[Report of the Medical Officer of Health for Edmonton].

Contributors

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Borough of Edmonton



INSTITUTE OF SOCIAL MEDICINE

10. PARKS ROAD, OXFORD

REPORT

OF THE

Medical Officer of Health

AND

School Medical Officer

FOR THE YEAR

1946





Borough of Edmonton



INSTITUTE OF SOCIAL

O. FARKS ROAD.

REPORT

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Borough of Edmonton 1946

His Worship the Mayor Deputy Mayor - - Alderman J. Reid, J.P.

- - Alderman Mrs. E. A. Young.

PUBLIC HEALTH COMMITTEE.

Chairman: Councillor Mrs. A. M. GLOVER.

Members:

Alderman J. Reid, J.P. (Ex-Officio) Alderman Mrs. E. A. Young (Ex-Officio) Councillor J. A. G. Beattie

- L. E. Berridge
- F. H. Brooks
 - Mrs. L. M. George
- ,, Mrs. S. J. HALLIDAY
- ,, C. G. LACEY
- .. M. SIMPSON

PREFACE.

PUBLIC HEALTH DEPARTMENT, TOWN HALL,

EDMONTON, N.9.

HIS WORSHIP THE MAYOR, ALDERMEN AND COUNCILLORS OF THE BOROUGH OF EDMONTON.

YOUR WORSHIP, LADIES AND GENTLEMEN,

I have much pleasure in presenting my twelfth Annual Report for the year 1946. The report is compiled in accordance with the Ministry of Health Circular 13/47 and contains therefore only a brief outline of the health circumstances relating to the Borough.

Although the war terminated more than two years ago, we are still endeavouring to counteract the effects of the after math and to bring up to normal standards the health services of the Borough.

So far as sanitation is concerned this will be a difficult and prolonged task, on account of the short supply of materials and manpower. Quite a number of the repairs carried out under war conditions are showing signs of deterioration and complaints are therefore arising in frequent number because of such defects. Added to this, we have the ordinary wear and tear defect, which in the ageing houses of Edmonton is proving to be more frequent than desirable.

I regret to have to announce that the incidence of Tuberculosis in the District shows a slight increase. I hope the day is not far distant when Mass Radiography and other schemes for early diagnosis will be freely available to the General Public in order that the advance gained over the last half-century will be maintained in future efforts against this disease.

To those who have been doubtful in the past about the effects of immunisation, I can now commend them to the incidence of Diphtheria in the Borough; if we progress at the same rate over the next 5-6 years and the people become educated to the benefits of immunisation, I see no reason why Diphtheria as a disease should not become as scarce as Smallpox. I have every reason to believe that the Edmonton citizens will do their duty in having their children immunised at an early date, as our appeal for this work has always met with a reasonably good response. There are, however, some who still maintain the idea that immunisation is injurious; there is some little risk, but the general benefit accrued is so great that it completely negatives any risk which may be involved.

I am happy also to relate that immunisation against Whooping Cough is becoming popular, although we cannot give it the same guarantee as in the case of Diphtheria. I can, however, say that some benefit is given to the children either by prevention in a reasonable percentage of cases and modification of the attack in others.

BIRTH RATE shows an increase, which is only an indication of what is happening throughout the Country, and should, I think, satisfy the minds of those who think by 1960 the Nation will consist of old people.

DEATH RATE. There is a fall in this rate, which further adds to the hope that the future population will not entirely consist of Old Age Pensioners. It is also a credit to the Borough that the considerable number of those who died were well over 70 years of age and some over 80 years of age.

INFANTILE MORTALITY RATE. I am pleased to be able to report that this rate is less than last year. The figure of 32 reflects great credit on the medical and Health Visitors' staff, and I think that a little congratulation here to their combined efforts would not be out of place.

PUERPERAL SEPSIS. It is to be regretted that the deaths from Puerperal causes show an increase, although it still compares favourable with the large cities and towns and the rest of England rate.

I think it is appropriate to draw the attention of the Council to the above figures. There is an increase in the Birth rate and a decrease in the Death rate, and also a decrease in the Infantile Mortality rate. The results will be an upward trend in the population as a whole. From the point of view of education and housing, this presents a serious problem for the long-term policy of the Council. It will definitely mean that in some 15-20 years, the housing problem of Edmonton will be greater than it is to-day.

I would like to express my gratitude to my staff for the manner in which they have helped me during the year. Public Health is difficult and alternating, and at present is a difficult problem to handle owing to the affects of war conditions still persisting, but notwithstanding this the members of my staff have at all times made every effort to successfully overcome these difficulties. To the members of the Council, I tender my sincere thanks for the help they have given me, and I would like to mention in this respect the wholehearted support I have received at all times from my Public Health Committee.

I have the honour to be, Your Worship, Ladies and Gentlemen,

Your obedient Servant,

D. REGAN, Medical Officer of Health.

GENERAL STATISTICS.

Area (in acres)								3,896
Population—								
Census of 1921								66,809
Census of 1931								77,652
Estimated by t		gistrar-	-Genera	l for m	id-year	1946		104,120
Number of inhabite							6	27,976
Number of inhabite								25,950
Rateable value, Apr								£746,736
Estimated product								
1947								£3,097
Rates in the £ for th	ne year	ending	g March	31st,	1947			15s. 4d.

SOCIAL CONDITIONS.

The extent of unemployment may be estimated by the following figures relating to :—

(1) the number of free dinners given to schoolchildren, and

(2) the actual figures supplied by the Director of Public Assistance.

No. 1 is given purely on economic grounds.

(1)	Number	of	free	dinners	during	1945			 	83,504
	***	.33-	paid	,,	"	1945	***		 	754,761
	33	33	free	"	"	1946			 	96,659
	"	22	paid	,,	2)	1946		***	 	1,067,472

The average number of children receiving meals daily was 5,000 (45.0% of the children in school).

Under the Milk in Schools Scheme an average of 12,466 children (98.7% of the number in school) had milk daily.

of the number in school, had link	dally.					
(2) Figures re out relief:— For the year 1945—					Persons.	Amount.
(a) Ordinary out-relief (b) Unemployed out-relief					1,839 Nil	£22,107 Nil
					1,839	£22,107
For the year 1946—						
(a) Ordinary out-relief (b) Unemployed out-relief					2,288 14	£25,107
					-2,302	£25,111
VITAL	STA	TISTIC	S.			
Live Births.						Grand
		M.	F.		Total.	Total.
		1,068	940		2,008	
Illegitimate		48	52		100	2,108
Birth-rate per 1,000 of populati	ion	***				20.24
Stillbirths.			100			
Legitimate		29	18		47	
Illogitimate		4	1		5	52
Total of live and stillbirtha						2,160
Rate per 1,000 total births .						24.07
Deaths.						
		471	448		919	
Rate per 1,000 population .						8.82
Doothe from Duarnaval Causes				-	D	000 1

Death rate of infants under one year of age.

			M.	F.	Total.	
Numbe	er		35	34	69	
All infa	ants p	er 1,000 live births			 	32.73
		nfants per 1,000 legitim		births	 	30.37
		nfants per 1,000 illegiti			·	80.00
		Cancer (all ages)			 168	
,,	,,	Measles (all ages)			 1	
"	,,,	Whooping Cough (all a	ages)		 1	
"	,,	Diarrhoea (under 2 year	ars of a	ge)	 11	a contract of

The following causes of death are supplied by the Registrar General and refer to deaths which were registered during the calendar year:—

Cause of	Deat	h.				M.	F.	Total
Typhoid and para-typhoid fevers	/							
Carabra aninal farrar						1	1	2
Scarlet forcer								
Whooping cough			***			1		1
Diphtheria							***	***
Tuberculosis of the respiratory sy	stem					23	16	39
Other forms of tuberculosis						4	4	8
Syphilitic diseases						4	1	5
Influenza						2	3	5
Measles							1	1
Acute Poliomyelitis and Polio-end	cepha	litis						
Acute infective encephalitis								
Cancer of buccal cavity and oeso			Uteru	2.000		6	9	15
Cancer of stomach and duodenun						20	10	30
Concer of broad							23	23
Cancer of all other cites						61	39	100
Diobetes						1	4	5
Intra cranial vaccular lesions						46	52	98
Linest dianana						93	107	200
Other diseases of the circulatory						-26	14	40
Branchitie						43	33	76
Pnoumonia				***	***	21	28	49
Other recoiratory diseases						6	1	7
Moor of stomach or duadenum			***	***		10	1 2	12
Diamboon (under 2 money)		***		***	***	6	5	11
A STATE OF THE STA				***	***		3	3
Other discotion discours			***		***	7	19	26
T 4 121		***		***	***		111	19
		***			***	8	2	
Puerperal and post-abortive sepsi Other maternal causes		***	*** 0	***	***	***		2
				***	***		3	3
Premature birth						8	6	14
Congenital malformations, birth i	njurie	es, inia	ant disc	eases		14	10	24
		***				5	6	11
	**		***			2	1	3
A 11 - 41	**		***	***	***	9	9	18
All other causes	**	***	***	***	***	44	25	69
						471	448	919

The two tables overleaf give the deaths of those registered during the 52 weeks ended 28th December, 1946.

The slight difference between the tables overleaf in respect of the causes of death and the one supplied by the Registrar General is that the Registrar General is in possession of additional information on the matter.

Causes of Death	ALL	to 1	to 2	to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 and
	No.		Page 1	Test!								
Whooping Cough			1						200			
Tuberculosis of the Respiratory System						5	4	8	2	3	1	
Other forms of Tuberculosis	. 3				2	1						
Syphilitic Diseases	. 4									2	1	1
Influenza		***								***	1	
Cancer of Buccal Cavity and Oesophagus	7										4	3
Cancer of Stomach and Duodenum	19					***		2	5	4	3	5
Cancer of all other sites	. 59		1					3	9	16	17	13
Diabetes	. 1				***	***						1
Intra-cranial Vascular Lesions	47		***				***	1	7	6	16	17
Heart Disease	95						1	6	9	20	35	24
Other Circulatory Diseases	. 21		***			1		2	2	3	3	10
Bronchitis	43				***			2	3	14	18	6
Pneumonia	20	7					1		5	1	6	2
Other Respiratory Diseases	. 5								1	1	3	
Ulcer of Stomach or Duodenum	13				***	***	1	2	3	2	5	
Diarrhoea (under 2 years)	6	6					***					
Appendicitis	1000		***				***					
Other Digestive Diseases	0						1			4	3	
Nephritis	0			1					2		4	2
Premature Birth	0	8										
Cong. mal., birth injuries,	14	14										1000
infant dis						200		2000		1000	1000	1000
Suicide	-		***					1	1	1	1	1
Road Traffic Accidents	0				1	1						
Other violence	9		1	1			2	1		1	1	2
All other causes	44			1			2	3	6	7	10	15
A REAL PROPERTY.							al elec	1000				
Totals	469	35	3	3	3	8	12	31	55	85	132	102

FEMALES.

Causes of death	ALL	AGES	to 1	to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 and
Cerebro-Spinal Fever		1	***				***		1		***		
Tuberculosis of the Respirato System	-	9	***		1	1	4	9	1		2		1
Other forms of Tuberculosis		1				***			1	***	***		
Syphilitic Diseases		1	***		***		***	***		1	***		
Influenza		4										3	1
Measles		1	1										
Cancer of Uterus		9							1		3	2	3
Cancer of Stomach and Duodenum	1	0								1	2	2	5
Cancer of Breast	2	1							3	5	8	4	1
and the same of th		9						1	5	5	6	7	15
District Control of the Control of t		4									1	1	2
Intra-cranial Vascular Lesion		3					1			3	9	15	25
II. A Di	10	8				***		2	3	5	16	31	51
00 0 11 11		2									1	6	5
D		3	1	***				***	2	3	4	7	16
The state of the s		7	8					1	2	2	1	2	11
OUT TO 1 . TO!		1										1	1
Ulcer of Stomach and		2			***							2	1
Duodenum				***	***				***			-	-
		5	5	***	***	***	***				***		***
		3				***			1			1	1
		21	2	1	***	1	2	1	1	2	1	6	4
		1	***		***		2	1		1	1	4	2
Puerperal and Post-abortive Sepsis		2					1	1		***			
		3	***		***	***	***	3					***
		6	6	***				***					***
Cong. mal., birth injuries, inf. dis.		9	9	***		***		***	***			***	***
Suicide		6					1		2	1	1		1
Road traffic accidents		1				***			***		***	1	***
Other violence		9	1		***	***	***				3	1	4
All other server		23	1		2		1	1	2	2	3	3	8
Totals	44	-5	34	1	3	2	12	20	25	31	62	99	156

INFANTILE MORTALITY.

The deaths of infants under one year of age were as follows:-

Legitimate Illegitimate	 	 	 	M. 33 2	F. 28 6	Total 61 8
				-	-	-
				35	34	69

The death rate of all infants per 1,000 live births was 32.73. The death rate of all infants under one month of age per 1,000 live births was 19.44.

A detailed sub-division of the causes, etc., of these DEATHS is as follows: -

MALES.

Causes	of Dea	th		Under 1 week	Second Week	Third Week	Fourth Week	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total under 1 year
Gastro-Enteritis				1		1	1	3		2	1		6
Pneumonia				1	***	î		2	4	1			7
Premature Birth				4	1	3		8					8
Congenital Malfor	mation	ns		1	1	2		4	1	2		1	8
Other causes							2	2					2
Atelectasis			***	3				3					3
Injury at Birth		***			1			1					1
Totals				10	3	7	3	23	5	5	1	1	35

FEMALES.

Causes	of Dea	th		Under 1 week	Second week	Third week	Fourth week	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total under 1 year
Measles												1	1
Pneumonia				1		1		2	5		1		8
Congenital Malfor	mation	ns		1	1	1		3	2				5
Premature Birth				3			1	4	2				6
Atelectasis				1				1					1
Bronchitis						1		1				***	1
Injury at Birth			***	2				2				***	2
Gastro-enteritis							1	1	3	1	***	***	5
Other Causes				3				3			1		4
Violence				1				1					1
Totals				12	1	3	2	18	12	1	2	1	34

COMPARATIVE STATISTICS.

The Registrar-General has forwarded provisional figures relating to the country as a whole and to London, enabling comparisons to be made as follows:—

	Birth- per 1		Death-rate per	1,000 births.		
	popula		From diarrhoea,	Total deaths		
	Live	Still	etc., under 2 years	under 1 year		
England and Wales London Edmonton	19.1 21.5 20.24	0.53 0.54 0.49	4.4 4.2 5.21	43 41 32.73		

Annual Death Rate per 1,000 of Population.

	All Causes	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza
England and Wales London Edmonton	11.5	0.00	0.00	0.02	0.01	0.15
	12.7	0.01	0.00	0.02	0.01	0.12
	8 82	0.00	0.00	0.00	0.00	0.04

The following table gives the number of births and deaths (registered) sub-divided into the four Wards of the Borough. It should be remembered that births are only those which occurred in Edmonton of residents; these are registered in Edmonton. Births which take place outside the Borough are not included; this fact accounts for the difference between these figures and those supplied by the Registrar-General. The deaths include those taking place outside the Borough, the information being given quarterly by the Registrar-General.

Ward				Births		Deaths		Infant Deaths	
				M.	F.	M.	F.	M.	F.
Bury Street				261	241	119	131	16	10
Church Street				125	119	100	104	8	9
Angel Road				172	174	104	98	5	7
Silver Street				219	175	146	112	6	8
Vagrants									
				777	709	469	445	35	34

LABORATORY SERVICE.

The following examinations were carried out in the Bacteriological Laboratory:—

Nature of Examination.	Positive.	Negative.	Total.
Blood—Bleeding Time	_	_	8
Blood—Cell Volume		_	1
Blood Counts			203
Blood—Sedimentation Rate	_		2
Breast Milk—Fat Content	-	-	36
Eye Smears for presence of organisms			31
Faeces for presence of Threadworm	1		1
Faeces for presence of Dysentery Bacilli	69	499	568
Faeces for presence of Tubercle Bacilli	1	2	3
Swabs (Post Nasal) for presence of			
Meningococci	2	9	11
Pus for presence of Tubercle Bacilli		2	2
Pus for presence of organisms	-	_	1
Sputa for presence of Tubercle Bacilli	3	25	28
Sputa for presence of organisms	- ,	_	1
Swabs for presence of C. Diphtheriæ —			
(a) From Suspect cases	23	647	670
(b) From Contacts	8	305	313
(c) From Carriers and old cases	,	45	52
Swabs for presence of Haemolytic Streptococci	1	32	33
Swabs for Vincent's Angina	_	8	8
Urethral Smears for presence of Organisms		-	3
Urine—Bacteriological Examinations			73
Urine—Chemical Examinations			
Urine—Microscopical Examinations			882 221
Vaginal Smears for presence of Gonococci		2	
Vaginal Smears for Trichomonas Vaginalis	6	- 6	2
Vaginal Smears for presence of organisms	_	0	12
			18
Total Number of Exam	ninations .		3,183

MILK (SPECIAL DESIGNATIONS) REGULATIONS 1936-1946.

183 Samples of Designated Milks were examined in the Laboratory. Results were as follows:—

Pasteurised Milk.

73 Samples were examined, 71 satisfied both the prescribed tests. 2 Samples failed to pass the Methylene Blue Test.

Tuberculin Tested Milk.

50 Samples were examined and 42 satisfied both the prescribed tests.

6 Samples failed to pass both the Methylene Blue and Coliform tests.

2 Samples failed to pass the Coliform Test only.

Tuberculin Tested (Pasteurised) Milk.

60 Samples were examined, 56 satisfied both the prescribed tests.

2 Samples failed to pass both the Methylene Blue and Phosphatase Tests.

2 Samples failed to pass the Methylene Blue Test only.

School Milk.

33 samples of milk as delivered to the various schools of the Borough were examined, and all samples satisfied the prescribed tests of the Milk (Special Designations) Regulations 1936-1946

Ambulance Facilities.

The Council possesses four ambulances, and the following figures give some idea of the work carried out during the year:—

Private cases				 	10,890
Accident case				 	849
Maternity cas				 	331
School Medica				 	267
Maternity and			nsils)	 	174
Not required		 	***	 	234
False calls		 	****	 ***	12
Bedside Appa		 		 	78
Analgesia		 	****	 	234
Special service	es	 ***		 	773
					13,842

First Aid was rendered on 617 occasions. The resuscitating apparatus was in use on 11 occasions.

The total mileage of the vehicles was 58,822 miles.

During the year the Ambulance Service dealt with 164 Street Accidents, and in connection with these the main danger spots in the Borough were as follows:

Fore Street, junction of Brettenham Road and Park Road.

Silver Street and Angel Road, Traffic Lights.

Great Cambridge Road, junction with Bury Street. Fore Street, between Knights Lane and Plevna Road.

Hertford Road, from Causeyware Road to St. Marys Road.

Transport.

A 2-ton Bedford Coach conveys the deaf and dumb and partially blind children to and from school, picks up a few other children in the morning, taking them to a spot to meet the guide.

Nursing in the Home.

This has been described in previous reports.

Hospitals.

Infectious diseases are admitted into the Enfield, Edmonton and Potters

Bar Joint Isolation Hospital, situated in Enfield.

Arrangements for the treatment of ear, nose, and throat disorders amongst school children are made with the Royal Waterloo Hospital, Prince of Wales's Hospital and North Middlesex County Hospital.

Nursing Homes Registration.

There is one Nursing Home registered by the Council. This is kept under supervision by the Medical Officer of Health. No new applications to be placed on the register were received during 1946.

SANITARY CIRCUMSTANCES OF THE AREA.

The water supply of the Borough has at all times been satisfactory both

in quality and quantity.

The Metropolitan Water Board is responsible for the supply which is piped direct to every dwelling-house throughout the Borough, and serves the entire population.

The co-operation of the Board has at all times been of the fullest.

SANITARY INSPECTION IN THE AREA.

Five District Sanitary Inspectors and one woman Sanitary Inspector are engaged in the sanitary supervision of the Borough, working under the supervision of the Senior Sanitary Inspector. The Senior Sanitary Inspector supervises the work of the Borough and is Inspector under the Canal Boats Acts.

Sanitary Conveniences.

There are seven Public Conveniences in the Borough which are kept under constant supervision by the Public Health Department.

Rats and Mice (Destruction) Act, 1919. Infestation Order, 1943.

Under this heading your Senior Sanitary Inspector, as Officer-in-Charge, Rodent Control, reports as follows:—

The Council have two Rodent Operatives and a Junior Clerk, and

appointed the District Sanitary Inspectors Rodent Officers.

Up to the end of the year, 2,227 visits and re-visits have been made by the Rodent Operatives, in connection with complaints as to alleged rat infestation. Three Intimation Notices have been served—owing to the fact that the Occupiers did not appear to be taking effective measures to eradicate the vermin, but no Statutory Notices were served.

Defestation has been carried out on request at 142 premises and at the

end of the year 8 premises were in process of "Defestation."

The District Sanitary Inspectors in cases where there was a possibility of the infestation being due to defective drainage visited the premises and tested the drainage and any defects discovered were dealt with through the usual channels.

Of 98 cases of Rat Infestation referred to the District Inspectors, owing to the possibility of defects in the drainage, in 65% of the cases defects were discovered and as one can quite appreciate entailed quite a large amount of work.

During the year the treatment of the sewers took place (both parts of the initial treatment) and 1,319 manholes were treated. In the first part by zinc phosphide and the second part by arsenious oxide and a full report submitted to the Public Health Committee in December thereon.

Middlesex County Council Act, 1944, Section 279, Hawkers, Etc.

This Act came into operation on the 1st October, 1944, and Section 279 replaced Section 71 of the Act of 1938. Ten applications were received and 8 persons registered.

Rent and Mortgage Interest (Restrictions) Acts 1920-1933

During the year your Senior Sanitary Inspector has issued 33 Certificates under the above Acts upon applications of Occupiers of dwelling-houses in the district.

Disinfection and Disinfestation.

The following table gives some idea of the work of	carried	out :	- In a second
N f 1 1 1 1 1 1 1 1 1 1 1 1			000
" " " return bedding …			234
Rooms disinfected after infectious disease			727
" " " phthisis	***		77
Rooms disinfected after other cases			112
Disinfestation carried out after vermin			164
Bedding, clothing, etc., disinfected after	infect		
disease			3,876 articles
Bedding, clothing, etc., disinfected after phth			
,, ,, ,, ,, other	er cases	***	2,032 ,,

The Council distribute a disinfecting powder and fluid to residents who apply for same at the Town Hall Yard. During the year, the applicants numbered 7,124. One hour daily is allowed for such distribution with the exception of Fridays and Saturdays. A Formalin Chamber is used for the disinfection of books, leather goods, etc., articles that would be damaged by steam. The number of books and other articles thus disinfected was 305.

Two Council houses and 84 other houses were found to be infested and the total number of rooms disinfested was 164. The whole of the work is carried out by the Department, the materials used being Insecticides contain-

ing D.D.T. as a base.

Petroleum (Regulations) Acts, 1928 and 1936.

During the year seven new licences and 99 renewals were granted by the Council. The following is a list of particulars of quantities, etc., affected by these licences:—

Petroleum spirit	***	 	410,759 gallons.
Petroleum mixtures		 	6,278 ,,
Carbide of calcium		 	17 cwts. 78 lbs.
Rubber Solution		 	100

Mortuary.

During the year 96 bodies were deposited in the Mortuary, 72 by order of the Coroner and 24 for sanitary reasons.

Inspections. - The following tabular statement gives the number and

nature of the inspections made during the year :-

Complaints					2,071
Infectious disease					392
Tuberculosis					27
House-to-House					1100
Factories with mech	anical	power			106
Factories without me			/er		12
Outworkers					89
Schools					4
Offensive trades					6
Shops and Stalls					108
Shops Act (Primary)					12
Shops Act (Re-inspec	ctions)				3
Sanitary convenience	es and	urinals			468
Smoke observations					10
Rat Infestation					36
Stables					18
Piggeries					31
Petroleum					32
General inspections					368
Sundry Visits					2,698
Cinemas and Halls				***	7
Visits to canal					4
Gipsies					3
Re-inspections					5,886

Inspection of Places where Food is Prepared.

wanted Higher		o - rop.	DET CHES		
Butchers				 	108
Fish shops				 	21
Coffee shops				 	54
Dairies and n	ilksh	ops		 	32
Slaughterhous	ses			 	46
Bakehouses				 	16
Ice Cream Sh	ops			 	18

Number of Notices Served.			
Preliminary or Informal Notices			1,562
Statutory Notices			200
Defects Remedied.			000
			005
Houses repaired, cleansed, etc.		***	285
D.W. cisterns repaired, covered			15
Water fittings repaired			121
Water taken off mains			2
Drains examined, tested, etc.			501
Drains cleared, trapped, repaired			421
Drains reconstructed			64
Chambers inserted			49
Chambers sealed down			22
Soil and vent pipes repaired			72
W.C.s repaired, cleansed, etc.			291
Flushing cisterns repaired			138
Waste pipes repaired, etc			28
Sinks repaired or renewed			301
Roofs repaired			221
Gutters and R.W.P.s repaired			72
Yards paved or repaved			42
Scullery floors repaired			28
Spaces under floors ventilated			91
Dampness remedied			118
Floors repaired			97
Coppers and stoves repaired, etc.			
New dustbins supplied			357
Accumulation of refuse removed		***	
Nuisances from animals abated	***		8
Other nuisances abated			2
			194
Water supply restored		***	6

Canal Boats Acts.

During the year 5 visits were paid to the Canal and 3 boats were seen, but of this number none was fitted or used as a dwelling or registered under the Acts.

Rat defestation of premises ...

Places of Public Entertainment.

Seven inspections of cinemas and other places of entertainment were made in accordance with the Circular of the Ministry of Health of 1920. Conditions were found to be generally satisfactory.

FACTORIES ACT, 1937.

The following work has been carried out under the above Act :-

1.—Inspections for the Purpose of Provisions as to Health.

Premises	Inspections	Written Notices	Occupiers Prosecuted
Factories with mechanical power Factories without mechanical power Other premises under the Act (including works of building and engineering and construction but not including out-	106 12	6	
workers' premises)			
Totals	118	6	

	Number of defects					
Particulars		Remedied	Referred to H.M. Inspector	defects in respect of which prosecutions were instituted		
Want of cleanliness	8	8				
Overcrowding						
Unreasonable temperature Inadequate ventilation		***		***		
Sanitary Conveniences :		***				
Unsuitable or defective	6	6				
Not separate for sexes				***		
Other offences (Not including offences relating to Home work or offences under Sections mentioned in the schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937.)						
Totals	14	14				
Nature of Work. Wearing Apparel—	Inst		Notices Served.	Prosecu- tions.		
Making, etc			-	_		
Cleaning and washing			-	_		
Defects Remedied.	CTORII	ES.				
W.C. walls alsoned				6		
WC sistems ususined				0		
W.C. Seats repaired or renew			***	3		
W.C. Flush pipes repaired			***	0		
W.C. doors repaired						
W.C. pans replaced			***			
Roofs repaired	depende					
Workrooms cleansed	oggio umo			2		
Sanitary accommodation imp				2		
,, ,, for						
Urinals cleansed	P	201100				
Unreasonable Ventilation .						
HOUSING—H						
1. Inspection of Dwelling Houses I						
(1) (a) Total number of dwe defects (under Public (b) Number of inspections (2) (a) Number of dwelling he above) which were Housing Consolidate (b) Number of inspections	lling ho ic Healt s made f ouses (ir inspected ed Regu	h or Housing for the purpo acluding und ed and record lations, 1925	g Acts) ose der sub-head rded under o and 1932	1,384 4,271 d (1) the		

	(3)	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	4
	(4)	Number of dwelling houses (exclusive of those referred to above under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	1091
2.	Ren	nedy of Defects During the Year without Service of Formal Notice	ces :-
		Number of defective dwelling houses rendered fit in con- sequence of informal action by the Local Authority or their officers	592
3.	Acti	on under Statutory Powers During the Year.	
	A	-Proceedings under Sections 9, 10, and 16 of the Housing Act, 1936:—	
		(1) Number of dwelling houses in respect of which notices were served requiring repairs	43
		(2) Number of dwelling houses which were rendered fit after service of formal notices:—	
		(a) By owners (b) By Local Authority in default of owners	33 9
	В	-Proceedings under Public Health Acts :—	
		(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	273
		(2) Number of houses in which defects were remedied after service of formal notices:—	
		(a) By owners (b) By Local Authority in default of owners	151 6
	C.—	-Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	
		(1) Number of dwelling houses in respect of which demolition orders were made	4
		(2) Number of dwelling houses demolished in pursuance of demolition orders	1
	D	-Proceedings under Section 12 of the Housing Act, 1936:—	
		(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	_
	(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or rooms having been rendered fit	_

SLAUGHTERHOUSES.

Forty-seven visits were paid and the carcases and organs of 129 pigs were inspected during or shortly after slaughter, permission for slaughter having been obtained from the Area Meat and Livestock Officer, and the following surrendered:—

28 Plucks. 9 Heads.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

Various licences were granted as under :-

		Primary.	Supplementary.
Pasteurised	 	 12	7
Tuberculin tested	 	 8	5
		20	12
			STREET, STREET

One of the above retailers is licensed to bottle Tuberculin tested milk and one firm is licensed to pasteurise and bottle milk on the premises; one firm is licensed to bottle pasteurised milk on the premises.

Supplementary licences are granted to retailers who live outside the Borough but who sell milk in the Borough; the primary licence is granted by the Authority in which they reside.

Unsound Food.

The following is a list of the food surrendered for examination and retained as unfit for human consumption :—

4398 tins of milk.	3 4½-stone smoked fillet.
566 ,, canned meat.	7½-lb skate eye-balls.
237 beans.	15 packets flour mixture.
237 ,, beans. 472 ,, canned fish.	23 Irish fowls.
204 ,, Callied list.	
204 ,, peas.	25-lb. sultanas.
66 , soup.	7-lb. ham
87 pots of jam and marmalade.	16 tins tomatoes.
35 tins of fruit.	68-lb. box chocolate biscuits.
40 pots of paste.	10 chocolate covered cakes.
20 tins of carrots.	7½-lb. swiss roll.
116-lb, Iraq dates.	9-stone headless cod.
30-lb. box raisins.	50-lb. bacon.
2960-lb. (approx.) rabbit.	854-lb. (approx.) Scotch lamb.
2 box whiting.	108 oxtails (approx. 314-lb.)
4 bags mussels.	1 turkey.
4-stone kippers.	1 bag whelks,
14-lb. soft roes.	25-lb. flaked beef suet.
6 box skate.	56-lb. macaroni
	21-lb silver side.
10 lb. cod fillet.	
1 box soles.	1 tin biscuits
1 ,, mixed fish.	76 1-cwt. bags rolled oats.
1 , megrams,	55 ½-lb. Camenbert cheese.
5-stone rays.	

Together with various small consignments of miscellaneous foods.

Chemical and Bacteriological Examinations of Food.

The only examinations carried out by the Council are those for designated milks. The matter has been discussed previously.

PREVALENCE OF INFECTIOUS DISEASE.

Measles and Whooping Cough.

These diseases were made compulsorily notifiable in October, 1939. 788 cases of Measles and 88 cases of Whooping Cough were notified during the year. There was one death from Measles and one from Whooping Cough.

Diphtheria.

I am happy to report the continued low incidence of this disease. There is an increase over last year, but even so, the incidence remains low; 24 cases were notified during the year compared with 11 in 1945. There were no deaths.

Scarlet Fever.

This disease continued to occur throughout the year in a mild form; there were 299 cases compared with 194 in 1945; there were no deaths.

"Return" cases numbered 7 allowing for an interval of 28 days between a patient returning home from the Isolation Hospital and the onset of the disease in another inmate of the house.

Smallpox.

No cases of smallpox were notified during the year.

Poliomyelitis.

Three cases of this disease were notified during the year. There were no deaths from this disease.

Dysentery.

Thirty-three cases were notified during the year, 32 of the Sonne type and 1 Flexner type. Investigation failed to reveal the cause of infection. There were no deaths from this disease.

Cerebro Spinal Fever.

Four cases were notified during the year. These cases were carefully investigated and precautions taken to prevent the spread of infection. Two deaths took place.

Puerperal Pyrexia and Ophthalmia Neonatorum.

These are referred to later on under the heading of Maternity and Child Welfare.

Food Poisoning.

No cases were notified during the year.

Pneumonia.

Thirty-three cases were notified during the year.

Diarrhoea and Enteritis under 2 years of age.

The death rate per 1,000 live births for London was 4.2 whilst that for Edmonton was 5.21 as compared with 7.6 and 2.5 respectively last year.

The following table gives the age, incidence, etc., of those suffering from

notifiable diseases, excluding tuberculosis which is dealt with separately.

It must be noted that the figures in the second column "No. removed to hospital" includes those already under treatment at a hospital, for instance, the North Middlesex County Hospital.

This remark applies more particularly to the infections associated with parturition and includes puerperal pyrexia and ophthalmia neonatorum.

The number of deaths from Pneumonia includes all forms of this disease.

Disease	Total No. of Cases	No. Removed to Hospital	Deaths	to 1	1 to 2	2 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 over
Scarlet Fever	299	283			8	13	17	17	124	94	8	10	6	2	
Diphtheria Puerperal	24	24						2	12	7	3		***	***	
Pyrexia	70	69									1	56	13		
Pneumonia	33	5	49	5	1	4	1	2.	1			5	4	7	3
Erysipelas Ophth-	33	16								***	1	6	2	22	2
Neonatorum	15	14		15											
Dysentery Whooping	33	16		1	11	11	4		3	2		***	1	***	***
Cough	88	9	1	13	17	15	16	3	20		3	1			
	788	23	1	28	103	135	103	88	320	7	1	3		***	
C.S.F	4	4	2		1				. 3			***			
Poliomyelitis	3	3								1	1	1			

The following table indicates the Wards from which the various cases were notified:—

Disease	Bury Street Ward	Church Street Ward	Angel Road Ward	Silver Street Ward	N. Middx. C. Hosp.	Other Instns.	Total
Scarlet Fever	87	82	81	46	2	1	299
Diphtheria	4	1	2	13	3	1	24
Puerperal Pyrexia		1		1	66	2	70
Pneumonia	17	6	3	6	1		33
Erysipelas	7	- 2	7	17			33
Ophth-Neonatorum	1		1	1	. 12		15
Dysentery	5	4	6	18			33
Whooping Cough		30	22	16	2	2	88
Measles	137	216	177	254	. 4		788
C.S.F	2				2		4
Poliomyelitis	1	1	1				3

IMMUNISATION.

Diphtheria.

During the year, 2,808 appointments were made—2,088 children completed treatment under the Council's arrangements; of these 1,346 were under 5 years of age. 28 children were Schick tested. In 1945, 1,242 children completed immunisation treatment. In addition 642 children received a re-inforcing injection. Up to 31st December, 1946, 48.70% of children under 5 years of age and 60.86% of children from 5—15 years of age had completed immunisation treatment.

Whooping Cough.

Edmonton children are immunised against Whooping Cough. The material used is "Glaxo Vaccine A.P.," and during the year, 870 appointments were made for this treatment—727 children completed treatment.

CANCER.

The incidence of Cancer relative to the various organs of the body is given as under :—

					Males.	Females.
Breast					 _	21
Uterus					 _	9
Buccal o	cavity	and oes	sophagi	ıs	 7	
Stomach					 19	10
All other	r sites				 59	39
					_	
					85	79

PREVENTION OF BLINDNESS.

Cases of ophthalmia neonatorum are promptly visited and, if thought necessary, are removed to hospital for treatment. No cases of blindness have arisen during the year due to this cause.

As provided by Section 176 (1) of the Public Health Act, 1936, arrangements exist with the Middlesex County Council for the treatment at the school clinics of adolescents who are ascertained at school to be suffering from defective vision.

ORTHOPAEDIC TREATMENT.

Details of this scheme were set out in my Report for 1939.

ESTABLISHMENTS FOR MASSAGE OR SPECIAL TREATMENT.

In 1941 the Council resolved that Part 7 of the Middlesex County Council Act, 1934, be put into operation in the Borough.

TUBERCULOSIS.

The table below gives details of the ages and sex of new cases of Tuberculosis, also deaths from the disease; this latter figure includes the deaths of non-notified cases.

		Nev	v Cases			D	eaths	
Age Periods	Respin	ratory	Non-res	piratory	Respiratory		Non-respiratory	
	M.	F.	M.	F.	М.	F.	М.	F.
Under 1 year								
1— 5 years	2	1	1	1		1		
5—15 ,,	4	2	8	1	***	1	-2	
15—25 ,,	24	35	3	6	5	4	1	
25—35 ,,	18	22	1	5	4	9	***	
35—45 ,,	15	5		1	8	1		1
45—55 ,,	6	1		1	2			
55-65 ,,	8	1	***	2	3	2		
65 years upwards	3		222900	***	1	1	111	***
	80	67	. 13	17	23	19	3	1

In addition 11 cases of pulmonary tuberculosis and 1 case of non-pulmonary tuberculosis previously notified in other areas, moved into Edmonton.

The total number of names added to the Register for the first time during the year, excluding of course, non-notified deaths was :—

Now once (maniput and		Males.	Females.
New cases (respiratory)	***	80	0/
(non-respiratory)		13	17
Transferred cases (respiratory)		4	7
(non-respiratory)			1
		97	92

The cases dying of Tuberculosis and not previously notified were :-

			Males.	Females.
Respiratory	 	 	-	_
Non-respiratory	 	 	1	_

There was thus 1 non-notified death out of a total of 47 persons registered as dying of tuberculosis (Registrar's figures). Regarding the non-notification of the above case, there was no suggestion of wilful neglect or of refusal to notify.

The non-respiratory forms of tuberculosis notified were :—

					Males.	Females.
				 	_	2
Genito-u	rinary	tract		 	-	1
Other bo	nes ai	nd joints		 	3	3
Kidney				 	1	
Glands				 	7	8
C .				 	-	1
Abdomer	1			 	1	1
Liver				 	_	1
Mitiary				 	1	_

The Public Health (Prevention of Tuberculosis) Regulations, 1925, relate to tuberculous employees in the milk trade; whilst section 172 of the Public Health Act, 1936, gives power to the Local Authority to remove to hospital certain cases of tuberculosis which are dangerous to other people.

No occasion during the year had occurred in which it has been necessary to invoke those powers.

Public Health (Tuberculosis) Regulations, 1930.

The number of cases of tuberculosis on the Register at the end of 1946. was:—

Pulmonary forms Non-pulmonary forms			Males. 344 73	Females. 288 87	Total. 632 160
			417	375	792
The corresponding figures	at the	end	of 1945 Males.	were :— Females,	Total.
Pulmonary forms Non-pulmonary forms			318 71	255 77	573 148
			389	332	721

Corresponding figures for previous years were :-

			Males.	Females.	Totals.
1944	 	 	370	319	689
1943	 	 	411	355	766
1942	 	 	348	304	652
1941	 	 	355	293	648
1940	 	 	349	313	662
1939	 	 	357	301	658
1938	 	 	363	297	660
1937	 	 	336	260	596
1936	 	 	315	252	567
1935	 	 	330	265	595
1934	 	 	339	281	620

COUNCIL'S EMPLOYEES.

During 1946 the Medical Officer of Health paid a total of 260 visits to those employees who had been on the sick list for longer than a fortnight and, when necessary, at fortnightly intervals. Of these 62 were "not at home" and 3 had already resumed duty.

Also, during the year, 181 persons were examined prior to appointment to

permanent posts.

MUNICIPAL FOOT CLINIC

The establishment of this Clinic, which was postponed owing to the outbreak of War in 1939, was opened to the Public on 5th November, 1946.

The Clinic is situated in the basement of the Weir Hall Infant Welfare

Centre, and comprises a waiting room and treatment room.

Charges :-

1/- per foot per visit for ordinary patients.
3d. , Old Age Pensioners.

Sessions :-

MEN: Tuesdays 2—5 p.m. and 7—9 p.m. Women: Wednesdays 2—5 p.m. and 7—9 p.m.

Two qualified chiropodists (one male and one female) were appointed on a sessional basis.

It was decided to commence with 2 sessions per week for men and 2 for women, but in the event of this proving insufficient, the number of sessions be revised.

In the short time the Clinic was in operation during 1946, it soon became apparent that the number of sessions would have to be increased, owing to the waiting list which had begun to form, also that there was need for the appointment of a clerk to carry out the clerical duties associated with the Clinic.

Summary of Attendances and Treatment, 1946

From 5th November to 31st December, 1946, 98 patients made 145 attendances, an average of 1.48 attendances per patient.

		New Cases	Subsequent Attend-	Total Attend-	Old Age Pensioners Attendances		
2000			ances	ances	Primary	Secondary	
Men		 45	27	72	31	6	
Women		 53	20	73	27	3	
	Total	 98	47	145	58	9	

Defects Treated :-

Bursitis		 4	Nails, Groove	12
Callosities		 93	,, Club	14
Corns, Hard		 111	,. Ingrowing	3
" Soft…		 17	Pes Cavus	3
" Minute		 1	,, Planus	1
,, Septic		 3	Verruca Pedis	2
" Under N	ail	 - 5	Bunions	2
Hallux Valgus		 10	Fungus Infection	1
Metetarsalgia		 15	Chilblains	1
			Fissured Heels	1

Maternity and Child Melfare Committee 1946

COMMITTEE

Chairman: Alderman W. PREYE, J.P.

Members:

Alderman J. Reid (Mayor) Ex-Officio.

Alderman Mrs. E. A. Young (Deputy Mayor) Ex-Officio.

Councillor L. E. Berridge.

- ,, Mrs. A. M. GLOVER.
- ., Mrs. L. M. GEORGE.
- " Mrs. S. J. HALLIDAY.
- ,, Mrs. E. M. HEARN.
- ,. Miss. E. J. MATTOCKS.
- , A. WRIGHT

FOREWARD.

Nineteen Forty-Six was a very busy year, with all the Services working to full capacity and I think we can look back with satisfaction on our achievements.

The birth rate showed a very steady increase and provided a hectic period for the staff of the Midwifery Services. In spite of difficulties with regard to securing staff, the mothers of the district were given every consideration and I am happy to relate that no untoward incident occurred to mar our good record. This reflects very great credit upon the medical staff at the Ante-Natal Clinic, the Non-Medical Supervisor of Midwives and her staff. It became necessary to accept the policy of employing part-time nurses to relieve the situation and three have been employed during the year.

The Ante-Natal Clinics were very overcrowded and an average attendance of 48.82 was far too high. It is hoped to open another session in the near

future.

It is encouraging to note that 181 mothers actually had gas and air analgesia, administered as against 86 the previous year, and this proved that the women are gradually becoming aware of the advantages of the service. A legacy of £45 was received from the estate of the late Mr. V. Heraud, and this was used to purchase two gas and air apparatus for use on the district, and was very much appreciated.

The Home Help Scheme still remains a problem owing to the fact that the recruitment of a sufficient number of suitable women is a difficulty, although

the situation shows some signs of improvement.

The attendances at the Post Natal Clinic have been very high; here again there is need for another session.

The attendances at the Infant Welfare Clinics show a steady increase

being 28,808 in 1945, and 40,944 in 1946.

The work of the Health Visitors was rendered very difficult on account of the number of mothers absent from home on employment or for other reasons. Added to this the depletion of staff made the health visiting in this district a problem. Notwithstanding the difficulties, the standard of work and the results achieved were very creditable and reflected favourably on the efforts made by the combined work of the medical staff and health visitors.

The Orthopædic Clinic had to close for a short period until a Physiotherapist could be appointed. The post was filled in March, 1946, and the Clinic is making a very valuable contribution towards the welfare of the children

in the district.

The Council took over the full control of the four Day Nurseries on the 1st April, 1946, having operated them on behalf of the Government prior to that date. They have continued to be well patronised and in fact they have been more in demand than during the war—this is indicated by the increase in the attendances; in 1945 they were 49,002, and in 1946, 56,882. Many mothers with young children were evacuated during the war and were therefore not available for work locally, but now the women have returned they want their children admitted to Day Nurseries in order that they may work. In consequence there is not sufficient accommodation available.

By the end of the year, the National Health Service Act, 1946, began to take shape, and a general feeling of restlessness and apprehension was created as to the manner in which the new legislation would affect the existing

Maternity and Child Welfare Services.

I wish once again to place on record my appreciation of the work carried out by every member of the Staff of the Maternity and Child Welfare Department and to state how much I value their co-operation.

In conclusion I should also like to express my thanks to the Chairman and all the Members of the Maternity and Child Welfare Committee for their assistance.

D. REGAN, Medical Officer of Health.

The following information gives details of the Maternity and Child Welfare Clinics at the end of 1946 :—

(1) Ante-Natal Clinic at Brookfield House, Fore Street (adjoining the Town Hall). Six sessions weekly.

(2) Child Welfare Centres :-

(a) Brookfield House. Three sessions weekly.

(b) Methodist Church Hall, Bush Hill Park. Two sessions weekly.

(c) St. Edmund's Church Hall. Two sessions weekly.

(d) Weir Hall. Two sessions weekly.(e) St. John's. One session weekly.

(3) Post-Natal and Advisory Clinic at Brookfield House. One session weekly.

(4) Dental Clinic at Croyland Road School Clinic and transferred to Pymmes Park Clinic, August, 1947. Two sessions weekly.

(5) Orthopaedic Clinic at Methodist Central Hall, Fore Street. Two sessions weekly.

(6) Obstetric Surgeon attends once a fortnight at Brookfield House.

The following information will give some indication as to the work carried out by the Department during the year 1946 :—

Births.

Live Births

Still-births

The	e total number Live births r	of bin	rths	notified du	ring 19	946 was	s as fol	lows :	2,699
	Still-births	"	"		d pare	nts			84 141 2
									2,926
County	Hospital, both tter the notifi Live births n	ed bir	ths of by	nton and n of Edmonton midwives doctors and	on-Edon resi	montor idents a nts	reside	ents; ex	cluding
	Number of institution	ons till-bo			 babies				1,536 431 4 435
born and	following ta	other	clud dist	es births oricts:—	of Edi	monton Male.	reside F	ents and	those Total.

1004

1031

27

913

931

18

1,917

1,962

45

Premature Babies.

Arrangements have been made for additional care and supervision to be given and special records are kept. Premature children in need of hospital care are admitted to the North Middlesex County Hospital, as in the past.

No. of babies notified during 1946 who weighed 51 lbs. or less:

(a)	Born	at	home	 	44
(b)	Born	in	hospital	 	53

97

VISITS PAID BY THE HEALTH VISITORS.

The following table gives details as to the visits paid by the Health Visitors:—

To children under	1 yea	r of ag	e:					
First visits							1,941	
Total visits								9,040
To children between								11,176
Infant Protection	visits	to chil	dren 5-	9 years				95
Visits re adoption		***						182
Futile visits					mub.	3 605		III melalica
Total visits pa						1,098		20,493

CLINICS

Ante-Natal Clinic.

This clinic was held six times weekly (one session being for new patients only) and the following are the figures for the year:—

Number of general ses	sions in th	e year	 	 256
Number of prospective			 	
Number of consultation	ns		 	
Total number of atten	dances		 	12 499
Average number of attenda	ances :-			
(a) Per session .			 	 48.82
(b) For consultation .			 	 44.23
Clinic for New Patients :-	The state of the			
(a) No. of sessions .			 	 51
(b) New cases				1,981
(c) Total number of a	ttendance	s	 	 2 163

* Included in this total are 628 referred from the North Middlesex County Hospital under the scheme of co-operation with that hospital.

The Ante-Natal Clinics are under the supervision of the Non-Medical Supervisor of Midwives, with the help of the Midwifery Staff.

Post-Natal Clinic.

Number of sessions			 	 48
Actual number of mothers who	atten	ded	 	 493
Number of consultations			 	 1,506
New cases			 	 416
Total attendances at clinic			 	 1,576
Average attendance per session			 	 32.83

Advisory Clinic.

4.4			~****		
New Cases				 	 16
Total attendances				 	 23
Number of mothers see	n by D	octor			23

Specialist's Clinic.

The Consulting Specialist made 26 visits during the year and saw 184 cases, making an average of 7.07 per session.

Child Welfare Clinics.

The figures relating to	attendance	es are :			
		Methodist Hall.	St. Edmunds.	Weir Hall.	St. Johns.
Number of sessions	150	101	102	102	51
New cases—(a) Under 1 year	542	228	344	317	174
(b) 1—5 years Attendances—		43	45	62	36
(a) Under 1 year (b) 1—5 years	8,727 3,292	4,313 2,468	6,249 2,347	5,823 3,780	2,909 1,036
	12,019	6,781	8,596	9,603	3,945
Average attendances Doctor's consultations Orthopaedic Clinic.	80.12 3,675	67.13 1,827	84.27 2,604	94.14 2,433	77.35 1,171

The Clinic is held twice weekly and the following are the figures for the

year:-

Number of sessions		gev a	 	70
New cases referred during th				147
Attendances.	c year	nuaui'	 	177
				The same of the same of
Surgeon's days			 	325
Treatments given			 	606
No. of children attending for trea	atment		 	406
No. of wedges fitted			 	75
			 	23
In-patient Treatment.				

Two children were admitted to Stanmore during 1946.

Dental Clinic.

De	tails of the w	ork carr	ied out	are :-	-		Mothers.	Children.
	Number of	sessions					100	96
	Number of	attenda	nces				1,097	489
	Number of	new cas	es				338	245
	Total numb							458
				ntures			391	
					(Avera	ge of 4	visits each	denture).
	Fillings		***			-	0.5	
	Dressings						41	812
	Scalings						47	_
	Extractions	(Numb	er of te	eth)-				
	(a) Un	der Gas					1,579	223
		cal Anae						
	Number of	gas case	S				426	133
-	4							

Dentures.

Number supplied—91 of whom 83 paid the full cost, 2 were half cost, and 6 were free of charge.

Sunlight Clinic.

927 children were referred during the year for sunlight treatment and 3,968 treatments were given.

Ophthalmie Clinic.

102 children under 5 years of age attended this clinic during the year.
62 attendances were made for Refraction, 38 for re-examination and
115 for Examination. Number of spectacles supplied were 60 and repairs
numbered 12. 15 mothers paid extra to have superior frames.

Speech Clinic.

Arrangements are made with the Education Committee for children under five years of age to attend the Speech Clinic and 9 children were referred during the year. No charge is made to the parents.

Details of Distribution of Dried Milk, Cod Liver Oil, etc.

Distributed by the Maternity and Child Welfare Department apart from

any scheme of the Ministry of Food.

Trufood			 	 	15 tins.
Ostermilk			 	 	129
Cow and G	ate		 	 	318 packets.
Cod Liver	Oil and	d Malt	 	 	67 cartons.
Haly-calcy	ne		 	 	53 packets.
Glucose			 	 	22 ,,
Fersolate			 	 	13 ,,
Bemax			 	 ***	17 ,,

Convalescent Cases.

Three children were sent away under the contract with the Invalid Children's Aid Association.

Tonsils and Adenoids.

Seventy-eight children were admitted to hospital for the removal of tonsils and adenoids

INFECTIOUS DISEASES.

Ophthalmia Neonatorum.

Fifteen cases were notified during the year and of these 12 occurred in the North Middlesex County Hospital, 5 of which were Edmonton cases. Of 3 cases which occurred in the district, two were removed to hospital.

Puerperal Pyrexia.

Seventy cases were notified during the year and of this number 68 occurred in the North Middlesex County Hospital of which 17 were Edmonton cases. Two cases occurred in the district and 1 was removed to the Isolation Hospital,

MIDWIFERY SERVICE.

Analysis of work.

Actual confinements attended by mid- wives	994	(Of this number 926 as midwives and 68 as Maternity Nurses).
Attended by midwives, but women admitted to hospital before or during confinement Left district before confinement or mothers evacuated through L.C.C. scheme, etc	141 76	(Attention and supervision given by Municipal

In addition to the actual 994 confinements attended, a total of 21,832

visits were paid by midwives as under:—

Ante-Natal visits to homes			1,475
			16,894
Additional evening visits .			154
Visits after fourteenth day			77
False alarms			585
Special Visits			1,088
Second Nurse for Gas and	Air Analgesia	1	61
Miscellaneous			1,498

Medical Aid.

The number of claims made by doctors for Medical Aid during the year 1946 was 137, of this number 9 cases were granted free of charge, 11 at half cost and the remainder paid the full fee.

Gas and Air Analgesia.

One hundred and eighty-one women had gas and air analgesia during the year.

Blood Transfusion Service.

Under an arrangement with the North Middlesex County Hospital, Medical Practitioners can now call upon the Blood Transfusion Service, and five cases were attended during the year.

Evacuation of Expectant Mothers under the Government Scheme at the eighth month of pregnancy.

The department is responsible for the arrangements in connection with the evacuation of expectant mothers under the Government Scheme and in 1946, 169 mothers applied to be sent away. By December 31st, 90 women had been sent to reception areas for their confinement.

Home Helps.

One hundred and twenty-six women had the services of a Home Help during 1946, 124 paid full cost, I paid half cost, and I had the services free of charge.

Ante-Natal Scheme of Co-operation between the Council and the North Middlesex County Hospital.

Under an arrangement with the Middlesex County Council 255 homes were visited during the year where women applied to the North Middlesex County Hospital for admission and the Authorities desired to have a report on the home circumstances. A further 27 were visited for the Mothers' Hospital, Clapton.

Sterilised Maternity Outfits.

Eight hundred and two sterilised maternity outfits were issued during the year, 793 were paid for, and 9 were granted free of charge.

X-Rays.

Nine mothers were referred to the hospital for X-Ray Examination during the year, all of whom paid the full cost.

PRIORITY DOCKETS FOR SHEETS.

Priority dockets for sheets are issued to mothers having their confinement at home, and during the year 2,603 were issued.

ILLEGITIMATE CHILDREN.

Every effort is made to assist the women, and a contract has been made with the Middlesex County Council for the admission of women and babies to suitable Hostels. Three were admitted during 1946.

INFANT LIFE PROTECTION.

Each Health Visitor employed by the Council is an Officer for Infant Life Protection and great care is taken by them in supervising this part of the work. The number of persons on the register at the end of 1946 was 10 and the number of children 12. The Deputy Medical Officer of Health also makes periodic visits of inspection to the homes.

Adoption of Children (Regulation) Act, 1939.

The Health Visitors are now responsible for the carrying out of this work, viz. :—

Number of persons who gave notice under Section 7 (3) during	
the year	36
Number of children in respect of whom notice was given	37
Number of children under supervision at the end of the year	15

Day Nurseries.

Attendances for the whole year were :-

Fore Street	 	17,017
Hertford Road	 	13,174
Florence Road	 	12,906
Silver Street	 	13,785

Medical Inspections in Nursery Schools and Classes.

From February, 1945, the clerical arrangements for medical inspection and following up work have been carried out by the Maternity Department. As these children are all under five years of age it was important that a new scheme be introduced to enable a link up between the medical records at the Infant Welfare Centres and those at the Nursery Schools and Classes.

Thirty-three medical inspections were arranged during the year, and in addition the Health Visitor/School Nurses carried out routine visits of inspection to the children.

Fees Collected.

£2,979 6s. 2d. was taken for the sale of food in Clinics and £2,838 15s. 0d. collected for fees for the various services connected with the Department.

COUNTY COUNCIL OF MIDDLESEX BOROUGH OF EDMONTON

Education Committee

1946

Chairman		-	-	-	-		- Alderman A. J. G. HOLLYWOOD
Vice-Chairma	in	-	-111	-	-	-	- Councillor Mrs. F. Long, J.P.

Aldermen: H. GATWARD, W. T. GREEN, W. PREYE, J.P., J. REID, J.P., R. W. RICKETTS and Mrs. E. A. Young

Councillors: C. W. Ballans, J. A. G. Beattie, S. W. Creasey, R. J. Grant, Mrs. S. Halliday, Mrs. E. M. Hearn, W. C. Humphries, C. G. Lacey, A. H. Rouillier and M. Simpson.

County Councillors: T. H. JOYCE and Mrs. L. R. ITHELL, J.P.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE:

LADIES AND GENTLEMEN,

I beg to submit my Annual Report on the School Health Service for the year 1946. The report is compiled in respect of the health and well-being of the school children of Edmonton in accordance with the wishes of the Ministry of Education conveyed to me through the medium of the Middlesex County Council.

The Education Act, 1944, has now become operative and brought with it great changes to provide full medical attention for all children of school age. The changes are detailed in the Handicapped Pupils and School Health Service Regulations, 1945, and require Education Authorities to provide, free of cost to the parents, not only medical treatment, but also education suitable to the needs of every handicapped child.

The treatment of tonsils, adenoids and other allied otological conditions has again presented some difficulty throughout this year, notwithstanding that every effort has been made to gain admittance to the local hospitals. The fact that a satisfactory arrangement with the voluntary hospitals has not yet been achieved by the County Council is causing some little difficulty. Those children who have been treated have made progress and their condition has been satisfactory but it is not right to keep children waiting who need this operation.

Child Guidance is now beginning to have its effect. We have, however, been handicapped by the difficulty in getting suitable staff and the limitations of our accommodation as well as the lapse of time involved in acquiring equipment. Nothwithstanding this, some outstanding cases have been dealt with to their immediate advantage. Both parents and teachers are now becoming more interested and automatically look to the Child Guidance Clinic for help and assistance.

The medical services continue to give all-round good results and the large numbers attending give some indication of the appreciation of parents for the services rendered. The Asthma Clinic is now reaching a stage of development that will probably mean singling it out as a separate clinic in itself. The help and assistance of the Inoculation Department of St. Mary's Hospital, Paddington, in diagnosing and "typing," is very much appreciated. Whilst we cannot get 100% results, it can be said that the condition of children is very much improved and in some cases entirely relieved of the distressing features of the disease.

The basis of success in the School Health Service is the unfailing team work carried out by all branches of the Dapartment, having as its ultimate goal the improvement of the health of the children. So long as the staff as a whole co-operate in this manner, there can be no doubt as to its ultimate success.

I would like to express my thanks to the members of the Education Committee for the help and ready assistance which they have given at all times to the School Health Service. I would like also to tender my most grateful thanks to the members of my staff and to those officers of the County Council with whom I am in contact for their unfailing courtesy and co-operation throughout the year.

I have the honour to remain, Ladies and Gentlemen,

Your obedient Servant,

D. REGAN, School Medical Officer. Dr. K. Hart, Assistant School Medical Officer and Assistant Medical Officer of Health, resigned on the 15th March, 1946, and took up the position as Deputy Medical Officer for Wood Green. Dr. J. E. Marshall was appointed in her place and commenced duties on the 1st October, 1946, after previous service with the Tottenham Borough Council.

Dr. M. Owen-Flood was appointed as Temporary Assistant School Medical Officer and Assistant Medical Officer of Health on a part-time basis and

commenced duties on the 19th March, 1946.

With the return to normal conditions the Orthopædic Scheme was extended and Mr. J. A. Cholmeley was appointed Medical Superintendent and Resident Surgeon of the Royal National Orthopædic Hospital, Stanmore, and Mr. J. I. P. James took over his duties at the Edmonton Clinic, his first attendance being on the 25th September, 1946.

Mr. V. A. F. Greenish resigned his position as Orthodontic Specialist on the 27th May, 1946. Mr. S. Grainger McCallin was appointed in his

place; his first session was held on the 17th June, 1946.

Mr. F. H. S. Weiss resumed duty on the 1st January, 1946, after service with H.M. Forces.

After some considerable time without a physiotherapist at the Orthopædic Clinic, Miss R. MacQuillam was appointed and commenced duties on the 25th March, 1946.

Miss P. A. Newcombe, Psychiatric Social Worker, commenced duties at the Child Guidance Clinic on the 23rd September, 1946.

Miss Cole, School Nurse/Health Visitor, left the service on the 17th August, 1946.

Mrs. B. Last, School Nurse/Health Visitor (Part-time), commenced on the 27th December, 1946.

Miss E. Brook commenced duties as Temporary Dental Attendant on the 1st April, 1946.

Miss J. Lowe, Temporary Dental Attendant, commenced on the 18th March 1946, but left on the 9th November, 1946. Miss J. Clift was appointed in a temporary capacity in her place and commenced on the 1st November, 1946.

Mr. B. R. Allen, Senior Clerk, resumed duties on the 1st March, 1946, after service in H.M. Forces.

Mr. S. E. Woodroffe, Clerk resumed duties on the 25th March, 1946, after service in H.M. Forces.

2. CO-ORDINATION.

It will be appreciated that without complete co-ordination, the difficulties experienced in the service would be multifarious, but it is pleasing to note that every assistance is given by Head Teachers, Assistant Teachers, private practitioners, local and Metropolitan Hospitals, Social Services and various departments of the County Council, thus enabling the co-ordination to run smoothly as in previous years.

SCHOOL HYGIENE.

Under this heading I would have wished to give a resume of the alterations and improvements carried out during the year at the various schools and educational buildings but owing to pressure of work the Borough Education Officer has not been able to supply this information.

4. MEDICAL INSPECTION.

The basis of the School Health Service is the Routine Medical Inspection which is held at the schools and, under the existing arrangements, takes place on the following occasions during the child's school life, in accordance with the "Handicapped Pupils and School Health Service Regulations, 1945," namely:—

- (a) Every pupil who is admitted for the first time to a maintained school shall be inspected as soon as possible after the date of his admission.
- (b) Every pupil attending a maintained Primary School shall be inspected during the last year of his attendance at such a school.
- (c) Every pupil attending a maintained Secondary School shall be inspected during the last year of his attendance at such a school.
- (d) Every pupil attending a maintained school or County College shall be inspected on such other occasions as the Minister may from time to time direct or the Authority with the approval of the Minister may determine.

During the year 1946, 4,226 children attending Primary and Secondary Schools were given a full routine medical inspection and the analysis of the age groups was as follows:—

Entrants	******	******		2,491
Second Age Group	*****	*****	*****	1,076
Third Age Group	*****	******		659

Special inspections and re-inspections totalled 1,432 during the year. These included cases brought to the attention of the doctors by the head teachers during the routine medical inspection sessions.

5. FINDINGS OF MEDICAL INSPECTIONS.

The ultimate aim of this service is (and will be) the annual inspection of all children, not only to ascertain defects as they occur, but to note improvements in the conditions found at previous examinations. Parents are always invited to attend in order that instructions and advice may be given by the doctor.

The object of these inspections is two-fold. As a preventive measure firstly, to correct or mend wherever possible with a view to prevention of breakdowns. Secondly, to obtain first-hand information on the general physique and health of the school population and to take action against factors and environment which are prejudicial to health.

The ideal result to be obtained from the School Health Service is, therefore, to render and keep the child healthy (both physically and mentally) so that the maximum benefit may be derived from scholastic instruction.

Further advantages resultant from these inspections are the detection of defects in the initial stages and, by directing attention to them, the essential education of the parents in child hygiene in all its phases.

Special inspections in schools, clinics, etc., are carried out in respect of cases referred by teachers, nurses, parents and these all lead to the appropriate treatment.

Following these inspections, lists are extracted and arrangements made for cases to be seen by the specialists. Where parents fail to take advantage of the facilities afforded, the school nurses visit the homes to advise the mothers. If the parents then refuse consent the case is referred to the Borough Education Officer for appropriate action if necessary.

(a) Malnutrition.

In future Category D is to be eliminated from the classification of nutrition and it is therefore most pleasing to note that in the analysis of the children examined during the year which is set out below there has been a marked decrease in the percentage of "C" and "D."

Number 1	Inspected			A	В	C	D
4,226		******	******	690	3,223	311	2

(b) Cleanliness.

The condition of school children still continues to give cause for anxiety but the matter has been prosecuted with greater vigour in accordance with Section 54 of the Education Act, 1944.

(c) Minor Ailments and Diseases of the Skin.

The total attendances at the two Minor Ailments Clinics during the year were 24,220, as follows:—

Pymmes Park Clinic			*****	12,934
Croyland Road Clinic	2	*****	*****	11,286

(d) Visual Defects and External Eye Diseases.

During the year, 1,287 refractions were carried out at the Ophthalmic Clinic. The number for whom spectacles were prescribed was 1,218 and 1,210 pairs were obtained.

(e) Ear, Nose and Throat Defects.

Mr. William Ibbotson, F.R.C.S., attended the Aural Clinic at Croyland Road twice each month. The yearly attendances were :—

New Cases: 190. Old Cases: 308. Total: 498.

Mr. Ibbotson has submitted the following report:-

"Report on the work of Edmonton Aural Clinic during 1946.

Diseased Tonsils with ? Nasopharyngeal Adenoid Excess.

Operated on 30 Awaiting 33

Diseased Tonsils with ? Adenoid Excess and Diseased Teeth.

Operated on 16 Awaiting 30

Diseased Tonsils with ? Adenoid Excess and Pathological Nasal Septal Deflection.

Operated on 12 Awaiting 9

Diseased Tonsils with ? Adenoid Excess, Pathological Nasal Septal Deflection and Diseased Teeth.

Operated on 5 Awaiting 15

Diseased Tonsils with? Adenoid Excess with Diseased Teeth and Nasal Sinusitis.

Operated on 1 Awaiting 11 Diseased Tonsils with ? Adenoid Excess and Acute Tympanic Suppuration.

Operated on 2 (1 of which also had Diseased Teeth and Path. Nasal Septal Deflection).

Awaiting 1 (also with Diseased Teeth and Path. Nasal Sepal Deflection).

Diseased Tonsils with ? Adenoid Excess and Acute Tympanico-Mastoid Suppuration.

1 Case treated without operation.

Chronic Tympanico-Mastoid Suppuration.

Total 48 (of these 7 have been operated on, and all cured or much improved).

- (a) With Diseased Tonsils and ? Adenoid Excess. Total 31. Operated on Tonsils and Adenoid Excess only, Total 21; all much improved, except 1.
- (b) Several of these Aural Cases also suffered with Diseased Teeth, or Pathological Nasal Septal Deflections, or both. One Case had Nasal Sinusitis as well.

Nasal Sinusitis.

Total 4 (one of which showed Polypoid Disease).

Catarrhal Rhinitis.

Total 7

Eustachian Deafness.

Total 12 (nearly all associated with Diseased Tonsils and ? Adenoid Excess and some with Pathological Nasal Septal Deflections as well, and some with Diseased

Teeth).

REMARKS.

"In cases of recurrent Adenoid excess in the nasopharynx, despite previous Adenoidectomy, experience has shown that its reappearance is due to natural defensive reaction against a further bacterial invasion, so that when this new infection has subsided, so does the Adenoid excess. This has been proved at operations designed for its further removal, when no excess has been found. Therefore it seemed much more reasonable and fairer to the patient to find some means of counteracting the infective process without having recourse to a further operation. This result can be achieved by giving nasal guttae, of which I find the most efficacious for children to be Argyrol 5% t.d.s., at the same time making every effort to raise the general resistance. Sulfex drops (Ephedrine and Sulphathiazol), are useful in conditions of Acute Mucopurulent Rhinitis, but they are not devoid of toxic effects if used too freely, whereas Argyrol appears to be quite non-toxic.

"A very large number of cases presenting Nasal Catarrh, often with swelling of the Inferior Turbinals, are cured by performing Tonsillectomy and Adenoidectomy, but, amongst these chidren, I have found a few instances of persistence of this Turbinal swelling, despite the operation, even when followed by the use of Nasal guttae; but I have not considered it right to remove any portion of these valuable structures, the loss of which is more disadvantageous

than their retention . . . even if causing some obstruction.

"The vast majority of Cases of Epistaxis displayed a condition of Telangectasis in one or both "Bleeding Areas" of the Nasal septum, this being the result of Acute and Chronic Tonsillitis and Nasopharyngeal Adenoid excess. The condition is frequently cured by removal of such ætiòlogical factors . . . but, as a temporary means of arresting the hæmorrhage, I have found that a small application of solid Silver Nitrate, fused on to the end of a probe, gave the best results, and could be applied without the use of a local anæsthetic, causing very little inconvenience, or expenditure of time. A few cases have shown a Pathological nasal septal deflection to be the chief ætiological factor, in that this causes a venous engorgement on the obstructed side.

"It was most instructive to note the mental improvement in children after Tonsillectomy, Adenoidectomy (sometimes with Nasal Septal Straightening), the pre-operative Aprosexia and lack of attention with deafness, showing marked diminution

"The operation of Straightening the Nasal septum by simple fracture, using special forceps, has proved its worth, in that it has completed the cure of nasal obstruction, already partly effected by Tonsillectomy and Adenoidectomy, and performed concomitantly with that operation . . . adding but a few extra moments and no increased severity to the operation. Of course, Submucous resection must not be attempted, unles it be of a very modified nature, as such operations on growing tissues are most unwise. In most cases simple fracture proves sufficient.

"It is instructive to note that there is repeated evidence of the deleterious effects on the nasal passages, the pharynx and the ears of swimming and bathing, especially in pubic baths, unless these three regions are already in a healthy state.

"A large number of children, suffering with Chronic Tympanico-Mastoid suppuration, are cured by Tonsillectomy and Adenoidectomy, especially in those cases in which the discharge is co-purulent in character, with no, or very inactive granulations—thereby showing the absence of gross osteo-myelitis—but rather mucosal catarrh.

"Many of the cases of Chronic Tympanico-Mastoid suppuration, persisting in spite of non-operative treatment, show very great improvement after Conservative Tympanico-Mastoid Drainage, with better hearing in the majority of the patients, this often being further enhanced by eustachian catheterisation, with injection of a special oily solution into the tubes.

"Post-operative treatment in our Speech Clinic is proving of great value, in that it completes the cure initiated by the removal of the causative lesions, that have set up the pernicious habit of mouth-breathing, with all its sequelæ. And it is interesting to note the beneficial effects of clear nasal passages on the hearing and aural suppuration—for nasal obstruction is so commonly associated with nasal catarrh—that involves the eustachian tubes and, therefore, the tympanic cavities.

"In several cases of Acute Tympanic infection I have used systemic injections of Penicillin, but, as was found with Sulphamilamides and their relatives, when improvement did occur it showed itself rapidly; but this effect was rather illusory (certain types of infection seem to be impervious to these drugs), and the resistance acquired was but temporary, so that recourse to the older methods of treatment was necessary. However, the number of patients thus treated was too small to enable me to make any dogmatic statement on this matter.

"Transillumination of the nasal sinuses, together with clinical signs in the nasal passages and pharynx, have shown the presence of Nasal Sinusitis, subse-

quently confirmed by Radiography in not a few cases, and these facts alone point to the great importance of a detailed examination in every fresh patient, not being merely content with the parent's statements. Careful study of the anatomy and physiology of these regions shows their close inter-relationship.

"Amongst the series of cases, there are some who have not kept their subsequent appointments and, so far as I know, have not received the treatment advised."

Children recommended for the removal of their tonsils and/or adenoids were admitted to the Royal Waterloo Hospital, S.E.1. Children were conveyed to the hospital by ambulance and brought home again. Children referred for other throat operations other than tonsillectomy were referred to the Prince of Wales's General Hospital.

The number of children who received operative treatment for tonsils and/or adenoids during 1946, was 124.

Arrangements were also made for children to see the Ear, Nose and Throat Specialist at the North Middlesex County Hospital, when parents preferred this, and the number of operations carried out there during 1946 was 211.

(f) Speech Defects.

Cases of speech defects were dealt with by the Speech Therapist, and the following is an account of the year's work :—

"The Speech Clinic has had a very active year of post-war reconstruction and re-adjustment. The outstanding event has been our removal to Pymmes' Park Clinic. Here, for the first time since the Clinic was inaugurated in 1937, we have our own rooms with suitable equipment, adequate cupboard accommodation, etc. The move was only effected in November and there has not been time for any obvious results but the therapist already feels the benefit of working in surroundings especially designed for the purpose and where, moreover, the Clinic has a right to be held and is not merely loaned accommodation in a school or office building. At present we are enjoying the use of a large and a small room, the larger being used for all group work and the smaller for interviews, individual treatments, etc.

"There has been an increase in the number of new cases seen (90 compared with 52 in 1945); we have also been able to re-establish contact with most of our pre-evacuation patients and all those still in need of treatment have received it during the year. 743 children of school age have been seen in the Speech Clinic since it was opened. With the opening of the 5th weekly session in January and the increased number that it will be possible to see in our new premises we hope to eliminate a waiting list.

"There is a perceptible lowering of the average age of children referred for Speech Therapy, the majority of children are now seen early in their school life but there is still a considerable number who are not brought to our notice till after the age of 10 (23 or approximately 25% last year). In certain exceptional cases the onset of a speech disorder may be delayed as late as the 11th or 12th year, also there are those cases of children coming from other districts, but the therapist feels that much work and valuable educational time could be saved by early admission. Statistics show that the length of time required for treatment is frequently doubled or even trebled in older children. It is interesting also to

note that whereas when the Clinic was first opened between 50 and 60% of all admissions were stammerers, this percentage has now dropped to 25. The 90 new cases seen in 1946 were classified as follows:—

Stammerers	*****		25	
Dylaalics		******	37	
Retarded	*****	******	. 3	
Dyphonics			17	(including respiratory disorders).
Sigmatismus			6	, , , , , , , , , , , , , , , , , , , ,
Psychological			2	(these 2 were both older boys
				whose disorder was one of
				extreme lack of confidence
				exhibited in a speech symptom).

"Our 40 discharges were classified as follows :-

Stammer	******	*****	9
Dyslalia	*****	*****	16
Dysphonia	******	******	14
Sigmatism			1

"The number of defaulters is decreasing but we would ask the schools for their co-operation in this respect. By far the greater number of defaulters is among children suffering from slight vocal and respiratory disorders. The parents feel that treatment for breathing and a husky voice is unnecessary and we do not get anything like the same co-operation as in our stammerers for example. Another difficulty is that our standard of good speech inevitably differs somewhat from that of the parent and it frequently happens that we have a child with whom we have worked for a number of months whose parents decide that they now consider his speech normal and he therefore becomes a defaulter within a week or so of final discharge. It is our rule never to discharge a child until we have received a satisfactory report on his speech in school.

"Our figures for 1946 are as follows:—

1/1/46 114 cases on the books. 90 new cases.

6 previously discharged.

5 previously defaulted.

Total 215

Discharged 40
Deleted 31 (this includes defaulters, left school, left the district, sent to special schools, etc.).

Receiving treatment 100
Waiting list 42

Waiting list 42
Requiring previous treatment 2 (i.e., awaiting operations).

Total 215

[&]quot; All chidren on the waiting list have been called for treatment in January.

[&]quot;The number of school children on the books on 1/1/47 is therefore 144.

he figures for the	e last 5 ye	ears are as f	ollows :-		
	1942	1943	1944	1945	1946
New cases	96	74	92	52	90
Treated	122	125	143	144	153
Discharged	46	61	51	38	40
Waiting	53	49	44	22	42

"WELFARE.—7 cases have been referred during the year, 2 are receiving regular treatment, 3 are to be seen again in January and 2 have refused treatment."

(g) Dental Defects.

Statistics are given at the end of the report.

Orthodontic Clinic.

"This work has been carried out for the Edmonton school children during the year 1946 by the three full-time dental officers, with the assistance of an

Orthodontic Specialist who attends on two mornings a month.

"The Specialist has been responsible for diagnosing the dental abnormalities and prescribing the appropriate treatment. The routine fitting and adjustment of appliances has been the responsibility of the dental officers. Edmonton is fortunate in having the service of three men who undoubtedly take great interest in this work, and your Specialist is well aware of what he owes them.

"The response on the part of the patients is good, and satisfactory results are being obtained in a high proportion of cases. Parents in general are most grateful for the service.

"The mechanical work is carried out by the dental mechanic with great skill, especially in those cases which require intricate appliances and it is true

to say that with a less able man the whole scheme might collapse.

"As a footnote to this report it is interesting to note that the major contributing factor in the production of the abnormalities seen in the clinics is the premature extraction of molar teeth from the first dentition. This is primarily due to ignorance on the part of the parents, in not knowing the importance of the health of these teeth. Also one wonders if the children of the borough can be treated early enough, as these teeth are frequently found in an unhealthy condition from the second birthday onwards. This paragraph has only been added to this report as it was thought that the Committee might sometimes wonder why so many children require specialised treatment.

STATISTICS.

	Hazelbury	Pymmes Park	Croyland Road	Total
Number seen by Specialist	377	151	349	877
Number of New Cases		26	63	239
Number of Impressions	569	192	272	1033
Number of Appliances Fitted	243	62	172	477
Number of Inspections and				
Adjustments	1510	343	462	2315
Number of X-rays taken		58	73	468
Number of Extractions-				
Permanent Teeth (in-				
cluded in Ministry				
figures)	316	15	171	502
Number of Attendances (not				
included in Ministry				
figures)	2971	538	1427	4936."

(h) Orthopædic and Postural Defects.

Orthopædic Defects were, as in previous years, treated at the Special Clinic held at the Central Hall, Fore Street, N.9.

Mr. J. A. Cholmeley, the Orthopædic Specialist, has submitted the following report:—

"The Orthopædic Clinic has passed through difficult times during the past two years, owing to changes of physiotherapists and periods when there was no one available to do this important work, but this is now satisfactorily settled.

"During the war the number of surgeon's sessions had to be reduced to one a month owing to the shortage of available orthopædic surgeons, but with the appointment of additional surgical staff at the Royal National Orthopædic Hospital, it has been possible to increase the number of sessions to three a month which are attended by Mr. James, M.S., F.R.C.S. (and I myself therefore have not attended the Edmonton Clinic since September of last year).

"Analysis of 167 new cases examined in 1946, shows that 51 were diagnosed as suffering from Flat Feet, and 37 under a miscellaneous heading; as the classification is quite a full one I wonder if these other conditions are the very slight abnormalities about which I have been speaking in my letter. The number of cases of Flat Feet is high, but the one thing that a classification such as this omits is whether the condition was causing any symptoms and whether it is considered necessary for the patient to have any treatment. From what I have seen, however, a large number of the cases of Flat Feet referred to the clinics do not require treatment, as there are no symptoms, and they wear their shoes satisfactorily and apart from that no simple treatment is going to alter the shape of the feet.

"The Stanmore Cripples' Training College was re-opened in September, 1946, and two Edmonton boys are now being trained there. One in boot-making, including surgical boots and repairs, and the other in watch and clock-making and repair."

The attendances for treatment by the physiotherapist during the year year were 1,959.

The Specialist saw 167 New Cases and 305 Old Cases—making a total of 472. The following is an analysis of the new cases seen during the year :—

				Boys	Girls
1.	Congenital Defects			20	10
2.	Birth Injuries				
3.	Rickety Deformities			2	3
4.	Knock-knees (non-ri)	8	9
5.	Postural Defects of th	e Spi	ne	6	7
6.	Structural Curvature				
	Spine		*****	_	- 1900/092_00
7.	Flat Feet			23	28
8.	Infantile Paralysis			-	_
9.	Sequelæ of Acute Fe	vers		1	in the Contract of
10.	Fractures			1	_
11.	Tuberculous Joints			_	1
12.	Other Bone Diseases			The second	1
13.	Other Conditions			11	26
14.	Non-Orthopædic			1	and the same of
15.	Normal			4	5
				no tous	raid Core
				77	90

The Ultra-Violet Light Clinic was held on tour afternoon sessions weekly. The total attendances for the year were 1,858.

(i) Organisers of Physical Education.

Annual Report, 1946.

"This report covers the first full year since the end of the war and, although it is possible to record a certain amount of progress in physical education generally, many years must pass before the standard maintained before the war is again reached. Lack of teachers, facilities, apparatus, proper clothing and footwear, have all contributed to the insidious slide downhill, but the importance given to physical education in all its branches in the new Education Act should help to establish the subject on a better footing than before. If, when children leave school at fifteen years of age, they have a love and a knowledge of at least one game which they can continue to play, coupled with a desire for a healthy body through exercise and better living conditions at home and at work, the schools will have achieved a wider aim of physical education than the restricted view which many now possess.

Personnel.

"All branches of physical education have suffered through the lack of suitably trained teachers, particularly amongst the men, and to the continual change of staff responsible for this subject.

"The grammar schools now all have fully qualified women specialists and well qualified men and the position is satisfactory except in the case of the Latymer Secondary Grammar School which is understaffed.

Facilities.

"Facilities in most schools have degenerated with the war years. Many halls are being used for meals with consequent loss of space and time and the bogey of dirty and greasy floors. Playground space is restricted owing to airraid shelters and extra coke supplies and great care has to be exercised during the playing of games on some of the surfaces.

"School fields have had a great deal of use and steps were taken towards the end of the year to restrict the use of these fields in order that they may recover enough to stand the wear and tear of normal school activities which, under the new Education Act, are very much increased. Plans have been approved for the laying of cricket tables on all playing fields where possible and some of the work has already been completed.

Footwear and Apparatus.

"The provision of shoes to about 20% of the school population has resulted in better work and the return of some small balls to the games store has helped the infant departments. The supply of small apparatus generally, however, has been good compared with other areas. Some lockers for the storage of shoes and clothing in classroom units were delivered to all schools before Christmas and loss of this equipment by theft should be considerably less.

"Maintenance and repair of all large portable and fixed apparatus has been undertaken during the year. In the Autumn Essex Agility Apparatus was installed in two infant departments as an experiment and it has proved very successful in the training of courage and initiative not to mention the amount of joyous activity which the infants have had from its use. Experiments are now being made with other types of apparatus for infant and junior schools for hall and playground use.

School Activities.

"Hockey as well as netball was played by the majority of girls in the senior and secondary schools and in one school an experimental season of tennis on public courts with girls in their last year at school proved so successful that it will be extended to all schools in 1947. An experiment in Modern Dance, taken by the senior lecturer at St. Katharine's College, has been much enjoyed by the girls at Raynham Road School and the junior lecturer undertook, with the help of students specialising in physical education, to coach the senior girls at St. James's School in hockey and netball. A coloured film, showing the work of the Swedish team who demonstrated in London and the provinces during the Autumn, was shown to all girls in their last year at school and as a result a 'Keep Fit' evening class was formed.

Remedials.

"Two remedial gymnasts (specialists in physical education with the addition of the Diploma of the Chartered Society of Physiotherapy) have been working in eight infant and seven junior departments and in the Open Air School. During the year 1,125 children have been having treatment for postural defects and 184 have been discharged. These children are examined again in three months' time and given further treatment if necessary. There is still a long list of children waiting to be treated at these schools as well as at those schools which are not visited.

"It has been difficult to find suitable room in some schools and there is likely to be a greater difficulty in the future. The provision of floor covering

is also a problem, particularly where floors are likely to splinter.

"All arrangements and initial examinations are carried out by the Organisers, their diagnosis being confirmed by the Assistant Medical Officer of Health who examines all cases termly.

Swimming.

"Progress has been made in swimming, although the facilities are not ideal and the season is very short. 875 boys and 1,050 girls attended the baths weekly and 60% learnt to glide or to swim a few strokes. 112 boys and 132 girls passed the Education Committee's elementary test, 53 girls passed the intermediate test (for girls only) and 17 boys and 24 girls the advanced test.

The number of children who can attend the Baths compared with the total school population is very small and, if the second-class bath were kept open during the winter, twice the number of children could be accommodated and given a longer term of swimming instruction. Miss Gould again undertook the instruction with the help of the class teacher on the girls' side, but no man instructor was available to help the boys' classes and swimming was taken by the teachers who brought the classes to the baths.

"County Tests, based on the Edmonton Committee's tests, have been instituted throughout Middlesex with the approval of the County Education Committee. A demonstration, by children of the Houndsfield Girls' School, of these tests to teachers in all types of schools in Edmonton was arranged in

September.

Post-School Activities.

"The number of clubs who took up some form of physical education increased during the year, particularly on the boys' side, but the lack of trained leaders prevented much expansion. A 'Keep Fit' competition for girls' clubs (junior and senior) was held in May and a ballroom dancing refresher course for boys and girls in the Autumn. A team of girls, drawn from the Youth Clubs, took part in the Festival of Youth at Wembley and have since formed a group under the Evening Institute. A demonstration of 'Keep Fit' and dancing was staged for the public in December.

Other work undertaken by the Organisers.

"At the request of the Borough Education Officer, a survey of desks and chairs was made in primary and secondary schools to determine the sizes required to conform to the new standards of the Ministry of Education. The result showed that in schools where the survey was carried out seating is bad and needs urgent revision if the full benefit of any physical education programme is to be obtained.

"The detailed report on extra playing field accommodation submitted in 1945 was revised in relation to the new development plan. A further revision

will now be necessary.

"A lecture to doctors taking the public health diploma was given by Miss Jeans in December at the request of the Royal Institute of Public Health and Hygiene. Demonstrations of physical training and remedial exercises by infants and junior boys of Silver Street School followed.

"Mr. Roberts lectured on athletics to members of the Ling Physical Education Association's Holiday Course in December and, at the request of the Ministry of Education, gave four lectures in athletics to the students at the

Emergency Training College at Walthamstow.

"The Organisers have served on the following Committees during the

year :-

MISS JEANS.

Edmonton Local Youth Committee,

Executive Committee of the Ling Physical Education Association,

The Chartered Society of the Physiotherapy Service Committee,

The County Organisers
Camping Sub-Committee
(Chairman), and

Storage and Equipment Sub-Committee.

MR. ROBERTS.

Edmonton Local Youth Committee, Development Sub-Committee and Finance Committee,

The County Organisers Playing Fields Sub-Committee,

School Sports Association Sub-Committee,

Swimming Sub-Committee (Chairman),

Amateur Athletic Association Development Sub-Committee.

(j) Heart Diseases and Rheumatism.

Dr. J. B. Alexander, F.R.C.P., attended the Clinic, held once monthly, for the purpose of examining children suffering from rheumatism and diseases of the heart.

The attendances for 1946 were 82 New Cases and 205 Old Cases—total 287.

(k) Open Air School.

"The Open Air School has been in existence for over eight years, of which six were war years with all their inevitable restrictions, compromise and dislocation. The School buildings and fitments are unchanged since its opening despite modifications called for in the light of experience. Notwithstanding these conditions the School's work has continued to develop and expand as experiment and trial have warranted.

"The report, submitted to you at the end of 1938, described the general routine of the school day and explained its aims. In this report the results thus far achieved and an account of the growth of our work are given.

Table A.

Total number of admissions from April, 1938, to December, 1946	698
Total number of admissions for the year ending December, 1946	75
Total number of discharges for the year ending December, 1946	75
The number on Roll on January 1st, 1946	140
The number on Roll on December 31st, 1946	140

"From Table A it will be seen that the average time a child stays at the School is about two years. Some leave at the end of two terms and a few remain at the School for four years or more; the latter are not usually, however, the true 'open air school' type but, on the contrary, physically handicapped.

Table B.

"The age range of the children at the beginning of the year was as follows:-

Age	 6	7	8	9	10	11	12	13	14	Total
No.	 1	15	19	34	15	21	17	17	1	140

"From a study of the age range in Table B it will be seen that a bulge occurs at the age of 9 years. As there are discharges and new admissions three times a year and children of any age from 7 to 14 years are admitted, the bulge mentioned above might be flattened out or built up at some other age. This complicates the school organisation and is best overcome by working from term to term, reorganising at the beginning of each term after particulars of the change in the school population have been studied.

Table C.

"At the beginning of the year an analysis of reasons for admission was made and is as follows:—

tated a	nd m	alnutr	ition .			61
Asthn	na					48
etc.	******		*****	*****		11
	*****		*****	******		6
			*****	*****	*****	8
	*****			*****	*****	10
*****		*****	*****		*****	9
	******	*****	******	*****		2
	*****	*****			*****	1
******					*****	2
other	than	limb	*****	*****	*****	2
			Total	*****	*****	160
	Asthmetc.	Asthma etc	Asthma etc	etc	Asthma etc	Asthma etc

"The total number of defects is shown as 160; this is arrived at because some children have what may be called 'double defects.' Of the total, onequarter are not true 'open air' or 'delicate' children and their presence has led to an inevitable modification of the open air routine. Compromise between the needs of the delicate and the physically handicapped is unfortunate as neither can reap full benefit from the regime. One example will suffice to make this clear. Delicate children need maximum fresh air and this necessitates plenty of activity in winter time in order that the children may keep warm. Physically handicapped children cannot take full advantage of fresh air without suffering from the cold. The result is a certain loss of fresh air by all, and the School is too small to admit of organisation into Delicate and Physically Handicapped sections. Maximum fresh air is a fundamental principle in open air work and it is unfortunate that the lack of suitable educational facilities for Physically Handicapped children should prevent the Delicate children from gaining full advantage from the open air school. It is true that the Physically Handicapped children gain immeasurably from attendance at the open air school, they are enabled to attend school regularly; they are under constant medical supervision; they enjoy many of the benefits obtained by following the open air school routine, such as the stress laid upon suitable clothingand in this connection it is surprising how soon even Physically Handicapped children can become used to living in open air conditions for the skin soon gets used to it; they profit from the regular meals, rest period and good habits formed at a school where 'Health is won by a way of life rather than by a bottle of medicine.'

"In the course of the year under review 203 children have made attendances at the various clinics. The school coaches are used to transport the children to the clinics and in this way loss of schooling is reduced to a minimum. All Minor Ailments are dealt with in the School.

Education in the Open Air School.

"The curriculum is not a copy of that of the ordinary school although it is based on the same fundamental principles. The fullest use is made of the natural surroundings and of the routine of the school day in drawing up schemes of work. Personal hygiene, social habits governing meals and other occasions all have their place. The time-table is flexible and is, to some extent, governed by the seasons and the 'opportune moment.'

"The schemes of work provide for the education of both normal and backward children. Of the children pronounced fit for ordinary school, one

or two, by passing the entrance examination, proceed to the grammar school each year. On the whole, however, the majority of the children enter the Open Air School backward and/or retarded because ill-health has caused loss of schooling. A sick child is rarely capable of sustained effort in school and much remedial work has to be carried out as the child improves in health. Each child is examined soon after admission to determine his Intelligence Quotient and Educational Attainments. From these assessments and the Diagnostic Tests that are periodically given, the pupil's needs and progress can be gauged. In a large number of cases much hard work has to be done and, often, little progress is made until the child's health improves. Many children first arrive at the School with a fear complex concerning, or an active dislike for school and our first task is to make them feel at home. This is done by studying the child as an individual and by running the School as a large family.

"A number of children are admitted with a nervous belief in their ill-health. After the first little talk between the Head and the child when he shows the boy or girl that he knows his new pupil is not fit, no mention is made of sickness. Gradually each child is brought to consider himself quite normal and to outward appearances he is treated as such by all on the Staff. In time the pupil finds himself in a 'help yourself' society and the right mental attitude is, in this way, brought into being.

"Generally speaking, the school day is made as informal and unacademic as possible. The whole environment gives rise to a more practical type of education than can easily be attained within the four walls of the ordinary classroom.

Developments.

"Within the limits imposed by the school structure, certain developments have taken place during the period the School has been open. An Ultra Violet Ray lamp was provided some years ago. The lamp is situated in the Medical-cum-Staff room and its use in these restricted and busy quarters creates difficulties of one kind and another, but the tonic effect upon the children, especially in winter, is of great value. In 1946 sixty children underwent a course of treatment, making 1,207 attendances in all.

"Early in the war a start was made in giving children with Asthma and Bronchitis special remedial breathing exercises. These were based on those suggested by the Asthma Research Council and the groups are taken daily by the School Nurse. The number of individual children treated in 1946 was 64 and the total number of attendances was 3,779.

"A Remedial Gymnast visits the School twice a week to take classes of children with posture defects. The work of the School Nurse and of the Remedial Gymnast is performed under difficult conditions, particularly in winter, because of the lack of suitable accommodation. All the children in the School are affected as the consequent overcrowding creates waves of pressure throughout the School.

"When the School was opened it was realised that the Senior children were without adequate Handicraft facilities and through the kind co-operation of the Headmaster of Silver Street Senior Boys' School, the Senior boys of the Open Air School are able to attend for one session each week at the Silver Street Handicraft Centre. The principle of 'Maximum Fresh Air' cannot operate at this Centre and the use of this Centre by the Open Air School is, at best, a makeshift. Suitable handicraft facilities for boys and girls at the Open Air School is an urgent need.

General.

"The children have two or more shower baths weekly. At one period during the war, when the School roll was halved, it was found possible to allow each child a daily shower. The general improvement in alertness was so marked that it is unfortunate that the battery of showers is not big enough to enable a full school to have daily shower baths.

"The School Nurse weighs and measures the children monthly and at the same time holds a formal head inspection. The daily average of minor ailments treated is 28. Malt and oil is given twice daily to about 70 children.

"The work of the Staff is arduous, often comfortless and trying, unusualy so in winter, but the School is fortunate in that 'the child's welfare must come first 'inspires the work of all.

"The Schoolkeeper and Cleaner are to be commended upon the state of cleanliness throughout the School. When it is pointed out that walls and paint-work have been untouched since 1938 and that the rooms are under constant exposure to the elements it is no small achievement to keep the School so clean and pleasant. The Central Kitchen attached to the School has produced three meals daily of consistent quality. Quantity and variety, occasionally affected by shortages, have been outstanding. The children's diet is better now than it was before the war. The ration allowances for School Canteens enables a good cook to serve meals of a very high standard in food value and attractiveness. I consider this fact needs stressing as we are in the habit of decrying the rationing system. The lack of sufficient fresh fruit is, of course, unfortunate.

"I must thank the School Health Staff for the ready help and advice so often asked for and received, and the parents for their co-operation. With School, Health Department and Parents all working together the children reap the maximum benefit from the open air regime."

(1) Educationally Subnormal Children.

"During the year 72 children were referred as educationally subnormal and examined under Section 34 of the Education Act, 1944, and the following is the analysis of the intelligence quotients:—

	45-	51-	56-	61-	66-	71-	76-	81-	86-	91-	96-	Over	Section	on
	50	55	60	65	70	75	80	85	90	95	100	100	57	Total
Boys	1	2	4.	4	3	6	4	3	2	2	-	1	7	39
Girls	4	-	4	7	6	2	5		1	1	1	1	1	33
											-	Total		. 72

"I set out below details of action taken in these cases :-

Recommended for admission to Durants Special School 36
Returned to Ordinary Schools 28
Dealt with under Section 57 of the Education Act, 1944 8

"Of the 36 recommended for Durants Special School only 10 have so far been admitted; it is to be regretted that there are still 26 waiting admission and the names of new cases are constantly being added. No child has been admitted since the 1st May, 1946, and as the School already has many pupils over its complement it is probable that it will be many years before arrangements will be made for their admission and, in some cases where a child was referred after many years in the evacuation areas, difficulties will arise owing to the fact that as they are still attending the ordinary school departments, they will leave school at the age of 14 years instead of the age of 16 years in accordance with Section 38 of the Education Act."

(m) Child Guidance Clinic.

"The Clinic's aim during the year has been to alleviate the emotional difficulties which are experienced either by the children themselves or by their parents, teachers and others in relation to them.

"Some children present problems to the environment by being disorderly in their behaviour, becoming delinquent or aggressive, whilst others experience difficulties within themselves, expressed in such symptoms as nervousness, fears, headaches, pains, or the more obvious physical symptoms of enuresis, asthma, paralysis or fits. Therefore the main burden of the difficulty is carried mainly either by the environment (i.e., parents, school teachers and, in special cases, probation and welfare officers) or by the child himself.

"The Clinic procedure is as follows: Each case is investigated in its setting and a diagnosis is made. The cases are arranged in order of their severity and it is decided whether superficial or radical assistance is required.

"The problems which are handled vary in complexity, the most difficult ones are dealt with by the Psychiatrist, Dr. Michael Fordham, whilst those of a less serious nature, are handled by the Educational Psychologist, Miss Isabel Best. The parents' problems belong to the realm of the Psychiatric Social Worker, Miss Newcombe.

"Purely educational problems cannot be dealt with in the Clinic, firstly, because of the pressure of cases needing psycho-therapy and secondly, because the numbers of children requiring remedial teaching are too great.

"The Clinic has operated as a team and, consequently, it has not been thought necessary to differentiate between the work of each of its members in the statistics.

"The Clinic provides a place where parents and children can come and get help in solving their difficulties. The children come for this purpose and so do their parents. There is no 'magical' solution offered; instead considerable demands are made upon the patient's powers of co-operation, without which nothing can be done. Whether the treatment be long or short, its efficiency depends not only on the therapist, but also on the patient.

"Out of 64 cases seen, it is found that 40 require intensive treatment. It has only been possible to handle 18 of these and there is, therefore, a waiting list of 22. 24 cases have required shorter treatment. Thus, 42 cases have come under treatment and, in addition 32 were carried over from the previous year, making a total of 74.

"Though the interviews are divided into two categories, namely, diagnostic and treatment, in reality every interview involves treatment. Even if the child and his parent, or parents, are seen only once, the aim is to give advice, encouragement, criticism, or to hold out a hope for the future in the form of further assistance. Therefore, the diagnostic interviews must be regarded as part of the treatment procedure as well.

"The small number of cases given intensive treatment is due partly to inadequate number of staff and partly to the fact that the children's abnormality is thoroughly ingrained in their personalities that much time has to be given to the case if we are to help. About one third of the total cases referred have presented serious difficulties from birth; another third started to have serious difficulties before the age of 7 years. It therefore seems that we should aim at lowering the age of referral so as to start treatment before the disorder has had time to become fixed.

"In seven cases the homes were so abnormal that it was judged impossible to do anything to help unless circumstances were radically changed. These

children require a hostel from which they can come for treatment. It should be mentioned here, that the cases referred are already selected by the School Medical Officer and others before they get to the Clinic and we have no doubt that were a hostel available, more cases would come forward, particularly delinquents.

"The treatment aim is to let the individual handle his or her own life to the maximum degree and according to his or her own conceptions of how it should be lived. Therefore, we do not aim at imposing our own conceptions on the patient. That is why, in breaking off treatment, we take the patient's view seriously into account, so that, for instance, the initiative in stopping treatment comes from the following sources:—

(1) Parents feel they are able to handle the child.

(2) The child does not see any need to continue attending.

(3) The child wishes to spend the time at school rather than the Clinic.

(4) The therapist considers that the treatment has reached a conclusion.

This initiative is not accepted naively, but is carefully worked out on a co-operative basis. This way of handling the situation is most important for the subsequent social development of the child.

"Because of the fact that difficulties are always met with in the process of growing up we have not closed cases. Parents and children are always at liberty to return if they wish to. This point of view has been found useful because if the patient knows he can return for further help he is more inclined to step out and stand on his own feet at the earliest opportunity.

"During the year we have been handicapped by inadequate accommodation and in the lack, since the resignation of Miss Toynbee, of a Psychiatric Social Worker. Miss Newcombe's appointment has filled the vacancy and we now have the basis Clinic team in operation again. It is clear, however, that if the cases referred are to be handled adequately, there is urgent need to increase the staff, and with it, the accommodation. We need a whole-time play-therapist if the cases are to be treated as they are referred, whilst a second psychiatric social worker could easily be used.

"In conclusion, we must refer to the happy co-operation with schools and other social agencies, which could well be developed further had we more time at our disposal. The pressure of cases, however, makes it necessary for us to restrict our activities to this field."

Cases referred					90
Cases referred		******	******	******	
Diagnostic Interviews		*****	*****		64
Short treatment Interviews	*****		*****	*****	24
Intensive treatment Intervie	ws			*****	22
Cases awaiting treatment				*****	18
Cases awaiting to be seen				*****	26
Cases carried over from prev	vious	year	*****	*****	32

(n) School Meals and Milk, etc.

"During the year 1,164,131 dinners were supplied to school children in Edmonton. Of these 96,659 were supplied free of charge to necessitous cases. The average number of children receiving meals daily at the end of the year was 5,200 (45% of the children in school).

"Under the Milk In Schools Scheme the issue of milk was made free of charge from September. At the end of the year 11,257 children (98.7% of the number in School) were receiving one-third pint daily.

School Meals.

"The provision of meals to school children in Edmonton began in 1894 when a "Free Meal Fund" was established and opened with the sum of £34 for the purpose of providing a free meal to necessitous school children. The total expenditure in the first year was £10.

"In later years new Education Acts provided for the supply of meals to necessitous children (mainly on economic grounds—the cost being borne by rates and taxes), and immediately before the recent war a mid-day meal was being supplied to 650 Edmonton children from 1 Central Kitchen.

"With the advent of communal feeding in 1941 four additional Central Kitchens were erected and the number of children receiving meals at school has increased until at present 5,200 (approximately 45% of the number of children attending school) are being catered for daily. The annual cost for this year is estimated to be £65,000, of which approximately £25,000 will be recovered from those children who pay 5d. per meal.

"The feeding of such large numbers of children in school inevitably brought forth many difficulties, particularly so far as dining accommodation was concerned. When Edmonton schools were built the 'School Meals Service,' as it is now known, was not envisaged and so makeshift arrangements had to operate entailing the use of halls, classrooms and, in some instances, corridors.

"As part of Social Insurance it is the intention of the Government to make dinners free of charge to all day pupils at the earliest possible date, but it is realised that this cannot be done until school canteen facilities are sufficient to meet the expected demand. Education Authorities have therefore been asked to press forward with the utmost possible speed with the formulation and carrying out of proposals to extend present facilities. A scheme has been drawn up which will provide a kitchen and dining rooms at each of the schools and the Ministry of Education have given their approval to the first part of the programme which caters for those schools where classrooms and corridors are at present being used.

"When the whole scheme is completed, there will be kitchens and properly equipped dining rooms to accommodate 10,000 children and another step forward in the social life of the school will have been made.

Supply of Clothing, Footwear, etc.

"In accordance with Section 51 of the Education Act, 1944, clothing, including footwear, may be supplied by the Authority in the case of children who are found to be inadequately clothed and thereby unable to receive the benefit of full-time education at school.

"In November, 1945, the Education Committee began the supply of footwear to necessitous children. Arrangements were made for the purchase of stock which is kept in a store at the Brettenham Road School. Applications are received from parents on the appropriate forms and these are forwarded to the Education Office with the observations of the Head Teacher. In suitable cases parents are notified and the children are called for the supply of the footwear. Arrangements were also made for repairs to footwear and suitable applicants are provided with an official order which authorises the repair at their local repairers.

"Arrangements have since been made for the supply of clothing in similar cases by means of vouchers given to parents enabling them to obtain clothing at a local outfitters.

Holiday Camp.

"The Middlesex Education Committee established, during the summer of 1946, school holiday camps at Petersfield and Overton, Hants. Edmonton children attended the Foxdown Camp, Overton, and arrangements were made for parties of 20 children accompanied by 1 teacher to stay for one week at the camp. The camp was opened on 31st July and closed on 17th September, the weekly periods being from Wednesday to Tuesday.

"The allocation for Edmonton was 160 places and of this number 117 children attended the camp. It should be noted that all reports received from

children and parents afterwards were most satisfactory.

"Parents of children attending the camp were required to meet the whole or part of the cost according to their circumstances and in suitable cases the holiday was provided free of cost.

Juvenile Employment Bureau.

"Boys and Girls leaving the Open Air School on attaining the age of 14 years are medically examined during their last term at school and a School Medical Leaving Report (E.D.211) is completed and submitted to the Juvenile Employment Officer for use when giving vocational guidance to school leavers. Reports received during year ended 31.12.46 numbered 7 boys and 7 girls.

"Ministry of Education Administrative Memorandum No. 94 (8.10.45) provides that in cases where the School Medical Officer is of the opinion that a pupil about to leave school may be eligible for registration under the Disabled Persons (Employment) Act, 1944 (i.e., a disablement likely to last for at least six months and constituting a substantial handicap in obtaining or keeping suitable employment) a special form E.D.211 D.P. is completed and, subject to the Parent's written consent, is submitted to the Juvenile Employment Officer.

"Reports received during year ended 31.12.46: 1 girl.

"Reports have also been received in respect of 1 boy and 1 girl who left Residential Schools for Disabled Children on attaining the age of 16 years. Both have been registered under the Disabled Persons (Employment) Act, 1944, and placed in suitable employment."

General Information.

Average Number on rolls-1.1.46 to 31.12.46 1	3,910
Number of permits issued for Employment of	
Children	8
Number of Licences issued for Children in Enter-	
tainments	2
Number of children supplied with footwear	315
Number of children who had footwear repaired	138
Number of cases under Adoption of Children Act,	
1926, undertaken during 1946	52

(o) Asthma Clinic.

The Asthma Clinic was held once weekly at Pymmes Park Clinic and the total attendances for the year was 838. The number of individual cases treated was 48.

(b) Tuberculosis.

I must again extend my most grateful thanks to the Physician to the Chest Clinic for the co-operation he has given to this Department when dealing with cases referred to him.

The number of notified cases and the mortality of children of school age during 1946, taken from the records of the Public Health Department, was :—

	Noti	fied		Deaths		
	M.	F.	H 7: A.	M.	F.	
Pulmonary	 4	2		_	1	
Non-pulmonary	 - 8	1		2	_	

(q) Other Defects and Diseases.

These cases continued to be dealt with as in previous years.

6. FOLLOWING-UP

The arrangements for following-up cases were the same as in previous years.

ARRANGEMENTS FOR TREATMENT

The arrangements for treatment at the various clinics were as follows:-

- (1) Minor Ailments: Pymmes Park Clinic and Croyland Road Clinic—Doctor and Nurse in attendance every morning.
- (2) Rheumatism: Clinic held once monthly—the third Thursday. By appointment only.
- (3) Aural: Clinic held twice monthly—the second and fourth Friday. By appointment only.
- (4) Ophthalmic: Held at Pymmes Park Clinic every Monday and alternate Tuesdays. New cases by appointment only.
- (5) Orthopædic: Surgeon attends on the second and fourth Friday in each month Treatment carried out every morning at Central Hall, Fore Street, N.9.
- (6) Dental: Clinics are held at Hazelbury Road, Pymmes Park and Croyland Road.
- (7) Orthodontic The Specialist attends on the first, second and third Monday of each month, i.e., once at each clinic, going to Pymmes Park, Croyland Road and Hazelbury in that order. By appointment only
- (8) Speech: Speech Therapy Clinic is carried out by Miss Oldrey at Pymmes Park and is held on five sessions a week. By appointment only.
- (9) Ultra Violet Light: This Clinic is held at the Orthopædic Clinic, Central Hall, on four afternoons per week. Cases seen by appointment only.
- (10) Asthma: The Clinic is held at Pymmes Park every Thursday. Cases are first referred to Dr. Freeman at St. Mary's Hospital, Paddington, who examines them and recommends the necessary vaccine.

INFECTIOUS DISEASES

Children suffering from infectious diseases were dealt with in the same manner as in previous years.

MINISTRY OF EDUCATION.

Medical Inspection and Treatment Returns. YEAR ENDED 31st DECEMBER, 1946.

Table I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A .- Routine Medical Inspections.

(1) Number of Inspection:	s in the	Prescril	ped A	ge Gro	aps :-				
Entrants			***					***	2,491
Second Age Group	***	***			***				1,076
Third Age Group	***	***			10.11				659
		Total			***				4,226
(2) Number of other Rout	tine Ins	pections		***	***	***	- ***	1555	Nil
		GRAN	D TO	TAL		***	***		4,226
		BOtl	ner In	spection	ns.				
Number of Special Inspec	tions an	d Re-In	spect	ions			***		1,432

Table II.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Number of	A.		В.		C.		D.	
Children Inspected.	No.	%	No.	0/	No.	%	No.	%
4,226	690	16.33	3,223	76.27	311	7.36	2	.04

Table III.

GROUP I. Treatment of Minor Ailments (excluding uncleanliness).

Total Number of Defects treat	ed or	under	treatment	duri	ng the	year	under	
the Authority's Scheme		***			***	***	***	8,761

GROUP II. Treatment of Defective Vision and Squint.

Errors	of Re	fraction (in	ncludin of the	g squii	nt) excludi	ng tho	se recor		Autl	Under the nority's Sc 1,287	
		I.)								-	
			Total	***	799	***				1,287	
Numb	er of c	hildren for	whom	specta	acles we	ere :-				Char	
		rescribed								1,218	
	(b) O	btained								1,210	
GROUP I	III. I	reatment	of Defe	cts of	Nose a	nd Thr	oat.				
	Recei	ved Opera	tive T	reatme	ent					335	
	Recei	Received Other Forms of Treatment							***	756	
			Total 1	Numbe	er Trea	ted				1,091	

Table IV.

DENTAL INSPECTION AND TREATMENT.

1) Number of	children inspect	ted by the	Dentis	st :					
(a)	Routine Age Gr	oups							5,682
(b) S	Specials							***	1,517
		m			_	-			
		Lotal	(Routin	ne and	Specia	ıls)			7,199
2) Number fou	nd to require t	reatment							4,94
Number act	ually treated	***	****						4,24
Attendance	made by childr	en for tre	atment				***		8,48
	evoted to :-								
	ection				***				3
1100	tillellt		***		***	***	***	***	1,17
		Total							1 20
			***		***		***	***	1,20
) Fillings :—									
	nanent Teeth	***	***						3,64
Tem	porary Teeth				***				9
		T. 4.1							-
		Total				***		****	3,74
) Extractions	_								
	nanent Teeth								1 100
Temporary Teeth			***		***	***	***	***	1,183
			1977		:	***		***	7,171
		Total							5,354
) Administrat	ons of general	anaaethati	on for						
Other Opera	tions :-	anacsmen	CS TOF 6	extrac	tions	***	***		2,546
	nanent Teeth								792
Tem	porary Teeth								5,259
									-,
		Total	***						6,051
			Table '	V					
			1 0010		1				
	V	ERMINO	US CO	NDIT	TIONS.				
) Average nu	mber of visits	ner school	mada	danin	or the -		41. 0	11	
Nurses or	other authoris	sed person	S	durin	g the y	ear by	the So	chool	11
) Iotal numb	er or examinati	ons of chi	ldren o	n the	schools	by Sc	hool N	urses	13
or othe	r authorised pe	ersons						11303	36,003
) Number of i	ndividual child	ren found	unclear	n					951



