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# COUNTY OF AYR



# ANNUAL REPORT

BY

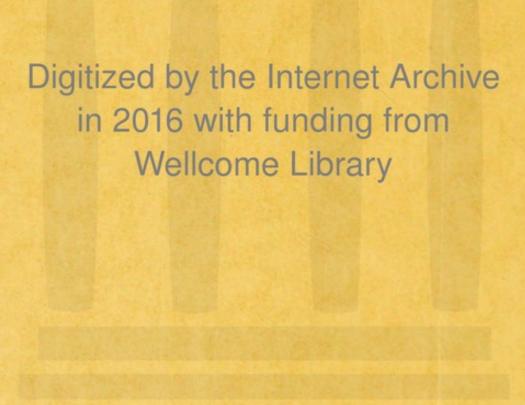
THE MEDICAL OFFICER OF HEALTH

For the Year 1953

AND

THE SCHOOL MEDICAL OFFICER

For the Year 1953-54



# COUNTY OF AYR



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# THE MEDICAL OFFICER OF HEALTH

For the Year 1953

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THE SCHOOL MEDICAL OFFICER

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STA 40 YEARD

# ANNUAL REPORT

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THE SCHOOL PEDICAL OFFICER

W. J.El May will no!

# To the Department of Health for Scotland and to the Ayr County Council.

LADIES AND GENTLEMEN,

I beg to submit the Annual Report on the Health and Sanitary Conditions of the County for the year 1953, together with the Report on the Medical Inspection and Treatment of School Children for the year ended 31st July, 1954.

The statistics can be generally considered to be satisfactory. The birth rate showed an increase of 0.8 and the death rate a fall of 0.4 per thousand, as compared with last year's figures. The infantile mortality rate 31 equalled that for Scotland, while the still-birth rate showed a fall of two on the figure for 1952. The death rates from pulmonary and non-pulmonary tuberculosis were the lowest ever recorded, while deaths from cancer showed a slight increase and deaths from heart disease a slight decrease.

There were 21 additional cases of pulmonary tuberculosis confirmed compared with last year, while the non-pulmonary cases confirmed were two less. In October a start was made to immunise the 13-year-old children against tuberculosis; by the end of the year 1,014 children had been skin tested and of these 691 received B.C.G.

There were 21 cases of poliomyelitis compared with 7 in 1952. As last year, no case of diphtheria occurred in the County.

The District Nurses reported 72 accidents in the home; 90 per cent. were due to burns and scalds; 36 per cent. of the cases were under two years of age and 61 per cent. under five years of age.

The number of long-term cases served by the Domestic Help Scheme continued to mount. Now 43 per cent. of the households have had Helps for more than one year.

On the retirement of the Welfare Officer at the end of the year, the County Council decided to have a combined Health and Welfare Department.

I have the honour to be,

Your obedient Servant,

J. A. ROUGHEAD,

County Medical Officer.

County Buildings, Ayr,

#### STAFF.

Medical Officer of Health and Chief Administrative School Medical Officer—

JOHN A. ROUGHEAD, M.D., D.P.H.

Depute Medical Officer of Health— John S. Jackson, M.B., Ch.B., D.P.H.

Senior Assistant Medical Officer—
ALICE K. MONTGOMERY, M.B., Ch.B., D.P.H., D.R.C.O.G.

# Psychiatrist-

G. A. W. Angus, M.B., Ch.B., D.P.M. (resigned 20/6/53). K. W. Aron, M.B., Ch.B., D.P.M. (date of commencement 17/12/54).

Assistant School Medical Officers (also Child Welfare Medical Officers)—

HELEN M. WIGHTMAN, M.B., Ch.B., D.P.H.
ENID M. DIXON, M.B., Ch.B., D.P.H.
MARGARET C. P. HAMILTON, M.B., Ch.B., D.P.H.
JEAN M. DIXON, M.B., Ch.B., D.P.H.
JESSIE B. MACLACHLAN, M.B., Ch.B., D.P.H.
AGNES M. HIGHET, M.B., Ch.B., D.P.H., D.R.C.O.G.

Assistant Medical Officer—Tuberculosis Scheme.

ROBERT D. WHITELAW, M.B., Ch.B., D.P.H. (appointed 1/9/53).

Chief Dental Officer—
ARNOLD J. DUNCAN, L.D.S.

# Assistant School Dental Officers-

Myrette J. J. Davidson, L.D.S. (appointed 16/1/53; resigned 1/10/53).

PETER McG. GARDNER, L.D.S.

IAN HARVEY, L.D.S. (appointed 16/1/53).

THOMAS H. KERR, L.D.S.

AGNES J. PURDIE, L.D.S.

CHRISTINE M. RODGER, L.D.S.

MONTGOMERY B. SIMPSON, L.D.S.

JEAN B. STEVENSON, L.D.S. (appointed 16/1/53).

ARCHIBALD W. M. WATSON, L.D.S. THOMAS L. H. WIGHTMAN, L.D.S.

James Wilson, L.D.S. (appointed 16/1/53).

Assistant Dental Officers—Care of Mothers and Young Children—Morag Gale, L.D.S. (Appointed 2/3/53).
Wilma S. Pringle, L.D.S. (resigned 31/12/53).

DENTAL ATTENDANTS-14.

County Nursing Superintendent— MISS JANET S. HASTIE.

DISTRICT	NURS	E/M	IDW.	IFE	H	EAI	LTE	I	VI	SIT	CO	RS	 	 .7	3
TUBERCUI	LOSIS	NUE	SES.										 	 	4
OTHERS													 	 	4

Matron, Residential Nursery, Irvine— MISS N. G. LEES.

Matron, Residential Nursery, Kilwinning— MISS HELEN GRANT.

Matron, St. Leonard's Home, Ayr— MISS A. D. PEDDIE.

Audiometrician—
MISS JEAN B. THOMSON.

Home Helps Organiser— Mrs. Margaret Ramsay.

Welfare Visitor— MISS A. S. KELLOCK.

Welfare Visitor (Tuberculosis)— MISS H. H. SMITH.

Clerical Staff-

#### BURGH OF AYR.

School Medical Officer-

R. L. LEASK, M.B., CH.B., B.Sc. (P.H.), D.P.H., D.P.A.

Assistant School Medical Officer— A. G. Sked, M.B., Ch.B., D.P.H.

School Nurses—
7 Part-Time Nurses.

Clerical Staff—
1 Part-Time Clerkess.

### BURGH OF KILMARNOCK.

School Medical Officer—
B. R. NISBET, M.D., F.R.C.P. (Ed.), D.P.H.

Assistant School Medical Officer—
G. Fides M. Braid, M.B., Ch.B., D.P.H., D.R.C.O.G.

School Nurses—
6 Part-Time Nurses.

Clerical Staff—
2 Part-Time Clerkesses.

# ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH.

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# County Medical Officer's Report.

1953.

### A.—VITAL STATISTICS.

**Population and Area.**—The Registrar General has estimated the population of the Landward Area and Small Burghs to middle of 1953 as 238,912. This figure is 2,307 more than his estimate for 1952.

Births.—The live births registered after correction for transfers were 4,405, equivalent to a birth rate of 18·4 per thousand of population, which exceeds that of the preceding year. The figure for Scotland was 17·8. The rates for previous years, of which I have record, are:—

1916-20-	Average I	Birth-ra	ite	 		25.9
1921-25	,,	,,		 		22.1
1926-30	33	,,		 		18.5
1931-35	1.1	,,		 		18.6
1936-40	**	,,		 		18.2
1941-45	,,	,,		 		18.1
1946-50		,,		 	***	19.7
1951 -	Birth-rate			 	***	17.6
1952	,,			 		17.6
1953	,,			 		18.4

The number of still-births registered after correction for transfers during the year was 102, giving a rate of 23 per thousand total births compared with 25 for Scotland. The number of still-births registered, for a number of years past, with the corresponding rates per thousand total births are as follows:—

			St	ill-Births.	Rate per Thousand Total Births.
1941-45-	-Avera	ge		153	41
1946-50-	- ,,,			130	27
1951				89	21
1952				105	25
1953				102	23

The details applicable to individual Burghs are given in Table II.

Deaths.—The deaths registered after correction for transfers were 2,572, which is equivalent to a death-rate of 10.8, as compared with

11.2 in 1952. The Scottish figure was 11.5. The following are the figures so far as they are available for preceding years:—

1916-20-	-Average De	eath-r	ate	 	 14.6
1921-25	"	,,		 	 11.5
1926-30	,,	,,		 	 11.2
1931-35	,,	,,		 	 12.5
1936-40	"	,,		 	 12.8
1941-45	,,	,,		 	 12.1
1946-50	,,	,,		 	 11.3
1951 -	-Death-rate			 	 12.2
1952	,,			 	 11.2
1953	,,			 	 10.8

Tables I., II. and III. show the mortality in the County Area and Burghs during the year, and Table IV. gives similar figures of deaths at different ages with the percentages of the total deaths.

Infantile Mortality.—The number of infants under one year who died during the year was 135, equivalent to an infantile mortality rate of 31, as compared with 30 during the preceding year. The following are the figures for previous years so far as they are available:—

1916-20—Average	Infantile 1	Mortality	Rate	 	94
1921-25 ,,	,,	,,		 	89
1926-30 ,,	,,	,,		 	74
1931-35 ,,	,,	,,		 	73
1936-40 ,, 1941-45	"	"		 	71 63
1946-50	,,	"		 	39
1951 —Infantile	Mortality	Rate		 	37
1952 ,,	,,	,,		 	30
1953 ,,	,,	,,		 	31

Of the total deaths, 85 (63 per cent.) occurred during the first week of life and 93 (69 per cent.) within the first four weeks.

The main causes of death were congenital malformations, 24 (18 per cent.); pneumonia, 19 (14 per cent.); injury at birth 31 (23 per cent.); diarrhoea, 5 (4 per cent.); and other diseases peculiar to early infancy, 43 (32 per cent.).

Deaths from Infectious Diseases.—The deaths which occurred from the ordinary infectious diseases were measles 1, cerebrospinal fever 1, and whooping cough 4.

Deaths from Tuberculous Diseases.—The deaths from respiratory and other forms of tuberculosis were 35 and 5 respectively, giving death-rates of 0.15 and 0.02. The corresponding figures for the previous year were deaths 38 and 12, and death-rates 0.16 and 0.05. The following are the average deaths-rates so far as they are available:—

	T	Respiratory uberculosis.	Other forms of Tuberculosis.	Total
1916-20 (Averag	(e)	.79	.44	1.23
1921-25 (Averag	(e)	.52	.28	-80
1926-30 (Averag	(e)	.45	.24	.69
1931-35 (Averag	e)	.38	.19	.57
1936-40 (Averag	e)	.36	·13	.49
1941-45 (Averag	e)	.37	-17	.54
1946-50 (Averag	e)	.33	.09	.42
1951		.23	.06	.29
1952		.16	.05	.21
1953		·15	.02	.17

Deaths from Pneumonia.—There were 53 deaths from pneumonia, equivalent to a death-rate of 0.22. During the previous year the deaths were 67, equal to a death-rate of 0.28. The following are the average death-rates from pneumonia since 1931:—

1931-35	(Average)	 .67	1951	 	 	.39
1936-40	(Average)	 .63	1952	 	 	.28
1941-45	(Average)	 .46	1953	 	 	.22
1946-50	(Average)	 .34				

Deaths from other Diseases of the Respiratory System.—There were 91 deaths recorded from this group of diseases, which includes all the diseases of the organs of respiration except pneumonia and pulmonary tuberculosis. These figures are equivalent to a death-rate of 0.38, as compared with a rate of 0.34 for the previous year.

Deaths from Influenza.—The deaths due to influenza numbered 7, giving a death-rate of 0.03. During 1952 the deaths were 13 and the death-rate 0.06. The following are the average death-rates from influenza since 1931:—

1931-35 (Average	)	0.48	1951	 	 	0.19
1936-40 (Average			1952			
1941-45 (Average	)	0.08	1953	 	 	0.03
1946-50 (Average	)	0.08				

Deaths from Cancer.—The deaths from cancer were 420, which is equivalent to a death-rate of 1.76, as compared with 1.73 in the previous year.

The following are the average death-rates from cancer for a number of years:—

1931-35	 	 1.28	1951	***		 	1.67
1936-40	 	 1.48	1952		***	 	1.73
1941-45	 	 1.58	1953			 	1.76
1946-50	 	 1.63					

Deaths from Diseases of the Nervous System.—This group of diseases, which includes such causes as cerebral haemorrhage, apoplexy, etc., accounted for 476 of the deaths occurring in the area, being a death-rate of 1.99, as against 2.03 in the preceding year.

Deaths from Diseases of the Digestive System.—The deaths were 76, equivalent to a death-rate of 0.32, as compared with 0.38 in the preceding year.

Deaths from Diseases of the Circulatory System.—The number of deaths ascribed to diseases of the heart and other organs of circulation was 1,010, giving a death-rate of 4.23, as compared with 4.43 in the previous year.

Deaths from Diseases and Accidents of Pregnancy and Parturition.

—The maternal mortality rate in 1953 was 0.44 per thousand births, which compares with 0.9 for Scotland as a whole during that year. The average maternal mortality rates for the County during the period 1931 to 1953 were as follows:—

1931-35 (Average)	 6.2	1951	 	 	0.7
1936-40 (Average)	 4.7	1952	 	 	0.2
1941-45 (Average)	 2.4	1953	 	 	0.4
1946-50 (Average)	 1.4				

# B.—LOCAL HEALTH AUTHORITY FUNCTIONS.

# (1) Care of Mothers and Young Children.

(a) Expectant and Nursing Mothers.—The County Council provides a nurse and the premises for eight ante-natal and post-natal clinics in various centres in the County—the Doctor being provided by the Regional Hospital Board. All patients attending these clinics are booked for hospital, but a general practitioner may refer cases if he so desires. In addition, clinics are held at the Maternity Hospital, Irvine, by the Consultant Obstetrician.

The following are the figures relating to Ante-Natal Clinics in the form required by the Department of Health:—

		Post- Natal.
(i) Number of Clinics at end of the year provided by the Local Health Authority	_ 8	3 —
(ii) Number of Clinics at end of year provided by voluntary bodies	Nil	Nil
(iii) Number of women who attended the Clinics during the year	1389	341
(iv) Total number of attendances made by women during the year	8209	341

Care of Unmarried Mothers.—The provision of guidance and help to unmarried mothers was continued throughout the year.

Assistance was extended to 76 girls by the Welfare Visitor who paid, in all, 174 visits to their homes.

The nature of the help given can be seen from the following figures. Several cases fall into more than one category:—

	No. of astances
(1) Advice in obtaining decree of affiliation and aliment against the father of the child	13
(2) Advice regarding legal adoption	27
(3) Help in finding suitable accommodation for the child where it was necessary for the mother to work	29
(4) Advice regarding entitlement and help in obtaining allowances from the Ministry of National Insurance, National Assistance Board, etc	21
(5) Help in finding suitable employment	9
(6) General advice	40
(7) Help in obtaining housing accommodation	4

Supply of Maternity Outfits.—During the year 1,236 maternity outfits were supplied to mothers for domiciliary confinement.

(b) Child Welfare.—The Local Authority provides 40 Child Welfare Clinics at various centres in the County. The majority of these are held weekly by the District Nurses, with the attendance of an Assistant Medical Officer every fortnight.

The following are the statistics relating to Child Welfare Clinics in the form prescribed by the Department of Health:—

(i)	Number of clinics provided at the end of the year by the Local Health Authority	40
(ii)	Number of clinics at end of the year provided by voluntary bodies	Nil
(iii)	Number of children attending the clinics during the year and who on the date of their first attendance this year were—	
	Under 1 year of age	2,895
	Over 1 year of age	1,744
(iv)	Total number of attendances made during the year by children who at the time of attendance were—	

- Under 1 year of age ... ... 40,698

  Over 1 year of age ... ... 10,531
- (c) Care of Premature Infants.—There is no special provision made for the domiciliary care of premature infants, but liaison with the hospital is extremely close and all premature infants can be admitted without delay.
- (d) Supply of Dried Milks, etc.—The arrangement made with the Ministry of Food for distribution of welfare foods is that these will be given out by the local Food Office where this exists, and by the Child Welfare Clinics where there is no local Food Office. No arrangements are made by the Authority for any other supply of dried milk or nutrients.

(e) Dental Care.—Mr. A. J. Duncan, Chief Dental Officer, reports as follows:—

"During the year two dentists were appointed to undertake the dental examination and treatment of expectant and nursing mothers and children under school age, bringing the number of dentists employed by the County Council to fourteen. In order to provide continuity of service, each dentist is allocated an area in which he is responsible for all dental services to school children and those of the priority classes.

Dental examination and treatment were offered to patients presenting themselves at various clinics. It is intended to co-operate with the Maternity Staff of the Hospital Boards at Clinics throughout the County in an endeavour to examine dentally all new cases enrolled at the pre-natal clinics and to point out the advantages of a healthy mouth and of the benefits of dental treatment in early pregnancy both for the mother and the unborn child.

Pre-school children are referred by the Clinic Doctor or Nurse and should be sent to the nearest school where the dentist is operating, when immediate treatment can be given.

#### EXPECTANT AND NURSING MOTHERS-

Number of Number of Number of	Patients	requiring	Treatr		 54 51 31
Number of	Patients	Treated		 	 31
Dentures				 	 4
Fillings				 	 15
Extractions					 11
Dressings					 5
Scalings				 	 3

# PRE-SCHOOL AGE CHILDREN-

Number of Patients Examined	 	10
Number of Patients Requiring Treatment	 	10
Number of Patients Treated	 	10
Temporary Teeth Extracted	 	11
Dressings	 	2
Gum Treatment	 	1

(f) Other Provisions.—There are two residential nurseries in the County, one at Irvine and the other at Kilwinning. These nurseries are primarily provided for children of unmarried mothers or mothers who have to go out to work because they are the breadwinners of the family.

# (2) Use of Clinic Premises by General Practitioners and Hospital Board Personnel.

The policy of the County Council is to allow their clinic premises where ever possible to be used by Regional Hospital Board Medical Staff and by General Practitioners. The new Clinic at Beith is now in use by the local general practitioners.

The extent to which the clinics are used by General Practitioners and Regional Hospital Board Staff is shown in the following list:—

# (a) BY GENERAL PRACTITIONERS—

Clinic Premises, 9-10 a.m. and 5-6 Dr. A. Watt.
James Street, p.m. daily. Dr. J. S. Gordon.
Dalry. Dr. W. M. Wilson.

Clinic Premises, Every Friday, Dr. A. Begg and Kirkland Road, 2 p.m. to 4 p.m. Dr. G. R. How. Kilbirnie.

Clinic Premises, Mon., Wed., Fri., Adj. to Janet 10.15 to 11.15 a.m. Dr. W. L. Kennedy. Cott., Annbank. Tues. and Thurs., 5-6 p.m.

Do. Mon., Wed., Fri., Dr. W. J. Scott. 9.30 to 10 a.m.

Clinic Premises, Mon., Tues., Wed., Dr. I. F. Somerville. Strand, Beith. Fri., 6 p.m.-8 p.m. Dr. W. Jamieson. Sat., 2 p.m.-4 p.m.

Do. Mon., Tues., Thur., Dr. J. S. Maedonald. Fri., 2-3 p.m. and 6-7 p.m. Wed. and Sat., 10-11 a.m.

# (b) BY REGIONAL HOSPITAL BOARDS PERSONNEL-

Clinic Premises, Every Monday, Physiotherapist. King St., Ayr. 1.30 to 4.30 p.m.

Do. Every Monday Ophthalmic Specialist.
morning and
Thursday afternoon.

Do. Every Tuesday and Orthoptist. Wednesday (full day).

Clinic Premises, Millbank, Cumnock.	Second and fourth Thursdays monthly at 2.30 p.m.	
Do.	Fourth Wednesday, 10 a.m12.30 p.m.	Physiotherapist.
Do.	Monday afternoons (when required) and Thursday mornings.	Ophthalmic Specialist.
Medical Room, High School, Dalry.	When required.	Ophthalmic Specialist.
Clinic Premises, Wesley Place, Girvan.	When required.	Ophthalmic Specialist.
Do.	Tuesday and Thursday mornings	Physiotherapist.
Clinic Premises, 117 Bank Street, Irvine.	Every Thursday morning.	Ophthalmic Specialist.
Clinic Premises, Kirkland Road, Kilbirnie.		Ophthalmic Specialist.
Clinic Premises, Ladyford Ave., Kilwinning.	Every Thursday at 1.30 p.m.	Physiotherapist.
Do.	Every Monday, 2-4 p.m.	Paediatrician.
Clinic Premises, Moorburn Road, Largs.		Orthopaedic Surgeon.
Do.	As required.	Ophthalmic Specialist.
Do.	Second Thursday each month (full day), and fourth Thursday each month (afternoon)	Ear, Nose and Throat Specialist.

Clinic Premises, Every Monday and Orthoptist. Campbell Ave., Thursday (full day). Saltcoats.

Do. Every Friday Ophthalmic Specialist. morning.

# (3) Domiciliary Midwifery.

All midwives employed by the County, with the exception of one who is due to retire in the near future, have been trained in the administration of gas and air, and this is in constant use by these midwives.

The following are the statistics regarding midwifery in the form prescribed by the Department of Health:—

(i) (a) Total number of Births occurring in the area during year—that is before correction for mother's residence—

Live Births	 	 	4,150
Still Births	 	 	119

TOTAL ... 4,269

- (b) Total number notified to the Medical Officer of Health ... ... 4,214
- (ii) Total number of Births occurring in Institutions (including private maternity homes)... 2,926
- (iii) Total number of Births occurring at home-

Live	 	 	 1,271
Still	 	 	 17

TOTAL ... 1,288

(iv) Number of Births in (iii) classified to show nature of attendance at birth—

	Total.	1,286	1	1	2	1	1,288
Ses.	All Other Cases.	1	1	1	1	1	1
iliary Ca	Without Doctor or Midwife	1	1	1	1	1	1
Other Domiciliary Cases.	Midwife alone (no Doctor Engaged)			1	1	1	1
00	Doctor and Midwife Engaged		1		1	1	1
Cases dealt with under Section 23 (2) of the National Health Service (Scotland) Act, 1947.	Midwife Alone (no Doctor Engaged).	9	1	1	-	-	9
	Doctor Engaged and not Present at Confinement.	918	1		ı	ı	918
Cases dealt of the Nation	Doctor Engaged and Present at Confinement.	362				1	362
		(a) Midwives Employed by the Authority (including those engaged on a fee-per-case basis)	(b) Midwives Employed by Voluntary Organisations under arrange- ments made by the Authority	(c) Midwives Employed by Hospital Boards of Management under arrangements made by the Authority with the Regional Hospital Board	(d) Private Practising Midwives	Other Cases	Totals

(V)	Medical Aid—	
	(a) No. of cases in which medical aid was summo during the year under Section 14 (1) of Midwives (Scotland) Act, 1951, by a Midwif	the
	(i) For Domiciliary Cases 6	otal
	(ii) For Institutional Cases —	6
(vi)	Administration of Analgesics—	
	(a) No. of domiciliary midwives in the area qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board for Scotland (including superintendents, non-medical supervisors of midwives, midwife teachers, midwives employed by the local Health Authority and by voluntary organisations, private practising midwives and hospital midwives undertaking domiciliary cases under arrangements made by the local Health Authority and the Regional Hospital Board, but excluding pupil midwives undergoing training on the district)—	
	(i) No. in (a) employed on local Health Authority work 68	
	(ii) No. in (a) not employed on local Health Authority work —	68
	(b) No. of domiciliary midwives who received their training during the year	Nil
	(c) No. of sets of Apparatus for the administration of gas and air in use in the area at 31/12/53—	
	(i) No. in (c) in use by domiciliary midwives employed on Local Authority work (including those in use by hospital midwives undertaking domiciliary cases)  44	
	(ii) No. in (c) in use by domiciliary midwives not employed on local Health Authority work	

Nil	ets on order at 31/12/53 (four in stock)	(d)
	cases in which gas and air was nistered by midwives in domiciliary ice during the year (including cases ded by hospital midwives under- g domiciliary cases)—	(e)
	Then doctor was not present at delivery 308	
427	Then doctor was present at delivery 119	
	f cases in which pethidine was histered by midwives in domiciliary ice during the year (including cases ded by hospital midwives under- g domiciliary cases)—	( <i>f</i> )
	Then doctor was not present at delivery 403	
586	Then doctor was present at delivery 183	
49	s in use by Midwives at 31/12/53 wo privately-owned by District Nurses)	
	<i></i>	Additional Inf
	s—	Institutiona
1,770 998 108 50	ternity Home	Kilwinn Davidso

### (4) Health Visiting.

The following are the number of visits paid by Health Visitors during the year:—

		Number Visited.	Total Visits.
*Expectant Mothers	 	 	_
Infants	 	 4,375	35,682
Children (1-5 years)	 	 16,781	45,544
Tuberculosis Patients	 	 1,050	6,064
Other Cases	 	 _	-

\*All visits in this category were paid by Health Visitors/Midwives who attended the confinement. The total number of visits was 35,854.

# (5) Home Nursing.

(i) Number of cases attended by District Nurses in their capacity as Home Nurses ... 8,167

(ii) Number of visits paid by Nurses to these cases 134,714

The number of elderly patients (those aged 65 years or over) included in the former figure was 2,454. The total number of visits paid to these elderly patients was 66,793.

Nurses Homes and Clinics.—The following premises have been completed:—

Date of Approval by Department of Health.

Hurlford-Nurse's House May, 1949. Occupied Sept., 1953.

The following have been approved and progress is indicated:—Dailly—Nurse's House March, 1951. Nearing completion.

Dalmellington — Nurse's

House and Clinic ... May, 1949. Site negotiations in progress.

Largs—Nurse's House... August, 1950. Nearing completion.
Muirkirk—Nurse's House

and Clinic ... ... December, 1953. Working drawing being prepared.

New Cumnock — Child

Welfare Clinic ... December, 1953. Working drawing being prepared.

Newmilns—Nurse's House

and Clinic ... ... July, 1951. Site negotiations in progress.

Stewarton—Nurse's House

and Clinic ... ... August, 1950. Nearing completion.

The approval of the Department of Health is awaited for the building of a Child Welfare Clinic at Mauchline.

# (6) Domestic Help Scheme.

Under the Council's Home Help Scheme which has been operating throughout the County since October, 1949, domestic assistance is given in circumstances of household difficulty owing to illness, old age or confinement. The numbers of households which have benefited from the Scheme during the past four years have been as follows:—

1949	85	1952	695
1950	388	1953	697
1951	524		

At 31st December, 1953, the number of Home Helps employed was 220, and the number of families served 237. A table showing the areas in which these families resided and the duration of help given is appended. The number of hours' attendance is carefully adjusted to actual need and varies from six hours to forty-eight hours weekly. The average is twenty-two hours weekly.

Of the 697 cases dealt with in 1953, 442 were on account of chronic sickness (including aged and infirm cases) and 103 on account of confinement.

It will be observed from the Table provided that, at the end of the year, the duration of help to 103 households exceeded one year. This figure represented 43% of the homes then being served. The proportion of such long-term cases has in fact been steadily increasing with the development of the Scheme. In the majority of these instances the household consists either of an aged couple or of an aged widow or spinster, who have no relatives available to assist, and who are entirely dependent on the services of home help though in a number of cases neighbours do lend some assistance. Many of these patients are entirely confined to bed or, if not bedridden, are in such poor health that they cannot cope with the heavier part of their housework. Although not the intention of the Scheme that home help would be given for indefinite periods, it has been found necessary to give extended assistance in these cases.

Where the income of the householders permits a charge is made to cover the Council's outlay, plus a 5% administrative charge. The householder may, however, declare his full income, supported by wages certificates, and pay a proportion only of the Council's outlay according to his means. The minimum charge is now 10/per week. At the end of the year it was calculated that 76% of those making use of the service were paying the minimum charge.

AYR COUNTY COUNCIL HOME HELP SERVICE.

NUMBER 31 JASES DEALT WITH DURING 1953 AND DURATION OF CASES SERVED AT END OF YEAR.

Less than 1 month.	00   11   11   11   11   11   11   11	0.7
1-2 months.	- 0	10
2-3 months.		4
3-4 months.		And
Between 4 months and 6 months.	4	202
Between 6 months and 9 months.	0   0   0   0   0   0   0   0   0   0	50
Between 9 months and 1 1 year.	4	100
Between 1 year and 11 years.		0.00
Between 1½ years and 22 years.	1 11	101
Over 2 years.		0.4
No. of Cases at 31/12/53.	1 75 88 112 12 12 13 12 12 13 13 14 29 1	107
No. of Cases completed during year.	33 6 1 1 2 1 1 2 1 1 3 2 1 1 3 3 2 1 1 3 3 3 2 1 1 3 3 3 3	200
No. of Cases supplied with Helps during year.	88 88 82 74 44 72   2   11 8 13 8 8 8 8 8 1 1 1 2   2 2 2 3 2 4 4 7 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	211
No. of Cases at 31/12/52.	# #9111128889000011131   128 8 9 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-
District.	Annbank Ardrosan/Saltcoats/ Stevenston and West Kilbride. Auchinleck Beith. Catrine. Catrine. Catrine. Dalmellington. Dalwell Dreghorn/Springside. Catrine. Kilbirnie/Glengarnock. Kilmaurs/Crosshouse. Kilwinning. Largs. Maybole. Mauchline. Muirkirk New Cunnock. New Cunnock. Stewarton. Tarbolton. Troon.	

# (7) Vaccination and Immunisation.

(a) Vaccination.—Details of vaccinations notified during the year are as follow:—

	Primary Vaccinations.	Re- Vaccinations.
(1) Typical Vaccinia greatest at 7th to 10th Day	1798	165
(2) Accelerated (Vaccinoid) Reaction (5th to 7th Day)	18	74
(3) Reaction greatest at 2nd to 3rd Day	11	178
(4) No Local Reaction	62	55
	1,889	472

Of the 1,889 persons who received primary vaccination, 1,023 were children born in 1953 and 640 were children born in 1952.

# (b) Diphtheria Immunisation.

	$New \\ Inoculations.$	Maintenance Inoculations.
Pre-School Children	 2,981	_
School Children	 749	3,363
TOTALS	 3,730	3,363

(c) Whooping Cough Immunisation.—For a number of years material for immunising children against whooping cough has been supplied free of charge to private practitioners, and a fee of two shillings and sixpence per injection has been paid in respect of children inoculated during their first year. The County Council supplies combined diphtheria and whooping cough vaccine free of charge to general practitioners.

The following is a summary of completed cards received during 1953:—

		Yea	ur of E	Birth.		Number of Children
1953					 	376
1952					 	1648
1951					 	275
1950					 	89
1949					 	58
1948					 	45
1947					 	23
1946					 	7
1945					 	2
1944					 	2
Prior					 	3
	TOTAL		No.		 	2528

# (8) Prevention of Illness, Care and After-Care with Special Reference to Tuberculosis.

There were notified 181 cases of pulmonary tuberculosis and 26 of non-pulmonary tuberculosis. Excluding cases temporarily resident in the area and cases not confirmed, the new cases belonging to the area who came under notice during the year were 180 of pulmonary tuberculosis and 25 of non-pulmonary tuberculosis.

Pulmonary Tuberculosis.—Of the 180 new cases of pulmonary tuberculosis 71 were males and 109 were females. 83 per cent. (150) of these cases received institutional treatment during the year.

Including cases notified in previous years, 235 patients were admitted to Hospitals and Homes during 1953 as follows:—

Ayrshire Central Hospital, Irvine	 	150
Heathfield Hospital, Ayr	 	35
Glenafton Sanatorium, New Cumnock	 	32
Robroyston Hospital, Glasgow	 	1
Kaimshill Children's Hospital, Kilmarnock	 	15
Mearnskirk Hospital, Newton-Mearns	 	2
		-

There were 35 deaths, of which 15 (43 per cent.) occurred in institutions.

Non-Pulmonary Tuberculosis.—The 25 new cases of non-pulmonary tuberculosis are classified as follows according to the localisation of the disease:—

		No. of Cases.
Superficial Lymphatic Glands	 	4
Abdomen	 	2
Bones and Joints (excluding Spine)	 	7
Spine	 	2
Skin and Subcutaneous Tissue	 	_
Meninges	 	8
Genito-Urinary Organs Other Parts	 	2
Other rares	 	

Including cases notified in previous years 25 patients were admitted to Hospitals and Homes during 1953 as follows:—

Ayrshire Central Hospital and	Glenat	fton	Sanatori	um	8
Glasgow Royal Infirmary					1
Mearnskirk Hospital, Newton-					9
Robroyston Hospital, Glasgow					4
Heathfield Hospital, Ayr					2
Gateside Hospital, Greenock					1

25

There were 5 deaths, of which 3 occurred in institutions.

Preventive Care and After-Care.—Four Tuberculosis Nurses, a Welfare Officer and a Clerkess are engaged in the Council's Preventive Care and After-Care Service. Although on the staff of the Medical Officer of Health, all these are centred at the Area Chest Clinics and work under the direct supervision of Dr. J. T. Boyd, Area Supervising Tuberculosis Physician, with whom a close liaison is maintained.

Hospital Accommodation.—Dr. Boyd states that the total number of beds provided for adults in Ayrshire, including the two large Burghs, is 298 (137 for males and 161 for females), and that there are 32 beds for children suffering from primary infections. At no time during the year has the waiting-list given rise to concern.

B.C.G. Immunisation Scheme.—Dr. R. D. Whitelaw, Assistant Medical Officer, was appointed on 1/9/53 to carry out the County's Immunisation Scheme. For convenience, he is based at the Chest Clinic, Ayrshire Central Hospital.

In October a scheme for the inoculation of certain school children with B.C.G. was begun. Children born in the year 1940 were selected as the most suitable age group for this purpose.

The details of the scheme were explained in a circular to all the parents concerned and consent was obtained in a large majority of cases. These children received a preliminary injection into the skin in order to demonstrate whether or not they had acquired a degree of immunity to tuberculosis by natural means. Children who showed no reaction two days after the initial injection were given B.C.G.

Up to the end of the year 17 schools had been surveyed. The total number of children in the selected age group was 1,500. Of this number 1,133 were available by the consent of their parents (75·3%). Of these 106 were not included on account of absence and 13 had been previously tested, leaving a total of 1,014. The number tested who showed a positive reaction to the preliminary Mantoux test was 323 (31·8%). The number of children given B.C.G. was 691.

The percentage of Mantoux positive children in the various schools visited varied between 48.7% and 4.16%.

Statistics for the year 1953, in the form required by the Department of Health, are:—

	Tuberculin Tested.			ative ctors.	Vaccinated during 1953	
the said the ball of the said	M.	F.	M.	F.	M.	F.
(1) Nurses	_	128	-	10	-	9
(2) Medical Students	_	_	_		_	_
(3) Contacts	262	258	168	150	133	130
(4) Special Groups not included in (1) to (3) above—						
(a) School Leavers	481	533	311	380	311	380
(b) New Born Babies	-	-		in the same of	-	-
(5) Others	19	31	18	14	1	4

Domiciliary Treatment.—Cases suitable for treatment at home or awaiting admission to hospital were visited by the Tuberculosis Nurses, who paid 6,064 visits to 1,050 cases.

In addition to hospital visits the Welfare Officer paid 927 home visits and dealt with 435 persons who called for advice; 374 cases were referred to the National Assistance Board; 106 to the Ministry of Pensions and National Insurance, and 40 to voluntary organisations.

Supply of Milk.—The number of free milk vouchers issued was 604 covering some 13,500 gallons of milk at an approximate cost of £3,150.

Bed and Bedding.—Complete outfits of bedstead and bedding were issued on loan to 13 patients; 4 patients were granted articles of bedding only.

	$\begin{array}{c} On \\ Loan \ at \\ 31/12/52. \end{array}$	Issued 1953.	With- drawn 1953.	Written off.	Remaining on Loan at 31/12/53.
Bedsteads	22	13		5	30
Mattresses	25	14		6	33
Blankets	124	40		75	89
Sheets	115	30		75	70
Pillows	43	20		28	35
Pillow Cases	56	25	_	38	43

Housing.—Many Housing Authorities within the County made an effort to re-house patients suffering from Pulmonary Tuberculosis of a communicable type. This preventive measure greatly minimises the spread of infection to other members of the family.

Mass Radiography.—The Mass Radiography Unit carried out surveys in the Hurlford and Kilmaurs area between 13th and 28th January; at Glengall Mental Hospital between 2nd and 5th February; and at Prestwick Airport between 10th and 18th February. The following is an analysis of the survey:—

Number Examined  Number referred for Large Films  Number who did not re-attend  No abnormality	 1 004	Children. $ \begin{array}{c} 113 \\ 1 \\ - \\ 1 \end{array} $
Abnormality not significant— No further action— Tuberculous Non-Tuberculous	 19 16	

Significant Abnormalities—			
Lesions probably Tuberculous-			
For Treatment		3	_
For Observation		2	-
Lesions probably Non-Tubercule	ous	6	-
Cardio Vascular		4	-
Refused Further Investigation		- 10 900	-
Number Examined Clinically		26	_

Incidence of Pulmonary Tuberculosis in Beith.—In March it was reported by the Area Chest Physician that an unusual number of acute cases of pulmonary tuberculosis had occurred in a factory in this area during the past few months. In an effort to trace the source of the infection, the Manager requested a visit from the Mass Radiography Unit. This Unit stationed in Motherwell was not available at that time, but an arrangement was made whereby those employees who were willing were transported by 'bus to the Chest Clinic, Ayrshire Central Hospital. No further cases were revealed.

# (9) Control of Infectious Disease.

No major outbreak of notifiable infectious disease occurred in the County.

Incidence of Non-Notifiable Infectious Diseases Occurring in Institutions.—During August and September, 1953, a minor outbreak of Measles occurred in the Residential Nursery, The Moor, Irvine. There were 10 cases notified, 3 males and 7 females. All cases were removed to Ayrshire Central Hospital, Irvine.

A small outbreak of Measles also occurred in Hazeldene Children's Home, Kilwinning, during February and March, 1953. There were 8 cases notified, 4 males and 4 females. All cases were removed to Ayrshire Central Hospital, Irvine.

There was, in addition, a considerable number of Chickenpox cases in the Residential Nursery, The Moor, Irvine, during November and December, the total being 19 cases. These cases consisted of 8 males and 11 females.

Chickenpox and Measles are not normally notifiable in this County, but those occurring in Institutions are reported and, invariably, admitted to Ayrshire Central Hospital, Irvine.

(a) Diseases notified under the Infectious Disease (Notifications) Act, 1889, and subsequently confirmed :—

Smallpox and Cholera.—No case occurred of either disease.

Diphtheria (including Membranous Croup).—There were no cases of diphtheria during the year. This is the second year in succession that such has been the case.

The following are the cases and deaths since 1940 :-

Cases.	Deaths.		Cases.	Deaths.
1940 391	13	1947	40	5
1941 538	19	1948	17	_
1942 545	15	1949	7	1
1943 420	11	1950	1	_
1944 343	6	1951	1	_
1945 277	5	1952	_	_
1946 190	1	1953	_	_

Erysipelas.—The number of cases was 30, as compared with 26 in 1952. There were no deaths.

Scarlet Fever.—There were 288 cases, as compared with 487 in the previous year. This was the ninth year in succession in which there were no deaths from scarlet fever. The incidence varied from previous years in that in no particular area was there an undue number of cases at any given time.

Typhus Fever.—No case was reported.

Enteric Fever (including Typhoid and Paratyphoid Fever).—
One case of Paratyphoid occurred, as compared with two in the previous year. There were no cases of typhoid during 1953—two cases had occurred in the previous year.

Relapsing and Continued Fever.—No cases of continued fever occurred. There were two cases in the previous year.

Puerperal Sepsis.—One case occurred. The following are the cases and deaths since 1933, in five-yearly periods:—

Cases.		Deaths.		Cases.	Deaths.	
1933-37	. 75	27	1943-47	81	11	
1938-42	. 47	27	1948-52	7	1	

(b) Diseases notified in terms of Regulations of the Department of Health and subsequently confirmed :—

Puerperal Pyrexia.—One case was notified. During the previous year there were no cases notified.

Cerebro-Spinal Fever.—Thirteen cases occurred, one of which was fatal. These figures compare with 9 cases and 1 death in the previous year.

Poliomyelitis.—During the year 21 cases (12 males and 9 females) were confirmed as suffering from poliomyelitis. Fourteen of these had paralysis and seven were diagnosed as suffering from the disease by clinical and bacteriological findings, but did not have paralysis. There was one death (a boy aged 2½ years). The original diagnosis was altered in 13 other cases. These figures compare with 5 confirmed cases with paralysis, 2 cases without paralysis and 1 death in the previous year.

Major outbreaks of poliomyelitis occurred in 1947, when there were 87 cases and 3 deaths, and in 1950 when there were 42 cases and 7 deaths.

The distribution of the cases in 1953 was :-

Auchinleck 1	Kilmaurs 1
Beith 1	Mauchline 2
Crosshouse 1	Maybole 1
Cumnock 2	Monkton 1
Dalry 1	New Cumnock 3
Dunure 1	Prestwick 1
Girvan 1	Stewarton1
Glengarnock 1	Troon 1
Kilbirnie 1	

The age grouping is shown in the following table:-

	Under 1	1-5	5-10	10-15	15-25	25-35	35-45	45-65	Over 65
Male	2-0	4	6	-	1	1	_	_	_
Female	1	1	2	3	1			_	1

#### Seasonal Incidence :-

	No. of Cases.		No. of Cases.
		Tuly	
January		July	
February	-	August	. 2
March		September	. 4
April	_	October	. 5
May	_	November	. 5
June		December	. 2

# The following are the cases and deaths since 1940 :-

	Cases.	Deaths.		Cases.	Deaths.
1940	. 9	4	1947	87	3
1941	. 14	4	1948	6	1
1942	. 2	1	1949	15	1
1943	. 3		1950	42	7
1944	. 11	1	1951	11	1
1945	. 4		1952	7	1
1946	. 2	Declaration of	1953	21	1

Encephalitis Lethargica.—No case occurred of this rare disease. The last case notified was in 1934.

**Dysentery.**—There were 121 notified cases during the year, compared with 58 in the previous year.

There were two minor outbreaks of dysentery in Biggart Memorial Hospital Home, Prestwick, during the year. The first in January, involving 12 cases, and the second in June/July with 17 cases.

An outbreak of dysentery occurred in the Residential Nursery, Kilwinning, during May, when there were 21 cases.

During months of October, November and December an unusual number of cases of dysentery occurred in the Auchinleck/Cumnock area. There were 8 cases in October, 22 in November and 3 in December, making a total of 33 cases.

Ophthalmia Neonatorum.—The number of cases was 2, in which there was no loss of vision. One case occurred in the previous year. The number of cases of this disease coming under notice has been maintained at a very low figure in recent years. The highest number in any year was 43 in 1933. Since 1937 the figure has always been below 20 and in the last five years has been 1 in 1952, 1 in 1951, 3 in 1950, 4 in 1949 and 4 in 1948.

Acute Influenzal and Acute Primary Pneumonia.—The numbers were of the former 4 and of the latter 314. During the previous year the numbers were 13 and 444 respectively.

Malaria.—Six cases occurred compared with four cases in 1952.

Infective Jaundice and Plague.—Neither of these diseases occurred.

Tuberculosis.—Particulars are given under another heading.

#### (10) Mental Health Service.

- (a) Lunacy Cases.—The authorised Officers, appointed as approved by the Secretary of State, dealt with 65 admissions to the Mental Hospital during the year—(Males 34, Females 31).
- (b) Mental Patients under Guardianship.—Besides being visited at least twice yearly by or on behalf of the Authorised Officer, boarded-out Mental Patients are visited quarterly by Medical Officers on behalf of the Local Authority, and they are, moreover, periodically visited by Medical Commissioners from General Board of Control, usually once annually.

The following statistics, provided by the County Welfare Officer, give particulars of County Mental Patients in the care of Private Guardians as at 31st December, 1953:—

#### IN PRIVATE GUARDIANSHIP.

Where Boarded.	With Relatives.	With Strangers.	Totals.
Mental Defectives— Within the County Outwith the County In Care of Officers of the Welfare Home, Ayr, and the Cuninghame Home, Irvine	24 4	211	26 15
Certified Lunatics— Within the County Outwith the County	4	constant distribution	4 1
Totals at 31st December, 1953	33	36	69
Totals at 31st December, 1952	32	32	64

#### (11) Work under Nurseries and Child-Minders' Regulations Act.

No applications for registration under the above Act were received during the year. No licences were in force at the end of the year.

#### C.—PORT HEALTH ADMINISTRATION.

Seaports.—No special problems rose in connection with the administration of the Public Health (Ships) (Scotland) Regulations, 1952, at Ardrossan, Irvine and Troon. In no case was it necessary to detain the ship.

None of our three seaports is approved for the issue of deratisation certificates.

Airport.—At Prestwick Airport the work of Port Medical Officer and Medical Inspector of Aliens was carried out as in previous years.

No unusual problems were encountered during the year.

The scope of the work of the Medical Officer includes the administrative medical arrangements to deal with aircraft accidents on the airport or in the County area; the organisation of a First-Aid Centre within the airport; and the supervision of welfare arrangements for M.C.A. employees. The First-Aid Centre is in process of construction and a trained nurse will be on duty at all times after completion. These extra duties were proposed by the M.C.A. and agreement reached with Ayr County Council and the Department of Health.

During the year 4,931 civil and military aircraft arrived at Prestwick Airport. The passengers disembarked totalled 50,270 and 74,349 passengers landed in transit to other places.

#### D.-FOOD SUPPLY.

#### (1) Milk (Special Designations) (Scotland) Orders.

As in former years an average of six samples were taken from the milk supplies of the County's 1,562 designated producers and submitted for bacteriological examination with the following result:—

	Routine	s $Samples$	Consecutive		
Designation.	No. Taken.	No. Failing.	$No.\ Taken.$	No. Failing.	Failures (Routine or Repeat).
Certified	206	21	26	4	1
Tuberculin Tested	8227	946	1095	210	31
Standard	54	9	10	2	_ tennels

The incidence of samples failing to comply with the requirements of the above-mentioned Orders, namely, 12.4%, is still much higher than it should be and, when read as one with conditions prevailing on several of the farms concerned, clearly emphasises the need for increased effort on the part of many producers both in byre and dairy practice. To put it plainly, the Dairy Bye-Laws which, by this time should have become second nature to all Ayrshire farmers, are not being observed as they should be, and the Local Authority's answer to this must, of course, be "more farm inspections."

Some 1,900 such inspections made by Milk Officers during the year produced a variety of fairly obvious reasons for failure as may be expected. Several cases did arise, however (particularly where the Bacteriologist's findings showed the milk to have a low bacterial count with coliform bacilli present), which were not so easily cleared up, where, for example, methods of production were quite satisfactory, the trouble being eventually traced to the milk of one particular cow.

A Milk Officer quotes one such case where the search had been narrowed down to the milk from the first few cows milked, and in her own words "since two of these had suffered injuries to the udder, it was most surprising to find that the cause of all the trouble was an innocent-looking little heifer whose udder appeared to be perfectly sound."

It should be stated here that several producers in circumstances of a similar nature were given invaluable assistance by the advisory staff of the West of Scotland Agricultural College.

Encouraging features in the form of the new "in-can" milk cooler and the truly labour-saving milk-lift were reported from a number of farms, while on many others separate steam jets for more efficient sterilisation of milking machine clusters were fitted. Commendable enterprise was also shown by a few farmers who installed mechanical coolers despite the absence of "grid" electricity; unfortunately, these have not proved altogether satisfactory, a notable exception being the Diesel-powered direct expansion unit at Glastron Farm, Kirkmichael.

The tuberculin tested licences of three producers were suspended by reason of samples of their milk failing to meet the required bacteriological standard, while three further contraventions of a similar nature were reported to the Health Committee who issued final warnings to the producers concerned.

Biological Testing for Tuberculosis.—Forty-eight samples of milk were submitted to the Bacteriologist for biological examination, 47 being the milk of non-designated producers.

In no case was a positive result obtained.

The Scottish Milk Testing Scheme.—The following is a record of the number of failures recorded during the past three years on Ayrshire farm supplies tested at the various Creameries operating within the Scottish Milk Testing Scheme:—

Year.	Daily Platform Test Failures.	Weekly Resazurin Test Failures.	No. of Producers involved in Four or more Failures.
1951	82	120	3
1952	175	81	3
1953	207	91	4

Particularly significant is the continued rise in the number of Daily Platform Test failures with, of course, a corresponding increase in the amount of milk actually returned to producers as being unfit for the liquid milk market. While in odd cases these rejections were challenged by a farmer where, for example, "smell and flavour" were not very pronounced, it would appear that liability was generally accepted since the Milk Officer usually found that "milk was not properly cooled," "a few gallons had been held over from the previous day," "a cow was found to have an injured teat," "milk from newly-calved cows had been included in the bulk supply too soon, "" a large number of cows were drying-off," etc. As mentioned, cases did arise where failure was not traced to a satisfactory conclusion, no fault being found with the condition of milking equipment and the producer affirming that there had been no deviation from the usual methods of production or the normal feeding practice.

Rejected milk had usually been disposed of or had gone sour by the time the farm was visited, but one Milk Officer was able to intercept a consignment at a British Road Services Depot on the day of rejection and was of opinion that, if this could have been done more often, investigation at the farm would have been simplified.

Only two notifications of improperly cooled milk were received, both in respect of the same non-designated producer's supply, the temperature on each occasion being 80 degrees Fah. on arrival at the Creamery. While the installation of a surface water cooler in lieu of the shallow "bines" previously used replaced what was probably a lone relic of bygone days, such a step must surely be regarded as an intermediate one only, since it has long been obvious that the ordinary water cooler can not ensure efficient all the year round cooling.

#### (2) Ice Cream.

The administration of the Ice Cream Regulations is fully dealt with by the Sanitary Inspector in his Report. By the end of the year 90 premises were registered for manufacture, storage and sale of ice cream, 130 for storage and sale, 2 for manufacture and storage, 1 for manufacture only and 1 for sale only. In addition, 154 vehicles were registered as suitable for retailing ice cream.

#### (3) Meat and Other Foods—Clean Food.

These questions are dealt with by the Sanitary Inspector in his Report.

#### (4) Food Hygiene.

The Sanitary Inspector deals with this in his Report.

#### (5) Food Poisoning.

An outbreak of food poisoning occurred in Kilmaurs in June following a Sunday School trip to Saltcoats. There were approximately 30 cases with acute symptoms. These received medical treatment on their return to Kilmaurs. By the following day all had recovered and no further cases had appeared. Investigation indicated that the responsible agent was present in sandwiches prepared a day or two before by members of the organising party. This was confirmed by bacteriological examination. Contamination probably occurred because of the undue length of time which had elapsed between the preparation and consumption of the sandwiches.

An outbreak of food poisoning occurred among the guests at a wedding party in Glasgow on 18th July. Twelve of these came from Dalry and ten were affected in varying degree approximately seven hours after consuming the meal. Three were admitted to Ayrshire Central Hospital with acute symptoms. The others were treated at home and responded fairly quickly. The three cases were isolated in hospital for a prolonged period on account of the fact that they continued to excrete the responsible organism. All were eventually discharged well.

Another incidence of food poisoning occurred among some of the guests attending a wedding party at Motherwell in December. Two Ayrshire cases attending as guests were involved with the usual symptoms 24 hours afterwards. Both recovered within a few days. Bacteriological investigation confirmed that tinned stewed steak was the offending substance.

#### E.-MISCELLANEOUS.

#### (1) National Assistance Act, 1948.

Mr. Brown, County Welfare Officer, reports as follows:-

(Section 21).—Provision of Part III. accommodation under Section 21 of the Act is the responsibility of the County Welfare Committee.

Residential accommodation for persons who by reason of age, infirmity or other circumstances are in need of care and attention is provided in Cuninghame Home, Irvine, and Ayr Welfare Home and Hospital, Ayr. Cuninghame Home is under the management of the Committee of Management for Ayrshire Northern Hospitals and Ayr Welfare Home and Hospital is administered by a Joint Committee consisting of representatives of Ayr Council and Ayr Town Council.

Lainshaw House, Stewarton, was opened for the reception of residents in February, 1953, and Birkenward House, Skelmorlie, in April, 1953. At the end of the year there were 10 old people accommodated in Birkenward House and 26 in Lainshaw House. There is, in addition, an Old People's Home at Largs, accommodating six females.

(Section 29).—Welfare Services under this Section of the Act are also provided by the County Welfare Committee. As permitted under Section 30 of the Act, Ayr County Welfare Committee have appointed as its Agents the Ayrshire Mission to the Deaf and Dumb to promote the welfare of Deaf and Dumb within the area, and the Joint Committee for the domiciliary care of the Blind in South-West Scotland to carry out their functions on behalf of blind persons.

A Scheme has been approved by the Secretary of State for the welfare of crippled and handicapped persons, but at present no services are available for the exercise of powers under the Scheme.

(Section 37).—There are no registered homes for disabled or old persons within the area, controlled by voluntary organisations.

(Section 47).—Under this Section two applications (respecting the same person) have been made to the Court for removal and detention of persons requiring care and attention.

(Section 48).—Before admission to Part III. Accommodation of a resident, arrangements are generally made with relatives to safeguard any moveable property of the applicant, but if no such suitable provision can be made, steps are taken by the Local Authority to mitigate the loss or damage.

During the year there has been no occasion to deal with property in respect of persons admitted to Hospital, etc.

(Section 50).—Where a person has died or is found dead within the area, and there are no relatives or other person making arrangements for disposal of the body, the County Sanitary Department arrange the burial. During the year this Department has made burial arrangements in a number of cases.

#### (2) Nursing Homes Registration (Scotland) Act.

There were two registered Nursing Homes which were visited periodically. One has accommodation for 18 medical, surgical and maternity cases, while the other admits chronic sick cases only, having accommodation for 22.

#### (3) Health Education.

Dr. Stephen Young, Lecturer of the Scottish Council for Health Education, visited Ayrshire Schools in April, 1953. Illustrated health talks were given in 14 schools and 1,286 children attended.

In addition, Dr. A. G. Mearns, Medical Adviser, addressed the Parent Teachers' Association of Ardrossan Academy in March and the Troon Women's Citizens' Association in November on health subjects. Members of the Medical Staff gave talks to various Organisations in Troon, Tarbolton, Saltcoats and Ayr. The subjects of their addresses were "Accidents in the Home"; "General Health" and "Tuberculosis."

#### (4) Blood Transfusion.

Two visits were paid by the West of Scotland Blood Transfusion Unit to the Saltcoats area, where they were accommodated in the County Clinic premises at Campbell Avenue. One of these visits was in February, when blood was withdrawn from 76 donors. The second was in August when there were 88 donors.

#### (5) Chiropody Service.

The local branches of the Red Cross Society and the local Old People's Welfare Committees have organised a Chiropody Service at Galston, Largs, Kilwinning, Beith and Crosshouse. The Largs service is controlled entirely by the Red Cross, and the services at Kilwinning, Beith and Crosshouse by the local Old People's Committees. At Galston the scheme is organised by the Red Cross, working in close contact with the Welfare Committee. These services run by the Voluntary Associations have the approval of the Local Authority who give an annual sum to each area.

#### (6) Accidents in the Home.

During the year 1953, 72 accidents in the home were reported by District Nurses. Thirty-three males were affected and thirty-nine females.

The largest incidence was in the 1-2 age group, where 20 accidents occurred, closely followed by the 2-5 age group with 18. In the adult groups there were no accidents between 15 and 30 years; the largest number occurred over the age of 65 (6). Among adults, all but one case were females.

Scalds (37) were responsible for 51.5% of the accidents and burns (28) for 38.8%. The remaining 7 cases were occasioned mostly by falls, involving fractured bones in 2 cases (both over 65), and cuts or bruises in the remainder; an exception in this group was a girl aged 3 who caught her hand in a wringer.

There were 2 fatal accidents—one due to night clothes being set alight and the other because of scalding. Both died in hospital. 27.5% of accidents (20) were serious and 69.5% (50) were slight.

In only 4 instances was the mother employed in an outside occupation and of these in only one case was she not present in the house at the time of the accident. In another where the child was in the charge of a grandmother, an accident occurred while the child (aged 9) was alone in the house. In this case the child's clothing was ignited by a gas fire while she was preparing a meal. She required skin grafts following extensive burns.

The type of home did not appear to reduce the occurrence of accidents. Half of them (36) occurred in good homes, 37.5% (27) in average homes, and 12.5% (9) in poor homes.

The kitchen would appear to be the most dangerous room in the house, 38.8% (28) of the accidents occurring there. The living-room, 27.7% (20) ranks next in importance, followed by the scullery with 15.2% (11), a total of 81.7% (59).

The outstanding feature of the survey was that 90% of the accidents in the home during the year were due to scalds and burns.

Scalds, which were responsible for more than half the reported cases, were in the main produced by children spilling hot tea over themselves. One of the fatal cases occurred by this means. This frequent accident could in large measures be prevented if parents would take the trouble to keep vessels containing hot liquids out of the reach of young children by the adequate use of fireguards or by keeping them out of the kitchen or scullery while meals are being prepared; the presence of children in the kitchen at such times is dangerous for them and distracting for the mother who may herself be the victim.

Burns accounted for more than one-third of all cases. The second fatal case was caused by the child's nightdress being set alight by an unprotected fire. The result of this type of accident is always serious and often fatal. It is preventable by the constant use of a fireguard in the home. In this connection unguarded electric fires are especially dangerous for young children. This type of heating is usually more accessible to them and there is the added danger of electric shock. They should be guarded and young children not left in a room with such a fire unless an adult is present.

Lastly, it should be stressed that young children should never be left alone in the house even for a short period.

Details of Accidents Occurring in Ayr County (Landward Area and Small Burghs) During 1953.

	Total.	72	33	4 54	36 27 9	28 37 7	20 50	∞	17
	65 Years and Over.	9	9	11	5   1	2 3 1	8.8	2	2
red.	40-65 Years.	2	61	11	2	1 1 1	1	19	1
ent Occur	15-40 Years.	3	1 4	11	4-1	8-1	128		
m Accide	10-15 Years.	2	64	12	-   -	67	6		
n to who	5-10 Years.	13	10 00	80	10	ယ္လ	122	2	8
Age of Person to whom Accident Occurred.	2-5 Years.	18	8 10	17	378	∞ ∞ ≈ ≈	7 111	8	00
Age	.1-2 Years.	20	13	20	11 2	10	17	1	4
	Under 1 Year.	9	4.01	19	123	-4-	119		
		:	11	11	111	:::	:::	nent 	:
		:	11				:::	Permar	ospital
		Total Number of Accidents	Males Females	Mother in Employment Mother Not in Employment	Type of Home————————————————————————————————————	Type of Accident—  Burn  Scald Injury (including Fracture)	Result of Accident— Fatal Serious Slight	No. of Cases in which Permanent Deformity or Injury Resulted	No. of Cases Removed to Hospital

Ayr County (Landward and Small Burghs), Year 1953.

No. of Accidents Classified by Size of House and Number of Inmates.

No. of	No. of Rooms in House.											
Inmates	1	2	3	4	5	6	7 or over.					
1	1						_					
2	1		3		1		_					
3	2	11	1	2		-	-					
4	2	4	1	3	-		_					
5	1	2	4	5	1	_	_					
6	1	2	1	5		-						
7		2	1/2_0	4		1	-					
8	-			3	121	-	-					
9	_		1	2	1	-	_					
or over.	_	_	_	2	2	1						

#### F.—GENERAL SANITATION.

General sanitation is dealt with fully in the Reports of the County Sanitary Inspector and the Sanitary Inspectors of the Burghs of Ardrossan, Cumnock, Darvel, Galston, Girvan, Irvine, Kilwinning, Largs, Maybole, Newmilns, Prestwick, Stevenston, Stewarton and Troon.

	Total— Landward Area and Small Burghs.	35 11	2012
	Troon		111
	Steuanon	111111111111111111111111111111111111111	202
	-uopusasis	8-1111111111111111111111111111111111111	70
	Saltcouts.	2	113
	Prestuciek.	-	147
	Neumilns.	-	44
BURGHS	Maybole.	-	36
ALL	Largs.	-	151
MD SM	Kilwinning.	03	29
REA A	.snivr1	801	104
- A	direan.	01	99
TABLI	Galston.		46
1	Darrel.		41
F DEATH	Cumnock.	-:         9  -   9	20
CAUSES OF	Ardrosan.		63
CAU	County Landuard .	Total	1040
	Causes of Death.	Tuberculosis of Respiratory System  Tuberculosis, other forms Syphilis and its sequelae.  Typhoid Fever (including Paratyphoid).  Dysentery, all forms Diphtheria Whooping Cough. Whooping Cough.  Measles Other Infections and Parasitic Diseases. Malignant Neoplasms.  Malignant Neoplasms.  Benign and Unspecified Neoplasms.  Diabetes Mellitus.  Malignant Lesions affecting Central Nervous System System Non-Meningococcal Meningitis.  Non-Meningococcal Meningitis.  Other Diseases of Nervous System Chronic Rheumatic Heart Disease Chronic Rheumatic Heart Disease Other Diseases of Heart Disease.  Other Diseases Other Circulatory Disease.  Hypertension without Heart Disease Other Circulatory Disease.  Preumonia (except of newborn).  Brounchitis.	Carry forward

TABLE 1.-Continued.

CAUSES OF DEATH-LANDWARD AREA AND SMALL BURGHS-Continued.

	46	
Total— Landward Aren and Small Burghs.	2162 110 110 111 110 110 110 110 110 110 11	2,672
Troon.	F	135
Steudrion.	8-111111-11 1111111-1-1-1	34
·uopsiisasyS	501	81
Salteonia.	81	131
Presturick.	2-1-1	169
Neumilus.	211-12-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	54.
Maybole.	8	45
Larga.	2     1	167
Kilwinning.	8-1-1111111111-1-1	65
.sniviI	104	132
dirran.	801	78
Galston.	\$11111-11111 III- IIIIIIIII	48
Darrel	4	47.
Cumnock.	211111111111111111111111111111111111111	- 99
Ardrossan.	8	85
County Landuard.	1040 1000 1000 1000 1000 1000 1000 1000	1,248
Cauxes of Death.		ALL CAUSES

TABLE IL.

Births and Deaths in the County and Burghs.

		1.													
	1212	Uncertified Causes.	14	1	-	1 1	00	0	1	1-	1	01	01	00	35
	Causes.	All Other Certified (	128	15	010	0 01	121	000	12	30 IC	0	9	0.0	00 00	1223
	- marin	Violence.	53	00	4.	1	00 (	20 01	4	00 -	10	00	24 0	14	103
	· waysag as	454	88	30	18	25	00 00	87	11	00	22	50 00	100	420 476 1010 103 253	
	System	Diseases of Mervous	252	6	9	* [	=	4 00	53	20 00	23	26	27 0	10	761
		Cancer.	206	15	60	0 00	1-1	14	25	9 6	23	22	15	20	1204
	68, 88	Influenza.	64	1	1	1	1	11	1	11	1	01	1	11	1
	waste un	Diseases of Respirate	44	1	03.7	* 10	च	0 01	01	4-	12	04	-	03	91
uses		Pneumonia.	29	00	-	- 01	4	100	1	- 1	1	00	1	00	53
d Ca	Tuber- culous Diseases.	Non-Pulmonary.	6.1	-	1	11	10	1 1	1	11	1	1	-	11	10
joine		Pulmondry.	14	1	1	-	01	20 01	1		1	00	00	-	35
Sub-	Digestine. Diseases.)	Other Digestive Diseases.	38	-	1-		00 1	1 67	2	10	2	1	24 7	1 4	99
rom	Dige Dise	Diarrhoea.	10	1	1	11	Н	11	1	10	1	1	1	11	10
Mortality from Sub-joined Gauses.		Other Puerperal	-	1	1	11	1	11	1	11	1	1	1	1-	61
Torta	Maternal Causes.	Puerperal Ferer.	1	Ī	1	11	Ī	11	1	11	1	1	1	11	T
7		4	1	1	11	1	11	1	1.1	1	1	1	11	4	
		1	1	Ī	11	1	11	1	1.1	1	1	1	11	-	
	Cerebro-Spinal Fever.			1	Ī	11	1	11	1		1	T	1	11	-
	id Perers.	1	1	1	11	1	11	1	11	1	1	1	11		
		1	1	1	11	1	11	1	11	1	1	1	11	- 1	
		-1		1	11	1	11	1	11	1	1	1	11	1	
		Diphtheria.	1	1	1	11	1	11	1	1.1	1	1	1	11	1
		Small pox.	1	1	1	11	1	11	1	11	1	1	1	11	1
7	.sbr	15 Years and Upwa	14 1149	68	553	48	70	63	164	2000	163	123	40	133	20 2394
Deaths at Sub- joined Ages.		5 and under 15.		1	34	11	-	11	1		1	1	-	1	
to the	28398	I and under 5.	12	-	-		1	21						-	23
Join		Under 1 Year.	3 73					- 01					0	_	135
		At all Ages.	58 1248	00	20 4	4.4	7	132	16	4 10	169	131	000	135	257
		Still-Births.						44		1		9		03	102
		Live-Births.	2253		4/5	8 2		138		112			_	132	4405
		706470	730	259	191	487	1,783	610	638	1,039	464	860	2,995	718190	
	76	Estimated Population	125,212 706470 2253	9,072	4,790	4,628	5,904	6.831	7,920	4,848	11,299	13,387	9,457	9,875	238,912 718190 4405 102 2572 135
		County- Landward	Burghs— Ardrossan	Cumnock	Galston	Girvan	Kilwinning	Largs	Maybole	Prestwick	Saltcoats	Stevenston	Troon	County-Landward and Small Burghs	

TABLE III.

Density of Population, Birth Rate, Infantile and Other Death Rates.

1	ſ	.esitesta.	0.423	0.991	0.835	0.306		0.889	0.199	0.293	0.505	619	249	185	808	911	11.00	105	31
	-	system.		688 0.8		788 0.8									38 0.508		ó	39 0.4	27 0-48
	1	3.626	0	9	8					77					9.48	4.08	7.089	4.227	
	·uis	Diseases of Nervous System	2.013		1.258		2.877	1.863	1.594	1.171	3.662	1-652	4.351	2.036		2.326		1.924	1.992
		Cancer.	1-645	1.658	1.879	2.450	1.729	1.186	1.794	2.049	3-157	1.858	1.450	2.036	1.643	1.586		2.025	1.758
		.nsnslin1	0.016	0-110	1	0.306		1	1	1	1		1	0.080	0.149	1	1	1	0.050
		Diseases of Respiratory System.	0.351	0.110	0.418	1.225	1.080	0.677	0.332	0.593	0.258	0.826	0.242	1.062	0.149	901.0	1	0.505	0.381
		Pneumonia.	0.232		0.500				0.199	1			1	0.080	0.224	0.106	1	0.304	).222
	Tuberculous Diseases.	· Nonomut-no N	0.016	1	1	1	1	1	0-133	1	1	1	1	1	1	0-106	_	1	0.021 0.222 0.381 0.029 1.758 1.992
	Tuber	-Minonaly-	0-112	0.110	0.500	1	0.216	0.339	0.199	0.298	0.126	0.206	0.242	080+0	0.224	0.317	1	101-0	0.146
1,000 from	Digestive Diseases.	Other Digestive Diseases.		1	1		0.216	0.508			1.631		0.483	00		-	608-0	0.402	0.276
1,000	Dige Dise	Diarrhoea.	0.040 0.303	1	1	1		0.169	1	1	1		0.483	0	0.075	1	1	1	0.048
Rate per		Whooping Cough.	0.032	1	1	1	1	-	1	1	1	1	1	-	-	1	1	1	
Death R	dses.	Measies.	0.008	1	1	1	1	1	1	1	1	1	-	1	1	1	1	1	0.004 0.004 0.017
D	The Principal Zymotic Diseases	Cerebro-Spinal Fever.	0.008	1	1	Ĭ	1	1	1	1	1	1	1	1	1	1	1	1	0.004
		Enteric and Paratyphoid Ferers.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
		Typhus Fever.	1	-	1	1	1	1	1	1	1	1	1	!	1	1	i	1	1
		Scurlet Fever.	1	-	1	1	1	1	1	1	-	1	1	1	!	1	1	1	1
		Diphtheria and Croup.	1	-	1	1	1	1	1	1	1	1	1	1	1	I	1		1
		Small pox.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1	1
		All Causes.	196-6	9-039	11.691	14.395	10.372	13.21I	8.770	9.515	21-086	0.292	13.053	4-957	9.786	8-565	0.484	13-671	10-765
	98 F	Deaths under I Year of per 1,000 Births.	62	100	8					_				_	_	_	_		31
, si	nia 0	Still-Birth Rate (per 1,00 including Still-Births).	25	20	47	19	24	18	133	23	17	1:	12	21	20	30	1	15	23
00	ber 10	Malernal Mortality Rate ( births including still-birth	0-43	1	1	1	1	1	1	1	1	1	1	1	1	1	1	7.46	-44
		18.0	25.52	25.7	9.01	9-11	4.71	20-1	20.02	6.4.3	23-1	1.0	0.17	7.17	6-9		-	0-33 18-4 0-44	
		0.18		18.49														0.33 1	
			-						******	*****		******	*						
		ward	88ап	ock		)D	D		nning		ole	ulins	V10K	313	Bron	rton		Landw.	
		Area	County- Landward	Ardrossan	Cumnock	Darvel	Galston	Girvan.	Livine	KIIWIDDID	Largs	Maybole.	Newmins	Frestwick	Sailteoats.	Stevenston	Stewa	Troon	County-Landward
		0 #	-															2 a	

TABLE IV.

Deaths at Different Ages and Percentages of Total Deaths.

							Per	centage.	
	Total Deaths.	Deaths under 5.	Deaths 5 and under 15.	Deaths 15 and under 65.	Deaths 65 and Upwards.	Under 5	5-15.	15-65.	65 and Upwards
County-									
Landward.	1248	85	14	386	763	6.8	1.1	30-9	61.2
Burghs-					may h pa	pay-bas		10	
Ardrossan.	82	13	1	24	44	15-8	1.2	29.3	53.7
Cumnock	56	1	2	18	35	1.8	3.6	32.1	62.5
Darvel	47	1		13	33	2.1		27.7	70-2
Galston	48	2		15	31	4.2		31-3	64.5
Girvan	78	8	101	18	52	10.3	0.000	23-1	66-6
Irvine	132	9		47	76	6.8		35 6	57-6
Kilwinning	65	2		23	40	3.1		35-4	61-5
Largs	167	3		37	127	1.8		22.2	76 0
Maybole	45	6	1	9	29	13.3	22	20 0	64.5
Newmilns.	54	4		7	43	7.4		13.0	79 6
Prestwick.	169	6		39	124	3.5		23.1	73-4
Saltcoats	131	8		45	78	6-1		34.4	59.5
Stevenston	81	6	1	29	45	7.4	1.2	35.8	55.6
Stewarton.	34	2	1	11	20	5.9	2.9	32.4	58.8
Troon	135	2		35	98	1.5		25.9	72.6
County_									
Landward and Small Burghs	2572	158	20	756	1638	6.1	0.8	29.4	63.7

#### TABLE V.

	Infantile Morta	ality.			Rate per
(1)	CLASSIFIED ACCORDING TO AGE GROUP	s :—	1	Deaths.	
	Under 1 Week			85	19-3
	1 Week and under 4 Weeks			8	1.8
	4 Weeks and under 3 Months			23	5.2
	3 Months and under 6 Months			14	3.2
	6 Months and under 12 Months			5	1.1
(2)	CLASSIFIED ACCORDING TO CAUSES OF	DEATH			
	Pulmonary Tuberculosis			-	181 - mile
	Whooping Cough			3	0.7
	Meningococcal Infections			_	1917 - 1917
	Non-Meningococcal Infections			_	to _long
	Pneumonia (all forms)			19	4.3
	Diarrhoea			5	1.1
	Congenital Malformations			24	5.5
	Birth Injuries, Post-natal Asphyxia Atelectasis	and		31	7.0
	Other Diseases peculiar to early infa	ney		43	9.8
	Violence			1	0.2
	All other causes			9	2 0

TABLE VI.

Infectious Diseases-Year 1953.

ed.		Whooping Cough.	399	22   2   11   11   11   11   11   11	549
stat		Cerebro-Spinal Fever.	12	111111-11111	00
ase		Encephalitis Lethargica.	1	11111111111111	1
dise		Acute Polioencephalitis.	1	1111111111111111	1
rom		Acute Poliomyelitis.	17	11111111111111	21
ng f		Acute Infective Juundice.	1	111111111111111	1
suffering from disease stated.	(sldnit	Pneumonia (not otherwise not	12		15
as su		Acute Influenzal Pneumonia.	-		4
him a		Acute Primary Pneumonia.	163	000000   10441 44100 1100 1100 1100 1100	314
		Dysentery.	50		121
ted 1		Malaria.	4		9
cepl		Ophthalmia Neonatorum.	н		01
nd a		Puerperal Pyrexia.	г	!!!!!!!!!!!!!!!!!!	1
h ar		Puerperal Fever.	1	111111111111-1	1
fealt	sis.	Non-Pulmonary.	10		25
of F	Tuber-	Pulmonary.	06	51112221122487777	180
icer		Continued Pever.	1	ШИППППППППППППППППППППППППППППППППППППП	1
1 0 ff		Relapsing Fever.	1	111111111111111	1
dica		Enteric Fever.	н	HIIIIIIIIIIII	1
Me		Typhus Fever.	1	111111111111111	1
fthe		Scarlet Fever.	119	20 11 10 10 10 10 10 10 10 10 10 10 10 10	288
ge o		Erysipelas.	022		30
wled	Croup.	Diphtheria and Membranous	1	1111111111111111	1
Kno		Cholera.	1	111111111111111	1
the 1		zodllom2	1	111111111111111	1
Number of Cases coming to the Knowledge of the Medical Officer of Health and accepted by			County— Landward	Ardrossan Cumnock Darvel Galston Girvan Frime Kilwinning Largs Maybole Newnilns Prestwick Saltcoats Stevenston Stewarton Troon	County Landward and Small Burghs

TABLE VII.

Principal Infectious Diseases Confirmed Monthly in the County and Small Burghs.

Total Cases.	1	T	121	30	288	T	-	1	-	13	21	180	25	681
Dec.	-	1	7	3	34	1	-	1	1	1	8	17	60	67
Nov.	-	1	23	7	37	1	-	-	1	61	5	21	63	86
Oct.	1	-1	10	1	23	1	1	1	1	2	5	18	1	61
Sept.	1	1	2	3	27	1	1	1	1	1	9	111	2	51
Aug.	1	1	1	3	20	1	1	1	1	1	1	8	01	35
July.			12	2	. 25	1	-	1	1	1	1	14	1 .	55
June.	- 1	1	10	5	19	-	1	1	1	1	1	11	7	49
May.		-1	23	8	27	1	1	1	1	7	1	13	1	70
April.	1	1	10	1	23	1	I	1	1	-	1	22	61	53
Mar.	1	1	3	1	20	1	T	1	1	60	1	16	1	43
Feb.	1	-1	6	2	19	-1		1	1	2	1	16	1	49
Jan.	1	1	16	3	14	1	1	1	1	1	L	13	2	20
Diseases.	Smallpox	Diphtheria and Membraneous Croup	Dysentery	Erysipelas	Scarlet Fever	Typhus Fever	Typhoid, Paratyphoid, and Continued Fevers	Puerperal Fever	Puerperal Pyrexia	Cerebro-Spinal Fever	Acute Poliomyelitis	Tuberculosis-Pulmonary	Non-Pulmonary	TOTAL

TABLE VIII.

Infectious Diseases-Hospitals and Cases Isolated in them-County and Small Burghs.

Total Admittea	173	462	389
Spinal Spinal Fever. Dysentry Admittea	852	83	81
	12	12	12
Puerperal Fever and Puerperal Pyrexia.	1		1
Typhoid, Paratyphoid and Continued Fevers.	1	1   -	1
Acute Poito- myelitis.	22	22	21
Scarlet Fever.	49	337	269
Erysipelas.	9	9	4
Diphtheria and Membranous Croup.	1		
Smallpox.		1	
Hospitals.	Ayrshire Central Hospital, Irvine	Heathfield Hospital, Ayr  Totals	Cases in which Diagnosis is Confirmed

TABLE IX.

INFECTIOUS DISEASES.—Return of Cases of Infectious Diseases Confirmed during the year ended 31st December, 1953, by Ages.

					At Age-Years.	78.				
	At all Ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	Cases Removed to Hospital.	Cases not Removed to Hospital.
Carehro-Sninsl Facer	100	T	8	6		1			10	-
Chickenbox	1	1	, 1	1	1	1		1	7	1
Cholera	1	1	1	1	1	1	1	1	1	1
Continued Fever (Undulant)	1	1	1	1	1	1	1	1	1	1
Diphtheria	1	1	1	1	1	1	1	1	1	1
Dysentery	121	00	52	27	13	14	00	4	81	40
Encephalitis Lethargica	18	1	1	1	1	1	1:	1'	1.	18
Erysipelas	30	1	1	1	1	7	14	7	4	56
Jaundice, Acute Infective	10	1	1	1	1 9	1	1	1	1.	1.
Malaria	0	1	1	1	21	7	1	1	9	1
Onbthalmia Naonatorum	10	16	11		11	1	1	1		10
Placine	1	1								1
Pheumonia, Acute Influenzal	4	1	11		0		-	-	00	-
Pneumonia, Acute Primary	314	36	65	44	24	53	52	40	278	36
Pneumonia (not notifiable)	15	1	6	cı	1	1	1	67	14	1
Poliomyelitis, Acute	21	1	9	11	01	1	1	1	21	1
Puerperal Fever	1	1	1	1	1	1	1	1	1	1
Puerperal Pyrexia	1	1	13	1	1	1	1	1	1	1
Scarlet Fever	288	1	101	173	12	27	1	1	569	19
Smallpox	1	1	1	1	1	1	1	1	1	1
Typhoid Fever	I	1	1	1	1	1	1	1	1	1
Paratyphoid " A "	1	1	1	1	1	1	1	1	1	1
Paratyphoid "B"	1	1	1	1	1	1	1	1	1	1
Typhus Fever	1	1	1	1	1	1	1	1	1	1
Whooping Cough	646	69	296	190	1	co	1	1	1	1
Total	1366	111	535	451	56	86	7.9	55	210	656

TABLE X.

TUBERCULOSIS-STATISTICAL RETURNS, 1953.

1.-Return of Cases of Tuberculosis Notified during the year.

				Number of Cases notified as suffering from Tuberculosis.	f Cases m	otified as	suffering	from Tub	erculosis.				notified in
						Age Groups.	roups.					Casse	year and removed to
		Under 1.	Under 1. under 5. under 10. under 15.	5 and under 10.	10 and under 15.	15 and under 25.	25 and 35 and under 35. under 45.		45 and under 65.	65 and upwards	Total.	removed to Hospital.	for the first time during 1953
	Males	1	တ	01	10	28	12	00	11	03	72	59	4
Respiratory	Females	1	1	2	1	53	26	10	9	1	109	16	30
	Total	1	*	7	12	81	88	18	17	00	181	150	12
					-			-					-
	Males	1	1	1	03	4	09	1	1	1	12	2	1
Non-Respiratory	Females	1	64	1	1	7	1	60	01	1	14	6	1
	Total	1	00	1	01	11	60	00	01	1	26	. 16	1
eaniratore	Males	01	4	62	7	67	15	00	11	61	84	99	10
Non-Respiratory	Females	1	00	5	7	09	26	13	00	1	123	100	00
	Total	01	-	80	14	92	41	21	19	63	207	166	13

TABLE X.-Continued.

2.-Return of Cases notified during the year in which Diagnosis of Tuberculosis has been confirmed.

				Numb	Number of Cases Diagnosed as Suffering from Tuberculosis.	Diagnosed a	s Suffering.	from Tuberc	culosis.		
						Age G	Age Groups.				
		Under 1.	1 and under 5.	5 and under 10.	10 and under 15.	15 and under 25.	25 and under 35.	35 and under 45.	45 and under 65.	65 and upwards.	Total.
	/ Males	1	67	01	10	867	122	00	11	01	7.1
Respiratory	- Females	1	1	10	7	523	26	10	9	1	109
	Total	1	8	7	12	81	38	18	17	00	180
									The second		
	(Males	1	1	1	01	4	00	1	1	1	11
Non-Respiratory	- Females	1	01	1	1	7	1	00	01	1	14
	Total	1	01	1	64	11	9	02	01	1	25
	(Males	64	01	60	1-	03	1.6	00	11	01	01 00
Respiratory	Females	-	00	2	7	09	97	13	00	1	123
Non-Respiratory	Total	67	9	80	14	92	41	21	19	65	205

TABLE X.-Continued.

3.—Return showing the Number of Cases with their Home Residence in the Area who received Treatment in Sanatoria or other Institutions during the year ended 31st December, 1953.

						Nı	Number of Putients.			
					(a)	(9)	(0)	Died in the Institutions.	in the	6)
					on 1st January.	during the year.	during the year.	(p)	(e)	31st December.
			Males	:	93	76	93	9	00	98
	( tAdults	:	Females	:	106	118	105	61	4	113
Respiratory	Change		/ Males	:	9	10	6	1	1	1-
		:	Females	:	11	10	10	1	1	11
	. 4 6 3 12		/Males	:	10	11	14	1	1	9
	†Adults	:	Females	:	111	10	15	1	1	9
Non-Kespiratory	OLU3		/ Males	:	12	61	10	1	1	4
	Comaren	:	Females	:	9	01	4	1	1	00
		. To	Total	:	253	260	260	6	00	236

† Column (d) shows those who were in final residence 28 days or over. Column (e) shows those who were in final residence under 28 days. † All patients of 15 years and upwards classed as Adults.

# TABLE X.-Continued.

4 .- Return of Number of Persons Resident in the Area at 31st December, 1953, who were known to be Suffering from Tuberculosis. Persons in Sanatoria, etc., are included in the figures for the Area in which they have their Home Residence.) (Only Cases in which a diagnosis of Tuberculosis has been confirmed have been included.

					Number of Cases.	of Cases.				
					Age Groups.	roups.				
	Under 1.	1 and under 5.	5 and under 10.	10 and under 15.	15 and under 25.	25 and under 35.	35 and under 45.	45 and under 65.	65 and upwards.	Total.
RESPIRATORY.a  1. Sputum or other material examined and Tubercle Bacilli found (Females Tubercle Bacilli never found (Females Tubercle Bacilli never found (Females Sputum or other material not Males (Females (Females Females (Females )	1111-1		1388118	133 133 133 133 133 133 133 133 133 133	104 176 50 65 9	158 244 35 52 4	887 119 118 138	233 100 100 84 55	010111	449 535 131 142 50 46
Total	1	6	899	53	415	489	206	138	6	1353
Males   Won-Respiratory.h   Wales   Females   Females	111111111111111111111111111111111111111	61       1	1   1   1   2   2   2   2   2   2   2	01   4400   01   04   14	65 84   511 125 52 880 480 480 480 480 480 480 480 480 480	0.044801     100 0.00	-   014801   -     0101   F	13 00   1   100 0   10		28 88 88 88 88 88 88 88 88 88 88 88 88 8
					-		0.000	*0*		1001

a Persons suffering from Respiratory and Non-Respiratory Tuberculosis included under "Respiratory" only.

h Persons suffering from Multiple Lesions classified according to the site of the Principal Lesion. No case included more than once,

Note.—A patient is retained on the register in the case of Respiratory Tuberculosis for at least five years, and in the case of Non-Respiratory Tuberculosis for at least three years, after complete freedom from symptoms and absence of signs of tuberculosis, except such as are compatible with a healed lesion or lesions.

TABLE X .- Continued.

5.—Return of Number of Persons who died from Tuberculosis in the Area during the year ended 31st December, 1953, with particulars as to the period elapsing between Notification and Death and between Discharge from an Institution and Death.

	Pulm	Pulmonary.	Non-Pu	Non-Pulmonary.
	Males.	Females.	Males.	Females.
Number of Persons who Died from Tuberculosis	21	14	1	4
Of whom—				
Not notified or notified only at or after Death	57	1	1	2
Notified less than I month before Death	1	7-	1	1
Notified from I to 3 Months before Death	1	1	1	1
Notified from 3 to 6 Months before Death	0	100	1	1
:	76	-		1
Notified over 2 Years	13	6	1	1
Total	21	14	1	4
Number who Died within 28 days after Discharge from an Institution	1			
Number who Died more than 28 days after Discharge from an Institution	00	00	-	1

#### TABLE XI.

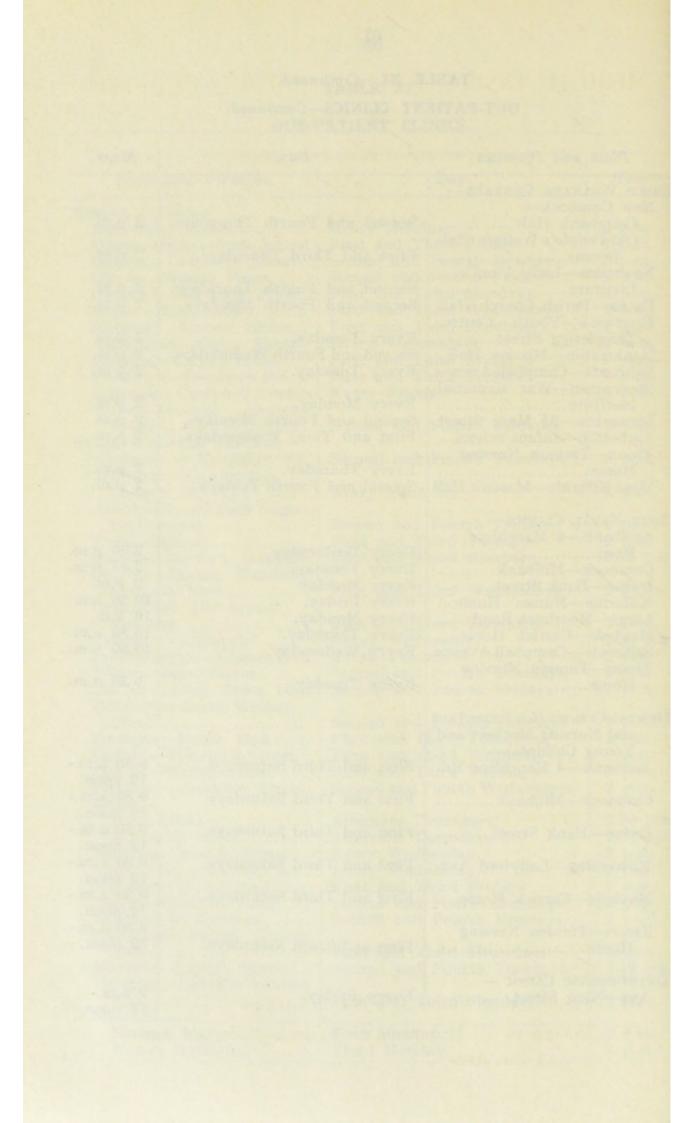
#### OUT-PATIENT CLINICS.

Place and Premises.	Day.	Hour.
School Clinics—		
Ayr—King Street	Every Monday.	3 p.m.
Dalry—Higher Grade School	First and Third Fridays.	2 p.m.
Galston—Henrietta Street	Second and Fourth Mondays.	2 p.m.
Girvan—Wesley Place	Second and Fourth Fridays.	2 p.m.
Hurlford—Academy Street.	First and Third Mondays.	2 p.m.
Irvine—Bank Street	First and Third Wednesdays.	2 p.m.
Kilbirnie—Nurses' Home	First and Third Mondays.	2 p.m.
Kilmarnock—Green Street.	Every Wednesday.	10 a.m.
Maybole—Carrick Home	First and Third Friday.	2 p.m.
Prestwick—Glenburn P.S	First and Third Fridays.	2 p.m.
Saltcoats—Campbell Avenue	Every Friday.	2 p.m.
Troon—Tinnion Nursing	Every Friday.	2 P
Home	Second and Fourth Fridays.	2 p.m.
CHILD WELFARE CENTRES-	booma and routin ridays.	- P
Annbank—4 Mauchline Rd.	Second and Fourth Tuesdays.	2 p.m.
Ardrossan—Castlecraigs,	bocond and routh racodays.	- P
Glasgow Street	Every Thursday.	2 p.m.
Auchinleck—97 Back Roger-	Division of the state of the st	- Pilin
ton Crescent	Second and Fourth Fridays.	2 p.m.
Beith—Strand	First and Third Tuesdays.	2 p.m.
Catrine—Brown's Institute	First and Third Mondays.	2.30 p.m.
Coylton—Claude Hamilton	and	F
Memorial Hall	First and Third Wednesdays.	2 p.m.
Crosshouse—Old School		
Building	First and Third Tuesdays.	2 p.m.
Cumnock—Millbank	Every Wednesday.	2.30 p.m.
Dalmellington—Church Hall	Every Thursday.	2 p.m.
Dalry—James Street	Second and Fourth Tuesdays.	2 p.m.
Darvel-Lesser Town Hall	Second and Fourth Fridays.	2 p.m.
Dreghorn—Local Welfare		-
Office	Second and Fourth Tuesdays.	2 p.m.
Drongan—Public Hall	First and Third Tuesdays.	2 p.m.
Galston—Henrietta Street	First and Third Wednesdays.	2 p.m.
Girvan-Wesley Place	First and Third Tuesdays.	2 p.m.
Hurlford-Academy Street.	Second and Fourth Wednesdays.	2 p.m.
Irvine—		
Bank Street	Alternate Thursdays.	2.30 p.m.
Waterside Street	Alternate Thursdays.	2.30 p.m.
Kilbirnie—Nurses' Home	Every Wednesday.	2 p.m.
Kilwinning-Ladyford Av	Every Wednesday.	2 p.m.
Kilmaurs—J.S. School	First and Third Fridays.	2 p.m.
Largs—Moorburn Road	Second and Fourth Mondays.	2 p.m.
Lugar—The Institute	Second and Fourth Mondays.	2 p.m.
Mauchline—Parish Church		
Hall	First and Third Thursdays.	2 p.m.
Maybole—Carrick Home	Second and Fourth Tuesdays.	2.30 p.m.
Monkton—Carvick-Webster		
Hall	First and Third Mondays.	2 p.m.
Muirkirk—	771 1 75 1	0
Masonic Hall	First Monday.	2 p.m.
Kames Institute	Third Monday.	2 p.m.

#### TABLE XI.—Continued.

### OUT-PATIENT CLINICS-Continued.

Place and Premises.	Day.	Hour.
CHILD WELFARE CENTRES—		
New Cumnock— Craigbank Hall Old People's Welfare Club	Second and Fourth Thursdays.	2 p.m.
Rooms Newmilns—Lady Flora's	First and Third Thursdays.	2 p.m.
Institute	Second and Fourth Thursdays. Second and Fourth Mondays.	2 p.m. 2 p.m.
Templerigg Street  Rankinston—Mission Hall  Saltcoats—Campbell Avenue Stevenston—War Memorial	Every Tuesday. Second and Fourth Wednesdays. Every Tuesday.	2 p.m. 2 p.m. 2 p.m.
Institute Stewarton—35 Main Street Tarbolton—Infant School	Every Monday. Second and Fourth Mondays. First and Third Wednesdays.	2 p.m. 2 p.m. 2 p.m.
Troon—Tinnion Nursing Home West Kilbride—Masonic Hall	Every Thursday. Second and Fourth Fridays.	2 p.m. 2 p.m.
Annbank—4 Mauchline Road Cumnock—Millbank Irvine—Bank Street Kilbirnie—Nurses' Home Largs—Moorburn Road Maybole—Carrick Home Saltcoats—Campbell Avenue Troon—Tinnion Nursing Home	Every Wednesday. Every Tuesday. Every Monday Every Friday. Every Monday. Every Thursday. Every Wednesday. Every Tuesday.	2.30 p.m. 2.45 p.m. 2 p.m. 10.30 a.m. 10.30 a.m. 10.30 a.m. 9.30 a.m.
DENTAL CLINICS (for Expectant and Nursing Mothers and		
Young Children)— Annbank—4 Mauchline Rd.	First and Third Saturdays.	9.30 a.m 12 noon.
Cumnock—Millbank	First and Third Saturdays.	9.30 a.m 12 noon.
Irvine—Bank Street	First and Third Saturdays.	9.30 a.m 12 noon.
Kilwinning—Ladyford Ave.	First and Third Saturdays.	9.30 a.m 12 noon.
Maybole—Carrick Home	First and Third Saturdays.	9.30 a.m 12 noon.
Troon—Tinnion Nursing Home	First and Third Saturdays.	9.30 a.m 12 noon.
ORTHODONTIC CLINIC— Ayr—King Street	Every Friday.	9 a.m 12 noon.



## MEDICAL INSPECTION OF SCHOOL CHILDREN 1953—1954

(Year ended 31st July, 1954)

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#### I.—STAFF.

Reference is made to List of Staff on page 4.

#### II.—GENERAL STATISTICS.

Population of the Area (at 31st December, 1953, as estimated by the Registrar-General) ... ... 324,600 Number of Schools-(a) Primary Schools under Education Authority ... 93 (b) Secondary Schools under Education Authority... 61 (c) (i) Special Schools ... ... ... ... 5 (ii) Special Classes in Ordinary Schools ... (iii) Nursery Schools ... ... ... ... 5 (d) In receipt of Grant from Education Authority 1 under Medical Inspection ... ... Average Number of Children on the Registers ... 54,595 Average Number of Children in Attendance... ... 50,536

#### III.—SANITARY CONDITIONS OF SCHOOLS.

The Medical Officers on their visits to schools inspect the sanitation and any matters requiring attention are brought to the notice of the appropriate Official. In general the cleanliness of the schools was found to be satisfactory.

#### IV.—ORGANISATION AND TREATMENT.

School Nurses attend at the medical inspection and subsequently are supplied with a list of the cases to be followed up at home. They keep a register compiled from these lists and report where treatment is given and the condition remedied. The School Nurses also visit the schools between the School Medical Officers inspections. The number of children visited at home during the year was 5,199, and the total number of visits paid was 5,976.

# (a) System of School Medical Inspection and Arrangements for Following up.

The pupils examined at routine inspections were :-

- (1) All entrants and children not previously subjected in school to detailed routine inspections.
- (2) Children born in 1944.
- (3) Children born in 1940.
- (4) Children born in 1937.
- (5) Children born in 1946 (visual acuity and hearing only).

Before every routine visit to a school the Head Teacher is asked to produce for special medical examination any pupil who appears to suffer from any physical or mental disability and who has not received or is not receiving appropriate attention.

All children found defective at previous inspections were also re-examined.

Routine and special medical examinations of pupils attending schools in Ayr and Kilmarnock are carried out by the medical staff of the Burghs concerned, who also attend the respective minor ailment clinic and forward to the Chief School Medical Officer particulars regarding any children requiring special medical or educational treatment.

#### (b) Supervision of Infectious Disease, including School Closures.

As the medical inspection of school children is under the control of the Medical Officer of Health for each area, all notifiable cases of infectious disease are known. Where it seems to the Head Teacher that there is any undue incidence of non-notifiable disease he brings the matter to the notice of the School Medical Officer. Disinfection of class-rooms is carried out where indicated. No schools were closed as a result of infectious disease during the session.

#### (c) Co-ordination with Public Health Service.

In the County Area each Assistant Medical Officer is in charge of the School Health and Child Welfare work in a district, so that the same Medical Officer sees the child from birth to school leaving age. The same arrangement exists in the Burghs of Ayr and Kilmarnock.

#### (d) Presence of Parents at Inspection.

The presence of parents is encouraged at school medical inspection. Many defects are pointed out to them, of which they were previously unaware, and thus the services of the family doctor are solicited earlier than otherwise would have been the case, with more satisfactory results in the way of prevention and cure. The number of parents who attended the routine inspections during the year was 4,102

#### V.—THE FINDINGS OF MEDICAL INSPECTION.

#### (a) Routine.

The number of children examined was 15,670, of whom 4,346 or 27.73 per cent. suffered from some defect. Of these 2,528 or 16.13 per cent. of the children examined suffered from minor defects or ailments from which recovery was expected in a few weeks, and 1,530 or 9.76 per cent. suffered from defects less remediable, but from which complete recovery or restoration of function was ultimately anticipated. The number suffering from defects where improvement only could be expected was 288 or 1.84 per cent. of those examined.

The following is a summary showing the various defects and the percentage found defective at Routine Inspections.

#### (1) Clothing.

Fifty-nine children were found to have unsatisfactory clothing, 0.38 per cent. of the children examined.

#### (2) Footgear.

Seven children were found to have unsatisfactory footgear, 0.04 per cent. of the children examined.

#### (3) Cleanliness.

- (a) Head.—The number of children found to have dirty or verminous head was 397 or 2.53 per cent. of those examined.
- (b) Body.—The number of children found to have dirty or verminous bodies was 39 or 0.25 per cent.

#### (4) Skin.

(a) Head.—The following were found to be suffering from skin diseases of the head:—

Impetigo ... ... 11 children or 0.07 per cent. Other Diseases ... ... 37 children or 0.24 per cent.

(b) Body.—The following skin conditions affecting the body were found:—

Ringworm ... ... 2 children or 0.01 per cent. Impetigo ... ... 7 children or 0.04 per cent. Scabies ... ... 4 children or 0.03 per cent. Other Diseases ... 216 children or 1.38 per cent.

#### (5) Nutritional State.

149 children were found to be suffering from slightly defective nutrition and 4 from bad nutrition, being respectively 0.95 and 0.03 per cent. of the children examined.

#### (6) Mouth and Teeth.

504 children were suffering from unhealthy conditions of the mouth and teeth, 3.22 per cent. of the children examined.

#### (7) Nasopharynx.

- (a) Nose.—Apart from cases requiring further observation, 81 children or 0.52 per cent. of those examined showed obstruction, probably due to adenoids requiring operation.
- (b) Throat.—Apart from cases requiring further observation, 36 children or 0.23 per cent. of those examined were found to have tonsils which required operative treatment.
- (c) Glands.—Enlarged Glands requiring further observation were found in 163 or 1.04 per cent. of the children examined, while 1 child or 0.006 per cent. had Glands requiring operation.

#### (8) Eyes.

Infective conditions of the lids or conjunctiva were found in 127 children or 0.81 per cent. of those examined.

Corneal Opacities were found in 10 or 0.06 per cent. of the children.

Squint affected 299 children or 1.91 per cent.

Visual Acuity.—Vision was not examined in entrants. Of those in the other age groups 1,055 or 10.81 per cent. had defective vision requiring refraction. In addition 5,010 children in the seven-year-old group were examined in place of entrants. Of these 450 were found to require refraction.

#### (9) Ea:s.

Otorrhoea or discharge from the ears affected 73 children or 0.47 per cent.

Defective hearing was present in 55 children or 0.35 per cent. Twenty-eight were classified in Grade I. Deafness—that is children who can be educated in the ordinary school without special provision, and 22 in Grade II (a) Deafness—that is children who can make satisfactory progress in ordinary schools if given some help, e.g., favourable position in class, individual hearing aid or tuition in lip-reading.

Five children were classified in Grade II. (b) Deafness—that is children who can make satisfactory progress only in a Special School.

#### (10) Speech.

Of the children examined 66 or 0.42 per cent. suffered from defective articulation and 7 or 0.04 per cent. from stammering.

#### (11) Mental and Nervous Conditions.

Nine children or 0.06 per cent, were found to be educable mental defectives.

Other mental or nervous conditions affected 66 or 0.42 per cent. of the children examined.

#### (12) Circulatory System.

Fifty-seven children were found to be suffering from organic heart disease, comprising 0.36 per cent. of the children examined. Of these 46 were Congenital and 11 Acquired.

#### (13) Lungs.

The number of children suffering from chronic bronchitis was 46 or 0.29 per cent. of those examined.

There were referred to the Tuberculosis Officer as suspected cases of Tuberculosis 6 children or 0.04 per cent.

Other diseases of the Lungs affected 105 children or 0.67 per cent.

#### (14) Deformities.

Deformities dating from birth affected 69 children or 0.44 per cent.

Deformities due to Infantile Paralysis affected 8 children or 0.05 per cent.

Deformities due to Rickets affected 37 children or 0.24 per cent.

Deformities due to other causes, for instance flat feet, affected 97 children or 0.62 per cent.

#### (15) Infectious Disease.

There were discovered 3 cases of Infectious Disease, 0.02 per cent. of the children examined.

#### (16) Other Diseases or Defects.

435 Children or 2.78 per cent. of those examined were affected.

#### (b) Special Examinations.

Of the 1,414 special cases examined, 400 were found defective and were notified to parents as requiring treatment. The following is a list of the defects found:—

(1) Unsatisfactory Clot	hing			 	 6
(2) Unsatisfactory Foot	tgear			 	 5
(3) Cleanliness—					
Head—Dirty,	Nits o	or Ver	min	 	 60
Body—Dirty,				 	 10
(4) Skin—Head—					
Ringworm				 	 1
Impetigo				 	 5
Other Diseases				 	 5
Skin—Body—					
Ringworm				 	 1
Townsties				 	 3
Scabies				 	 1
Other Diseases				 	 21

(5)	Nutritional State—				
	Slightly Defective				18
			n ibi		
(6)	Mouth and Teeth Unhealthy				8
(179)	None				
(1)	Nose— Obstruction requiring observation	n			27
	Obstruction (probable Adenoids)			ation	32
	Other Conditions				36
	Throat—				
					22
	Tonsils requiring operative treat	ment			17
	Glands—				
	Requiring observation				12
	Requiring operative treatment				1
(8)	Eyes—				
	External Diseases—				
	Blepharitis				10
	Conjunctivitis				2
	Corneal Opacities				1~
	Squint Other Diseases				15 13
	Cultur Discusos	doi:	ministra	Habi B	19
	Visual Acuity—				
	Defective Vision (for Refraction)				185
(9)	Ears—				
	Otorrhoea				14
	Other Diseases				25
	Defective Hearing—				
	Grade I				21
	Grade IIa				1
.0)	Speech—				
	Defective Articulation			8	14
	Stammering				5

(11)	Mental and Nervous Condi	ition—				
	Backward		2	 		1
				 		4
	Mental Defective (Ed			 		3
	Mental Defective (Ine		e)	 		1
	Highly Nervous			 		8
	Difficult Behaviour			 	• • •	5
(12)	Circulatory System—					
	Organic Heart Disease-					
	Congenital			 		1
	Acquired			 		2
	Functional Conditions			 		4
(13)	Lungs—					
(10)	Zungs					
	Chronic Bronchitis			 		2
	Suspected Tuberculosi	S		 		1
	Other Diseases			 		12
(14)	Deformities—					
	C					-
	Congenital			 		7
	Acquired (Infantile Pa			 		2
	Acquired (probable Ri		• • •	 		-
	Other Causes			 		8
(15)	Infectious Diseases		•••	 		1
(16)	Other Diseases or Defects			 		94

### (c) Head Infestation in School Children.

During the first two weeks of the session a survey was made to find whether there had been a deterioration in the cleanliness of heads of school children after the Summer holidays. Thirteen schools were selected in various parts of the County for this purpose.

The results were classified in three groups (a) mild infestation (few nits); (b) marked infestation (many nits); (c) severe infestation (nits and vermin); Six schools were represented in the first, second and third groups, 11 in the first and second groups and all in the first. As was to be expected the girls far exceeded boys in the numbers infested and in the degree of infestation.

The findings of the survey were as follows:—

Total Number Examined—7,462.

Total Degree of Infestation—655 or 8.82 per cent., comprising 476 or 6.38 per cent. mild infestation, 153 or 2.05 per cent. marked infestation, and 26 or 0.39 per cent. severe infestation.

Number of Boys Examined-3,645.

Degree of Infestation—147 or 4.03 per cent., comprising 125 or 3.43 per cent. mild infestation, 19 or 0.52 per cent. marked infestation, and 3 or 0.08 per cent. severe infestation.

Number of Girl Examined—3,817.

Degree of Infestation—508 or 13·37 per cent., comprising 351 or 9·19 per cent. mild infestation, 134 or 3·51 per cent. marked infestation, and 23 or 0·67 per cent. severe infestation.

### VI.—ARRANGEMENTS FOR MEDICAL TREATMENT.

### (a) Minor Ailments.

There are School Clinics at Auchinleck, Troon, Saltcoats, Irvine, Maybole, Girvan, Dalry, Kilbirnie, Galston, Hurlford, Prestwick, Ayr and Kilmarnock, attended by the whole-time Medical Officers. The School Nurses at these Centres assist.

The number of children examined by the medical staff at the Clinics was 2,953, and as many paid recurrent visits there was a total of 8,083 attendances. The following is a list of the defects found:—

- (1) Cuts, Bruises, Sprains and Minor Injuries, etc. ... 441
- (2) Diseases of the Ear, largely cases of Otorrhoea ... 122
- (3) Diseases of the Eye, principally Conjuctivitis and Blepharitis ... ... ... 223
- (4) Diseases of the Skin, 265. This figure comprises 11 cases of Ringworm of Body, 215 cases of Impetigo, 11 cases of Scabies, and 25 cases involving other diseases of the skin.
- (5) Other Diseases, including cases of non-attendance brought to Clinics on recommendation of Attendance Officers—2,910.

### (b) Defective Vision.

During the session the examination of children with defective vision was continued under arrangements made with the Regional Hospital Board. The Clinics are attended by members of the Staff of the Regional Hospital Board working under Dr. W. O. G. Taylor, the Board's Consultant Ophthalmologist for the area.

Opticians attended at certain Clinic sessions to measure and fit those children for whom spectacles had been prescribed by the Ophthalmic Specialist. The Regional Hospital Board is responsible for this arrangement.

Spectacles were prescribed where necessary. The following is a summary of the cases seen for the period:—

Number	of	Clinics h	neld				 325
Number	of	Children	Exam	ined			 3593
Number	of	Children	Prescr	ibed	Spectad	eles	 1902

### (c) Specialist Treatment.

I am indebted to the Matron of Seafield Sick Children's Hospital, Ayr, for the following figures of children seen and treated at that Hospital during the year under review:—

Sur	gical	Department-	
	d a come	To bear allegies	

52
0
75
58

Number of	Theatres	held		 	 55
Number of	Children	Operated	on	 	 270

### Medical Department-

Number of	Clinics held	 	 146
Number of	Children Examined	 	 1,773
Number of	Admissions	 	 422

### Ear, Nose and Throat Department-

Number of	Theatres	held		 	292
		Operated or	n	 	2,071
Number of	Cases Ex	camined at	Clinics	 	6,346

### Orthopaedic Department-

Number of Clinics held	127 3,742
Exercises—	
Out-Patient	1,887
In-Patient	181
Number of Children Operated on	77
Number of Children put in Plaster of Paris	496
Plastic Department—	
Number of Patients Admitted	180
Number of Clinics held	24
Number of Theatres held	46

(It is necessary for some patients to be several times in Theatre).

### (d) Notes on Audiometric Testing in Ayrshire.

All totally deaf (Grade III.) children of school age in Ayrshire are receiving special education in schools for the deaf, viz.:—

Donaldson's School for the Deaf,	Edinbu	rgh	 5
Glasgow School for the Deaf			 30
St. Vincent's School, Glasgow			 11
			-
			46
			-

There are 6 children (still too young for admission) on the waiting-list for Glasgow School for the Deaf.

There are 37 severely deaf (Grade IIB.) children attending schools in Ayrshire. Of these 13 are able, with the help of a hearing-aid and suitable positions in Class, to make some progress in the ordinary school. Nineteen attend Courthill School, Dalry, for partially deaf children, and a boy and a girl who are still under school age are being admitted in September. The parents of the remaining five children preferred to have their children attend the local school.

In the past year 5 children have been fitted with hearing-aids at the Hearing Aid Clinics at Ballochmyle Hospital. The position with regard to hearing-aids is as follows:—

46	August, 1953	(a
10 - 56	b) No. of Children supplied with Hearing-Aids during School Session (1953-54)	(b)
	No. of Children at (a) who left School during Session (1953-54) 9	(c)
10	d) No. of Children who ceased to require Hearing-Aids during Session (1953-54) 1	(d
46	No. of School Children wearing Hearing-Aids at 31st July, 1954	(e

Of the 153 children referred to the Ear, Nose and Throat Clinics from Schools, 135 (88%) attended and subsequently received treatment and operations, when necessary, from the Ear, Nose and Throat Surgeon.

RESULT OF GRAMOPHONE AUDIOMETRIC TESTS IN ALL SCHOOLS IN AYRSHIRE.

Year Ending 31st July, 1954.

Group.						Grade	de		No. of Children Children referred	No. of Children Children referred	No.	Retests.	Retests. No. of Children now	mo
	No. of Children	No. of Children	No. of No. of No. of No. of Children Children Children	No. of Children					to FN T	Hearing			No	
	Listed.	Tested.	Listed. Tested. Normal. Def'ive.	Def'ive.	I.	IIA.	IIB.	III.	Clinic.	Clinic.	Clinic. Normal.	Imp.	Imp.	Det.
Children Born in 1945	4547	4272	4046 226 94·71% 5·29%	226 5·29%	165 3.86%	165 3.86% 1.40% 0.02%	0.02%	1	38 0.89%	1	1	1	1	1
Children Born in 1944. Absent at previous test	281	224	214	10	7	03	1	1	8	1	1	1		1
Children of any other age thought to have a Hearing Defect	647	592	379	213	104	105	4	1	64					1
Retests. Children showing defect at previous test	964	743	290	453	198	232	23	1	48	1	290	130	254	69

# RESULT OF PURETONE AUDIOMETRIC TESTS AT EAR, NOSE AND THROAT CLINIC IN SEAFIELD HOSPITAL, AYR, AND AYRSHIRE CENTRAL HOSPITAL, IRVINE.

	- 1	19
	Total V	71
		1
	P. H.	85
	1,	80
	8	57
	115	20
	co.	20
	7	80
	142	80
	127	82
	281	175
	62	80
-	343	255
	1	1
	E.N.T.	:
	mding w Case	:
	ic (Ne	
	Children	Retest

### (e) Psychiatric Service (Period 1/9/53 to 31/7/54).

Dr. Aron, County Psychiatrist, reports as follows :-

"During the above period a total of 111 cases of maladjustment in children have been referred to the Psychiatrist for diagnosis and treatment or disposal. Of the total, 18 have been old cases, again referred.

The sources from which maladjusted children have been referred to the Psychiatrist have been these:—

By Whom Referred.	Total Number of Cases
Educational Psychologists and Speech	40
Therapists	40
Paediatrician	11
School Medical Officers	19
All other Medical Sources	17
Juvenile Courts and Probation Officers	14
All other Sources	10
The definability and processed many and processed	111

### Admissions-

- 1 ... Waverley Park Certified Institution, Kirkintilloch.
- 1 ... Lennox Castle Institution, Lennoxtown.

Disposal effected where a Child had to be sent away from home—

- 1 ... Salesian House, Aberdour (placed at the request of the Children's Committee of the Burgh of Kilmarnock).
- 2 ... Approved Schools.

The Psychiatric Service has been benefited considerably by having a social worker attached to it. Unfortunately, attempts to obtain the services of another social worker have hitherto not proved successful.

As will be seen from the above figures the Service is still in process of expansion. The problems which have arisen during the past eight months have been mainly in relation to:—

(1) The provision of short-term facilities for residential observation and treatment of cases;

- (2) The provision of occupation centres for ineducable defectives;
- (3) The needs of the Child Guidance Clinic, Charlotte Street, Ayr, as regards increased accommodation (two rooms of the latter building are still occupied by the County Police)."

### VII.—DENTAL INSPECTION AND TREATMENT.

### Report by Chief Dental Officer.

The Dentists devoted 471 half-days to the dental inspection of school children and 3,811 half-days to the carrying out of the necessary treatment. Number of attendances 24,031.

Miss Pringle, L.D.S., left the service on 31/12/53 and was replaced by Miss Carnegie, L.D.S., on 11/1/54. Miss Davidson, L.D.S., who resigned on 1/10/53, was not replaced until 8/3/54 by Mr. Macauley, L.D.S. Miss Gale, L.D.S., who resigned on 14/5/54 has not yet been replaced, no suitable dentist making application for the vacancy which has been advertised twice.

These interruptions are to be regretted, as they interfere with the continuity of the service. Nevertheless the Annual Return figures show further steady and encouraging progress.

The dentists undertake the inspection and treatment of pre-school age children, school children and expectant and nursing mothers in their respective areas, so that each dentist is able to follow up patients from an early age, providing continuity of service.

The Orthodontic Service continues to be greatly appreciated and has produced some excellent correction of dental irregularities. The results of this treatment not only improve the appearance of the mouth, lips and profile, but give a great benefit through more efficient mastication. In cases where the child is of the sensitive or introspective type, conscious and worried by the teeth abnormalities and possibly ridiculed by other children, the results of Orthodontic treatment have a beneficial psychological effect. An endeavour is made to see the children in their districts to save travelling; only the more intricate cases being brought to Avr. where Dr. Campbell, of Glasgow Dental Hospital, visits monthly. His visits are much appreciated and we are indebted to him for devoting his valuable time to our interests. At certain schools where the number of Orthodontic cases warrants it, the pupils are seen at the school so that their loss of educational time is reduced to a minimum. The attendances at the various clinics numbered 1,652.

The second mobile clinic, delivered at the beginning of the year, has helped to improve the accommodation problem; but even now each dentist can have the use of a mobile surgery for six weeks only in the year.

Once again our thanks are due to Headmasters and their Staffs for their courtesy and consideration, especially in the vexed problem of accommodation.

The following Tables show details of the Inspection and Treatment given :-

TABLE V.	
(a) Inspection—	
Number of Children Inspected	23,597
Number of Children requiring Treatment	16,268
Number of Children for whom Parents accepted	
Treatment by School Dentists	7,762
Number of Children not requiring Treatment	7,329
Number of Children for whom Parents stated the	
Children would be Treated Privately	7,888
Number of Children for whom the Parents decided	
to take no action	618
Number of Children Examined as Special or	7.0
Emergency Cases	18
Number of Children accepting Treatment as	10
Emergency Cases	18 18
Number of Children treated as Emergency Cases	10
(b) Treatment—	
Number of Children Treated	9,568
Number of Children Extractions (Temporary Teeth)	7,404
Number of Children Extractions (Permanent Teeth)	1,926
Number of Children Fillings (Temporary Teeth)	1,541
Number of Children Fillings (Permanent Teeth)	12,206
Number of Children Dentures supplied	64
Number of Children Crowns	1
Number of Children Root Treatments	11
Number of Children Scalings	801
Number of Children Other Operations (Temporary	1.000
Teeth)	1,899
Number of Children Other Operations (Permanent	10 900
Teeth)	13,328
Number of Children Special or Emergency Cases	18
Number of Children Special Extractions (Temporary	23
Number of Children Special Extractions (Permanent	20
Teeth)	1
Number of Children X-Rays	198
A dillion of Children 22-100jo	

### Orthodontics-

New Cases			 	 	280
Undergoing	Treatme	ent	 	 	357
Completed			 	 	71

### VIII.—SPECIAL SCHOOLS AND CLASSES, INCLUDING OPEN-AIR SCHOOLS.

### (1) St. Leonard's Home Special School, Ayr.

Day pupils were conveyed daily by motor transport from and to their own homes. The number so dealt with was 90, of whom 6 were physically handicapped children and 84 mentally handicapped children.

St. Leonard's Home has 13 physically handicapped children resident, and these are taught in the Physically Handicapped Classes.

There were thus on the school roll 19 physically handicapped and 84 mentally handicapped children.

There are five classrooms, viz., four for mentally handicapped and one for physically handicapped children.

### (2) Park Special School, Kilmarnock.

There are on the school roll 68 mentally handicapped children and 28 physically handicapped children.

There are six occupied classrooms, viz., four for mentally handicapped and two for physically handicapped children.

### (3) Special School, Saltcoats.

There are on the school roll 38 mentally handicapped and 2 physically handicapped children.

There are three classrooms, viz., two for mentally handicapped and one for physically handicapped children.

### (4) Claremont School, Kilbirnie.

This school, which has accommodation for 20 mentally handicapped children, was opened on 8th February, 1954. There are at present 7 children on the school roll.

### (5) Courthill Special School, Dalry, for the Partially Deaf.

There are 19 children suffering from Grade IIB. Deafness on the roll of this School. In view of the distance from their homes to the School, 4 children are boarded at St. Leonard's Home, Ayr, and 1 at Burnside Home, Irvine. They are taken to the School daily with the others by special conveyance.

### (6) Other Institutions.

At 31/7/54 there were in Institutions:—

Donaldson's School for the Deaf, Edinburgh	5
Langside School for the Deaf, Glasgow	30
St. Vincent's School for the Blind and Deaf, Glasgow	15
Worcester College for the Blind	1
Royal Blind School, Edinburgh	9
Condoverhall School, Shrewsbury (for Blind Children	
with other Disabilities)	1
Colony for Epileptics, Bridge-of-Weir	1
St. Elizabeth's School and Home, Much Hadham, Herts	1
Westerlea School for Spastics, Edinburgh	1
Waverley Park Certified Institution, Kirkintilloch	2
St. Joseph's Certified Institution, Rosewell, Midlothian	3
Lennox Castle Certified Institution, Lennoxtown	
(excluding two on licence)	12
St. Charles' Certified Institution, Carstairs Junction	1
Royal Scottish Certified Institution, Larbert	1
Children's Unit, Crichton Royal, Dumfries	1
St. Mary's, Balnakiel House, Galashiels	1
Kilquhanity House, Castle-Douglas	2
St. Ninians Residential J.S. School, Falkland, Fife	1
Widdicombe House, South Devon	1
Camphill Rudolph Steiner School, Aberdeenshire	1
East Park Home for Infirm Children, Largs	1

Children requiring convalescent treatment were sent to the Biggart Home, Prestwick, and the number admitted there during the school session, on the recommendation of the School Medical Officers, was 35.

The Special Schools at Kilmarnock and Saltcoats are essentially open-air schools, having a verandah, the external sides of the classrooms being of the roll-back type.

# IX.—ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE OF CHILDREN.

### (a) Staff and Accommodation.

The Authority employs 74 Specialist Teachers of Physical Education. In Secondary Schools these Teachers have charge of all branches of Physical Education, including Gymnastics, Games, Dancing, Swimming, Athletics and Hygiene. In Primary Schools the aim is that every Class should have one lesson per week from a Specialist Teacher, the remaining Physical Training Lessons being taken by the Class Teachers.

While the majority of schools in the County have indoor accommodation for physical activity (gymnasia, central halls, rented halls, etc.), special attention is given to the provision of an area of the playground suitably surfaced to allow exercise to be taken in the open as often as the vagaries of our climate permit.

The whole Scheme of Physical Education is co-ordinated by the County Organisers of Physical Education.

### (b) Swimming.

By arrangement with Kilmarnock Town Council the local schools have the use of the Corporation Swimming Baths throughout the session. Approximately 1,100 pupils from Primary VII. stage upward have a swimming lesson each week, all year round.

Similar facilities are available at Cumnock, Prestwick, Troon and Saltcoats during the summer term.

### (c) Camp Schools and Trek Camps.

During the school year the Education Committee has the use of the Camp School at Broomlee for four months. This allows approximately 2,000 pupils to go into residence for a period of two weeks.

For the month of July selected schools are equipped as camps, and parties of 20 pupils, aged 12 to 15, escorted by two teachers spend a week walking from camp to camp, sleeping one night at each. Meals are supplied from County Kitchens. In July, 1954, 800 pupils and 100 teachers took part in this Scheme. Parties now have the option of walking in Fife or Midlothian, where similar Schemes operate.

All pupils attending Camp School or taking part in Treks are previously examined by the School Medical Staff.

# X.—OTHER ACTIVITIES IN RELATION TO THE HEALTH OF SCHOOL CHILDREN.

### Milk and Meals Supplied to School Children.

The number of children who took advantage of the Milk-in-Schools Scheme was 42,720.

Meals were supplied to 17,092 children, of whom 2,680 were supplied free.

### XI.—THE PHYSICAL CONDITION OF THE SCHOOL CHILDREN.

The following Tables show the number examined and the physical condition of the children under the respective headings:—

### TABLE I.

(a)	Total	Numb	er of	Children	Exa	mined a	t—			
	Prima	ry and	Junio	or Secon	dary	Schools-	-		Systema: xaminat	
	Ch	nildren	born born	in 1946 in 1944	(Vis	ual Acu	ity onl		5,913 5,010 4,761 4,554	
				Schools in 1937					442	
					Т	OTAL			20,680	
(t)	Other	Exam	inatio	ns—						
		e-Exan Treat Recei On V	ment wing Vaiting	ons—Nu Comple Treatme g List f	mber ted ent or Tre	Examir Examir eatment Inder Ob	ned	]	4, 572 537 176	,414 ,360
						Тота	L		5	,774

### (c) The Number of Individual Children Inspected at Systematic Examinations who were Notified to Parents as requiring Treatment:

Entrants			 	976
Children Born in 1944			 	701
Children Born in 1940			 	647
Children Born in 1937			 	32
	T	OTAL	 	2,356

## (d) Average Heights and Weights-

Group Examined.	Sex.	No. Exam.	W	Average Height Inches.	Weight
Entrants	Male	3032	64·7	43·6	44·2
	Female	2881	64·7	44·0	42·3
Children Born in 1944	Male	2412	114·7	52·6	66.0
	Female	2349	114·7	52·2	65.0
Children Born in 1940	Male	2279	163·2	60·6	98.6
	Female	2275	163·6	61·3	102.2
Children Born in 1937	Male	242	200·9	68·2	136·4
	Female	200	201·3	64·0	124·1

85

TABLE II.

SCHOOL MEDICAL SERVICE—SYSTEMATIC EXAMINATIONS.

					Entr	Entrants.	19	1944	18	1940	19	1937	All	All Ages.	Total
Nature o	Nature of Defect.				Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all Ages.
Number examined		:	:	:	3032	2881	2412	2349	9279	2275	242	200	7965	7705	15,670
1. Clothing— Unsatisfactory Percentage	::	::	::	::	11 0.36	14 0.49	5 0.21	10 0.43	9.26	13	11	111	22 0.28	37 0.48	59
2. Footgear— Unsatisfactory Percentage	::	::	11	::	3 0.10	0.07	0.04	0.04	11	11	11	11	4 0.05	3 0.04	7 0.04
3. Cleanliness—  Head— Dirty, Nits or Vermin  Percentage	Vermin	::	: :	::	44 1·45	117	20 0 83	118 5.02	14 0.61	84 3.69	11	11	78	319 4.14	397
Dirty, or Verminous	suonim	::	: :	::	14 0.46	5 0.17	0.29	0.17	7	0.09	11	11	28	11 0.14	39

TABLE II.—Continued.

School Medical Service—Systematic Examinations—Continued.

Total	all Ages.	0.07 0.07 0.04 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.03 0.095	0.03
Ages.	Girls.	0.08 0.08 0.03 0.03 0.03 0.03 1111 1.44 1.44	0.04
All ,	Boys.	0.06 0.06 0.06 0.09 0.09 0.09	0.01
37	Girls.	3.50	11
1937	Boys.	0.83	11
0#	Girls.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	0.04
1940	Boys.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	11
14	Girls.	0.04 0.04 0.04 0.04 0.04 0.04 0.04 0.04	11
1944	Boys.	0.08 0.08 0.04 0.04 33 1.37 1.04	0.04
ntrants.	Girls.	0.14 8 0.14 8 0.28 0.03 1.53 1.35	0.07
Entre	Boys.	0.03 0.03 0.03 0.03 1.58 1.02	11
			::
			: :
	Defect.		::
	Nature of Defect.	4. Skin—  Ringworm  Percentage  Impetigo  Percentage  Other Diseases  Percentage  Ringworm  Percentage  Impetigo  Percentage  Scabies  Scabies  Other Diseases  Percentage  Scabies  Percentage  Other Diseases  Percentage  Scabies  Scabies  Percentage  Scabies  Percentage  Other Diseases  Percentage  Other Diseases  Percentage	Bad Percentage

TABLE II. -Continued.

School Medical Service -- Systematic Examinations -- Continued.

	Entr	Entrants.	1944	44	19	1940	19	1937	AII.	Ages.	Total
Nature of Defect.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all Ages.
6. Mouth and Teeth— Unhealthy	140	117	85 3.52	55 2.34	55 2.41	50 2.20	0.83	Н	3.54	222 2.88	504
7. Nose—Obstruction requiring Observation	3.30	61 2-12	29	19 0.81	10	11 0.48	- 11	11	139	91	230
Obstruction (probably Adenoids) requiring Operation Percentage Other Conditions Percentage	36 1-19 71 2-34	31 1.08 39 1.35	0.08 33 1.37	7 0.30 15 0.64	0.18 7 0.31	111	0.41 $0.83$	1111	43 0.54 113 1.42	38 0.49 65 0.84	81 0.52 178 1.14
Throat— Tonsils requiring Observation Percentage Tonsils requiring Operative Treatment Percentage	171 5.64 11 0.36	127 4.41 7 0.24	54 2·24 11 0·46	51 2·17 3 0·13	0.48	40 1.76 4 0.18	1111	0.50	236 2.96 22 0.28	219 2.84 14 0.18	455 2.90 36 0.23
Glands— Requiring Observation Percentage Requiring Operative Treatment Percentage	2.51	53 1.84 1 0.03	0.54	0.55	0.00	0.22	1111	0.50	91 1.14	72 0.93 1 0.01	163 1.04 1 0.006

TABLE II. - Continued.

School Medical Service-Systematic Examinations-Continued.

	Total	all Ages.			1111	0.71	16	0.10	10	97.0	299	1.91	77	0.49		9757			680	6.97	375	3.84	
	All Ages.	Girls.			53	69.0	7	60.0	4	0.05	145	1.88	34	0.44		4824			341	7.07	184	3.81	
	All	Boys.			58	0.73	6	0.11	9	80.0	154	1.93	43	0.54		4933			339	6.87	161	3.87	
	1937	Girls.			1	0.50	1	1		1	!	1	-	0.50		200			23	11 50	10	5.00	
	16	Boys.			1	1	1	1	1	1	1	0.41	I	1		242			21	8.68	6	3.72	
K	1940	Girls.			19	0.84	3	0.13	1	0.04	31	1.36	111	0.48		2275			184	8 09	110	4.84	
	19	Boys.			22	0.97	3	0.13	1	-	16	0.70	9	0.26		2279			153	6.71	92	4.04	
	1944	Girls.			15	0.64	2	60.0	2	60.0	39	1.66	4	0.17		2349			134	5.70	64	2.72	
	19	Boys.			20	0.83	1	0.04	3	0.12	50	2.07	6	0.37		2412			165	6.84	06	3.73	
	Entrants.	Girls.			18	0.62	2	0.07	1	0.03	75	2.60	18	0.62		1				1	-	T	
	Entr	Boys.			16	0.53	2	0.16	3	0.10	87	2.87	28	0.92		1			-	1	-	ı	
					***	::	***	***				:		::					***	::		:	
					:	:		****	***					***								:	
		ect.			:		::	::		***	***	***	***			:		raction		:			
		Nature of Defect.	8. Eyes-	External Diseases-	Blepharitis	Percentage	Conjunctivitis	Percentage	Corneal Opacities	Percentage	Squint	Percentage	Other Diseases	Percentage	Visual Acuity-	Number Examined	Percumented for Defe	Defective Vision—	Fair	Percentage	Bad	Percentage	

TABLE II. Continued.

School Medical Service-Systematic Examinations-Continued.

				Ent	Entrants.	19	1944	19	1940	19	1937	All	Ages.	Total
Nature of Defect.	Defect.			Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all Ages.
Number Examined	:	:	:	3032	2881	2412	2349	2279	2275	242	200	7.65	7705	15,670
9. Ears—														
Otorrhoea				6	19	11	10	11	13	1	1	31	42	73
Percentage				0.30	99.0	0.46	0.43	0.48	0.57	1	1	0.39	0.55	0.47
Other Diseases		***	***	2	4	3	2	67	4	1	1	11	10	21
Percentage		***		0.16	0.14	0.12	60.0	60.0	0.18	0.41	1	0.14	0.13	0.13
Defective Hearing-	1 50													
Grade I		:		6	1	4	4	9	4	1	1	20	00	28
Percentage	::	***		0.30	1	0.17	0.17	0.26	0.18	0.41	1	0.25	0.10	0.18
Grade II. (a)		***	:	61	1	9	2	4	7	1	1	12	10	22
Percentage		***	:	0.02	0.03	0.25	60.0	0.18	0.31	1	1	0.15	0.13	0.14
Grade II. (b)		***		1	1	1	1	2	2	1	1	3	67	2
Percentage	:		:	1	1	0.04	1	60.0	60.0	1	1	0.04	0.03	0.03
Grade III.		***		1	1	1	1	1	1	1	1	1	1	1
Percentage	:			1	1	1	1	1	1	Ī	1	1	1	1
10. Speech—													1	
Defective Articulation	ation	::		32	19	8	3	4	1	1	1	44	9.9	99
Percentage		:		1.06	99.0	0.33	0.13	0.18	1	1	1	0.55	0.29	0.42
Stammering		***		3	2	1	1	2	-	1	1	ıc	6	7
Percentage				0.10	0.07	!	1	60.0	1	1	1	90.0	0.03	0.04

TABLE II.—Continued.

School Medical Service-Systematic Examinations-Continued.

Total	all Ages.	0.000 0.000 0.000 0.000 11 0.000 46 0.000 11 0.000 0.000 14 0.000 14 0.000 14 0.000 14 0.000 14 0.000 15 0.000 16 0.000 17 0.000 18 0.000
Ages.	Girls.	0.09 0.09 0.04 0.04 0.04 0.05 0.05 0.06 0.06 0.06 0.06 0.06 0.06 0.07
All A	Boys.	1 13 0.01 13 0.16 0.08 0.24 5 0.06 0.08 0.34 6 0.08 0.08 19 0.06 0.08
1937	Girls.	111111111111111111111111111111111111111
19	Boys.	111111111111111111111111111111111111111
1940	Girls.	0.09 0.09 0.09 0.09 10 0.09 0.09
19	Boys.	3 0.13 0.13 0.13 0.13 0.13 0.13
1944	Girls.	0.04   0.09   0.017   0.04   0.04   0.04   0.04   0.04   0.05   0.04   0.04   0.04   0.04   0.04   0.04   0.04   0.04   0.05   0.05 
19	Boys.	1
Entrants.	Girls.	0.03 0.28 0.03 0.28 0.28 0.24
Entr	Boys.	0.03 0.10
		(eld.) (bld.) (bld.) (cl.) (cl
	Nature of Defect.	11. Mental and Nervous Condition—  Backward  Percentage  Dull (Intrinsically)  Percentage  Mentally Defective (Educable)  Percentage  Highly Nervous  Percentage  Difficult in Behaviour  Percentage  Difficult heart Disease— Congenital  Percentage  Difficult Congenital  Percentage  Therentage  Congenital  Percentage  Acquired  Percentage

TABLE II.-Continued.

School Medical Service-Systematic Examinations.-Continued.

	Entr	Entrants.	1944	44	19	1940	19	1937	All	Ages.	Total
Nature of Defect.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all Ages.
Chronic Bronchitis Percentage  Percentage  Percentage  Other Diseases  Percentage	0.36 3 0.10 34 1.12	11 0.38 1 0.03 22 0.76	$\begin{array}{c} 6 \\ 0.25 \\ 1 \\ 0.04 \\ 18 \\ 0.75 \end{array}$	6 0.26 0.04 15 0.64	8 0·35 11 0·48	0.09	0.83	0.50	26 0.33 4 0.05 65 0.82	20 0.26 0.03 40 0.52	46 0.29 6 0.04 105 0.67
Congenital	22 0.73 4 0.13 16 0.53 25 0.82	26 0.90  5 0.17 16 0.55	5 0.21 0.08 8 0.33 14 0.58	$\begin{array}{c} 2 \\ 0.09 \\ 1 \\ 0.04 \\ 0.04 \\ 0.26 \\ \end{array}$	10 0.44 - 5 0.22 15 0.66	0.09 0.09 0.09 14 0.62	0.83	2.00	39 0.49 6 0.08 29 0.36 57 0.71	30 0.39 0.03 8 0.10 40 0.52	69 0.44 8 0.05 37 0.24 97 0.62
15. Infectious Disease Percentage	0.07	11	0.04	11	11	11	11	11	3 0.04	11	3 0.02
16. Other Diseases or Defects	124 4.09	3.92	52 2.16	40	51 2.24	46 2.02	2.48	1.5	233	202 2.62	435 2·78

TABLE III.—SCHOOL MEDICAL SERVICE—SUMMARY OF SYSTEMATIC EXAMINATIONS.

TABLE III.—School Medical Service—Summary of Systematic Examinations—Continued.

	Entr	Entrants.	1944	14	1940	01	1937	37	Te	Total.
Number Examined	59	5913	4761	31	4554	54	4	442	15,	15,670
	No. of Children.	% of the Children examined in this Group.	No. of Children.	% of the Children examined in this Group.	No. of Children.	% of the Children examined in this Group.	No. of Children.	% of the Children examined in this Group.	No. of Children.	% of the Children examined in this Group.
4. Children suffering from (or suspected to be suffering from) defect less remediable than defects specified in 2 or 3 distinguishing cases—										
(a) Where complete cure or restoration of function (in the case of eye defect full correction) is considered possible	656	11-09	452	6.6	386	8.47	36	8.14	1530	9.76
(b) Where improvement only is considered possible, e.g., without complete restoration of function	92	1.56	93	1.95	95	2 09	œ	1.81	288	1.84
Total	748	12.65	545	11.45	481	10.56	44	9.95	1818	11.60
Total Number of Children Examined	5913	%001	4761	100%	4554	100%	442	%001	15.670	100%

TABLE IV.

SCHOOL MEDICAL SERVICE—RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

on. Total.	13							
on.		52	10		474	400	. 37	46
At No School or Institution.	1	-	T		1	1	1	1
In Hospital ov Institution.		1	I		1	-	-	1
At Special School or Classes.	13	1	1		1	1	19	46
At Ordinary School.	ı	20	10		474	400	18	1
Disability.	1. Blind	(b) Other conditions of the Eve. e.g., Cataract, Ulceration.	etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	3. Deaf—	Grade I	Grade II. (a)	Grade II. (b)	Grade III

TABLE IV.-Continued.

School Medical Service-Return of all Exceptional Children of School Age in the Area-Continued.

requiring Special Education  Special Educational Measures:  tween 5 and 16 Years)—  . 50-70)  ally less than 50)		142 48 317
cial Educational 142 — 48 — Years)— 109 185 5	1 1	142 48 317
Years)— 48 — Years)— 109 185 5		48 317 124
Years)— 109 185 109 185 5		317
Educable (I.Q., approx. 50-70)         109       185         neducable (I.Q., generally less than 50)         5		317
neducable (I.Q., generally less than 50) 5		124
	20 99	
(a) Mild and Occasional	1	34
(b) Severe (suitable for care in a Residential School) – 2 1	1 3	9
7. Physically Defective (Children between 5 and 16 Years)—		
(a) Non-Pulmonary Tuberculosis (excluding Cervical Glands) 36 5	5 1	47
(b) General Orthopaedic Conditions 209 16 20	20 9	254
(c) Organic Heart Disease 95 3 —	1	86
(d) Other Causes of Ill Health 35 11 —	- 1	47

TABLE IV.—Continued.

School Medical Service-Return of all Exceptional Children of School Age in the Area-Continued.

In At No Hospital School or or Institution. Institution. Total.	11 39						
Special Hos School or Classes. Insti	21						
At Ordinary School.	7						
Disability.	8. Multiple Defects *	* The Nature of the Multiple Defects in each of the 35 Cases are as follows:—	5 (a) and 7 (b) 5 (a) and 7 (c) 5 (a) and 7	2 (a) and 7 (b). (23) 5 (a) and 7 (2). 2 (b) and 7 (d). (24) 5 (a) and 7 (d). (25) 5 (a) and 7 (d). (25) 5 (a) and 7 (d).	7 (29) 5 (a) and 7 (b) (29) 5 (a) and 7 (b) 4 (a) and 6 (a). (c). (29) 5 (a) and 7 (b) 4 (a) and 6 (a). (29) 5 (a) and 7 (b)	(a) and 7 (b). (b) and 7 (b). (c) and 5 (a). (d) and 6 (a). (a) and 6 (a). (a) and 6 (a).	5 (a) and 6 (b). (35) 5 (b) and 7 (36) 5 (c) and 7 (36) 5 (d) and 6 (d). (37) 5 (d) and 7 (37) 5 (d) and 7