....																												
7	Whooping cough.....																												
8	Diphtheria.....																												
9	Influenza and grip.....																												
10	Asiatic cholera.....																												
11	Cholera nostras.....																												
12	Other epidemic diseases.....																												
13	Tuberculosis of the lungs.....																												
14	Tuberculosis of other organs.....																												
15	Other forms of tuberculosis.....																												
16	Cancer and other malignant tumors.....																												
17	Simple meningitis.....																												
18	Diphtheritic meningitis.....																												
19	Organic diseases of the heart.....																												
20	Epilepsy.....																												
21	Bronchitis.....																												
22	Pneumonia.....																												
23	Other diseases of the respiratory system.....																												
24	Diseases of the stomach (cancer excepted).....																												
25	Diarrhea and enteritis (under 2 years).....																												
26	Appendicitis and typhlitis.....																												
27	Diarrhea, intestinal obstruction.....																												
28	Actinomycetosis.....																												
29	Acute rheumatism and Bright's disease.....																												
30	Non-neuracous tumors and other diseases of the female genital organs.....																												
31	Puerperal septicaemia (puerperal fever, peritonitis).....																												
32	Other general accidents of pregnancy and labor.....																												
33	Congenital debility and malformations.....																												
34	Senility.....																												
35	Stroke.....																												
36	Suicide.....																												
37	Other diseases (suicide excepted).....																												
38	Unknown or ill-defined diseases.....																												
	Total.....	2212	1179	1030	217	261	84	17	12	0	350	33	70	157	158	218	310	957	835	174	28								
	Estimated population, 164,704.	Rate per 1,000 population, 12.40.																											

TABULATION OF DEATHS IN PRINCETON FOR 1928, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.	AGE PERIODS.													Rate per 1,000 population, 1928.								
		AGE PERIODS.																					
		Total.	Male.	Female.	Color, if other than white.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.		30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1	Typhoid fever,.....	4	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Typhoid fever,.....	4	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3	Malaria,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	Smallpox,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5	Scarlet fever,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Scarlet fever,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Diphtheria and croup,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	Diphtheria and croup,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9	Indiense,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Asiatic cholera,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	Asiatic cholera,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12	Cholera nostras,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Cholera nostras,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Diseases of the respiratory system (tuberculosis excepted),.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15	Diseases of the stomach (cancer excepted),.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Diarrhoea and enteritis (under 2 years),.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Diarrhoea and enteritis (under 2 years),.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	Disentery and typhitis,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Hemiplegia, paralytic and convulsions,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	Chorea of the liver,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Chorea of the liver,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Acute nephritis and Bright's disease,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Acute nephritis and Bright's disease,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Nonconcessive tumors and other diseases of the peritoneum,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Puerperal septicemia,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
33	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
34	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
36	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
37	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
41	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
43	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
44	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
45	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
47	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
48	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
49	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
50	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
51	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
52	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
53	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
54	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
55	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
56	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
57	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
58	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
59	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
60	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
61	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
62	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
63	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
64	Other puerperal accidents of pregnancy and labor,.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
65	Other puerperal accidents																						

TABULATION OF DEATHS IN SOUTH AMBOY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.	AGE PERIODS.													Rate per 1,000 population, 1926.																													
		Total	Male.	Female.	Color, if other than white.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.		30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.																					
		1	1		1	1																																						

Total resident deaths, 67.

Estimated population, 8,490.

TABULATION OF DEATHS IN MONMOUTH COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged International List No.	CAUSE OF DEATH.	AGE PERIODS.													Rate per 1,000 population, 1926.																															
		Total	Male.	Female.	Color, if other than white.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.		30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.																							
		1	2	1	1	1																																								

Estimated population, 111,744.

Total resident deaths, 1,891.

TABULATION OF DEATHS IN OCEAN COUNTY FOR 1928, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns for Cause of Death, Total, Male, Female, Color, Age Periods (Under 1 year to 90 and over), and Total resident deaths (441). Includes categories like Typhoid fever, Malaria, Smallpox, etc.

Total resident deaths, 441.

Estimated population, 22,714.

Rate per 1,000 population, 19.42.

TABULATION OF DEATHS IN PASSAIC COUNTY FOR 1928, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns for Cause of Death, Total, Male, Female, Color, Age Periods (Under 1 year to 90 and over), and Total resident deaths (3,071). Includes categories like Typhoid fever, Malaria, Smallpox, etc.

Estimated population, 298,148.

Total resident deaths, 3,077.

Rate per 1,000 population, 10.37.

TABULATION OF DEATHS IN SALEM CITY FOR 1986, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Abridged Interna- tional List No.	CAUSE OF DEATH.	AGE PERIODS.											Total.	Male.	Female.	Color, if other than white.																				
		Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.					50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.														
																							Rate per 1,000 population, 15.28.													
1	Typhoid fever.																																			
2	Typhus fever.																																			
3	Malaria.																																			
4	Smallpox.																																			
5	Measles.																																			
6	Scarlet fever.																																			
7	Whooping cough.																																			
8	Diphtheria and croup.																																			
9	Scarlet fever.																																			
10	Asiatic cholera.																																			
11	Cholera nostras.																																			
12	Other epidemic diseases.																																			
13	Tuberculosis of the lungs.																																			
14	Tuberculosis of the trachea.																																			
15	Tuberculosis of the larynx.																																			
16	Cancer and other malignant tumors.																																			
17	Simple meningitis.																																			
18	Cerebral hæmorrhage and softening.																																			
19	Organic diseases of the heart.																																			
20	Pneumonia.																																			
21	Other diseases of the respiratory system (tuberculosis excepted).																																			
22	Diseases of the stomach (cancer excepted).																																			
23	Diseases of the intestines (cancer excepted).																																			
24	Appendicitis and typhilitis.																																			
25	Hernia, intestinal obstruction.																																			
26	Cirrhosis of the liver.																																			
27	Acute nephritis and Bright's disease.																																			
28	Chronic nephritis and Bright's disease.																																			
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TABULATION OF DEATHS IN NORTH PLAINFIELD FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns for Cause of Death, Total, Male, Female, Color, Age Periods, and Total Resident Deaths. Rows include Typhoid fever, Typhus fever, Malaria, Smallpox, Measles, Scarlet fever, Whooping cough, Diphtheria and croup, Influenza, Asiatic cholera, Cholera nostras, Other epidemic diseases, Tuberculosis of the lungs, Tuberculous meningitis, Other forms of tuberculosis, Cancer and other malignant tumors, Simple meningitis, Cerebral haemorrhage and softening, Organic diseases of the heart, Bronchitis, Pneumonia, Other diseases of the respiratory system (tuberculosis excepted), Diseases of the stomach (cancer excepted), Diarrhoea and enteritis (under 2 years), Appendicitis and typhlitis, Hernia, Intestinal obstruction, Cirrhosis of the liver, Acute nephritis and Bright's disease, Noncancerous tumors and other diseases of the female genital organs, Puerperal septicaemia (puerperal fever, peritonitis), Other puerperal accidents of pregnancy and labor, Congenital debility and malformations, Senility, Suidity, Volent deaths (suicide excepted), Other diseases, Unknown or ill-defined diseases.

Total resident deaths, 89.

Rate per 1,000 population, 11.94.

Estimated population, 7,449.

TABULATION OF DEATHS IN SOMERVILLE FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns for Cause of Death, Total, Male, Female, Color, Age Periods, and Total Resident Deaths. Rows include Typhoid fever, Typhus fever, Malaria, Smallpox, Measles, Scarlet fever, Whooping cough, Diphtheria and croup, Influenza, Asiatic cholera, Cholera nostras, Other epidemic diseases, Tuberculosis of the lungs, Tuberculous meningitis, Other forms of tuberculosis, Cancer and other malignant tumors, Simple meningitis, Cerebral haemorrhage and softening, Organic diseases of the heart, Bronchitis, Pneumonia, Other diseases of the respiratory system (tuberculosis excepted), Diseases of the stomach (cancer excepted), Diarrhoea and enteritis (under 2 years), Appendicitis and typhlitis, Hernia, Intestinal obstruction, Cirrhosis of the liver, Acute nephritis and Bright's disease, Noncancerous tumors and other diseases of the female genital organs, Puerperal septicaemia (puerperal fever, peritonitis), Other puerperal accidents of pregnancy and labor, Congenital debility and malformations, Senility, Suicide, Volent deaths (suicide excepted), Other diseases, Unknown or ill-defined diseases.

Total resident deaths, 130.

Rate per 1,000 population, 16.61.

Estimated population, 7,824.

TABULATION OF DEATHS IN SUSSEX COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns for Cause of Death, Sex (Male, Female), and Age Periods (Under 1 year to 90 and over, Unknown). Includes total counts for each category.

Total 398. Total resident deaths, 398. Estimated population, 24,905. Rate per 1,000 population, 15.98.

TABULATION OF DEATHS IN UNION COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

Table with columns for Cause of Death, Sex (Male, Female), Color (If other than white), and Age Periods (Under 1 year to 90 and over, Unknown). Includes total counts for each category.

Total 2798. Total resident deaths, 2798. Estimated population, 240,302. Rate per 1,000 population, 11.64.

TABULATION OF DEATHS IN WESTFIELD FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

CAUSE OF DEATH.	AGE PERIODS.											Total					
	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.		50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1 Typhoid fever,					1	1											
2 Typhus fever,																	
3 Malaria,																	
4 Smallpox,																	
5 Measles,																	
6 Scarlet fever,																	
7 Whooping cough,																	
8 Diphtheria and croup,																	
9 Influenza,																	
10 Asiatic cholera,																	
11 Cholera nostras,																	
12 Other epidemic diseases,																	
13 Tuberculosis of the lungs,																	
14 Tuberculous meningitis,																	
15 Other forms of tuberculosis,																	
16 Cancer and other malignant tumors,																	
17 Simple meningitis,																	
18 Cerebral hemorrhage and softening,																	
19 Organic diseases of the heart,																	
20 Other diseases of the heart,																	
21 Bronchitis,																	
22 Pneumonia,																	
23 Other diseases of the respiratory system (tuberculosis excepted),																	
24 Diseases of the stomach (cancer excepted),																	
25 Diarrhoea and enteritis (under 2 years),																	
26 Appendicitis and typhlitis,																	
27 Hernia, intestinal obstruction,																	
28 Cirrhosis of the liver,																	
29 Acute nephritis and Bright's disease,																	
30 Noncancerous tumors and other diseases of the female genital organs,																	
31 Puerperal septicemia (puerperal fever, peritonitis),																	
32 Other puerperal accidents or pregnancy and labor,																	
33 Congenital debility and malformations,																	
34 Senility,																	
35 Suicide,																	
36 Violent deaths (suicide excepted),																	
37 Other diseases,																	
38 Unknown or ill-defined diseases,																	
Total,																	

Total resident deaths, 119.

Rate per 1,000 population, 10.98.

Estimated population, 10,832.

TABULATION OF DEATHS IN WARREN COUNTY FOR 1926, ACCORDING TO THE ABRIDGED INTERNATIONAL LIST OF CAUSES OF DEATH.

CAUSE OF DEATH.	AGE PERIODS.											Total					
	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.		50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.	Unknown.
1 Typhoid fever,																	
2 Typhus fever,																	
3 Malaria,																	
4 Smallpox,																	
5 Measles,																	
6 Scarlet fever,																	
7 Whooping cough,																	
8 Diphtheria and croup,																	
9 Influenza,																	
10 Asiatic cholera,																	
11 Cholera nostras,																	
12 Other epidemic diseases,																	
13 Tuberculosis of the lungs,																	
14 Tuberculous meningitis,																	
15 Other forms of tuberculosis,																	
16 Cancer and other malignant tumors,																	
17 Simple meningitis,																	
18 Cerebral hemorrhage and softening,																	
19 Organic diseases of the heart,																	
20 Other diseases of the heart,																	
21 Bronchitis,																	
22 Pneumonia,																	
23 Other diseases of the respiratory system (tuberculosis excepted),																	
24 Diseases of the stomach (cancer excepted),																	
25 Diarrhoea and enteritis (under 2 years),																	
26 Appendicitis and typhlitis,																	
27 Hernia, intestinal obstruction,																	
28 Cirrhosis of the liver,																	
29 Acute nephritis and Bright's disease,																	
30 Noncancerous tumors and other diseases of the female genital organs,																	
31 Puerperal septicemia (puerperal fever, peritonitis),																	
32 Other puerperal accidents or pregnancy and labor,																	
33 Congenital debility and malformations,																	
34 Senility,																	
35 Suicide,																	
36 Violent deaths (suicide excepted),																	
37 Other diseases,																	
38 Unknown or ill-defined diseases,																	
Total,																	

Total resident deaths, 660.

Rate per 1,000 population, 14.25.

Estimated population, 46,305.

CAUSE OF DEATH.	Total	Male	Female	Color, if other than white.	Under 1 year.	1 year.	2 years.	3 years.	4 years.	Under 5 years.	AGE PERIODS.										90 and over.	Unknown.					
											5 to 9.	10 to 19.	20 to 29.	30 to 39.	40 to 49.	50 to 59.	60 to 69.	70 to 79.	80 to 89.	90 and over.							
											Rate per 1,000 population, 12.40.																
Typhoid fever,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Typhus fever,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Malaria,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Smallpox,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Measles,	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Scarlet fever,	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Whooping cough,	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Diphtheria and croup,	4	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Influenza,	8	6	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Asiatic cholera,	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Cholera nostras,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other epidemic diseases,	11	5	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
Tuberculosis of the lungs,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Tuberculosis meningitis,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other forms of tuberculosis,	15	7	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
Cancer and other malignant tumors,	15	14	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Simple meningitis,	15	1	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14
Cerebral hemorrhage and softening,	50	42	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
Organic diseases of the heart,	30	20	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
Bronchitis,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Pneumonia,	30	20	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
Other diseases of the respiratory system (tuberculosis excepted),	7	3	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
Diseases of the stomach (cancer excepted),	5	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Diarrhoea and enteritis (under 2 years),	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Appendicitis and typhilitis,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Hernia, intestinal obstruction,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Cirrhosis of the liver,	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Acute nephritis and Bright's disease,	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Noncancerous tumors and other diseases of the female genital organs,	27	13	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14	14
Puerperal septicemia (puerperal fever, puerperal typhoid),	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other puerperal accidents of pregnancy and labor	11	6	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
Congenital debility and malformations,	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
Senility,	5	2	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Suicide,	18	16	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
Violent deaths (suicide excepted),	25	16	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
Other diseases,	25	16	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9
Unknown or ill-defined diseases,	235	132	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103	103

Estimated population, 18,944. Total resident deaths, 235.

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