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COUNTY OF AYR





ANNUAL REPORT

BY

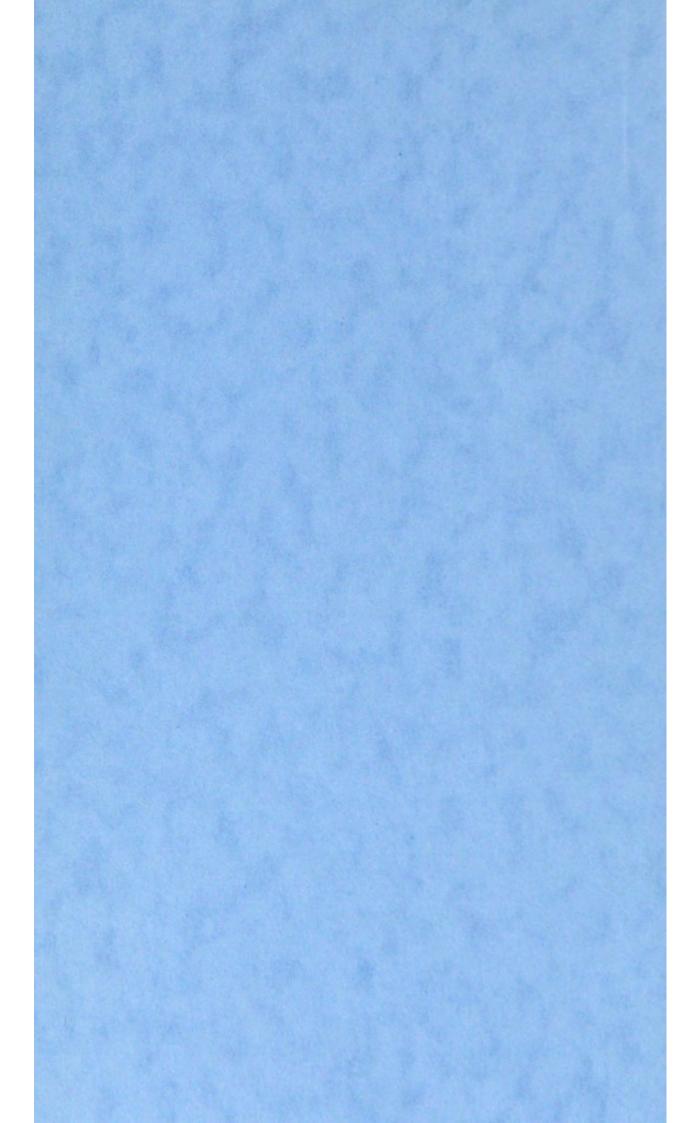
THE MEDICAL OFFICER OF HEALTH

For the Year 1961

AND

THE SCHOOL MEDICAL OFFICER

For the Year 1960-61.



COUNTY OF AYR



ANNUAL REPORT

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For the Year 1960-61.

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

LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the Health of the County of Ayr for the year 1961, together with the Report on the Medical Inspection and Treatment of School Children for the year ended 31st July, 1961.

MARGARRY COSSAR, B.D.S. (Appointed August, 1962).

I am, Ladies and Gentlemen,

Your obedient Servant,

J. A. ROUGHEAD,

Person McG. Garmann, L.D.S.

Medical Officer of Health.

COUNTY BUILDINGS,
AYR,

January, 1963.

STAFF.

Medical Officer of Health, Welfare Officer, 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.

Consultant Psychiatrist—

A. McClelland, M.B., Ch.B., D.P.M., D.P.H. (Services made available by Regional Hospital Board).

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

ENID M. DIXON, M.B., CH.B., D.P.H.

JEAN M. DIXON, M.B., CH.B., D.P.H.

AGNES M. HIGHET, M.B., CH.B., D.P.H., D.R.C.O.G.

KATHARIN I. KERR, M.B., CH.B., D.P.H., D.C.H. (Appointed. November, 1961).

John B. Morris, M.B., Ch.B., D.P.H. (Resigned September, 1961).

MARGARET B. Ross, M.B., Ch.B., D.C.H., D.R.C.O.G. (Appointed August, 1961; Resigned July, 1962).

Helen J. G. Mackie, M.B., Ch.B. (Appointed August, 1962). Marion K. Malcolm, B.Sc., M.B., Ch.B. (Appointed August, 1962).

Assistant Medical Officer—Tuberculosis Scheme— David Kennedy, M.B., Ch.B., D.P.H. (Resigned November, 1961)

> Chief Dental Officer— JAMES WILSON, L.D.S.

Assistant Dental Officers-

AGNES N. CARNEGIE, L.D.S.

DOROTHY E. CHATER, L.D.S.

MARGARET COSSAR, B.D.S. (Appointed August, 1962).

PETER McG. GARDNER, L.D.S.

AGNES J. PURDIE, L.D.S.

ELIZABETH J. ROUGHEAD, B.D.S. (Appointed November, 1962).

Montgomery B. Simpson, L.D.S. Patricia L. Thomson, B.D.S.

ARCHIBALD W. M. WATSON, L.D.S. (Died March, 1962).

THOMAS L. H. WIGHTMAN, L.D.S.

Consultant Orthodontist-

JOHN G. HOUSTON, L.D.S., H.D.D., D.D.O., R.F.P.S. (Services made available by Regional Hospital Board).

County Nursing Superintendent-

MISS JANET S. HASTIE, R.G.N., S.C.M., H.V., Q.N.

DISTRICT NURSE/MIDWIFE/HEALTH VISITORS	64
TUBERCULOSIS NURSES	4
OTHERS-FULL-TIME	6
PART-TIME	11

Matron, Residential Nursery, Irvine—
MISS N. G. LEES, Princess Louise Certificate.

Matron, Residential Nursery, Kilwinning— Miss Helen Grant, R.G.N., S.C.M., S.R.C.N.

Matron, St. Leonard's Home, Ayr— MISS MARION MORRISON, R.G.N., R.F.N.

Assistant Welfare Officer—

STANLEY H. JOHNSTON, A.I.S.W., Certificate in Social Welfare.

Audiometrician-

MISS JEAN B. THOMSON.

Home Helps Organiser—
MRS. MARGARET RAMSAY, M.B.E.

Chiropodists-

MISS MARY J. LAUGHLAN, M.CH.S.

John Kerr, M.Ch.S., Chief Chiropodist.

MISS JUNE BUCHANAN, M.Ch.S., (Resigned June, 1962).

Patrick J. Druggan, M.Ch.S.

Mrs. Margaret M. Ferguson, M.Ch.S.

Mrs. Elizabeth Harvey, M.Ch.S.

Miss Anne M. Henry, M.Ch.S.

Social Workers—

MISS A. S. KELLOCK, A.M.I.A. (Resigned 9/12/62).

Mrs. Hilda McGinis, M.A., Certificate in Social Studies (Resigned 15/8/61).

Louisa D. Doherty (Appointed 1/10/62).

Cecilia L. Ferrier (Appointed 12/11/62).

Mrs. Ina J. Johnston.

JEAN WYLIE (Appointed 19/11/62).

Occupational Therapists—

MISS LEONORA WATERSTON, Senior Occupational Therapist.
MISS JILL WATERSTON (Resigned November, 1961).

Physiotherapist—

Mrs. Elizabeth M. Gordon, M.C.S.P. (Resigned August, 1962).

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—
DAVID H. PATERSON, M.B., CH.B., D.P.H., D.R.C.O.G.

School Nurses—
5 Part-Time Nurses.

Clerical Staff—
1 PART-TIME CLERKESS.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH.

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County Medical Officer's Report

A.—VITAL STATISTICS.

Population and Area.—The Registrar General has estimated the population of the Landward Area and Small Burghs to middle of 1961 as 248,514. This figure is 7,045 less than his estimate for 1960.

Births.—The live births registered after correction for transfers were 4,754, equivalent to a birth rate of 19·1 per thousand of population, as compared with 18·7 for the preceding year. The figure for Scotland was 19·5. The rates for previous years are:—

1931-35—	Average	Birth-Rate	 	 	18.6
1936-40	,,	,,	 	 	18.2
1941-45	23	21	 	 	18.1
1946-50	,,	,,	 ***	 	19.7
1951-55	"	"	 	 	17.9
1956-60	,,	23	 	 	18.7

The number of still-births registered after correction for transfers during the year was 125, giving a rate of 26 per thousand total births. The rate for Scotland was 21. The number of still-births registered for a number of years past, with the corresponding rates per thousand total births, are as follows:—

		S	till-Births.	Rate per Thousand Total Births.
1941-45-	Average		153	41
1946-50	,,		130	27
1951-55	,,		104	24
1956-60	,,		110	23

The details applicable to individual Burghs are given in Tables II. and III.

Deaths.—The deaths registered after correction for transfers were 3,028, which is equivalent to a death-rate of 12·2, as compared with 11·6 in 1960. The Scottish figure was 12·3. The following are the figures for preceding years:—

1931-35—	Average	Death-R	ate	 	 12.5
1936-40	,,	,,		 	 12.8
1941-45	,,	,,,		 	 12.1
1946-50	,,	,,,		 	 11.3
1951-55	,,	,,		 	 11.6
1956-60	"	annel and		 	 11.3

Tables I., II. and III. show the mortality in the County Area

and Burghs during the year.

Infantile Mortality.—The number of infants under one year who died during the year was 146, equivalent to an infantile mortality rate of 31, compared with a rate of 27 in 1960. The following are the figures for previous years:—

1931-35-	-Average	Infantile	Mortality-Ra	te		73
1936-40	and Lyrone	D zamine	Area ,, The R	bos n	pulatio	71
1941-45	all Riughs	ani, Sm	erA breybna	I adl 1	ation o	63
1946-50	an his esti	O45 less th	his figure is 7.	T.AR	18 248,1	39
1951-55	,,	,,	,,			32
1956-60	***************************************	100100 100100	BINDI BERTIO O			29

Of the total infantile deaths 109 (75 per cent.) occurred within

the first four weeks of life.

The main causes of death were congenital malformations 27 (25 per cent.), pneumonia 18 (17 per cent.), injury at birth, etc., 32 (29 per cent.), and other diseases peculiar to early infancy 46 (42 per cent.).

Deaths from Tuberculous Diseases.—The deaths from respiratory tuberculosis were 11, giving a death-rate of 0.04. There were no deaths from other forms of tuberculosis. The corresponding figures for the previous year were deaths 11 and 1 and death-rates 0.04 and 0.004. The following are the average death-rates per 1,000 population:—

st, with the correspon			Respiratory uberculosis.	Other forms of Tuberculosis.	Total.
1916-20-Ave	rage		0.79	0.44	1.23
1921-25	,,		0.52	0.28	0.80
1006 20		8.11	0.45	0.24	0.69
1931-35	,,		0.38	0.19	0.57
1026 40		LO	0.36	0.13	0.49
1941-45	,,		0.37	0.17	0.54
1046 50		II.I	0.33	0.09	0.42
1951-55	,,		0.15	0.04	0.19
1956-60	,,		0.05	0.01	0.06

Deaths from Pneumonia.—There were 72 deaths from pneumonia, including 10 of the newborn, equivalent to a death-rate of 0.29. During the previous year the deaths were 56, equal to a death rate of 0.22. The following are the average death rates from pneumonia since 1931:—

1931-35 (Average)	 0.67	1946-50	(Average)		0.34
1936-40 (Average)	 0.63	1951-55	(Average)	1.93	0.27
1941-45 (Average)	0.46	1956-60	(Average)	80.0	0.25

Deaths from Other Diseases of the Respiratory System.— There were 129 deaths, including bronchitis 97, 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 0.52, as compared with 0.52 in the previous year.

Deaths from Influenza.—The deaths due to influenza numbered 23, giving a death-rate of 0.09. During 1960 the deaths were 4 and the death-rate 0.02. The following are the average death-rates from influenza since 1931:—

1931-35 (Average) ... 0·48 1946-50 (Average) ... 0·08 1936-40 (Average) ... 0·28 1951-55 (Average) ... 0·08 1941-45 (Average) ... 0·08 1956-60 (Average) ... 0·07

Deaths from Cancer.—The deaths from cancer were 497, an increase of 7 on last year's figure, equivalent to a death-rate of 2.00, as compared with 1.92 in the previous year.

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

1931-35	1	 0.00	1.28	1946-50	0	 1	1.63
1936-40		 	1.48	1951-55		 	1.72
1941-45		 	1.58	1956-60		 	1.85

Cancer of the Lung.—This group includes primary malignant neoplasms of trachea, bronchus and lung. There were 96 deaths from this cause (85 males and 11 females) as compared with 84 deaths (74 males and 10 females) last year.

Louno Council		eaths from of Lung.	No. of Deaths from Cancel other than Lung Cancel		
Age.	19	961	19	961	
Tencial to and	Males.	Females.	Males.	Females.	
Under	O durationno	ont yd eniv	y Hospital, I	the Materni	
1 Year	VOCHH OF	griden les gentre	Tone - an In	2	
1-	101-111-10	Dopost	dt vel-berine	er mroi-one ?	
5-			1	_	
10-		_	1	_	
15-	-	1	3	3	
25-	1	I mis and	3	4	
35-	1	1 - 300	5	19	
45-	14	3	22	36	
55-	36	3	28	57	
65-	26	4	48	55	
75-	4	1	39	51	
85-	3	no the start year	9	15	
TOTALS	85	11	159	242	

Deaths from Diseases of the Nervous System.—This group of diseases, which includes such causes as cerebral haemorrhage, apoplexy, etc., accounted for 510 of the deaths occurring in the area, being a death-rate of 2.05, as against 2.06 in the preceding year.

Deaths from Diseases of the Digestive System.—The death were 85, equivalent to a death-rate of 0.34, as compared with 0.37 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 1,313, giving a death-rate of 5.28, as compared with 4.91 in the previous year.

Deaths from Diseases and Accidents of Pregnancy and Parturition.

—There were 3 maternal deaths during 1961, giving a death-rate of 0.6. The rate for Scotland as a whole during that year was 0.4 per 1,000 births (live and still). The average maternal mortality rates for the County during the period 1931 to 1960 were as follows:—

1931-35 (Average)	 6.2	1946-50	(Average)	 1.4
1936-40 (Average)	 4.7	1951-55	(Average)	 0.3
1941-45 (Average)	 2.4	1956-60	(Average)	 0.5

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 ten 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:—

all of he negroom spiralest to a de	Ante- Natal.	
(1) Number of Clinics at end of the year provided by the Local Health Authority	_ 10	
(2) Number of Clinics at end of year provided by voluntary bodies	Nil	Nil
(3) Number of women who attended the Clinics during the year	2382	122
(4) Total number of attendances made by women during the year	8744	122

(b) Prevention of Break-up of Families.—The families, where break-up of the home is threatened by lack of parental care, are visited constantly by the District Nurse, when help, advice and instruction are given.

Where break-up of home is threatened by ill-health or by the admission of the mother to hospital, Home Helps are supplied at very low cost or even free.

To prevent the break-up of families where the mother is either temporarily or permanently the bread-winner, children under five are accommodated in the Nurseries at low financial cost. The mother is encouraged to take the children home at the week-ends or whenever she is free and so continue family life in the home as much as possible.

A typical case is that of parents with two children. The husband is shiftless and the mother a high-grade mental defective. The Housing Authority transferred the tenancy from the husband to the wife who now finds herself unable to pay the rent and was threatened with eviction. The children have been taken temporarily into the Nursery to enable the mother to find employment to discharge her debts.

(c) Child Welfare.—The Local Authority provides 43 Child Welfare Clinics at various Centres in the County. In populous areas these are held weekly, and in other areas fortnightly. A Medical Officer is in attendance at each Clinic. A list of these Clinic premises is given in Table IX.

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

43	(1) Number of Clinics provided at the end of the year by the Local Health Authority
opposite the state of the state	(2) Number of Clinics at end of the year provided by voluntary bodies
	(3) Number of children attending the Clinics during the year and who on the date of their first attendance this year were—
5,808 2,320	Under 1 year of age Over 1 year of age
	(4) Total number of attendances made during

the year by children who at the time of

attendance were-

Under 1 year of age 40,411 Over 1 year of age 14,023

- (d) 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, transport being by specially equipped ambulance.
- (e) Distribution of Welfare Foods.—To serve the County Area welfare foods are distributed from Centres in 54 towns and villages. Beneficiaries living some distance from a distribution centre can, however, by writing to the County Medical Department, have supplies sent to them by post.

During the years 1959 to 1961 the uptake of welfare foods throughout the County was:—

		Uptake.	
	1959.	1960.	1961.
National Dried Milk	52,628	42,428	27,563
Cod Liver Oil	19,920	19,709	12,955
Vitamin "A" and "D" Tablets	7,729	7,283	4,864
Orange Juice	99,005	99,522	54,272

It is estimated that the percentage drop in the uptake of Orange Juice and Cod Liver Oil is 80% and 84% respectively, since the price increase in Clinic Vitamin products.

(f) Dental Care.—Visits by Dental Officers to Ante-Natal Clinics were continued as far as a depleted staff would allow. The amount of treatment given during the year under review is down slightly, and this is due no doubt to the alteration in the National Health Service Act allowing maternity cases to have free dentures from private practitioners. In the past only the Local Authority Clinics could provide dentures free of charge.

The examination and treatment returns for mothers and young children are now combined with those relating to school children as laid down by the Department of Health.

Report by Chief Dental Officer.—Despite the depleted staff it is encouraging to see that the number of patients examined shows an increase which is reflected in the numbers accepting treatment.

A considerable part of the treatment consisted of extractions and dentures, and although every effort is made to conserve teeth, in many cases extractions were necessary to remove sources of infection.

(g) Other Provisions.—There are two Residential Nurseries in the County—the Moor Nursery, Irvine, and Fergushill Nursery, Kilwinning. Each has thirty places for children under five years of age. The Nurseries are primarily provided for the children of unmarried mothers who find it difficult to work and look after their children whom they wish to keep. Many of these children are cared for by their mothers at week-ends, thus maintaining the link with home. Other children are admitted because of the mother's illness or where it is necessary to immunise the infant against tuberculosis.

A charge of 5/- per week is made for the maintenance of a child and the mother is expected to provide clothing. In spite of the small charge many mothers are reluctant to provide sufficient clothing.

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

The policy of the County Council is to allow Clinic premises where ever possible to be used by Regional Hospital Board Medical Staff and by General Practitioners.

Clinics are used in this way at Annbank, Ayr, Beith, Cumnock, Dalry, Drongan, Girvan, Irvine, Kilbirnie, Kilwinning, Largs, Mauchline, Maybole, Patna, Prestwick, Saltcoats and Troon.

(3) Midwifery.

The Domiciliary Midwifery Service undertook the care of 1,033 patients during 1961, as well as giving a great deal of service during the puerperium of patients dismissed early from hospital. All Nurses are trained in administering gas and air, and are equipped with Minnitt apparatus.

In certain areas Part II. Pupil Midwives receive domiciliary training under the supervision of District Nursing Sisters recognised as teachers by the C.M.B. All these District Nursing Sisters have had training in the use of Trilene Inhalers.

The following are the statistics regarding Midwifery, including those prescribed by the Department of Health:—

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

	year-	that is bei	ore	correcti	onfor	moth	er sresic	ience—
		Live Birt					4,844	
		Still-Birt	hs	a studt	- take	BIVOY!	158	
				TOTAL			4	5,002
(2)	Total nun	aber of Bi	rth	s occurri	ng in	Institu	itions	
-		ling priva						3,969
(3)	Total nur	mber of I	Bir	ths occu	rring	at ho	me-	
	Live	bm-i		to med	IOO T	640.7	1,018	
	Still	States 27		on Line	7		15	
				TOTAL		holo	modern a	1,033

The following table compares the numbers of Births in Hospital and at Home over the past eight years:—

			Hospital.	Home.	
1952-56	(Av	erage)	 2,980	1,269 (30	per cent.)
1957			 3,393	1,261 (27	7 per cent.)
1958			 3,703	1,256 (28	per cent.)
1959		H 9	 3,798	1,127 (23	B per cent.)
1960			 3,766	1,112 (23	3 per cent.)
1961			 3,969	1,033 (20	3 per cent.)

(4) Number of Births in (3) classified to show nature of attendance at birth—

		Cases dealt of the Nation	Cases dealt with under Section 23 (2) of the National Health Service (Scotland) Act, 1947.	ice (Scotland)	000	her Domic	Other Domiciliary Cases.	ses.	
	Toyon of the second of the sec	Doctor Engaged and Present at Confinement.	Doctor Engaged and not Present at Confinement.	Midwife Alone (no Doctor Engaged).	Doctor and Midwife Engaged	Midwife alone (no Doctor Engaged)	Without Doctor or Midwife	All Other Cases.	Total.
-	(a) Midwives Employed by the Authority (including those engaged on a fee-per-case basis)	302	697	33	SVI SU	DIVERSE AND		Mary Mary	1,032
5	(b) Midwives Employed by Voluntary Organisations under arrange- ments made by the Authority	(a) all	Hospit (a) II (b) II (d) II (d	of photos	HIGHT Lank Y	1-		Author	1
()	(c) Midwives Employed by Hospital Boards of Management under arrangements made by the Authority with the Regional Hospital Board	02 (5)	oz (i)	No. of design	Lacol Total	moisay		edd 1922 (1	gambs I
(F)	(d) Private Practising Midwives	ı	ı		into	1	1	-	1
-	(s) Other Cases	1	1	1	1	1	1	1	-
	TOTALS	302	697	33	I	1	1	1	1,033

(5) Medical A	id-
---------------	-----

- (a) No. of cases in which medical aid was summoned during the year by a Midwife and a fee was payable by the Local Health Authority under Section 14 (2) of the Midwives (Scotland) Act, 1951
- (b) No. of cases in which medical aid was summoned during the year by a Midwife where the Medical Practitioner had agreed to provide the patient with Maternity Medical Services under the National Health Service (i.e., cases for which no fee was payable by the Local Health Authority)......302

(6) 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—
 - (1) No. in (a) employed on local Health Authority work)... 68
 - (2) No. in (a) not employed on local Health Authority work ...

(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 31/12/61—
 - (1) No. in (c) in use by domiciliary
 Midwives employed on
 Local Authority work
 (including those in use by
 Hospital Midwives undertaking domiciliary cases).

302

68

(2) No. in (c) in use by domiciliary Midwives not employed on Local Health Authority work	
tion with a consequent restriction of time devoted to health	48
(d) No. of sets on order at $31/12/61$	Nil
(e) No. of cases in which gas and air was administered by Midwives in domiciliary practice during the year (including cases attended by Hospital Midwives undertaking domiciliary cases)—	
(1) When Doctor was not present at delivery 289	
(2) When Doctor was present at delivery 86	375
(f) No. of cases in which pethidine was administered by Midwives in domiciliary practice during the year (including cases attended by Hospital Midwives undertaking domiciliary cases)—	
(1) When Doctor was not present at delivery 368	
(2) When Doctor was present at delivery 107	475
(7) No. of Cars in use by Midwives at 31/12/61	51
Supply of Maternity Outfits.—1,019 maternity outfits supplied during the year to mothers for domiciliary confine	
Additional Information—	
Institutional Births—	
Ayrshire Central Hospital, Irvine	2,806
Kilwinning Maternity Home	1,032
Davidson Hospital, Girvan	131

(4) Health Visiting.

An effort was made by the District Nurses to carry out routine health visiting of all children under five. In areas of nursing shortage, however, urgent medical cases have had to have prior attention with a consequent restriction of time devoted to health visiting.

The visiting of tuberculous patients in their own homes has been undertaken by a special staff of four Health Visitors. They are centred in Hospital under the direct supervision of the Chest Physician. This ensures integration of treatment and preventive services.

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

682 Boost Handley 36	Number Total Visited. Visits.
*Expectant Mothers	(0)
Infants	7,225 36,206
(1:11 /1 =)	18,271 48,488
Tuberculosis Patients	1,853 4,424
Other Cases	783 3,641

*All visits in this category were paid by Health Visitors/Midwives who attended the confinement. The total number of visits was 33,914.

(5) Home Nursing.

In areas where there is an acute shortage of District Nurses only the most urgent nursing care can be given. The type of work undertaken by Nurses includes domiciliary midwifery, care of mothers and babies during the puerperium of patients dismissed early from hospital, general care of old people, administration of insulin and antibiotics, attendance at Child Welfare Clinics, School Clinics and School Inspections and Health Visiting. In spite of the provision of attractive well-furnished houses, domestic help and help with gardens, District Nurses are in very short supply. This shortage coupled with time off on account of illness, holidays, etc., is straining the service to the utmost limits.

- (1) Number of cases attended by District Nurses in their capacity as Home Nurses ... 5,374
- (2) Number of visits paid by Nurses to these cases... 123,653

The number of elderly patients (those aged 65 years or over) included in the former figure was 2,199. The total number of visits paid to these elderly patients was 74,566.

Nurses' Homes and Clinics.—The following has been approved and progress is indicated:—

Ardrossan Clinic ... Occupied December, 1961.

(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 years have been as follows:—

1949	85	1956 878
1950	388	1957 899
1951	524	1958 946
1952	695	1959 905
1953	697	19601017
		19611071
1955		

At 31st December, 1961, the number of Home Helps employed was 279, and the number of families served 594. 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-four hours weekly. The average is twenty-two hours weekly.

Of the 1,071 cases dealt with in 1961, 862 were on account of chronic sickness (including aged and infirm cases) and 108 on account of confinement.

It will be observed from the table provided that at the end of the year the duration of help to 356 households (60 per cent.) exceeded one year and to 91 households (15 per cent.) exceeded five years.

The evening and all-night service, introduced in December, 1955, continues in operation. During 1961, 19 cases received evening help, 8 night attendance, and 1 both evening and night attendance. The corresponding figures for 1960 had been 20, 5 and 3 respectively.

AYR COUNTY COUNCIL-HOME NELP SERVICE.

NUMBER OF CASES DEALT WITH DURING 1961 AND DURATION OF CASES SERVED AT END OF YEAR.

	DE DE	No of		7.0		Dur	ation of Ca.	Duration of Cases Served at end of	it end of Ye	Year.	A
District.	No. of Cases at 31/12/60.	Supplied Supplied with Helps during Year.	No. of Cases Completed during Year.	No. of Cases at 31/12/61.	Over 5 Years.	Between 3 and 5 Years.	Between 2 and 3 Years.	Between 1 and 2 Years.	Between 6 Months and 1 Year.	Between 3 and 6 Months.	Less than 3 Months.
Annbank Ardrossan Auchnieck Ayr Landward Beith Catrine Cumnock Dalmellington Dalry Darvel Dreghorn/Springside Drybridge Dunlop Fenwick Galston Girvan Huriford Lirvine Kilbirnie/Glengarnock Kilmaurs/Crosshouse Kilmaurs/Crosshouse Kilmaurs/Crosshouse Kilwinning Largs Maybole Mauchline Muirkirk New Cumnock New Cumnock Stiwanalns Parns Prestwick Saltcoats Stevenston Tarbolton	821820000000000000000000000000000000000	30 30 30 30 30 30 30 30 30 30	240 882 722 722 722 722 722 722 722 722 722	0 E 1 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	8 2 2 4	401-0000 1001 4000 0 0 1004- 705-1-5-1000 4-	-4-000-00 - - - - 01-02-4-4-01 -04 -0	4001 400 0 1 0 0 1 1 1 1000 1 1 4 0 4 5 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0			m u 4 u 4 01 m u 1 m 1 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2
TOTALS	550	18	477	594	16	06	62	113	96	40	94

(7) Vaccination and Immunisation.

(a) Vaccination.—With the cessation of compulsory vaccination, the practice of infant vaccination has become much neglected, and though smallpox does not often appear in this country nevertheless when it does there is invariably a high proportion of deaths among those affected, mainly in those who have not been protected.

To bring to notice the importance of primary vaccination in infancy a letter is circulated to the parents of all unvaccinated children who have attained the age of three months. This measure is supplemented by the display of posters at the Child Welfare Clinics and the advice of the District Nurses, Health Visitors and Clinic Doctors.

Details of vaccinations notified during the year are as follows :-

In addition, 6,785 persons re	Primary Vaccinations.	Re- Vaccinations
(1) Typical Vaccinia greatest at 7th to 10th Day	2,652	222
(2) Accelerated (Vaccinoid) Reaction (5th to 7th Day)	2	122
(3) Reaction greatest at 2nd to 3rd Day	4	262
(4) No Local Reaction	264	52
TOTALS	2,922	658

Of the 2,922 persons who received primary vaccination, 1,426 (49%) were children born in 1961 and 876 (39%) were children born in 1960.

Of the total number of primary vaccinations 1,104 (38%) were carried out by the Local Authority's Medical Staff.

(b) Diphtheria Immunisation.—Every effort is made to maintain a high percentage of immunisation among infants and young children.

A circular letter is issued to the parents of all babies who have reached the age of six months explaining the benefits and protection which immunisation will confer, together with a stamped addressed card inviting their agreement to this procedure. The vital importance of protective inoculation is further stressed by poster display and medical and nursing advice.

In the case of those children who have not been inoculated by the time they have reached one year, a further letter is sent to the parents advising them to have their children protected. Again a stamped addressed card is enclosed for their consent.

School children during their first year may receive either two injections of diphtheria vaccine if they have not been protected in infancy or a single booster injection if they have. Consent forms are issued to the schools, for distribution to parents, for this purpose.

Of the total number of inoculations, 4,152 were performed by the Local Authority's Medical Staff.

DIPHTHERIA IMMUNISATION.

		New Inoculations.	Maintenance Inoculations.
Pre-School Children	199	 3,532	11
School Children		 357	2,352
TOTALS		 3,889	2,363

- (c) Whooping Cough Immunisation.—The number of children who were immunised against whooping cough during 1961 was 3,490. This compares with 3,715 in the previous year.
- (d) Poliomyelitis Vaccination.—The following table shows the numbers in the various categories who were immunised against poliomyelitis during the year:—

Class.	No. of Persons Vaccinated with Two Injections.	No. of Persons who had Received One Injection Only.	No. of Persons Awaiting Vaccination	
Children Born in 1961	557	8	1	
Children Born in Years 1943-60	4,354	589	40	
Persons Born in Years 1933-42	904	44	13	
Persons Born in Years 1920-32	2,609	52	National leads and	
Others	494	4	during 1961	

In addition, 6,785 persons received a third injection, raising the total number of persons fully immunised since the beginning of the scheme to 79,503.

A fourth injection was given to 24,811 primary school children.

(8) Prevention of Illness, Care and After-Care.

(a) **Tuberculosis.**—There were notified 89 cases of pulmonary tuberculosis and 17 of non-pulmonary tuberculosis. All cases were confirmed.

Pulmonary Tuberculosis.—Of the 89 new cases of pulmonary tuberculosis 62 were males and 27 were females. 75 per cent. (67) of these cases received institutional treatment during the year.

The notifications for the years 1952-61 inclusive were 159, 180, 168, 166, 168, 179, 147, 107, 105 and 89.

Including cases notified in previous years, 102 patients were admitted to Hospitals and Homes during 1961 as follows:—

Ayrshire Central Hospital, Irvine		 	87
Heathfield Hospital, Ayr		 	13
Mearnskirk Hospital, Newton-Mearn	ıs	 	2

There were 11 deaths, of which 4 occurred in Institutions.

Non-Pulmonary Tuberculosis.—The 17 new cases of non-pulmonary tuberculosis are classified as follows, according to the localisation of the disease:—

				No.	of
				Cas	es.
Abdominal			 	 	2
Superficial Glan	nds (Cervi	cal)	 	 	7
Bones and Join	its		 	 ***	2
Genito-Urinary	Organs		 	 	4
Meningeal			 	 	1
Other Organs			 AND Y	 	1
					-
					17
					_

Fourteen patients were admitted to Hospitals and Homes during 1961 as follows:—

Ayrshire Central Hospital			3
Mearnskirk Hospital, Newton-Mearns			3
Robroyston Hospital, Glasgow	ion. O.	ribbe 's	3
Stonehouse Hospital		NO 1980 O	1
Heathfield Hospital, Ayr	01.00	90.A. 9	1
Seafield Hospital, Ayr		•••	3
			-

14

There were no deaths.

Preventive Care and After-Care.—There are four Tuberculosis Nurses. Although on the staff of the Medical Officer of Health, these are centred at the Area Chest Clinics and work under the direct supervision of the Area Supervising Tuberculosis Physician, with whom a close liaison is maintained.

Hospital Service.—Dr. Boyd, Area Supervising Tuberculosis physician, reports as follows:—

"The downward trend in the number of new cases of Tuberculosis occurring in the community continues and the time when fewer than one hundred cases are discovered in any one year seems near at hand. The toll is still heaviest among males over 45 years of age and as previously recorded this is just the age group who are loath to submit say to Mass Radiography.

"In discussing the eradication of Tuberculosis at a Symposium sponsored by the Chest and Heart Association held in Glasgow in December last year, Dr. I. M. Macgregor claimed that Tuberculosis case finding was the key to its elimination. This is undoubtedly true and with this in mind we, in Ayrshire, had hoped to introduce on 1st January, 1962, a chest x-ray-for-all policy for patients admitted to hospital no matter the reason. However, at the moment this matter is held up because of the cost involved. It is now many months since we, i.e., the Medical Superintendent, the Chest Physician and the Radiologist agreed that the facilities in Ayrshire were adequate to adopt this method of finding the unsuspected case."

Domiciliary Treatment.—Cases suitable for treatment at home or awaiting admission to hospital were visited by the Tuberculosis Nurses, who paid 4,424 visits to 1,853 cases.

These Nurses also give advice to patients regarding National Insurance and National Assistance entitlements, and grants from voluntary organisations.

Supply of Milk.—The number of free milk vouchers issued was 388, covering some 8,730 gallons of milk at an approximate cost of £2,473.

Bed and Bedding.—Articles of bedding were issued on loan to two patients.

	On $Loan\ at$ $31/12/60.$	Issued 1961.	With- drawn 1961.	Written off.	Remaining on Loan at $31/12/61$.
Bedsteads	40	1		10	31
Mattresses	22	1	_	4	19
Blankets	17	8		10	15
Sheets	17	4	_	9	12
Pillows	9		20	2	7
Pillow Cases	10	2		6	6

Housing.—Many Housing Authorities within the County make 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.

(b) B.C.G. Inoculation Scheme.—The B.C.G. Inoculation Scheme for children approaching school-leaving age, begun in 1953, has continued throughout the year, with the exception of the holiday period. As in previous years, children of approximately 13 years of age are selected as the most suitable group for this purpose.

Information concerning the details of the project are circulated to parents of all the children concerned and consent obtained in a large majority of cases. This group received a preliminary injection into the skin of the forearm in order to demonstrate whether or not they have acquired a degree of immunity to tuberculosis by natural means. Those showing no reaction 72 hours after the initial injection are given B.C.G. The positive reactors are assessed and those showing a strongly positive reaction are immediately referred to the Chest Physician for further examination. Those children whose reaction is considered to be within normal limits are subsequently x-rayed as a routine measure.

The relevant figures for the past three years are as follows:-

B.C.G. Vaccination.

SCHOOL CHILDREN.

Then were no double,	1959	1960	1961
Number in Age Group	. 3,933	4.159	3,387
Consents	3,505	3,598	2,994
Percentage	. 89%	87%	88%
No. actually Mantoux Tested	. 3,132	3,228	2,746
Positive Response	. 410	412	325
Percentage	. 13%	13%	12%
Negative and given B.C.G	. 2,722	2,816	2,421
Percentage	. 87%	87%	88%

The percentage of positive reactors to the Mantoux Test shows a

marked decline from the initial years of the Survey, when the relevant figures were as follows:—

195332%	195616 %
195420%	195716%
195525%	195814%

Statistics for the year 1961, in the form required by the Department of Health, are:—

		Tuberculin Tested.		Negative Re-actors.		Vaccinated during 1961	
	stuncem emitter a sa bete sengues wall bulw tendeast of the allowing the leafur a	М.	F.	М.	F.	М.	F.
(1)	Nurses	9	62	page 1	8	HOUSE.	8
(2)	Medical Students	_	_	-	-		-
(3)	Contacts	233	218	215	211	287	271
(4)	SpecialGroupsnotincluded in (1) to (3) above—	POLA .	bia mil			an Ja	maller morte
	(a) School (13 yrs)	1442	1389	1218	1203	1218	1203
	(b) New Born Babies		_	_	1		1
	(c) Students	_	_	-			_
(5)	Others	2	2	2	2	2	2

(c) Mass Radiography.—The services of the Lanarkshire Unit have been readily available throughout the year so that very little difficulty has been experienced in arranging visits to various parts of the County for the purpose of X-raying selected groups of the population. These included Mantoux positive school children, teachers, students, factory workers, etc. These facilities have also been forthcoming when the need arose to examine contacts of known cases radiologically.

The Unit vehicle has recently been redesigned and new equipment installed; this makes for increased mobility and improved amenities for both clerical and technical staff and those making use of the service. The clerical work can now be completed within the van, thus ensuring a continuous procedure in documentation and filming. The need for recalls has been obviated by the use of a modern machine taking larger films with consequent better definition.

The Mass Radiography Service was in the County area for varying periods during the months of February, May, October and November, when it was sited in Kilmarnock and district, I.C.I., Stevenston, Saltcoats, Hurlford, West of Scotland College, Auchincruive, Irvine, Troon, Dalry and Glengarnock. A total of 10,778 persons were X-rayed during these visits, a proportion of whom were resident in the Burgh of Kilmarnock. Included in this total were 364 school children who were found to have a positive Mantoux reaction when tested as a routine measure at school, together with 1,182 school teachers who have expressed their willingness to be X-rayed at periodic intervals. These surveys brought to light 12 cases of active pulmonary tuberculosis and 34 requiring further observation as suspected cases.

(d) Epileptics and Spastics.

This Authority has adopted Schemes under Sections 29 and 30 of the National Assistance Act, 1948, which will provide for the welfare of spastics and epileptics among other groups of handicapped persons. Until these Schemes are made effective such cases are dealt with as they arise. This includes advice, direction to appropriate agencies, arrangements for training and admissions to treatment centres. There are three epileptic cases in the Colony at Bridge-of-Weir, and from time to time suitable cases are admitted to Anton House, Broughty Ferry, a training centre for handicapped girls. Close contact is maintained with the District Rehabilitation Officers of the Ministry of Labour to ensure that epileptics and spastics and other handicapped persons are employed in suitable capacities.

A fairly comprehensive list of spastic cases affecting children of school age and under has been compiled from several sources—(a) the School Medical Records, (b) Orthopaedic case lists, (c) District Nurses, and (d) Register of Handicapped Children.

There are approximately 103 children in the County area who suffer in varying degree from cerebral palsy. These can be divided into different categories as follows:—

Forty-one spastic children whose intelligence is sufficiently unimpaired (though their physical handicaps vary widely) attend ordinary schools.

Of those who are mentally or physically handicapped to such a degree as to require education in Special Schools, 19 are accommodated within the County (including 4 resident pupils at St. Leonard's Home), 11 are resident in Special Schools outwith the County, 1 receives tuition at home on account of severe physical disability, 4 are under observation at home until a final assessment can be made, and 5 are awaiting admission to Special Schools. There are 2 known spastics among the pre-school children.

There are 20 ineducable spastic children, 8 of whom are in Certified Institutions, 6 at home and 6 in Occupational Centres. Some of these are on the waiting-lists for admission to suitable institutions.

Information regarding the incidence of adult spastics is far from complete.

There are 33 known cases which include 18 severely handicapped, 5 mildly affected, and 10 who are able to continue ordinary employment. In this latter category there is a very considerable number of cases so little affected that they have not been brought to the notice of the Authority.

A close liaison exists between the Medical Department and the local Orthopaedic Specialists. Practically all spastic children are under their supervision and, where necessary, are referred to them by the School Medical Officers for further physical assessment and treatment. Speech therapy can be undertaken at the request of the specialist for any of these cases which are considered suitable by the Organiser of the Child Guidance Service. Information regarding Intelligence Assessments is made available if desired.

A part-time Physiotherapist is employed by the Local Authority. Her work concerns physically handicapped children at Park School, Kilmarnock, and St. Leonard's School, Ayr. Two half-day sessions per week are undertaken at each place.

The Scotscraig Committee of the Scottish Council for the Care of Spastics continues to operate a Mobile Physiotherapy Unit which provides treatment for severely physically handicapped children at their homes. The number of County cases dealt with in this way is ten and each child received several treatments per week.

(e) Convalescent Home Provision.—This Local Authority does not maintain a convalescent home in its area. The only existing arrangement with a voluntary organisation is with regard to the Saltcoats Mission Coast Home to which an annual donation is made by the Local Authority and in return two subscribers' lines are given each year for the admission of suitable cases selected by the County Medical Officer.

(f) Chiropody.—The Service has continued to expand during the year until now the entire County is covered. The six full-time Chiropodists on the staff are stretched to meet the increasing number of old people who apply for treatment, and if this trend continues as is anticipated an increase in staff will be required to meet the need.

In an effort to concentrate the activities of the full-time staff, a departure from customary policy was made last year by engaging the services of a private Chiropodist in the Girvan area on a sessional basis. The initial arrangement was for eight sessions per month, each of three hours, covering Girvan, Ballantrae and Colmonell. This arrangement has worked very satisfactorily but inevitably the Chiropodist has found that there has been a steady increase in the patients on his lists and, being a rural area, a high proportion of domiciliary visits was necessary. An abrupt extension of the service was required when a request from the village of Barr added a substantial number of patients to the list. To meet these commitments three additional sessions of three hours each were authorised in June of this year.

The Service provided by the Red Cross Society in the Largs and Irvine Valley areas continues to meet the needs of local residents of suitable age. It is complementary to that provided directly by the Local Authority in other parts of the County from whom it receives an annual grant.

These adjustments at the extremes of the County enable the full-time staff to concentrate on the central areas and saves much travelling time.

As before, the Service is restricted to old people in the community who would not otherwise be able to receive the attention to their feet necessary to their welfare. The Chiropodists operate whenever possible at fixed Clinics so that as many cases as possible may be seen in a given time. Domiciliary care is available only to those who are physically unable to leave their homes. In most areas Local Authority Clinic premises are available; elsewhere they are rented from various local organisations. Since its inception six years ago expansion in this field has been continuous, necessitating periodic increases in staff to meet increasing demands. Treatment is provided free of charge and with a few exceptions is confined to people of pensionable age.

A register of patients who have received an initial treatment is kept and each receives a card bearing the date and time of their next visit. As far as possible the various Clinics are held at regular intervals. As new areas are served the principle of close association with local Old People's Welfare Associations has been maintained. Representations from these organisations have been

of great help in advising on the needs of their areas and by assisting at the Clinic sessions. Local Doctors and Nurses also refer suitable cases for appointments.

Regular Clinics are established as indicated below and periodic visits are made to Old People's Homes. A certain amount of domiciliary visiting is undertaken as circumstances permit.

Clinics-

Irvine. Annbank. Patna. Dalmellington. Ardrossan. Dalrymple. Kilbirnie. Prestwick. Kilmaurs. Saltcoats. Auchinleck. Dalry. Ballantrae. Kilwinning. Skelmorlie. Dailly. Dreghorn. Logan Toll. Springside. Barr Mauchline. Beith. Dundonald. Stevenston. Dunlop. Maybole. Stewarton. Catrine. Colmonell. Girdle Toll. Monkton. Tarbolton. Muirkirk. Crosshouse. Troon. Girvan. Hurlford. Cumnock.

Domiciliary Districts—

Crosshill, Drongan, Dunure, Fenwick, Kirkoswald, Maidens, Shewalton, Straiton and Symington.

Old People's Homes—

Birkenward House, Skelmorlie.

Lainshaw House, Stewarton.

Largs Home, Largs.

Nether Auchendrane, by Ayr.

Dunselma, Fenwick (Church of Scotland).

During the year the County Chiropodists attended 4,112 patients and gave 17,417 treatments. This compares with 3,683 patients and 14,772 treatments in the previous year. In addition, the Private Chiropodist at Girvan gave 540 Clinic and 152 Domiciliary treatments.

During the year 1,487 treatments were given at the Clinic sessions and 266 domiciliary visits were made in the Valley area. In all 273 patients benefited.

In the Largs and Skelmorlie areas 786 treatments were given —283 of these were domiciliary, 325 at clinics, 62 at Haylie House, Largs, 89 at Birkenward House and 27 at the Retreat, Largs.

- (9) Control of Infectious Diseases.
- (a) Diseases Notified under the Infectious Disease (Notification) Act, 1899, and subsequently confirmed.—

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

Diphtheria (including Membranous Croup).—For the tenth successive year there were no cases of Diphtheria.

The following are the cases and the deaths since 1939, groupedin five year periods:—

			Cases.	Deaths.
1939-1943	110	 	 2,361	75
1944-1948		 	 867	28
1949-1953		 	 9	1
1954 to date		 	 Nil	Nil

The Diphtheria Immunisation Campaign began in 1936.

Erysipelas.—The number of cases was 3, compared with 8 in 1960. There were no deaths.

Scarlet Fever.—During the year there were 27 cases of Scarlet Fever, compared with 138 in the previous year.

Typhus Fever.—No case was reported.

Enteric Fever (including Typhoid and Paratyphoid Fever).— There were no cases of Paratyphoid Fever, compared with two cases in 1960.

One case of Typhoid Fever occurred, the same incidence as in 1960. This case concerned a boy, aged 13½ years, who was infected while on holiday in England.

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

Puerperal Fever.—No case has occurred since 1959. The following are the cases and deaths since 1945, in five-yearly periods:—

			Cases.	Deaths.
1945-1949	 	 	44	1
1950-1954	 	 	5	1
1955-1959	 	 	2	-

(b) Diseases Notified in terms of Regulations of the Department of Health and subsequently confirmed.—

Puerperal Pyrexia.—One case was notified, compared with two in the previous year.

Cerebro-Spinal Fever.—Eight cases occurred, compared with 3 cases in the previous year. There were no deaths.

Poliomyelitis.—No cases occurred during the year.

The following are the cases and deaths since 1954:-

	Cases.	Deaths.	stomach, vomit	Cases.	Deaths.
1954	41	3	1958	22	3
1955	. 21	1	1959	5	
1956	17	1	1960		_
1957	13	1	1961		_

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

Dysentery.—There were 83 cases notified during the year, compared with 86 cases the previous year.

Sonné Dysentery occurred at Biggart Home, Prestwick, between the 16th February and 20th April. In all there were 25 cases.

In no instance was any child seriously ill; indeed, most were discovered by bacteriological examination. All admissions were suspended when the infection was discovered.

The position was further complicated by the intervention of four cases of Measles and seven cases of Chickenpox.

All cases of Dysentery were removed to Ayrshire Central Hospital, but the Measles and Chickenpox were treated in the Isolation Ward of the Home.

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

Ophthalmia Neonatorum.—No case occurred.

Acute Influenzal and Acute Primary Pneumonia.—The numbers were of the former 6 and of the latter 232. During the previous year the numbers were 1 and 181 respectively.

Malaria.—No case occurred compared with 1 case in 1960.

Infective Jaundice (Spirochaetosis icterohaemorrhagica).—This disease did not occur.

Whooping Cough.—There were 26 cases notified during the year, compared with 114 cases in the previous year.

Food Poisoning.—There were three incidents which came to notice during the year :—

(a) The first concerned two ladies who consumed the contents of two tins of chicken imported from China. Four hours after the meal they were simultaneously seized with pains in the stomach, vomiting and diarrhoea. These symptoms continued at frequent intervals for about twelve hours when a gradual return to normal was made.

The remains of the contents of the tins were available for examination and were found to contain a growth of Staphylococcus albus.

Steps were taken to prevent any similar outbreak by suspending sales of the offending product.

(b) The second incident concerned a family of four who became ill three hours after consuming corned beef from a tin. One of this group was so severely affected that she was removed to Ayrshire Central Hospital.

Eventually all made an uneventful recovery.

The contents of the tin revealed a growth of Staphylococcus aureus. The necessary steps were taken to prevent further incidents.

(c) The third incident affected a household comprising a mother and three children, all of whom were removed to Ayrshire Central Hospital. The offending article of diet was a piece of pork which had been previously cooked and then served cold. Again the organism responsible was Staphylococcus aureus.

All cases made an uneventful recovery.

Other Diseases.—A case of Anthrax was notified during the latter part of the year. The patient, a male aged 18 years, was employed in a carpet factory. He was admitted to Ayrshire Central Hospital on account of a small septic sore near his right eye. The condition was diagnosed as a malignant pustule but because of local treatment prior to admission to Hospital, the diagnosis was not confirmed bacteriologically. The patient was neither ill on admission nor during his two weeks stay in Hospital. On discharge the lesion had healed.

It was assumed that he had been infected at his work and information was passed to the Local Medical Officer of Health and to the Medical Inspector of Factories.

(10) Mental Health Service.

- (a) Mental Cases.—The Authorised Officers, appointed as approved by the Secretary of State, dealt with 48 admissions to the Mental Hospital during the year (males 16, females 32).
- (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 are particulars of County Mental Patients in the care of Private Guardians as at 31st December, 1961:—

IN PRIVATE GUARDIANSHIP.

Where Boarded.		With Strangers.	Totals
Mental Defectives—		alsania.	
Within the County	20	11	31
Outwith the County	1	8	9
In Care of Officers of the Welfare Home, Ayr, and Ravenspark Hospital Irvine	.,	9	9
Mental Patients Certified—		10 7/8	
Within the County	1	-	1
Outwith the County	2	- 5	2
Totals at 31st December, 1961	24	28	52
Totals at 31st December, 1960	26	28	54

Number of Defectives admitted to Institutions during year (including		Females.	Total.
Informal Admissions)	5	3	8

(11) Relative Cost of Individual Health Services.

Service.	Net Cost, 1961-62.	Relative Percentage Cost.
Care of Mothers and Young Children (including Residential Nurseries and Priority Dental Service)	£57,472	21.2%
Nursing Service (Midwifery, Health Visiting and Home Nursing)	90,491	33.4%
Vaccination and Immunisation	6,829	2.5%
Prevention of Illness—Care and After-Care (Tuberculosis, Epileptics, Chiropody, Equipment)	17,034	6.3%
Home Help Service	68,318	25.2%
Control of Infectious Disease	1,896	0.7%
Port Health Administration	7,496	2.7%
Mental Health	3,521	1.3%
Milk Officers	8,768	3.2%
Sundry Expenditure	9,519	3.5%
A 11's annual annual and a second annual	£271,344	100%

C.—PORT HEALTH ADMINISTRATION.

Seaports.—No special problems arose 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 a ship.

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

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

RETURN OF TREATMENTS GIVEN BY AIRPORT NURSES FOR THE YEAR 1961.

	Medical	Surgical	Burns	Eyes	Ears.	Misc.	Total
January	75	55	4	10	9	7	160
February	63	41	8	13	1	6	132
March	47	66	5	11	2	2	133
April	78	32	7	9	1	_	127
May	54	79	5	17	1	_	156
June	70	49	5	13	_	_	137
July	55	61	9	20	9	1	155
August	67	54	6	14	9	18	168
September.	41	61	6	18	5	3	134
October	63	57	2	6	1	2	131
November.	38	63	5	19	_	1	126
December.	58	36	14	7	6	1	122
TOTALS	709	654	76	157	44	41	1,681

During the year 4,980 civil aircraft arrived at Prestwick Airport. The passengers disembarking totalled 42,073 and 72,717 landed in transit to other places.

The corresponding figures for the previous year were 5,370 aircraft, 74,324 passengers disembarked, and 138,537 in transit.

The numbers of American Service Personnel and their dependants are not included.

Month.	No. of Aircraft.	Passengers Disembarking.	Passengers in Transit.
January	469	1,262	6,276
February	289	1,628	4,918
March	314	3,110	6,290
April	304	2,869	4,171
May	388	2,977	7,385
June	562	5,221	8,410
July	399	11,023	8,743
August	636	4,192	1,473
September	529	3,046	8,080
October	405	3,261	7,842
November	323	1,464	3,897
December	362	2,020	5,232
TOTALS	4,980	42,073	72,717

D.-FOOD SUPPLY.

Milk (Special Designations) (Scotland) Order, 1951.

The results of sampling and testing to which the milk supplies of all Certified and Tuberculin Tested producers were subjected are summarised in the following table, and tests applied being the Plate Count and Coliform Tests:—

ATT	18	No. of	No. of Samples.	ekusi Sa		No. of Producers with	Producers	with		d V
signation.	No. of Producers at 31/12/61. Taken. Failing.	Taken.	Failing.		2 Failures.	3 Failures.	4 or more Failures.	1 2 3 4 or more Consecutive Consecutive Percentage Failures. Failures. Failures.	4 or more Consecutive Failures.	Percentage Failures.
ified	37	233	36	10	4	61	6		ı	15.4
erculin ed	1421	9915	1285	379	170	95	63	33	7	12.9

Each Tuberculin Tested supply was sampled on an average six times during the year with Certified Milk being sampled rather more often in response to a request from the Department of Health for Scotland. The incidence of failure for the respective designations, while still high, shows a drop from the previous year, 12.9%, as against 13.7% for Tuberculin Tested samples and 15.4% for Certified samples as compared with the 1961 figure of 27.4%.

Repeated sample failures and faults in production methods were responsible for six producers being reported to the Health Committee as a result of which five had their Tuberculin Tested Licences suspended; in the case of the sixth, an official warning was considered sufficient to effect the necessary improvement.

In June came the long-awaited report of the Committee appointed by the Secretary of State to prepare new Model Dairy Bye-Laws, and of immediate significance was the fact that the Secretary of State had accepted his Committee's recommendation that chemical sterilisation of dairy equipment be allowed as an alternative to scalding or steaming. Chemical sterilisation of bulk storage tanks was already permissible and the introduction of milk pipe-line installations had shown that circulation, cleaning and sterilisation by means of chemicals could be quite effective, although it must be remembered that the surfaces concerned were stainless steel, pyrex-glass or plexi-glass. At the risk of sounding oldfashioned or unduly pessimistic one wonders if chemicals will prove so effective in dealing with milking machine units, sieves, transport cans and the like when virtually all expert advice emphasises that, to ensure success, metal surfaces must be free from rust, cracks, milk-stone or scale, while rubber parts must not be cracked or perished and require the additional treatment of periodic defatting.

In the never-ending task of inspecting, advising and exhorting, Milk Officers made 2,391 routine inspections of equipment at dairy farms, while 390 milking inspections were carried out; in addition, 65 visits were made for the purpose of taking sterile rinses of utensils, with a further 575 for the swabbing of bulk tanks.

Reference has already been made to the installation of milk pipe-lines and it is worthy of note that, by the end of the year, 18 farms were equipped with "round-the-byre" pipe-lines, 13 of which conveyed the milk directly to a bulk storage tank in the dairy. Conveyor lines, with their more conventional system of drawing milk up from a 10-gallon can in the byre, were in use on 39 farms, all but one of which had a bulk storage tank.

Bulk Storage and Collection of Milk.—The year saw a rapid expansion of the Scottish Milk Marketing Board's bulk milk

collection scheme in Ayrshire with the number of farm tanks increasing from 80 to 151. At the same time the Secretary of State approved three new types of bulk storage tank, thereby making a wider choice of installation available to the farmer; the new tanks employed the chilled water system of cooling and, although only two of the three types have made their appearance on Ayrshire farms so far, their performance has readily met the high standard demanded of such equipment.

The bacteriological sampling of milk produced on bulk storage farms was naturally included in the general summary of Tuberculin Tested results given earlier in this report, but the following rather more specific details with comparative figures for the two preceding years should be of some interest:—

				No. c	No. of Failures	ures due to	0	No.	No. of Samples giving a Bacterial Count.	l Coun	ing a	Percentage	
		No. of			High		oH I	Under1	Under 100,000 Over 200,000	Over 2	000,000	of Failures due to	
Year.	No. of Farms.	Samples Taken.	Count only.	Coliform only.	Count & Coliform.	Total.	Count & Coliform. Total. Percentage. No.	No.	%	No.	%	Coliform only.	No. of Producers.
929	26	1771	1	12	cel a	13	7.34	173	7.76	-	0.56	92.3	18
096	80	342	5	31	3	39	11.4	332	0.76	œ	2.4	79.4	49
961	151	828	-	80	3	84	10.1	815	98.4	4	0.5	95.2	100

Three tanks were installed almost at the end of the year and, although included in the total of 151 farms, no samples of milk were in fact taken from same. As would be hoped for, the percentage of bulk storage samples failing to satisfy the prescribed tests is lower than the overall percentage failure for Tuberculin Tested milk, although with an incidence of 10% there are no grounds for complacency; it will be seen that with only a few exceptions, failure was due to the presence of coliform bacilli, high bacterial counts being almost negligible; indeed, some 98% of the samples had a bacterial count of less than 100,000 per millilitre, while it can safely be said that a very considerable number of the milk supplies tested had a bacterial count of under 10,000 bacteria.

The practise of swabbing tank surfaces to assess the efficiency of sterilisation was continued, although it is no longer possible to swab all tanks at monthly intervals; with efforts being concentrated on new producers coming into the bulk collection scheme, paying particular attention to those supplies which were giving unsatisfactory bacteriological results and making only a periodic check on the "old hands," some 3,054 swabs were submitted to the Area Bacteriologist of the Regional Hospital Board as against 1,109 the previous year. Results on the whole were satisfactory, although the colony count of 100 per square foot, the rather stringent standard recommended by the Department of Health for Scotland, was quite often exceeded; coliform bacilli were only on very rare occasions found on the tank surfaces, although in a few cases the milk pump was inclined to be a trouble spot.

By the end of the year no fewer than ten road tankers were engaged in hauling milk from Ayrshire farms to Creameries in Stranraer, Kirkmichael, Ayr, Mauchline, Bellshill and Glasgow; four tankers (including one based at Mauchline Creamery as a relief) belonged to the Scottish Milk Marketing Board, the remaining six being operated by private haulers. Washing and sterilisation of tankers was always carried out at a Creamery.

Non-Designated Milk.—Of the 1,462 milk producers registered by the Local Authority, only 4 had neither Certified nor Tuberculin Tested Licences. Seventeen samples of milk in this category were subjected to plate count and coliform tests as applied to Tuberculin Tested milk and all proved satisfactory.

Pasteurised Milk.—For the first nine months of the year samples of milk from the five pasteurising dairies in the County were taken at approximately weekly intervals, while samples of milk pasteurised and bottled at the Dairy School, Auchineruive, were taken during the courses of instruction held there by the West of Scotland

Agricultural College. In October, however, a recommendation was made by the Secretary of State to the effect that sampling of milk from those plants using the high-temperature-short-time pasteurising process need only be carried out at monthly intervals; three of the five "commercial" plants above-mentioned pasteurised milk by this process.

In all 217 samples of pasteurised milk were taken, four of which failed to comply with the standard laid down, three of the failures being due to the presence of coliform bacilli and the fourth to an unsatisfactory Phosphatase Test. One of the coliform failures which occurred in a dairy where "batch" or "holder" pasteurisers are still in use was caused by a lapse in the cleaning and sterilising of either the surface cooler or bottle-filler. The other three failures were confined to a H.T.S.T. plant where considerable trouble had been experienced with the mechanical bottle-washer; this was almost certainly the cause of at least one coliform failure, although the second may have been attributable in part to a degree of carelessness; a fault in the flow-diversion valve of the H.T.S.T. unit was responsible for the Phosphatase failure at the same dairy.

In the course of their sampling, Milk Officers frequently took a washed bottle from each dairy and submitted same for bacteriological examination; the results were always made known to the management of the plant concerned and were a useful guide to the efficiency of bottle-washing.

Sampling of Milk Sold by Retail.—The results of sampling of milk for retail sale are as follows:—

Grade of Milk.	Samples Taken.	Number Failing.
Certified	9	artinger 440 arti
Tuberculin Tested	241	32
Pasteurised	29	2

With Certified and Pasteurised Milk being sampled regularly at farm and creamery respectively, the majority of samples were taken from retail purveyors who handle bulk supplies of Tuberculin Tested Milk and bottle same in their own dairy premises. Although the percentage of such samples failing to meet the bacteriological standard for Tuberculin Tested Milk, namely $13\cdot2\%$, is lower than the previous year's figure of $15\cdot7\%$, the number of failures is still too great.

Washed bottles were also submitted at intervals for sterile rinse examination.

Milk-in-Schools Scheme.—Apart from the small village school in Lendalfoot whose pupils are mainly from farming families, the 140 Local Authority and 7 private schools in the small burghs and landward area of the County participated in the above Scheme.

The distribution of Pasteurised milk in one-third pint bottles was undertaken by seven main suppliers operating from dairies in Patna, Cumnock, Ayr, Kilmarnock, Kilmaurs, Saltcoats and Greenock; schools in Barrhill and Straiton, however, which are "off the beaten track" so far as supplies of Pasteurised milk are concerned, received Tuberculin Tested milk from three local producer-retailers.

The various supplies were sampled during each school term, and out of 32 Pasteurised milk samples tested four failed to comply; three of these failures were of milk from pasteurising plants outwith the County area and the matter was referred to the Local Authorities concerned. With regard to the local Tuberculin Tested milk no fewer than 8 of the 17 samples tested failed to satisfy the prescribed standard, this very unsatisfactory record being largely due to the milk of one producer, who experienced a "run" of failures; considerable time and effort was concentrated on the farm by a Milk Officer before the necessary improvement was obtained.

Scottish Milk Testing Scheme.—The rejection of milk considered unsatisfactory by reason of abnormal appearance, smell or flavour and the weekly testing of incoming bulk supplies for keeping quality was carried out by ten creameries to which at least part of Ayrshire's milk production was consigned throughout the year, the creameries concerned being in Sanquhar, Kirkmichael, Kilmaurs, Fenwick, Paisley, Clydebank and Glasgow.

The following is a summary of the number of consignments reported as failing the tests, the 1960 figures being given for comparison:—

Year.	Daily Inspection Test Failures.	Weekly Resazurin Test Failures.	No. of Producers involved in four or more W.R.T. Failures.
1960	489	15	ed than obtain board Education — created
1961	401	22	emocrosi—alicaria

The majority of Daily Inspection Test failures took the form of a 10-gallon can of milk returned to the producer as unsuitable, although in two instances no fewer than 80 gallons from individual consignments were rejected by the receiving creamery. The total amount of milk rejected was 6,071 gallons, a slight reduction on the previous year's figure of 6,322 gallons and while this can be termed "a lot of milk" it represents only a fraction of the thirty eight and a half million gallons which were consigned in cans from Ayrshire farms.

In addition to the 22 Weekly Resazurin Test failures shown, almost all of which occurred during the so-called summer months, one large Glasgow Creamery subjected each incoming supply to an extended Resazurin Test throughout the winter. As might be gathered from the name, this was a rather more stringent test of an experimental nature made on milk which, with the colder weather, could be expected to have better keeping qualities. The number of consignments failing to satisfy the Extended Test was 147, a formidable figure indeed..

Failure in any one of the three tests meant a visit to the farm of production by a Milk Officer who endeavoured to prevent a recurrence by inspecting, questioning, advising or warning as circumstances demanded.

E.—WELFARE SERVICES.

(1) National Assistance Act, 1948.

Section 21—Residential Accommodation.

The County Council maintains four Homes for old people in the County—Birkenward House, Skelmorlie; Lainshaw House, Stewarton; Largs Home, and Nether Auchendrane House, near Ayr, with, in addition, Part III. Accommodation at Welfare Home, Ayr, and Ravenspark Hospital, Irvine.

dalle konsteniel	Biri		La		Largs.	Net Auc dra	hen-	Hos	nspark pital, ine.	H	lfare ome, yr.
Maril of Ho	M.	F.	M.	F.	F.	M.	F.	M.	F.	M.	F.
No. Admitted during 1961 No. Discharged	3	5	11	9	2	1	4	57	28	48	66
during 1961 No. of Beds	3	6	5	7	3	-	3	51	36	36	44
occupied 31/12/61	8	14	18	21	4	8	21	59	21	14	18
Total No. of Beds	8	14	18	23	6	8	21	No	speci	fied	no.

At the end of the year all Homes were fully staffed :-

	Supervisor.	Senior Domestic.	Cook.	Maids.	Gardener Handyman
Birkenward	1	1†	O DE LOS	3	1
Lainshaw	2	1	1	7	1
Largs	1	-	- 01	1*	- A-
Nether Auchendrane	2	DE LA CONTRACTOR DE LA	1	4	Mai-Lin

† Acts as Cook.

* Part-time.

In addition 2 males and 2 females were accommodated in Voluntary Homes and 2 males and 2 females were accommodated in other Authority Homes.

Number of maintenance days at :-

	Male.	Female.	Total.
Birkenward House, Skelmorlie	2,408	5,412	7,820
Lainshaw House, Stewarton	5,868	8,213	14,081
Nether Auchendrane House, by Ayr	2,305	6,886	9,191
Largs Home, Largs		1,847	1,847
Ravenspark Hospital, Irvine	20,951	9,036	29,987
Welfare Home, Ayr	5,465	7,511	12,976
Voluntary Homes	5,244	6,606	11,850
Other Local Authority Homes	1,287	1,318	2,605
remote very telephone and the control of the	43,528	46,829	90,357

Section 29-Welfare Services for the Handicapped.

Blind Persons.—The County Council delegates its functions with regard to the welfare of Blind Persons to the Glasgow and West of Scotland Joint Committee for the Blind.

The report on the Domiciliary Blind for the year 1961 shows that 1,162 visits were paid to Blind Persons, 340 visits to Government Offices and Welfare Departments, 271 lessons were given to the Blind in their homes, 625 lessons given in classes. Fifteen Socials were given during the year, average number attending 105.

The number of Registered Blind in the County Area was 278.

114 Blind went on outings, 16 Blind Persons spent a holiday at the

Mission's Holiday Home at Dunoon. A successful outing to Millport was held in June, at which a large number of Blind Persons from all over Ayrshire attended, together with other Groups from the West of Scotland Area.

Handicraft Classes continued at Centres in Saltcoats, Irvine, Kilmarnock and Ayr.

The Domino Club continued as in the past, as also did the Bowling in Kilmarnock, where the members have attained a fair degree of skill.

Deaf and Dumb Persons.—The County Council delegates its functions with regard to the Welfare of Deaf Persons to the Ayrshire Mission to the Deaf and Dumb.

The Annual Report from the Ayrshire Mission to the Deaf and Dumb shows that 342 visits were made to the deaf in their homes and 31 visits to the sick.

Calls on behalf or with the deaf 331. Calls for employment of the deaf 23. Employment secured for 5 deaf persons. Interpretations at Court on behalf of 3 deaf persons.

The number of Deaf in the County area was 189.

Religious Services for the Deaf are regularly held in Ayr, Kilmarnock, Catrine and Kilwinning.

The Institute's premises are open at Ayr and Kilmarnock and a varied programme of social activities is available.

A free holiday at Dunoon was taken advantage of by 13 deaf persons from the County.

Hard of Hearing Persons.—A Club for the Hard of Hearing meets in the Hearing Aid Centre, Barns Park, Ayr, during the winter. Instruction is given in lip-reading, handicrafts and a varied social programme is organised.

The Crippled, Home-bound and otherwise Disabled.—The number of handicapped persons in the County is not known with certainty, but the findings of a survey completed in the County is shown on the following table:—

Illind Persons from all	0-16	17-19	20-39	40-59	60 plus	Total
Infantile Paralysis	2	2	15	22	8	49
Paraplegic		-	6	8	7	21
Hemiplegic	10000	1	6	13	12	32
Mentally Retarded	7	9	47	9	-	72
Mentally Defective	42	11	62	22	3	140
Spastic and Diplegia	19	6	12	6	1	44
Cripples (Amputation)	1	1	7	9	12	30
Cripples (Others)	4	2	10	28	17	61
Disseminated Sclerosis	-	-	8	26	6	40
Rheumatoid Arthritis	_	-	2	30	58	90
Muscular Dystrophy	1	1	2	2	Ame N	6
Epilepsy and Parkinson's Disease Cardiac and	3	7	20	11	6	47
Circulatory Diseases	2	1	14	16	35	68
Emphysema, Bronchitis	est of the	Ar and		-	The state of	10
and Asthma	41-10	DI 270-16	3	5	5	13
Pneumoconiosis Diabetes, Digestive	_	-	22000	3	11	14
System, Nephritis	108	later of	1	4	3	8
Paget's Disease	Witt b	section.	teis Turking	and -	1	1
Spondylitis	g Tri	2 70 3	5	2	3	10
Nervous Disorders	-	-	2	6	2	10
Vellare House Lasw. co	81	41	222	222	190	756

During the year two Occupational Therapists were employed, but this still leaves the Department well under strength. There is also a staff of three Social Workers, the Department runs two under strength. Centres for the physically handicapped are now established at Saltcoats, Irvine and Auchinleck. Centres for the mentally handicapped are established at Saltcoats, Irvine, Auchinleck and Prestwick. The Centre run for the physically handicapped of Ayr and District continues to thrive and disabled persons from the County Area attend here.

During the year three mentally handicapped children were provided with a holiday at the Scottish Society for Mentally Handicapped Children's Home, Craigrownie Castle, Cove, Dunbartonshire.

The Domiciliary Blind have always been considered separately and not classed with other handicapped persons but as progress is made it may be possible to bring these two groups more closely together since they have many common interests.

Welfare of the Aged.—There are some 36 Old People's Welfare Committees in the County.

Meals on Wheels are served in Saltcoats, Ardrossan and Irvine, the County Council paying one-third of the cost of this service.

A scheme, independent of the County Council scheme, operates in Galston.

Section 21 (1) (b).—Temporary Accommodation.

Temporary accommodation had to be provided for 14 families. Two were evicted from tied houses, five because of rent arrears, one an undesirable tenant, five from sub-let accommodation and one for supervision.

Section 37—Registration of Homes for Disabled Persons and Old People.

The Church of Scotland Home, Dunselma, Fenwick; South Beach House, Ardrossan; and Haylie House, Largs; and Davidson Home, Girvan, which provide for the care of the aged; also Red Cross House Home for Young Disabled Persons are registered under this Act.

Section 47—Removals to Suitable Premises of Persons in Need of Care and Protection.

No compulsory removals were carried out during 1961.

F.—MISCELLANEOUS SERVICES.

(1) Nursing Homes Registration (Scotland) Act.

There are three registered Nursing Homes, having a total accommodation for 53 chronic sick and medical cases.

(2) Health Education.

During February two films demonstrating the importance of dental care were shown to as many schools as possible throughout the month, and aroused a good deal of interest among both pupils and teachers. "Let's Keep Our Teeth" was shown in 23 Junior Secondary Schools to approximately 13,900 pupils, and "No Toothache for Eskimos" in 21 Primary Schools to approximately 7,800 pupils. The grand total of 21,700 children represented about one-third of the school population. Members of the Medical Staff were available at each showing to answer questions and to supplement where necessary the information given by the films.

During the year four evening talks were given by members of the Medical Staff to various organisations on subjects of health interest. In each instance the subject matter was illustrated with films.

Numerous leaflets, posters, films, etc., on many aspects of health are produced by the Scottish Council for Health Education and are available on request. Many of these are used for distribution and display mainly at Child Welfare Centres and Doctors' Surgeries.

Advantage is also taken of propaganda materials issued by the National Association for the Prevention of Tuberculosis for general purposes and especially for use in areas which are due to be surveyed by the Mobile Mass Radiography Unit.

(3) Blood Transfusion.

Two visits were paid by the West of Scotland Blood Transfusion Service to the Saltcoats Area during the year. The first, in February, attracted 178 volunteers, of whom 172 made contributions to the Blood Bank. The second session was in August, when 172 people came forward, of whom 160 gave blood. Both these sessions were held in the County Clinic at Campbell Avenue, Saltcoats. The Blood Transfusion Service has expressed much appreciation with the support they are receiving in this area.

(4) Accidents in the Home.

During the year 61 accidents were reported by District Nurses—37 males and 24 females were affected.

The greatest incidence was in the under 2 age group with 23 cases. The 2-5 age group ranked second with 19 cases. Children between 5-15 years contributed 8. Of the remaining instances an unusually high proportion occurred in the 20-45 age group—7; the total was completed by 3 cases in their early 60's and one woman aged 93 who succumbed in hospital to complicating factors following a fractured femur.

The number of fatal accidents recorded was 3, a marked decrease from last year's figure of 9. In one of these instances a child of $5\frac{1}{2}$ was playing with a box of matches which became ignited, setting her night clothing alight. She was admitted to hospital with extensive burns but died seven days later. The other two fatalities involved infants of 3 weeks and 10 weeks respectively, who were found asphyxiated in their cots some hours after having had a feed. The appearances indicated that death was caused by the feeds being regurgitated.

As in previous years a very high proportion of the accidents reported was caused by burns and scalds, the total number in this category being 44; they were prevalent through all the age groups. Twenty-seven accidents of this type concerned children under five years of age, the commonest cause being scalding with hot tea which had been left within the reach of the child or by falling against unguarded fires.

The remaining accidents involved 6 cases of lacerations, 5 fractures, 4 cases of asphyxia, 2 cases of concussion due to falls,

I eye injury where a game of bows and arrows caused such extensive damage that the child's eye was subsequently removed, and a dog bite causing lacerations of a child's face.

Apart from the 3 fatal accidents, 7 were classed as serious requiring admission to hospital or prolonged treatment at home; in 2 instances the stay in hospital was extended by the need for skin grafting of burns.

An unusual accident was reported affecting a boy of 7 who, while engaged in playing Cowboys and Indians, decided he was the bad man and should be hanged. He promptly put his head in a loop of the pulley rope and spun round several times. When his mother returned after a brief absence at the local shop, she found him unconscious. Fortunately, when released, he recovered but was removed to hospital for further supervision.

Much the greater number of the accidents recorded were attributable to a few common causes. Burns and scalds, for example, were in the main caused by upsetting hot liquid over the casualty. In many instances vigilance had been relaxed or carelessness was present. In some cases the accident happened in the kitchen when the mother was preparing food and her attention was distracted. Examples of this were seen in a child grasping a saucepan handle and pulling hot soup over himself, pulling the flex of an electric kettle with similar results and of putting his fingers into a tray of hot toffee. All of these illustrate the tragic consequences which will follow unless a high standard of care is constantly present. Children should not be left alone even for brief periods; they should not be allowed in the kitchen while cooking is in progress; fireguards and other safety measures should constantly be employed and a reasonable degree of imagination should be used by adults to ensure that faulty electric fittings, trailing flexes, discarded toys, medicines and sharp instruments should be attended to or put out of the reach of children without delay.

Accidents in the home now form one of the commonest causes of death or disablement far exceeding accidents on the road. It cannot, therefore, be too strongly emphasised that where there are young children or elderly people in the home, constant vigilance must be maintained. Adults, too, must not be neglectful since they form a not inconsiderable proportion of the tragic toll of such accidents.

The total number of recorded deaths in the County area, as ascertained from the Registrar General's Return, indicate that 39 persons died directly or indirectly from accidents in the home during the year; 14 males and 25 females were affected. These figures compare with 40—21 males and 19 females—in the previoue

year. The main feature, as in previous years, is the high proportion of fatal accidents in the age groups at the extremes of life; 24 deaths occurred in people over 65 years and 8 under the age of 5.

Among the elderly the primary cause of death lay in fractures of the femur as a result of falls; these numbered 19. There were also 2 cases of extensive burns, and the total was completed by 2 instances of coal gas poisoning and 1 of a fractured pelvis.

Among infants the predominant cause of death was asphyxia, due in the main to regurgitated feeds while lying in prams or cots. In the age group 1 - 5 years one death was due to poisoning, resulting from a child gaining access to salicylate tablets.

Old people, due to failing eyesight and loss of muscular co-ordination, are liable to falls which frequently produce fractures of bones which have become brittle; the neck of the femur is particularly vulnerable in this respect and such a fracture is notoriously difficult to knit. Moreover, the prolonged extent of the healing process may induce a pneumonia if the patient requires to spend a long time in bed. The shock, too, of such an injury may well accelerate failing powers of mind and body.

It is therefore extremely important that every room in the house where elderly people live should be well lighted, and evera care taken to ensure that floors and stairs are kept clear of trailing flexes, loose rugs and mats and children's toys. Wherever necessary guide rails and other suitable aids should be provided and attention given to adequate fireguards and electrical heating equipment; loose gas taps and other inadequate fittings should be reported to the appropriate authority without delay.

The number of deaths due to asphyxia in infants emphasises the need for constant supervision by the mother during this vulnerable period in a child's life. If a pillow is used it should be of firm consistency and texture, so that the child's head does not sink into it. Infants should never be left unattended in their prams and cots with a feeding bottle, ice-cream cone or other such article of food in their mouths. They should have the mother's constant attention while they are being fed and for some time afterwards in case the feed is regurgitated.

G.—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.

CAUSES OF DEATH-LANDWARD AREA AND SMALL BURGHS.

COMMENSA		
Total— Landuard Area Land Sinall Burgh	111 12 4 4 96 4 4 10 4 4 4 60 4 4 4 4 4 4 4 4 4 4 4 4 4	0000
Troon.	111111111111111111111111111111111111111	100
צוכתמעסשי	11111111 8 1 14 1111 01111 01111 011	40
Stevenston.		o
Saltcoats.	2 1	160
Predurick.	1 1 1 1 1 2 1 2 1 2 1 2 1 1	161
Newmilns.	01 4 01	46
Maybole.	04	56
.2010L		177
Kiluinning.		99
.sniv1		178
.nvarito		81
Galston.	111111111111111111111111111111111111111	62
Darrel		40
Cumnock.		09
Ardrossan.		96
County Landward .	203 22 1 1 1 1 1 1 2 1 2 1 2 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1197
Causes of Death.	Tuberculosis of Respiratory System Tuberculosis, other forms Syphilis and its sequelae. Bysentery, all forms Whooping Cough. Meningococcal Infections Acute Poliomyelitis Measles Other Infections and Parasitic Diseases. Malignant Neoplasms of respiratory system Malignant Neoplasms of lymphatic and haematopoietic tissues Other Malignant Neoplasms System Other Malignant Neoplasms Benign and Unspecified Neoplasms Other General Diseases. Anaemias. Other General Diseases System Non-Meningococcal Meningitis. Other Diseases of Nervous System Rheumatic Fever Chronic Rheumatic Heart Disease Other Diseases of Heart Disease Other Diseases of Heart Disease Other Disease of Heart Disease Other Disease Other Disease Other Disease Other Spectensive Heart Disease Other Spectensive Disease Other Spectensive Disease Other Spectensive Disease Other Spectensive Other Other Disease Other Spectensive Other Spectersive Other Spectensive Other Spectersive	Carry foncard

TABLE 1- Continued.

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

	56	
Total— Landward Area and Small Burghs.	881 21 1 1 1 1 2 2 1 2 1 2 2 2 2 2 2 2 2	3,028
Troon.	02	133
Skuanon,	8	48
-นอระนอลงรร	80 01	109
Sultcoats.	82	185
Presticick.	H 1 1 1 1 1 1 1 1 1	181
Neumilns.	8-1111-1111 1112 1111-1121	54
Maybole.	801	69
Largs.	F = - - - - - - - - -	200
.Quinninuli A	8	7.4
,snivr1	80 - -	207
.nparit)	2-	89
Galston.		11
Darrel.	9	45
Cumnock.	8	89
Ardrossan,	8-11112111200111111120	100
County Lundward.	1107 8 121 8 121 1 4 1 1 1 1 1 1 1 1	1,393 10
ntano)	Water skilled selfer the left re-commission in the	1,
Causes of Death.	Brought forward. Ulcer of Stomach and Duodenum. Intes inal Obstruction and Hernia. Gastritis and Duodenitis. Diarrhoea (except of newborn). Cirrhosis of Liver. Other Diseases of Liver. Other Diseases of Liver. Other Diseases of Genito Urinary System. Puerperal Sepsis, including Post-Abortive Sepsis. Other Diseases of Genito Urinary System. Other Diseases of Genito Urinary System. Other Diseases of Genito Urinary System. Sepsis. Other Diseases of Genito Urinary System. Other Diseases of Skin and Organs of Locomotion Congenital Malformations. Atelectasis. Preumonia of newborn. Other Infections of the newborn. Other Diseases peculiar to Early Infancy Senliity without mention of Psychosis. Cause Ill-defined and Unknown. Sulcide and self-inflicted injuries. Other Road Transport Accidents. Accidents in the home.	ALL CAUSES

TABLE II.

Births and Deaths in the County and Burghs.

Deaths at Sub-

	Causes.	All Other Certified Unuses.	27 7	1	1	1	1	1	11	co	1	-	1	1	1	1	1.5
	Causes.	All Other Certified	17	00										_			
			24	-	10	5	5	0	G L	12	6	40	17	0	10	11	99
		Violence.	52	4	67	67	01	01 -	17	9	67 0	2) 1	- 8	000	-	00	042
	malsy yroth	Diseases of Circulat	597	88	30	18	30	39	45	103	26	200	88	47	25	289	510 1313 104 266
	s System.	Diseases of Nervous	234	13	20	10	16	212	9	29	11	200	200	17	10	23	101
		Cancer.	221	27	00	œ	10	16	130	22	10	40	200	10	9	31	497 5
	CRECT	Influenza.	14	-	1	1	1	1	11	00	1	21	10	1 -	1	1	23
	malays group	Diseases of Respiral	52	9	6	-	2	4	+-	10	00	41	-0	00	01	4	50
1969.		Pneumonia.	41	4	0.1	1	63	1	40	00	-	NO	7 4	7	1	1	72 129
d Causes.	Tuber- culous Diseases.	Non-Pulmondry.	1	-	1	1	1	1	11	1	1	1	11	1	1	1	1
oine	Tu cu Dis	Pulmondry.	00	-	1	-	1	1	11	1	03	21	10	1	1	1	11
Sub-joined	Digestive Diseases.	Other Digestive Diseases.	39	01	1	1	1	21 -	*	9	40	No	0 7	6	1	00	92
rom	Dige	Diarrhoea.	4	1	1	1	1	1		01	1	1 -	- 1	-	-	1	6
Mortality from	Maternal Causes.	Other Puerperal	1	1	1	1	1	1	11	1	1	1	1-	1	1	1	01
Mort	Mat	Puerperal Pever.	1	1	1	1	1	1	11	1	1	1	1	1	1	1	1
		Whooping Cough.	1	1	-	1	1	1	11	1	1	1		1	1	1	0.1
		Measles.	1	1	1	1	1	1	11	1	1	1	11	1	1	1	1
	.13	Cerebro-Spinal Feva		1	1	1	1	1	1-	1	1	1	11	1	1	1	-
	oid Pevers.	Enteric & Paratyph	1	-	1	1	1	1	11	1	1	1	11	1	1	1	1
		Typhus Fever.	-	1	1	1	1	1	11	1	1	I		1	1	1	
		Scarlet Pever.	1	-	1	1	1	1	11	1	1	1	11	1	1	1	1
		Diphtheria.	-	-	1	1	1	1	11	1	1	1	1	1	1	1	1
		Small por.		1	1	1	1	1	11	1	1	1	1	1	1	1	1
	.spin	15 Years and Upw	1304	102	63	10	99	900	67	196	61	176	170	94	44	124	22 2835
Ages.		.dI tabnu bna d	6	1	0.1	1	1	10	101		1		-	1	1	67	
p.	and a label of	I and under 5.	13	-	1	-	7		1 00	1	1	1	1	-	1	1	25
joined		Under 1 Year.	67	9			7	,					14	_		9	146
		At all Ages.	66 1393	109	689	45	7.1	000	74	200	69	40,	185	102	48	133	3028
		Still-Births.	99	1-	1	-	L	9 .	1 7	1	01 -	70	10	6	1	5	196
		Live-Births.	2495		_	200	1	120				000		233		134	4754
1		Area in Acres.	702852 2495	887	492	424	286	487	531	1,213	395	020	060	860	572	2,327	715785
	·uo	Estimated Population	129,407	9,598	5,477	3,249	4,054	5,999	7.248	8,585	4,624	20000	14.016	10.204	3,373	9,751	248,514 715785 4754 196 3028 146
		Area.	County— Landward	Burghs— Ardrossan	Cumnock	Darvel	Galston	Girvan	Kilwinning	Largs	Maybole	Newmins	Saltonata	Stevenston	Stewarton		County-Landward

TABLE III.

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

		Violence.	0.02	0.42	0.37	200	00.00	0.85	0.08	0 20	0.43	0.56	0.57	0.21	0.00	0.80	0.01	10.0	0.45
		Diseases of Circulatory System.	4.61	3.96															8.58
	·uə;	Diseases of Nervous Sys	1.81	1.35															2.05
	A REAL	Cancer.	17-11	2.81	1.46	2.40	# 50 0	10.7	1.70	0.58	00.00	1.13	0.01	9. R.d.	1.47	1.70	0.10	21.0	2.00
	- 21	Influenza.	0.11	0.10	1	1	1	1	1	0.05	00.0	0.50	200	0.14	0.10	0.40		1	0.00
		Diseases of Respiratory System.	0.40	0-65	1.64	0.31	1.23	10.0	20.0	10.60	0.65	1.13	0.87	0.64	00.0	0.50	00.0	17:0	0.62
	69	Pneumonia.	0.32	0.45	0.37	100	0.48	100	97.0	0.00	00.0	20.0	0.10	0.00	0.00	0000	0.00	1	0.50
	Tuberculous Diseases.	Von-Pulmonnty.	1	1	1	1	1	1	1	1	1					1	ı	1	1
111		Pulmonary.	0.07	0-10	1	0.31	1	1	I	1	0.40	0.50	000	0.00	* 1 0	1	1	1	0.04
1,000 from	Digestive Diseases.	Other Digestive Diseases.	0.30	0.21	0.18	1	0.52	0.33	\$7.0 1	0000	0.00	0.50	0000	85.0	0000	0=.0	-	0.31	0.31
per 1,0	Dig	Diarrhoea.	0.03	1	1	1	1	1	1	100	0.53	1	1000	0.08	100	01.0	0.30	1	0.04
Rate ;		Whooping Cough.	1	1	0.18	1	1	1	1	1	1000	0.22	1	1	1	I	1	1	0.01
Death	Diseases.	Measles.	1	1	1	1	1	1	1	!	1	1	1	1	1	1	1	1	1
		Cerebro-Spinal Ferer.	1	1	1	1	1	1	1	0.14	1	1	1	1	1	1	1	1	0.004
	Zymotic	Enteric and Paratyphoid Fevers.	m h	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	ncipal	Typhus Fever.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	The Principal	Scarlet Fever.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	T	Diphtheria and Croup.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
		Smallpox.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
		All Causes.	10.77	11.35	12.4	13.8	17.5	14.88	12.18	10.21	23.32	14.9	12.40	14-6	13.2	10.00	14.23	13.6	12.18
	98 V	Deaths under 1 Year of per 1,000 Births.	27	30	21	09	54	25	53	14	40	91	15	18	333	1	53	45	31
181	guga (Still-Birth Rate (per I 900 including Still-Births).	26	36	7	20	1	48	31	27	13	07	18	6	67	37	1	37	56
0	44 100	Maternal Mortality Rate (prints births	8.0	1	1	1	1	1	1	1	1	1	1	5.8	1	1	1	1	9.0
		Birth Rate.	19-3	10.4							11.6								19.1
		Persons to the Acre.	0-2	10.8	111-1	7.2	14.2	12.3	9.5	13.6	7.1	11.8	9.0	12.0	14.5	11.9	6.9	4.2	0.3
		Area.	County— Landward	Small Burghs-	Cumnock	Darvel	Galston	Girvan	Irvine	Kilwinning	Largs	Maybole	Newnilins	Prestwick	Saltcoats	Stevensten	Stewarton	Troon	Landward and Small Burghs

TABLE IV.

	Infantile Mortality.		Rate per
(1)	CLASSIFIED ACCORDING TO AGE GROUPS :	Deaths.	Births.
	Under 4 Weeks	109	22.9
	4 Weeks and under 1 Year	37	7.8
(2)	CLASSIFIED ACCORDING TO CAUSES OF DEATH:-		
	Tuberculosis	-	-
	Whooping Cough	2	0.5
	Measles	_	
	Meningococcal Infections	1	0.2
	Influenza	2	0.5
	Pneumonia	18	3.8
	Diarrhoea	1	0.2
	Congenital Malformations	27	5.7
	Birth Injuries, Post-Natal Asphyxia and Atelectasis	32	6.7
	Other Diseases peculiar to Early Infancy	46	9.7
	Accidents in the Home	6	1.3
	All Other Causes	11	2.3

TABLE V.

Infectious Diseases-Year 1961.

Number of Cases coming to the Knowledge of the Medical Officer of Health and accepted by him as Suffering from Disease stated.

		60	
.48	Whooping Cou	E 12111111-1-1111	26
sis.	Non- Respiratory.	8 - - 01 0	17
Tuber- culosis.	Respiratory.	8	89
	Scarlet Fever.	7 88 - - 61	27
	Ophthalmia Neonatorum.		
· pixa	Puerperal Pyr	-	-
.78	Puerperal Feu	1 1111111111111	
113	Poliomyelitis, Acute.	1 111111111111	
.1	Pneumonia, Acute Primary	123 121 121 123 131 131 133 133 133 133	232
·los	Pneumonia, Acute Influenz	2 - -	9
	Malaria.	1 11111111111111	
*	Jaundice, Acute Infective	es	4
·6·	Food Poisonin	4	- =
81 =	Erysipelas.	- - -	60
	Enteric Fever.	- 11111111111111	-
THE S	Encephalitis Lethargica.		
20	Dysentery.	17 26 17 17 17 17 17 17 17 17 17 17 17 17 17	83
	Diphtheria and Membranous	1 1111111111	
	Cerebro-Spinal	4 - -	oc
	Anthrax.	1 1111111111-111	-
		County— Landward Landward Small Burghs— Ardrossan Cumnock Darvel Galston Girvan Irvine Kilwinning Largs Maybole Newmilns Prestwick Saltcoats Stevenston Stewarton	Landward and Small Burghs

TABLE VI.

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

Diseases.	Ja	Jan. Fe	Feb. A	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Cases
Smallpox				1	1	-	1	1	1	1	1	1	1	1
Diphtheria and Membranous Croup	sn	1		1	1	- 1	1	1	1	1	1	1	- 1	1
Dysentery		4	00	2	21	က	20	6	co	7	-	1	57	83
Erysipelas		1	1	1	1	1	1	1	1	1	1	1	1	3
Food Poisoning	-	-	1	1	03	4	1	4	1	1	1	1	1	11
Scarlet Fever		9	4	1	1	1	1	3	1	60	60	2	1	27
Jaundice, Acute Infective	:	-	1	1	1	1	1	1	1	1	1	61	1	4
Typhoid, Paratypheid, an Continued Fevers	and	,		1	1	1	1	1	1	1	-	- 1	-	-
Puerperal Fever	:	1	1	1	1	. 1	1	1	-	1	1	1	-	1
Puerperal Pyrexia	:		,	1	-	1	1	1	1	1	1	1	1	1
Cerebro-Spinal Fever	:		61	1	1	67	53	1	-	1	1	1	1	00
Acute Poliomyelitis	:	1	1	1	1	1	1	1	1		1	1	1	1
Tuberculosis-Pulmonary	:	6	9	10	9	7	10	7	00	9	20	7	00	68
Non-Pulmonary		-	-	-	1	4	67	4	1	co	1	1		17
TOTAL	20	0 20		17	30	22	34	27	13	22	111	16	12	944

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TABLE VII.

INFECTIOUS DISEASES.—Return of Cases of Infectious Diseases Confirmed during the year ended 31st December, 1961. by Ages.

Dissare.					At Age-Years.	urs.			+	95
	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 Hospitol.
Anthrax	1	1	1	1	I		1	1	1	1
Cerebro-Spinal Fever	00	1	00	01	1	1	1	1	00	1
Chickenpox	11	1	1	1	1	1	1	1		11
Continued Fever (Undulant)	1	11	1	11	11	1 1	1 1	1 1	1	1
Diphtheria	1	1	1	1	1	1	1	1	1	1
Dysentery	83	4	35	27	60	9	9	01	41	42
Encephalitis Lethargica	1	1	1	1	1	1	1	1	1	1
Erysipelas	00 -	1	1	10	1	1	1		-	01
Jaundice, Acute Infective	11	11	11	00 00	10	1-	00	7 66	*11	1 1
Malaria	1	1	1	1	1	1	1	1	1	1
Ophthalmia Neonatorum	1	1	1	1	1	1	1	1	1	!
Plague	10	1	1	1	1.	1.	1.	1	T	1.
Pheumonia, Acute Influenzal	9000	1 5	1	100	1;	100			0.0	- 0.
Pheumonia, Acute Primary	797	77	27	77	14	27	90	10	13 00	2
Pollomyelitis, Acute	1	1	. 1	1	1	1	1	1	1	1
Puerperal Fever	1	1	1	1	1	1	1	1	1	1
Puerperal Pyrexia	1	1	1	1	1	1	1	1	1	1
-	27	1	12	14	1	1	1	1	89	57
Small pox	1	1	1	1	1	1	1	1	ſ	1
Typhoid Fever	7	1	1	1	1	1	-	1	1	1
Paratyphoid "A"	1	1	1	Ī	1	1	1	1	1	1
atyphoid " B "	1	1	1	1	1	1	1	1	1	1
Whooping Cough	26	1 10	12	6	11	11	11	11	171	10
FF-4-1	-	-	The latest deposit of the latest	The same named and other named		The same of the latest dealers and the latest	the same name of the last of t			

(a) Number of Cases formally Notified or regarded as Notified during the year. Part 1.—Respiratory Tuberculosis.

					Age Groups.	roups.				
	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 35.	25 and 35 and under 45.	45 and under 55.	55 and under 65.	65 and upwards.	Total.
Males	1	60	65	5	6	14	10	11	9	62
Females	1	1	61	7	6	1	61	ç1	4	27
TOTAL	-	#	2	12	18	14	12	13	10	88

(b) Number of Cases confirmed to be Suffering from Active Respiratory Tuberculosis during the year (excluding transfers in by another Authority).

	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 35.	35 and under 45.	45 and under 55.	55 and under 65.	65 and upwards.	Total.
Male	-	8	co	10	6	14	10	11	9	62
Female	1	1	63	7	6	1	53	67	4	27
TOTAL	1	4	20	12	18	14	12	13	10	88

(c) Number of New Cases in Table (b) admitted to Hospital for Tuberculosis

Treatment for the first time during the year.

	Under 15 Years.	15 to under 45.	45 and over.	Total.
Male	140-	24	22	46
Female	1	12	8	21
TOTAL	1	36	30	67

HOSPITAL ADMISSIONS AND DISCHARGES (RESPIRATORY TUBERCULOSIS).

(d) Number of Patients Admitted to, Discharged from or Dying in Tuberculosis Hospitals, Sanatoria or Wards in other Hospitals reserved for the Treatment of the Tuberculous.

		In Hospital on 1st January.	Admitted during year.	Discharged during the year.	Died in Hospital.	In Hospital on 31st December.
Trader 15 money	(Male	1	1	1	I	
Onder 13 years	Female	1	1	1		1
u u	Male	16	33	36	81	13
13-43 years	Female	21	17	33	1	4
Page sacrate	Male	11	36	35	63	10
to years and over	Female	ಣ	HANDEN III	6	1	4
	TOTAL	52	86	114	4	32

(e) Number of Patients Dying from Respiratory Tuberculosis in Hospital Accommodation other than that Reserved for Tuberculous Patients.

WAITING LIST.

(f) Number on Waiting List for Admission to Hospital at 31st December (Respiratory Tuberculosis). Nil.

PART II.—NON-RESPIRATORY TUBERCULOSIS.

Number of Cases formally Notified or regarded as Notified as Suffering from Non-Respiratory Tuberculosis during the year. 00

	1 400				Age Groups.	roups.				
- F	Under 1.	Under 1. under 5.	5 and under 15.	15 and under 25.	25 and under 35.	35 and 45 and under 45.	45 and under 55.	55 and under 65.	65 and upwards.	Total.
Males	1	1	63	1	67	1	63	1	1	∞
Females	T T	1	1	1	¢1	64	1	F	7	6
TOTAL	1	1	23	1	4	0	61		4	11

(h) Number of Cases Notified, or Intimated, Confirmed to be Suffering from Active Non-Respiratory Tuberculosis during the year (excluding Transfers in by another Authority).

						Age G	Age Groups.				
Form.	Sex.	Under 1. under	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 35.	35 and under 45.	45 and under 55.	55 and under 65.	65 and upwards	Total.
1 Abdominal	Males	1	1	1		1	1	1	1	1	1
i. Audominat.	Females	1	1	1	1	1	1	1	1	1	1
9 Maniman	Males	1		1		1	1	1	1	1	-
4. Moningoai.	Females	1	1	1	1	1	1	1	1	1	1
3 William Tubonalini	Males	1	1	1	1	1	1	1	1	1	1
o. minary rubercuiosis	Females	1	1	1	1	1	1	1	1	1	1
A Donne and Tainte	(Males	1	1	1			1	1	1	1	1
4. Dones and Joints.	Females	1	1	1	1	1	1	1	1	1	1
S Sunarficial Clands	Males	1	1	1	1	1	1	1	1	1	1
S. Supernotal Glands.	Females	1	1	1	1	1	1	1	1	4	9
6 Conito IIalun Ouena	Males	1	1	1		1	1	1	1	1	60
o. Genito Of 19 Organs	Females	1	1	1	1	1	1	1	1	1	1
7. Other Organs	Males		1	1	1	1	1	1	1	1	-
	Females	1	1	I	1	1	1	1	1	1	1
	TOTAL	1	1	67	1	4	8	67	1	4	17

PART III.—ANALYSIS OF TUBERCULOSIS DEATHS.

(i) Return of Number of Persons who Died from Tuberculosis in the Area during the year ended 31st December, 1961, with the period elapsing between Notification or Intimation and Death.

(Persons dying in Sanatoria, etc., are included in the figures for the area in which they had their home residence.)

					Respi	Respiratory.	Non-Res	Non-Respiratory.
					Males.	Females.	Males.	Femaler.
Number of Persons who Died from Tuberculosis-								
Of whom						100	(Se le	
- WOUNT							Barrier St.	The section
Not notified or notified only at or after Death	:	:	:		6.1	1	1	1
Notified less than I month before Death			:		1	-	1	1
Notified from 1 to 3 Months before Death		:		:	1	1	1	
Notified from 3 to 6 Months before Death	****	:	:	:	1	1	1	1
Notified from 6 to 12 Months before Death	::	:	:	:	1	1	1	i
Notified from I to 2 Years before Death		:	:		1	1	1	1
Notified over 2 Years					4	c1	1	1
Total		1	::		00	3		

PART IV.—THE TUBERCULOSIS REGISTER.

(j) Return of Number of Persons Resident in the Area at 31st December, 1961, who were known to be Suffering from Tuberculosis. (Only Cases in which a Diagnosis of Tuberculosis has been confirmed have been included. Persons in Sanatoria, etc., are included in the figures for the Area in which they have their Home Residence.)

						Age Groups.	roups.				
		Under 1.	Under 1. under 5. u	5 and under 15.	5 and 15 and 25 and 35 and 45 and 55 and 65 and inder 15. under 25. under 35. under 45. under 55. under 65. upwards	25 and under 35.	35 and under 45.	45 and under 55.	55 and under 65.	65 and upwards	Total.
. Respiratory	Males	1	9	34	81	170	144	104	86	48	
	Females	all and	∞	39	133	277	159	56	16	00	969
2. Non-Respiratory	Males	1	1	12	16	11	12	7	1	4	64
···· (roam down	Females	1	1	7	6	16	9	67	7	9	54

TABLE IX.

OUT-PATIENT CLINICS.

Place and Premises.	Day.	Hour.
School Clinics—		
Avr King Street	Daily Monday to Friday	9 a.m.
Ayr—King Street	Daily—Monday to Friday.	
Girvan—Wesley Place	Second and Fourth Fridays.	2 p.m.
Hurlford—Academy Street.	First Monday.	2 p.m.
Irvine—Bank Street	Second and Fourth Fridays.	2 p.m.
Kilmarnock—Green Street.	Every Wednesday.	10 a.m.
Maybole—Carrick Home	First and Third Fridays.	2 p.m.
Saltcoats—Campbell Ave	Every Friday.	2 p.m.
Dalry-High School	Third Monday.	2 p.m.
Kilbirnie—Nurses' Home	First Monday.	2 p.m.
CHILD WELFARE CENTRES—		
Annbank—4 Mauchline Rd.	Second and Fourth Tuesdays.	2 p.m.
Ardrossan—Central Avenue Auchinleck—97 Back	Every Wednesday.	2 p.m.
Rogerton Crescent	Second and Fourth Fridays.	2 p.m.
Beith—Strand	First and Third Tuesdays.	
Catrine—Well Road		2 p.m.
	First and Third Fridays.	2 p.m.
Coylton—Community	Direct W. January	0
Centre	First Wednesday.	2 p.m.
Crosshouse—Old School		
Building	First and Third Tuesdays.	2 p.m.
Cumnock—Millbank	First and Third Wednesdays.	2 p.m.
Dailly—The Institute	Second and Fourth Wednesdays.	2 p.m.
Dalmellington—		
Hopes Avenue	Second and Fourth Thursdays.	2 p.m.
Bellsbank School	First and Third Thursdays.	2 p.m.
Dalry—James Street	Second and Fourth Tuesdays.	2 p.m.
Darvel—Lesser Town Hall Dreghorn—Local Welfare	First and Third Fridays.	2 p.m.
Office	Second and Fourth Tuesdays.	2 p.m.
Avenue	First and Third Tuesdays.	2 p.m.
Centre	First Thursday	10.30 a.n
	First Thursday.	10.50 a.1
Dundonald—Montgomerie	Think Mandan	0
Hall	Third Monday.	2 p.m.
Fairlie- Nurse's Home	First Thursday.	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. Irvine—	Second and Fourth Wednesdays.	2 p.m.
Bank Street	Every Thursday.	2 p.m.
Waterside Street	Second and Fourth Thursdays.	2 p.m.
Kilbirnie—Nurses' Home	Every Wednesday.	2 p.m.
Kilmaurs—J.S. School	First and Third Fridays.	2 p.m.
		2 p.m.
Kilwinning—Ladyford Av	Every Thursday.	2 p.m.

TABLE IX.—Continued.

OUT-PATIENT CLINICS .- Continued.

Place and Premises.	Day.	Hour.
HILD WELFARE CENTRES-	ENERAL STATISTICAL	
Largs-Moorburn Road	Second and Fourth Mondays.	2 p.m.
Lugar-Logan Church Hall	Second and Fourth Mondays.	2 p.m.
Mauchline—Sorn Road	Second and Fourth Fridays.	2 p.m.
Maybole—Carrick Home Monkton—Carvick-Webster	Second and Fourth Tuesdays.	2 p.m.
Hall	First Monday.	2 p.m.
Muirkirk—Glasgow Road Netherthird—22 Black-	First and Third Mondays.	2 p.m.
faulds Road	Second and Fourth Wednesdays.	2 p.m.
New Cumnock—The Glebe	First and Third Thursdays.	2 p.m.
Newmilns-Clinic, Ayr Rd.	Second and Fourth Mondays.	2 p.m.
Patna—27 Dalvennan Ave.	Second and Fourth Mondays.	2 p.m.
Prestwick-Boyd Street	Every Tuesday.	2 p.m.
Saltcoats—Campbell Ave	Every Tuesday.	2 p.m.
Springside—Welfare Inst	First Wednesday.	2 p.m.
Stevenston—The Cross	Every Monday.	2 p.m.
Stewarton—Avenue Square Tarbolton—36 Montgomery	Second and Fourth Mondays.	2 p.m.
Street	Second and Fourth Wednesdays.	2 p.m.
Troon—41 Barassie Street West Kilbride—Masonic	Every Thursday.	2 p.m.
Hall	Second and Fourth Fridays.	2 p.m.
Average Namajais of		d—HV
INTE-NATAL CLINICS—		ge
Annbank-4 Mauchline Rd.	Every Thursday.	10.30 a.m
Cumnock—Millbank	Every Tuesday.	2 p.m.
Irvine-Bank Street	Every Monday.	2 p.m.
Kilbirnie-Nurses' Home	Every Friday.	10.30 a.m
Largs-Moorburn Road	Every Wednesday.	2 p.m.
Maybole—Carrick Home	Every Tuesday.	10.30 a.m
Prestwick-Boyd Street	Every Friday.	10 a.m.
Saltcoats—Campbell Ave	Every Wednesday.	10.30 a.m
Troon—41 Barassie Street	Every Monday.	10.30 a.m
Patna—Dalvennan Avenue	Every Thursday.	2 p.m.
-TV.—GROAN		
ORTHODONTIC CLINICS—		
Prestwick—Boyd Street	Every Friday.	9 a.m
Ardrossan—Central Avenue	Every Tuesday.	4 p.m. 10 a.m 12.30 p.m
		12.00 P.III

MEDICAL INSPECTION OF SCHOOL CHILDREN

1960-1961.

Year ended 31st July, 1961.

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I.—STAFF.

Reference is made to List of Staff shown on page 4.

II.—GENERAL STATISTICS.

Population of the Area (at 31st December, 1960, estimated by the Registrar-General)	as 	346,500
Number of Schools— (1960-61)		
(a) Primary Schools under Education Authority		101
(b) Secondary Schools under Education Authority		55
(c) (i) Special Schools		13
(ii) Special Classes in Ordinary Schools		2
(iii) Nursery Schools		5
(iv) Nursery Classes in other Schools		
(d) In receipt of Grant from Education Authori- under Medical Inspection	100	1
Average Number of Children on the Registers		59,368
Average Number of Children in Attendance		55,295

III.—SANITARY CONDITIONS OF SCHOOLS.

The Medical Officers on their visits to school 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 4,945 and the total number of visits paid was 5,120.

(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 1951.
 - (3) Children born in 1947.
- (4) Children born in 1944.
- (5) Children born in 1953 (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 clinics 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. 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 Inspections.

The presence of parents is encouraged at school medical inspections. 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 4,194.

V.—THE FINDINGS OF MEDICAL INSPECTION.

(a) Routine.

The number of children examined was 17,579, of whom 4,267 or 24.27 per cent. suffered from some defect. Of these 2,791 or 15.88 per cent. of the children examined suffered from minor defects or ailments, from which recovery was expected in a few weeks, and 1,287 or 7.32 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 189 or 1.07 per cent. of those examined.

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

(1) Clothing.

Eleven children were found to have unsatisfactory clothing, 0.06 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 heads was 173 or 0.98 per cent. of those examined.
- (b) Body.—The number of children found to have dirty or verminous bodies was 24 or 0.14 per cent.

(4) Skin.

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

Ringworm	 	1	child or	0.006 pe	er cent.
Impetigo	 	5	children	or 0.03	per cent.
Other Diseases	 	73	children	or 0.42	per cent.

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

Ringworm	 	3	children	or	0.02	per	cent.
Impetigo	 		children			-	
Scabies	 	13	children	or	0.07	per	cent.
Other Diseases	 	278	children	or	1.58	per	cent.

(5) Nutritional State.

Twenty-seven children were found to be suffering from slightly defective nutrition and two from bad nutrition, being respectively 0·15 and 0·01 per cent. of the children examined.

(6) Mouth and Teeth.

Sixty-four children were suffering from unhealthy conditions of the mouth and teeth, 0.36 per cent. of the children examined.

(7) Nasopharynx.

- (a) Nose.—Apart from cases requiring further observation 83 children or 0.47 per cent. of those examined showed obstruction, probably due to adenoids requiring operation.
- (b) Throat.—Apart from cases requiring further observation, 210 children or 1·19 per cent. of those examined were found to have tonsils which required operative treatment.
- (c) Glands.—Enlarged Glands requiring further observation were found in 181 or 1.03 per cent. of the children examined, while 4 children or 0.02 per cent. had Glands requiring operation.

(8) Eyes.

Infective conditions of the lids or conjunctiva were found in 163 children or 0.93 per cent. of those examined.

Corneal Opacities were found in 2 or 0.01 per cent. of the Children.

Squint affected 177 children or 1.01 per cent.

Visual Acuity.—Vision was examined in entrants for the first time. Of those in the four routine age groups 831 or 4.73 per cent. had defective vision requiring refraction. In addition 4,503 children in the seven-year-old group were examined in addition to entrants. Of these 391 were found to require refraction.

(9) Ears.

Otorrhoea or discharge from the ears affected 126 children or 0.71 per cent.

Defective hearing was present in 56 children or 0·32 per cent. Thirty-one were classfied in Grade I. Deafness—that is children who can be educated in the ordinary school without special provision, and 15 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.

Ten children were classified in Grade II. (b) Deafness—that is children who can make satisfactory progress only in a Special School. One child was found to be totally deaf.

(10) Speech.

Of the children examined 83 or 0.47 per cent. suffered from defective articulation and 19 or 0.11 per cent. from stammering.

(11) Mental and Nervous Conditions.

Nine children or 0.05 per cent. were found to be educable mental defectives and one child or 0.006 per cent. was found to be ineducable.

Other mental or nervous conditions affected 67 or 0.38 per cent. of the children examined.

(12) Circulatory System.

Fifty-two children were found to be suffering from organic heart disease, comprising 0.29 per cent. of the children examined. Of these 41 were Congenital and 11 Acquired.

(13) Lungs.

The number of children suffering from chronic bronchitis was 13 or 0.07 per cent. of those examined.

There were referred to the Area Chest Physician as suspected cases of Tuberculosis four children or 0.02 per cent.

Other diseases of the Lungs affected 132 children or 0.75 per cent.

(14) Deformities.

Deformities dating from birth affected 48 children or 0-27 per cent.

Deformities due to Poliomyelitis affected 14 children or 0.08 per cent.

Deformities probably due to Rickets affected 11 children or 0.06 per cent.

Deformities due to other causes, for instance flat feet, affected 109 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.

709 Children or 4.03 per cent. of those examined were affected.

(b) Special Examinations.

Of the 793 special cases examined, 218 were found defective and were notified to parents as requiring treatment. The following is a list of the defects found:—

(1)	Unsatisfactory Clothing	 		 	3
(2)	Unsatisfactory Footgear	 		 	2
(3)	Cleanliness— Head—Dirty, Nits or Body—Dirty, Nits or			 	26 2
(4)	Skin—				
	Head—Ringworm	 	•••	 	_
	Impetigo Other Diseases	 		 	-2
		 		 	2
	Body—Ringworm Impetigo	 		 ***	1
	Scabies	 	dollar le	 T.o.T	3
	Other Diseases	 1	No. And	 20	11

(5)	Nutritional	State-							
	Slightly	Defecti	ve					HO./o	4
	Bad								_
(6)	Mouth and	Teeth T	Jnheal	thy					2
(7)	Nose-								
(,)		tion requ	tiring	observe	tion				6
	Obstruc	tion (pro	hahly	Adeno	ida) roc	ortinin or		tion	
	Other C	ondition	Dably	Adono					21
	Other C	ondinon	D					***	10
	Throat—								
	Tonsils	requiring	g obse	rvation					13
	Tonsils	requiring	goper	ative to	reatmer	nt			11
	Glands—								
		a abaam	tion						0
		ng obser				• • •	• • • •		2
	Requiri	ng opera	tive ti	reatmen	ıt		• • •	• • • •	-
(8)	Eyes—								
. ,	External D	1502505							
	Blephari								26
		tivitis							20
		Opacitie			***				
					• • •				8
	Other L	Diseases					•••		10
	Visual Acu	itv—							
		e Vision	(for	Refract	ion)				105
101									
(9)	Ears—								
	Otorrhoe								5
	Other D	iseases							11
	Defective P	Looring							
	Defective E		0.01						-
	Grade		• • • •						6
	Grade I								_
	Grade I								_
	Grade I	11.							_
(10)	Speech-								
(20)		ve Artic	atlatio						9
	-								2
	Stamm	ering	***						4
(11)	Mental an	d Nervo	us Cor	nditions	_				
	Backwa	ard							-
	Dull (I	ntrinsica	lly)			ib	7		-
		Defecti	W /						
		Defectiv	The second						_
		Nervou							9
		t Behav							3

(12) Circulatory System—					
(a) Organic Heart Disease—					
Congenital					1
Acquired					1
(b) Functional Conditions					-
(13) Lungs—					
Chronic Bronchitis				10	_
Suspected Tuberculosis		anold ib	100	90	_
Other Diseases				***	-
(14) Deformities—					
Congenital	ATOGO	guiring	of all	IOT.	_
Acquired (Poliomyelitis)					2
Acquired (probable Rickets)		10			_
Other Causes					4
(15) Infectious Diseases					-
(16) Other Diseases or Defects					24
WI ADDANGEMENTS TOD T	FEDIA	A.T	- A		
VI.—ARRANGEMENTS FOR I	TEDIC	AL TH	EATM	ENT.	
(a) Minor Ailments.					
There are School Clinics at Salte Maybole, Girvan, Galston, Hurlford, by the whole-time Medical Officers. Centres assist.	Ayr an	d Kiln	narnocl	atten	ded
The number of children examine Clinics was 1,176. Recurrent visits to 1,780. The following is a list of	brough	at the t	total at	ttendar	
(1) Cuts, Bruises, Sprains and I	Minor]	Injuries	, etc.		195
(2) Diseases of the Ear, largely	cases (of Otor	rhoea		34
(3) Diseases of the Eye, pri and Blepharitis	ncipall	y Con	junctiv 	ritis	101
(4) Diseases of the Skin. (This Ringworm of Scalp—oth of Ringworm of Body, 55 cases of Scabies and other diseases of the Ski	ner tre 115 ca d 171	atment ses of	Impet	ases igo, ring	345
(5) Other Diseases (including e brought to Clinics or Attendance Officers)					496

(b) Defective Vision.

During the session the examination of children with defective vision was continued under arrangements made with the Regional Hospital Board. Regular Clinic sessions were held at Ayr, Kilmarnock, Saltcoats, Irvine, Hurlford, Kilbirnie and Cumnock; occasional sessions at Largs, Girvan, Dalmellington and Netherthird. They were 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	el d			 	285
			Examined			 	3,774
Number	of	Children	Prescribed	Spec	tacles	 	1,950

(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:—

Surgical Department—			
Number of Clinics held		 	53
Number of Children Examined		 	894
Number of Theatres held		 	148
Number of Children Operated on (e			114
Ophthalmic Department—			
Number of Theatres held		 	11
Number of Children Operated on			
Medical Department—			
Number of Clinics held		 	126
Number of Children Examined			3,395
Number of Admissions		 	491
Ear, Nose and Throat Department-			
Number of Theatres held		 	280
Number of Children Operated on		 	2,535
	120		

Number of Cases Examined at Clinics

Orthopaedic Department—	100000000000000000000000000000000000000				
Number of Clinics held					92
Number of Children E	xamined	n.boto			5,737
Number of Children re Exercises—	ecommended	l for	Remed	ial	
Out-Patient	no analiseon	yd bo	***		521
In-Patient			****		81
Number of Children O	perated on				307
Number of Children pu	it in Plaste	r of P	aris		289
Plastic Department—					
Number of Patients Ac	dmitted				122
Number of Clinics held	1				17
Number of Theatres he	eld				26
In order to lower the age a hearing test, two age groups have months. In all 11,877 children in the year ending 31st July, 19	re been teste of all ages	ed in t	he past	eig	hteen
(a) Children born in 1953	2				5,125
Children born in 1954					5,042
(b) Children born in 195	2 (absent a	t prev	ious te	st)	339
(c) Children of any other hearing defect	er age thou	ght to	have	a	486
(d) Re-tests—Children sh test	owing defe	ct at	previo	ous 	885
	hied sold			1	1,877
				~ ~ ~ ~	1 1 1

Of the 10,167 children tested in Group (a) above, 9,540 had normal hearing and 627 had a defect in either one or both ears. These defective children were classified as follows:—

Grade I.—491; Grade IIA.—128; Grade IIB.—8.

Figures and classification of groups (b), (c) and (d) will be found in the accompanying table.

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

Mary Hare Grammar School Donaldson's School for the Deaf,	Edinbu	ırgh	3	1
Glasgow School for the Deaf				32
St. Vincent's School, Glasgow				6
11-15 Ruis				_
				40
				anna

There are 47 severely deaf (Grade IIb.) children attending schools in Ayrshire. Of these 11 are able, with the help of a hearing-aid and a suitable position in class, to make progress in the ordinary school. Thirty-seven attend West Park School for the Hard of Hearing. The parent of one boy prefers to have the child attend the local school.

One pre-school boy attends a preparatory class twice weekly

In the past year 18 children have been fitted with hearing-aids at the Hearing-Aid Clinic at Ayr. The position with regard to hearing-aids is as follows:—

(a)	No. of children wearing Hearing Aids at 1st August, 1960	76
(b)	No. of children supplied with Hearing Aids during school session (1960-61)	18
(c)	No. of pre-school children wearing Hearing Aids	3
(d)	No. of children at (a) who left school during session (1960-61)	5
(e)	No. of children wearing Hearing Aids at 31st July, 1961	89

Of the 196 children referred to Ear, Nose and Throat Clinics from schools, 161 attended and subsequently received treatment and operation when necessary from the Ear, Nose and Throat Surgeon.

In addition to her work in Ayrshire, the Audiometrician also tests children attending schools in the County of Wigtown and the Stewartry of Kirkcudbright.

AYRSHIRE.	
Z	
SCHOOLS	
ALL	
Z	
TESTS	.19
AUDIOMETRIC	ing 31st July, 19
PURETONE	Year Endi
AND	
GRAMOPHONE	
OF	
RESULTS	

No. of Children Referred No. of Children Referred No. of Children Referred No. of No. of No. of Children Referred No. of Children	Di di						Grade.	de.	h						
No. of No. of No. of No. of No. of States No. of No. o		Intition of		i ibi	111(0)		in noi School E G. hia-	o lai	I lating lating [1]	No. of Children	No. of Children referred to	No.	Retes of Chil.	ts. dren n	otto (1)
5,455 5,125 4,831 294 230 59 5	- Carolina	No. of Children Listed.	No. of Children Tested.	No. of Children Normal.	No. of Children Def'ive.	(Education School	(Educational ordinary with Hearing	гороз Врес		to E.N.T. Clinic.		Normal.		No. Imp.	Deter- iora- tion.
5,455 5,042 4,709 333 261 69 3	Children Born in 1953	5,495	5,125	4,831 94.26%	A CONTRACTOR OF THE PARTY OF TH	230	1.15%	0.10%		44 0-86%	1	1	al a	1	1
388 339 325 14 10 4 — 4 —	Children Born in 1954	5,455	5,043	4,709	333	261 5.17%		3 0.06%	Table 1	1.13%	e dinie	1	7200	dans	- THO
519 486 311 175 107 61 7 — — — — 486 311 175 107 61 7 — 36 — — 468 311 175 107 61 7 — — —	Children Born in 1952 (Absent at previous test)	388	339	325	14	10	4	1		4	. 1		oods?	1	d
1 104 000 500 500 83	Children of any other age thought to have a Hearing Defect	519	486	311	175	107	. 61	7	brest re	36	n Pp	de vot	rando not loos	The last	gnive
1,184 889 600 989 41,1	Retests. Children showing defect at previous test	1,184	885	300	585	347	214	22	67	55	-1	300	83	440	62

(e) Psychiatric Service.

Dr. McClelland reports as follows:-

During the period from 1st August, 1960, until 31st July, 1961, 153 children were referred for psychiatric opinion. The age and sex distribution of these was as follows:—

				Boys.	Girls	3.	Total.
Under 5 years				3	5		8
5 - 10 years				55	14		69
11 - 15 years				47	22		69
Over 15 years				5	2		7
Har King Street				-			
				110	43		153
					-		
he sources of refe	erral we	ere as	follo	ws :—			
Educational Ps	veholog	rist					50
Educational Psy Psychiatrist	ycholog 	ist					50 4
D 1: 1: 1		alaman a					4
Psychiatrist General Practit							4 16
Psychiatrist General Practit Paediatrician	ioners			yllian			16 18
Psychiatrist General Practit Paediatrician Juvenile Court	ioners			3			16 18 40
Psychiatrist General Practit Paediatrician Juvenile Court School Health	ioners Service						16 18 40 17
Psychiatrist General Practit Paediatrician Juvenile Court School Health Speech Therapis	ioners Service						16 18 40 17 1
Psychiatrist General Practit Paediatrician Juvenile Court School Health Speech Therapis Children's Office	ioners Service st						4 16 18 40 17 1 3
Psychiatrist General Practit Paediatrician Juvenile Court School Health Speech Therapis Children's Office Ophthalmologist	ioners Service st er t						4 16 18 40 17 1 3 2
Psychiatrist General Practit Paediatrician Juvenile Court School Health Speech Therapis Children's Office	ioners Service st er t						4 16 18 40 17 1 3

Nine of these referrals failed to appear, so that a total of 144 children were seen at the following Centres:—

Child Guidance Clinic, Ayr			(I) these		13
Child Guidance Clinic, Kil	marnock				31
Bank Street, Irvine					14
Waterside Street, Irvine	Lady res		MOR. OCT		3
Donaldson Avenue, Saltcoa	ats				6
Kirkland Park, Darvel			Total la	0.7.	28
Seafield Hospital, Ayr			none bure		37
County Buildings, Ayr					5
Home Visits					6
Red Heugh Hostel					-
The same of the same state of	better armi	1111111	b disort		Della Control

return which allow faster cavity proparation

of that this trend could be continued by

The distribution of the children seen according to the diagnostic classification recommended for general use is as follows:—

I.—Organic Disorders					19
II.—Personality Disorders			****	***	31
III.—Reactive Disorders	41.30	moisself.	m x	h	35
IV.—Psychoneuroses					25
V.—Psychoses			V 10	ball.	7
VI.—Subnormality			HTOY O	1	18
VII.—Other					9

Category V. (Psychoses) requires an explanatory note. Only two cases belonged to the group of autistic children often designated "schizophrenia in childhood." The others showed auditory hallucinosis (two cases), persecutory delusions (one case) and endogenous depression (two cases).

Category VII. consisted entirely of children in whom nothing which could reasonably be considered a psychiatric disorder was found.

VII.—DENTAL INSPECTION AND TREATMENT.

Report by the Chief Dental Officer.

The annual return is set out for the first time in the new form laid down by the Department of Health. This is a combined return and includes school inspections and treatments during the period 1st August, 1960—31st July, 1961, along with the Maternity and Child Welfare Report for the period 1st January—31st December, 1961.

During the school year the Dentists devoted 363 half-days to routine dental inspections and 2,311 half-days to the treatment of those children whose parents accepted the offer of treatment. 12,996 attendances were made for treatment.

It is gratifying to note that in spite of the staff shortage, five vacancies existing as in the previous year, the number of fillings in both deciduous and permanent teeth has increased. I feel that this trend could be continued by the provision of air rotors which allow faster cavity preparation.

An increase which is not so welcome is that of the number of dentures supplied to school children. 134 were fitted during the year and on consulting previous returns I find that in the year 1947-48 only 21 dentures were found to be necessary. These figures give an indication of the worsening state of children's teeth, due in part to the shortage of Dentists, but the lack of oral hygiene combined with an excessive consumption of sweets, biscuits and cakes usually between meals, must not be forgotten. The remedy to a large extent lies with the parents.

The new Clinic in Prestwick came into service at Easter, 1961. The Dental Department, which is fully equipped, contains all modern aids to diagnosis and treatment. It is available every day, unlike King Street Clinic which it supercedes, thus allowing additional sessions to be worked, so reducing the waiting list for treatment.

The Orthodontic Consultant from Glasgow Dental Hospital, Dr. Campbell, continues his monthly visits which are much appreciated. His advice on the treatment of the more difficult Orthodontic cases is very welcome. This is shown by the increasing number of cases sent in for his opinion.

During the session a short Dental Health Education programme was carried out in selected schools. Two films, "Let's Keep Our Teeth" and "No Toothache for Eskimos," each directed at a different age group, were shown. These were followed by talks, posters in school and leaflets distributed to pupils. The response was good but unfortunately staff was not available for an adequate follow-up campaign.

The problems arising from the shortage of staff are still with us. The interval between treatments tends to increase as does the amount of treatment required by each child. The recruitment of additional staff is of paramount importance.

Acknowledgement must once again be made to the co-operation of Head Teachers and Teaching Staff with the Dental Staff during napections and treatment carried out in school.

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

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

Day pupils were conveyed daily by motor transport from and to their own homes. The number so dealt with was 90; of these 82 are mentally handicapped children and 8 are physically handicapped children.

St. Leonard's Home has 10 physically handicapped children resident, and these are taught in the Physically Handicapped Classes.

There were thus on the school roll 18 physically handicapped and 82 mentally handicapped children.

There are 5 classrooms, viz., 4 for mentally handicapped and one for physically handicapped children.

(2) Park School, Kilmarnock.

There are on the roll of this school 84 mentally handicapped children and 16 physically handicapped children.

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

(3) James Reid School, Saltcoats.

This school which comprises three classrooms has 39 mentally handicapped children on the roll.

(4) Courthill School, Dalry.

This school which comprises two classrooms has 36 mentally handicapped children on the roll.

(5) Garrallan School, Cumnock.

This school, comprising two classrooms, has accommodation for 40 handicapped children. There are 26 children on the roll.

(6) Wallaceton Works School, by Maybole.

This school has accommodation for 40 mentally handicapped children. There are 24 children on the school roll.

(7) Pennyvenie School, Dalmellington.

This school, which comprises two classrooms, has 5 mentally handicapped children on the roll.

(8) Special Class, Eglinton District School, Kilwinning.

Ten mentally handicapped children attend this special class.

(9) Special Class, Loudoun Montgomery School, Irvine.

Seventeen mentally handicapped children attend this special class.

(10) Riccarton School (Occupational Centre), Kilmarnock.

This Centre accommodates children who are mentally handicapped to such a degree that they cannot benefit from education in a Special School but are trainable. The number at present on the roll is 39.

(11) Occupational Centre, Ayr.

This Centre is accommodated in the Y.M.C.A., Prestwick Road. Ayr, and provides training for severely mentally handicapped children from the Ayr district. Nineteen children are on the roll.

(12) Craigbank Occupational Centre, Saltcoats.

This Training Centre accommodates severely mentally handicapped children from the Ardrossan, Saltcoats, Kilwinning area. Sixteen children are on the roll.

(13) West Park School for the Hard of Hearing, Kilmaurs.

There are 37 children suffering from Grade IIB. Deafness on the roll of this school. In view of the distance from their homes five children are boarded at St. Leonard's Home School, Ayr, and they are taken to school daily with the others by special conveyance.

(14) Nursery Class for Children with Defective Hearing, Charlotte Street, Ayr.

This class is under the guidance of a qualified teacher from Ayr. It was formed to meet the needs of children between the ages of 2 and 5 years who would eventually require education either in a residential school for totally deaf children or in West Park School Kilmaurs. One child attends twice weekly for periods of 1½ hours each day.

(15) Other Institutions.

At 31st July, 1961, there were in Institutions:—

Mary Hare Grammar School for the Deaf	2.7	1
Donaldson's School for the Deaf, Edinburgh		1
Glasgow School for the Deaf		31
St. Vincent's School for the Blind and Deaf, Glass	gow	6
Royal Blind School, Edinburgh		16
Sandyford School for Partially Sighted, Paisley		1
Condoverhall School, Shrewsbury (for Blind Child		
with other Disabilities)		1
Westerlea School for Spastics, Edinburgh		1
Scotscraig School for Spastics, Paisley		-5

Coltness House School, Wishaw	3
Trefoil School for Physically Handicapped Children	2
East Park Home for Infirm Children, Largs	5
Stanmore House, Lanark	1
Naemoor School, Perthshire	1
Lovedale Boys' Home, Dumfries	1
Waverley Park Certified Institution, Kirkintilloch	2
Dunlop House	10
St. Joseph's Certified Institution, Rosewell, Midlothian	4
Birkwood Institution	4
Lennox Castle Certified Institution, Lennoxtown	1
St. Charles Institution, Carstairs	1
Royal Scottish Certified Institution, Larbert	7
Camphill Rudolph Steiner School, Aberdeenshire	2
Strathmore Institution	2
Ailsa Hospital	1
Ravenspark Hospital	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 16.

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

(a) Accommodation.

During the session Physical Education Departments have been provided in two new schools, Saltcoats Junior Secondary and St. Conval's R.C. Junior Secondary School, Cumnock. These include gymnasia equipped on modern lines together with the necessary changing rooms and spray baths. Playing fields adjoin the school.

Four new Primary Schools have also been opened—John Galt, Kirkstyle, Dalmilling and Cairnhill. Climbing equipment has been installed in each of these schools in accordance with the latest syllabus of Physical Education. Where accommodation in existing schools is suitable, this equipment is also being installed.

(b) Staffing.

The acute shortage of women specialist teachers continues and it has been found necessary to have some girls' classes taught by men.

(c) Swimming.

- (1) All physically fit pupils attending schools in Kilmarnock from the Primary VI. stage upwards have weekly instruction in swimming at Kilmarnock Corporation Baths, where first-class facilities are available. The average number of pupils attending each week is 1,550.
- (2) Pupils from schools in Cumnock, Prestwick, Troon and Saltcoats continue to use the local outdoor pools for swimming lessons during the summer term.
- (3) The intensive course of swimming lessons held during the first two weeks of the summer vacation for pupils attending schools outwith Kilmarnock has again proved worth while.

(d) Camp Schools.

In the past session eight groups of approximately 240 pupils have spent a fortnight in one of the Camp Schools. Here emphasis is laid on outdoor life.

(e) Personal Hygiene.

Throughout the schools every effort is being made to train the pupils in healthy habits.

Other Activities.

In some schools where it has been found possible to make suitable adjustments to time-tables and where staff is available, experiments are being carried out in outdoor pursuits. The pupils take part in such activities as canoeing, map-reading, hill-walking, cycling, etc. By this means it is hoped that they will develop a hobby which will take them out of doors during their leisure time.

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 46,761.

Meals were supplied to 17,625 children. Of this number 122 were partial remission cases and 5,005 were on a reduced charge for pupils of the same household. 2,471 children were supplied with free meals.

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 Number of Children Examined at— Primary and Junior Secondary Schools—		Systematic caminations.
Entrants	···	5,933 4,503 4,818 5,973
Senior Secondary Schools— Children Born in 1944	aloods 	855
TOTAL	on him	22,082
(b) Other Examinations—		
Special Cases	 tion	793 1,166 869 119 71 107
Total		1,959
(c) The Number of Individual Children Ins Systematic Examinations who were N Parents as requiring Treatment:—		
Entrants	14, <u>219</u>	584 69
TOTAL	nga, on	2,230

(d) Average Heights and Weights:-

Group Examined.	Sex.	No. Exam.	Average Age Months.	Average Height Inches.	Average Weight Pounds.
Entrants	Male Female	2,986 2,947	64·3 64·6	43·6 43·0	44·0 42·6
Children Born in 1951	Male Female	2,472 2,346	114·9 114·7	52.8 52.3	66·6 65·7
Children Born in 1947	Male Female	3,047 2,926	164·1 163·9	$\begin{array}{c} 61 \cdot 1 \\ 61 \cdot 2 \end{array}$	102·8 105·8
Children Born in 1944	Male Female	426 429	198·0 198·3	67.7 63.7	$137.5 \\ 127.5$

TABLE II.

SCHOOL MEDICAL SERVICE—SYSTEMATIC EXAMINATIONS.

					Entre	rants.	18	1951	18	1947	19	1944	All	All Ages.	Total
.Vature	Nature of Defect.				Boys.	Girls.		Boys. Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all Ages.
Number examined	:		CAT.		2,986	2,947	2,472	2,346	3,047	2,926	426	429	8,931	8,648	17,579
1. Clothing— Unsatisfactory Percentage			::		6	0.03	0.04	0.00	0.03	0.8	13.2 2.2 bd	1	8 0 0	0.03	111
2. Footgear— Unsatisfactory Percentage			::		0.03	1 0.03	4 0.16	11	0.03	I Male	elald mest l		6 0.07	1 0.01	7 0.04
3. Cleanliness— (a) Head— Dirty, Nits or Vermin Percentage	Vermin	::	; ;	Atlan : :	10	41	18 0.73	46 1.96	16 0.53	42 1-44	TI III	11	44 0 49	129 1-49	173 0 98
(b) Body— Dirty, or Verminous Percentage			::	: :	3 0.10	0.07	0.28	3 0.13	0 23	0.03	11	0.23	17 0.19	0.08	24 0 14

TABLE II.—Continued.

School Medical Service—Systematic Examinations—Continued.

				Entra	ants.	1951	51	1947	47	19	1944	AII ,	Ages.	Total
Nature of Defect.	Defect.			Boys.	Girls.	all Ages.								
Skin		00			2	9					P	F		7
Head-														
Ringworm	***	:		1	1	1	1	1	1	1	1	1	1	1
Percentage			:	0.03	1	1	1	1	1	1	1	0.01	1	900-0
Impetigo			::	1	1	67	1	1	1	1	1	3	22	5
Percentage	:		:	1	0.03	80.0	0.04	0.03	13	1	1	0.03	0.05	0.03
Other Diseases	:			11	4	11	en	14	22	9	67	42	31	73
Percentage			:	0.37	0.14	0.44	0.13	0.46	0.75	1.41	0.47	0.47	0.36	0.45
Body-														
Ringworm			:	1	5	1	1	1	1	1	1	-	67	3
Percentage	::	:	:	1	0.02	0.04	1	1	1	1	1	0.01	0.05	0.05
Impetigo		:	:	1	57	67	1	1	1	1	1	53	4	9
Percentage		:	:	1	0.02	80.0	0.04	1	0.03	1	1	0.05	0.02	0.03
Scabies	:	:	:	3	5	1	4	1	1	1	1	3	10	13
Percentage	:	:	:	0.10	0.17	1	0.17	1	0.03	1	1	0.03	0.12	0.07
Other Diseases	:	***	::	64	45	31	28	43	43	13	11	151	127	278
Percentage	:	:	:	2.14	1.53	1.25	1.19	1.41	1.47	3.07	2.56	1.69	1.47	1.58
Nutritional State— Slightly Defective	:	:	:	co	4	7	4	67	co	2	63	14	13	27
Percentage	:	:	:	0.10	0.14	0.28	0.17	0.07	0.10	0.47	0.47	0.16	0.15	0.15
Bad				i	1	5	1	1	1	١	1	2	1	2
Percentage				1	1	80,0	1	1	1	1	1	0.05	-	0.01

TABLE II.-Continued.

School Medical Service-Systematic Examinations-Continued.

	Entr	ants.	1951	51	19	1947	19	1944	All	Ages.	Total
Nature of Defect.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all Ages.
6. Mouth and Teeth— Unhealthy Percentage	12	5 0.17	8	7 0.30	18	10	0 23	3 0.70	39	25 0.29	64
7. Nose— Obstruction requiring Observation Percentage	64	44	28	16	17 0.56	9	0.23	rel d	110	69	179
Obstruction (probably Adenoids) requiring Operation Percentage Other Conditions	37 1·24 44 1·47	29 0-98 26 0-88	7 0.28 29 1.17	2 0.09 11 0.47	5 0·16 20 0 66	0.01 0.03	0.23	-1111	50 0.56 93 1.04	33 0.38 38 0.44	83 0.47 131 0.74
Throat— Tonsils requiring Observation Percentage Tonsils requiring Operative Treatment Percentage	119 3·99 62 2·08	145 4·92 58 1·97	73 2.95 20 0.81	65 2·77 31 1·32	42 1.38 20 0.66	32 1 09 18 0 62	0.23	0.47 0.23	235 2.63 102 1.14	244 2.82 108 1.25	2.73 210 1.19
Requiring Observation Percentage Requiring Operative Treatment Percentage	62 2.08 1 0.03	55 1.87 1 0.03	14 0.57 1 0.04	14 0 60 1 0-04	14 0.46	0 75	1111	116	0.01	91 1.05 2 0.02	181 1 03 4 0.02

TABLE II.-Continued.

School Medical Service-Systematic Examinations-Continued.

				Enti	rants.	15	1951	18	1947	19	1944	III	Ages.	-
Nature of Defect.	4.			Boys.	Girls.	all all Ages.								
Eyes -						-		9			6		0	
External Diseases-				0										
Blepharitis	:	:	:	20	25	29	21	19	31	-	10	60	60	
Percentage	:	:		19.0	0.85	1.17	0.90	0 62	1.06	0.03	1.17	0.77	0.0	
Conjunctivitis	:	::	:	1	1	3	600		6	200	111	0.11	08.0	
Percentage	:	:		0.03	0.03	0.12	0.13	0.03	0.00	0.93		0.0	0.02	_
Corneal Opacities	:	::	:	1	1	1		1	3 1	0 10		10.0	10.0	
Percentage	:	::	:	1	1	0.04	1	0.03	-			0000	1	
Squint	:	::	:	59	69	11	15	12	10	2	6	0.07	1 8	
Percentage	:	:	:	1.98	2.34	0.45	0.64	0.39	0.17	0.20	0.20	0.0	1.00	
Other Diseases	:	***	:	9	6	9	20	7	1 10	000	010	08.0	00.1	
Percentage	:	:		0 20	0.31	0.94	0.91	0.93	0.17	0.47	0.00	17	070	41
Visual Acuity-							170	2	11.0	14.0	0.73	0.24	0.53	
Number Examined	:	:	:	2,986	2,947	2,472	2,346	3,047	2,926	426	429	8,931	8,648	17,579
Recommended for Refraction	action	1						6				8		
Defective Vision-														
Fair	:	:	:	67	64	84	55	96	1111	19	90	986	950	
rercentage	:	:	:	2.24	2.17	3.40	2.34	3.15	3.79	4.46	4.66	80.6	08.6	9.04
D&d	::		:	32	21	44	46	73	80	7	19.	15.6	150	4
rercentage	:	:	:	1.07	0.71	1.78	1.96	2.40	2.73	1.64	08.6	1.75	1.04	

TABLE II.-Continued.

School Medical Service-Systematic Examinations-Continued.

				Entra	ants.	18	1951	18	1947	18	1944	IIF	All Ages.	Total	
Nature of Defect.	Defect.	SPECTOR		Boys.	Girls.	all Ages.									
Number Examined		: ::		2,986	2,947	2,472	2,346	3,047	2,926	426	429	8,931	8,648	17,579	
9 Fare			- Contract			7.0	2			2 4		07.0	82	9 5	
Otorrhoea		:	:	111	11	7	5	11	11	5	1	34	28	62	
Percentage			:	0.37	0.37	0.58	0.21	0.36	0.38	1.17	0.53	0.38	0.32	0.35	
Other Diseases				14	10	4	20	6	16	4	57	31	33	64	
Percentage				0.47	0.34	0.16	0.21	0.30	0.22	0.94	0.47	0.35	0.38	0.36	
Defective Hearing-														-	
Grade I		***	::	20	6	_	3	3	4	1	1	15	16	31	
Percentage				0.17	0.31	0.58	0.13	0.10	0.1#	1	1	0.17	0.19	0.18	
Grade IIa				22	1	co	53	3	67	1	67	00	7	15	
Percentage	:.		:::	0.07	0.03	0.15	60.0	0.10	0.01	1	0.47	60.0	80.0	60.0	
Grade IIb			::	1	2	23	4	1	52	1	1	63	00	10	
Percentage		****		1	0.07	80.0	0.17	-	0.01	1	-	0.05	60.0	90.0	
Grade III		***	***	1	1	1	1	1	1	1	1	1	1	1	
Percentage		:	:	1	1	1	1	1	1	1	1	1	1	1	
10. Speech-						10									
Defective Articulation	uoi			69	16	7	1	1	1	1	1	99	17	83	
Percentage	***		***	1.98	0.54	0.28	0.04	1	1	1	1	0.74	0.50	0.47	
Stammering				5	2	3	1	9	1	1	1	15	4	19	
Percentage	* ***	***	***	0.17	0.07	0.12	1.0.0	0.50	0.03	0.53	1	0.17	0.02	0.11	

TABLE II.-Continued.

School Medical Service-Systematic Examinations-Continued.

	Entr	Entrants.	1951	51	15	1947	18	1944	All	Ages.	Tota
Nature of Defect.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all
11. Mental and Nervous Conditions-											
	:	I	L	1		1	1	1		1	1
Dull (Intrinsically)	9	65	1 -	-				1	7	4	11
	750	0.10	0.04	0.04	10	1	ı	1	80.0	0.02	90.0
Mentally Defective (Educable)		0.03	0.12	0.0	0.07				0.01	0.03	0.05
ective (Ineducable)	: :	1	1	1		1	1	1	1	1	1
	1	0.03	1	1	1	1	1	1	13	0.01	900.0
sn	12	00 0	9	00 0	2 0	000	1	1	20	19	39
::	0.40	0.27	0.24	0.34	10.0	01.0	1	1	0.77	0.77	0.77
Difficult in Behaviour	9	7	_	_	21	1	1	1	50	00	17
Percentage	0.20	0.24	0.04	0.04	0.02	1	1	1	0.10	0.09	0.10
12. Circulatory System—	No.		100			Š.		Š	à		
(a) Organic Heart Disease-											100
::	7	15	3	1	6	4	67	1	21	20	41
eg	0.24	0.51	0.12	0.04	0.30	0.14	0.47	1	0.24	0.23	0.23
Acquired	:	1	_	_	3	4	1	1	2	9	11
Percentage	:	0.03	£0.0	0.04	0.10	0.14	0.53	1	90.0	0.07	90.0
ditions	20	14	7	6	12	13	1	1	40	37	77
Percentage	0.67	0.48	0.28	0.38	0.39	0.44	0.53	0.53	0.45	0.43	0.44

TABLE II.-Continued.

School Medical Service-Systematic Examinations.-Continued.

	Entr	itrants.	1951	51	1947	47	1944	44	AII	Ages.	Tota
Nature of Defect.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	all
Innde			8		1						
Chronic Bronchitis	7	2	-	1	1	1	1	1	6	4	13
Percentage	0.23		0.04	0.04	0.03	0.03	1	1	0.10	0.02	0.07
Suspected Tuberculosis	1	1	1	1	1	1	1	1	1	3	4
Percentage	0.03		1	1	1	0.03	1	0.23	0.01	0.03	0.05
Other Diseases	49	24	22	7	16	10	3	1	06	42	132
Percentage	1.64		68.0	0.30	0.53	0.34	0.40	0.23	1.01	1.49	0.75
14. Deformities-		0.0		0.00							8-0
Congenital	17		7	3	20	3	1	1	30	18	48
eg	0.57		0.28	0.13	0.16	0.10	0.53	1	0.34	0.21	0.27
Acquired (Poliomyelitis)		1	67	3	4	-	1	1	6	2	14
Percentage	0.10		80.0	0.13	0.03	1	1	1	0.10	90.0	80.0
Acquired (probably Rickets)	1	1	1	1	9	1	-	1	6	67	11
Percentage	0.03		0.04	0.04	0.50	1	0.53	I	0.10	0.05	90.0
Acquired (Other Causes)	38	21	13	4	7	20	67	4	09	49	109
Percentage	1.27		0.53	0.17	0.53	89-0	0.47	0.93	0.67	0.21	0.62
15. Infectious Disease	1	1	1	1	1	-	-	1	01	1	8
	0.03		0.04	1	1	1	1	-	0.05	0.01	0.05
16. Other Diseases or Defects	192	132	86	7.1	87	86	21	55	386	323	709
Percentage	6.43		3.48	3.05	2.86	3.35	4.93	5.13	4.35	3.73	4.03

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

	Entr	Entrants.	1951	51	19	1947	19	1944	To	Total.
Number Examined	5,933	33	4,818	18	5,973	73	oo	855	17.	17.579
(a) Abeta tampatering only to considered (b) Abeta turbocauteri	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.
1. Children Free from Defects	4,200	62.02	3,758	78.00	4,696	78.62	658	96-92	13,312	75.73
2. Children otherwise Free from Defects who Suffer from—										
(a) Defective Vision not worse than 6/12 in the better Eye with or without Glasses, or	231	3.88	285	5.92	435	7.28	81	9.47	1,032	5.87
(b) Oral Sepsis, etc	14	0.24	9	0.12	18	0.30	4	0.47	42	0.24
(c) Both (a) and (b)	61	0.03	6 1		6 F		1	ı	61	0.01
Total	247	4.16	291	6.04	453	7.58	85	9.94	1,076	6.12
3. Children suffering from ail- ments (other than those mentioned in 2) from which					8 20					
pated within a few weeks	851	14.35	424	8.80	384	6.43	56	6.55	1.715	9.76

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

Total.	17,579	% of the Children examined in this en. Group.			7.32	1.07	8.39	%001
		No. of Children	- T- 0 8		1,287	189	1,476	17,579
1944	855	% of the Children examined in this Group.	12-11-1	20.00	5.15	1.40	6 55	%001
19	00	No. of Children.	15112		44	12	56	855
47	73	% of the Children examined in this Group.			6-25	1.12	7.37	100%
1947	5,973	No. of Children.			373	67	440	5,973
51	18	% of the Children examined in this Group.		198	6.04	1.12	7.16	100%
1921	4,818	No of Children.			291	54	345	4,818
Ints.	33	% of the Children examined in this Group.		13	94-6	0.94	10.70	100%
Entrants.	5,933	No. of Children.	18111	47500	579	56	635	5,933
	Number Examined		4. Children suffering from (or suspected to be suffering from) defects 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 con-	0	(b) Where improvement only is considered possible, e.g., without complete restoration of function	Total	Total Number of Children Examined

TABLE IV.

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

Disability.	bility.			At Ordinary School.	Special School or Classes.	In Hospital or Institution.	Hospital School or Institution.	Total.
I repolation for bill (s)				3				8
1. Blind	:	:	:	1	16	1	1	17
Daylally Sighted								
attiany organica			:					
(a) Refraction errors in which the curriculum of an Ordin School would adversely affect the Eye Condition	sely affect the E		an Ordinary	14	1	1	1	15
(b) Other conditions of the Eye, e.g., Cataract, Ulceration,	Eye, e.g., Cata	ract, Ul	ceration,					
school books or to see well enough to be taught in an ordinary school	ee well enough to	be taug	ght in an	10	j-1	1	11	10
3. Deaf—								
Grade I	:	:		955	1	ı	-	955
Grade IIa		:	:	407	1	1	1	407
Grade IIb	:	:	:	10	37		1	47
Grade III	:	:	:	1		39	1	39

TABLE IV .- Continued.

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

Disability.	At Ordinary School.	Special School or Classes.	In Hospital or Institution.	At No School or Institution.	Total.
4. Defective Speech—					
(a) Defects of Articulation requiring Special Educational Measures	143	1	1	1	143
(b) Stammering requiring Special Educational Measures	22	1	1	1	57
5. Mentally Defective (Children between 5 and 16 Years)-					
(a) Educable (I.Q., approx. 50-70)	85	295	9	I	386
(b) Ineducable (I.Q., generally less than 50)	1	99	23	61	150
6. Epilepsy-					
(a) Mild and Occasional	69	1	1	1	09
(b) Severe (suitable for care in a Residential School)	6	1	Institution	THE PROPERTY.	6
7. Physically Defective (Children between 5 and 16 Years)-				100.152	
(a) Non-Pulmonary Tuberculosis (excluding Cervical Glands)	25	1	01		288
(b) General Orthopaedic Conditions	143	26	14	01	185
(c) Organic Heart Disease	66	61	1	1	101
(d) Other Causes of Ill Health	34	15	3	œ	09

2	Total.	84													
	7														
-	- :		-	-						-					
07	ion														
At No School	or	21													
Sco	Sti	CA													
	Institution.														
1		2			TE	12	- 78								
ita	tio														
In	10,	00													
In Hospital	or Institution.														
-	-													-	-
7	0 · · · · · · · · · · · · · · · · · · ·														
At	ol sse.	47													
te	School or Classes.	4													
0,	S	TI ES													
-															
	Ordinary School.	LH													
7	School.	00													
	Sco	170													
-		-	- 2												
		-													
			00												
		:	Cases												
· Per		-													case.
			48												Ca
		:											_1 case.		T
			4		case.	case.	case.						case	es.	(9
			Ë		c a	200	ca						-	case.	7 (6)
			ts.		7	77	77		*			*			
			efec	9	6 6	3 3	(p)	es.	. es.	es.	es.	ses	. e .	808.) and
	'n.	:	De s	case.	(b)1 case. (Grade III)	10.10		cases.	cases.	cases.	cases.	cases.	c)—1 case. d)—1 case. (b) and 7 (b)	2 cases. 7 (b)—1 7 (b)—2	(7
	Disability.		he Multiple Dis as follows	-1 case.	1 9	1 5		9 10	-	01 4	1 9	200	1 1	01-1-	(a)
	ap		dip	68	(b)-1 (Grade	and	1 1						1	(b) 2 and 7 and 7	Grade IIA); 5
	Dis	1	E t	773	000	20		(a)	3 B B	00	(a)	(d)	~	9 18	4)
			M		10 00		HH	1 9	911		9	-1-	L L 10	b); 7 5 (b) 5 (a)	
		:	he	5 (a) 5 (b)				and	and and	and	and	and	and and (a);	(6);	le
			4	1 5 (and	Grade	Grade	2 2	2 2 2	2 2	2 2	2 2	8 6 0		rac
			0	and 5 (a) and 5 (b)	99		55	(a)	(a) (a)	(a)	99	66	B & 4	1; 5 (b); 7 $2 (a); 5 (b)$ $2 (b); 5 (a)$	9
		*	are	116	10101	00 00	00 00	4 10	20 10 10	10 10	10 10	10 10	1 7 6	-0101	0
		ect	* The Nature of the Multiple Defects in the is as follows:-												
		ef	Z												
	1 1	D	he												
		ple	H												
	12	II	*												
		-													
	L	8. Multiple Defects *													

TABLE V.

Local Authority Dental Services. (School and Maternity and Child Welfare.)

School Year-1st August, 1960, to 31st July, 1961.

M. & C.W. Year-1st January, 1961, to 31st December, 1961.

School Population, 59,641

Estimated Pre-School Population, 22,800. Section 1.—General Statistics.

		= 1																Mate	Maternity.
	3 or under	4	Total Ages 0 - 4	5	9	7	00	6	10	_ = =	12	13	14	15	16	17 or over	or Ages	Ante- Natal	Post-
Routine Dental Inspection	9	6	15	1051	1491	[437]	454	1051 1491 1437 1454 1445 1479 1574 1802 2090 2075	479	5741	802	2090	2075	707	236	228	228 11,069	845	23
With Dental Defects	1	9	7	564	914	966	1004	996 1004 1007 1050 1104 1264 1440 1410	1020	1041	264	1440	1410	411	137	112	112 11,413	564	23
Offered Treatment	1	9	7	564	914	966	1004	996 1004 1007 1050 1104 1264 1440 1410	020	104]	264	1440	1410	411	137	112	11,413	564	23
Accepting Treatment	1	co	4	234	339	408	402	344	333	372	344	414	335	83	29	11	3,648	99	23
Treatment by L.A. Dental Officers	-	60	4	196	347	443	485	387	334	329	415	552	497	138	41	47	4,211	37	24
No. made Dentally Fit	1	63	4	181	296	346	359	264	248	246	250	321	272	67	22	13	2,885	24	59
Special and Emergency Cases	1	64	2	9	57	60	-	63	1		5	52	7	4	TEF	1	40	T T T T T T T T T T T T T T T T T T T	01
Attendances for Treatment— 0 - 4 Years Total	ears To	tal	9							Att	Attendances for Treatment 5 - 17 + Years To	nces 5 -	ces for Treatment— 5 - 17 + Years Total	reati	nent Tot	al	12,996	124	147

TABLE V.—Continued.

Section II.—Details of Treatment.

		School.		
282 (1 ato Z ato 2 a	Routine.	Special and Emergency (2)	Total Columns (1) and (2) (3)	M. & C.W. (4)
(a) Fillings— (1) Permanent Teeth (2) Deciduous Teeth	6,751 1,027	6	6,757 1,027	58
(b) Extractions (not including Orthodontic)— (1) Permanent Teeth (2) Deciduous Teeth	934 2,302	18 19	952 2,321	66
Administrations of General Anaesthetic	- in	_	—	_
Other Operations— Permanent Teeth Deciduous Teeth	8,871 910	11	8,882 911	233
Partial Full	130	=	130	15 49
Repairs to Dentures	7	nite in the last	7	3
Radiographs— No. of Exposures (not incl. Orthodontic)	36	in he	36	to read mark

TABLE V .- Continued.

Dental Services-Continued.

Section III.-Orthodontic Treatment.

Number of Cases con	tinued	from	previous	year.	(See	Note	1)	549
New Cases								335
Cases Completed								202
Cases Discontinued						,		80
Cases continuing at	end of	year						477
Attendances for Trea	tment							5,032
Number of Consultat	ions wi	th R.	H.B. Ort	hodon	tist			169

Note 1.—This figure includes 125 patients of private practitioners seen by Regional Hospital Board Consultant.

	Regional Hospital Board Orthodontist	School Dental Surgeon.	Total.
Number of Diagnostic Examinations		352	352
(Not followed by Treatment)	3_3	31	31
Number of Cases Treated	1 - Time	759	759
(a) Without Appliances	_	37	37
(b) With Removable Appliances	_	695	695
(c) With Fixed Appliances	_	_	
Number of Extractions (not carious)	_	\	-
(1) Permanent Teeth	_	245	245
(2) Deciduous Teeth	_	124	124
Repairs to Orthodontic Appliances	_	27	27
Intra-Oral	_	201	201
Radiographs—Number of Exposures— Extra-Oral	_	_	_

TABLE V .- Continued.

Dental Services-Continued.

Section IV.—Dental Staff.

	Dental Surgeons.	Dental Hygienists. (2)	Dental Surgery Assistants. (3)
Establishment of Posts Agreed by Council	14	Nil.	14
Number in Post at 31st July, 1961— Whole-time Part-time Whole-time Equivalent of Part-time	9 Nil. Nil.	Nil. Nil.	9 Nil. Nil.
Total Whole-time Equivalent	9	Nil.	9
Number of Vacancies being Advertised	5	Nil.	Nil.
Total Half-days Worked during year ended 31st July, 1961— (a) In School Health Service (b) In Maternity and Child Welfare Service	3,438 238	Nil.	4,066 238

Dental Services-Continued.

Section V.-Allocation of Time.

Contractor Come none part from January	Dental Surgeons. (1)	Dental Hygienists. (2)	Dental Surgery Assistants. (3)
Estimated Number of Half-days Occupied in Inspection	463	_	
Dental Health Education (see Note 1)	47	MINOS TO MINO	and the said
Treatment (other than Orthodontic)	2,449	_	_
Orthodontic Treatment	516	- 10	d object
Administration	201	_	-
Absence Due to Illness (see Note 2)	259	anianting i	16
TOTAL	3,935	_	16

Note 1.—Two films, "Let's Keep our Teeth" and "No Toothache for Eskimos," were shown to selected schools and followed by leaflets, posters, etc. The duration of this small campaign was one month only, but the response was good.

Note 2.—Of this total 199 half-days were due to the protracted illness of one member of staff.