REPORT ON THE CONTROL AND TREATMENT OF VENEREAL DISEASE IN SHANGHAI.

By a Committee appointed by the Shanghai Medical Society, 1923.

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REPORT ON THE CONTROL AND TREATMENT OF VENEREAL DISEASE IN SHANGHAI.

The Committee appointed by the Shanghai Medical Society to consider and report on the question of the control and treatment of venereal diseases in Shanghai from a Public Health point of view have the honour to present the following data with suggestions for the consideration of the Council of the Medical Society, and the Commissioner of Public Health.

The Committee included Dr. E. L. Marsh (Chairman), Dr. A. C. Bryson, Dr. E. Lagrange and Dr. Lovett Cumming, and meetings were held on April 27th, May 4th, June 11th and July 13th, 1923, at the General Hospital, Shanghai.

HISTORICAL

1869.—Definite public action in connection with the problem of venereal diseases and prostitution in Shanghai dates from 1869, when Dr. Edward Henderson, Surgeon to the Municipality and Officer of Health, recorded in a letter addressed to the Chairman of Works that the alleged remarkable prevalence in the Settlement of syphilis and prostitution was fully borne out by a reference to hospital reports no less than by the individual experience of medical men. “Nor is such prevalence to be wondered at when we consider the number of Chinese prostitutes who infest the back streets of the Settlement, the number of sailors from all parts of the world who visit the Port, and the absence hitherto of all legislation in the matter. The number of foreign prostitutes is very limited, and their price will, I presume, limit the visits of any save those possessed of considerable means.”

Immoral Houses in Shanghai.—A census of Chinese houses known as frequented by foreigners taken in January, 1869, for the Anglo-American Settlement gave 97 houses and 311 girls, exclusive of the brothel keepers. The total of houses frequented by both foreigners and natives was 463 for the Anglo-American Settlement, and the total number of prostitutes was 1,612. The houses fre-
quented by natives alone were largely in excess of those visited by foreigners, and this difference was important, for it meant that the women living in the former could in no way affect the health of the foreign community, and did not need therefore to form an item in the calculations of any supervision scheme which had for its object the protection of foreigners only.

Dr. Massais, the French municipal medical officer, estimated the total number of such houses in the French Concession in 1869 at about 250, and the total number of prostitutes at about 2,600. Of these houses, however, 24 only were known to be frequented by foreigners; these houses contained 90 girls, viz., 54 Cantonese and 36 girls from Soochow, Ningpo and Shanghai.

**Brothel Inspection.**—The Municipal Council having decided that a regular system of Chinese brothel inspection should be inaugurated, Dr. Henderson made the first tour of inspection in Hongkew on the 16th August, 1869. The result he embodied in a letter addressed to the Chairman of the Committee of Works. He found that the Chinese brothels, known as frequented by foreigners, were for the most part aggregated in back streets, each house containing 3 or 4 inhabitants, 2 or 3 young girls and an older woman acting as superintendent (brothel house-keeper). These houses were for the most part dark, dirty and unfurnished, and all that were visited were alike destitute of appliances necessary for those ablutions which, according to many, form the best preventative against disease.

Among the girls inspected, some 30 or 40, none exhibited any outward sign of specific skin eruptions or other manifest indication of venereal disease. Thorough inspection on the part of any foreign medical man would be impossible in such houses from the prejudices of the women, the absence in many cases of the necessary light, and in all of the necessary privacy.

**Lock Hospital opened.**—On the 26th August, 1869, Mr. Penfold, police superintendent, submitted to Dr. Henderson a scheme which appeared to meet all requirements; with a trifling alteration in detail, this was eventually approved by the Council.

It recommended the establishment of a hospital, to be termed a Home, placed under the superintendence of the Municipal medical officer, to which all suffering from disease were to be sent by a
native doctor who, at a salary of $30.00 per month, should be engaged to visit the houses and inspect the inmates.

It contained a clause providing for the prosecution of any brothel-keeper found having or harbouring any girl suffering from venereal disease, and proposed that the necessary expenses should be defrayed by a subscription of 50 cents per girl per month to be collected from the keepers of such houses. It stated further that the women were themselves willing to submit to such regulations.

Dr. Massais, municipal medical officer to the French Concession, also drew up a report on this subject, which he entitled "Notes intended to serve as the basis of a plan for the establishment of a 'Service Sanitaire' for brothels in the French Concession". He advocated a complete system of registration modelled on the plan adopted in large French towns. At this date (October 2nd, 1869) the French Council had come to no decision on this matter.

Following the course suggested above, a house (Chinese Lock Hospital) was opened in the Honan Road in 1869; the furniture—a stove, three beds, etc.—being alone supplied at the Municipal expense (Tls.56.71). Up till the end of the year only one patient had been treated, a change in the Chinese inspecting doctor failing to increase the number of applicants.

1870.—The "Home," or Lock Hospital, was not a success and was subsequently closed.

1871.—In a "Report on Prostitution in Shanghai", drawn up at this time by Dr. Edward Henderson for the Council for the foreign community of Shanghai, it stated that the question of the supervision of public women is one which had engaged the attention of former Councils, and which, at present, no less than formerly, demands the serious consideration of those whose duty it is to guard the interests and care for the health of the foreign community of Shanghai.

According to Dr. Henderson, there were at least three good reasons which might be given to show that the residents in the Settlement were specially interested in the discussion of the subject; he advanced them as the preliminary considerations which induced him to enter upon a careful investigation of the whole subject:
1. Shanghai, a busy mercantile port visited by ships from all parts of the world, like all similarly situated towns is peculiarly exposed to the invasion of venereal disease and has attracted a large number of prostitutes within its limits.

2. The native women who infest the Settlement, and who are the chief source of danger to foreigners, place themselves almost exclusively under the care of Chinese doctors, whose notions with regard to contagion are utterly vague, and whose detection or treatment of disease cannot in the least be relied on.

3. The inhabitants of Shanghai, consisting mainly of young unmarried men, are peculiarly liable to suffer from those evils, the limitation or eradication of which it is hoped may be attained by properly directed legislation.

Dr. Henderson's own experience in practice in the Settlement led him to the conclusion that venereal disease is neither excessively or unusually prevalent among the foreign residents. The number of native women in the position of mistresses indicated, no doubt, the principal cause of this immunity. This statement did not apply to the foreign police force, in which venereal affections had been unusually prevalent during the preceding year. Dr. Henderson had seen nothing as yet to lead one to the conclusion that syphilis bears an undue proportion in Shanghai to other forms of venereal disease.

From 1865 to 1870 inclusive, 2,791 patients had been treated for various complaints in the wards of the General Hospital; among these, cases of venereal disease occurred in the proportion of about 16 in every hundred.*

According to statements made by the Chinese and by the native doctors, patients with venereal disease were more common in Shanghai during the summer and autumn months, possibly following the arrival of many foreign ships which yearly made their appearance in the river in the end of May or beginning of June, to await the opening of the tea market.

*"The somewhat unsatisfactory arrangement adopted in several of the hospital reports permits of a stronger case being made out against venereal disease, but of this I have taken no advantage."—E. Henderson, M.D., Report on Prostitution, p. 22.
Dr. Henderson concludes his report by saying: "If it be considered that the medical evidence adduced fails to prove the excessive prevalence of venereal diseases among foreigners residing in, or visiting Shanghai, it still cannot be denied enough has been brought forward to show that these are sufficiently widely spread to demand the serious consideration of the sanitary guardians of the Settlement. The excessive prevalence of venereal disease among the natives who surround us is an incontestable fact. The large number of brothels existing within foreign limits is in the highest degree objectionable, as affecting the good name of the Settlement. By far the greater number exist for the use of natives only, and such ought to find no place in the Foreign Settlement. The foundation of a properly appointed Lock Hospital should be the first step taken. Compulsory periodical examination of the native women, enforced detention in hospital of all found suffering from venereal disease, are, in my opinion, the only measures the adoption of which is likely to yield any notably good results."

1873.—The fourth Annual Report of the Health Officer (Dr. Henderson) places the opening of an efficient Lock Hospital as one of the important necessities which concern health.

1874.—The Memorandum of the Watch Committee addressed to the Council mentions, with reference to a Lock Hospital, that the French Municipality would not be in a position to co-operate with the Council during the year, and for this reason and also the probable opposition on the part of the Chinese authorities which would interfere with the successful working of the Institution, no appropriation would be asked for. At the same time every endeavour should be made to initiate an undertaking so needed and so beneficial in its results.

1875.—The Watch Committee called for a report from the Health Officer as to the suitability of a building at the head of Foochow Road in which to commence the work of a Lock Hospital. The exhaustive memorandum sent in by Dr. Henderson (Municipal Report, 1875, p.58) showed that if the idea of a Lock Hospital was to be entertained, there must be no half measures, and that the ratepayers must make up their minds to spend the sum asked for at the outset, and to put aside every year say Tls. 2,000.00 to work the institution on a proper basis. The Committee must
consider whether they will go to this expense, bearing in mind that without the support of the Chinese authorities the success of the hospital is highly doubtful.

The neighbouring French Municipality expressed a desire to act in common as the most economical manner of proceeding at first.

After deliberation the Watch Committee were of opinion that the scheme at present was not feasible.

The British Naval Commander-in-Chief now made a request for a Lock Hospital and some compulsory system of inspection of public women, and in reply the Council stated "that the establishment of a Lock Hospital has occupied the attention of successive Councils, but in face of the difficulties and opposition that are certain to be met with in working it successfully, they have come to the conclusion that it is quite impracticable at present."

The Admiral collected from the various surgeons of H.M. ships on the China Station evidence as to the effect on the frequency of venereal diseases and the virulence of the diseases, in "protected" and "unprotected" ports, and found that it is most conclusively in favour of protection.

Subsequently the Council decided to put in force a tentative scheme, being actuated thereto by further urgent representations by the British Admiral in consequence of the ships under his command having frequently a large number of men under treatment for venereal disease and in very grave forms contracted in Shanghai (Municipal Report, 1876, p.22).

1876.—In the Health Officer's Report for this year the following general résumé of the question of venereal disease and prostitution in Shanghai is from the pen of Dr. Henderson:

Value of Lock Hospital:—"The necessity for establishing some system of medical supervision over the public women in Shanghai has long been acknowledged, but the difficulties—financial, political and social—which have stood in the way of the various schemes proposed by successive administrations, have hitherto proved sufficient to prevent any very decided action from being taken, either by the community or its representatives.

In August of 1869 the Police Superintendent proposed to the Council to open a small hospital in the Settlement, where the native women might be examined, and, when necessary, admitted and treated; attendance was to be optional on the part of the women, but such provision as was possible
was made for the prosecution of any brothel-keeper found concealing a case of venereal disease in her house. Neither Mr. Penfold nor I hoped for much from this undertaking, but the Council was anxious that something should be done, and apparently at the same time unable or unwilling to take the matter seriously in hand. This experiment proved a failure; the women would not attend, and, while we had reason to know that disease continued to prevail extensively in the brothels, the hospital was for many months without a single patient. Before acknowledging defeat, an effort was made to induce attendance by means of house-to-house visitations by paid native assistants, but this also failed in its object, and the hospital was finally closed in the beginning of 1870.

"In the end of 1870 I drew up for the Council a special report, which was printed and privately circulated in 1871. In this I discussed the whole subject very fully. I defined the various classes of houses which the Settlement contained, giving their situation, distinctive characters, their number, and the number of their inmates; I drew attention to the iniquitous bargain; by which in too many cases the brothel-keepers became the actual possessors of the young women who lived in their houses; I pointed out the folly of placing any dependence on the native women themselves, or on their treatment by the native doctors, and showed how the native hospitals under foreign supervision failed at all adequately to provide for their wants; from the statistics of the General Hospital, the native hospitals and the foreign police force, together with such figures as I was able to obtain from the men-of-war stationed at the port during the year, I proved the widespread prevalence of venereal disease; finally, I urged upon the Council the necessity for the introduction of some efficient scheme of medical supervision, and declared it to be my opinion that nothing short of compulsory periodical examinations and enforced detentions in Hospital could be depended on to yield any notably good results.

"My report attracted some notice at the time of its publication, but other matters of public importance diverting attention, and some difficulty in the way of co-operation with the French Council being anticipated, the subject was allowed to drop, and no action was taken till December of 1874. In that month I was requested by the Secretary to frame a special memorandum from which the Watch Committee might calculate the probable expenses attendant on the establishment of a Lock Hospital for the native women; I was at the same time officially informed that the co-operation of the French Council had been definitely promised. In the Health Officer's report for 1874 I gave a short sketch of the memorandum which I addressed to the Watch Committee, and full details of this document were at the same time published by the Secretary. Nothing further was done in 1875, but in 1876 Vice-Admiral Ryder being on the station and taking an active interest in the matter, the Lock Hospital was once more discussed by the Council. The arguments employed by Admiral Ryder were cogent—for, besides demonstrating anew the serious injury inflicted on the Navy by venereal diseases contracted in Shanghai, he was able to show
clearly the great improvement in this respect which had been effected in Hongkong and in Japan, where well-devised systems of examination and seclusion were thoroughly carried out by a competent staff.

"Under instructions from the Council, and after consultation with the Health Officer for the French Concession and the Police Superintendents, I now drew up the details of a scheme by which, without much outlay, the Council might fairly test its ability to control the brothels, and compel the attendance of the native prostitutes for examination by a foreign surgeon. This scheme was substantially a plan of procedure recommended to the French Council by Dr. Massais in 1864, but it differed from the original proposal, and fell short of my own views, in so far as it failed to make provision for the detention in Hospital of the women found to be diseased. I advanced it, however, as tentative only, and it was so regarded by the two Municipalities; it would obviously have been unwise to incur the expense of furnishing a hospital, while as yet the power to procure patients was a matter of uncertainty. On the 24th of July, at a Council meeting attended by representatives of the French Municipality, by the English Admiral, and by the Health Officer for the French Concession, my memorandum was read and fully discussed; at a later date I was informed that plans of action advised had been approved of, and that, along with Dr. Pichon, I might proceed to open the new Dispensary on the 1st of January, 1877. Writing now on the 1st of February I have little to add. The Dispensary has been open since the beginning of the year, but the houses have all been closed by their proprietors, and the women as yet obstinately refuse to come for examination. This is, however, no more than might have been expected; I anticipated it in my special report when I said: 'It cannot be denied that the initiation of an effective supervision scheme may result in the closing of some of the native brothels and the emigration of the women,' etc. Success will now depend on the perseverance with which the two Municipalities refuse to allow native brothels to exist in the Settlements, the inmates of which fail to appear regularly before the examining surgeon."

The Memorandum mentioned in the preceding paragraph is entitled *The Medical and Police Supervision of Native Prostitutes*, dated June 12th, 1876, and is as follows:

"1. It is unnecessary now to recapitulate the facts which have been accumulated to prove the necessity of subjecting the native prostitutes in Shanghai to foreign medical supervision. During the past year the subject has again been brought prominently forward by Vice-Admiral Ryder, who urges the Council to take immediate action, by arguments founded on the experience of ships of war stationed at the port, and by detailed reference to the good results obtained in Japan from the systematic inspection of the women and the establishment of Lock Hospitals. In addition to the letters of the English Admiral, I beg now also to enclose a letter from Fleet-Surgeon Thomas J. Turner, of the U.S. Flagship
"Tennessee," in which the writer expresses strongly his conviction that a Lock Hospital is needed in Shanghai, and adds his experience to that of other Naval Surgeons to prove the prevalence of venereal disease at the port. I am also further informed by the Health Officer of the French Council that during the past six months the Captain of a French man-of-war lying in the harbour refused altogether to grant his men shore-going leave, on account of the risk which he believed they ran of contracting venereal disease in the brothels.

2. I have recently pointed out (in my last report as Health Officer) that efficient control of the native prostitutes will be obtained with greater difficulty in Shanghai than either in Hongkong or Japan in virtue of the facts that Hongkong is a British Colony and that in Japan the Native Government concerns itself directly in the establishment and maintenance of Lock Hospitals. In view of the difficulties which may be anticipated, the following points seem to me deserving of special consideration:—

(a) The Superintendent of Police is of opinion that the number of the native prostitutes in Shanghai has undergone little alteration during the past few years, and that the figures published in my special report in 1871 may be taken as substantially correct. At that date 1,612 women were known by the Police as prostitutes in the Settlement north of the Yang-King-Pang Creek. Of these women, 1,385 received the visits of natives only, and in no case permitted foreigners to enter their houses. It would be as impossible, as it would be impolitic, to attempt the medical inspection of women who so specially reserve themselves, and they may be altogether left out of consideration. The control of the remaining 223 will doubtless sufficiently tax the resources of the staff which the Council can command, but the number is scarcely so great as to be seriously embarrassing. These 223 women are distributed over Hongkew and the English Settlement in 62 houses.

(b) It has been definitely ascertained that neither in the French Concession nor in the Settlement north of Yang-king-pang Creek will the women voluntarily, or even readily, submit to the visits of inspectors. This, however, will, I believe, be found scarcely a serious obstacle. The native authorities may be counted upon to support the police in closing any native brothel simply proceeded against as such; and the keepers of the houses will compel the women to appear before the surgeon when they find that the only alternative is the shutting up of the brothel. To prevent emigration from one Settlement to another, it is essential that the two Municipalities act simultaneously; and this co-operation should be definitely secured before the work is begun.

(c) I have ascertained personally from the Commissioner of Customs and the Harbour Master that the Council may depend upon their support, and if in any way possible, their assistance. This is a matter of no small importance, as, so far as sailors are concerned, the most dangerous women appear to be those who, under the guise of needlewomen,
washerwomen, and the like, visit the ships in the harbour for the purpose of prostitution, or with that object entice the sailors to visit their houses on shore.

"(d) It has been suggested to me that before incurring the expense of building a Lock Hospital, and engaging the services of a full staff required for such an institution, it would be well to ascertain by a preliminary experiment the ability of the authorities to compel the attendance of the prostitutes at the weekly inspections; and I am myself of opinion that such an experiment is decidedly to be recommended. The plan of procedure suggested was detailed by Dr. Massais in a special report addressed by him to the French Council in 1870, a translation of which is preserved in the office of the English Council. It was this plan which formerly received Dr. Galle's support and this is the scheme which now meets with Dr. Pichon's approbation.

"The official registration of the houses and their inhabitants is the first step. This done, the women practising prostitution are furnished with tickets to which their photographs are attached. The weekly inspections are then begun in a convenient apartment hired for the purpose; the building at the head of Foochow Road would suit perfectly. The women, on presenting themselves before the surgeon, hand in their tickets, and upon these the surgeon, or his assistant, inscribes the date of the examination and the condition of the women examined. Should any of the inhabitants of a registered house fail to appear, the proprietor is at once communicated with by the police, and if the reasons assigned for the non-appearance are unsatisfactory, the house is closed and struck off the register. By the more active promoters of this scheme it is believed that it will for some time to come prove a sufficient check on the spread of venereal disease in Shanghai; but I can myself only support it as an advisable preliminary step to the establishment of a hospital, at which the women will not only be periodically examined, but, when found diseased, will be detained till cured.

"I think, and the Superintendent of Police agrees with me, that the expense of the tickets and photographs should be borne by the women themselves."

The following rules and regulations were to be observed by the keepers and inmates of brothels:

1. Any person wishing to keep a brothel, to which foreigners may be admitted, to apply at the Central Police Station when the name of such person, the house she intends to occupy, with the females she proposes to keep, will be registered; she shall bring two photographs of each female, and will be instructed when and where to attend with the females for the purpose of being there examined by the medical officer.

2. Each inmate of a brothel to present herself for examination at such place and at such days as may be appointed by the Council, taking her photograph and card for identification and signature.
3. If found healthy the card to be dated and signed by the medical officer, and the person so examined may return to her home.

4. If found unhealthy the photograph and card to be detained until again examined and found healthy by the medical officer.

5. If any female who has not been examined by the medical officer, or who has been examined by him and found unhealthy, and who has not since been examined and had her card and photograph returned to her by the medical officer, shall be found in any brothel, the proprietor of such house to be proceeded against either for a breach of these regulations, or for keeping a disorderly house.

6. The photograph and card to be at all times exposed in the brothel in which the person designated may reside, as may be directed by the Council.

7. The proprietor of a brothel shall at all times admit any person authorized by the Council to enter such house for the purpose of ascertaining that the regulations are strictly complied with.

8. No female shall remove from one brothel to another unless information shall have previously been given at the Central Police Station and the fact noted on the card of such female.

1877.—The Council in conjunction with the French Council agreed to put in force from the 1st of January the following tentative scheme:——

(a) The licensing of public women

(b) The registration of brothels and women*

(c) Weekly examination of Chinese brothels receiving visits from foreigners.

(d) Treatment of infected women who will voluntarily submit.

(e) The closing of native brothels under order from Mixed Court where one or more inmates object to treatment.

*The moral point of view of this matter of registering brothels and receiving fees from prostitutes formed the subject of a lengthy discussion at the meeting of Ratepayers on the 6th March, 1877.

Speaking to a motion of amendment the proposer, in his moral earnestness, said: "There was always one test for a Christian man by which he could tell whether he ought to support an undertaking, and that was, Could he ask the blessing of God on it? And he asked, Could any one ask that blessing on a scheme countenancing and protecting fornication, in fact, making provision for the flesh to fulfil the lusts thereof? He would not take up any more time, but would now move as an amendment to the original motion—'Provided that nothing contained therein shall be construed into authorizing the Council to grant licences to or receive fees from any brothel or public prostitute.'" The amendment was not carried.
As regards foreign prostitutes, the Council did not propose to compel submission to inspection, as they avail themselves readily of medical advice but if it appears necessary hereafter, the Council intended to take steps in this direction.

"As was anticipated, the women at first refused to attend, preferring rather to close their houses and even, in a few instances, to leave the Settlement. Later, so far as the prejudices of the women against the system were concerned, these were satisfactorily overcome, if indeed they ever constituted a real difficulty."

(Health Officer's Report, 1877, p. 35.)

1878.—In this year the Health Officer reported as follows:—

"The expectations connected with this institution (Lock Hospital), and expressed in the Report for the year 1877, have been completely fulfilled. As regards the prejudices of the women against the system which the last Report said were satisfactorily overcome, they have been scarcely felt the last year. The best evidence of this is the constant increase shown by the list of women on the roll. Whilst according to the last report there were only 68 women distributed amongst 17 houses, there are now 106 women for 21 houses; and, as has been formerly the case, many more have been from time to time examined and rejected.

"The institution has also done good in a sanitary point of view. This is especially the case in consequence of the women giving greater attention to their persons and clothing after once being examined and knowing their examination is to be repeated weekly. Although the number of women examined has increased to almost double that of last year, there have been, nevertheless, absolutely fewer cases of disease. The report for December last gives as a maximum 12 sick women, all cases being of a light nature. Another consequence of the regular surveillance, which is not to be undervalued, is the fact that women affected with secondary syphilis, who in consequence would be subjected to prolonged treatment, generally leave the Settlements for their homes.

"It is a most satisfactory result that according to reports obtained from surgeons of men-of-war of various nationalities stationed at Shanghai, cases of syphilis have greatly decreased in number and are rare in comparison with the sick list at other ports where there is no surveillance of prostitutes." (Health Officer's Report, 1878, p. 47.)

1879.—Dr. Jamieson moved at the annual meeting of ratepayers that the appropriation for the Lock Hospital be struck out of the Budget for 1879, on the ground that the result of his experience during the past year was that venereal disease had
largely increased instead of diminished since the inspection was brought into operation, and further expressed himself in very strong terms regarding the working of this institution.

In reply to this criticism, Dr. Zachariae, Acting Surgeon to the Lock Hospital, stated that the Annual Report of the General Hospital for the past year showed a considerable decrease in syphilis when compared with previous years. A similar favourable report had also been noticed by Dr. Johnston at the Sailors' Home during 1878, and by ship surgeons during the stay of their vessels in port, and that finally Dr. Galle, the other medical attendant of the Lock Hospital, agreed that the system worked well and that there was a definite diminution in the number of cases of venereal disease during 1878 as a result of this work.

1886.—At the beginning of this year the Health Officer (Dr. Henderson) considered the Lock Hospital as at present constituted a failure, and as he could see no prospect of effecting that extension and improvement which he believed to be essential to secure efficiency, he felt it his duty to recommend the Council to discontinue the work.

The Council did not consider it advisable to agree to this, as they were of opinion that the present system, however imperfect, had to a considerable extent prevented venereal disease amongst the sailors visiting the port. Subsequently, the French Council intimated that they intended to continue their usual contribution towards the support of the institution.

The British Admiral strongly protested against the closing of the Hospital. Dr. Henderson gave as further reasons for his attitude: "Our failure to make any approach to the establishment of a Hospital properly so-called and our weekly examinations are as limited as they were five years ago, while the number of native prostitutes frequented by foreigners—chiefly by the addition of Japanese—has considerably increased. The treatment of disease, when detected, is as unsatisfactory as ever."

The views of the Health Officer to the French Council (Dr. L. Pichon) were that improvement of the working of the Lock Hospital, and not its suppression, was what was needful, and that while admitting that the previously existing clandestine native prostitution had been dangerously supplemented by the Japanese
element, he thought an understanding could be arrived at with the Japanese authorities, and that no official opposition would be offered to the enforcement upon Japanese women of a sanitary measure to which they have to submit in their own country, namely, subjection to the same medical examination which Chinese women undergo. "It is the existing inequalities in the treatment of Japanese and Chinese prostitutes which is chiefly put forward by the latter to justify their neglect of municipal regulations, and their avoidance of examination." (Municipal Council Report 1886, p. 77 et seq.)

**Impracticability of Surveillance of Prostitutes.**—The above facts of an experience extending over 10 years show that any justification of faith in measures of surveillance of prostitutes for the control of venereal disease was found wanting in practice in the early days of the Settlement, even when the total foreign population, according to the census of 1885 for the Settlement (north of the Yang-king-pang) gave only 1,775 men, 1,011 women and 887 children; these figures, added to the last census returns for the Shipping (including the men of ships of war lying in the river) and the French Concession made in 1870, gave a total of 5,090 foreigners.

1896.—A Committee appointed by the Ratepayers recommended the licensing of Brothels as part of Bye-law No. XXXIV.

1898.—A reference to the Lock Hospital appears in the Annual Report for this year, in which it is stated that it is an important factor in the preventive medicine of the Settlement, by reason of the detention and cure of infected native prostitutes. As the class who are protected subject themselves voluntarily to the risk of contracting disease, it is only right that they should pay for the protection gained. At present there is a tax of one dollar a month on these native prostitutes. This does not pay the expenses of the hospital; consequently the excess devolves upon the public. This would be avoided by increasing the tax to, say, two dollars a month, a sum which they are quite able to pay.

1900.—"The Lock Hospital in Foochow Road has been vacated, the accommodation of these patients forming an essential part of the new Isolation Hospital. The number of in-patients admitted during the year was 271 while 10,100 medical examinations were made." (Annual Report, 1900).
1905.—Another committee of lay members sat to consider the question of prostitution in the Settlement and unanimously reported in favour of the strict carrying out of Bye-law XXXIV, and therefore of licensing brothels. The recommendation was, however, turned down by the then Watch Committee as being, from a police point of view, impracticable, and in some directions not wholly desirable.

Owing to official prejudice, Bye-law XXXIV was never exacted against brothels, and no control by this means was ever exercised over brothels. Registration and inspection of certain native prostitutes continued as a system up to 1920:

1920.—A third Committee authorised by the Municipal Council, and composed entirely of lay members, issued a Report on Vice Conditions in Shanghai, in which the following summary of recommendations appears:

1. That brothels be eliminated.
2. That brothels be licensed.
3. That special notification be given to all registered owners of brothel property in order to endeavour to get their co-operation.
4. That no brothel license be granted in any event for premises near schools.
5. That as this cause necessitates more extended work for prostitutes it should be done by means of increased grants to the Door of Hope and kindred institutions.
6. That the law against street soliciting be strictly enforced, including proceedings against the brothel-keeper.
7. That the law prohibiting indecent advertisements by way of posters or in newspapers be strictly enforced.
8. That the law against the sale of intoxicating liquors in unlicensed premises be strictly enforced.
9. That convictions for offences relating to prostitution recorded against holders of any license render the holder incapable of holding any license again.
10. That no "brothel wine license" be issued in future.
11. That parks and other open spaces be well lighted and policed in the summer months.
12. That the examination of prostitutes by the Health Department cease.

13. That future provision for the treatment of venereal disease be undertaken by the Health Department.

14. That propaganda be undertaken by the Health Department relating to the evils of promiscuous intercourse and the dangers arising therefrom.

15. That the Health Department keep such returns as it can relating to venereal disease, and hospitals receiving public moneys be compelled to treat venereal disease and keep returns in such form as the Health Department may require; failure to do this to form ground for refusing any further grant.

16. That a Conference of all educational authorities in Shanghai and neighbourhood be called to investigate thoroughly the advisability and methods of teaching social hygiene in schools.

1922.—In pursuance of the scheme for the gradual elimination of brothels from the Settlement, adopted as a result of the Vice Commission's Report published in the Municipal Gazette of March 19, 1920, the third drawing took place at the Town Hall on December 5, 1922, when one-third of the existing brothels were selected by lot and the license in respect thereto to be withdrawn on April 1, 1923. On December 31, 1922, there were 343 brothels on the register. The license fees collected under this heading for the year amounted to Tls. 634. (Annual Health Report, 1922, p. 36c).

1923.—On 15th of February the Shanghai Medical Society met to discuss "The Control and Treatment of Venereal Diseases from a Public Health point of view." The following is a résumé of some of the opinions expressed, none of which, however, formed the subject of a resolution.

"Venereal disease is a terrible peril"; "should be placed on the list of contagious diseases"; "reduction to be looked for in advances in medical treatment"; "procedures both of regulation and of prohibition have failed, and the present system requires revision."

"Sailors who have contracted venereal disease should be confined on board their ships if not under treatment in hospital."
"The British Merchant Shipping Act discriminates unfairly against sailors suffering from venereal diseases and encourages men to hide disease."

"Public notices about venereal diseases should notify free treatment and free Wassermann tests, and free facilities for patients to sterilize themselves against infection, and this without compulsion." "Special free clinics should be formed furnished with necessary equipment." "Facilities should be provided for treatment after office hours." "Free treatment should be extended to native population."

"The medical profession and not the administration authorities should be in charge of general prophylaxis."

"Treatment by chemists or quacks, or other unqualified persons, should be prohibited"; "advertising of nostrums should be prohibited." "Segregated and regulated districts are better than indiscriminate promiscuity, where there can be no possibility of control." "Independent prostitutes are a greater menace than those in houses of prostitution." "Statistics prove that less disease emanates from brothels than elsewhere." "Need for the education of the public, and of children in schools."

1923.—"The Public Health Department has, at present, no power to regulate, restrict or control Venereal Disease in Shanghai."

Letter of Commissioner of Public Health to Chairman of present Committee.

Discussion.

It seems expedient to the Committee to quote these past records at length for the reasons that they are not easily available for reference, and their study is necessary for the formation of opinion on the problem as represented by the past experience of Shanghai. A little thought about the meaning of its own experience of past administrative procedures which had for their object simply action against native prostitutes and brothels solely for the protection of foreigners shows, even provided such action could be effectual, a limited view of the problem and one likely to produce limited results especially as the social evil in Shanghai is merely a vice and not a crime forbidden and punishable by law.

The records of like procedures in other civil communities give similar and greater affirmation of this failure of results from their sanitary superintendence of prostitution.
It is interesting to note in the above records that, with the exception of Dr. Henderson's work as Health Officer, the initiative in attempts to improve vice conditions in Shanghai has come from the laity. This shows how much the question of the suppression of venereal diseases is one of common interest to all classes of society, and one which must exercise the activity of the Community at large still more in future.

The Committee appreciate the importance of the public opinion and sentiment behind the desire for enlightenment on this important subject, and they believe that the effectiveness of efforts to combat venereal diseases includes:

1. The value of efforts to raise the standard of a general conviction in the community that the evil is a serious one and must be dealt with.

2. Preventive and rescue work; the need of measures to safeguard girls and women who might be led into prostitution by temptation, fraud, or force.

3. The value of efforts to diminish the publicity and profits of the business of prostitution.

4. The fact that the moral issues involved in the problem demand mention of the part played in causing prostitution by such factors as unemployment, low wages, indifference, want of preventive measures against prostitution, and absence of efforts to work upon the individual men and women who are concerned by pure and kindly human contact.

STATISTICS OF VENEREAL DISEASE IN SHANGHAI.

Venereal diseases are diffused by prostitutes. The common habitat of the causal micro-organisms is personal to the infectress and her client. Of any given number of prostitutes, always about one-third may be assumed to be diseased. In the spread of venereal diseases one case tends to become two, the two to become four; or it may be the one tends to become three, the three to become nine, and so on. In all cases there is a tendency to geometrical progression, with the ratio varying according to the opportunities for infectivity.
Some measure of the morbidity of promiscuous fornication in Shanghai is afforded by the statistics of the General Hospital. The hospital was originally founded as a private institution under the management of trustees for the foreign sailors who required treatment, and in the early years nearly all the patients treated within its walls were derived from the ships in port. It is important to remember this in reading the Hospital Statistics relating to venereal diseases.

In 1875 the Hospital became a public institution under the management of a Board of Governors.

The following table gives the incidence of venereal diseases among the cases admitted to the General Hospital during the quinquennial periods covering the years 1865 to 1919, and for the period of the three years 1920 to 1922.

**Table I. Incidence of Venereal Diseases in Shanghai.**

<table>
<thead>
<tr>
<th>Period</th>
<th>Total Number of Patients Admitted</th>
<th>Cases of V. D. including venereal affections (bubo, venereal orchitis and stricture)</th>
<th>Percentage of V. D's to Total Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1865-1869</td>
<td>2336</td>
<td>450</td>
<td>19.2%</td>
</tr>
<tr>
<td>1870-1874*</td>
<td>1743</td>
<td>289</td>
<td>16.5%</td>
</tr>
<tr>
<td>1875-1879</td>
<td>1631</td>
<td>232</td>
<td>14.1%</td>
</tr>
<tr>
<td>1880-1884</td>
<td>2128</td>
<td>214</td>
<td>10.0%</td>
</tr>
<tr>
<td>1885-1889</td>
<td>2325</td>
<td>203</td>
<td>8.7%</td>
</tr>
<tr>
<td>1890-1894</td>
<td>2917</td>
<td>242</td>
<td>8.3%</td>
</tr>
<tr>
<td>1895-1899</td>
<td>4322</td>
<td>402</td>
<td>9.3%</td>
</tr>
<tr>
<td>1900-1904</td>
<td>6610</td>
<td>616</td>
<td>9.3%</td>
</tr>
<tr>
<td>1905-1909</td>
<td>7615</td>
<td>602</td>
<td>7.9%</td>
</tr>
<tr>
<td>1910-1914</td>
<td>7927</td>
<td>599</td>
<td>7.5%</td>
</tr>
<tr>
<td>1915-1919</td>
<td>7595</td>
<td>507</td>
<td>6.6%</td>
</tr>
<tr>
<td>Totals</td>
<td>47149</td>
<td>4356</td>
<td>9.2%</td>
</tr>
<tr>
<td>1920-1922</td>
<td>7128</td>
<td>591</td>
<td>8.2%</td>
</tr>
<tr>
<td>Totals</td>
<td>54277</td>
<td>4947</td>
<td>9.1%</td>
</tr>
</tbody>
</table>

*A change in the commerce of the port from sailing vessels to steamers occurred at this time. Not only are there fewer seamen now visiting Shanghai, but their stay is shorter (Reports of the General Hospital, 1870-1874).
The average length of residence in hospital under treatment was 21 days.

Of the above total of 4,947 cases of venereal disease, 1,979 were cases of syphilis, giving the unusually large proportion of 40 per cent. as against the common experience elsewhere of 25 per cent., only one-fourth part of all cases of venereal disease being due to syphilis.

It has to be noted, however, that the above figures do not cover all the simpler forms of venereal disease admitted to the Hospital, for the reason that in some of the medical reports, particularly those in the earlier periods, the statement is made that "the returns deal only with the severer forms of the disease," and that "venereal disease was the cause of many admissions to the Hospital not entered under Venereal Disease in the Catalogue of Diseases." Moreover, prior to 1901 venereal bubo was not tabulated as such, but as "disease of lymphatic glands, including venereal bubo." For statistical purposes only one-half of these cases had been considered as venereal, although a truer proportion probably would be two-thirds. In addition, there were numbers of cases catalogued as urethritis, vaginitis, endometritis, salpingitis, obviously of venereal origin: also a number of diseases due to syphilis which do not come under review in the above statistical statement.

Allowing for omissions and irregularities of nomenclature in considering the above statistics, the fact is elicited that about 1 in every 10 patients admitted into the Hospital suffers from venereal disease. In 1922, in the out-patient department of the Hospital, or Free Dispensary, of 3,227 patients 230 were treated for venereal diseases—a proportion of 7.1 per cent. Each of these 230 patients was subsequently seen at the dispensary on an average about five times. In London the number of cases of venereal disease seen in free dispensaries is about 7 per cent of the total bodily diseases.

Venereal Diseases in Hospitals for Chinese.

Shantung Road Hospital.—The medical reports of the Shantung Road Hospital prior to 1870 contain no definite information regarding venereal diseases. The Report for 1863 mentions that "venereal diseases of all kinds have been unusually
common both among men and women. It is no uncommon thing for a woman to come in charge of 6, 8 or 10 others, suffering from the disease.

The following table gives the incidence of venereal diseases among the patients admitted to the Shantung Road Hospital, including those treated as out-patients, from 1870 to 1922. It should be noted that from 1896 to 1904 the statistical records were altered, "no difference being made between old and new patients, all being reckoned together" in the out-patient department. From 1905 onward no medical records for out-patients are available.

TABLE II.—SHANTUNG ROAD HOSPITAL: INCIDENCE OF VENEREAL DISEASE, 1870-1922.

<table>
<thead>
<tr>
<th>Quinquennial Period</th>
<th>Total Number treated</th>
<th>Total V.D.'s treated</th>
<th>Percentage of V.D. to total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1870-1874</td>
<td>62,856</td>
<td>3,329</td>
<td>5.3%</td>
</tr>
<tr>
<td>1875-1879</td>
<td>74,896</td>
<td>3,869</td>
<td>5.2%</td>
</tr>
<tr>
<td>1880-1884 a</td>
<td>76,093</td>
<td>4,511</td>
<td>5.9%</td>
</tr>
<tr>
<td>1885-1889 b</td>
<td>93,154</td>
<td>5,310</td>
<td>5.7%</td>
</tr>
<tr>
<td>1890-1894 c</td>
<td>95,121</td>
<td>5,627</td>
<td>5.9%</td>
</tr>
<tr>
<td>1895-1899 d</td>
<td>359,886 d</td>
<td>24,004</td>
<td>6.9%</td>
</tr>
<tr>
<td>1900-1904 d</td>
<td>460,929 d</td>
<td>35,251</td>
<td>7.6%</td>
</tr>
<tr>
<td>1905-1909 e</td>
<td>6,295 e</td>
<td>345</td>
<td>5.4%</td>
</tr>
<tr>
<td>1910-1914</td>
<td>8,002</td>
<td>458</td>
<td>5.7%</td>
</tr>
<tr>
<td>1915-1919 f</td>
<td>9,074</td>
<td>385</td>
<td>4.2%</td>
</tr>
<tr>
<td>1920-1922 g</td>
<td>5,321</td>
<td>262</td>
<td>4.9%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>1,251,027</strong></td>
<td><strong>83,351</strong></td>
<td><strong>6.6%</strong></td>
</tr>
</tbody>
</table>

a. No medical statistics available for 1883.
b. " " " " 1884.c. " " " " 1885.d. These figures represent old and new patients reckoned together.
e. The average number of visits of old patients being three.
f. There are no medical statistics for out-patients from this date.
g. No medical statistics available for 1916.

_**St. Luke’s Hospital.**_—The only medical statistics available for the last four years issued by St. Luke’s Hospital are those for 1919, when 2,304 patients were admitted, of whom 195 suffered from venereal diseases—a proportion of 8.4 per cent.
Hospitals and Venereal Disease.

It is a matter calling for special remark that the medical records of these two important hospitals for the treatment of Chinese are not as complete nor as accurate as they should be for purposes of reference. Hospital medical records are an important index of the Public Health, and as such they should be beyond questioning.

The Committee think it would be to the public interest to have a uniform system of medical records carefully kept by the important hospitals in Shanghai, particularly by those receiving public grants in aid.

These statistics give some idea of the actual proportion of venereal diseases in Shanghai. The current figures do not show any exceptional incidence in the community, and they probably illustrate the utmost dimensions the evil can attain in this city. The figures of admission for venereal diseases give a notion of the quantity of hospital accommodation which is requisite to satisfy this need.

The Committee are satisfied that hospital accommodation is sufficiently provided in Shanghai for the treatment of venereal diseases. They think, however, that special accommodation should be set aside for both men and women, and proper equipment provided for the treatment of these cases in those hospitals receiving grants from public monies.

Dr. Henderson makes a statement in a footnote on the first page of his report on prostitution in Shanghai in 1871, which is applicable almost in similar terms at the present day.

"Women who seek the aid of foreign medical men at the Chinese Hospital present, with few exceptions, examples of advanced disease which have resisted nature and the efforts of the native doctors. These patients are generally very irregular in their attendance, seldom or never continuing their visits until a complete cure is effected. There is not at present in Shanghai any hospital, or any part of a hospital, set apart for the reception of women suffering from venereal disease. In connection with the General Hospital such an arrangement may perhaps be considered unnecessary, the number of foreign prostitutes being so inconsiderable, but if the erection of a separate Lock Hospital be not contemplated, something should be done to enable the native establishments to supply the wants. At present, with scarcely a single exception, native women suffering from venereal disease are treated at the Chinese hospitals as out-patients; in neither of the two
institutions (Shantung Road Hospital and St. Luke's Hospital) is there the necessary accommodations for the indoor treatment of such cases, and the proper appliances are entirely wanting in both."

THE INTERNATIONAL SETTLEMENT AND THE CONTROL OF VENEREAL DISEASES.

Social Problems.—Shanghai has the distinction of being one of the few cities where municipal function is not directly subordinate to a larger administrative unit. It is able to meet each situation as it arises in the light of local conditions, guided by local opinion. The "local conditions" in relation to the public control and treatment of Venereal Disease are undoubtedly of a very complex nature.

For one thing, the territorial unity of the community is destroyed for administrative purposes by the large populations surrounding the Settlement boundaries, under separate jurisdictions.

Another local problem is that of the mixed population, estimated according to the Commissioner of Public Health at 840,000 on December 31st, 1922, of which number only 26,000 were foreigners. The latter figure includes non-Chinese Asiatics, who comprise, roughly, 50 per cent. of the total. The term "non-Chinese Asiatic" includes Japanese, Indians, Malays, Koreans, etc. The Chinese total of 814,000 fluctuates considerably. Males are in excess of females in the proportion of three to two.

The Community is housed in 69,195 houses, of which 4,750 are foreign. The area of the Settlement is 8.72 sq. miles.

There are 32 police (foreign, Sikh and Chinese) per 10,000 of the population, and 306 police per square mile.

The density of the population within International limits is, roughly, 150 persons per acre. In certain congested areas (the Northern and Eastern Districts) this figure reaches over 400 per acre.

The total population of Shanghai, including Chapei, French Concession and the native city, has been conservatively estimated at two millions. Of this number, roughly, 35,000 are foreigners, including non-Chinese Asiatics. Japanese account for about 45 per cent. of the total. There are approximately 3,000 Russian refugees resident in the combined areas.
Seafaring Population.—The large seafaring population is another factor in local conditions. According to the Commissioner of Customs, a conservative average number of vessels in port daily, excluding men-of-war, is 70. Allowing 90 as the average number of crew, the total number of seamen (foreign and native) in port daily amounts to 6,300. During 1922, of British merchant ships alone, 677 entered from, and 596 cleared for, foreign ports. The average stay of these vessels in port was 5 days. This large seafaring population constitutes an entirely exceptional problem in connection with venereal diseases and the Public Health—quite different from the case of the civil population. The mode of life is an essential determining cause of prostitution. It was under the strong compulsion of this circumstance, and also considerations connected with the serious quantity of temporary disablement from venereal disease among their sailors, that the British Admiral and other Naval Commanders urgently requested that the Contagious Diseases Act should be administered on a small scale in Shanghai in 1875.

Sailors peculiarly need the humanising effect of being cared for while on shore. Unfortunately there is no proper Seamen’s Institute in Shanghai for the social life of sailors. The Hanbury Institute, the Wayport Rooms, the Union Jack Club and the Navy Y.M.C.A. do excellent work so far as they go, but the beachcomber element—nomads who are hardly ever a day ahead of their wants—spoil the two former Institutions for many mercantile seamen who might otherwise find them useful.

Something better is required for sailors in Shanghai. The incidental advantage to Shanghai of a well-founded Seamen’s Institute would appear in the moral and physical elevation of the inmates above the less desirable attractions of back streets. Similarly a Home or Lodging House for native seamen under voluntary or Municipal management is a desideratum. Moreover, the lot of the seaman, at any rate of British seamen, sick from venereal disease, is made more difficult than need be by those clauses of the Merchant Shipping Act, 1894, which provide that where a seaman is discharged and left behind at a foreign port suffering from venereal disease he loses his wages during such time as he is unfit for duty, and that his medical and hospital expenses can be deducted from such wages as are due to him.
Such provisions seem altogether unfair and form blots on a succession of Acts which were passed in order to improve the lot of those who serve before the mast. The afflicted seaman naturally does all he can to hide the contagion from authority so hostile to his interests, and incidentally supplies a menace to shipping ports.

**GENERAL CONSIDERATIONS.**

While the Committee recognise that the terms of their reference have to do chiefly with the public control and treatment of the clinical manifestations of venereal diseases, their professional experience has impressed them with the fact that they would only misapprehend the problem if they did not recognise that promiscuous sexuality is inseparable from human society in large communities. The past records of the difficulties in dealing with this primeval and ever-active sexual impulse is strikingly summarised in an article on "Prostitution" in the *Encyclopaedia Britannica* (11th edition, 1910-1911), in the following words:—“In different countries and ages it has in turn been patronized and prohibited, ignored, recognised, tolerated and condemned, regulated and let alone, flaunted and concealed... Christianity, the greatest moral force in the history of mankind, has repeatedly and systematically attacked it with a scourge in one hand and balm in the other; but the effect has been trifling or transient. Nor have all the social and administrative resources of modern civilization availed to exercise an effective control. The elementary laws on which prostitutes rest are stronger than the artificial codes imposed by moral teaching, conventional standards or legislatures; and attempts at repression only lead to a change of form, not of substance.”

As against any feeling that the problem is hopeless of solution or improvement, we have to remember that it is only within the last century that public health activities have been developed as an important and continuous branch of city administration with special attention to the preventive side. And it is only within much more recent times that an awakening to a new social consciousness among citizens has developed.

On the medical side it is only within the last fifty years that a beginning was made of a truly scientific study of this medical and social problem.
The gonococcus, the specific cause of gonorrhoea, was only discovered in 1879; the bacillus of chancroid in 1889; and the protozoon of syphilis in 1903. The first International Congress for the study of the prophylaxis of syphilis and other venereal diseases was held in Brussels as recently as 1899. At the conclusion of the conference there was founded the first International Society for the sanitary and moral prophylaxis of syphilis and other venereal diseases. It has its seat in Brussels and meets at periodical intervals for international conference.

Nations are only now learning that organization is necessary to limit and resist the inroads of communicable diseases.

**Conclusions.**

This investigation of records and statistics relating to venereal diseases in Shanghai contributes some of the elements necessary for judging what measures are expedient to have in this city against the evil.

The Committee agree that there are no valid local reasons for protection and control of prostitution, and consider that public policy best which is decidedly in favour of not fostering such an order of things.

The past experience in Shanghai shows that the good which can be got through the spending of public funds in the matter are not such as to reasonably compensate for the cost and trouble at which it was attained. We believe that no appreciable good would be got by a superintendence of prostitution even with a much larger and more expensive organization than heretofore, particularly as the local circumstances are entirely unfavourable for success.*

The Committee are of opinion that the object of measures dealing with the control and treatment of venereal diseases from a public health point of view should be active in:

(a) The protection of health by early and efficient treatment of diseased individuals among the poor at the public expense.

(b) Preventive and rescue work.

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*English Public Health Law has not hitherto taken any special cognisance of venereal diseases of the civil population. This neutral official attitude commonly exists throughout the world among English-speaking civil communities.
In regard to (a) the Committee recommend the organization of a Venereal Disease Department under the Commissioner of Public Health. This Department should have a special medical officer to supervise the Venereal Disease Clinics and the work of the Department generally. They also suggest the addition of women inspectors as a promising step in the direction of practical results.

In regard to (b) the Committee think that close relations should exist between the Health Department and those institutions engaged in preventive and rescue work, and that sufficient financial aid should be given to them to carry on their work efficiently.

The work done by these institutions and by kindred associations should represent the social side of an organization against vice and the control of venereal diseases which is supplemental to and completed by the work of the Public Health Department. Such an organization would help to relieve the regular police of the undesirable function of enforcing standards of moral conduct in a highly cosmopolitan community not altogether in sympathy with such ideals.

In connection with the question of efficient treatment the Committee call attention to the harm done by attempts to treat venereal diseases by quacks and unqualified persons. The thorough treatment of syphilis is a matter of several years, and gonorrhoea is a disease which, even more than syphilis, demands the most precise knowledge of complicated technique and morbid anatomy alone possessed by the scientifically trained medical man.

**Summary of Recommendations**

1. That in the interest of the Public Health the best public policy in Shanghai is not to foster any official system of supervision of prostitutes.

2. That prostitution and venereal diseases should be deemed matters of official concern only in the interests of the Public Health, and in the preservation of orderliness and decency.

3. That the Municipal Council organise a Venereal Diseases Department under the Commissioner of Public Health.

† "In matters medical the ordinary citizen of to-day has not one whit more sense than the old Romans, whom Lucian scourged for a credulity which made them fall easy victims to the quacks of the time."—Sir William Osler, M.D., in *Aequanimitas*, p. 6.
4. That the Municipal Council require of hospitals receiving grants in aid satisfactory accommodation and equipment for the care and treatment of venereal diseases for both men and women, including clinics for out-patients.

5. That the Council require of hospitals receiving grants in aid accurate medical records catalogued on a uniform system, including statistics relating to venereal diseases.

6. That the Council should organise additional clinics for the treatment of venereal diseases among the poor where necessary.

7. That all clinics for venereal diseases should show a prominent sign or coloured light (the Service blue light); that all clinics should be available for sterilization treatment before and after ordinary working hours; that all clinics should keep a register detailing as accurately as possible particulars as to the source of infection in an infectee, occupation, length of residence in Shanghai, etc. Registers should be available for inspection by a medical officer of the Health Department.

8. That action against any notorious source of infection should be the concern of the Commissioner of Public Health.

9. That the Commissioner of Health should be empowered to engage women sanitary inspectors if he considers them necessary to assist in this work.

10. That the Commissioner of Public Health should exhibit public notices about venereal diseases in each of the substations of his Department, which notices should notify free treatment, free Wassermann tests, and free facilities for sterilization.

11. That special hoardings with public notices relating to venereal diseases and their free treatment should be placed in a prominent position on public landing stages along the river front.

12. That similar public notices should be placed in public markets, public latrines, and wherever advantageous.
13. That the Commissioner of Public Health should publish and circulate leaflets stating the official position in regard to venereal disease in Shanghai; the incidence of disease in Shanghai according to hospital statistics; the risk of promiscuous sexual intercourse; the need for immediate sterilization; where public facilities for sterilization and treatment of the infected are provided; how the untreated or ineffectively treated perpetuate and spread the infections suffered by them.

14. That the advantage, if any, of the earlier closing of public bars and licensed places of entertainment in relation to the diffusion of venereal diseases be investigated by the Commissioner of Public Health.

15. That the Commissioner of Public Health should investigate and report on the facilities for proper lodging accommodation in Institutes for foreign and native seamen in Shanghai.

16. That shipowners and masters of ships be notified of the necessity of giving facilities for the treatment of cases of venereal disease among crews of vessels visiting the port.

17. That washerwomen and needlewomen should not be allowed to visit ships unless provided with special permits from the Missions to Seamen or other authorization.

18. That public advertisement of quack cures and remedies should be prohibited, and attempted treatment by unqualified persons should be a punishable offence.

19. That co-operation for purposes of public control of vice and venereal diseases should exist between the Public Health Department and neighbouring municipalitie, and also between the Health Department and social institutions and societies engaged in this work.

20. That the Public Health Department become associated by membership with International Societies for the control and investigation of venereal diseases from a public health point of view.