

[Report 1913] / School Health Service, Fife & Kinross Counties.

Contributors

Kinross (Scotland). County Council. School Health Service.

Publication/Creation

1913.

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Counties of Fife and Kinross.

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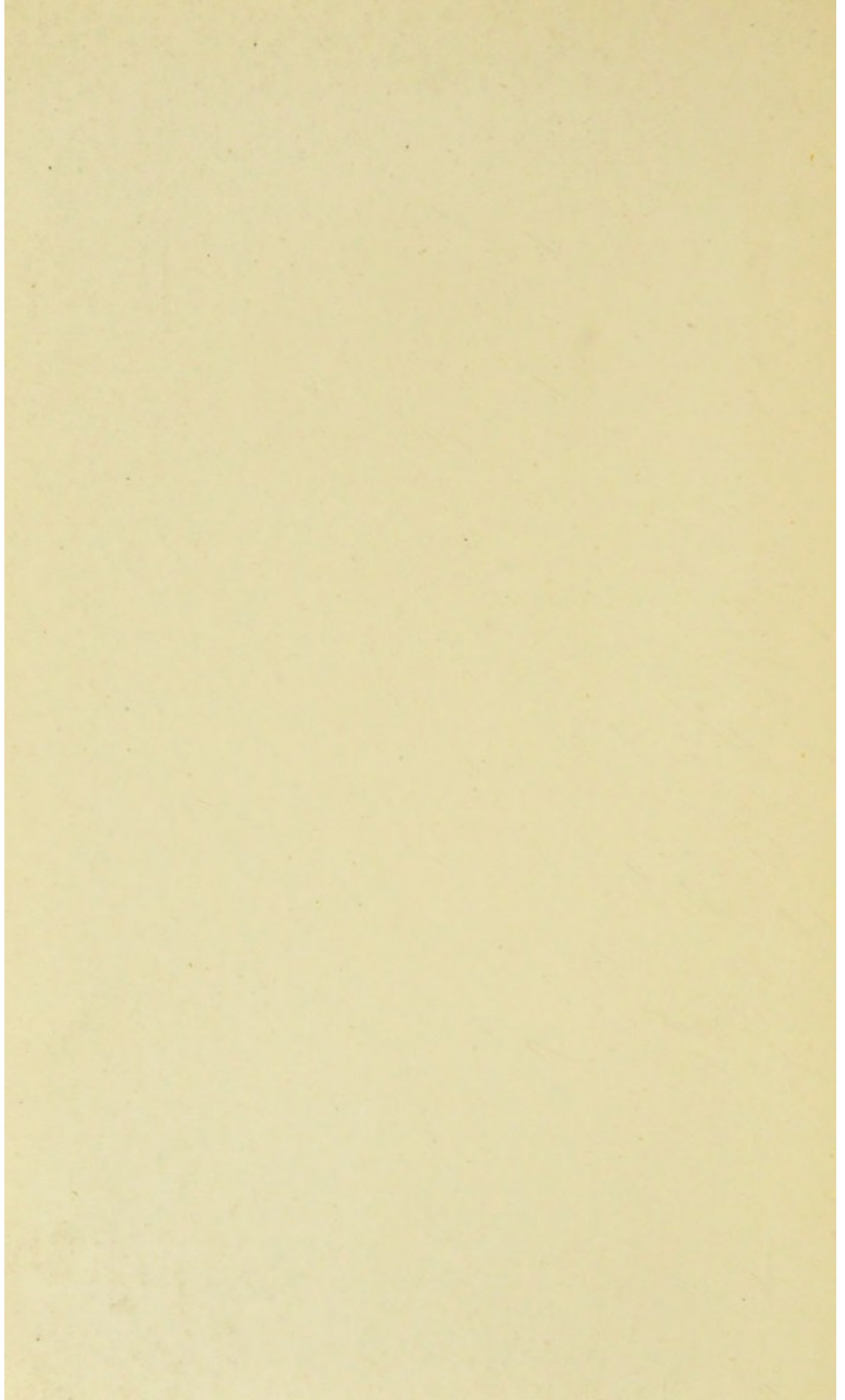
Fourth Annual Report

ON

Medical Inspection
of School Children

For Year ending
31st July, 1913.

PRINTED FOR FIFE COUNTY COMMITTEE
BY A. WESTWOOD & SON, CUPAR-FIFE.





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FOURTH ANNUAL REPORT ON MEDICAL INSPECTION OF SCHOOL CHILDREN FOR YEAR ENDING 31st JULY, 1913.

I HAVE the honour to present the Fourth Annual Report on the Medical Inspection of School Children under the scheme of the Secondary Education Committee for the Counties of Fife and Kinross.

The Report covers the period from August, 1912, to July, 1913.

Dr Arnott-Dickson, Medical Inspector of the Cupar and St Andrews Divisions, resigned on his appointment as Assistant Tuberculosis Officer for Fife County: Dr B. S. Nicholson was appointed to the vacancy, and assumed duty on the 1st January, 1913.

Towards the close of the school year, correspondence was proceeding with a view to the appointment of three proposed additional Health Visitors for the Kirkcaldy and Dunfermline Districts as School Nurses within their respective areas.

During the year (on 18th March, 1913) the Education Committee resolved to revert to the original scheme of medical inspection by including the group "entrant infants" among the routine groups of school children inspected.

The following are the groups in which children are now inspected:—(1) Entrant Infants; (2) Juniors; (3) Twelve-Year-Olds; (4) Exempts; (5) Intermediate and Secondary; (6) Special.

The examination of entrant infants was begun when the routine work for the year had been completed or as opportunity

offered, the inspection being modified according to the educational attainments of the children.

The inspectorial areas and distribution of the schools remain as set forth in detail in Dr J. R. Currie's Annual Report for 1911-12.

The Cupar and St Andrews Divisions were undertaken by Dr Nicholson after the resignation of Dr Arnott-Dickson.

The following is a brief résumé of the main facts in respect of the several divisions.

I. Cupar Division, Dr B. S. Nicholson; School Board Districts 23; Schools 34; Number of children on roll 4,332.

II. St Andrews Division, Dr B. S. Nicholson; School Board Districts 15; Schools 27; Number of children on roll 5,201.

III. West Fife Division, Dr A. F. MacBean; School Board Districts 9; Schools 28; Number of children on roll 12,525.

IV. Kinross Division, Dr A. F. MacBean; School Board Districts 6; Schools 9; Number of children on roll 1,365.

V. Central Division, Dr P. Pattison; School Board Districts 13; Schools 25; Number of children on roll 7,944.

VI. Kirkcaldy with Dysart Division, Drs P. Pattison and B. S. Alexander; School Board Districts 4; Schools 13; Number of children on roll 8,000.

VII. Wemyss Combined Division, Dr B. S. Alexander; School Board Districts 8; Schools 23; Number of children on roll 9,386.

VIII. Endowed Division, Dr B. S. Alexander; School Board Districts 3; Schools 3; Number of children on roll 561.

Under the scheme of medical inspection of the County Education Committee there are 81 school board districts with 162 schools, the number of children on the school roll being 49,314. For the year 1911-12, the number of children on the roll was 46,374.

Scheme of Report.

With a view to securing comparable data, the Report is based on similar lines to those previously issued. It has, however, been found impracticable to give the detailed information in respect of each school in the County Committee's area furnished by the Report of 1911-12. Sufficient statistical matter is supplied to illustrate fully the results of medical inspection and the work done by the medical officers and school nurses. The conclusions to be derived from the work done during the year under review do not differ materially from those exhibited in the Report for last year—and doubt has been expressed whether the tables inserted in last year's Report giving detailed information in respect of every school were of value commensurate with the additional labour and expense of printing involved.

If the Committee deem necessary, however, the figures for any particular school in the area will be furnished to the School Boards concerned on request.

Results of Medical Inspection.

Table I.—During the year 19,513 medical inspections of school children have been made, of which 4,100 were re-examinations and non-routine inspections.

The total number of routine inspections was 13,436—boys 6,793, girls 6,643.

The number of special cases examined during the year was 1,977—boys 980, girls 997; the group "special cases" includes those children who are not due for routine inspection, but who have been picked out in the classroom by the School Medical Inspector, or to whom the teacher desires to direct attention on account of ill-health or illness, real or suspected.

The total routine inspections for 1911-12 was 10,452; the special cases for the same period was 1,829.

The total inspections for 1911-12 (excluding re-examinations) was 12,281, as against 15,413 for 1912-13.

The tables summarise the results of medical inspection in each of the divisions of the area under the scheme of the County Education Committee, the numbers recommended for treatment, the numbers treated and the results of such treatment: the cases set forth as "outstanding" may be under treatment at the close of the school year, may have left school before alleviation or cure of the defect, or treatment may have failed or have proved unsatisfactory.

Tables XXX., XXXI., and XXXII.—The total number of defects recommended for treatment by the Medical Inspectors was 2,882, of which 2,322 or 80·5 per cent. have been treated. Of the defects treated, 66·2 per cent. were cured and 28·4 per cent. benefited. During 1911-12, 2,500 defects were recommended for treatment, the percentage treated being 82·4, the cured 65·4, and the benefited 34·3.

There has thus been a slight decrease in the percentage of treatment for 1912-13 as compared with that of 1911-12: on the other hand the number of inspections and of cases treated for 1912-13 are considerably in excess of those for the year 1911-12.

In the routine groups, 1,923 defects were recommended for treatment; of these 1,500 or 78 per cent. were treated, the number cured being 952 or 63·3 per cent., and the number benefited 463 or 30·9 per cent.

In the special group, the defects recommended for treatment numbered 959, of which 822 or 85·7 per cent. were treated, with 585 or 71·1 per cent. of cures and 197 or 24 per cent. in which the defects were benefited.

I regard the record of treatment as very satisfactory and as indicative of efficient "follow-up" work by the school-nursing staff and medical officers. The slight diminution in the per-

percentages of treated cases is probably in definite measure due to the fact that, owing to the inclusion of the group "entrant infants," medical inspection was in progress up to the last day of the school year, leaving no sufficient interval for the follow-up work of the medical officers and nurses or for the treatment of defects found in children towards the close of the year.

The following table summarises for the several divisions the percentages of defects treated :—

Division	Routines.	Specials.	Total Treated.
Cupar - - -	71·4	82·8	72·6
St Andrews - - -	78·6	87·0	80·3
West Fife - - -	85·7	86·5	86·2
Kinross - - -	64·0	72·7	68·0
Central - - -	86·2	79·5	83·8
Kirkcaldy with Dysart	75·6	91·0	83·3
Wemyss Combined -	80·3	80·3	81·2
Endowed - - -	80·0	...	80·0
Total - - -	78·0	85·7	80·5

West Fife Division takes first place with 86·2 per cent. of treatment, the Central and Kirkcaldy with Dysart Divisions following closely on each other with 83·8 and 83·3 per cent. respectively.

The information resulting from the examination of the children submitted for medical inspection in each division of the two counties is summarised in the following tables, which show the incidence of defects and the extent of treatment.

The matter reported upon by School Medical Inspectors varies but little from year to year: the several divisional reports for 1912-13 are not printed in full, but the more interesting observations are set forth after the general tables as excerpts.

G. PRATT YULE.

February, 1914.

TOTAL INSPEC-

Table

GROUPS	Cupar			St Andrews			West Fife			Kinross		
	B.	G.	T.	B.	G.	T.	B.	G.	T.	B.	G.	T.
Backward Infants - - -	27	6	33	10	8	18	36	20	56	1	...	1
Juniors - - - - -	275	215	490	230	260	490	628	572	1200	61	57	118
Twelves - - - - -	227	220	447	224	237	461	454	402	856	62	51	113
Exempts - - - - -	...	...	...	...	...	...	...	...	...	...	...	...
Intermediate and Secondary -	2	3	5	20	26	46	...	...	...	...	...	...
Entrant Infants - - - - -	168	151	319	194	190	384	261	286	547	...	...	...
Total Routines - - - - -	669	595	1294	678	721	1399	1379	1280	2659	124	108	232
Special Cases - - - - -	60	73	133	96	71	167	327	310	673	41	43	84
Re-examination and Non-Routines	...	...	293	...	...	313	...	...	2017	...	...	115
TOTAL - - - - -	759	668	1720	774	792	1879	1706	1590	5313	165	151	431

TIONS, 1912-13.

I.

Central			Kirkcaldy with Dysart			Wemyss Combined			Endowed			Boys	Girls	TOTAL
B.	G.	T.	B.	G.	T.	B.	G.	T.	B.	G.	T.			
13	5	18	7	7	14	39	28	67	...	...	...	133	74	207
403	396	799	439	447	886	398	406	804	7	8	15	2441	2361	4,802
323	352	675	422	430	852	390	399	789	4	9	13	2106	2100	4,206
...	...	...	7	2	9	...	1	1	...	...	...	7	3	10
...	...	...	40	39	79	120	144	264	68	49	117	250	261	511
473	460	933	355	361	716	405	396	801	...	...	...	1856	1844	3,700
212	1213	2425	1270	1286	2556	1352	1374	2726	79	66	145	6793	6643	13,436
118	141	259	190	197	387	148	162	310	...	...	...	980	997	1,977
...	...	350	...	...	558	...	...	464	...	...	...	...	...	4,100
330	1354	3034	1460	1483	3501	1500	1536	3500	79	66	145	7773	7640	19,513

Eye Disease. Table II.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar - - -	34	1,294	79	33	25	8	25	6	15	4
St Andrews - - -	27	1,399	50	22	18	4	18	12	5	1
West Fife - - -	28	2,659	103	3	2	1	2	2	...	...
Kinross - - -	9	232	6	1	1	...	1	1	...	...
Central - - -	25	2,425	113	37	26	11	26	14	12	...
Kirkcaldy with Dysart	13	2,556	114	38	24	14	24	13	10	1
Wemyss Combined -	23	2,726	67	16	6	10	6	1	5	...
Endowed - - -	3	145	1	..	...	...	...	...	...	...
Total - - -	162	13,436	533	150	102	48	102	49	47	6

Ear Disease. Table III.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar - - -	34	1,294	33	14	10	4	10	4	5	1
St Andrews - - -	27	1,399	27	20	19	1	19	7	11	1
West Fife - - -	28	2,659	20	7	7	...	7	1	6	..
Kinross - - -	9	232	1	...	..	...	...	...	...	...
Central - - -	25	2,425	26	20	18	2	18	3	15	...
Kirkcaldy with Dysart	13	2,556	20	7	6	1	6	1	4	1
Wemyss Combined -	23	2,726	15	2	2	...	2	...	2	...
Endowed - - -	3	145	...	...	...	...	...	...	...	...
Total - - -	162	13,436	142	70	62	8	62	16	43	3

Heart and Circulation. Table IV.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar - - -	34	1,294	36	26	23	3	23	2	13	8
St Andrews - - -	27	1,399	23	11	11	...	11	...	11	...
West Fife - - -	28	2,659	17	...	..	...	...	...	...	...
Kinross - - -	9	232	4	...	...	...	...	...	...	...
Central - - -	25	2,425	41	7	7	...	7	...	7	...
Kirkcaldy with Dysart	13	2,556	25	2	2	...	2	...	2	...
Wemyss Combined -	23	2,726	17	1	...	1	...	...	...	...
Endowed - - -	3	145	...	...	...	...	...	...	..	...
Total - - -	162	13,436	163	47	43	4	43	2	33	8

Lungs (excluding Phthisis). Table V.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar - - -	34	1,294	38	24	19	5	19	7	9	3
St Andrews - - -	27	1,399	21	10	10	...	10	7	3	...
West Fife - - -	28	2,659	7	...	...	..	...	...	...	...
Kinross - - -	9	232	1	...	...	...	...	...	...	...
Central - - -	25	2,425	97	5	4	1	4	1	3	...
Kirkcaldy with Dysart	13	2,556	94	1	1	...	1	...	1	...
Wemyss Combined -	23	2,726	21	...	...	...	...	...	...	...
Endowed - - -	3	145	..	...	...	...	...	...	...	...
Total - - -	162	13,436	279	40	34	6	34	15	16	3

Nervous Disease. Table VI.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	1,294	9	2	2	..	2	..	2	..
St Andrews	27	1,399	8	5	5	..	5	2	3	..
West Fife	28	2,659	8	..	..	..	..	..	..	..
Kinross	9	232	..	..	..	..	..	..	..	..
Central	25	2,425	7	2	2	..	2	..	2	..
Kirkcaldy with Dysart	13	2,556	8	..	..	..	..	..	..	..
Wemyss Combined . .	23	2,726	10	1	1	..	1	..	1	..
Endowed	3	145	..	..	..	..	..	..	..	..
Total	162	13,436	50	10	10	..	10	2	8	..

Phthisis. Table VII.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	1,294	4	4	4	..	4	..	4	..
St Andrews	27	1,399	1	1	1	..	1	..	1	..
West Fife	28	2,659	1	..	..	..	..	..	..	..
Kinross	9	232	..	..	..	..	..	..	..	..
Central	25	2,425	..	..	..	..	..	..	..	..
Kirkcaldy with Dysart	13	2,556	..	..	..	..	..	..	..	..
Wemyss Combined . .	23	2,726	..	..	..	..	..	..	..	..
Endowed	3	145	..	..	..	..	..	..	..	..
Total	162	13,436	6	5	5	..	5	..	5	..

Deformities (not Tuberculous). Table X.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	1,294	28	18	16	2	16	2	8	6
St Andrews	27	1,399	10	3	3	..	3	..	2	1
West Fife	28	2,659	20	..	..	..	..	..	..	..
Kinross	9	232	2	..	..	..	..	..	..	..
Central	25	2,425	23	5	2	3	2	1	1	..
Kirkcaldy with Dysart	13	2,556	39	10	4	6	4	..	4	..
Wemyss Combined . .	23	2,726	40	3	1	2	1	1	..	..
Endowed	3	145	4	..	..	..	..	..	..	..
Total	162	13,436	166	39	26	13	26	4	15	7

Infectious or Contagious Diseases. Table XI.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	1,294	6	6	6	..	6	3	2	1
St Andrews	27	1,399	9	9	8	1	8	7	1	..
West Fife	28	2,659	3	..	..	..	..	..	..	..
Kinross	9	232	..	..	..	..	..	..	..	..
Central	25	2,425	30	23	23	..	23	19	4	..
Kirkcaldy with Dysart	13	2,556	19	14	14	..	14	13	1	..
Wemyss Combined . .	23	2,726	4	3	2	1	2	2	..	..
Endowed	3	145	..	..	..	..	..	..	..	..
Total	162	13,436	71	55	53	2	53	44	8	1

Other Diseases. Table XII.

DIVISIONS	Schools	Results of inspection		Results of recommendation to obtain treatment			Results of treatment			
		Total inspected	Number affected	Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	1,294	136	47	30	17	30	8	16	6
St Andrews	27	1,399	142	28	26	2	26	12	13	1
West Fife	28	2,659	67	1	1	...	1	...	1	...
Kinross	9	232	7	1	1	...	1	1	1	...
Central	25	2,425	119	20	16	4	16	4	11	1
Kirkcaldy with Dysart	13	2,556	87	13	10	3	10	3	7	...
Wemyss Combined . . .	23	2,726	45	11	11	...	11	3	8	...
Endowed	3	145	2	...	...	...	...	...	...	...
Total	162	13,436	605	121	95	26	95	30	57	8

Clothing and Footgear. Table XIII.

DIVISIONS	Schools				Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
	Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding				
Cupar	1,294	1,233	47	14	12	12	...	12	9	3	...	...	...	...
St Andrews	1,399	1,242	151	6	6	6	...	6	6	...	...	...	...	...
West Fife	2,659	2,639	15	9	7	1	...	7	4	2	...	...	...	...
Kinross	232	230	...	2	2	...	...	2	...	2	...	...	...	...
Central	2,425	2,112	305	8	...	...	...	...	...	...	...	...	...	...
Kirkcaldy with Dysart	2,556	2,266	287	2	...	...	...	...	...	...	...	...	...	...
Wemyss Combined	2,726	2,566	149	11	15	1	...	15	14	...	...	...	...	...
Endowed	145	145	..	...	...	...	...	...	...	...	...	...	...	...
Total	13,436	12,433	954	49	42	40	2	40	33	7	40	33	7	...	

The following is the classification adopted:—

Class 1. Clothing ample and footgear in good repair.

Class 2. Clothing meagre; footgear in disrepair.

Class 3. Clothing ragged and totally inadequate; footgear quite worn out.

Nutrition. Table XIV.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	1,147	142	5	3	3	3	3	3	3	...
St Andrews	27	1,399	1,181	216	2	2	2	2	2	2	2	...
West Fife	28	2,659	2,248	405	6	4	4	4	3	1	3	...
Kinross	9	232	209	23	...	...	...	...	...	...	...	...
Central	25	2,425	1,940	483	2	1	1	1	1	1	1	...
Kirkcaldy with Dysart	13	2,556	2,033	522	1	3	2	2	2	2	2	...
Wemyss Combined	23	2,726	2,382	344	...	2	2	2	1	1	1	...
Endowed	3	145	131	14	...	...	...	...	...	...	...	...
Total	162	13,436	11,271	2,149	16	15	14	14	4	10	10	...

The following is the classification adopted :—

- Class 1. Well-nourished.
- Class 2. Ill-nourished.
- Class 3. Emaciated.

Head: Boys. Table XV.

DIVISIONS	Schools	Results of Inspection			Results of recommendation to obtain Treatment			Results of Treatment				
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	588	545	34	9	6	6	6	6	6	6	6
St Andrews	27	623	587	27	9	4	4	4	4	4	4	4
West Fife	28	1379	1224	152	3	5	5	5	5	5	5	5
Kinross	9	124	114	10	...	3	3	3	3	3	3	3
Central	25	1212	1171	38	3	3	3	3	3	3	3	3
Kirkcaldy with Dysart	13	1270	1227	41	2	1	1	1	1	1	1	1
Wemyss Combined	23	1357	1346	11	...	...	...	...	...	...	...	...
Endowed	3	79	79	...	...	...	...	...	...	...	...	...
Total	162	6632	6293	313	26	23	22	1	22	22	22	22

The following is the classification adopted:—

Class 1. Hair clean.

Class 2. Nits in hair.

Class 3. Lice in hair.

Head: Girls. Table XVI.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	706	545	104	57	54	..	54	54	..	..	..
St Andrews	27	776	600	122	54	48	..	48	48	..	..	..
West Fife	28	1280	275	964	41	44	..	44	44	..	..	..
Kinross	9	108	31	76	1	1	..	1	1	..	..	..
Central	25	1213	751	442	20	24	..	24	21	3	..	..
Kirkcaldy with Dysart	13	1286	818	420	48	44	2	44	36	8	..	..
Wemyss Combined	23	1369	994	300	75	82	4	82	80	..	2	..
Endowed	3	66	66	..	..	..	..	..	..	..	..	..
Total	162	6804	4080	2428	296	297	6	297	284	11	2	2

Body. Table XVII.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	1,221	56	17	16	16	...	16	14	2	...
St Andrews	27	1,399	1,330	57	12	11	11	...	11	11	...	...
West Fife	28	2,659	2,481	146	32	30	30	...	30	30	...	...
Kinross	9	232	223	5	4	4	4	...	4	4	...	...
Central	25	2,425	2,243	164	18	18	18	...	18	15	3	...
Kirkcaldy with Dysart	13	2,556	2,335	213	8	11	11	...	11	10	1	...
Wemyss Combined	23	2,726	2,479	239	8	23	23	4	23	22	1	...
Endowed	3	145	145	...	...	...	...	...	...	...	...	...
Total	162	13,436	12,457	880	99	117	113	4	113	106	7	...

The following is the classification adopted:—

Class 1. Body and clothing clean.

Class 2. Body and clothing wanting in cleanliness but free from vermin.

Class 3. Body lice on clothing.

Teeth. Table XVIII.

DIVISIONS.	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment				
		Total Inspected	*	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	166	464	573	91	72	34	38	34	18	13	3
St Andrews	27	1,399	182	747	417	53	27	18	9	18	13	5	..
West Fife	28	2,659	121	1726	714	98	..	..	..	..	..	..	..
Kinross	9	232	5	162	55	10	..	..	..	..	..	..	..
Central	25	2,425	338	1089	713	285	..	..	..	..	..	..	..
Kirkcaldy with Dysart	13	2,556	348	1149	716	343	..	..	..	..	..	..	..
Wemyss Combined	23	2,726	420	978	619	709	..	..	..	..	..	..	..
Endowed	3	144	26	65	32	22	..	..	..	..	..	..	..
Total	162	13,436	1606	6380	3839	1611	99	52	47	52	31	18	3

The following is the classification adopted:—

Class *. Perfect teeth.

Class 1. Caries of less than 4 teeth.

Class 2. Caries of 4 to 8 teeth.

Class 3. Caries of more than 8 teeth.

Tonsils. Table XIX.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	706	481	107	78	40	38	40	21	15	4
St Andrews	27	1,399	846	469	84	58	36	22	36	19	12	5
West Fife	28	2,659	2,427	187	45	47	39	8	39	18	8	13
Kinross	9	232	212	11	9	9	3	6	3	3	..	..
Central	25	2,425	2,015	399	11	8	7	1	7	5	1	1
Kirkcaldy with Dysart	13	2,556	2,011	527	18	11	5	6	5	3	2	..
Wemyss Combined	23	2,726	1,851	857	18	12	7	5	7	4	2	1
Endowed	3	145	113	30	2	2	2	..	2	1	1	..
Total	162	13,436	10,181	2,961	294	225	139	86	139	74	41	24

The following is the classification adopted:—

Class 1. Tonsils not enlarged.

Class 2. Slight or moderate enlargement.

Class 3. Great enlargement.

Adenoids. Table XX.

DIVISIONS	Schools	Results of Inspection			Results of recommendation to obtain Treatment			Results of Treatment				
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	898	317	79	60	29	31	29	17	11	1
St Andrews	27	1,399	984	352	63	47	25	22	25	11	11	3
West Fife	28	2,659	2,615	39	5	6	3	3	3	1	1	1
Kinross	9	232	231	1	...	..	..	..	..	..	..	..
Central	25	2,425	2,396	14	15	14	10	4	10	7	2	1
Kirkcaldy with Dysart	13	2,556	2,530	18	8	12	8	4	8	6	2	..
Wemyss Combined	23	2,726	2,708	17	1	10	8	2	8	7	1	..
Endowed	3	145	144	1	...	..	..	..	..	..	..	..
Total	162	13,436	12,506	759	171	149	83	66	83	49	28	6

The following is the classification adopted :—

Class 1. Adenoids absent.

Class 2. Adenoids present.

Class 3. Adenoids extreme.

Glands. Table XXI.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	1,116	178	...	...	...	...	...	...	...	...
St Andrews	27	1,399	1,224	175	...	...	...	...	...	...	...	...
West Fife	28	2,659	2,342	308	9	5	5	5	3	2	...	...
Kinross	9	232	206	26	...	...	...	...	...	...	...	...
Central	25	2,425	1,001	1,422	2	1	1	1	...	1	...	...
Kirkcaldy with Dysart	13	2,556	1,227	1,327	2	...	...	...	...	...	...	...
Wemyss Combined	23	2,726	1,750	966	10	1	1	1	...	1	...	...
Endowed	3	145	115	30	...	...	...	...	...	...	...	...
Total	162	13,436	8,981	4,432	23	7	7	7	7	4	...	...

The following is the classification adopted:—

- Class 1. No enlargement.
 Class 2. Submaxillary or cervical glands slightly enlarged.
 Class 3. Submaxillary or cervical glands much enlarged.

Vision. Table XXII.

DIVISIONS	Schools	Results of Inspection			Results of recommendation to obtain Treatment			Results of Treatment				
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	975	632	266	77	77	50	27	50	23	25	2
St Andrews	27	1,015	800	159	56	56	36	20	36	24	8	4
West Fife	28	2,080	1793	209	78	58	37	21	37	29	3	5
Kinross	9	232	205	18	9	4	1	3	1	1	...	...
Central	25	1,474	1201	143	130	39	32	7	32	27	1	4
Kirkcaldy with Dysart	13	2,419	2077	162	180	67	50	17	50	40	10	...
Wemyss Combined	23	1,925	1676	142	107	71	47	24	47	25	21	1
Endowed	3	145	137	3	5	3	2	1	2	1	1	...
Total	162	10,265	8521	1102	642	375	255	120	255	170	69	16

The following is the classification adopted :—

Class 1. Perfect vision. Visual acuity equal to $\frac{6}{6}$. Children who were able to read correctly, at a distance of six metres, type which is clearly visible to the normal eye at that distance.

Class 2. Imperfect vision. Visual acuity equal to $\frac{6}{8}$. Children who were unable to read correctly, at a distance of six metres, type which is clearly visible to the normal eye at that distance; but who were able to read correctly, at a distance of six metres, type which is clearly visible to the normal eye at a distance of nine metres.

Class 3. Defective vision. Visual acuity less than $\frac{6}{8}$. This class includes all children who failed to qualify for classes 1 and 2.

Hearing. Table XXIII.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	1,211	70	13	7	6	1	6	1	4	1
St Andrews	27	1,399	1,364	35	...	21	20	1	20	5	11	4
West Fife	28	2,659	2,650	5	4	6	6	...	6	1	5	...
Kinross	9	232	232	...	...	...	...	...	...	...	...	...
Central	25	2,425	2,403	20	2	13	11	2	11	4	6	1
Kirkcaldy with Dysart	13	2,556	2,537	19	...	11	10	1	10	3	7	...
Wemyss Combined	23	2,726	2,715	8	3	8	7	1	7	4	3	...
Endowed	3	145	145	...	...	...	...	...	...	...	...	...
Total	162	13,436	13,257	157	22	66	60	6	60	18	36	6

The following is the classification adopted :—

Class 1. No deafness.

Class 2. Slight deafness.

Class 3. Great deafness.

Mental Condition. Table XXV.

DIVISIONS	Schools	Results of Inspection				Results of recommendation to obtain Treatment			Results of Treatment			
		Total Inspected	I.	II.	III.	Total recommended for Treatment	Treated	Outstanding	Total Treated	Cured	Benefit	Outstanding
Cupar	34	1,294	1,179	112	3	..	..	..	..	..	..	..
St Andrews	27	1,399	1,333	58	8	..	..	..	..	..	..	..
West Fife	28	2,659	2,641	12	6	..	..	..	..	..	..	..
Kinross	9	232	228	2	2	..	..	..	..	..	..	..
Central	25	2,425	2,397	25	3	..	..	..	..	..	..	..
Kirkcaldy with Dysart	13	2,556	2,517	36	3	..	..	..	..	..	..	..
Wemyss Combined	23	2,726	2,674	52	..	..	..	..	..	..	..	..
Endowed	3	145	145	..	..	..	..	..	..	..	..	..
Total	162	13,436	13,114	297	25	..	..	..	..	..	..	..

Height: Boys. Table XXVI.

DIVISIONS	Age 3 years		Age 4 years		Age 5 years		Age 6 years		Age 7 years		Age 8 years		Age 9 years		Age 10 years		Age 11 years		Age 12 years		Age 13 years		Age 14 years		Age 15 years				
	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches	Feet	Inches			
Cupar	3	4.3	3	5.8	3	7.8	3	10.6	4	0.7	4	1.8	4	4.2	4	6.6	4	11.5	4	9.4
St Andrews	3	2.9	3	5.3	4	0.4	3	11.5	4	5.4	4	3.4	4	4.5	4	7.4	4	10.7	4	8.6	4	7	...	...	...	...
West Fife	3	9.2	3	10.4	3	11.2	4	...	4	0.8	4	0.4	4	6.4	...	...	...	...	...	...	...	...
Kinross	3	9.1	3	11.3	4	0.7	4	0.1	4	1.2	...	...	...	4	7	...	...	...	...	...	...	...
Central	3	5	3	6.8	3	10.3	3	11.3	4	1.2	4	3	...	...	...	4	7	4	7.5	...	...	...	...	...
Kirkcaldy with Dysart	3	4.4	3	5.2	3	6.6	3	9.6	3	10.9	4	0.4	4	0.4	4	5.4	4	6.5	4	7.1	4	9.7	5	0.5	...	...
Wemyss Combined	3	2	3	3.6	3	5.3	3	6.6	3	10.1	3	11.4	4	0.9	4	0.8	4	4.7	4	6.8	4	9.1	4	10.5	4	9.5	...	...
Endowed	4	..	4	1	4	2.7	...	...	4	4.2	4	8.1	4	10.9	4	11.9	5	5.5	...	...
Anthropometric Average	3	5	3	8	3	11.1	3	10	3	11.1	4	1.7	4	3.8	4	5.5	4	7	4	...	...	...	...	...	...	...

Weight: Girls. Table XXIX.

DIVISIONS	Age 3 years		Age 4 years		Age 5 years		Age 6 years		Age 7 years		Age 8 years		Age 9 years		Age 10 years		Age 11 years		Age 12 years		Age 13 years		Age 14 years		Age 15 years			
	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.	Stones	Lbs.		
Cupar	2	11.8	2	13.1	3	2.1	3	13.2	3	10.3	4	3.1	4	8.8	5	4.6	5	10.3	6	3.7
St Andrews	2	9.8	2	13.5	3	4.5	3	7.1	3	12.7	4	3	4	10.5	5	6.3	5	9.5	6	6.8	7	3	...	...	...
West Fife	3	4.8	3	5.7	3	8.3	3	10.8	4	1.6	3	12.1	5	1.9	...	...	...	...	...	...	...
Kinross	3	...	3	4.2	3	11.2	4	1.2	4	13	...	...	5	7.8	...	...	...	...	...	...	...
Central	2	12.1	2	13.3	3	6.2	3	13.6	3	13	4	0.8	...	...	5	7.2	6	1	...	...	...	...	...
Kirkcaldy with Dysart	2	9.5	2	10.2	2	11.2	3	5.6	3	8.2	3	11.7	4	0.6	4	6.6	5	3.9	5	9.6	5	8.4	...	...	...
Wemyss Combined	2	9.5	2	10.4	2	10.5	3	1.3	3	3.2	4	1.2	3	11.9	4	2.4	4	6.9	5	5.2	5	13.3	6	11.1	...	...	...
Endowed	3	8	4	10.6	4	...	...	...	4	2.5	5	6	11.6	7	1.3	7	0.7	...	...
Anthropometric Average	2	11.6	3	0.4	3	4.7	3	10.2	3	13.5	4	6	4	12.1	5	6.4	...	...	...	...	...	...	...	...	...

Routine Treatment. Table XXX.

DIVISIONS	Schools	Total inspected	Results of recommendation to obtain treatment			Results of treatment			
			Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	1,294	539	385	154	385	195	153	37
St Andrews	27	1,399	370	291	79	291	180	95	16
West Fife	28	2,659	196	168	28	168	124	27	17
Kinross	9	232	25	16	9	16	13	3	...
Central	25	2,425	254	219	35	219	131	80	8
Kirkcaldy with Dysart	13	2,556	259	196	63	196	143	51	2
Wemyss Combined	23	2,726	275	221	54	221	164	52	5
Endowed	3	145	5	4	1	4	2	2	...
Total	162	13,436	1923	1500	423	1500	952	463	85

Special Treatment. Table XXXI.

DIVISIONS	Schools	Total inspected	Results of recommendation to obtain treatment			Results of treatment			
			Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar	34	133	64	53	11	53	23	22	8
St Andrews	27	167	92	80	12	80	42	28	10
West Fife	28	637	246	213	33	213	183	28	2
Kinross	9	84	22	16	6	16	14	2	...
Central	25	259	137	109	28	109	71	28	10
Kirkcaldy with Dysart	13	387	258	235	23	235	182	49	4
Wemyss Combined	23	310	140	116	24	116	70	40	6
Endowed	3	145	...	...	...	...	...	...	...
Total	162	2122	959	822	137	822	585	197	40

Total Treatment. Table XXXII.

DIVISIONS	Schools	Total inspected	Results of recommendation to obtain treatment			Results of treatment			
			Total recommended for treatment	Treated	Out-standing	Total treated	Cured	Benefit	Out-standing
Cupar - - -	34	1,429	603	438	165	438	218	175	45
St Andrews - - -	27	1,566	462	371	91	371	222	123	26
West Fife - - -	28	3,296	442	381	61	381	307	55	19
Kinross - - -	9	316	47	32	15	32	27	5	...
Central - - -	25	2,684	391	328	63	328	202	108	18
Kirkcaldy with Dysart	13	2,943	517	431	86	431	325	100	6
Wemyss Combined -	23	3,036	415	337	78	337	234	92	11
Endowed - - -	3	290	5	4	1	4	2	2	...
Total - - -	162	15,558	2882	2322	560	2322	1537	660	125

Agency of Treatment—Routines & Specials together.

Table XXXIII.

	Home	Medical Charity	Private Doctor	Dental Charity	Private Dentist	Optician	Chemist	Eye Specialist	Poor Law	Other	Total
External Eye Disease -	5	44	50	...	...	24	1	10	..	..	134
Ear Disease -	13	14	61	..	..	..	..	..	..	..	88
Heart and Circulation -	6	6	34	..	..	..	..	..	..	..	46
Lungs (includ. Phthisis)	3	4	32	..	..	..	..	..	..	..	39
Nervous Disease -	...	1	10	..	..	..	..	..	..	..	11
Phthisis -	4	...	1	..	..	..	..	..	..	..	5
Other Tubercular Dis.	...	4	9	..	..	..	..	..	..	..	13
Rickets -	..	..	..	..	..	..	..	..	..	..	..
Deformities (not Tub.)	1	10	18	..	..	..	..	..	..	1	30
Infect. or Contag. Dis.	34	4	75	..	..	..	..	..	..	..	113
Other Diseases -	25	33	98	..	..	..	..	..	..	..	156
Clothing and Footgear	105	...	...	..	..	..	..	..	..	5	110
Nutrition -	19	...	9	..	..	..	..	..	1	3	32
Head -	391	...	...	..	..	..	..	..	..	..	391
Body -	187	...	..	..	..	..	..	..	..	5	192
Teeth -	...	...	9	19	37	..	..	..	..	..	65
Tonsils -	14	52	87	..	..	..	..	..	..	..	153
Adenoids -	15	55	52	..	..	..	..	..	..	..	122
Glands -	...	5	4	..	..	..	..	..	..	..	9
Vision -	...	92	108	..	..	204	..	41	..	1	446
Hearing -	21	21	57	..	..	..	..	..	..	..	99
Speech -	...	...	..	..	..	..	..	..	..	..	..
Mental Condition -	..	...	..	..	..	..	..	..	..	..	..
Total -	843	345	714	19	37	228	1	51	1	15	2254

CUPAR AND ST ANDREWS DIVISIONS.

Dr B. S. NICHOLSON.

Entrant Infants.

No treatment was attempted in this additional group, as the time available during the remainder of the school year was too short to allow of the "Follow-up Work" being done.

Parents.

The invitation sent to parents to attend the inspections personally is not, as a rule, taken advantage of to any great extent. The total number of parents who attended with their children was, in the Cupar District, 73; in the St Andrews District, 140.

It is a pity that the parents should not take fuller advantage of this invitation, but at the same time it shows an increasing confidence in the methods of inspection and the way they are carried out.

Objections.

The number of parents who objected to the examination and sent their objections in writing were, in the Cupar area, 15; in the St Andrews area, 50.

Eye Disease.

Muscular inco-ordination, resulting in what is commonly called "squint," is common, and is unfortunately frequently neglected, causing serious impairment of vision and discomfort to the child. It will be noticed that it is particularly frequent amongst the Entrant Infants. 12 out of 17 cases in the St Andrews area of external eye disease were cases of squint, which is at a rate of 70·5 per cent.

This is a very serious matter, and in the case of infants is particularly amenable to suitable treatment instituted at such an early age, one instance, therefore, of the value of inspection at that age. In the Cupar area the cases of squint amounted to 41·6 per cent. of the total eye disease.

Lungs, exclusive of Phthisis.

Of the cases in this table, the majority were cases of bronchial catarrh, and not severe. Such cases are likely to be numerous amongst a school population who have to travel a long way from their homes in all kinds of weather. It is here that the question of facilities for the drying of wet and sodden clothes arises. In the vast majority of cases such facilities are few and of an unsatisfactory nature, and it would well repay school boards to make improvements on the existing conditions at an early date.

Phthisis.

In the St Andrews area *one* case, and in the Cupar area *four* cases, of phthisis were reported. Children of school age presenting on inspection definite physical signs of phthisis are certainly rare.

Other Tubercular Disease.

The cases enumerated in these tables are mostly cases of previous tubercular attacks, particularly tubercular cervical glands, and deformities due to previous tuberculosis of joints.

Cases of Infectious Disease.

During the year ringworm in particular has been unusually prevalent. In the Kirkgate Infant School, Cupar, a number of cases were presented (4); also in Tayport H. G. School (5); and in the Infant Schools of St Andrews a total of 10 cases.

The disease is very intractable, and spontaneous cure is rare. To "exclude" those children for the long period necessary for arresting the disease would be a hardship hardly warrantable,

and, with the acquiescence of the Chief Medical Officer, I allowed such children to attend school under certain conditions binding on parents and teachers.

In the West Infant School, St Andrews, four or five cases of "purulent ophthalmia" were seen ; these were at once *excluded* from school and promptly treated, with curative results. Purulent ophthalmia is a very infectious disease amongst children, and may lead to disastrous consequences to the eyes.

Teeth.

In the case of the infants a great deal of attention to the primary teeth is required ; all the primary or temporary teeth are erupted at the age of three, and at any time subsequent to this "caries" of the teeth, sufficient to expose the "pulp," may assert itself—in consequence of the exposed nerve "hurting," the child will not eat with that side, and he chooses soft foods which he can "bolt," with consequent indigestion and malnutrition, the "pulp" ultimately dies, and the "caries" goes on until the enamel falls in ; simultaneously inflammation and ulceration of the gums surrounding takes place, the roots of the teeth become septic, and then die.

With regard to the results of recommendation to treatment one can say little. Parents are very careless about this important class of disease, and it is very difficult to get them to move in the matter, I regret to say. The School Board of St Andrews alone made a praiseworthy attempt to deal seriously with this question.

Cases of conservative dentistry were only two in number in the Cupar area, and one in the St Andrews. (This statement refers to private cases only.)

Enlarged Tonsils and Adenoids.

A large number of school children show, more or less, enlargement of the tonsils, but only those sufficiently enlarged to cause obstruction to breathing are notified as III. and

recommended for treatment. The number of such in the Cupar area was 78, or 7·5 per cent., and in the St Andrews area 58, or 5·5 per cent.

Vision.

The condition predominating is one of hypermetropia, but cases of myopia of a high degree are not wanting (7 D to 12 D). Astigmatism, simple and "mixed," is also quite frequently met with, and in some cases the "fundus" of the eye may prove on further examination to be the seat of severe disease, leading sometimes to complete and permanent loss of vision: such a case is recorded later from a St Andrews District school, the child being found suffering from "retinitis pigmentosa." The indifference of parents to their children's "sight" is only surpassed by their indifference to the condition of their "teeth." Many excuses are made why they do not provide "glasses"; some object to their "appearance," some plead "poverty," but the common cause is simple "neglect." Signs are not wanting, however, that parents are awakening more and more to the importance of treating these cases, and our results of recommendation for both areas are on an upward grade.

Hearing.

In considering these tables, account must be taken of the fact that only the hearing of the "better" ear is given. In many cases of otorrhœa the hearing is very defective in one ear, but if the hearing of the other ear is right then the case is put under Class I.

In the Cupar area there were 70 cases, 7·1 per cent., under Class II., and 13 under Class III., or 1·3 per cent. In Class III. the children were quite deaf to a forced whisper at twenty-five feet away, and only heard when "shouted" at. Such a class of children are evidently quite at a loss in the back benches of an ordinary class-room, and even when "put forward" must find their deafness a considerable "handicap."

Special Cases.

Very often children suspected of being in a verminous condition are "brought forward"; these are stripped and examined in a private room. (In the case of girls, always in the presence of a female teacher or nurse.)

The number of these cases in the two areas was as follows:—
 "Head"—Cupar, 10; St Andrews, 10. "Body"—Cupar, 9; St Andrews, 5.

Such cases are all dealt with promptly, and "followed-up" carefully.

The "Feeding" of School Children.

In the Cupar and St Andrews areas there are many instances where the children walk a long way to school. They cannot go home to dinner; consequently they bring with them a "piece"—this is usually bread and butter or bread and jam. In the colder months much hardship is entailed. In the majority of the country schools a "soup kitchen" is open during the four worst months of winter. Here the children can have a large bowl of hot soup for one halfpenny. There are, unfortunately, some instances where this is not done, and even where it is, the onus falls too often upon the teacher and upon the charity of the surrounding farmers. In some cases also suitable premises for the conduct of such a kitchen do not exist.

I know of only one school where any systematic effort is made to supply "free" dinners to those children who are unable to pay. In Tayport Higher Grade School the feeding of school children, under the able and kindly supervision of Mr Nicol, is well carried out in the gymnasium (which is heated). During the period commencing 9th December, 1912, and ending 28th April, 1913 (16 school weeks), 3161 dinners were supplied, of which 156 were given "free" to poor children; the average daily number of diners was 44. These dinners consisted of two courses, soup and pudding (suet or milk). Mr Nicol assures me that the poorer children showed marked improvement in

nutrition at the conclusion of the course. The cost of these dinners was defrayed by charity. It seems a pity that other country schools should not follow this example and endeavour to supply a dinner of soup and pudding to all the children who are underfed, and especially to those who are too poor to pay. The benefits likely to follow, both physical and psychological, would more than repay such a procedure.

Treatment.

It should also be mentioned that an attempt at the training of very young children (age 3-4½) by means of the "senses," or the so-called "Montessori" system, has been carried out for some time past in the Tayport Infant School with considerable success. As this system is peculiarly suitable for the more backward and feeble-minded infants of older years, it is a pity that a further extension of it could not be given a trial.

Dental Treatment.

During the past year dental treatment has been undertaken at Anstruther and St Andrews.

The School Board of St Andrews carried out the following treatment during the year 1913:—Extractions, 68; Fillings, amalgam 50, cement 2, enamel 7; Scaling, 3; Regulation by Elastic Bands, 1—total, 171.

The "Employment" of School Children out of School Hours.

In nearly every large school a considerable proportion of the older children (from 8 to 14 years) are employed for a varying number of hours (out of school hours) as message boys, &c. So long as the number of hours is strictly limited, and the work not severe, little damage is likely to occur. Where the child is young (8 to 10 years), the number of hours great, or the nature of the work severe, the results are disastrous to the well-being of the child. From the following summary it will be

seen that $3\frac{1}{2}$ hours' work, often of a laborious nature, is added to the school work-day, and this, occurring as it does at a time when the body of the child is growing rapidly, and occurring too often in cases where the children are ill-prepared for work by reason of under-feeding, must have a serious result in the long run. The Employment of Children Act, 1903, confers powers on School Boards to prevent this evil. It would be well if each "Board" would adopt byelaws under the Act, and print and circulate these amongst shopkeepers.

Between the ages of 9 and 14, in the larger schools, the following are the numbers of children employed out of school hours:—

Castlehill, Cupar—56 boys and 20 girls.

St Andrews Burgh—67 boys and 50 girls.

Tayport Higher Grade School—30 boys and 6 girls.

Auchtermuchty—7 boys.

Newburgh Higher Grade—25 boys and 5 girls.

They are mostly employed as message boys or shop assistants. The average number of hours per day worked by each child is three.

On Saturdays they work on an average ten hours.

WEST FIFE AND KINROSS DIVISIONS.

Dr A. F. MACBEAN.

Clothing.

The error most often made in clothing is in over rather than under clothing. Frequently too the clothing is badly distributed over the body. Thus children are seen with an excess of clothing round the neck and over the front of the chest, and too little on other parts of the body.

The wearing of corsets by girls is often condemned, but it is sometimes rather beneficial, as, by increasing thoracic breathing, it causes the apices of the lungs to be filled with air, and so may tend to prevent onset of phthisis, as has been pointed out by others.

Head and Body.

Authority to examine children under Section 122 of the Children Act has not been given by Beath School Board. Only at routine visits, therefore, are children, suspected of being verminous, examined in Beath, and on these occasions, as parents know of visit, the worst offenders are usually absent. The authority is promised in specific cases, but this means that the Headmaster must write to Clerk of School Board, who calls a meeting of Board. The Board then authorise the Chief School Medical Officer to examine specified children. The Chief School Medical Officer authorises the Assistant School Medical Officer in writing to examine these children. The Assistant, on his first free day thereafter, may visit the school and examine the children if they are still in attendance there. This is a cumbrous procedure, and has never actually been carried out in this district. The Headmaster, recognising its

futility, brings the most obvious cases under the notice of the Inspector of the S. P. C. C., but the less obvious cases, who are none the less sources of infection to others, escape.

Throughout the area as a whole there is now a very decided diminution of verminous conditions as compared with four years ago. The standard adopted, however, was a low one, and there is still much room for improvement.

Tonsils.

Many really bad cases have been seen by family doctors, who advised that nothing should be done. The parents, dissatisfied, have taken the child to a medical charity, where operation has been performed. Many such cases have been reported to me by the School Nurses.

Vision.

$\frac{6}{12}$ is under Class III., but unless there are signs of eye strain no recommendation for treatment is made. Some cases of bad vision are irremediable. So that the entries in Class III. exceed the recommendations for treatment.

In Lochgelly area spectacles cost from 4s 6d to 7s 6d. Many of these have been tested at a medical institution, in which case the opticians who supply the spectacles locally deduct the railway fare from the cost. The frames are cheap, but satisfactory. In Dunfermline District the price varies from 10s 6d to 21s, but there "gold" frames are the fashion, unfortunately. Parents who could afford a cheap, strong-framed pair of spectacles, but find "gold" ones beyond their means, provide none at all rather than have the children wear a class of spectacles different from the majority.

Astigmatism were often better left untreated ; the spectacle frames are soon distorted and the lenses twisted, so that eye strain may be increased instead of lessened.

Contagious Disease.

Over 60 cases of ringworm occurred at Mossgreen ; they were treated at school as a convenient centre by the family doctor and the school nurse.

Infectious Disease.

In several of the outbreaks it was obvious that Sunday school and picture houses played a greater part in the spread than day school. A few missed cases of scarlet fever were discovered.

Mental Conditions.

Four children, believed to be mentally defective in Lochgelly, were examined at a special visit. Three of them were found to have physical defects sufficient to account for the mental condition, and treatment was obtained.

Treatment

Is not quite so good as last year, but the records have been closed earlier this year, as the Divisional Report has to be sent in by 31st July. School nurses report that several cases are to be treated during summer holidays when parents can get away. From experience in previous years I am satisfied that a fair proportion of these will be treated.

Rather less following-up, too, by the School Medical Officer has been possible, owing to starting the examination of the extra group of entrant infants. Following-up by School Medical Officer not only increases the number treated, but also obtains better results of treatment.

Most of the school-rooms are too dingy. Light paint would make them much brighter. It has the further merit of showing the dirt.

In Fossoway the pegs in the cloakroom are allotted to the scholars whose names are pasted under.

No sanitary survey has been made. Boards will find sufficient guide as to improvements that should be made in previous annual reports.

CENTRAL DIVISION.

Dr P. PATTISON.

Inspections.

Of the total inspections 2684, 391 were recommended for treatment, and of these 83.9 per cent. received it. This successful result is in large measure due to the untiring and persuasive efforts of the two school nurses, Miss Young and Miss Whieldon, who visited the homes of the notified children.

Miss Young made 618 re-examinations; Miss Whieldon 123 visits to the homes and 28 re-examinations in schools.

A number of children requiring hospital treatment are to be treated during the summer vacation, as this is a more convenient time for the parents to leave home.

147 visits were paid to the schools, and on these occasions most of the children recommended for treatment were re-examined once or oftener.

In addition to these, numbers of children in nearly every school, who have some slight abnormality, are kept under my own supervision, and are re-examined at subsequent visits.

In all considerably over 3000 examinations were made. 194 parents were present at the examinations. This is equivalent to 8 per cent. of the total routines. The infants attracted the majority.

There were 8 refusals to permit inspection.

Four children were placed under the supervision of the Inspector for the Society of Cruelty to Children, and two cases of neglect were reported to the School Board concerned. The condition of all has since been ameliorated.

Phthisis.

No case of phthisis was diagnosed in the division. The disease generally begins at the roots of the lung in children, and may remain latent, but by the time it has reached the apex the child is obviously ill, and does not attend school.

Early phthisis, which can be diagnosed with certainty, is rare in children.

The box beds enclosed by curtains, so common in Fife, must propagate this scourge.

Other Tuberculous Disease.

Abdominal tuberculosis is very frequently due to the ingestion of milk. Until the methods of production and sale of this valuable food are improved by legislation raw milk, with few exceptions, should rank as a poison.

Teeth.

The dental clinic at Colinsburgh, which owed its origin to private generosity, has now lapsed. It was instituted in November, 1911.

Vision.

Infants are not included in the number inspected, as their eyes were not tested. A lower standard of vision was this year accepted. The number recommended for treatment is consequently less. Even if a child could not read at the requisite distance the second smallest set of letters, he was allowed to pass if free from eye strain and headache. By arrangement with the teacher he gets a good position in class with regard to the blackboard and lighting, and he is kept under medical supervision: many improve in process of time. It was only marked cases of defect who were recommended to obtain spectacles, and the great majority of these have now done so.

Glasses should only be prescribed by an expert, otherwise more harm than good may result. Moreover, they require

constant supervision. The lenses are apt to get broken and the frames bent—this is specially harmful in cases of astigmatism.

The lenses themselves require altering when the child becomes older. For physiological reasons, therefore, spectacles should only be prescribed when absolutely necessary. From a social or economic standpoint they may be a disadvantage, as forming a bar to some kinds of employment.

16·6 per cent. boys and 20 per cent. girls had defective vision. The price of spectacles has this year been reduced. The average cost was 6s in the Auchterderran, Ballingry, and Lumphinnans areas, and 6s 3d in the rest of the Central Division.

One School Board supplied two pair of glasses, and two Parish Councils one pair.

If some remarks on the psychology and physiology of education be not trespassing on pedagogic preserves, the following suggest themselves:—

Granted that a class of 50 can not have the same individual attention as one of half that number, is there not a tendency to treat the pupils as 50 component parts of the class machine?

In its crudest form this system is seen, or heard, in or near any school where 50 youthful voices shout in unison for an indefinite period.

This is a harmless example; but is it justifiable to punish those members of a class who retard the progress of the machine by their “stupidity” or “inattention”?

Children are not all cast in the same mould. A child may excel in one subject and be hopelessly dull in another—this is a truism, but not always remembered. Strapping and keeping in are far too prevalent. The former does not hurt physically, owing to constant repetition; but a child has a keen sense of

justice, and resents being punished unjustly. He may become careless and defiant, or morose and despondent, and if of a nervous disposition, his or her health may be injured.

If a child be shut up in class in a more or less vitiated atmosphere, from 1:30 to 3:45, it is small wonder his attention fails. To keep in such a pupil is homeopathy in its most futile and foolish form.

Another cause of brain exhaustion in children is the unnecessarily loud voice employed in teaching. It is prejudicial also to the teaching profession, being a common cause of laryngitis.

If a little more sympathy with human, and especially child, failure were shown, a quieter manner cultivated, and the strap used with more discretion, and, above all, more recreation given, the child would be a better pupil and would turn out a better citizen.

I again suggest that the afternoon session of 2 or $2\frac{1}{4}$ hours be relieved by an interval of 10 minutes, that all windows should be hung and made to open easily, and that a staff room is a necessary part of every school, so that the teachers can retire and allow the rooms to be thoroughly flushed with fresh air.

Ventilation is largely a matter of heating, and will not be satisfactory so long as rooms are inefficiently heated.

KIRKCALDY WITH DYSART DIVISION.

Dr B. S. ALEXANDER and Dr P. PATTISON.

Parents.

262 parents attended, and it is unfortunate that the ones whose presence is most desirable generally keep away. More attention is paid to the physical defects when explained personally than when intimated on the customary notice.

Five parents objected to the examination of their children. As one of these required medical advice, it was reported to the Board. The report from the Board stated that the Department were considering what should be done in such cases.

Phthisis.

Under this heading it may be noted that all children coming from homes where there have been cases of phthisis receive special attention. Dr M'Intosh, Burgh Medical Officer of Health, has notified to us during the year the names of the children who have thus been in contact, and at the next visit to the school these are examined. 36 children have been thus examined during the year, but none were found to have phthisis.

One child attending the East School was in Kirkcaldy Sanatorium suffering from phthisis.

Infectious Disease.

During the outbreak of smallpox last autumn Dr Pattison at the request of the School Board, visited Pathhead School daily for a fortnight and examined all the pupils, with a view to detecting any "missed" cases of smallpox occurring in vaccinated children.

Teeth.

The infants in Dunnikier, Pathhead, Dysart, and Abbotshall Schools were examined: in all about 1000.

Of this number 25 per cent. had really good teeth, and required no treatment at all; about 7·5 per cent. had very bad teeth.

The number of operations performed was 365—extractions, 295; fillings, 64; teeth cleaned, 3; fillings with roots filled, 3.

Many parents seem to object to their children attending the clinic; perhaps in a few years' time they will realise that bad teeth are a most important cause of bad health.

Vision.

The number recommended for treatment is considerably less than last year. This is the result of lowering the standard of visual acuity.

If children are able to read the third smallest test letters, and do not suffer from eye strain or headache, they are not recommended to obtain glasses, but the condition is pointed out to their teacher, who allocates them a good position in class with regard to the blackboard and lighting.

Unless the children are tested by an expert and carefully re-examined from time to time, more harm than good may result.

As is generally found, defective vision is more prevalent among girls than boys: 101, or 11 per cent., being grouped under Class III., while 79, or 8·7 per cent., boys are under the same class.

The modern method of teaching sewing by coloured threads and big stitches should help to lessen this evil, but the school is not altogether to be blamed for children who too often read, write, and sew in badly lighted rooms in their homes.

Routines: Treatment.

The percentage treated is less than last year. This is on account of medical inspection having been continued up to school closure.

Time has not therefore been given to obtain treatment in a number of cases, and such are marked "outstanding."

Treatment.

There are some cases which are outstanding, but these may be accounted for as follows:—Parents refused to have treatment, children left town or school before treatment was obtained, others are to be attended to during the holidays, and these will be re-visited and reported on later.

Nine cases of defective vision received the assistance of the Parish in getting glasses, 10 that of the School Board; 5 were reported to the Board for refusal to have treatment.

The price of glasses ranged from 5s to 14s 6d, the average cost being 8s 5d.

Inspection of Entrants.

The inspection of entrants was begun in April, so that very little time was left for the "follow-up" section of the work. These included children who were enrolled from the 1st September, 1912, and the ages ranged from 4 to 7 years.

Vision and hearing were not tested. 55 parents attended these inspections. This is a larger percentage than for the other routines, showing that the children at this age receive more consideration than when older. It was certainly found that these children were better cared for, cleaner, and tidier than older brothers and sisters.

Cleanliness of Schools.

A few rooms are washed every week—damp sawdust with disinfectant used for daily sweeping.

WEMYSS COMBINED DIVISION.

Dr B. S. ALEXANDER.

Two new schools were added to the Wemyss Division during the year, but this did not add to the work, as the children were taken from the other schools under the Board.

Parents.

Only 90 parents attended the inspections.

It is unfortunate that many of those who ought to attend keep away. Much more satisfaction can be got by explaining the defects found to the parents than by sending the customary note, which may be laid aside and forgotten about.

Eye Disease.

As in last year's report, squint predominates, and then follows blepharitis. Squint should be attended to in its earliest stages, as it is generally associated with defective vision. Two children were found to be blind in one eye, caused by complete opacity of the cornea. Of the cases notified for treatment, 71.5 per cent. were treated, while of those 20 per cent. were cured and 80 per cent. benefited.

Ear Disease.

It is satisfactory to note that of the 12 cases found only one required to be notified of the defect, the others being already under supervision.

Lungs, excluding Phthisis.

The unhygienic conditions of the houses in some way encourage the onset of bronchitis, as also does the over as well

as under clothing of children. Parents too often blame draughts, &c., in school for the onset of colds when the fault lies at their own door.

Nervous Disease.

All cases of chorea are excluded from school till better, as any undue excitement tends to make the child worse. There is also the danger of the other children imitating the choreic movements, much to the discomfort of the child affected.

Phthisis.

It is satisfactory to note that, like last year, no cases of phthisis were found during the routine inspection.

Nutrition.

Soup is provided at some of the schools during the winter months, and cocoa at others. At one school from 80 to 90 scholars take soup daily. This is a great benefit to the children, as they are generally from a distance, and it is impossible for them to get home for something warm, and so very much better than the proverbial "piece."

Adenoids.

Anything which raises dust should be discouraged—marching in a confined space and using dry dusters for cleaning chalk off slates, &c. I have been in a class-room when the children were cleaning off chalk marks, and could scarcely see across the room during the operation. This could be avoided by the use of moist dusters.

Sanitary Survey.

The windows of the schools should be opened for at least one hour before the school opens, so that the class-rooms are well flushed with fresh air. I have gone into a school before it opened and found it almost hermetically sealed, and the atmosphere of a most unwholesome character.

ENDOWED DIVISION.

Dr B. S. ALEXANDER.

Besides the routine groups, 10 children were examined who had applied for nomination as junior students. These were pupils of Bell-Baxter and the Waid Academy. All were found to be in good health, and were recommended for nomination. No special cases were examined at either of the schools.

The greatest number of children were examined under the secondary group (117 secondary, 15 juniors, 13 twelve-year-olds), which forms the most important of a secondary school. During repeat visits to the schools, 7 re-inspections were made of children who had been previously notified about some defect.

The children attending these schools are very healthy.

The next table upon which any comment can be made is that of teeth. Here the star represents children having no decayed teeth. In these schools 18·1 per cent. of the children have sound teeth. This compares very favourably with the elementary schools under my supervision, where only 12·8 per cent. have sound teeth. Children of this class realise the importance of keeping the mouth and gums in a healthy condition by brushing the teeth regularly. Again under I., which represents less than 4 decayed, 44·8 per cent. is found, compared with 38·7 per cent. in the elementary division. Group II. represents 8 or fewer decayed, and Group III. more than 8 decayed. These last two groups are represented by 22 and 15·1 per cent., as compared with 24·5 and 24 per cent. for the elementary division. The greatest number of sound teeth was found in Madras College, 24 per cent., compared with 11 per

cent. for Bell-Baxter, and 17 per cent. for the Waid. Madras College had the biggest percentage last year also. Eleven children were found to have had cavities filled.

The results of treatment in this division are very satisfactory, only one case being still unattended at the time of last inspection. 80 per cent. were treated.

No nurse is engaged for the "follow-up" work of this section—this being done by myself. There is never any difficulty with this section of the work, and very few visits are required—only two being made to the homes during the year.



