#### [Report of the Medical Officer of Health for Ealing].

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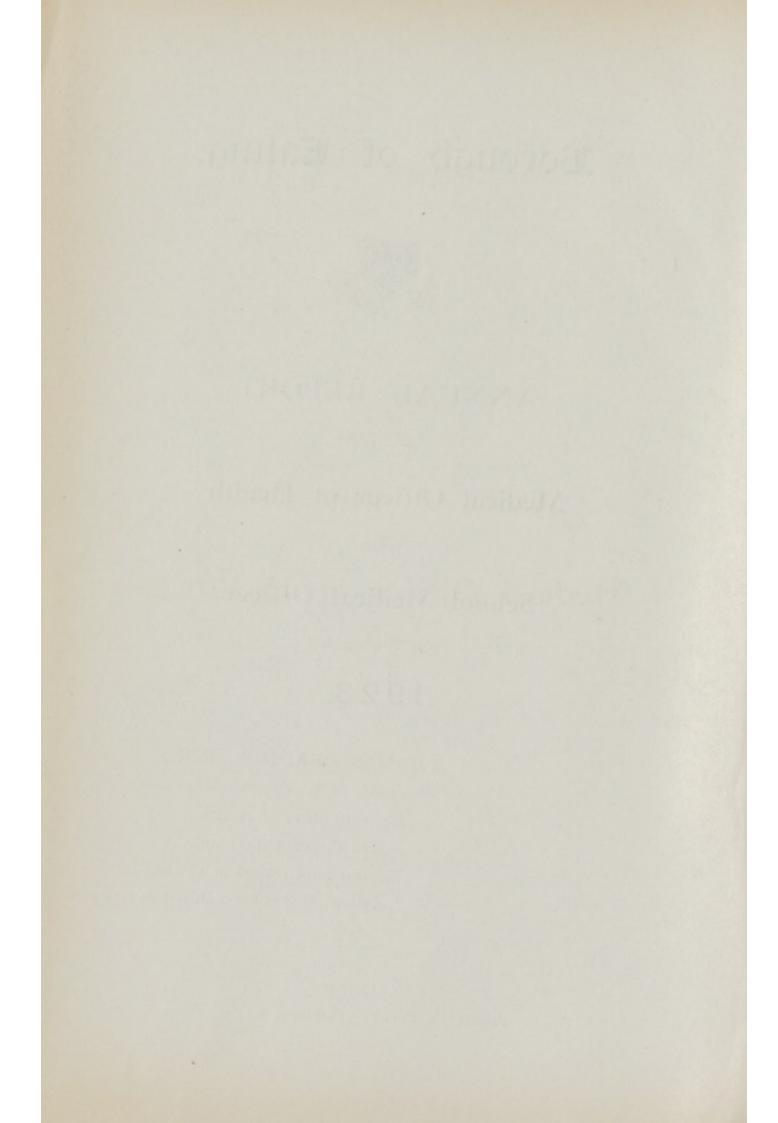
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## ANNUAL REPORT

OF THE

Medical Officer of Health, 1923. ANNUAL REPORT

Medical Officer of Health,

1923

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#### PUBLIC HEALTH DEPARTMENT.

#### STAFF.

Medical Officer of Health and Superintendent of Isolation Hospital—

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Assistant Medical Officer of Health and Medical Attendant of Isolation Hospital—

A. J. B. Griffin, M.B., Ch.B., D.P.H.

Consultant, Maternity and Child Welfare Centre (Ante-Natal Clinic)—

JOHN W. BELL, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M.

Medical Officer, Maternity and Child Welfare Centre (Infant Consultations)—

S. GRACE BANHAM, B.Sc., M.B.

Chief Sanitary Inspector—

THOMAS HILL, Cert. R.S.I., and Cert. Inspector of Meat and Other Foods.

Sanitary Inspectors—

James Stubbs, Cert. R.S.I. and Cert. Inspector of Meat and Other Foods.

George W. Stevens, Cert. R.S.I. and Cert. Inspector of Meat and Other Foods.

Staff-(Contd.).

Health Visitors-

ELEANOR EVANS, Cert. R.S.I., Cert. C.M.B. (Senior). GERTRUDE DOWSETT, Cert. R.S.I., Cert. C.M.B., and Trained Nurse. MARGUERITE FARROW, Cert. R.S.I., and Trained Nurse.

> Chief Clerk and Committee Clerk-HARRY BIRRELL.

Clerk and Laboratory Assistant-ERNEST W. HILL.

Clerks-

WILLIAM A. J. TURNER. OLIVE LEVASSEUR.

Maternity and Child Welfare Centre-13, Mattock Lane, Ealing.

#### PUBLIC HEALTH COMMITTEE.

Alderman E. J. Morgan (Chairman).

Alderman H. Armriding (Vice-Chairman).

Alderman H. W. Peal, J.P., Councillors J. C. Fuller, J.P.,

Lt.-Col. R. R. Kimmitt, O.B.E., W. F. Piper, W. D. Pocock,

and W. T. White.

#### MATERNITY AND CHILD WELFARE COMMITTEE.

Councillor W. T. White (Chairman).

Alderman H. Armriding (Vice-Chairman).

Alderman E. J. Morgan and H. W. Peal, J.P.,

Councillors J. C. Fuller, J.P., Lt.-Colonel R. R. Kimmitt, O.B.E.

W. D. Pocock and W. F. Piper.

Mesdames Cocker, Cooper, Morris and Sharp.

#### SUMMARY OF GENERAL STATISTICS, 1923.

Population (Estimated 1923)			 68,120
Population (Census, 1921)			 67,755
Population (Census, 1911)			 61,222
Area of Borough in Acres			 2,946
Number of Structurally Separate	Dwellings	(1921)	 14,967
Rateable Value			 £575,400
Net Produce of a Penny Rate			 £2,330
0.15 80.0 25.0 61.0			

## SUMMARY OF VITAL STATISTICS, 1923.

#### Births:

Legitimate Males, 531 Females, 482 Total, 1,013 Illegitimate Males, 19 Females, 28 Total 47	1,060
Birth-rate	15.6
Deaths: Males, 314 Females, 411 Total	725
Death-rate	10.6
Deaths of Infants under 1 year:	
Legitimate: — Males, 26 Females, 27 Total, 53 )	62
Illegitimate: — Males, 5 Females, 4 Total, 9	02
Infant Death-rate per 1,000 Births:	
Legitimate, 52.3 Illegitimate 191.5 Total	58

					Total	Death-rate per 1,000 Population
Measles					-	0.00
Whooping Coug	gh				7	0.10
Diarrhoea (und	er 2 year	rs of age	per 1,00	0 births	s) 3	2.8
Diphtheria					6	0.09
Scarlet Fever					1	0.01
Influenza					11	0.16
Tuberculosis of	Lung				60	0.88
Other Forms of	Tuberc	ulosis			10	0.14
All Forms of To	uberculo	sis			70	1.03

# Comparison of Vital Statistics of Ealing with those of England and Wales, etc., 1923.

	England and Wales	105 Great l Towns (including London)	London	Ealing
Birth Rate	19.7	20.4	20.2	15.6
Death Rate	11.6	11.6	11.2	10.6
Infant Death Rate	69.	72.	60.	58.
Measles Death Rate .	0.14	0.15	0.08	0.00
Whooping Cough Death Rate	0.10	0.12	0.09	0.10
Diarrhoea (under 2 yrs. pe	er			
1,000 Births)	7.7	9.9	10.2	2.8
Diphtheria Death Rate .	0.07	0.09	0.13	0.09
Scarlet Fever Death Rate .	0.03	0.03	0.02	0.01
Influenza Death Rate .	0.22	0.22	0.17	0.16

## VITAL STATISTICS.

The *Population* at the Census of 1921 was 67,755, and was distributed in the Wards as follows:—

TABLE I.

Ward.	Families or		Population	n.	Persons
ward.	separate occupiers	Males	Females	Total	Acre.
No 1 or Drayton	1,868	3,388	4,147	7,535	21.7
No 2 or Castlebar	2,730	4,254	6,651	10,905	19.5
No 3 or Mount Park	1,858	2,839	5,153	7,992	9.4
No. 4 or Lammas	3,872	7,446	8,449	15,895	53.9
No. 5 or Manor	3,853	6,567	8,485	15,052	43.0
No. 6 or Grange	2,566	4,417	5,959	10,376	18.9
Total	16,747	28,911	38,844	67,755	23.0

The following Census figures indicate the increase in the population of Ealing during successive decades:—

Census,	1881	 	 15,764
Census,	1891	 	 23,965
Census,	1901	 	 33,040
Census,	1911	 	 61,222
Census,	1921	 	 67,755

The area of the Borough is 2,946 acres, and the density of population, or number of persons per acre, is therefore 23.0. The most densely populated Ward is the Lammas with a density of 53.9 persons per acre, the Manor coming next with 43.0, and the Mount Park Ward the least populated with 9.4 persons per acre.

For 1923 the population is estimated at 68,120. The natural increase of population, which is the yearly excess of births over deaths, is 335.

The *Birth-Rate* shows a decrease over the previous years, being 15.6 compared with 16.2 for 1922, 16.9 for 1921, and 17.8 for 1920, and is in marked contrast to the pre-war years 1910 to 1914, as seen in Table II. The rate for Ealing is low compared with those for England and Wales and for London, which are respectively 19.7 and 20.2.

The Death-Rate is slightly less than in the previous year, 10.6 compared with 11.0 for 1922. This rate compares very favourably with that for England and Wales, which is 11.6, and that for London, which is 11.2 per 1,000 of population.

As regards Infant Death-Rate a slight increase over the previous year is to be recorded, being 58 compared with 52 in the previous year, but the rate compares very well with those for England and Wales, for the great towns, and for London, which are respectively 69, 72, and 60 per 1,000 births. In Table II. comparison is made with the infant death-rates for the last fourteen years.

Table III. shows the causes of deaths of infants. Premature birth, congenital defects, atrophy, debility and marasmus, all defects of pre-natal origin or influenced by pre-natal conditions, accounted for 28 of the total 62 deaths. It is difficult to say how many of these conditions are preventable, but it is our duty to assume that most of them are preventable, and by well directed ante-natal care aim at improving the health and environment of the expectant mother. Bronchitis and pneumonia, which are essentially preventable diseases and which welfare work aims at preventing, accounted for 16 out of the 62 deaths. In the previous year the deaths from bronchitis and pneumonia were only 6 in number.

The illegitimate infant death-rate of 191.5 is much lower than for the year 1922, when it was 255 per 1,000 births. This rate, however, is very much higher than the legitimate infant death-rate, which is 52.3 and indicates strikingly the severe struggle for existence which illegitimate children have to experience.

TABLE II.

Showing Birth-rate, Death-rate and Infant Death-rate for Ealing for the years 1910—1923.

Year	Birth-rate	Death-rate	Infant Death-
			rate
1910	 23.4	9.8	65
1911	 20.2	11.5	121
1912	 20.6	9.7	67
1913	 18.2	8.9	72
1914	 17.5	9.4	59
1915	 16.6	10.2	63
1916	 17.0	11.1	58
1917	 14.8	10.5	63
1918	 13.0	13.6	76
1919	 13.3	10.8	65
1920	 17.8	8.8	47
1921	 16.9	10.6	63
1922	 16.2	11.0	52
1923	 15.6	10.6	58

TABLE III.

Causes of Infant Deaths, 1917 to 1923.

	1917	1918	1919	1920	1921	1922	1923
Diarrhoeal Diseases	10	14	3	9	9	5	2
Premature Birth	7	12	13	15	10	5	11
Congenital Defects and of Breast Milk (Star-	5	-	6	4	4	6	8
vation)	-		-	1-	-	-	-
Atrophy, Debility, Marasmus	6	11	14	14	12	10	9
Tuberculous Disease	2		3	3	-	2	1
Syphilis	1	-	-	3	2	-	-
Rickets		-	-	_	-	-	-
Meningitis (not Tuberculosis)	1		2		1	-	1
Convulsions	4	4	1	2	2	2	2
Bronchitis	5	5	3	1	6	5	5
Pneumonia (all forms)	17	6	4	4	9	1	10
Gastritis	-		_	2	1	2	1
Common Infectious Diseases	2	7	1	-	7	4	2
Other Causes	7	13	17	7	9	15	10
Totals	75	70	67	64	72	57	62

Scarlet fever and diphtheria were not so prevalent as in the previous two years, hence the death-rates for these diseases are lower, being 0.01 for the former and 0.09 for the latter. These rates compare well with those for England and Wales and for London, which are respectively 0.03 and 0.02 for scarlet fever and 0.07 and 0.13 for diphtheria.

The death-rates for measles and diarrhoea (see Table page 9) are much lower than those for England and Wales and London, while the rate for whooping cough is the same as that for England and Wales and just a shade higher than that for London.

Table VIII. shows the complete list of the causes of death. It is seen that tuberculosis accounts for nearly one-tenth of the total deaths, cancer (malignant disease) for one-sixth, heart disease for one-seventh, and pneumonia and bronchitis for one-seventh of the deaths, or altogether for more than one-half of the total. These figures indicate the diseases against which preventive measures must be directed to lower the death-rate and increase the mean age at death.

# PREVALENCE OF, AND CONTROL OVER, ACUTE INFECTIOUS DISEASE.

In Table IV. are indicated the numbers of the various infectious diseases notified during the year. It will be seen that there were 56 cases of diphtheria and 142 of scarlet fever, both great decreases on the numbers for the previous year.

TABLE IV.

Disease	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923
Diphtheria	82	56	37	66	36	46	56	186	282	56
Scarlet Fever	511	458	146	91	61	201	171	665	487	142
Enteric Fever										
(including Paratyphoid)	7	11	5	3	6	5	6	8	3	5
Puerperal Fever	2	1	1	-	2	3	5	9	3	9
Pneumonia:	Des					-91				ren l
Primary						30	38	21	33	32
Influenzal						33	27	17	22	7
Acute Poliomyelitis		2	-	2	1	-	-	1		-
Cerebro-Spinal Fever	1	2	2	1	-	3	4	1	-	1
Malaria	THE STATE OF					40	27	3	4	2
Dysentery						5	2	1	1	
Erysipelas	39	39	19	33	24	22	30	27	22	17
Encephalitis Lethargica						3	1	1	3	1
Tuberculosis:										
(a) Pulmonary	92	97	86	92	110	83	63	80	69	92
(b) Non-Pulmonary	21	26	15	17	22	25	17	23	16	26
Ophthalmia Neonatorum	9	5	8	4	3	4	8	13	10	3
Total	764	697	319	309	265	503	455	1036	955	393

Table V. shows the occurrence of the cases in months. Both diseases were most prevalent in the early part of the year. At no time did they reach epidemic proportions.

TABLE V.

		Scarlet Fever.	Diphtheria.
January		 24	1
February		 17	18
March		 14	1
April		 12	10
May		 9	6
June		 10	. 4
July		 8	3
August		 1	1
September		 7	2
October		 11	6
November		 17	2
December		 12	2
	Total	 142	56

As to diphtheria, in the treatment of which it is essential to secure the earliest administration of anti-toxin, every effort is made to have the cases recognised and promptly dealt with. The Council provides for the bacteriological examination of specimens and, in necessitous cases, for the supply of anti-toxin free of charge. Besides, cases which are only suspected of suffering from the disease are admitted to the Isolation Hospital on the recommendation of the medical attendant in order to make sure of early treatment. During the year 176,000 units of anti-toxin were issued free of charge for administration by medical practitioners in the town.

TABLE VI.

Cases of Infectious Disease notified during the year 1923.

Disease.			Ages of Cases Notified.										Totals.	Total Cases Notified in each Ward						Total cases re-		
Distast.			Under One Year.	ne to	to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and up- wards	Totals.	1*	2*	3*	4*	5*		to
Diphtheria Scarlet Fever			_	- 3	4 7	5 8	5 12	21 67	12 26	3 6	5 12	1	-	_	56 142	1 14	2 13	3 15	26	18	6	51 105
Enteric Fever (including Paratyphoid)				_		-	_	-	1	1	2		1		5	2					1	105
Puerperal Fever									1	1	8	1	-		9	4	-	2	-	-	1	1
Pneumonia: Primary	***		3	2	_		_	4	3	3	-	6	10	1	32	4	5	1	9	6	9 7	4
Influenzal			0	_		_	_	_	0	0	3	0	3	1	7	**	2	-	1	2	2	-
Acute Poliomyelitis									_		0		-	1			4		1			-
Cerebro-Spinal Fever						1			-						1				-	1	-	-
Malaria						1		_	_	_	2	_			2	_	1			1	1	
Dysentery				_		_	-	-	-		_		_				1				1	-
Erysipelas			1	_	_	_	_	_	_	1	3	4	6	2	17	1	5	1	3	3	4	
Encephalitis Lethargica Tuberculosis :			_	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	1	-	-	_
(a) Pulmonary (Male				-	_	_	_	_	_	3	16	17	6	1	43	6	5	4	12	12	4	
Female	2		_	_	_	_	_	1	2	6	21	11	7	1	49	9	6	6	12	14	2	
(b) Non-Pulmonary (M			1	_	_	2	1	3	1	_	1	_	1		10	-	1	-	1	5	3	
Fe	emale			_	_	1	-	1	2	2	5	4	1	1	16	1	4	1	2	6	2	
Ophthalmia Neonatorum			3	-	-	-	-	-	-	-	-	-	-	-	3	1	-	-	-	-	2	_
Total			8	5	11	17	18	97	47	26	78	45	34	7	393	39	44	33	113	108	56	161

<sup>\* (1)</sup> Drayton Ward, (2) Castlebar, (3) Mount Park, (4) Lammas, (5) Manor, (6) Grange.

OPHTHALMIA NEONATORUM.—Only three cases of ophthalmia neonatorum were notified during the year. Two of the cases occurred in the Chiswick and Ealing Maternity Hospital and one at a private nursing institution in London. The cases were under medical care when they developed. All three children recovered without impairment of the eyesight.

PUERPERAL FEVER.—It is necessary to make some comments on the unusual number of cases of puerperal fever. Seven of the nine cases occurred in January in the Chiswick and Ealing Maternity Hospital, and while most of them were of a mild character one was so severe that the patient unfortunately died. The occurrence of these cases was the subject of an enquiry by the Chiswick and Ealing Hospitals Committee, which adopted certain measures which it is hoped will prevent such an extension of infection in the future.

The other two cases occurred in December, one in the Chiswick and Ealing Maternity Hospital after a complicated labour and the other in a private nursing institution after a miscarriage.

The number of cases notified in the various age groups are included in Table VI. By far the largest number occurred as usual between the ages of 5 and 10 years.

## NURSING ARRANGEMENTS, HOSPITALS AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

Professional, Nursing In the Home.—(a) General.—The Ealing District Nursing Association by means of two fully trained nurses supplies professional nursing for cases of non-infectious illness in the district. In 1921 the Association commenced with one nurse, in 1922 the half-time services of another nurse were obtained, and in 1923 the whole-time services of the second nurse had to be requisitioned to meet the needs of the district. There can be no doubt that, as the appreciation of the work of the nurses among those for whom the service is designed increases, greater calls will be made and the number of nurses will have to be still

further increased. A home nursing service brings professional help to those who cannot otherwise obtain it outside general hospitals, while it relieves pressure on our general hospitals and enables beds to be available for more urgent cases which cannot adequately be dealt with at home.

(b) For Infectious Diseases.—Two of the health visitors, who are trained nurses, can be drafted to the nursing of infectious cases such as measles, whooping cough, ophthalmia neonatorum and poliomyelitis, should their services be required. During the year under consideration, however, owing to the general absence of these diseases, there was no demand for such nursing.

MIDWIVES.—At present there are eleven midwives practising in the district. All have undergone training at a recognised training school and possess the Certificate of the Central Midwives Board. Although the supervision of these midwives comes within the province of the County Council, there is close co-operation between them and the local Welfare Centre. They are encouraged to send or bring the expectant mothers, who engage their services, to the Ante-Natal Centre and to advise the mothers to bring their children to the Child Welfare Centre.

The Council does not subsidise any of the midwives, but when maternity aid is required in necessitous cases the midwife who resides in closest proximity is engaged at the expense of the Council.

CLINICS AND TREATMENT CENTRES.—There is no out-patient department at the King Edward Memorial Hospital, which possesses 50 beds for the indoor treatment of medical and surgical patients, but a Dispensary, conducted on provident principles, offers medical and surgical attendance at their homes to non-insured persons.

A Tuberculosis Dispensary is provided by the County Council at Green Man Lane and to this general medical practitioners or members of the Public Health Staff may refer suspected or active cases of pulmonary or non-pulmonary tuberculosis for diagnosis and treatment.

There is no Dispensary for Venereal Diseases in Ealing, but medical practitioners may, under the scheme of the County Council, refer cases for diagnosis and treatment to certain of the London Hospitals, the nearest to this district being the West London Hospital.

The Maternity and Child Welfare Centre and the School Clinic, the former maintained by the Council and the latter by the Education Committee, are conveniently situated in the same building at 13, Mattock Lane, within a short distance of the Town Hall and almost in the centre of the town. The arrangement of these two branches of municipal public health activity in the same building facilitates the work and favours co-ordination.

Hospitals Provided by the Local Authority.—(1) Maternity.—The Chiswick and Ealing Hospitals Committee maintains a Maternity Hospital at South Ealing to meet the needs of both districts. Each district contributes towards the cost in proportion to its rateable value. The hospital is able to deal with sixteen cases at a time, but can be readily adapted to accommodate twenty-four cases should this increased accommodation be found to be necessary.

- (2) Children.—The King Edward Memorial Hospital, which has a ward specially reserved for children, offers six beds to the Council for the use of children under 5 years of age who require indoor treatment. Cases requiring such treatment are referred by the Medical Officer from the Child Welfare Centre.
- (3) Fever.—The Isolation Hospital, which has 120 beds, and which is maintained by the Chiswick and Ealing Hospitals Committee for the benefit of both districts, provides isolation facilities primarily for cases of scarlet fever, diphtheria and enteric fever, but accommodation is also available for other infectious diseases. The hospital is situated in South Ealing.
- (4) Smallpox.—The Ealing Town Council possesses a separate Smallpox Hospital, accommodating twelve patients, at Perivale, just over the northern boundary of the district. A reception house for isolating persons who have been in immediate contact with

cases of smallpox is situated at North Ealing on ground adjoining the Northern Sewage Works and about half-a-mile from the Smallpox Hospital. This consists of two wards, which provide for two families, or eight persons.

AMBULANCE FACILITIES.—(a) General.—For the removal of cases of non-infectious illness the Council maintains two motor ambulances, one of which is lent by the Ambulance Committee of the Joint Council of the British Red Cross Society and the Order of St. John. The use of the ambulance in the district is given free of charge, but when the journey is outside a charge of one guinea is made, except in necessitous cases, when the fee is either reduced or remitted.

(b) Infectious Disease.—The Chiswick and Ealing Hospitals Committee have two horse-drawn ambulances for the removal of infectious cases to the Isolation Hospital. Owing, however, to the long distances to be travelled in taking cases from Chiswick, Hanwell and Greenford, and to the growing appreciation of the value of expeditous removal of cases of diphtheria, these will it is hoped give place in the course of the year to two motor ambulances.

#### MATERNITY AND CHILD WELFARE.

The scheme of Maternity and Child Welfare, as previously outlined, remains the same, with the exception that the arrangements for giving health lectures and demonstrations have been considerably developed. Health talks or lectures and demonstrations of the cutting-out, sewing and knitting of useful garments, etc., form a daily routine. In this work the Health Visitors are greatly and most valuably assisted by Mrs. Cocker and Mrs. Morris, two members of the Maternity and Child Welfare Committee.

The permanent staff engaged in Maternity and Child Welfare consists of Dr. John W. Bell, Ante-Natal Consultant; Dr. Grace Banham, Child Consultant, three Health Visitors and a Clerk, to all of whose salaries the Ministry of Health make contributions.

# The following is a Summary of the Work of the Welfare Centre during the Year.

Number of children on register at the end of	year		1,177
Mothers visiting Centre for the first time			607
Children visicing Centre for the first time			607
Total attendances made by mothers			4,678
Total attendances made by children			5,420
Average attendance of mothers each afternoon			31
Average attendance of children each afternoon			36
Number of Consultations by Medical Officer			2,206
Average number of children seen by Medical (	Officer	each	
afternoon			15
Children referred to School Clinic for treatment:			
Nose and Throat			4
Eyes			1
Teeth			8
Mothers referred for dental treatment to School	Clinic		13
Mothers supplied with artificial dentures			8
Children referred to King Edward Hospital for m	ninor of	peratio	ns 31
Children admitted to King Edward Hospital as in-	door pa	atients	5
Children referred to special London Hospitals			18
Mothers attending Ante-Natal Clinic:			
First Visits			178
Re-visits			102
Number of Consultations by Consultant at Centr	e		275
Mothers referred to King Edward Hospital			18
Mothers referred to special London Hospitals			18
Aid provided for mothers at confinement:			
Consultant aid—cases			4
		***	
Medical aid—cases			
Medical aid—cases			21
Midwives—cases			- 21 6
Midwives—cases Home Helps—cases			6
Midwives—cases	 	  £407	6 4 3
Midwives—cases	 	£85	6 4 3 8 6
Midwives—cases		£85 £46	6 4 3
Midwives—cases		£85 £46	6 4 3 8 6

Expectant or Nursing Mothers receiving a supply of milk free of charge	
Children under 5 years of age receiving a supply of milk	
free of charge	
The fellowing is a Summary of the Work of the Health Vis	sitors.
Visits to children under 12 months:	
First Visits	807
Return Visits	1,549
Visits to children 1 to 5 years of age	2,678
Visits to expectant mothers	182
Visits to children or mothers attending the Welfare Centre	1,601
Visits to investigate infant deaths and still-births	52
Special visits or investigations	183
Visits to cases of Ophthalmia Neonatorum	13
Visits to cases of Puerperal Fever	1
Visits to cases of Measles and Whooping Cough	283
Visits to cases of Tuberculosis	136
Visits to cases of Scarlet Fever on discharge from the	
Isolation Hospital	131
Other Visits	27
Total Visits	7,643
Interviews, etc	1,536

The number of Births notified during the year was 1,280, including 29 still-births. Of these, 807 were visited by the Health Visitors at least once, the total visits to infants under one year of age being 2,356. It will be seen in the Table that 2,678 visits were made to children over 12 months old and under 5 years.

It is interesting to note that from Ealing 144 cases were admitted to the Joint Maternity Hospital and towards the cost of their treatment the amount of £604 14s. 0d. was received from them.

#### SANITARY ADMINISTRATION.

The following is a summary of the work of the three Sanitary Inspectors during the year and of other action taken under the Public Health Acts, Byelaws, Etc.

#### GENERAL.

Number of Premises inspected on Co	mplair	ıt			299
Number of Nuisances observed by In	aspecto	ors			84
Number of Premises inspected in con	nnectio	on with	Infect	tious	
Disease					233
Number of Premises visited by Peri	iodical	Inspec	ction (	Cow-	
sheds, Dairies, Slaughter-houses	s, Wor	kshops	, Etc.)		568
Number of Houses inspected under	House	-to-Ho	use Su	rvey	421
Food Inspections					4,721
Total number of Re-inspections					6,543
Other Inspections					138
Total number of Inspections and Re-	-inspec	tions		1	13,007
Number of Intimation Notices given					528
Number of other Letters written					279
Number of Statutory Notices served					138
Proceedings before Magistrates					4
Dairies, Cowsheds A	ND M	ILKSHO	PS.		
N. 1 (C) 1 1 D	ND M	ILKSHO	OPS.		1
Number of Cowsheds on Register			DPS		1 5
Number of Cowsheds on Register Number of Inspections made of Cows					1 5 3
Number of Cowsheds on Register Number of Inspections made of Cows	sheds				
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations	sheds  on Re	  gister			3
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur	sheds  on Re	  gister			3 42
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur	sheds on Re	  gister	  mises		3 42 120
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur Contraventions of Regulations	sheds  on Re	 gister s' Pren	  mises		3 42 120 42
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur Contraventions of Regulations Proceedings before Magistrates	on Regreeyors	 gister s' Pren	  mises		3 42 120 42
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur Contraventions of Regulations	on Regreeyors	 gister s' Pren	  mises		3 42 120 42
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur Contraventions of Regulations Proceedings before Magistrates	on Regreeyors	gister '' '' '' '' '' '' '' ''	  nises 		3 42 120 42
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur Contraventions of Regulations Proceedings before Magistrates  Slaughterh	on Regreeyors	gister '' '' '' '' '' '' '' ''	  nises 		3 42 120 42 1
Number of Cowsheds on Register Number of Inspections made of Cows Contraventions of Regulations Number of Retail Purveyors of Milk Number of Inspections of Retail Pur Contraventions of Regulations Proceedings before Magistrates  SLAUGHTERH Number of Registered or Licensed SI	on Regreeyors	gister '' '' '' '' '' '' '' ''	  nises 		3 42 120 42 1

## FACTORIES AND WORKSHOPS.

Registered Workshops						148
Factories						38
Number of Inspections of Fac	ctories				87	
and Workshops and Wor	kplaces				271	
						358
Number of Defects concernin	g which	Notice	es were	sent		75
Proceedings before Magistrate	es					None
OFFE	ISIVE T	RADES				
Fried Fish Shops						12
Other Offensive Trades						None
Number of Inspections						173
Contraventions						3
Di	SINFECT	ION				
HE KNOWN CONTRACTOR						
Rooms disinfected by Spray:						
(a) Ordinary Infectious	Disease					308
(b) Tuberculous						119
Rooms stripped and cleansed						105
Articles disinfected by steam	at disin	fector	:			
(a) Ordinary Infectious	Disease			,	***	1,738
(b) Tuberculous						
Articles voluntarily destroyed	1					189
PARTICULARS OF THE S	ANTENADA	y Draw	come pr	2727273.73.1	ers me	
						,
IN NOTICES SERVE	D AND	LETTE	RS WR	ITTEN		
With Chart annial and					1	
Water Closets repaired or			water	or or	ner-	010
wise improved						313
Drains cleared and cleansed						53
Defects in Drains repaired						97
Drains reconstructed						29
Dust-bins provided						161
Overcrowding remedied						3
Accumulations of refuse remo						86
Nuisance from fowls and other						27
Damp-proof courses inserted	in walls					70

Ventilation under floors provided	 	31
Other forms of dampness remedied	 	32
Yards paved and repaired	 	143
Floors repaired	 	110
Roofs, Gutters and Rain-water Pipes repaired	 	361
New Soil and Ventilating Pipes provided	 	100
Sinks and Waste-pipes repaired or renewed	 	105
Draw Taps fixed to main supply	 	14
Dirty Walls and Ceilings stripped and cleansed	 	1,201
Other Defects or Nuisances remedied	 	631

Supervision of the Production and Sale of Food.— Milk.—There is only one cowshed in the district, but there are 42 premises in which milk is retailed. Most of the latter are well arranged and excellently managed, but there are a few in which structural alterations will have to be made to enable them to comply with modern requirements. Whenever a change of tenancy takes place or new premises are suggested the opportunity is taken of advising a suitable arrangement of the milk store, of the milk treatment room, if pasteurisation or cooling or both are undertaken, and of the washing-up place. As it is considered impossible to conduct a dairy business without a steam boiler for supplying a plentiful supply of hot water for cleansing the utensils and of steam for sterilising them, a boiler is strongly advised and has been in all cases provided.

During the year ten applications for registration as purveyors of milk were received. In two, registration was refused as the premises were unsuitable. One application was from a person who retailed milk in Ealing but had his premises in an adjoining district; in this case registration was granted after the receipt of a satisfactory report from the Medical Officer of Health of the district.

Meat and Other Foods.—It is the practice of the butchers, fishmongers and tradesmen in the town to seek the advice of the Sanitary Inspector when there is any doubt as to the fitness of food for human consumption. In this way the Inspectors are assisted in their duties and prosecutions are avoided.

There is now very little killing carried out in the district, most of the meat being purchased dead in the open market, chiefly at the Islington Cattle Market.

The following list indicates all the articles of food found diseased or unsound and voluntarily surrendered.

Food.			Quantity.
Beef		 	190 lbs.
Fish		 	266 lbs.
Rabbits		 	126 lbs.
Fowls		 	15 1bs.
Shellfish (Cra	abs)	 	42 lbs.
			Carlonner and
		Total	639 1bs.

RIVER POLLUTION.—Since the completion of the new sewage works at Wembley a considerable improvement has taken place in the River Brent concerning the gross pollution of which reports were made on previous occasions. What has been for years almost a sewer in its odour and character has become an inoffensive stream. It is to be hoped that its present inoffensiveness will be maintained. The extent and nature of the works ought to guarantee this, at least for some years to come.

Nuisance from Refuse Dumps.—There has fortunately been a material change in the management of the refuse dump at Northolt of which complaint was made in the Annual Report for 1922. So far as Ealing is concerned there has been no occasion for complaint, except once during the year when an inspectorial visit was promptly followed by remedial measures. The nuisance affecting the residents in this district is caused by the refuse burning, a circumstance which is difficult to avoid in a dump so extensive and still more difficult to control when once the fire is established.

Adoptive Acts, Bye-laws and Local Regulations relating to public health, in force in the district, with date of adoption:—

Public Health Acts (Amendment) Act, 1890.

20th November, 1890.

Infectious Disease (Prevention) Act, 1890.

18th December, 1890.

Public Health Acts (Amendment) Act, 1907.

21st December, 1908.

Notification of Births Act, 1907.

9th May, 1912.

The Ealing Corporation Act, 1905, confers additional powers on the Council with respect to certain sanitary matters, the provision of dustbins, the drainage of houses by combined operation, the control of tuberculous milk, etc.

Bye-laws, with date of making, with respect to:

(1) Prevention of nuisances arising from sewage, filth, etc., keeping of animals, and (2) Cleansing of earth closets, privies, ashpits and cesspools, October 15th, 1880.

Common Lodging Houses, February 4th, 1881.

Slaughter Houses, March 6th, 1884. (Added to: Humane Slaughtering of Animals, 1922).

New Streets and Buildings, December 3rd, 1885.

New Buildings, May 26th, 1896.

Bye-laws under Section 26 (1) of the Public Health Acts (Amendment) Act, 1890. June 20th, 1907.

Tents, Vans, Sheds, etc., under the Housing of the Working Classes Act, 1885. July 2nd, 1907.

Prevention of Keeping Animals on any premises so as to be injurious to Health. July 15th, 1910.

## Regulations:

Regulations under the Dairies, Cowsheds and Milkshops Order of 1885. October 6th, 1887.

Communications between Drains and Sewers, Section 21, Public Health Act, 1875. October 8th, 1908.

#### LABORATORY WORK.

The bacteriological laboratory continues to extend in usefulness. Not only does it deal with specimens taken in the Borough, including the Isolation Hospital, but the Urban Districts of Hanwell and Greenford make use of the facilities. The Hospitals Committee and the Hanwell and Greenford District Councils by payment for the examination of specimens contribute greatly towards the upkeep of the Laboratory.

During the year the following specimens were examined:-

			1	ositive	Negative	Total
Diphtheria:	Ealing	B001.		16	446	462
one one saidth	Isolation I	Hospital		172	1,544	1,716
	Hanwell			14	294	308
	Greenford			-	1	1
Tuberculosis:	Ealing			30	148	178
	Hanwell			5	23	28
	Greenford			_	-	_
Miscellaneous:	Ealing			7	8	15
	Hanwell			-	1	1
	Greenford			-	-	no t <del>er</del> ifici
	Г	otals		244	2,465	2,709

#### HOUSING.

The housing difficulties still remain the same, and will so remain until a great impetus is given to building by private enterprise or until the Council undertake a comprehensive scheme. As the difficulties are great and really national, little progress can be made until the Government evolve a large and practicable scheme of house building on a good basis.

Much good work is being done in improving the present houses which in many instances the owner is unwilling to decorate or repair until called upon to do so by the Sanitary Inspectors.

## NUMBER OF NEW HOUSES ERECTED DURING THE YEAR:

(a) Total	151
(b) As part of a municipal housing scheme	None
1.—Unfit Dwelling Houses.	
Inspection.	
(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1,135
(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of	
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit	421
for human habitation (4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for	None
human habitation	697
2.—Remedy of Defects without Service of Formal No	-
	TICES.
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	594
Number of defective dwelling houses rendered fit in consequence of informal action by the Local	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers 3.—Action under Statutory Powers.  (a) Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers 3.—Action under Statutory Powers.  (a) Proceedings under Section 28 of the Housing,	594
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers 3.—Action under Statutory Powers.  (a) Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919 (1) Number of dwelling houses in respect of which notices were served requiring repairs (2) Number of dwelling houses which were rendered	594 None

#### (b) Proceedings under Public Health Acts: (1) Number of dwelling houses in respect of which Notices were served requiring defects to be remedied ... ... ... ... 138 (2) Number of dwelling houses in which defects were remedied: (a) By Owners or Occupiers 155 (b) By Local Authority in default of Owners ... None (c) Proceedings under Section 17 and 18 of the Housing, Town Planning, etc., Act, 1909: (1) Number of representations made with a view to the making of Closing Orders... None (2) Number of dwelling houses in respect of which Closing Orders were made None (3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit ... ... None (4) Number of dwelling houses in respect of which Demolition Orders were made None (5) Number of dwelling houses demolished in pursuance of Demolition Orders None

TABLE VII.

AGES AT DEATH FROM NOTIFIABLE INFECTIOUS DISEASES.

Disease.		Under One Year	to 2	to 3	to 4	to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and up- wards	Totals	
Diphtheria		 _	-	1	-	1	3	-	-	1	-	-	_	6	
Scarlet Fever		 -	-	-		-	1	-	-	-	7-	-	_	1	
Enteric Fever (including	1g														
Paratyphoid)		 	-	-	-	-	-	-	1	-	-	-	-	1	
Puerperal Fever		 -	-	-	-	-	-	-	-	-	1	-	-	1	
Pneumonia : Primary		 11	2	1	-	-	-	-	_	1	3	10	14	42	
Influenza	1	 	-	-	_	-	-	-	-	-	_	-	_	_	
Acute Poliomyelitis		 -	-	-	-	-	-	-	-	-	-	-	_	_	
erebro-Spinal Fever		 _	-	-	1	-	-	-	-	-	-	-	-	1	
Malaria		 -	_	_	-	-	-	_	-	-	-	-	-	_	
Ovsentery			-	-	_	_	2	-	-	_	-	_		_	
Erysipelas		 _	-	-	_	_	-	-	-	-	1000	-	_	_	
Encephalitis Lethargic		 -	-	-	-	-	-	-	-	1		-	-	1	
(a) Pulmonary	(Male	 	-	_	_	-	_	-	2	8	8	9	1	28	
,	Female	 _	-	-		-	-	1	4	16	6	5	_	32	
(b) Non-Pulmonary	Male	 	-	-	1	-	-	-	_	2	-	1	1	5	
	Female	 1	-	-	1	-	-	1	1	-		1	_	5	
Ophthalmia Neonatoru		 -	-	-	-	-	-	-	-	-	-	-	-	-	
То	tals	 12	2	2	3	1	4	2	8	29	18	26	16	123	

TABLE VIII.

CAUSE OF DEATH, 1923.

Cause o	f Death.		Male	Female	Total
Enteric Fever			1		1
Smallpox			_	-	_
Measles			_	-	
Scarlet Fever			1	_	1
Whooping Cough		***	1	6	7
Diphtheria			2	4	6
Influenza			7	4	11
Encephalitis Leth	argica		-	1	1
Meningococcal Me			1		1
Tuberculosis of R			27	33	60
Other Tuberculou			6	4	10
Cancer, Malignant			52	66	118
Rheumatic Fever			1	1	2
Diabetes			3	2	5
Cerebral Haemorr	hage. Etc.		10	29	39
www White			42	56	98
Arterio-Sclerosis			10	26	36
Bronchitis	***		18	38	56
Pneumonia (all fo			18	24	42
Other Respiratory			7	4	11
Ulcer of Stomach			5	2	7
Diarrhoea, etc. (U			1	2 2 3	3
Appendicitis and	Typhlitis		3	3	6
Cirrhosis of Liver	- J Pilledo III				
Acute and Chroni			8	8	16
Puerperal Sepsis			_	1	1
Other Accidents					
Pregnancy and		303 01	_	3	3
Congenial Debility	and Malfort	nation			
Premature B		nation,	15	10	25
		***	8	3	11
Other Deaths from	m Violence		7	11	18
Other Defined Di			60	69	129
Causes ill-defined			_	1	1
	Total		314	411	725

## Borough of Ealing.



## EDUCATION COMMITTEE.

## REPORT

OF THE

School Medical Officer,

For the Year ended 31st December, 1923.

#### EDUCATION GENERAL PURPOSES SUB-COMMITTEE, 1922-23.

(Which deals with the School Medical Service).

#### Chairman-

Councillor W. T. WHITE.

Vice-Chairman-

Councillor W. F. PIPER.

Alderman H. ARMRIDING,

Councillor W. J. S. Cox,

Councillor G. H. GABB,

Councillor W. HUTCHINGS,

Councillor G. R. WEEKS,

Miss A. D. HAWKIN,

Mr. J. C. GORDON,

Mr. M. HULBERT, J.P.

Mr. F. L. JERMYN,

Mr. L. Marsh, M.A.

Dr. W. W. SETON,

Rev. C. J. Sharp.

#### STAFF.

School Medical Officer—
THOMAS ORR, M.D., D.Sc.,
Of the Middle Temple, Barrister-at-Law.

Assistant School Medical Officer and School Oculist—
A. J. B. Griffin, M.B., D.P.H.

School Nurses-

\*† HILDA BAILEY (Senior)

†‡§ALICE GOUGH (Resigned, Aug., 1923)

\* † Annie Johnson

\*MARY McGann (Appointed Sept., 1923)

Clerks-

†MERCIE RICHARDSON

GRACE SUCH.

Surgeon-

E. A. CHILL, M.D., C.M.

Anaesthetist-

S. M. BANHAM, M.B., M.R.C.S., I., R.C.P.

Dentists-

L. Brown, L.D.S., R.C.S. (Eng.)

I. COHEN, L.D.S., R.C.S. (Eng.)

SCHOOL CLINIC.

13, Mattock Lane, Ealing, W.

†Certificate of Royal Sanitary Institute, School Nurse and Health Visitor. ‡Certificate of Central Midwives Board.

Certificate of San. Insp. Exam. Board and of Royal San. Institute, Inspector of Nuisances.

<sup>\*</sup>Certificate as Trained Nurse.

## THE SCHOOL MEDICAL SERVICE.

The work of the School Medical Service may be summarised under the following headings:—

- 1. Routine Medical Inspection in School;
- 2. Non-routine Medical Inspection at the Inspection or School Clinic;
- 3. Treatment of Defective School Children;
- 4. Observation of Specially Defective School Children.

There are ten public elementary schools under the control of the Local Education Authority. Of these, one, Good Shepherd Hall, is a temporary school for infants. Three schools are non-provided.

The schools are divided into twenty-four departments, namely, eight for boys, seven for girls, seven for infants, one for girls and infants, and one for boys and girls and infants.

The remarks made in the Report for 1922 regarding the several schools that are out of date still apply. In these schools the facilities for medical inspection are far from convenient and the value of the work done suffers to some extent in consequence.

#### MEDICAL INSPECTION.

At the schools two kinds of inspection take place, (a) Routine and (b) Non-routine.

- (a) Routine examinations comprise those required by the Board of Education for the three groups of school children:—
  - Entrants—all children admitted to school during the year;
  - 2. Intermediates—all children between the ages of 8 and 9 years;
  - 3. Leavers—children between 12 and 13 years, and those over 13 years not previously examined.
  - (b) Non-routine examinations are concerned with:-
    - 1. Children presented by the head teachers for some special or suspected defect;
    - 2. Children requiring supervision for some defect found at a previous examination (not in the same year).

During the year there were examined 755 entrants, 735 in the intermediate age-group, and 900 leavers, making a total of 2,390. Non-routine examinations numbered 1,369, and re-inspections (these are subsequent examinations in the same year) 937.

A total of 3,759 children were thus examined or re-examined. There was an average school attendance of 88 per cent., and of this average attendance no less than 64 per cent. were medically examined during the year.

The attendance of parents at routine inspections, which is very helpful, is always welcomed and the attendance figure of 70 per cent. shows that school medical inspection, which was once resented by the parents, is now greatly appreciated.

The sub-joined table indicates the number of children in each age-group inspected in the various schools:—

NUMBER OF CHILDREN INSPECTED.

0.1.1			Entra	nts.	Total
School.			Boys	Boys Girls	
Provided.	and related to	L'eldell	ni battol	al Bigra	othone
Drayton			63	55	118
Joseph Lancaster			4	5	9
Lammas			55	.58	113
Little Ealing			92	74	166
North Ealing			35	26	61
Northfields			64	32	96
Good Shepherd Hall	(tempora	ry)	26	15	41
the tile school Number		allel	1151 4		
Non-provided.			billion and	the party of	MI SOLD
Christ Church			36	52	88
St. John's	***		28	35	63
St. Mary's	dies or	900117 9	la (The	pur a	1 10 10
Total			403	352	755

NUMBER OF CHILDREN INSPECTED

School.		Age	e-8 Gr	oup	Leavers			
School,			Boys	Girls	Total	Boys	Girls	Total
Provided.	Allow Min	1 31112		10.0		F Is	47 %	
Drayton			38	26	64	48	51	99
Joseph Lancaster			41	25	66	13	29	42
Lammas			-	-	-	154	168	322
Little Ealing			69	89	158	71	82	153
North Ealing			40	31	71	27	30	57
Northfields			94	85	179	-	-	-
Good Shepherd Hall	(tempor	ary) .	8	17	25	-		-
Non-provided			ini s					
Christ Church				41	41	48	3	51
St. John's			39	31	70	56	53	109
St. Marys			61	-	61	-	67	67
Total			390	345	735	417	483	900

## Findings of Medical Inspection.

The tabulated results of Routine and Non-routine Medical Inspections will be found in Table II. of the Appendix.

Out of 2,390 routine examinations, 571 or 23.9 per cent. of the children were found to require treatment for defective conditions. Of the 1,312 defects found, 622 were referred for medical treatment and 690 for supervision or further observation.

The methods of notification of defects to parents and teachers and of the following up of cases remain unaltered. In this connection no less than 1,511 visits were made by the School Nurses to the homes of the children and to the schools.

Uncleanly This preventible condition remains one of the principal causes of loss of school time. Such loss is as deplorable as it is unnecessary, the more so as it makes demands on the time of the medical and nursing staff that might be better utilised. The responsibility for it rests with the parents whose carelessness n permitting uncleanliness to occur is equalled only by their lethargy in remedying it when it is once established. Children of certain families come up for exclusion for uncleanliness with the regularity of "habituals," and the cleansing of their verminous heads which should be a matter simply of days, is allowed by their negligent parents to run into weeks.

Only the most stringent application of the law can be expected to inculcate a sense of responsibility into such parents; and the more harshly they are dealt with by the Justices the less likely are they to permit the recurrence of the condition.

At the periodical inspection of heads held after the usual school holidays, 418, or 5 per cent., of the children were excluded out of 8,247 examined. In addition, 12 were excluded at routine medical inspection, and 44 of those specially referred by the school teachers.

Failure to cleanse an excluded child within 14 days is met by a summons under the Attendance Bye-Laws. During the year 33 summonses were issued. Fines of 10/- were imposed in twenty cases, and 5/- in eleven cases. Two cases were adjourned for cleansing which was carried out within the time allowed.

MINOR AILMENTS.—Minor ailments found on routine and non-routine examinations were as follows:—

Ringworm of head				 16
Ringworm of body				 17
Scabies				 26
Impetigo				 127
Minor Injuries				 21
Other Skin Diseases				 150
Ear Disease (including	Otorrhoea)			 44
Eye Disease (including	Blepharitis	and	Conjunctivitis)	 55
			Total	 456

ENLARGED TONSILS AND ADENOIDS.—On routine inspection 86 cases of enlarged tonsils were found to require treatment and 92 to require observation. Thirteen cases of adenoids only and

ten cases of enlarged tonsils and adenoids were referred for treatment. In addition eleven other cases of enlarged tonsils, eighteen of adenoids and seven of enlarged tonsils and adenoids were discovered at the Inspection Clinic. At routine inspection 56 other throat and nose conditions requiring observation were found. These consisted of cases of displaced septum and simple "mouth breathing" without obvious nasal obstruction. In such cases the parents or teachers were advised by the doctor at the time of examination.

Stress may at this point be laid on the ill effects of "mouth breathing." This condition is prone to set up catarrhal conditions of the throat, nose and middle ear. It causes interference with the normal chest development and renders its subjects liable to bronchitis and associated chest diseases. It is easily remedied in its early stages and valuable work can be done in this connection by observant school teachers.

Tuberculosis.—At routine examinations one definite and three suspected cases of tuberculosis of the lungs were found and also one case of tuberculosis of the hip. At special inspections three definite cases of pulmonary tuberculosis and ten suspected cases were found.

The diagnosis of early pulmonary tuberculosis in children presents considerable difficulty and as a routine procedure all suspected cases are referred for a second opinion to the Tuberculosis Officer.

Skin Conditions.—At routine examinations the following skin conditions were observed:—ringworm 2, scabies 5, impetigo 5 and other conditions 14. In addition, the following were found at the Inspection Clinic:—

Ringworm of head		 14
Ringworm of body		 17
Scabies		 21
Impetigo		 122
Other Conditions		 136
	Total	310

Impetigo still remains a fruitful cause of lowered school attendances. To this, two factors contribute; in the first place affected children are not referred for treatment early enough so that one child may have infected several others before being sent for examination; in the second place a proportion of children attend for treatment at infrequent and irregular periods, and it is only after repeated home visits by the School Nurses and threats of prosecution that they ultimately do attend.

EXTERNAL EYE DISEASE.—Routine examinations yielded the following results:—five cases of blepharitis, two cases of conjunctivitis, one case of keratitis, one case of corneal opacity and ten cases of squint. In addition there were found at the Inspection Clinic, two cases of blepharitis, twenty-two cases of conjunctivitis, one case of keratitis, five cases of squint and seven cases suffering from other conditions.

Arrangements exist with the King Edward Memorial Hospital by which a certain number of suitable cases of squint may receive operative treatment. No such cases were treated during the year.

VISION.—Perhaps in no branch of school medical work are such beneficial results shewn as in the treatment of visual defects. Early education is very largely composed of visual impressions and the importance of good vision in childhood cannot be over emphasized. Every effort therefore is made to get cases of defective eyesight early in school life. Each child with defective vision receives no less than three separate tests before being provided with glasses. Cases of eye disease that cannot be benefited by glasses are referred to one or other of the London Eye Hospitals.

As a result of routine examination 156 cases of defective vision were referred for examination by the Oculist. A further 108 were referred from the Inspection Clinic.

EAR DISEASE AND HEARING.—Sixteen cases of defective hearing, 18 cases of otitis media, and 2 cases of other disease of the ear were discovered at Routine Medical Inspection, whilst at the Inspection Clinic 16 cases of defective hearing, 20 cases of otitis media and 4 other ear conditions were found.

Dental Defects found at the Routine Medical Inspection.

DENTAL INSPECTION.

			Entrants	Age 8 Group.	Leavers	Total
All teeth sound:	3 144	CHERRY	int large	and the same	- Salveni	Limit
No. of Children			417	386	725	1,528
Percentage			55.2	52.5	80.5	63.9
Less than 4 teeth d	ecaye	d:	ope-lime		parameters.	-
No. of Children			278	307	166	751
Percentage			36.8	41.7	18.4	31.4
More than 4 teeth d	ecaye	d:	Manna B		pline in	William.
No. of Children			60	42	9	111
Percentage			8.	5.8	1.1	4.7

It will be seen that in the 8 years age-group no less than 47.5 per cent. of children had defective teeth. This is explained by the fact that it is at this age period that the temporary teeth are giving way to the permanent dentition; and it is the temporary and not the permanent dentition that is principally affected. On the other hand a percentage of 80.5 children with sound teeth among the "leavers" indicates that parents and teachers are fully alive to the importance of the early arrest of dental caries and are taking every advantage of the facilities offered by the School Clinic to that end.

The following Table indicates the sustained improvement in the teeth of the school children as a result of dental treatment and instruction in dental hygiene.

DENTAL INSPECTION, 1915 TO 1923.

dames .	nighet)	Entrants	Intermediate Group	Leavers	Total
1	ear	Percentage with sound Teeth	Percentage with sound Teeth	Percentage with sound Teeth	Percentage with sound Teeth
1915		 23.0	26.2	35.7	27.0
1916		 15.6	30.2	37.2	25.3
1917		 21.7	25.9	41.1	28.8
1918		 28.8	25.8	44.1	32.8
1919		 36.9	32.2	60.6	42.7
1920		 48.6	46.4	64.2	53.1
1921		 58.4	64.0	76.5	66.6
1922		 45.7	50.2	72.8	56 3
1923		 55.2	52.5	80.5	63.9

CRIPPLING DEFECTS.—In Table III. are indicated nineteen cases of crippling defects in boys and twenty-one in girls attending public elementary schools. Two cripple boys and five girls are not attending school. "Crippling" included such conditions as paralysis, severe bony deformities, either congenital or acquired and severe heart disease.

Round Shoulders and thirty-seven of spinal curvature were observed during routine medical inspection. Although these defects give a very small percentage out of over 2,000 children examined, they are deserving of mention because the greater number of them are avoidable and might be obviated by closer observation of the carriage and attitude of the children concerned, and by the use of suitable corrective exercises. By close attention in school and especially in the course of physical exercises the teachers can do a great deal to ameliorate these conditions.

VACCINATION.—Only 1,372 children, or 57.4 per cent., bore signs of successful vaccination. In other words nearly every second child is inadequately protected against smallpox. This shows how easily exemption from vaccination can now be obtained; it also indicates the large proportion of susceptible members of the community to be taken into consideration should the district be involved in an outbreak of smallpox.

INFECTIOUS DISEASE.—During the year there were notified in the weekly returns of Infectious Diseases from the schools, 131 absentees owing to measles, 130 owing to whooping cough, 138 owing to chickenpox and 132 owing to mumps.

Under Article 53 of the Education Code, 209 children were excluded during the year for the following causes:—

Conjunctivitis		 10
Impetigo		 144
Ringworm of head		 16
Ringworm of body		 12
Scabies		 26
Other Skin Diseases		 1
	Total	 209

#### MEDICAL TREATMENT.

MINOR AILMENTS.—Minor ailments to the number of 354 were treated at the School Clinic, and 65 by private medical practitioners or at hospitals.

The total attendances at the School Clinic for the daily treatment of minor ailments were 4,627, eighteen for every day on which the Clinic was available.

## DAILY TREATMENTS, 1923.

Ear Cases	 20 m		793
Eye Cases	 		846
Dressings	 		462
Ringworm	 		157
Impetigo	 		1903
Scabies	 		69
Others	 		397
		-	

Total ... 4627

DENTAL DEFECTS.—Table IV. gives details of the dental inspection of school children, 4,291 were dentally inspected at the elementary schools and 2,763 referred for treatment. Of these, 1,251 were treated for the first time and 452 received subsequent treatments. The Table also shows statistically the dental treatment given at the Clinic. Extractions included 174 permanent and 1,660 temporary teeth and fillings, 1,086 permanent and 93 temporary. Gas administrations numbered 233.

On account of dental deformities 127 children were referred to the Royal Dental Hospital, and of these 10 obtained treatment under the arrangement made between the Education Authority and the Royal Dental Hospital.

Crippling Defects and Orthopaedics.—Most of these cases were referred for special treatment to the National Orthopaedic Hospital, London, but under arrangements made by the Education Committee, six cases of spinal curvature, one case of flat foot and one of infantile paralysis were treated at the King Edward Hospital with beneficial results.

PAYMENTS BY PARENTS.—The following amounts have been received from the parents during the year for treatment at the School Clinic:

					£	s.	d.
X-ray treatn	nent of R	ingworm	of head		 4	5	6
Dental Treat	ment				 40	19	0
Operations			-56		 15	2	6
Spectacles					 37	10	6
Treatment at	the Roya	al Dental	Hospital			7	6
				Total	 £98	5	0

ENLARGED TONSILS AND ADENOIDS.—Table IV. indicates that fifty-five cases of enlarged tonsils or adenoids were successfully operated upon at the School Clinic and ten at hospitals or by private practitioners. In addition, twenty-three cases of other abnormal nasal conditions received treatment at the School Clinic.

Tuberculosis.—Cases of pulmonary tuberculosis are referred to the Tuberculosis Officer and cases of non-pulmonary tuberculosis to private practitioners or to general hospitals and in some instances to the Tuberculosis Officer.

Skin Diseases.—Cases treated are indicated in Table IV. Out of 336 referred for treatment 295 were treated at the Clinic and 41 elsewhere. Attention has already been drawn to the large number of cases of impetigo and to the delay in the cure of the condition owing to irregular attendance at the Clinic. Cases of ringworm show a gratifying diminution.

EXTERNAL EYE DISEASE.—Children referred for treatment for external eye diseases numbered 41 and of these 30 were treated at the School Clinic. The diseases included seven cases of blepharitis 24 of conjunctivitis and 10 other conditions.

VISUAL DEFECTS.—Out of 279 cases referred for refraction, 210 were examined at the School Clinic and 22 by private practitioners or at eye hospitals. Glasses were prescribed and supplied in 147 of these cases.

All children provided with glasses are kept under supervision and their sight is regularly retested, a change of glasses being ordered if necessary. The School Nurses and teachers as far as possible endeavour to see that the glasses provided are worn.

EAR DISEASE AND HEARING.—Of 76 cases referred for treatment, 46 were dealt with at the School Clinic. Cases of chronic otorrhoea are very intractable and it is regretted that hitherto no means have been available for the rapid cure of this condition. Some success has, however, been reported as a result of the Ionization method, and it is possible that this method may ultimately be the means of considerable saving of time in the treatment of cases of chronic otorrhoea. The progress of this treatment elsewhere is being watched and if the successful results are maintained its adoption in Ealing will be advised.

In addition the following amounts were received for treatment at the Clinic:—

	£	s.	d.
Amount paid by the Maternity and Child Welfare Committee for the treatment of children under 5 years and of nursing and expectant mothers	7	3	10
Amount paid by the "Homes for Motherless Children" for the treatment of school children	1	12	9
Amount paid by the Ealing House Girls' Home for the treatment of children		8	10
Amount paid by the Maurice Girls' Home for the treatment of children		10	6
Total	£9	15	11

#### INSPECTION CLINIC.

School children may attend the Inspection Clinic daily at 10 a.m. on Tuesday, Wednesday, Thursday and Friday. They include cases specially referred by the Education Committee, Head Teachers, School Enquiry Officers and children brought by parents. Newly appointed teachers also attend for medical examination by special appointment.

The scope and amount of the work done is indicated in the sub-joined summary:—

Verminous Chi	ldren			1,596	
Impetigo				296	
Scabies				55	
Ringworm				64	
Teachers				8	
Miscellaneous				1,159	
			-		
		Total		3,178	

#### SPECIALLY DEFECTIVE SCHOOL CHILDREN.

These include the blind, deaf, defective and epileptic school children referred to in Table III.

Four boys and one girl are being maintained by the Local Education Authority at Certified Schools for the Blind. Five boys and two girls who are partially blind attend public elementary schools under supervision.

Two deaf mutes are maintained by the Local Authority at Certified Schools.

Of forty-three mentally defective children, thirty-three attend elementary schools, five are maintained at Certified Schools and five do not attend any school. During the year three boys and four girls were reported to the Local Control Authority on reaching 16 years of age.

Of epileptic children one attends a Certified School and one attends a public elementary school.

#### EMPLOYED CHILDREN.

By arrangement with the Juvenile Employment Bureau the School Medical Officer reports on the fitness for employment of children about to leave school and of children employed in accordance with the Bye-Laws made under the Employment of Children Act, 1903, as amended by the Education Act, 1918. In such examinations educational attainments as well as physical condition are considered.

In the course of routine inspection at the schools 71 children employed out of school hours were examined. Two were found to be in such a condition of health that their employment was prohibited.

Eight boys were examined before being allowed to engage in street trading.

#### MISCELLANEOUS.

In the Report for 1921 remarks were made in regard to open-air education, physical training, provision of meals, school baths, co-operation of parents, co-operation of teachers, co-operation of attendance officers, co-operation of voluntary bodies, nursery schools and secondary and continuation schools, and to these remarks nothing has to be added.

## STATISTICAL TABLES.

The Statistical Tables required by the Board of Education are appended.

THOMAS ORR,

School Medical Officer.

May 27th, 1924.

# MEDICAL INSPECTION RETURNS, 1923. TABLE I.

## Return of Medical Inspections.

## A. Routine Medical Inspections.

Number of Code Group Inspections:			
Entrants			 755
Intermediates			 735
Leavers			 900
	Tot	al al	 2,390
Number of other Routine Inspections			 _
B. Other Inspect	ions.		
Number of Special Inspections			 1,369
Number of Re-Inspections			 937
	Tot	al	 2,306

TABLE II.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1923.

IN THE YEAR	ENDED 31	st DE	CEMBER		
MATERIAL STREET, STREE	OF THE PARTY OF THE PARTY OF	Routine	Inspections		1 Inspections
		No.	of Defects.	No.	of Defects.
		.:	105		2 - 60
		Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment,	Requiring Treatment.	Requiring to be kept under observation, but not requiring Treatment.
		三里	日子を見まり	音音	THE STATE
DEFECT OR DISEA	SE.	50	Early of Grant	55	equipe equipe
		25	Tr. Tr.	RA	Tr ob
(1)		(2)	(3)	(4)	(5)
(1)				- 177	
Malnutrition			182	-	-
Uncleanliness,	head	12	11	-	
(See Table IV., Group V.)	body	-	24	-	-
(Ringworm, scalp		2	Halland R	14	TONE - 'S
,, body		_	-	17	
Skin Scabies		5	inspeci	21	
Impetigo		5	parlo-	122	_
Other Diseases (non-	Tuberculous)	14	_	136	_
(Blepharitis		5	In I Touch	2	
Conjunctivitis		2		22	_
Keratitis		1	_	1	
Eve   Corneal Opacities		1	-	-	-
Defective Vision	- (excluding			100	-
Squint)		156	_	108	_
Squint		10	-	5	
Other Conditions		-	_	7	_
Defective Hearing		16	_	16	_
Ear Otitis Media		18	_	20	
Other Ear Diseases		2		4	_
(Enlarged Tonsils of		86	92	11	-
Nose Adenoids only			-	18	
and   Enlarged Tonsils at	nd Adenoids	10	7.0	7	
Other Conditions			56	3	-
Enlarged Cervical Glands	(non-Tuber-				
culous)		100	105	8	-
Defective Speech			5	-	
Dontal Diseases					144
Teeth (See Table IV., G	roup IV.)	111			10000
Heart / Heart Disease :-				0	07
and Organic				6	37
Circu-   Functional			-	2	34
lation Anaemia		114	-	10	33
Bronchitis	***		57	4	_
Lungs Other Non-Tubercul	ous Diseases	2000	_		
(Pulmonary:				0	
Definite		1	_	3	
Suspected		3	-	10	4
Non-Pulmonary:					
Tuber- Glands			-	4	_
culosis   Spine			-	-	_
Hip		1	-	-	-
Other Bones and	Joints		-	1	
Skin			-	-0	-
Other forms				2	
Ner-   Epilepsy		-	-	2	1
vous Chorea		1	-	2	_
System Other Conditions		1	7	500	
Defor- Rickets		-	20		_
mities   Spinal Curvature		-	36	6	_
Other Forms			72	7	- 00
O41 D-1 1 D'		-	23	120	23
		622	690	719	132
		024	030	710	104
				-	The same of the sa

# B. Number of individual children found at Routine Medical Inspection to require Treatment

(excluding Uncleanliness and Dental Diseases).

	NUMBER O	Percentage	
GROUP.	Inspected.	Found to require Treatment.	of Children found to re- quire Treatment. (4)
Code Groups :—			The same
Entrants	 755	253	33.5
Intermediates	 735	150	20.4
Leavers	 900	168	18.6
Total (Code Groups)	 2,390	571	23.9
Other Routine Inspections	 		-

TABLE III.
RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

			Boys	Girls	Total
BLIND (including partially blind)	(i.) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools At other Institutions At no School or Institution	4	1	5
	(ii.) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind Attending Public Elementary Schools At other Institutions At no School or Institution	- 5 -	_ _ _ _	- 7 -
(including dear and and partially deaf)	(i.) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf Attending Public Elementary Schools At other Institutions At no School or Institution		2 -	2
dumb and pa	(ii.) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf Attending Public Elementary Schools At other Institutions At no School or Institution			1 1 1 1 1 1 1
-!	Feebleminded (cases not notifiable to the Local Control Authority.)	Attending Certified Schools for Mentally Defective Children Attending Public Elementary Schools At other Institutions At no School or Institution	2 19 1	3 14 4	5 33 5
MENTAI	Notified to the Local Control Authority during the year.	Feebleminded Imbeciles Idiots	3 1	4 2 —	7 3 -
EPILEPTICS	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics In Institutions other than Certified Special Schools Attending Public Elementary Schools At no School or Institution	1 -		1
臣	Suffering from epil- epsy which is not severe	Attending Public Elementary Schools At no School or Institution	_	1	1

## TABLE III.—contd.

	being Controlly Control	Boys	Girls	Tota
Infectious pulmona and glandular tube culosis.			=	The same filling
Non-infectious but a tive pulmonary an glandular tube culosis.	d Schools approved by the	- - - 3 - 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Delicate children (e.g pre- or latent tube culosis, maluutr tion, debility, ana mia, etc.)	r- Open-Air Schools i- At Certified Day Open-Air			193
Active non-pulmor ary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions At no School or Institution	<u>-</u> - 1		= -
Crippled Childre (other than those with active tube culous disease), e.g children suffering from paralysis, etc.	e At Certified Residential Cripple Schools At Certified Day Cripple Schools At Public Elementary Schools	_ _ _ _ 19		40
and including those with severe hear disease.		2	5	7

### TABLE IV.

## RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1923.

## TREATMENT TABLE.

Group 1.—Minor Ailments (excluding Uncleanliness, for which see Group V.)

	Number of Defects treated, or under treatment during the year.					
DISEASE OR DEFECT.	Under the Authority's Scheme.	Otherwise.	Total.			
(1)	(2)	(3)	(4)			
SKIN:— Ringworm—Scalp Ringworm—Body Scabies Impetigo Minor Injuries Other Skin Diseases  MINOR EYE DEFECTS (external and other, but excluding cases falling in Group II.)	16 15 12 118 — — 30	- 2 14 9 - - 11	16 17 26 127 —			
MINOR EAR DEFECTS	46	30	76			
MISCELLANEOUS (e.g. minor injuries, bruises, sores, chilblains, etc	134	16	150			
Total	371	82	453			

## Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	No. of Defects dealt with.						
Defect or Disease.		Submitted to refraction by private practi- tioner or at hos- pital, apart from the Authority's	Other- wise.	Total.			
(1)	(2)	Scheme.	(4)	(5)			
Errors of Refraction (including Squint)	210	22	_	232			
the Eyes (excluding those reported in Group 1)	_	_	_	_			
Total	210	22	-	232			

## Group III.—Treatment of Defects of Nose and Throat.

3 681 386	NUMBER OF DEF	ECTS.		
Received	Operative Treatment.			
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.  (2)	Total.	Received other forms of Treatment.	Total number treated. (5)
55	10	65	23	88

## Group IV.—Dental Defects.

(1) Number of Children who were:—
Inspected by the Dentist:

(1)	Inspected by the Den						
	Aged : Routine Age Groups	5 6 7 8 9 10 11 12 13 14		248 418 616 515 548 508 510 393 359 176	Total		4,291
	Specials						206
				Gra	and Total		4,497
	Found to require treat	ment					2,763
	Actually treated	***					1,251
	Re-treated during the y	vear as th	e result	of peri	odicai exami	nation	452
(2)	Half-days devoted to :— Inspection Treatment				25 171	Total	196
(3)	Attendances made by chil	ldren for	treatme	nt			1,703
	Fillings :—						
(4)	Permanent teeth Temporary teeth				1,086	Total	1,179
(5)	Extractions:— Permanent teeth Temporary teeth				174) 1.660 j	Total	1,834
(6)	Administrations of genera	l anaesth	etics for	extra	ctions		233
(7)	Other operations:— Permanent teeth Temporary teeth				::: =}	Total	

## Group V .- Uncleanliness and Verminous Conditions.

(1)	Average number of visits per school made during by the School Nurses	the y	ear	4
(2)	Total number of examinations of children in the School Nurses		by	8,247
(3)	Number of individual children found unclean			732
(4)	Number of children cleansed under arrangements the Local Education Authority	made 	by	Nil
(5)	Number of cases in which legal proceedings were t	aken :-	-	
	(a) Under the Education Act, 1921			Nil
	(b) Under School Attendance Byelaws			33