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CORPORATION OF GLASGOW

Public Health Department

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EDUCATION HEALTH SERVICE

REPORT

ON THE

**Medical Inspection and Treatment  
of School Children**

FOR THE YEAR ENDED 31st JULY, 1949

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*Ordered by the Committee on Health to be printed*





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## CONTENTS.

	<i>Page</i>
GENERAL INTRODUCTION ... ..	4
1. LIST OF STAFF ... ..	8
2. GENERAL STATISTICS ... ..	9
3. SANITARY CONDITION OF SCHOOLS ... ..	10
4. ORGANISATION AND ADMINISTRATION—	
Inspection ... ..	11
Treatment ... ..	13
Dental Inspection, etc. ... ..	14
School Nursing and arrangements for Following-up ... ..	15
Co-ordination with other Departments ... ..	16
Co-operation with other Agencies ... ..	19
Co-operation with Teachers and Parents ... ..	22
5. THE FINDINGS OF MEDICAL INSPECTION—General Review ... ..	22
6. MEDICAL TREATMENT—General Review ... ..	26
Cuts, Bruises, Sprains, etc. ... ..	28
Diseases of the Ear ... ..	28
Defective Hearing ... ..	30
Diseases of the Eye and Skin ... ..	31
Defective Vision ; Supply of Spectacles ... ..	32
Operations—Ear, Nose and Throat ... ..	35
Orthopaedic Treatment ... ..	36
General Diseases ; Medicines ; Artificial Light Treatment ... ..	39
Cardiac Clinics ... ..	40
7. DENTAL INSPECTION AND TREATMENT ... ..	41
8. SPECIAL SCHOOLS, CLASSES AND RESIDENTIAL SCHOOLS ... ..	42
9. PHYSICAL EDUCATION AND PERSONAL HYGIENE ... ..	47
10. FEEDING AND CLOTHING OF CHILDREN ; MILK IN SCHOOLS ... ..	48

### STATISTICAL AND OTHER APPENDICES.

TABLE I—Total numbers of children examined ... ..	51
APPENDIX Ia—Notifications to parents ... ..	53
APPENDIX Ib—Age distribution of children ... ..	54
TABLE II—Numbers and percentages of children suffering from defects	56
APPENDIX IIa—Systematic examinations—additional information ... ..	62
APPENDIX IIb—Vision and Hearing of " 1941 " children ... ..	64
APPENDIX IIc—Average measurements of children ... ..	65
TABLE III—Classification according to remediability of major defects	68
APPENDIX IIIa—Inspection of special cases ... ..	70
APPENDIX IIIb—Other special inspections (leaving interviews, holiday and harvesting camps, cleanliness inspections) ... ..	71
APPENDIX IIIc—Cleanliness supervision at selected schools ... ..	73
TABLE IV—Exceptional children ... ..	74
TABLE V—Dental inspection and treatment ... ..	76
APPENDIX VI—Summary of inspection and treatment statistics ... ..	79
APPENDIX VII—Nursery Schools and Day Nurseries (results of inspection) ... ..	82
APPENDIX VIII—Mass Miniature Radiography ... ..	84
APPENDIX IX—Medical supervision of Remand Home ... ..	85
APPENDIX X—Diphtheria Immunisation Campaign ... ..	86

## GENERAL INTRODUCTION.

This REPORT is the fortieth since the institution of medical inspection in Glasgow in 1909, the nineteenth since the transfer to the Public Health Department in 1930, and the eleventh since the form of report desired by the Department of Health for Scotland was re-cast in 1939. As it also covers the first complete school session following the introduction of the National Health Service, an examination of the present position is relevant.

D.H.S. Circular 1131/1948 restates the responsibilities of an education authority for the health of school children in each area. The following is a summarised version of the contents of the circular.

(1) The duty of an education authority under the Education (Scotland) Act, 1946 to provide for *medical inspection and supervision* of pupils was unaffected by the National Health Service. Similarly, the duties bearing on the ascertainment of mentally and physically handicapped children remained with the authority.

(2) With regard to *treatment in general*, the obligation of the education authority to make arrangements for securing comprehensive free treatment under the 1946 Act could be discharged to some extent by making suitable arrangements with the National Health Service. It was envisaged, however, that some of the treatment facilities afforded pupils by an authority would be retained, particularly minor ailment clinics.

(3) *Hospital and specialist treatment*, including the provision of artificial limbs and appliances, was the actual responsibility of the Regional Hospital Board and the obligations of the education authority were normally discharged when it had arranged with the Hospital Board to ensure access to appropriate facilities. Specialists would undertake work for the authority by arrangement between the Board and the authority, and would if necessary visit clinics of the education authority.

(4) *Ophthalmic treatment*, including the supply of spectacles, was also the responsibility of the Hospital Board but the education authority was required to consult the Board as to the extent of the facilities provided by the latter and to make any necessary additional arrangements for detailed sight-testing and the supply of spectacles.

(5) *Dental treatment*, except for specialist work provided by the hospital organisation, was to be maintained and indeed developed by education authorities for some considerable time to come. It was emphasized that school children should be able to obtain such treatment as they required.

*Dental inspection* was of course a part of medical inspection generally and would remain a permanent feature of the school health service. Local authorities were also held responsible for providing dental treatment for expectant and nursing mothers and for pre-school children.

(6) *Minor ailment clinics* were to be maintained by the education authority and where necessary extended on existing lines as no change was anticipated in the system for many years.

On the whole the transition caused little interruption of Education Health Service work. The same specialists were made available and the same hospitals co-operated as formerly in connection with x-ray, ear, nose and throat operations, and other forms of institutional treatment; in fact, an additional hospital was able to deal with some of the cases awaiting treatment for ear, nose and throat conditions. Unfortunately, however, the ophthalmic service was considerably disrupted; the session was almost at an end before a new scheme was in sufficient working order to cope adequately with the numbers of children requiring spectacles.

Arrangements were made with Executive Councils for the appointment of local medical and dental practitioners to visit residential schools in emergency and for the services of a dentist for Mossbank Approved School. The Corporation obtained the services of these and of the specialists already mentioned free of cost and the Western Regional Hospital Board agreed to pay the Corporation a fixed sum for the work in connection with the ophthalmic services.

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The Report is slightly more voluminous than usual for several reasons. As a result of the re-orientation of public health administration much of the information relating to co-ordination and co-operation with other departments and agencies (page 16) had become obsolete and it was necessary to bring these particular sections up-to-date. Other additions to the usual features are: (a) details of repairs and improvements to schools, from data supplied by the Education Department (Property Section) (page 10); (b) an account of the ophthalmic service (page 32); (c) a special section for the diphtheria immunisation campaign (page 86); (d) fuller information



regarding examination of nursery school pupils (page 82); and complete details of the new dental scheme (page 14).

A total of 49,466 pupils attending "ordinary" schools were systematically examined during the school session, a figure which was the highest since 1942. With the exception of uncleanliness, the percentage of children with any of the listed ailments was the smallest for many years, and the actual defects were observed to be of a more remediable type than of late. The percentage of those without any defect was the best yet recorded.

Average physical measurements again showed improvement, the boys reaching a new high level in each group and the girls, although not so consistent, showing a deterioration in only one instance—the height of thirteen-year-old transferred pupils. The improvement over a period of years in the average heights and weights of Glasgow school children will be clearly seen from the following table which shows the amount of increase since 1932 for boys and girls in the three age-groups.

	Increase at 1949 compared with 1932.	
	Boys.	Girls.
<i>Pupils of 5 years</i>	1.26 ins., 2.65 lbs.	1.28 ins., 2.61 lbs.
<i>Pupils of 9 years</i>	1.64 ins., 4.29 lbs.	1.27 ins., 4.00 lbs.
<i>Pupils of 13 years</i>	2.09 ins., 7.55 lbs.	1.55 ins., 7.55 lbs.

Attendances for treatment of skin disease and "general" cases were much reduced but cuts and bruises, eye and ear cases, although fewer than in 1948, were more numerous than in any other year since 1939. Conversely, more orthopaedic cases were treated and more ear, nose and throat operations were performed as a result of increased facilities.

The engagement of additional Dental Officers, whole-time and part-time, during the year may be considered satisfactory in view of the difficulties of recruitment and retention of dental staffs experienced

by other local authorities during the same period. Under the new scheme of dental inspection and treatment operating from the beginning of the school session, a smaller number of schools were visited by dental Officers for the purpose of routine inspection. Fewer children than in 1948 were actually treated, but a larger proportion (64.1 per cent.) of these were given complete treatment.

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It only remains for me to acknowledge again the unfailing co-operation freely given throughout the session by the Director of Education and his administrative staff, and by officials of the other sections of his department, including the Head Masters and school teachers. The assistance of the staff of the Health and Welfare Department should also be mentioned, and of the Western Regional Hospital Board and the National Health Service Executive Council for the City of Glasgow.

My thanks are especially due to Mr. James A. Stewart, Chief Clerk, and to the members of his staff for the arrangement and detailed examination of the statistical matter included within these pages.

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*Senior Medical Officer.*

155 BATH STREET,  
GLASGOW, C.2.  
22nd February, 1950.

## 1.—LIST OF STAFF.

## (a) WHOLE-TIME STAFF.

1 Senior Medical Officer ; 2 Senior Assistant Medical Officers (1 for Child Guidance Work) ; 19 School Medical Officers <sup>(1)</sup> ; 1 Senior Dental Officer ; 13 School Dental Officers <sup>(2)</sup> ; 1 Supervisor of Nurses ; 74 Nurses (including 2 temporary nurses at scabies baths centres and 7 employed as cleanliness inspectresses) <sup>(3)</sup> ; 34 Clerks ; 15 Dental Attendants.

(1) *Dr. A. Anderson died on 22-12-48. Dr. James T. G. Ewan was appointed Senior Medical Officer on 4-3-49. Dr. Catriona Sinclair was appointed Senior Assistant Medical Officer on 4-3-49. Dr. George A. Mills was appointed temporary Assistant Medical Officer on 1-12-48 and Dr. George T. Donald Assistant Medical Officer on 6-12-48.*

(2) *Miss Mary S. S. Muirie resigned on 28-7-49. Mrs. Lily T. Milnes was appointed Assistant Dental Officer on 13-12-48 and Mr. William A. W. Howe temporary Assistant Dental Officer on 2-5-49.*

(3) *In the course of the session 7 nurses (including 2 temporary nurses) resigned and 9 nurses (including 1 temporary) were appointed.*

## (b) PART-TIME STAFF.

4 Dentists <sup>(1)</sup> ; 8 Consultants <sup>(2)</sup>.

(1) *Mrs. Margaret Hart and Dr. Harry Michaelson were appointed on 31-1-49 and 11-4-49 respectively.*

(2) *Engaged on school health work by arrangement with the Western Regional Hospital Board (4 Aurists, 1 Dermatologist, 1 Oculist, 1 Heart Specialist, 1 Orthopaedic Surgeon).*

Separate arrangements were made with the local Executive Councils for local doctors and dentists to undertake emergency duties at the residential schools and also at Mossbank Approved School.

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Of the total of 9,997 periods (half-days) worked by the Medical Officers, 8,736 were devoted to the normal work of Medical Inspection and Treatment and 1,261 periods were devoted to other work as follows :—Junior Club and School Camp examinations, 273 ; Holidays Abroad, 22 ; Harvesters' examinations, 148 ; Diphtheria Immunisation, 478 ; relief duties in other sections of the Health Department, 99 ; and 241 periods at General Inspection of Schools.

Of the total of 6,665 working periods, the Dental Officers devoted 6,453 periods to the normal work of Dental Inspection and Treatment, and 212 periods to relief duties at hospitals and in the Ante-natal section.

Included in the working periods shown above is the time spent on administrative duties by the Senior Medical Officer, the Senior Assistant Medical Officer and the Senior Dental Officer, as well as the half-days allocated to staff meetings.

## 2.—GENERAL STATISTICS.

Population of the area (as estimated by the Public Health Department) ... ..	1,110,000
Number of Schools—	
(a) Primary ... ..	154
(b) Junior Secondary ... ..	49
(c) Senior Secondary ... ..	28
(d) Schools for Handicapped Children ... ..	22
(e) Approved Schools ... ..	1
(f) Residential Schools ... ..	10
(g) Nursery Schools ... ..	36
(h) Hospital Schools ... ..	4
(i) Agricultural Schools ... ..	1
(j) Gardening Schools ... ..	1
Total Schools under Education Authority ... ..	306
(k) Schools in receipt of grant and under medical inspection ... ..	4
	310
Average number of children on register ...	174,328
Average number of children in attendance	154,306 (88·5%)

### 3.—SANITARY CONDITION OF SCHOOLS.

During the session, School Medical Officers made 235 visits to schools for the purpose of general inspection of the premises. They discussed with Head Teachers and class teachers the general well-being of the pupils and gave advice in particular cases. Of 182 schools inspected, 19 were found to be satisfactory, and in the remainder some of the defects observed were as shown in tabular form below. These matters were reported to the appropriate section of the Education Department for consideration and, if practicable, necessary action.

Unsatisfactory heating	...	...	...	...	1
Unsatisfactory lighting	...	...	...	...	7
Unsatisfactory ventilation	...	...	...	...	1
Washing facilities—inadequate	...	...	...	...	22
no hot water	...	...	...	...	13
Drinking fountains—broken or inadequate	...	...	...	...	9
Lavatories—inadequate	...	...	...	...	29
bad	...	...	...	...	7
in need of repair	...	...	...	...	10
Playgrounds—inadequate	...	...	...	...	6
dangerous	...	...	...	...	6
unsatisfactory surfacing	...	...	...	...	15
unsheltered	...	...	...	...	10
Air-raid shelters still to be removed	...	...	...	...	10
Classroom desks—in need of repair	...	...	...	...	7
Cloakrooms—none	...	...	...	...	20
inadequate	...	...	...	...	13
Staffrooms—inadequate	...	...	...	...	16
Medical Inspection room—none	...	...	...	...	3
unsatisfactory	...	...	...	...	29
Requiring re-painting	...	...	...	...	5

The following information concerning some of the work wholly completed during the year which ended on 31st July, 1949 has been supplied by the Property Section of the Education Department.

*Heating.* Boilers, new heaters, installations, additions and repairs.

*Lighting and ventilation.* Fluorescent and electrical installations, air extractors and fume chambers, alterations to windows and roof lights.

*Washing facilities.* Bathrooms, wash-hand basins, sinks and tubs, foot-baths, hot water to pupils' basins, staff rooms, etc., re-erection of spray bath facilities.

*Water supply.* Drinking fountains, installation of water supplies, mains, storage tanks, purification plant, re-lining storage cisterns.

*Lavatories.* Replacement of trough type by modern water closets, renewals and repairs to latrines.

(It is hoped that it will be possible to replace all trough type latrines in the near future.)

*Playgrounds.* Provision of and repairs to playgrounds, footpaths and playsheds, demolition of A.R.P. shelters.

*New accommodation.* Dining halls, cloak rooms, class and staff rooms.

*Floors and stairs.* Repairs to flooring of classrooms and stairs, sanding of gymnasium and hall floors, linoleum for housewifery sections and for gymnasia.

*Roof, walls and ceilings.* Repairs to roofs, chimneys, gutters, walls and ceilings.

In addition to the foregoing, an amount of refurnishing (including the supply of new desks) was proceeded with during the period, and there were some extensions and considerable maintenance repairs to property. Extensive alterations and additions were made to several Residential Schools, Nursery Schools were supplied with linoleum in many instances, and various other improvements were also effected at nurseries and clinics.

Additional schools have been planned and sites for them reserved in the new housing areas; and for expedience temporary buildings have been erected to ease the pressure on existing accommodation.

#### 4.—ORGANISATION AND ADMINISTRATION.

##### A. SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT.

The staff who operated the scheme is detailed on page 8. School Medical Officers and Dental Officers were each allocated to a group of schools and clinics in a specific area and were responsible, as far as possible, for the medical inspection and treatment in their respective areas. Part-time specialists allocated by the Hospital Board operated from central clinics. Local medical officers and dentists, by arrange-

ment with the various Executive Councils, undertook emergency treatment for the children in residential and approved schools. Arrangements in connection with nursery schools will be found on page 82.

#### INSPECTION.

The scheme of inspection in Session 1948-49 was carried out mainly on the lines suggested by the Department of Health for Scotland and was as shown below. The numbers inspected will be found in the body of the Report.

#### I. SYSTEMATIC ("ROUTINE") Medical Inspection.

- (a) Children in the Infant Department who had not hitherto been medically examined ("Entrants—Infants").
- (b) Children born in 1935 ("Leavers").
- (c) Children born in 1939 ("Intermediates").
- (d) Children born in 1932 ("Secondary pupils").
- (e) Children born in 1941 (Vision and hearing only).

Groups (a), (b), (c) and (d) were presented in the order stated above. On the whole, the inspection of each routine age-group was completed throughout the City before proceeding to the next group. Examination of the children in group (e) was undertaken by Nurses, who made their own arrangements with Head Teachers.

#### II. NON-ROUTINE Inspection.

- (a) Pupils outwith the groups already named were specially presented at any inspection on account of disease or defect observed by the Teacher.
- (b) Pupils approaching "fixed dates" for leaving school were presented for "Leaving Interviews."

#### III. Inspection of ABNORMALS.

Pupils found at previous inspection to be suffering from disease or defect were presented for re-examination at intervals determined by the School Medical Officers.

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Routine Medical Inspection was also provided in schools and classes for physically and mentally handicapped children. The groups examined were "entrants" and other children not previously examined, "intermediates" and "leavers" (approaching 15 or 16 years of age).

In addition, *physically handicapped* pupils were specially examined (a) in June and December with a view to fitness for ordinary school, (b) on approaching 12 years of age as to fitness for secondary education, and (c) at intervals before leaving with regard to fitness to enter employment. *Mentally handicapped* pupils were examined (a) biennially as to fitness to attend ordinary school and (b) at intervals as required and before leaving by the visiting Psychiatrist.

Arrangements were also made throughout the Session for Cleanliness and Dental Inspection of children, General Inspection of Schools, Diphtheria Immunisation, and Mass Radiography of pupils (generally of 13 years of age and over) whenever the unit was available.

#### TREATMENT.

The list of the clinics and the medical services provided are shown in the following table :—

CLINIC	Skin, Eye, Ear and other minor diseases	Refraction	Dental	X-Ray (Skin treatment)	Ultra-violet	Orthopaedic	Scabies Baths
18 Plean Street, W.4. ... ..	1	1	1	—	—	—	—
4 Sandy Road, W.1 ... ..	1	1	1	—	—	—	—
130 William Street, C.3 ... ..	1	1	1	1	1	—	—
60 Avenuepark Street, N.W. ... ..	1	1	1	—	—	—	—
Henderson Street School, N.W. ... ..	1	—	—	—	—	—	—
Albany School, 44 Ashley Street, C.3 ... ..	—	—	—	—	—	1	—
Dobbie's Loan School, C.4 ... ..	1	—	—	—	—	—	—
91 Denmark Street, N. ... ..	1	1	1	—	—	—	—
Hyde Park School, 70 Mollinsburn Street, N. ... ..	1	1	1	—	—	—	—
15 Glenbarr Street, N. ... ..	1	1	2	—	1	1	1
155 Crail Street, E.1 ... ..	1	1	2	—	—	—	—
Calton School, 18 Dornoch Street, S.E. ... ..	1	1	1	—	—	—	—
10 Redan Street, S.E. ... ..	—	—	1	—	—	—	—
Rumford Street School, S.E. ... ..	1	1	—	—	—	—	—
Calder Street School, S.2 ... ..	—	—	1	—	—	—	—
26 Florence Street, C.5. ... ..	1	1	1	—	1	1	1
20 Harriet Street, S.3 ... ..	1	1	1	—	—	—	—
29 Govan Road, S.W.1 ... ..	1	1	1	—	—	—	—
Broomloan Road School, S.W.1 ... ..	1	—	—	—	—	—	—
Fairfield School, Fairfield Street, S.W.1 ... ..	—	—	1	—	—	—	—

*William Street Scabies Clinic discontinued, 1-9-48.*

*Eastpark Dental Clinic transferred to Avenuepark Street, 7-9-48.*

*Wellshot Dental Clinic transferred to Crail Street, where a second surgery was opened, 7-5-49.*

*Heather Street Scabies Clinic discontinued and closed 1-9-48.*

*Glenbarr Street second Dental Surgery opened, 1-5-49.*



Additional medical facilities were available for school children in hospitals administered by the Western Regional Hospital Board. Arrangements for tonsils and adenoids operations were made with the Western District, Stobhill, Southern General and Mearnskirk Hospitals. Various hospitals provided facilities for x-ray examinations and for operative and other treatment of children referred from the school clinics for ear disease. A specialist from Stobhill Hospital attended several school clinics to give advice on heart cases, and facilities for diagnosis and treatment were made available at the hospital. The Orthopaedic Consultant from Mearnskirk Hospital visited the three orthopaedic clinics to give advice and undertook the operative treatment of a number of cases in the hospital.

All treatment at the clinics was provided free of charge, an application signed by the parent being necessary in all cases.

#### B. SYSTEM AND EXTENT OF DENTAL INSPECTION AND TREATMENT.

From the beginning of the session, a new system of dental inspection and treatment was put into operation, incorporating a modification of the comprehensive scheme which the Secretary of State has from time to time urged local authorities to make their aim. The scheme adopted here was briefly as follows :—

##### (1) *Routine Dental Inspection and Treatment.*

(a) Children in a small number of selected schools were systematically examined and those with dental defect were offered complete treatment at a school clinic. Only the 5, 6 and 7-year-old age groups were dealt with at first, but from January, 1949, all children, irrespective of age, in these particular schools were included in the scheme. The same children will be examined in subsequent years. Forenoons at the dental clinics were devoted entirely to the treatment of this class of patient.

(b) Pupils in all other schools were allocated to the afternoon sessions at the clinics.

##### (2) *Emergency Dental Treatment.*

As an experiment, a special emergency clinic was opened in May, 1949, and was held every afternoon at Glenbarr Street Clinic for the purpose of treating "toothache" cases without previous appointment and so relieving the pressure on the ordinary clinics.

(3) *Orthodontic Treatment.*

(a) The orthodontic unit which was opened in August, 1947, was able to undertake more work.

(b) By arrangement, some of the school children in need of orthodontic treatment were summoned to attend the Glasgow Dental Hospital. This scheme commenced on 1st November, 1948.

(4) *X-Ray Unit.*

An X-Ray Unit was established in April, 1949, to make available to Dental Officers an immediate radiographic diagnosis.

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Details of the year's work, including extracts from the Report of the Senior Dental Officer, are given on pages 41 and 76, and the staff is shown on page 8.

### C. *SCHOOL NURSING AND ARRANGEMENTS FOR FOLLOWING UP.*

The staff of school nurses and dental attendants is detailed on page 8. They assist the medical and dental officers at inspection in the schools and also with the treatment at the clinics under the direction of the school medical officers, dental officers and consultants. The nurses visit the homes of the children in order to obtain the attendance of children at the clinics. Otherwise the following up is largely a matter of postal communication from the central office supported by visitation by nurses, attendance officers, and by the special officers of the School Welfare section in difficult cases.

In 15 schools for physically and mentally handicapped children, a nurse is in attendance mainly for the treatment and care of the physically handicapped children, thus obviating the need for these children to attend school clinics.

A staff of nurses is employed partly on the cleanliness inspection of children in schools, and partly on the testing of visual acuity and hearing of children aged approximately 7 years.

The "nursing" staff, including supervisor, temporary nurses (including those at scabies bath centres and cleanliness inspectresses) and dental attendants, devoted 40,072 working periods (half-day) to the work of medical inspection and treatment of children (including home visiting), 443 periods to examinations in connection with junior

club and school camps and harvesting, and 478 periods to diphtheria immunisation—total periods, 40,993. Home and other visits numbered 1,646, and nurse inspectresses from the Sanitary Divisions also visited the homes in connection with cases of uncleanliness discovered in the schools.

D. *CO-ORDINATION WITH THE PUBLIC HEALTH SERVICE AND WITH OTHER DEPARTMENTS OF THE AUTHORITY WHICH RENDER SERVICES TO CHILDREN.*

HEALTH AND WELFARE DEPARTMENT.

Information regarding cases of *Infectious Disease* and contacts is intimated to the Education Health Service by the Divisional organisations. Particulars of children excluded from school on account of infectious diseases and those "cleared" are forwarded to the appropriate sections of the Education Department.

Names of children who have been in *contact with cases of Pulmonary Tuberculosis* in their homes are received from the Tuberculosis Sections and these children are summoned to school clinics for observation, supervision and any necessary treatment. When any unsatisfactory symptoms arise, such children are referred back to the District Tuberculosis Officer.

Several *clinics are used jointly* by the Child Welfare and Education Health sections and co-ordination is facilitated by having different branches of the Health Service in the same building. *Pre-school children*, including those from Day Nurseries, are frequently referred by the Child Welfare Medical Officers to the various school clinics for advice and treatment.

*Nurse Inspectresses* visit certain schools for the purpose of inspecting children regarding cleanliness; in many cases they also visit the homes.

The *Central Clinic for the Blind* is available for children and adults alike, and blind school children are referred there for certification under the Blind Persons Act, 1920.

A number of standing clinics for *Diphtheria Immunisation* under the auspices of the Child Welfare section are available for children of school age and under. Assistance is given by members of the Education Health Service staff weekly. (See Appendix X, page 86 for details of the annual campaign.)

Co-operation is maintained with the *Mental Services Department* in the ascertainment and certification of mental defectives. For this purpose, members of the Education Health Service medical staff attend at 266 George Street on every Saturday throughout the year and give extra sessions during the summer vacation. In addition some Court cases are examined and visits for investigation of mental defect in children and adults made to the homes of those unable to travel to a centre, and also to prisons, hostels and institutions. The approximate numbers examined during the session were—

Cases seen at Welfare Department office	220
Attendances at Sheriff Court ... ..	10
Home, etc., Visits ... ..	250

The Senior Assistant Medical Officers of the Education Health Service give lectures to nurses studying for the *Health Visitor's Certificate*, and the students visit schools and school clinics.

*Dental treatment* is available at special clinics administered by the Education Health Service for women and for children under school age referred by the Child Welfare Medical Officers.

#### CHILDREN'S DEPARTMENT.

Since the establishment of the Children's Department in August, 1948, close co-operation has been maintained. At the request of the Children's Officer some 20 children under his supervision have been examined regarding their mental condition and appropriate action advised.

#### EDUCATION DEPARTMENT.

School Medical Officers visit the *Nursery Schools* periodically for the purpose of Routine Medical Inspection of the children. School clinics are available for treatment of any children with defects. (See Appendix VII, page 82 for full details of the work done during the year.)

Arrangements are made for the examination of children proceeding to *Residential Schools* and these schools are visited in order to assess fitness for return to schools in Glasgow.

Children are examined twice before proceeding to *Holiday and Residential Camps*; details for the year will be found on page 71. During the summer of 1949, the Senior Medical Officer and the Senior Assistant Medical Officer visited several of the camps and reported on the hygiene and other living conditions. Older boys proceeding to *Moray Sea School* were also examined before departure.

Children volunteering for *potato harvesting* are examined twice before proceeding to camps ; details of inspections are given on page 71. The Senior Medical Officer visited most of these camps, in company with Education Committee members and Education Department officials.

Arrangements have been made to examine all applicants for positions in the *School Meals Kitchens* with regard to their fitness to undertake this employment, and it is hoped to extend this scheme in the near future to include all employees in this service. Prior to the medical examination by the School Medical Officers, x-ray reports will be obtained from the Mass Radiography Unit.

Other *adult employees* of the Education Department are frequently referred to the Education Health Service for medical examination and advice as to their fitness to resume their occupation.

*Special Officers of the School Attendance and School Welfare* sections investigate cases of neglect in connection with all the Minor Disease clinics, refraction and provision of spectacles, and report back to the Education Health Service.

Children who have been excluded from school for some time and children on the *Suspense Roll* are frequently examined at the request of the School Attendance Department, and private medical practitioners are informed of the special facilities available under the Education Health Service for treatment of long-standing defects.

*Other special examinations* made by the School Medical Officers are—children applying for Employment Licences, persistent truants appearing before the School Management Committees, and certain Juvenile Court cases. The supervision of the health of the inmates of the Remand Home is undertaken by the School Medical Officers, entailing daily visitation (see page 85).

Children reported as *Mentally or Physically Handicapped* are examined by the School Medical Officers before admission to and discharge from the special schools. School Medical Officers report on the suitability for occupational training of ineducable children. Pupils recommended for Home Tuition are examined by the School Medical Officers before inclusion in the scheme and at intervals thereafter. During a week in the month of June, a doctor and a nurse were in attendance each day at the Entertainment to Handicapped Children at Loch Lomond (Balloch Park). (See pages 44 and 51 for details of the various examinations.)

The Senior Medical Officer gives lectures on *Orthopaedics* to Physical Training instructors at Jordanhill Training College and practical training is given at both Ashley Street and Florence Street clinics. Physiotherapists on the staff of the Education Department are employed at the Orthopaedic Clinics for the treatment of children referred by the School Medical Officers and by the Orthopaedic Surgeon.

*Students* attending the Pre-nursing College and Nursery Nurse students were medically examined during the session. This service will be extended to include students in Pre-vocational Courses for commerce, building and engineering next session. The Mass Radiography Unit co-operates here also.

#### E. CO-OPERATION WITH OTHER OUTSIDE AGENCIES.

##### DEPARTMENT OF HEALTH FOR SCOTLAND.

From time to time requests are made for information, particularly in connection with the various sub-committees of the Department. In 1948 details for a report on Monocular Blindness among school children were collected by the Education Health Service. (See Report for 1948, page 74.)

##### UNIVERSITY OF GLASGOW.

Throughout the year the Education Health Service co-operated in the arrangement of the curriculum for the students in classes for the *Diploma in Public Health*. During the session, 20 students visited various schools and clinics.

The 18 students who took the *Post-Graduate Course in Mental Deficiency for Medical Officers* gained their practical experience in the child guidance clinics, special schools and occupational centres. Four lecture-demonstrations were given, a visit organised to a special school and an occupational centre, and practice in intelligence testing arranged.

##### WESTERN REGIONAL HOSPITAL BOARD.

Specialists are allocated by the Board to certain school clinics, notably for cardiac, orthopaedic, ear, nose and throat, skin and eye cases. These consultants, who were formerly remunerated by the Corporation, undertook the duties detailed below.

(1) A *Cardiac Specialist* from Stobhill Hospital attends certain clinics to which are referred for advice all children suffering from heart complaints. The children are kept under supervision and are admitted

to hospital if necessary, and by arrangement with the Physical Training section of the Education Department they are graded for physical exercises. (See page 40.)

(2) An *Orthopaedic Surgeon* from Mearnskirk Hospital pays regular visits to Education Health Service clinics to advise on the treatment of cases referred by the School Medical Officers. Some of the cases are admitted to Mearnskirk, whilst others are given treatment by physiotherapists at orthopaedic and child guidance clinics and at special schools. (See page 36.)

(3) *Aurists* regularly examine cases referred by the School Medical Officers for advice. Most of these are recommended for hospital treatment including the removal of tonsils and adenoids. In addition, an aurist classifies children with hearing defects and assesses their ability to take advantage of the educational facilities available, including schools for the deaf and classes for the semi-deaf. Children in need of *hearing aids* are referred to the Ear, Nose and Throat Hospital on recommendation by the specialists. (See page 29.)

(4) A *Dermatologist* attends weekly at a central clinic, principally for the x-ray treatment of ringworm. School Medical Officers also consult him in connection with special skin conditions. (See page 32.)

(5) An *Ophthalmologist* is available to advise on any difficult cases in connection with the School Eye Service which was instituted during the period under review. Details of the scheme are given on page 32.

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*Artificial limbs, special boots, and other appliances* (which were previously supplied through Corporation contractors) are now, since July, 1948, supplied to school children through the hospitals.

The *Mass Radiography Unit*, transferred to the hospital organisation in July, 1948, undertakes the examination of school children at intervals. (See page 84.)

The *Infectious Diseases Hospitals* refer school children to clinics for examination and after-care. During the year, 185 pupils were reported and of these, 29 failed to appear or intimated that they were receiving private treatment, 13 were found to be requiring no further attention and 24 were dealt with at the "general" school clinics. The remaining 119 were referred for special forms of treatment, including courses of artificial light therapy in 107 cases.

*Almoners of the various Glasgow institutions* frequently forward recommendations for the admission of children to holiday homes. *Biggart Memorial Home* is now under the administration of the Board of Management for Southern Ayrshire Hospitals, and about 40 beds are allocated for Glasgow children.

#### NATIONAL HEALTH SERVICE EXECUTIVE COUNCIL.

As mentioned on page 33, the list of *prescriptions for the supply of spectacles* ordered from the contractors is sent to the Executive Council to obviate possible duplication of supply.

*Prescriptions for special medicines* were formerly dispensed at the Outdoor Medical Service clinics of the Public Health Department. Since the discontinuance of these clinics in July, 1948, the prescriptions are dispensed by local chemists and subsequently priced by the Clerk to the Drug Committee of the Executive Council. The cost of medicines is still chargeable to the Corporation, under the Education (Scotland) Act, 1946.

#### VOLUNTARY ORGANISATIONS.

The *Scottish Council for the Care of Spastics* opened a residential school in Edinburgh for the treatment of spastic cases during the year. Glasgow was allocated six beds and up to the end of the session four children had been admitted. (See page 46.)

Arrangements were made with the *Glasgow Dental Hospital* for the attendance there of a number of children requiring orthodontic treatment. (See page 42 for further information.)

Other organisations for which children were medically examined were (1) the *British Sailors' Society*, for whom the children of merchant seamen were examined before they went to the society's residential home, and (2) the *Invalid Children's Aid Association* for whom pupils going to the Children's Village, Humbie were examined.

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An increasing number of private medical practitioners make use of the Education Health Service for patients requiring holidays, artificial light treatment, x-ray treatment of ringworm and other special treatment.

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The Education Health Service sends representatives to the following voluntary organisations :—

- National Special Schools Union, West of Scotland Branch.
- Scottish Association for Mental Hygiene.
- Scottish Council for Research in Education.
- Invalid Children's Aid Association.
- Continuing Committee of the Conference on Health Education in Schools.

*F. CO-OPERATION WITH TEACHERS AND PARENTS,  
WITH SPECIAL REFERENCE TO THE ATTENDANCE  
OF PARENTS AT INSPECTION.*

As in former years the co-operation of the teaching staff during the session facilitated not only the work of routine medical inspection but the carrying out of the various other schemes of which details are given elsewhere in this Report. The help afforded in the Diphtheria Immunisation campaign merits special mention (see page 86).

For some years past the attendance of parents at the systematic inspection of their children has been gradually declining. In the period under review, the percentage of attendance by parents fell to 61·8, the lowest ever recorded in these Reports. This is a situation which is to be deplored because the presence of a responsible adult, especially where younger children are involved, is of value to all concerned. In an informal atmosphere, the School Medical Officer may obtain at first hand the medical history of the child, and is enabled to discuss with the parent any matters affecting the health and well-being of the child.

Many lectures bearing on the health of school children were given by School Medical Officers during the session to parents', teachers' and other organisations.

**5.—THE FINDINGS OF MEDICAL INSPECTION.**

*GENERAL REVIEW.*

(Detailed statistics on pages 51 to 69).

In Table I, pages 51 to 52, details of the numbers of children examined during the academic year which ended on 31st July, 1949 are shown under the various categories, and compared with the records of the years 1948 and 1947 respectively.

During the 1949 session, 49,466 pupils attending "ordinary" schools were systematically examined, and this number—the highest noted in these Reports since 1938 with the exception of the year 1942—included the medical statistics of 1,244 pupils from the Boys' High, Allan Glen's, Hutchesons' Boys' and Girls', Jordanhill College and St. Aloysius' College schools, details which previously were incomplete or unavailable. In the same period, 1,439 children were examined at schools for the handicapped, a total not exceeded in any year since 1939.

Other systematic inspections were (1) testing of vision and hearing of children born in 1941 and (2) routine medical examination of nursery school pupils. Particulars of both will be found in Appendices I Ib and VII on pages 64 and 82.

A considerable increase compared with 1948 in the total of Other Examinations was mainly due to cleanliness inspections by nurses (20,000 increase) and to the larger numbers of children inspected by School Medical Officers in connection with camps, holidays abroad and residential school admissions. "Leaving Interviews" and examination of "abnormals" were also more numerous but fewer "non-routines" and 7-year-olds were seen.

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Appendix Ia, page 53, gives the numbers and percentages of pupils in the various age-groups who were notified to parents as requiring treatment for defects observed at the routine medical inspection. Further information as regards notification to parents is noted in Appendix IIa, page 62. The age distribution of children at the date of routine inspection is shown in Appendix Ib, page 54.

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Set out in Table II, page 56, are the numbers and percentages of children who at routine medical inspection were observed to be suffering from specific defects. A further deterioration in cleanliness extending over the past two years was noted by School Medical Officers, the 1949 percentages showing a slight worsening of the position. In this connection, similar results (page 72) were obtained by Nurse Inspectresses but the records of the Cleanliness Inspectresses, who visit schools in the less salubrious areas, showed a fall from the 1948 level but not below that of 1947.

With regard to the other listed ailments, however, a remarkable improvement was noted, the lowest percentage for many years being recorded in each instance. The following summary of individual defects brings out the main features.

*Unsatisfactory clothing and footgear* was discovered less frequently than for some years and the percentage (0.2) which was the same as recorded in 1948 has never been bettered in these Reports.

*Skin conditions* exhibited the lowest percentage since 1939. The decline in the incidence of scabies is the most notable example of improvement in this particular group.

*Defective nutrition* and *mouth and teeth unhealthy* showed the smallest percentages for many years, but accurate assessment of these conditions is difficult; *naso-pharyngeal defects* were also the lowest for some time, although the number of tonsillar operations recommended was the highest since 1943.

*External eye diseases* returned the smallest total percentage for many years; and *defective vision*, despite a small increase of "bad" (6/18 or worse) cases over the 1948 and 1947 figures, gave the best total percentage since 1939.

*Ear diseases, defective hearing, speech defects* and *mental and nervous conditions*, none of which have ever been numerous, also showed improvement to an extent unprecedented in these Reports.

*Diseases of the circulatory system*, which have declined gradually over a period of years, sank to a record low percentage level, the greatest improvement being noted in "functional conditions."

*Lung diseases* also reached the lowest total percentage for many years, the improved figures for catarrh being mainly responsible.

*Deformities* were also the lowest for years, a feature being the reduced numbers for "probable rickets"; *infectious diseases*, never many, had the smallest percentage yet recorded, whilst *other diseases or defects* were observed to be fewer than at any time since 1939.

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Additional information compiled from the records of routine inspection will be found in Appendix IIa, page 62. The percentage of parents who attended at the examination of their children was the lowest recorded for many years. Fewer parents were notified of conditions requiring treatment but printed notices for defects of clothing and/or cleanliness and minor dental defects were more frequently issued. Pupils noted for re-inspection by School Medical Officers were the fewest for some years, and the number excluded from school on account of illness was the smallest appearing in these Reports. Children with no recorded defect attained the highest percentage ever recorded, and the number with "sound" teeth was also the highest ever reported. Visual acuity reached a new "high" for "good" eyesight in children without glasses, but in those wearing glasses "good" vision was slightly lower in percentage than in 1948 but equalled the 1947 figure which had been the previous best. Satisfactory percentages of pupils were found to have complete immunisation against diphtheria, the over-all total being the highest ever recorded in the table.

In Appendix IIb (page 64) full details of the partial examination of children in the 1941 age-group are given and compared with results obtained in 1948. The findings were similar on the whole.

On pages 65 to 67 (Appendix IIc) the average physical measurements of school children are shown. Boys exhibited increase at all ages but the girls although not so consistent showed improvement over previous years.

Table III on page 68, which lists the children according to the remediability of the major defects observed at the routine inspection, gave a percentage of 66.9 free from defects (other than clothing, cleanliness or minor dental defects), which was the highest recorded in this table since its introduction in 1939. As already indicated in connection with Appendix IIa, the percentage free from *any* defect was also the greatest.

#### CONCLUSION.

The improvement in the health of Glasgow school children noted in successive Reports in the past few years appears to be confirmed in the 1949 statistics. Fewest individual defects for many years, highest average physical measurements ever recorded, and the high percentage of physically sound children revealed by the classification table are in combination strong evidence in support of this belief.

## 6.—MEDICAL TREATMENT.

As had been anticipated (page 5, 1948 Report), the establishment of the National Health Service scheme apparently affected treatment at school clinics. Compared with the year 1948, fewer new cases reported for treatment and consequently fewer total attendances were recorded during the year ended 31st July, 1949. The year 1948 was, however, remarkable for its high treatment figures which reached greater proportions than for some years previously, probably as it was the first full year in which all obstacles to free treatment had been removed. It is worthy of note that the 1949 figures, although generally below those of 1948, compare favourably with previous years and in many instances exceed the numbers registered in these earlier school sessions.

*Cuts, bruises, burns and other minor injuries* (page 28) differed very slightly from the 1948 total but were more numerous than in any other year since 1939.

New *ear* cases (page 29), although fewer than those treated in 1948, were practically similar in number to those of 1947 and totalled more than in any other year since 1939. More children were recommended by specialists for operative or other treatment than in any year since 1939, and more were classified according to the degree of deafness since the services of an aurist were obtained for this purpose in 1945. Details of x-ray examinations are given for the first time in these pages and references are made to the provision of hearing aids and the results of the 1949 Audiometric Survey.

A slight fall in the number of cases treated for *eye disease* (page 31) was noted, but the 1949 figures were higher than for any other year since 1939.

New cases of *skin disease* (page 31) fell by nearly 35 per cent. from the 1948 level, and were also about 28 per cent. below that of 1947; they were also the lowest figures since 1941. Scabies and impetigo had, of course, been falling for some years, and this tendency was expected to continue into 1949—the former disease had been falling steadily from the peak of 17,393 cases in the year 1943.

Treatment of *defective vision* was curtailed for reasons given on page 32. It is considered possible that, but for the changed circumstances during the year, the number of spectacles supplied in 1949 would have exceeded the previous record figure of 1948.

A considerable increase in the number of *operations* for ear, nose and throat defects (page 35) was possible with the addition of Mearns Kirk Hospital in October, 1948 to the list of institutions performing this work, and because the previous restrictions due to the infantile paralysis outbreak had been entirely removed. More operations were performed during 1949 than in any of the past 11 years.

More *orthopaedic* cases (page 36) were dealt with during the period than in any previous year and the number discharged "fit" was the largest ever recorded in these Reports. The average of 19 attendances per patient in 1949 compared with 21 and 23 in 1948 and 1947 respectively—and with 34 in the year 1939—indicates a progressive response to treatment.

The position as regards "*general*" diseases (page 39) was similar to that of skin diseases already stated. New cases were fewer by 30 per cent. than in 1948 and by 18 per cent. than in 1947; they were the lowest numbers recorded since 1942. A coincident fall in the supply of *medicines* may be noted. *Artificial light* treatment was given in fewer instances than in 1948, but the 1949 figures were superior to all other previous years. The specialist examined more cases at the *cardiac clinics* during the year than he saw during any previous year.

#### SUMMARY.

It is difficult to form an opinion based on the treatment figures for the 1949 session, because the altered circumstances arising from the existence of a National Health Service make the records of former years incomparable in many respects. No doubt many potential patients for the Education Health Service clinics were taken by parents to their private doctor and either treated by him or sent to the out-patient departments of city institutions. Inquiries and requests from general practitioners and various hospitals appear to confirm this, and

some of the children have been referred subsequently to school clinics. The pressure on Glasgow doctors and institutions could be alleviated if the comprehensive facilities for medical supervision and treatment of school children through the Education Health Service were more widely known.

(A) *MINOR AILMENTS.*

*Throughout the treatment tables, "Single visit cases" includes those treated and disposed of at first visit, cases not for treatment, and cases without apparent disease.*

(1) CUTS, BRUISES, SPRAINS, MINOR INJURIES, ETC.

Details of new cases—	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Cuts, bruises, sprains, etc.	1,751	797	2,548	2,531	2,075
Burns and scalds ... ..	207	168	375	443	286
Totals ... ..	1,958	965	2,923	2,974	2,361

The attendances are included with those for skin conditions (page 31).

(2a) DISEASES OF THE EAR.

*Examined only.*

	Boys.	1949. Girls.	Totals.	1948. Totals.	1947. Totals.
Recommended operation for tonsils and/or adenoids ...	253	266	519	561	465
Other operations recommended	3	1	4	3	1
Referred to Hospitals ... ..	2	1	3	1	—
Single visit cases ... ..	643	539	1,182	1,506	1,005
Totals ... ..	901	807	1,708	2,071	1,471

*Treated at clinics.*

Details of new cases—				1949.	1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.	
Chronic suppurative inflammation (otorrhoea)—Single ...	298	227	525	724	571	
Double ...	94	63	157	163	140	
Results of above disease ...	26	13	39	117	68	
Retracted membrane ...	19	21	40	40	35	
Chronic aural catarrh ...	—	—	—	3	1	
Ceruminous collection (wax) ...	130	134	264	317	233	
Nasal catarrh ...	30	24	54	67	37	
Laryngitis ...	—	2	2	4	4	
Polypus ...	—	1	1	1	5	
Other diseases ...	81	50	131	179	131	
	<u>678</u>	<u>535</u>	<u>1,213</u>	<u>1,615</u>	<u>1,225</u>	
Cases from previous session ...	667	504	1,171	955	937	
Totals ...	<u>1,345</u>	<u>1,039</u>	<u>2,384</u>	<u>2,570</u>	<u>2,162</u>	
Clinic attendances of above cases ...	33,035	23,983	57,018	57,721	51,699	

*Examinations by Specialists.*

In addition to the foregoing, aurists examined and recommended treatment of a number of cases, details of which are as under :—

	Boys.	1949. Girls.	Totals.	1948. Totals.	1947. Totals.
Recommended operation for tonsils and/or adenoids ...	76	57	133	129	103
Other operations recommended	43	32	75	27	52
Referred to Hospitals ...	50	32	82	81	67
For X-ray ...	46	40	86	73	75
Others ...	551	357	908	847	774
Totals ...	<u>766</u>	<u>518</u>	<u>1,284</u>	<u>1,157</u>	<u>1,071</u>



*X-ray Examinations.*

Cases referred by the specialists during the year for x-ray investigation are arranged below under the various headings according to defects.

	No defect.		Defect found.		Totals.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
<b>STOBHILL</b>						
Sinuses ... ..	7	7	13	7	20	14
Mastoids ... ..	—	1	5	3	5	4
Other Ear Conditions ... ..	—	—	2	—	2	—
Sinuses and chest ... ..	—	—	—	1	—	1
Totals ... ..	7	8	20	11	27	19
<b>SOUTHERN GENERAL</b>						
Sinuses ... ..	8	9	13	3	21	12
Mastoids ... ..	1	2	9	4	10	6
Other Ear Conditions ... ..	—	—	—	2	—	2
Sinuses and Mastoids ... ..	—	1	—	—	—	1
Totals ... ..	9	12	22	9	31	21

*(2b) DEFECTIVE HEARING.*

As in former years, the services of an aurist were retained for the purpose of classifying children with hearing difficulties and assessing their ability to take advantage of the educational facilities available to them. A total of 75 cases (40 boys and 35 girls) was examined and classified as follows:—school for deaf, 10; semi-deaf classes or to remain therein, 11; ordinary school or to remain therein, 29.

Hospital treatment was advised for 5 children, 6 were referred to a psychologist or psychiatrist, x-ray investigation was requested in 7 instances and 9 cases were recommended other forms of treatment at school clinics.

Hearing aids were recommended for 6 cases, who were referred to the Hearing Aid Clinic at the Ear, Nose and Throat Hospital. In one of these cases (a girl), the official government hearing aid was found to be unsuitable, and another type of instrument was supplied by the Corporation.

*Audiometric Survey.*

As a result of the survey of school children aged 10 years made by the Education Department during the year, 803 children have been referred for otological examination. Ear specialists allocated for this purpose by the Hospital Board will examine at school clinics, advise on treatment, and grade the cases according to the severity of deafness. Full details of the aurists' findings and the treatment given will appear in the 1950 Education Health Service Report.

## (3) DISEASES OF THE EYE, EXCLUDING DEFECTIVE VISION.

Details of new cases—	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Blepharitis ... ..	321	290	611	716	640
Hordeolum (stye) ... ..	177	223	400	396	217
Conjunctivitis, catarrhal ... ..	351	354	705	727	521
Conjunctivitis, muco-purulent	4	5	9	22	9
Ophthalmia, strumous (includes phlyctenular conjunctivitis and keratitis) ... ..	—	—	—	—	—
Keratitis (interstitial) ... ..	3	1	4	6	7
Corneal ulcers ... ..	33	40	73	67	65
Corneal opacities ... ..	—	1	1	—	—
Dacryocystitis ... ..	—	1	1	1	1
Epiphora ... ..	—	—	—	—	—
Injuries ... ..	66	11	77	44	37
Other diseases ... ..	28	21	49	41	19
Single visit cases ... ..	93	103	196	200	176
	<u>1,076</u>	<u>1,050</u>	<u>2,126</u>	<u>2,220</u>	<u>1,692</u>
Cases from previous session ... ..	147	133	280	293	247
Totals ... ..	<u>1,223</u>	<u>1,183</u>	<u>2,406</u>	<u>2,513</u>	<u>1,939</u>
Clinic attendances of above cases ...	12,133	10,426	22,559	23,360	19,542

## (4a) DISEASES OF THE SKIN, EXCLUDING RINGWORM AND FAVUS.

Details of new cases—	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Scabies ... ..	383	368	751	1,975	3,307
Pediculosis capitis ... ..	1	6	7	16	7
Impetigo contagiosa ... ..	1,688	912	2,600	4,599	4,611
Ped. cap. and imp. cont. ... ..	6	12	18	79	43
Ecthyma ... ..	44	29	73	217	166
Dermatitis seborrhoeica ... ..	215	199	414	548	335
Eczema ... ..	121	96	217	315	224
Alopecia areata ... ..	23	16	39	87	67
Psoriasis ... ..	29	32	61	85	62
Herpes zoster (shingles) ... ..	101	77	178	277	168
Lupus ... ..	—	—	—	—	—
Ulcers and abscesses ... ..	2,191	1,101	3,292	4,827	2,157
Urticaria ... ..	52	77	129	221	143
Warts ... ..	187	200	387	412	213
Other skin diseases ... ..	238	245	483	638	524
Single visit cases ... ..	1,321	921	2,242	3,009	2,476
	<u>6,600</u>	<u>4,291</u>	<u>10,891</u>	<u>17,305</u>	<u>14,503</u>
Cases from previous session ... ..	571	406	977	886	682
Totals ... ..	<u>7,171</u>	<u>4,697</u>	<u>11,868</u>	<u>18,191</u>	<u>15,185</u>
Clinic attendances of above and ring- worm cases ... ..	65,300	43,123	108,423	138,182	115,539

*Special Disinfesting Clinics—*

New cases ... ..	...	...	423	513	408
Attendances ... ..	...	...	695	962	652

## (4b) RINGWORM.

*Drug Treatment—*

Details of new cases—

			1949.			1948.		1947.	
			Boys.	Girls.	Totals.	Totals.	Totals.	Totals.	
Ringworm (head)	...	...	74	25	99	95	168		
Ringworm (body)	...	...	114	87	201	280	361		
Totals	...	...	188	112	300	375	529		

*X-ray Treatment—*

106 children (77 boys and 29 girls) were given x-ray treatment for ringworm of the scalp, making 106 attendances for radiation, and receiving 522 x-ray exposures (generally 5 exposures per child).

Other skin conditions were also treated by x-ray, 8 girls attending and receiving 8 exposures.

## (4c) BATH TREATMENT OF SCABIES.

			1949.			1948.		1947.	
			Boys.	Girls.	Totals.	Totals.	Totals.	Totals.	
Cases receiving baths	...	...	368	340	708	1,841	3,047		
Baths given	...	...	2,128	1,887	4,015	12,942	19,686		

## (B) DEFECTIVE VISION.

It has freely to be admitted that throughout the period the ophthalmic service for school children has been a grave disappointment.

The scheme which had been in operation for many years relied principally for its success upon (1) a team of School Medical Officers who specialised in refraction work, (2) a consulting oculist to whom all difficult cases were reported, and (3) a firm of opticians under contract with the Corporation to supply the spectacles prescribed. There was also a liaison with the School Attendance section for the following-up of defaulters. The whole scheme was administered from the office of the Education Health Service and a regular flow of glasses was always maintained, even during the difficult war years.

In July, 1948, however, the National Health Service (Scotland) Act, 1947 was introduced. The Corporation's contract with the firm of opticians terminated in the same month, and on the advice of the Department of Health for Scotland was not renewed, pending further instructions.

It was still the duty of the local authority to make arrangements to secure the provision of free medical treatment (including the supply of spectacles) to school children under the terms of the Education (Scotland) Act, 1946. A solution to the problem was earnestly sought—one which would retain the essentials of local authority control, including the utilisation of the experienced School Medical Officers.

An application for the inclusion of these Medical Officers on the official list of Ophthalmic Medical Practitioners (under the Supplementary Ophthalmic Services scheme) was not acceptable to the authorities ; nor could any help be obtained from the Regional Hospital Board who, at this juncture, could only cater for children in need of specialist treatment. When it became evident, therefore, that an early solution was unlikely, the more urgent cases were referred to the hospital organisation, the number of refraction sessions was perforce reduced, and other school children were advised to obtain spectacles (for which they were eligible along with the general public) through the Supplementary Ophthalmic Services scheme. Many of the parents preferred to await the inauguration of a new Corporation scheme and this preference, coupled with the general delay of several months in supplies, resulted in many children going without spectacles, to the detriment of their health and education. In this connection, the " follow-up " organisation had to be abandoned, as it was farcical to investigate possible defaulters when the supply of spectacles was so unpredictable.

Ultimately, the Department of Health for Scotland, in a circular, advised Education Authorities to consult with the Local Hospital Board and to continue to make arrangements for sight-testing and the supply of spectacles *at local authority expense*. The Medical Officer of Health reporting to the Health and Education Committees observed that, as a result, school children would have to be either (1) dealt with by special arrangement through the school service, or (2) referred to the Supplementary Ophthalmic Services through their own family doctor. Both of these arrangements were unsatisfactory ; either the local authority would have to pay for spectacles which were available without cost through the National Health Service, or the supervision of the school children's eyesight would be removed from the sphere of the Education Health Service by the inevitable closure of the refraction clinics.

The Western Regional Hospital Board eventually assumed responsibility, financial and otherwise, for this work, and entered into a contract from 1st April, 1949 with a firm of opticians for the supply and repair of spectacles, the routine refraction work in connection with which would be carried out by the Education Health Service who were to refer to the consultant for guidance and help all cases presenting difficulty. A weekly list of all prescriptions was to be sent to the Executive Council to obviate possible duplication in supplying glasses through the Supplementary Ophthalmic Services. In general, the scheme was to be carried on in much the same way as in the past, but costs would be borne by the Hospital Board.

Unfortunately, difficulties regarding the supply of lenses were intimated by the contractors, and the gearing up of their organisation took some time to produce results. The Department of Health for Scotland was approached with a view to obtaining an Import Licence for lenses, and intimation was received on 2nd June, 1949 that a recommendation had been forwarded to the Board of Trade. By the end of July, 1949, therefore, although 1,461 pairs of spectacles had been ordered from the contractor, only 166 pairs had actually been received.

Below are given the figures relating to (a) the cases dealt with at refraction clinics during the school year and (b) the disposal of the cases for whom glasses were prescribed.

(a) CASES DEALT WITH AT REFRACTION CLINICS.

	Boys.	1949. Girls.	Totals.	1948. Totals.	1947. Totals.
Subjected to refraction—					
Spectacles prescribed ... ..	1,442	1,465	2,907	6,627	5,576
Spectacles not prescribed—					
For further treatment ... ..	...	...	826	1,504	1,563
No treatment required ... ..	...	...	597	1,201	1,271
			<u>4,330</u>	<u>9,332</u>	<u>8,410</u>
Not subjected to refraction—					
For further treatment ... ..	...	...	691	1,124	866
No treatment required ... ..	...	...	345	383	318
Spectacles checked ... ..	...	...	6	64	51
Postponed ... ..	...	...	427	1,381	1,378
			<u>1,469</u>	<u>2,952</u>	<u>2,613</u>
Total number dealt with at refraction clinics ...			<u>5,799</u>	<u>12,284</u>	<u>11,023</u>
Number of clinics held ... ..	...	...	688	1,367	1,132
Average number of children per clinic ... ..	...	...	8.4	8.9	9.7
Average number subjected to refraction at each clinic ... ..	...	...	6.3	6.8	7.4

At the occlusion clinics 85 children were kept under observation, and although 19 of these were put off treatment, 8 were instructed to attend at hospitals for orthoptic treatment.

Approximately 5,000 children at the end of the school session were awaiting refraction distributed as follows:—New cases—1,000; "Failed to attend"—400; Re-tests—3,600.

(b) PROVISION OF SPECTACLES.

Of the 2,907 children for whom spectacles were prescribed, orders were sent to the contractors in 1,461 instances, 705 were referred to the consultant, 573 were reported to have made private arrangements, and the remaining 168 were still to be dealt with at the end of the year.

It may be of interest to note that the parents of 1,056 children (72 per cent.) chose the cellulose acetate (artificial shell) type of frame, and 405 (28 per cent.) selected the gold-filled type.

Repairs were ordered from the contractors in 27 instances, 16 of which were actually supplied within the period.

### (C) EAR, NOSE AND THROAT OPERATIVE TREATMENT.

In an endeavour to reduce the number on the waiting list for Tonsils and Adenoids operation, 91 boys and 208 girls whose names had been on the list for some time were summoned to clinic during the Christmas vacation. The results were :—

	Boys.	Girls.	Totals.
Number summoned ... ..	91	208	299
Attended—			
Operation urgent ... ..	6	17	23
Operation required ... ..	45	81	126
Operation not required ... ..	7	23	30
	58	121	179
Failures—			
Private operation ... ..	—	3	3
Reasonable excuse ... ..	9	10	19
Removed from waiting list (no explanation for non-attendance) ... ..	24	74	98
	33	87	120

### (i) TONSILS AND ADENOIDS OPERATIONS.

	Boys.	1949. Girls.	Totals.	1948. Totals.	1947. Totals.
Tonsils removed—					
Western District Hospital ... ..	—	1	1	2	2
Mearnskirk Hospital ... ..	2	—	2	—	—
Adenoids removed—					
Western District Hospital ... ..	15	6	21	10	24
Mearnskirk Hospital ... ..	26	32	58	—	—
Stobhill Hospital ... ..	1	—	1	—	—
Southern General Hospital ... ..	—	1	1	6	—
Tonsils and Adenoids removed—					
Western District Hospital ... ..	740	731	1,471	1,065	1,449
Stobhill Hospital ... ..	41	50	91	27	176
Mearnskirk Hospital ... ..	108	210	318	—	—
Southern General Hospital ... ..	—	2	2	27	19
	933	1,033	1,966	1,137	1,670
Number of operation periods ... ..			*133	108	164
Average number of cases per period ... ..			* 11	*11	*11
Clinic (including hospital) attendances ... ..			4,903	3,488	5,111

\* These figures relate only to the Western District Hospital.

In addition to the above, 35 children were admitted to hospital—28 to Mearnskirk and 7 to Western District Hospital—during the year. Of these, 10 children (all girls) from Mearnskirk and 7 (3 boys and 4 girls) from Western District Hospital were discharged without operation for various reasons, mostly medical; the remainder (10 boys and 8 girls) were awaiting operation in Mearnskirk Hospital at 31st July, 1949.

Other operations were performed on children receiving tonsils and adenoids operation; these were mainly antrostomy. During the session, children were detained in hospital for varying periods before and after operation, for medical reasons in most cases.

All children were instructed to report to the school clinic two weeks after dismissal from hospital for post-operative examination.

The number of cases on the waiting list at 31st July, 1949 was approximately 350 boys and 600 girls, a total of 950.

(ii) OTHER EAR, NOSE AND THROAT OPERATIONS.

Children to the number of 22 were operated on for other ear, nose and throat conditions at Stobhill, Southern General and Mearnskirk Hospitals. In 10 cases mastoidectomy was undertaken; other ear (6) and nasal (6) conditions were also dealt with. Some of these children underwent operation for more than one defect.

The number of cases awaiting operational treatment in hospital at 31st July, 1949, was 78 boys and 49 girls, a total of 127.

(D) ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) DEFORMITIES TREATED IN MEARNKIRK HOSPITAL.

Cases in hospital at 1-8-48	...	...	...	31
Number admitted during session	...	...	...	78
				—
				109
Number dismissed during session	...	...	...	91
				—
Number still in hospital at 31-7-49	...	...	...	18
				—

All the above cases had been selected at the Education Health Service Orthopaedic Clinics by the visiting Orthopaedic Surgeon. Of the 91 patients dismissed, the causes of disability were as shown in the following table :—

Torticollis ... ..	14
Congenital Foot Deformities ... ..	7
Spastic Hemiplegia ... ..	20
Anterior Poliomyelitis, 3rd stage ... ..	22
Acquired Deformities ... ..	13
Scoliosis and Kyphosis ... ..	10
Miscellaneous ... ..	5
	<hr/>
	91
	<hr/>

The treatment given to the above cases was as follows :—

Manipulation (including tenotomy and wrenching in 27 cases) ... ..	39
Operation ... ..	36
Physical Treatment (plaster and exercises) ... ..	10
Investigation but no treatment required ... ..	5
Removed against medical advice ... ..	1
	<hr/>
	91
	<hr/>

The average time in hospital of all these cases was 100 days.

The Orthopaedic Surgeon continued his regular visits to the Education Health Service Orthopaedic Clinics, and many patients were referred to his weekly clinic held at the hospital. There, patients were fitted with plasters and splints as required.

The splints supplied during the year were :—

Calipers ... ..	13
Below Knee Irons ... ..	12
Spinal Braces ... ..	3

Alterations of various kinds to boots were made in 320 cases and repairs or replacements of old calipers and leg irons amounted to 65.

In addition, during the year 52 cases of Anterior Poliomyelitis, most of them patients from the 1947 epidemic, were dismissed to continue their treatment and supervision at the school Orthopaedic Clinics.

(b) DEFORMITIES TREATED BY EXERCISE, MASSAGE, ELECTRICAL TREATMENT, ETC., AT ASHLEY STREET, FLORENCE STREET AND GLENBARR STREET ORTHOPAEDIC CLINICS.

	Boys.	1949. Girls.	Totals.	1948. Totals.	1947. Totals.
Number of children examined by—					
School Medical Officers ... ..	417	523	940	1,202	755
Orthopaedic Surgeon ... ..	385	413	798	515	—
Number of attendances of "old" cases reporting for observation ... ..	629	600	1,229	931	910



The staff of seven physiotherapists carried out treatment for the following cases :—

	Boys.	1949. Girls.	Totals.	1948. Totals.	1947. Totals.
Details of new cases put on treatment at Clinics—					
Deformities of spine (kyphosis) lordosis, scoliosis) ... ..	101	124	225	204	231
Paralysis, infantile and other...	43	51	94	95	30
Flat-foot and other deformities of the foot ... ..	75	126	201	242	207
Wry-neck (torticollis) ... ..	10	14	24	16	21
Fracture (result of), sprains and dislocations ... ..	5	1	6	8	4
Deformities of chest ... ..	25	15	40	13	7
Knock-knees ... ..	23	28	51	45	28
Others ... ..	20	25	45	25	21
	<u>302</u>	<u>384</u>	<u>686</u>	<u>648</u>	<u>549</u>
Cases from previous session ...	69	104	173	158	138
Totals ... ..	<u>371</u>	<u>488</u>	<u>859</u>	<u>806</u>	<u>687</u>
Discharged from Orthopaedic Clinics—					
Fit ... ..	197	288	485	422	357
For hospital treatment ...	9	9	18	19	15
To Convalescent Homes ...	1	2	3	5	5
Transferred to other clinics or treated by appliances ...	30	19	49	35	33
For other reasons (leaving school, etc.) ... ..	62	70	132	152	119
Totals ... ..	<u>299</u>	<u>388</u>	<u>687</u>	<u>633</u>	<u>529</u>
Number still on treatment ...	72	100	172	173	158
Number of attendances made by children for treatment ... ..	...	...	16,356	16,788	15,678

(c) DEFORMITIES TREATED BY EXERCISE AND MASSAGE OUTWITH THE ABOVE NAMED CLINICS.

Other children were dealt with at schools, child guidance clinics, and nursery schools, visits being made for this purpose by physiotherapists. Details of the numbers treated are given below.

	Special Schools.	Child Guidance Clinics.	Nursery Schools.	Totals.
Number of cases treated individually	74	30	138	242
Number of treatments given ... ..	907	132	354	1,393
Number of classes held ... ..	819	196	—	1,015

*(d) DEFORMITIES TREATED BY APPLIANCES.*

The Hospital Board organisation, from 5th July, 1948, arranged for the provision of surgical appliances to school children.

*(E) OTHER DISEASES.**(a) CASES DEALT WITH AT THE REGULAR CLINICS FOR "GENERAL" DISEASES.*

Details of new cases—	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Bronchitis and bronchial catarrh	576	398	974	1,367	1,160
Anaemia and/or debility ...	671	791	1,462	1,871	1,475
Rickets ... ..	6	1	7	13	18
Tubercular conditions—					
Pulmonary (including contacts)	86	96	182	211	341
Non-pulmonary ... ..	10	6	16	20	38
Paralysis ... ..	3	3	6	6	8
Heart disease ... ..	13	26	39	30	84
Chorea ... ..	29	19	48	63	73
Enlarged tonsils and/or adenoids	113	165	278	537	316
Adenitis ... ..	42	29	71	213	146
Rheumatism ... ..	63	109	172	371	215
Enuresis ... ..	320	368	688	774	884
Malnutrition ... ..	20	19	39	38	14
Epilepsy ... ..	10	13	23	62	46
Digestive disorders ... ..	125	151	276	449	156
Infectious diseases ... ..	36	35	71	401	476
Mental deficiency ... ..	1	1	2	3	—
Nervous disorders ... ..	27	28	55	98	49
Others ... ..	200	192	392	756	851
Single visit cases ... ..	657	614	1,271	1,419	1,085
<b>Totals ... ..</b>	<b>3,008</b>	<b>3,064</b>	<b>6,072</b>	<b>8,702</b>	<b>7,435</b>
Clinic attendances of above cases ...	9,377	8,736	18,113	23,331	19,296

*(b) SUPPLY OF MEDICINES.*

Details of new cases seen elsewhere than at "General" Clinics—

Details of new cases seen elsewhere than at "General" Clinics—	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Sent from school inspection for immediate supply ... ..	451	554	1,005	1,077	709
Sent from skin, eye and ear clinics ... ..	356	441	797	1,291	894
Additional attendances at "General" clinics for medicine ... ..	10,393	7,406	17,799	22,608	18,803
<b>Totals ... ..</b>	<b>11,200</b>	<b>8,401</b>	<b>19,601</b>	<b>24,976</b>	<b>20,406</b>

## (c) ARTIFICIAL LIGHT TREATMENT.

Details of new cases—	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Rickets ... ..	15	4	19	33	12
Anaemia and/or debility ...	377	388	765	793	738
Nervous disorders ... ..	4	—	4	2	3
Enlarged glands ... ..	18	6	24	28	32
Chronic bronchitis ... ..	235	219	454	545	541
Rheumatism ... ..	24	53	77	120	109
Skin conditions ... ..	8	23	31	40	27
Eye conditions ... ..	1	1	2	14	8
Ear conditions ... ..	11	2	13	3	2
Other diseases ... ..	46	33	79	92	65
Single visit cases ... ..	107	50	157	200	86
<b>Totals ... ..</b>	<b>846</b>	<b>779</b>	<b>1,625</b>	<b>1,870</b>	<b>1,623</b>
Clinic attendances of above cases ...	9,927	11,396	21,323	24,516	22,081

In addition, 5 school children were treated at the Child Welfare Clinic in Summertown Road, Govan.

## (d) CASES SEEN AT CARDIAC CLINICS.

The heart specialist from Stobhill Hospital continued to attend school clinics for the purpose of examining children specially referred by School Medical Officers, and recommending any necessary treatment. During the session, he saw the following cases :—

New Cases.		Re-examinations.		Totals.*	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
122	117	66	65	188	182

(\* Included in attendances at "General" Clinics.)

Additional attendances were made by 7 boys and 9 girls for x-ray etc., reports.

The Specialist reported that the work has developed along the lines summarised in the last Report. By endeavouring to distinguish the "innocent" from the "organic" murmur, much unnecessary cardiac invalidism is being avoided. Many of those with organic

lesions have been allowed to undertake physical training, sometimes in a modified form. This group has been periodically reviewed and no ill effects have been noted; indeed the feeling of well-being has been increased and the anxious parent has been made happier.

Within the past year a small group of children attending a special school have been allowed modified exercises. These were children who were thought to need the benefits of the special school regimen but were considered fit enough for the slight exercises given them. It is too soon to assess the long term results of this innovation.

The facilities of Stobhill Hospital were available for the treatment of children thought to have active disease, and also for special tests thought necessary to ensure accurate assessment, especially when operations were contemplated.

#### 7.—DENTAL INSPECTION AND TREATMENT.

The new scheme introduced this year was based to some extent on the suggestions made in the various Department of Health for Scotland circulars. Annual inspection and the offer of treatment to all children, however, as broadly laid down by the Department of Health, was found to be impossible owing to the large numbers involved in Glasgow and there remained to be considered one of the following methods :—

- (a) All schools could be inspected in turn, but such inspection and offer of treatment would be at seven-yearly intervals.
- (b) Inspection and offer of treatment could be carried out annually in a restricted number of selected schools.

The former method was rejected for obvious reasons and the alternative was chosen, but it was adapted to the special requirements of Glasgow by having it operate each forenoon and reserving the afternoon sessions for children outwith the selected schools. In other words, dentally defective children in certain schools are sought out and followed up each forenoon, while patients from all other sources are treated each afternoon. It is anticipated that the number of these selected schools will gradually increase as the Service expands, and because the future requirements of the original selection will dwindle in proportion to its more concentrated attention.

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Of the children inspected since the coming into force of the new Health Act on 5th July, 1948, a slightly greater percentage has accepted

treatment at the school clinics in spite of the potential attractions of the now free Private Practitioner service. A 4.3 per cent. fall in sound dentitions compared with last year was recorded by the Dental Officers at school inspections, this being due probably to the more exact "mirror and probe" examinations and charting now in operation under the new Routine Dental Inspection Scheme.

As a result of the new arrangement, the number of cases treated shows a slight decrease owing to the more thorough treatment accorded to each child in the scheme. While the number of fillings in permanent teeth has fallen by 4 per cent., fillings in temporary teeth have increased by 261 per cent., due to the concentration on the youngest age groups until the end of December, 1948.

Since the beginning of May, a special Emergency clinic has been established in Glenbarr Street Clinic, necessitated by the inability of the Private Practitioner service to deal with its previous percentage of "toothache" cases, and it was felt that such a clinic, situated near the main bus and tram routes, where relief from pain could be guaranteed without a previous appointment, would supply the necessary facilities. In the 7½ weeks in which this clinic functioned during the session, 601 patients attended, 605 temporary teeth and 108 permanent teeth were extracted, and 4 permanent and 58 temporary fillings were inserted.

A Dental X-ray Unit has been installed and an immediate radiographic diagnosis is now available to all Dental Officers.

The Orthodontic service has been expanded and a close co-operation with the Glasgow Dental Hospital enables the Education Health Service to summon such cases to the Hospital for regulation by Specialists. In the past year, 59 such cases have been or are being treated there at no cost to the Corporation.

## 8.—SPECIAL SCHOOLS AND CLASSES AND RESIDENTIAL SCHOOLS.

### (a) FOR HANDICAPPED CHILDREN.

The following table shows the number of pupils at the various schools for handicapped children (under the management of the Corporation), (1) in the City, (2) near the City, and (3) in hospital schools and residential schools for physically handicapped pupils outwith the City at 30th June, 1949.

CLASSIFICATION.	(1) Day Centres in or near City.		(2) Day and Resi- dential Centres near City.		(3) Residential Centres outwith City.	
	No. of Centres.	No. of Pupils.	No. of Centres.	No. of Pupils.	No. of Centres.	No. of Pupils.
Physically Handicapped						
General ... ..	12	1,331	—	—	8	561
Blind ... ..	—	—	1	18	—	—
Myopic ... ..	1	65	1	22	—	—
Deaf ... ..	1	32	2	211	—	—
Semi-deaf ... ..	1	77	1	18	—	—
Mentally Handicapped						
General ... ..	18	3,117	—	—	—	—
Ineducable but train- able ... ..	9	363	—	—	—	—
Totals, 1949 ...	(30)	4,985	(2)	269	8	561
Totals, 1948 ...	(29)	5,183	(2)	260	8	497

The total of the pupils shown above, 5,815, compares with a total of 5,940 in 1948, and with 5,351 pupils of similar categories receiving instruction in 1947.

The following notes on the various centres may be of interest.

(1) The standard type of special school is a centre for both physically and mentally handicapped pupils, Protestant and Roman Catholic children being in separate schools. Exceptions are—one centre for older mentally handicapped boys (both Protestant and Roman Catholic), one centre for mentally handicapped children only (Protestant), and four centres for mentally handicapped children housed in ordinary schools. Owing to lack of accommodation in the old Cranstonhill School (now St. Martin's), a new centre for younger Roman Catholic mentally handicapped pupils was opened at St. Donnan's School, housed in the premises of St. Brendan's primary school. Nine Occupational Centres for ineducable but trainable children are also housed in ordinary schools.

As a result of the re-organisation of special schools in April, 1947 when Roman Catholic handicapped children were segregated, schools for these children still bore territorial names, although they were not territorial schools. To remedy this, all Roman Catholic schools were given "Saints" names in August, 1948. Protestant schools for handicapped children bearing territorial names were also re-named (e.g., Burnside became Greystone), and the three schools for handicapped children housed in "ordinary" school premises were given new names, being separate units under the Education (Scotland) Acts, 1945 and

1946, viz., Hayfield now Richmond, St. Aloysius' now St. Kevin's, and St. Luke's now St. Gabriel's. Centre Street School for the Deaf (Nursery and Infants) became Kingston School for the Deaf (Nursery and Infants). St. Vincent's school for blind and deaf pupils was re-named St. Vincent's (Tollcross) to avoid confusion with St. Vincent's (Carnwadric) ordinary school. There being no prospect of Mount Florida Occupational Centre returning to Mount Florida school, the Centre was re-named Holmlea.

(2) The combined day and residential centres near the City are Glasgow School for the Deaf and St. Vincent's (Tollcross).

(3) The residential centres outwith the City are as follows :—

*Hospital Schools*—at Philipshill, Strathblane Home, Mearnskirik and Stobhill (including Lenzie Annexe).

*Residential Schools*—

for physically handicapped children—

- 36 places at Caol Ruadh, Colintrave (Protestant boys),
- 30 places at Agnes Patrick, Ascog (Protestant girls),
- 23 places at Lumsden, Maybole (Roman Catholic girls).

\*for "problem" children—

40 places at Nerston, East Kilbride.

\* The figures for these children are not included in the table regarding handicapped children.

#### EXAMINATION AND AFTER-CARE OF MENTALLY HANDICAPPED CHILDREN.

The number of children specially examined by the School Medical Officers regarding *mental defects* during the year was :—

	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
First examinations ... ..	367	252	619	645	936
Re-examinations ... ..	1,004	753	1,757	1,785	1,873
Totals ... ..	1,371	1,005	2,376	2,430	2,809

After-Care Committees continued to function on a regional basis at the following schools :—Rottenrow, Kennyhill, Hollybrook, Henderson Street, St. Oswald's, St. Martin's, St. Aidan's. Arrangements for the administration of the After-Care Scheme by the Health and Welfare Committee under the National Health Service (Scotland) Act, 1947, are still in progress.

## HOME TUITION SCHEME.

53 physically handicapped children unable to attend school were educated at home after school hours by 35 qualified teachers. About a third of the children were suffering from chronic heart disease. 17 of the children were taking part in the scheme for the second year.

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In addition to the above schemes, Glasgow children are accommodated and educated at the following centres not under the management of the Corporation :—

*Biggart Memorial Home*, Prestwick—40 physically handicapped children in need of nursing care. Biggart Home is now under the aegis of the Board of Management for Southern Ayrshire Hospitals, but the Education Health Service retains the privilege of selecting suitable cases.

*The Royal Blind School*, Edinburgh—19 Protestant blind children and 2 Roman Catholic blind children receiving secondary education.

*East Park Homes* in Glasgow and Largs—53 children suffering from serious physical disabilities. East Park Homes are still on a voluntary basis (i.e., not nationalised).

*The Colony of Epileptics*, Bridge of Weir—9 Protestant children suffering from serious epilepsy. (Voluntary.)

*The Rudolph Steiner School*, Aberdeen—5 mentally handicapped children suffering from multiple defects. (Voluntary.)

*Trefoil Residential School*, Whitburn—1 paralysed girl. (Voluntary.)

*Larbert Certified Institution*—1 mentally handicapped boy.

*Lennox Castle Certified Institution*—103 mentally handicapped boys aged 12 to 16 years, mostly juvenile delinquents, but including a few cases of serious epilepsy with mental deterioration, and one deaf boy for whom no other provision could be made.

*St. Charles' Certified Institution*, Carstairs—61 mentally handicapped Roman Catholic boys and girls.

*St. Joseph's Certified Institution*, Rosewell—10 Roman Catholic mentally handicapped children with multiple defects.



*Waverley Park Certified Institution, Kirkintilloch*—31 Protestant mentally handicapped girls.

(All the certified institutions are under the management of the Western Regional Hospital Board.)

*The Westerlea School for Spastics, Edinburgh*—4 spastic cases. The Scottish Council for the Care of Spastics opened this residential school for the treatment of children suffering from cerebral palsy in September, 1948. There is accommodation for about 20 pupils and the inclusive charge is £6 6s. per week. The Council, in addition to educational facilities, provide at Westerlea medical and allied services by personnel specially trained in the treatment of this condition. Admission is confined to cases which, in the opinion of the Selection Committee, will benefit from treatment. Four Glasgow pupils have been admitted—1 spina bifida, 1 paralysis left leg and arm, 1 spastic paralysis and 1 spastic paraplegia. Other two cases will be sent when vacancies occur, a total of six places having been allocated to Glasgow.

(b) *FOR NORMAL AND CONVALESCENT CHILDREN.*

There are 3 Residential Schools outwith the City for normal children. The children usually go in school groups and stay for about one month.

52 places at Achnamara, Lochgilphead (Protestant, post-primary).

24 places at South Park, Ascog (Protestant, primary boys).

24 places at Stevenson, Ascog (Protestant, primary girls).

There is also a Residential Nursery School at Southannan, Fairlie with 40 places.

In addition, the Corporation leased Dounans Camp, Aberfoyle, for the months of October and November, 1948, and June, 1949, when approximately 200 boys and 200 girls (normal children) were accommodated each month, and Glengonnar Camp, Abington during March-April, 1949, when 250 boys were accommodated.

Convalescent children who have been recommended a holiday are sent to the following two residential schools :—

65 places at Hillfoot, Bearsden (Protestant girls),

70 places at Seafield, Ardrossan (Protestant boys).

The children are usually in residence for six weeks.

(c) *FOR MALADJUSTED CHILDREN.*

## CHILD GUIDANCE.

The Child Guidance Clinics dealt with 3,045 children, as compared with 2,932 in the preceding year. These children showed one or more of the following symptoms :—Emotional disorders (general instability, anxiety and obsessional states, night terrors and sleep walking, enuresis and soiling, emotional retardation and regression, psychopathic personalities—1,475 instances) ; Behaviour disturbances (unmanageable behaviour, aggression and temper tantrums, sadistic tendencies, exhibitionism, truancy and wandering—707) ; Delinquency (theft, lying, malicious mischief and sexual offences—399) ; Educational disability (general backwardness and specific disability—1,022) ; Speech defect—421 instances. Of these children, 127 were given residential treatment at Nerston Home as compared with 101 in the preceding session.

Further information can be found in the report issued annually by the Education Department.

### 9.—**ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.**

At the end of the session the Physical Education staff consisted of the Superintendent of Physical Training, 2 Assistant Superintendents (a man and a woman), 42 Principal Teachers (28 men and 14 women), 102 assistant men teachers (including 3 seconded) and 81 assistant women teachers (including 6 physiotherapists engaged at the Orthopaedic Clinics). One woman Principal Teacher was in charge of the Orthopaedic Clinics, the staff of which, in addition to duties at the clinics, also visited schools for physically handicapped children, nursery schools and child guidance clinics. In addition 3 men and 3 women teachers were employed in Further Education day classes.

The Principal Teachers from secondary schools visited neighbouring primary schools to give demonstration lessons and to advise class teachers and, where arrangements could be made, weekly visits to primary schools were also made by assistant teachers.

Although sufficient men teachers of physical training have been coming from the Training Centres, the many resignations each year and the small number of women teachers available have created difficulties in staffing girls' classes, some classes having to be taught by men teachers.

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Instruction in Personal Hygiene and Simple First Aid was given to post-primary classes by physical training teachers as part of the scheme of Physical Education. In the primary schools class teachers gave appropriate short lessons on Health Habits.

A Mobile Spray Bath Unit was brought into operation at the beginning of May, visiting six selected schools weekly and providing facilities for approximately 200 spray baths daily. An Education Health Service nurse was in attendance at each of the schools for the purpose of examining the children before they used the sprays. Up to the end of June (when the schools closed for the summer holidays) 6,221 baths were given. The special arrangements introduced last year by which schools in the neighbourhood had the use of spray bath facilities at Garngad and Cranstonhill Corporation Baths were continued.

During the months of September and October, 1948 and May and June, 1949 (when swimming instruction was a compulsory part of the curriculum), arrangements were made for approximately 24,500 boys and girls to attend weekly at School or Corporation Baths Department Ponds. Some 15,000 boys and girls, with the consent of their parents, continued to receive a weekly period of swimming instruction during the months of November, 1948, to April, 1949.

Lack of suitable accommodation or floors in many primary schools still prevents the carrying out of the authorised daily physical training lesson appropriate to the needs of primary pupils. Treatment of floors and the installation of floor coverings have improved conditions in some instances.

The Corporation continue to take every opportunity to extend the provision of playing field facilities. In addition to the opening of  $7\frac{1}{2}$  acres of playing field at Carntyne, a number of schemes of drainage and reconditioning of playing surfaces have been undertaken.

## 10.—ARRANGEMENTS FOR FEEDING AND CLOTHING OF CHILDREN.

### (a) ADMINISTRATION AND NATURE OF MEALS.—

See Report for 1945, page 34.

There are at present 20 Kitchens and 5 School Meals Centres providing meals for school children.

By June, 1949, the total output of School Meals had been raised to 57,674 meals per day, 56,264 of these being dinners.

There were in use by the end of June, 1949—267 Dining Rooms and Halls, 204 of which were in school premises (21 in schools for handicapped children only) and 63 in halls or other non-school premises.

(b) *NUMBER AND COST OF MEALS.*—

The numbers of meals supplied during the year ended 31st July, 1949 were :—

	1949.			1948.		
	Breakfasts	Dinners	Teas	Breakfasts	Dinners	Teas
Paid for by parents ...	219,365	10,523,240	1,166,831	198,286	10,100,748	866,998
Supplied free of charge ...	48,972	3,345,489	33,365	66,095	2,992,808	63,619
Totals	268,337	13,868,729	1,200,196	264,381	13,093,556	930,617
Total No. of Meals	15,337,262 in 1949*			14,288,554 in 1948		

\* In addition, 30,732 meals were supplied to inmates of the Remand Home and 138,043 mid-day meals to pupils attending independent schools.

The charges made to parents for meals were—Dinners, five days per week, 1/10, six days per week, 2/1 ; three meals per day, six days per week, 4/-.

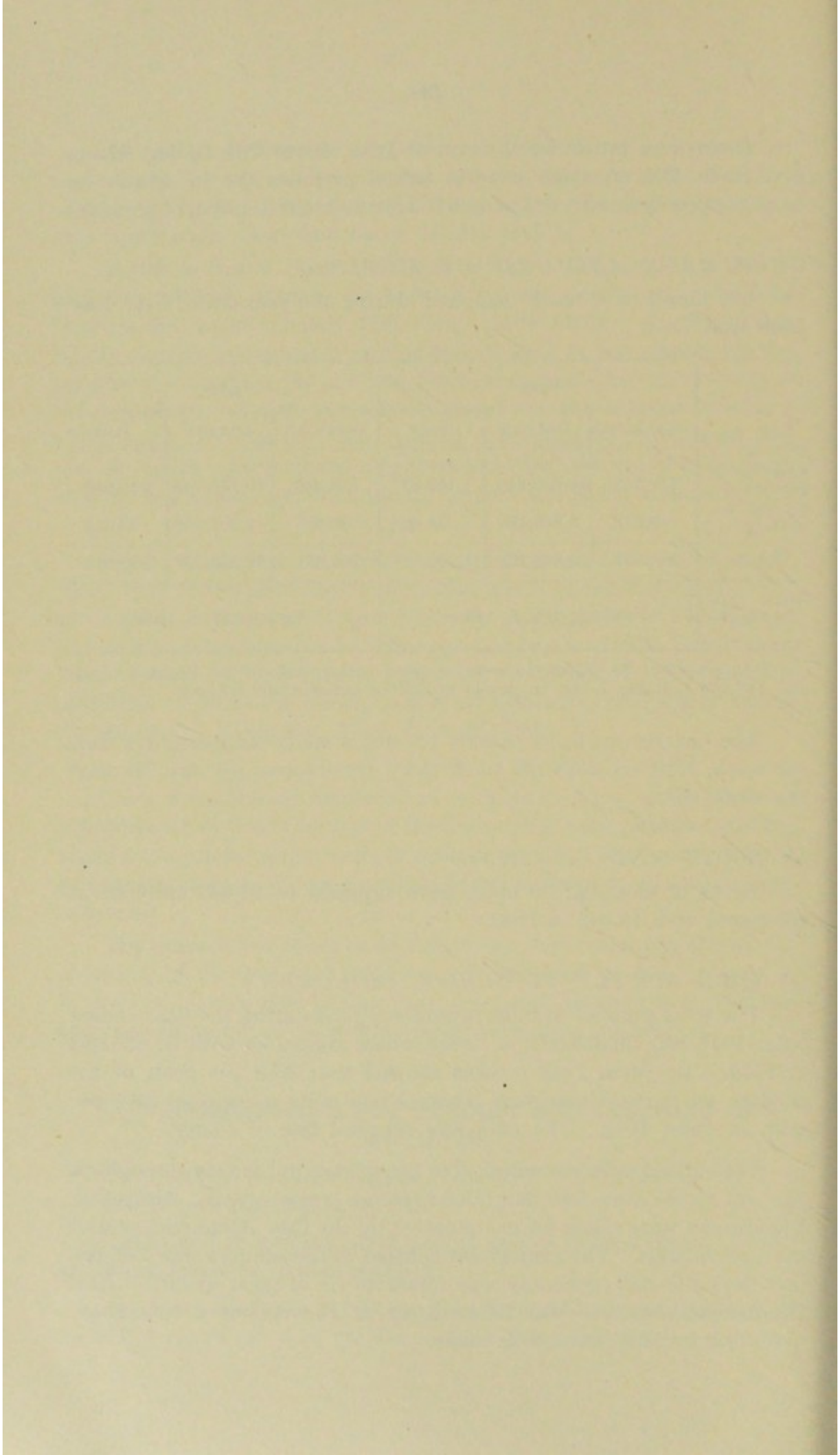
(c) *BOOTS AND CLOTHING.*—

Boots or clothing, or both, were supplied to 24,652 children as compared with 13,045 in 1948.

(d) *MILK SUPPLY TO SCHOOL CHILDREN.*—

The total number of milk rations supplied during the year ending July, 1949 was 32,318,834, a figure which compares with 31,655,958 in 1948. In June, 1949 returns showed that 85·3 per cent. of the children on the registers were taking school milk, as against 83·9 per cent. in June, 1948. The milk was supplied free of charge.

Pasteurised milk was supplied to the schools in the City throughout the year by the same four dairymen as in the previous year. Altogether 160 samples were taken for examination by the City Bacteriologist and the City Analyst. The average fat content of the samples was 3·68 per cent. and the milk generally was found to be of good quality. Any unsatisfactory sample was followed up to the creamery concerned, where full investigations were made.



### STATISTICAL AND OTHER APPENDICES.

**TABLE I.—TOTAL NUMBER OF CHILDREN EXAMINED AT :**

(A) (a) SYSTEMATIC EXAMINATIONS, i.e., the main groups recommended for the session (see page 12), and (b) OTHER SYSTEMATIC EXAMINATIONS, i.e., children missed at recommended age groups or otherwise outwith these groups.

GROUP.	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
(a) Entrants ... ..	9,314	8,676	17,990	16,769	16,774
Second Age Group	7,667	7,334	15,001	14,905	14,847
Third Age Group ...	7,266	7,372	14,638	14,206	13,744
Fourth Age Group	610	400	1,010	921	806
(b) Others ... ..	24,857	23,782	48,639	46,801	46,171
	458	369	827	1,137	902
Totals ... ..	25,315	24,151	49,466	47,938	47,073

For age distribution of these children see Appendix Ib on page 54.

In addition to these numbers of children, the following were examined in the course of Systematic Inspection of the pupils at Special Schools and Classes :—

GROUP.	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Physically handicapped children ... ..	314	269	583	562	655
Mentally handicapped children ... ..	461	395	856	872	640
Totals ... ..	775	664	1,439	1,434	1,295

## (B) OTHER EXAMINATIONS—

GROUP.	1949.	1948.	1947.
(i) <i>In Schools</i> —			
Systematic Inspection of Nursery School Children ... ..	809	613	1,159
Other Examinations in Nursery Schools ...	541	—	—
Inspection of children in two High Schools	<i>Included in (A)</i>	512	466‡
Systematic Inspection of Children in Independent Schools ... ..		817	509
1941 age-group (Visual Acuity and Hearing only) ... ..	13,031	14,420	—
Special Cases (in respect of particular defects)	11,563	15,432	17,786
Re-inspections by Medical Officers ... ..	11,696	10,422	16,668
Leaving Interviews ... ..	4,088	1,440	1,302
Examinations regarding Mental Defect ...	2,376	2,430	2,809
Discharges in Special Schools and Classes ...	376	404	354
Totals ... ..	44,480	46,490	41,053
(ii) <i>Mainly at Clinics</i> —			
Applicants for preliminary training as Teachers ... ..	64	65	31
Applicants for Licences under the Corporation Bye-laws for the Employment of Children ... ..	766	698	510
Adult Employees of the Corporation ... ..	78	97	182
*Certifications—Blind Persons Act, 1920 ...	14	15	13
Candidates for Printers' Apprenticeships ...	131	100	—
Children as to fitness for camps, etc.—			
Harvesters ... ..	6,694	3,489	—
Forestry, etc. ... ..	44	—	—
School and Junior Club groups ... ..	10,316	10,000	9,067
Children as to fitness for "School Journeys" abroad, etc. ... ..	649	—	313
Children as to fitness for admission to Residential Schools and Institutions ...	4,917	4,323	4,096
Pre-nursing Students ... ..	34	—	—
Other Special Cases ... ..	36	68	82
Examinations in Remand Home ... ..	1,521	1,531	1,233
Totals ... ..	25,264	20,386	15,527
(iii) <i>Cleanliness and Special Examinations</i> —			
†Cleanliness inspections (by school nurses) ...	160,999	141,084	144,681
Mental Survey, Random Sample Interviews (Nurses) ... ..	—	—	1,790
Totals ... ..	160,999	141,084	146,471

\* These examinations are made at the Central Clinic for the Blind.

† In addition, Nurse Inspectresses of the Sanitary Divisions made 138,984 cleanliness inspections in 1,183 visits to 79 schools (see page 72).

‡ Measurements only.

**APPENDIX Ia.—NOTIFICATION TO PARENTS.**

The numbers and percentages of individual children inspected at systematic examinations who were notified to parents as requiring treatment for conditions other than (a) defects of clothing or cleanliness (including pediculosis) and (b) minor dental defects, were as follows :—

GROUP.	1949.			1948.	1947.
	Boys.	Girls.	Totals.	Totals.	Totals.
Entrants ...	2,942 (31·6)	2,772 (32·0)	5,714 (31·8)	6,570 (39·2)	7,291 (43·5)
2nd Age Group ...	2,454 (32·0)	2,511 (34·2)	4,965 (33·1)	5,781 (38·8)	6,043 (40·7)
3rd Age Group ...	1,467 (20·2)	2,000 (27·1)	3,467 (23·7)	4,529 (31·9)	4,058 (29·5)
4th Age Group ...	46 (7·5)	57 (14·3)	103 (10·2)	579 (28·6)	441 (25·8)
Others ...	113 (24·7)	94 (25·5)	207 (25·0)		
Totals ...	7,022 (27·7)	7,434 (30·8)	14,456 (29·2)	17,459 (36·4)	17,833 (39·1)

The numbers and percentages of cases in which intimation was made to parents verbally or by card, together with information as to similar intimations in respect of clothing, cleanliness, and/or minor dental defects will be found in Appendix IIa on page 62.



## APPENDIX Ib.—AGE DISTRIBUTION OF CHILDREN

(a) Children within groups recommended

(b) Children outwith groups

‡ Entrants-Infants.

Ages.		4	5	6	7	8
<b>BOYS.</b>						
Non-transferred Schools	(a) ...	187	6,090	224	43	4
Do.	(b) ...	—	—	—	—	7
Transferred Schools	(a) ...	82	2,511	133	34	6
Do.	(b) ...	—	—	—	—	29
Totals	(a) ...	269	8,601	357	77	10
Do.	(b) ...	—	—	—	—	36
Totals, 1949	... ..	269	8,601	357	77	46
Totals, 1948	... ..	528	7,592	301	87	44
<b>GIRLS.</b>						
Non-transferred Schools	(a) ...	150	5,748	194	43	9
Do.	(b) ...	—	—	—	—	9
Transferred Schools	(a) ...	97	2,288	103	40	4
Do.	(b) ...	—	—	—	—	2
Totals	(a) ...	247	8,036	297	83	13
Do.	(b) ...	—	—	—	—	11
Totals, 1949	... ..	247	8,036	297	83	24
Totals, 1948	... ..	425	7,451	288	78	41
<b>ALL.</b>						
Totals	(a) ...	516	16,637	654	160	23
Do.	(b) ...	—	—	—	—	47
Totals, 1949	... ..	516	16,637	654	160	70
Totals, 1948	... ..	953	15,043	589	165	85

‡ This grouping applies only to

## AT DATE OF SYSTEMATIC EXAMINATION.

for the session (as indicated by brackets).

recommended for the session.

‡ Second Age Group.			‡ Third Age Group.				‡ Fourth Age Group.				Totals
8	9	10	11	12	13	14	15	16	17	18	
73	4,537	741	—	157	4,497	527	11	386	147	—	17,624
—	30	66	56	22	6	45	31	1	1	—	265
49	1,925	342	—	98	1,753	234	—	33	33	—	7,233
—	12	37	28	11	4	42	30	—	—	—	193
122	6,462	1,083	—	255	6,250	761	11	419	180	—	24,857
—	42	103	84	33	10	87	61	1	1	—	458
122	6,504	1,183	84	288	6,260	848	72	420	181	—	25,315
168	6,214	1,182	91	344	5,882	866	44	418	113	4	23,878
76	4,202	847	—	167	4,520	491	5	239	105	—	16,796
—	20	80	51	19	17	49	25	—	—	—	270
23	1,776	410	—	99	1,795	300	—	42	9	—	6,986
—	7	23	15	6	5	23	12	—	1	5	99
99	5,978	1,257	—	266	6,315	791	5	281	141	—	23,782
—	27	103	66	25	22	72	37	—	1	5	369
99	6,005	1,360	66	291	6,337	863	42	281	115	5	24,151
128	6,466	1,066	88	353	6,410	812	30	39	95	—	24,060
221	12,440	2,340	—	521	12,565	1,552	16	700	294	—	48,639
—	69	206	150	58	32	159	98	1	2	5	827
221	12,509	2,546	150	579	12,597	1,711	114	701	296	5	49,466
296	12,680	2,248	179	697	12,292	1,678	74	747	208	4	47,938

the (a) lines on the table.

**TABLE II.—SYSTEMATIC EXAMINATION OF CHILDREN IN ORDINARY SCHOOLS.**

NUMBERS AND PERCENTAGES OF CHILDREN SUFFERING FROM DEFECTS.

An individual child may appear in several sections but only once in any section, i.e., only the child's major defect in any section is recorded—any minor defects in the same section are ignored in this table. "Sections" are indicated by the horizontal lines across the columns, and the section totals give the numbers of individual children having at least one defect in that section.

Age Groups. ...	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1949.	1948.	1947.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
Number examined ...	9,314	8,676	7,667	7,334	7,266	7,372	610	400	25,315	24,151	49,466	47,938	47,073
1. CLOTHING Nature of defects found { Insufficient { Ragged ... { Dirty ...	1 (0.0)	3 (0.0)	1 (0.0)	9 (0.1)	1 (0.0)	2 (0.0)	—	—	3 (0.0)	14 (0.1)	17 (0.0)	23 (0.0)	42 (0.1)
	5 (0.1)	2 (0.0)	2 (0.0)	4 (0.1)	2 (0.0)	1 (0.0)	—	—	9 (0.0)	7 (0.0)	16 (0.0)	18 (0.0)	26 (0.1)
	4 (0.0)	13 (0.1)	5 (0.1)	11 (0.1)	2 (0.0)	11 (0.1)	—	—	11 (0.0)	36 (0.1)	47 (0.1)	55 (0.1)	53 (0.1)
Totals ...	10 (0.1)	18 (0.2)	8 (0.1)	24 (0.3)	5 (0.1)	14 (0.2)	—	—	23 (0.1)	57 (0.2)	80 (0.2)	96 (0.2)	121 (0.3)
2 FOOTGEAR UNSATISFACTORY { Unsatisfactory { None ...	8 (0.1)	11 (0.1)	22 (0.3)	16 (0.2)	7 (0.1)	10 (0.1)	—	—	37 (0.1)	38 (0.2)	75 (0.2)	99 (0.2)	122 (0.3)
	—	—	—	—	1 (0.0)	—	—	—	1 (0.0)	—	1 (0.0)	—	—
Totals ...	8 (0.1)	11 (0.1)	22 (0.3)	16 (0.2)	8 (0.1)	10 (0.1)	—	—	38 (0.2)	38 (0.2)	76 (0.2)	99 (0.2)	122 (0.3)
3. UNCLEANLINESS (a) Head { Dirty ... { Nits ... { Verminous ... (b) Body { Dirty ... { Verminous ...	2 (0.0)	1 (0.0)	2 (0.0)	2 (0.0)	2 (0.0)	—	—	—	7 (0.0)	3 (0.0)	10 (0.0)	10 (0.0)	7 (0.0)
	307 (3.3)	1,007 (11.6)	232 (3.0)	1,241 (16.9)	179 (2.5)	1,688 (22.9)	—	3 (0.8)	732 (2.9)	4,009 (16.6)	4,741 (9.6)	4,284 (8.9)	3,638 (7.7)
	8 (0.1)	31 (0.4)	7 (0.1)	32 (0.4)	8 (0.1)	41 (0.6)	—	—	23 (0.1)	108 (0.4)	131 (0.3)	110 (0.2)	90 (0.2)
	8 (0.1)	3 (0.0)	9 (0.1)	4 (0.1)	4 (0.1)	11 (0.1)	—	—	21 (0.1)	18 (0.1)	39 (0.1)	62 (0.1)	93 (0.2)
	—	1 (0.0)	1 (0.0)	—	—	2 (0.0)	—	—	3 (0.0)	2 (0.0)	5 (0.0)	8 (0.0)	10 (0.0)
Totals ...	325	1,043	251	1,279	195	1,741	—	3	786	4,140	4,926	4,474	3,838 (8.2)



TABLE II—Continued.

Age Groups.	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1949.	1948.	1947.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
											Totals.		
<b>7. NASO-PHARYNX</b>													
<i>(a) Nose</i>													
Obstruction—for observation	95 (1.0)	64 (0.7)	20 (0.3)	34 (0.5)	12 (0.2)	11 (0.1)	—	—	128 (0.5)	109 (0.5)	237 (0.5)	456 (1.0)	281 (0.6)
Obstruction—for operation	43 (0.5)	53 (0.6)	21 (0.3)	24 (0.3)	2 (0.0)	3 (0.0)	—	—	67 (0.3)	81 (0.3)	148 (0.3)	142 (0.3)	121 (0.3)
Catarrh	36 (0.4)	23 (0.3)	32 (0.4)	25 (0.3)	17 (0.2)	20 (0.3)	—	1 (0.3)	87 (0.3)	69 (0.3)	156 (0.3)	192 (0.4)	164 (0.3)
Other conditions	2 (0.0)	1 (0.0)	—	3 (0.0)	2 (0.0)	4 (0.1)	—	—	4 (0.0)	8 (0.0)	12 (0.0)	23 (0.0)	34 (0.1)
<i>(b) Throat</i>													
Tonsils—for observation	669 (7.2)	656 (7.6)	106 (1.4)	369 (5.0)	186 (2.6)	216 (2.9)	2 (0.3)	3 (0.8)	971 (3.8)	1,253 (5.2)	2,224 (4.5)	3,013 (6.3)	3,365 (7.1)
Tonsils—for operation	318 (3.4)	364 (4.2)	169 (2.2)	263 (3.6)	70 (1.0)	135 (1.8)	1 (0.2)	1 (0.3)	564 (2.2)	777 (3.2)	1,341 (2.7)	787 (1.6)	950 (2.0)
Other conditions	2 (0.0)	5 (0.1)	2 (0.0)	4 (0.1)	5 (0.1)	—	—	—	9 (0.0)	10 (0.0)	19 (0.0)	27 (0.1)	41 (0.1)
<i>(c) Glands</i>													
For observation	102 (1.1)	76 (0.9)	16 (0.2)	40 (0.5)	20 (0.3)	24 (0.3)	—	1 (0.3)	139 (0.5)	141 (0.6)	280 (0.6)	342 (0.7)	483 (1.0)
For operation	1 (0.0)	1 (0.0)	—	2 (0.0)	1 (0.0)	—	—	—	2 (0.0)	3 (0.0)	5 (0.0)	3 (0.0)	4 (0.0)
Totals	1,268 (13.6)	1,243 (14.3)	366 (4.8)	764 (10.4)	315 (4.3)	413 (5.6)	3 (0.5)	6 (1.5)	1,971 (7.8)	2,451 (10.1)	4,422 (8.9)	4,985 (10.4)	5,443 (11.6)
<b>8. EYES</b>													
<i>(a) External Diseases</i>													
Blepharitis	64 (0.7)	57 (0.7)	65 (0.8)	64 (0.9)	45 (0.6)	66 (0.9)	—	1 (0.3)	175 (0.7)	190 (0.8)	365 (0.7)	466 (1.0)	516 (1.1)
Conjunctivitis	9 (0.1)	15 (0.2)	—	10 (0.1)	1 (0.0)	5 (0.1)	—	—	10 (0.0)	31 (0.1)	41 (0.1)	47 (0.1)	56 (0.1)
Corneal opacities	3 (0.0)	8 (0.1)	2 (0.0)	4 (0.1)	—	6 (0.1)	—	—	6 (0.0)	18 (0.1)	24 (0.0)	41 (0.1)	31 (0.1)
Strabismus	362 (3.9)	323 (3.7)	242 (3.2)	193 (2.6)	155 (2.1)	154 (2.1)	—	4 (1.0)	767 (3.0)	680 (2.8)	1,447 (2.9)	1,540 (3.2)	1,574 (3.3)
Other diseases	16 (0.2)	20 (0.2)	13 (0.2)	22 (0.3)	7 (0.1)	15 (0.2)	—	1 (0.3)	37 (0.1)	58 (0.2)	95 (0.2)	103 (0.2)	123 (0.3)
Totals	454	423	322	293	208	246	—	6	995	977	1,972	2,197	2,300



TABLE II—Continued.

Age Groups. ...	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1949.	1948.	1947.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
10. SPEECH													
Defective articulation ...	90 (1.0)	49 (0.6)	32 (0.4)	19 (0.3)	14 (0.2)	11 (0.1)	—	—	137 (0.5)	79 (0.3)	216 (0.4)	290 (0.6)	398 (0.8)
Stammering ...	24 (0.3)	7 (0.1)	22 (0.3)	3 (0.0)	21 (0.3)	5 (0.1)	—	—	67 (0.3)	15 (0.1)	82 (0.2)	97 (0.2)	101 (0.2)
Totals ...	114 (1.2)	56 (0.6)	54 (0.7)	22 (0.3)	35 (0.5)	16 (0.2)	—	—	204 (0.8)	94 (0.4)	298 (0.6)	387 (0.8)	499 (1.1)
11. MENTAL AND NERVOUS CONDITION													
Backward ...	16 (0.2)	5 (0.1)	25 (0.3)	10 (0.1)	3 (0.0)	1 (0.0)	—	—	44 (0.2)	17 (0.1)	61 (0.1)	147 (0.3)	166 (0.4)
Dull ...	3 (0.0)	1 (0.0)	12 (0.2)	9 (0.1)	3 (0.0)	7 (0.1)	—	—	18 (0.1)	17 (0.1)	35 (0.1)	75 (0.2)	63 (0.1)
Mentally defective (educable)	—	—	—	—	—	—	—	—	—	—	—	7 (0.0)	13 (0.0)
" " (ineducable)	—	—	—	—	—	—	—	—	—	—	—	2 (0.0)	—
Highly nervous ...	7 (0.1)	11 (0.1)	10 (0.1)	11 (0.1)	—	—	—	—	17 (0.1)	22 (0.1)	39 (0.1)	109 (0.2)	60 (0.1)
Difficult in behaviour ...	4 (0.0)	2 (0.0)	—	1 (0.0)	—	1 (0.0)	—	—	4 (0.0)	4 (0.0)	8 (0.0)	10 (0.0)	10 (0.0)
Totals ...	30 (0.3)	19 (0.2)	47 (0.6)	31 (0.4)	6 (0.1)	9 (0.1)	—	—	83 (0.3)	60 (0.2)	143 (0.3)	350 (0.7)	312 (0.7)
12. CIRCULATORY SYSTEM													
(a) Organic Heart Disease													
Congenital ...	30 (0.3)	22 (0.3)	14 (0.2)	11 (0.1)	17 (0.2)	11 (0.1)	1 (0.0)	—	62 (0.2)	45 (0.2)	107 (0.2)	131 (0.3)	129 (0.3)
Acquired ...	29 (0.3)	16 (0.2)	46 (0.6)	32 (0.4)	52 (0.7)	57 (0.8)	7 (0.1)	2 (0.0)	138 (0.5)	115 (0.5)	253 (0.5)	285 (0.6)	308 (0.7)
(b) Functional Conditions ...	69 (0.7)	73 (0.8)	54 (0.7)	39 (0.5)	18 (0.2)	63 (0.9)	—	3 (0.0)	144 (0.6)	181 (0.7)	325 (0.7)	420 (0.9)	476 (1.0)
Totals ...	128 (1.4)	111 (1.3)	114 (1.5)	82 (1.1)	87 (1.2)	131 (1.8)	8 (0.1)	5 (0.1)	344 (1.4)	341 (1.4)	685 (1.4)	836 (1.7)	913 (1.9)

<b>13. LUNGS</b>													
Chronic Bronchitis ...	37 (0.4)	18 (0.2)	44 (0.6)	21 (0.3)	20 (0.3)	15 (0.2)	1 (0.2)	—	105 (0.4)	56 (0.2)	161 (0.3)	190 (0.4)	229 (0.5)
Suspected Tuberculosis ...	26 (0.3)	26 (0.3)	20 (0.3)	21 (0.3)	9 (0.1)	14 (0.2)	—	—	56 (0.2)	62 (0.3)	118 (0.2)	126 (0.3)	101 (0.2)
Catarrh ...	416 (4.5)	321 (3.7)	76 (1.0)	152 (2.1)	85 (1.2)	64 (0.9)	1 (0.3)	1 (0.3)	587 (2.3)	543 (2.2)	1,130 (2.3)	1,444 (3.0)	1,775 (3.8)
Other diseases ...	8 (0.1)	5 (0.1)	7 (0.1)	3 (0.0)	14 (0.2)	3 (0.0)	1 (0.2)	—	30 (0.1)	11 (0.0)	41 (0.1)	36 (0.1)	59 (0.1)
Totals ...	487 (5.2)	370 (4.3)	147 (1.9)	197 (2.7)	128 (1.8)	96 (1.3)	3 (0.5)	1 (0.3)	778 (3.1)	672 (2.8)	1,450 (2.9)	1,796 (3.7)	2,164 (4.6)
<b>14. DEFORMITIES</b>													
(a) Congenital ...	41 (0.4)	33 (0.4)	27 (0.4)	25 (0.3)	20 (0.3)	30 (0.4)	2 (0.3)	2 (0.5)	91 (0.4)	90 (0.4)	181 (0.4)	223 (0.5)	222 (0.5)
(b) Acquired	10 (0.1)	3 (0.0)	6 (0.1)	7 (0.1)	9 (0.1)	8 (0.1)	—	—	25 (0.1)	18 (0.1)	43 (0.1)	29 (0.1)	34 (0.1)
Infantile Paralysis ...	41 (0.4)	23 (0.3)	25 (0.3)	13 (0.2)	14 (0.2)	12 (0.2)	1 (0.2)	—	85 (0.3)	49 (0.2)	134 (0.3)	202 (0.4)	229 (0.5)
Probable Rickets ...	40 (0.4)	29 (0.3)	51 (0.7)	26 (0.4)	30 (0.4)	92 (1.2)	3 (0.5)	6 (1.5)	127 (0.5)	155 (0.6)	282 (0.6)	244 (0.5)	368 (0.8)
Other causes ...	132 (1.4)	88 (1.0)	109 (1.4)	71 (1.0)	73 (1.0)	142 (1.9)	6 (1.0)	8 (2.0)	328 (1.3)	312 (1.3)	640 (1.3)	698 (1.5)	853 (1.8)
Totals ...	7 (0.1)	3 (0.0)	—	3 (0.0)	—	1 (0.0)	—	—	7 (0.0)	7 (0.0)	14 (0.0)	30 (0.1)	38 (0.1)
<b>15. INFECTIOUS DISEASES ...</b>													
<b>16. OTHER DISEASES OR DEFECTS ...</b>													
	343 (3.7)	387 (4.5)	260 (3.4)	271 (3.7)	69 (0.9)	223 (3.0)	2 (0.3)	9 (2.3)	684 (2.7)	900 (3.7)	1,584 (3.2)	1,817 (3.8)	2,282 (4.8)





Teeth—	Sound ...	4,675	4,309	4,099	5,392	5,355	518	332	15,610	14,683	30,293	27,576	27,183
	One to four decayed	(53.9) 3,461	(56.2) 3,041	(55.9) 2,979	(74.2) 1,818	(72.6) 1,960	(84.9) 86	(83.0) 63	(61.7) 8,576	(60.8) 8,412	(61.2) 16,988	(57.5) 18,061	(57.7) 17,661
	Five or more decayed	(37.2) 737	(39.7) 317	(40.6) 256	(25.0) 56	(20.6) 57	(14.1) 6	(15.8) 5	(33.9) 1,129	(34.8) 1,055	(34.3) 2,184	(37.7) 2,300	(37.5) 2,228
		(7.9) 49,465	(4.1) 49,465	(3.5) 49,465	(0.8) 49,465	(0.8) 49,465	(1.0) 49,465	(1.3) 49,465	(4.5) 49,465	(4.4) 49,465	(4.4) 49,465	(4.8) 49,465	(4.7) 49,465
Visual acuity (Snellen) :—													
	With glasses—												
	Good, 6/6 ...		222	270	272	347	52	48	560	677	1,237	1,278	1,169
	Fair, 6/9, 6/12		(2.9) 95	(3.7) 129	(3.7) 119	(4.7) 188	(8.5) 32	(12.0) 15	(3.5) 251	(4.4) 334	(3.9) 585	(4.1) 845	(3.9) 843
	Bad, 6/18, etc.		(1.2) 23	(1.8) 28	(1.6) 36	(2.5) 51	(5.2) 4	(3.8) 5	(1.6) 65	(2.2) 84	(1.9) 149	(2.7) 163	(2.8) 142
	Without glasses		(0.3) 134	(0.4) 147	(0.5) 135	(0.7) 165	(0.7) 13	(1.3) 11	(0.4) 289	(0.5) 326	(0.5) 615	(0.5) 663	(0.5) 611
Children who wore glasses at examination			(1.8) 119	(2.0) 149	(1.9) 126	(2.2) 177	(2.1) 17	(2.8) 13	(1.8) 268	(2.1) 345	(2.0) 613	(2.1) 847	(2.0) 794
	Good, 6/6 ...		(1.6) 87	(2.0) 131	(1.7) 166	(2.4) 244	(2.8) 58	(3.3) 44	(1.7) 319	(2.2) 424	(1.9) 743	(2.7) 776	(2.6) 749
	Fair, 6/9, 6/12		(1.1) 134	(1.8) 147	(2.3) 135	(3.3) 165	(9.5) 13	(11.0) 11	(2.0) 289	(2.7) 326	(2.4) 615	(2.5) 663	(2.5) 611
	Bad, 6/18, etc.		(8.7) 87	(1.8) 131	(2.3) 166	(3.3) 244	(9.5) 13	(11.0) 11	(2.0) 289	(2.7) 326	(2.4) 615	(2.5) 663	(2.5) 611
Children not wearing glasses at examination			6,555	6,095	6,166	5,976	475	310	13,590	12,686	26,276	25,167	24,258
	Good, 6/6 ...		(85.7) 611	(83.2) 625	(84.9) 497	(81.1) 596	(77.9) 31	(77.5) 14	(85.1) 1,171	(82.0) 1,274	(83.6) 2,445	(80.9) 3,009	(80.3) 3,184
	Fair, 6/9, 6/12		(8.0) 143	(8.5) 178	(6.8) 172	(8.1) 212	(5.1) 16	(3.5) 8	(7.3) 340	(8.2) 408	(7.8) 748	(9.7) 636	(10.5) 595
	Bad, 6/18, etc.		(1.9) 134	(2.4) 178	(2.4) 172	(2.9) 212	(2.6) 16	(2.0) 8	(2.1) 340	(2.6) 408	(2.4) 748	(2.0) 636	(2.0) 595
Immunisation (Diphtheria).													
	Partial ...	81	18	29	16	14	1	—	116	118	234	193	274
	Completed ...	(0.9) 6,720	(0.2) 6,941	(0.4) 6,655	(0.2) 6,435	(0.2) 6,570	(0.2) 584	—	(0.5) 21,069	(0.5) 20,277	(0.5) 41,346	(0.4) 38,829	(0.6) 36,262
	Not Immunised	(72.1) 2,513	(90.5) 707	(90.7) 650	(88.6) 815	(89.1) 788	(95.7) 25	(92.3) 31	(83.2) 4,129	(84.0) 3,756	(83.6) 7,885	(81.0) 8,887	(77.1) 10,511
		(27.0) 49,465	(9.2) 49,465	(8.9) 49,465	(11.2) 49,465	(10.7) 49,465	(4.1) 49,465	(7.8) 49,465	(16.3) 49,465	(15.6) 49,465	(15.9) 49,465	(18.5) 49,465	(22.3) 49,465

Number Recorded 49,465

Number Recorded 49,465

**APPENDIX IIb.—VISUAL ACUITY AND HEARING OF CHILDREN BORN IN 1941.**

The partial examination of children approximately 7 years old was again included in the annual scheme of systematic medical inspection of school children at the request of the Department of Health for Scotland. During the year ended 31st July, 1949 similar arrangements to those of last year were made (see page 52, Report for 1948), the only change being the substitution of children born in 1941.

Detailed results of inspection during the period are given below under the relative sub-headings, and a column of 1948 totals is also supplied for purpose of comparison. It may be observed that fewer children were examined in 1949 by the nurses but that the over-all findings, despite a lower percentage recorded for "good" vision, can be regarded as satisfactory. Variable results may be expected in the application of tests to this particular age-group, for reasons already stated in the 1948 Report.

VISUAL ACUITY.

*Result of Eyesight (Snellen) Test.*

		No. and percentage.				
		1949.			1948.	
		Boys.	Girls.	Totals.	Totals.	
Children who wore glasses at examination.	With Glasses—	Good, 6/6 ...	38	60	98	147
			(0.6)	(0.9)	(0.8)	(1.0)
		Fair, 6/9, 6/12 ...	149	189	338	461
		(2.3)	(2.9)	(2.6)	(3.2)	
		Bad, 6/18, etc. ...	71	68	139	176
			(1.1)	(1.0)	(1.1)	(1.2)
Children not wearing glasses at examination.	Without Glasses—	Good, 6/6 ...	13	14	27	60
			(0.2)	(0.2)	(0.2)	(0.4)
		Fair, 6/9, 6/12 ...	105	154	259	360
		(1.6)	(2.4)	(2.0)	(2.5)	
		Bad, 6/18, etc. ...	140	149	289	363
			(2.1)	(2.3)	(2.2)	(2.5)
Children not wearing glasses at examination.	Good, 6/6 ...	2,589	2,413	5,002	5,930	
		(39.7)	(37.0)	(38.4)	(41.1)	
	Fair, 6/9, 6/12 ...	3,095	3,122	6,217	6,655	
	(47.5)	(47.9)	(47.7)	(46.2)		
	Bad, 6/18, etc. ...	574	663	1,237	1,051	
		(8.8)	(10.2)	(9.5)	(7.3)	
Totals ...		6,516	6,515	13,031	14,420	

*Summary of findings* (taking the better eye and with spectacles if worn at the examination) :—

	No. and percentage.			
	1949.			1948.
	Boys.	Girls.	Totals.	Totals.
Good, 6/6 ... ..	2,627	2,473	5,100	6,077
	(40·3)	(38·0)	(39·1)	(42·1)
Fair, 6/9, 6/12 ... ..	3,244	3,311	6,555	7,116
	(49·8)	(50·8)	(50·3)	(49·3)
Bad, 6/18, etc. ... ..	645	731	1,376	1,227
	(9·9)	(11·2)	(10·6)	(8·5)
Totals ... ..	<u>6,516</u>	<u>6,515</u>	<u>13,031</u>	<u>14,420</u>

Of those with defective eyesight, 1,142 (531 boys and 611 girls) were recommended for refraction, and 35 (13 boys and 22 girls) were advised to have re-test.

#### HEARING.

##### *Result of Hearing Test.*

	No. and percentage.			
	1949.			1948.
	Boys.	Girls.	Totals.	Totals.
Normal ... ..	6,430	6,446	12,876	14,213
	(98·7)	(99·0)	(98·8)	(98·6)
Defective—				
Grade I, for ordinary class ... ..	66	50	116	152
	(1·0)	(0·8)	(0·9)	(1·0)
Grade IIa, for front seat ... ..	12	10	22	29
	(0·2)	(0·2)	(0·2)	(0·2)
Grade IIb, for class for semi-deaf ... ..	7	9	16	25
	(0·1)	(0·1)	(0·1)	(0·2)
Grade III, for deaf class ... ..	1	—	1	1
	(0·0)	—	(0·0)	(0·0)
Totals ... ..	<u>6,516</u>	<u>6,515</u>	<u>13,031</u>	<u>14,420</u>

47 of the above children (26 boys and 21 girls) were referred to clinic for investigation of the cause of deafness.

#### **APPENDIX IIc.**—*AVERAGE MEASUREMENTS OF SCHOOL CHILDREN DURING SESSION 1948-49.*

Arranged in tabular form on page 67 are (a) the averages for age, height and weight of children of 5, 9 and 13 years who were measured at systematic inspection during the session ended 31st July, 1949, and (b) the relative average measurements adjusted to uniform ages for that year and for each of the years back to 1941.

The measurements of pupils from the Boys' High, Allan Glen's, Hutchesons' Boys' and Girls', Jordanhill and St. Aloysius' schools were included in the statistical returns for the first time. As a result of this innovation, the measurements of 166 girls for both height and weight and of 449 and 482 boys for height and weight respectively were taken into consideration when calculating the averages of the three age-groups of children attending all schools.

To simplify the study of the adjusted average measurements listed on page 67, the highest in each series is printed in **heavy** type and the second highest in *italics*. The findings may be stated thus :—

(1) PUPILS AGED FIVE YEARS.

(a) BOYS. The average for both *height* and *weight* was the *highest* ever recorded in each of the columns in the table.

(b) GIRLS. Except for the weight of "transferred" pupils (which, however, improved to second place), the *highest* position was reached for *height* and *weight* in each series.

(2) PUPILS AGED NINE YEARS.

(a) BOYS. In all columns the average *height* and *weight* was the *highest* yet recorded, although the weight of "transferred" pupils equalled the previous highest figure noted in 1948.

(b) GIRLS. *Highest* place was attained in every series for *height* and *weight*.

(3) PUPILS AGED THIRTEEN YEARS.

(a) BOYS. *Highest* place was reached for both *height* and *weight* in each column.

(b) GIRLS. In *height* average, "non-transferred" and "all" pupils were *highest* in their respective columns but "transferred" girls showed some deterioration. *Weight* showed improvement but could manage only *second* place in each series to the phenomenal first place figures of the year 1945.

(4) Inclusion of the measurements of pupils attending the six schools mentioned above raised the averages in the particular groups with which they were associated. The *placings* in each sequence were unaffected, however, except for (a) the weight of nine-year-old "transferred" boys and (b) the height of thirteen-year-old "all" girls, both of which were elevated to first place from the second place which they would otherwise have occupied.

(5) In all relative groups, the 1949 average measurement was higher than the highest average for any year prior to 1941.

Numbers, Average Ages and Measurements of Children of 5, 9 and 13 years of age within the Groups examined during Systematic Inspection. (The highest "adjusted" average in each column is in black type and the second in *italics*.)

AGE.	Type of School	5 YEARS.						9 YEARS.						13 YEARS.					
		Non-transf'd		Transferred		All		Non-transf'd		Transferred		All		Non-transf'd		Transferred		All	
		Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.	Ht. ins.	Wt. lbs.
	No. of Boys & Age (months)*	6,090 (4.03)		2,511 (4.44)		8,601 (4.15)		4,567 (6.17)		1,937 (6.00)		6,504 (6.12)		4,503 (5.99)		1,757 (5.98)		6,260 (5.99)	
	Actual Average Measurements	42.48	42.26	42.16	41.67	42.39	42.09	51.46	62.75	50.92	61.01	51.30	62.23	59.04	58.06	58.74	58.06	58.76	88.90
	Adjusted Average Measurements	<b>42.47</b>	<b>42.25</b>	<b>42.10</b>	<b>41.57</b>	<b>42.36</b>	<b>42.05</b>	<b>51.26</b>	<b>62.23</b>	<b>50.75</b>	<b>60.57</b>	<b>51.11</b>	<b>61.73</b>	<b>58.85</b>	<b>57.88</b>	<b>86.28</b>	<b>58.57</b>	<b>88.13</b>	
	Uniform ages	42.19	41.69	41.77	41.02	42.06	41.49	51.13	61.67	50.39	59.84	50.90	61.11	58.49	57.37	83.97	58.28	87.18	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	42.23	41.90	41.73	41.15	42.08	41.68	50.88	61.22	49.90	59.64	50.67	60.78	58.44	57.47	85.12	58.20	86.67	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	42.15	41.75	41.68	40.98	42.01	41.52	50.87	61.30	50.22	59.94	50.66	60.88	58.52	57.46	84.45	58.18	87.01	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	42.02	41.48	41.50	40.83	42.01	41.28	50.66	60.77	50.17	59.65	50.50	60.42	58.44	57.46	84.69	58.26	87.15	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	42.13	41.67	41.58	40.90	41.95	41.43	50.70	60.67	49.96	58.86	50.48	60.13	58.30	57.46	84.74	58.07	86.39	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	42.04	41.30	41.57	40.52	41.97	41.06	50.85	60.76	50.20	58.98	50.65	60.21	58.45	57.44	84.25	58.20	86.11	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	42.18	41.47	41.58	40.65	42.02	41.26	50.95	59.65	49.92	58.89	50.32	59.18	58.39	57.31	84.47	58.08	86.46	
	No. of Girls & Age (months)*	5,748 (4.26)		2,288 (4.22)		8,036 (4.25)		4,222 (6.34)		1,783 (6.42)		6,005 (6.37)		4,537 (5.93)		1,800 (5.94)		6,337 (5.93)	
	Actual Average Measurements	42.16	40.79	41.68	39.66	42.02	40.47	51.00	60.71	50.27	58.88	50.78	60.17	59.47	58.38	91.10	59.16	93.01	
	Adjusted Average Measurements	<b>42.12</b>	<b>40.73</b>	<b>41.65</b>	<b>39.61</b>	<b>41.98</b>	<b>40.41</b>	<b>50.76</b>	<b>60.05</b>	<b>50.02</b>	<b>58.18</b>	<b>50.54</b>	<b>59.49</b>	<b>59.32</b>	<b>58.23</b>	<b>90.24</b>	<b>59.01</b>	<b>92.16</b>	
	Uniform ages	41.91	40.13	41.38	39.17	41.74	39.83	50.59	59.51	49.94	57.73	50.38	58.95	59.24	58.33	89.87	58.98	91.58	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.82	40.10	41.42	39.17	41.70	39.81	50.63	59.34	49.87	57.75	50.40	58.86	59.29	58.16	88.74	58.96	91.41	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.82	40.41	41.44	39.75	41.70	40.20	50.52	59.36	49.64	57.45	50.24	58.76	59.05	58.32	89.82	58.86	91.47	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.81	40.33	41.29	39.51	41.64	40.07	50.45	59.13	49.70	57.66	50.20	58.64	59.26	58.23	90.26	59.00	92.37	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.66	39.97	41.10	38.97	41.49	39.67	50.30	58.71	49.64	57.36	50.07	58.27	59.12	58.27	89.11	58.90	91.19	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.70	39.93	41.16	39.17	41.54	39.69	50.40	58.96	49.58	56.95	50.11	58.27	59.20	58.23	89.52	58.96	91.37	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.76	39.74	41.17	39.06	41.58	39.52	50.52	58.63	49.62	56.65	50.23	58.02	59.09	58.07	88.22	58.80	90.55	
	of 5 yrs. 4 mths., and 9 yrs. 5 mths., respectively)	41.83	38.89	41.19	39.07	41.65	39.66	50.43	58.02	49.82	57.26	50.25	57.80	58.99	58.11	88.62	58.75	90.06	

\* Beyond years of age given at head of sections.

**TABLE III.—SYSTEMATIC MEDICAL EXAMINATION OF ACCORDING TO REMEDIABILITY OF THE MAJOR**

CLASSIFICATION	NO. OF CHILDREN EACH GROUP (AND					
	Entrants			Second Age Group		
	Boys	Girls	Total	Boys	Girls	Total
I. Children free from defects ... ..	6,197 (66.5)	5,732 (66.1)	11,929 (66.3)	4,895 (63.8)	4,555 (62.1)	9,450 (63.0)
II. 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 ... ..	—	—	—	480 (6.3)	529 (7.2)	1,009 (6.7)
(b) Conditions of the mouth and teeth requiring treatment ...	165 (1.8)	168 (1.9)	333 (1.9)	136 (1.8)	103 (1.4)	239 (1.6)
(c) Both (a) and (b) ... ..	—	—	—	23 (0.3)	8 (0.1)	31 (0.2)
Totals ... ..	165 (1.8)	168 (1.9)	333 (1.9)	639 (8.3)	640 (8.7)	1,279 (8.5)
III. Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks ...	1,697 (18.2)	1,560 (18.0)	3,257 (18.1)	1,144 (14.9)	1,174 (16.0)	2,318 (15.5)
IV. Children suffering from (or suspected to be suffering from) defects less remediable than defects specified in II or III, distinguishing cases—						
(a) Where complete cure or restoration of function (in the case of eye defect, full correction) is considered possible ...	897 (9.6)	942 (10.9)	1,839 (10.2)	659 (8.6)	735 (10.0)	1,394 (9.3)
(b) Where improvement only is considered possible, e.g. without complete restoration of function	346 (3.7)	268 (3.1)	614 (3.4)	322 (4.2)	223 (3.0)	545 (3.6)
Totals ... ..	1,243 (13.3)	1,210 (13.9)	2,453 (13.6)	981 (12.8)	958 (13.1)	1,939 (12.9)
V. Children suffering from defects from which improvement is not considered possible ... ..	12 (0.1)	6 (0.1)	18 (0.1)	8 (0.1)	7 (0.1)	15 (0.1)
<b>Total numbers of children examined ...</b>	<b>9,314</b>	<b>8,676</b>	<b>17,990</b>	<b>7,667</b>	<b>7,334</b>	<b>15,001</b>

\* Includes 827 children

CHILDREN IN ORDINARY SCHOOLS. CLASSIFICATION  
DEFECTS FOUND IN THE INDIVIDUAL CHILD.

EXAMINED IN PERCENTAGES).						NO. OF CHILDREN EXAMINED (AND PERCENTAGES).				
Third Age Group			Fourth Age Group			* All Ages Totals, 1949			Totals, 1948	Totals, 1947
Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total		
5,345 (73.6)	4,975 (67.5)	10,320 (70.5)	500 (82.0)	316 (79.0)	816 (80.8)	17,257 (68.2)	15,830 (65.5)	33,087 (66.9)	29,026 (60.5)	26,403 (56.1)
487 (6.7)	574 (7.8)	1,061 (7.2)	59 (9.7)	28 (7.0)	87 (8.6)	1,054 (4.2)	1,162 (4.8)	2,216 (4.5)	2,702 (5.6)	2,616 (5.6)
65 (0.9)	96 (1.3)	161 (1.1)	1 (0.2)	4 (1.0)	5 (0.5)	374 (1.5)	375 (1.6)	749 (1.5)	852 (1.8)	1,255 (2.7)
5 (0.1)	14 (0.2)	19 (0.1)	—	1 (0.3)	1 (0.1)	28 (0.1)	23 (0.1)	51 (0.1)	67 (0.1)	136 (0.3)
557 (7.7)	684 (9.3)	1,241 (8.5)	60 (9.8)	33 (8.3)	93 (9.2)	1,456 (5.8)	1,560 (6.5)	3,016 (6.1)	3,621 (7.6)	4,007 (8.5)
820 (11.3)	833 (11.3)	1,653 (11.3)	27 (4.4)	18 (4.5)	45 (4.5)	3,740 (14.8)	3,618 (15.0)	7,358 (14.9)	9,039 (18.9)	9,592 (20.4)
281 (3.9)	548 (7.4)	829 (5.7)	7 (1.1)	19 (4.8)	26 (2.6)	1,871 (7.4)	2,276 (9.4)	4,147 (8.4)	4,211 (8.8)	4,740 (10.1)
255 (3.5)	320 (4.3)	575 (3.9)	16 (2.6)	14 (3.5)	30 (3.0)	962 (3.8)	842 (3.5)	1,804 (3.6)	1,990 (4.2)	2,279 (4.8)
536 (7.4)	868 (11.8)	1,404 (9.6)	23 (3.8)	33 (8.3)	56 (5.5)	2,833 (11.2)	3,118 (12.9)	5,951 (12.0)	6,201 (12.9)	7,019 (14.9)
8 (0.1)	12 (0.2)	20 (0.1)	—	—	—	29 (0.1)	25 (0.1)	54 (0.1)	51 (0.1)	52 (0.1)
7,266	7,372	14,638	610	400	1,010	25,315	24,151	49,466	47,938	47,073

outwith normal Age Groups.



**APPENDIX IIIa.**—*INSPECTION OF SPECIAL CASES ("NON-ROUTINES" AND "ABNORMALS")*.

DEFECTS FOUND IN CHILDREN PRESENTED FOR MEDICAL INSPECTION AS "NON-ROUTINES."—11,522 children were presented for "non-routine" inspection (generally on account of defect observed or suspected by teachers). 9,814 of these were pupils in ordinary schools and 1,708 in special schools.

11,563 examinations were given, some of the children being seen more than once. The individual results were: "passing out" of special schools, 62; nits minor, 318; nits and/or vermin major, 224; skin conditions, 1,132; eye conditions (including defective vision), 2,513; ear, nose and throat defects, 1,574; "general" defects, 4,837; defective teeth, 175; no apparent disease, 233; and other causes, 495.

RE-INSPECTION BY MEDICAL OFFICERS OF "ABNORMALS."—

The total re-inspections were 11,696. Of these, 3,836 (32·8 per cent.) were found to be receiving treatment at the school clinics, 2,406 (20·6 per cent.) were being treated elsewhere, 4,062 (34·7 per cent.) did not require treatment, and 1,392 (11·9 per cent.) had not had the necessary treatment provided. These last were unimportant cases or were reported for "following-up" by other methods.

(Details of "non-routine" and "abnormal" cases examined in Nursery Schools may be found on page 83.)

**APPENDIX IIIb.—OTHER SPECIAL INSPECTIONS.**

(a) LEAVING INTERVIEWS.—These were granted to 4,088 pupils in order to bring medical records up-to-date and to give advice regarding suitability for certain occupations.

(b) HOLIDAYS CAMP, ETC.—Arrangements were made for the inspection of pupils attending Play Centres and Junior Clubs and other groups of children proposed for holiday camps (summer, 1949), and for children going to Harvesting Camps (October, 1948).

(i) *School and Junior Club Camps (June-July, 1949).*

	BOYS.		GIRLS.	
	Preliminary Inspection.	Final Inspection.	Preliminary Inspection.	Final Inspection.
	No. and %.	No. and %.	No. and %.	No. and %.
Fit ... ..	2,272 (85.0)	2,609 (99.2)	1,663 (65.4)	2,370 (95.9)
*Fit? ... ..	373 (14.0)	—	869 (34.2)	—
Unfit ... ..	27 (1.0)	21 (0.8)	11 (0.4)	101 (4.1)
Totals ... ..	2,672	2,630	2,543	2,471

\* Doubtful fitness at first inspection; unfit at second inspection.

The percentages of children shown as being "fit" in the above table were lower in the preliminary inspections and higher in the final inspections as compared with the corresponding figures for 1948. Too many groups failed to muster even 50 per cent. clean children at the preliminary inspection.

(ii) *Children going to Harvesting Camps (October, 1948).*

	BOYS.		GIRLS.	
	Preliminary Inspection.	Final Inspection.	Preliminary Inspection.	Final Inspection.
	No. and %.	No. and %.	No. and %.	No. and %.
Fit ... ..	2,195 (83.4)	2,369 (97.1)	516 (60.3)	703 (91.5)
*Fit? ... ..	374 (14.2)	1 (0.0)	272 (31.8)	4 (0.5)
Unfit ... ..	62 (2.4)	69 (2.9)	68 (7.9)	61 (8.0)
Totals ... ..	2,631	2,439	856	768

\* Doubtful fitness at first inspection; unfit at second inspection.

The numbers examined were practically twice those inspected in the same period last year. Most of those not passed were rejected on account of head infestation. On the whole, percentages compared favourably with those of 1947, but returns from a few schools indicated unsatisfactory condition of pupils at the first inspection.

(c) CLEANLINESS INSPECTIONS IN SCHOOLS.—Greater numbers of children were examined at schools in 1949 by nurses from the Education Health Service and Sanitary Divisions than for some years past. The results are shown below.

*Cleanliness Inspectresses of the Education Health Service.*

	Boys.		GIRLS.	
	1949	1948	1949	1948
<i>First Inspections.</i>				
Examined ...	53,990	47,219	55,939	48,804
Infested ...	1,344 (2.5)	819 (1.7)	4,162 (7.5)	3,266 (6.7)
Infected ...	3,360 (6.2)	2,779 (5.9)	12,282 (22.9)	10,249 (21.0)
<i>Re-Inspections.</i>				
Examined ...	14,252	12,669	36,818	32,392
Infested ...	1,093 (7.6)	997 (7.8)	5,484 (14.9)	5,290 (16.3)
Infected ...	3,777 (26.5)	3,335 (26.3)	18,487 (50.2)	15,458 (47.7)

In 444 instances, formal notices to cleanse children within 24 hours were issued, mainly by Cleanliness Inspectresses and Senior Women Assistants. Of this number, 198 were cleansed at home by the parents and 190 were compulsorily disinfested at school or clinic. The parents of 5 children were successfully prosecuted under the Education (Scotland) Act, 1946, Section 52 and were fined £1 in each case for a first offence.

*Nurse Inspectresses of the Sanitary Divisions.*

	Boys.		GIRLS.	
	1949	1948	1949	1948
<i>General Inspections.</i>				
Examined ...	52,242	51,759	47,685	44,287
Infested ...	122 (0.2)	134 (0.2)	329 (0.7)	370 (0.8)
Infected ...	5,866 (11.2)	6,026 (11.6)	14,800 (31.0)	13,260 (29.9)

The Nurse Inspectresses also visited 6,664 houses and revisited 212. They issued 323 formal printed notices to parents to cleanse the children within 24 hours, and reported that 140 children had been cleansed at clinics and 9,236 by the parents.

**APPENDIX IIIc.—CLEANLINESS SUPERVISION BY SENIOR WOMEN ASSISTANTS (ASSISTED BY WELFARE ATTENDANTS) AT SELECTED SCHOOLS.**

This scheme, which was initiated in January, 1941, with 6 schools (see Report for 1941, page 74), functioned in 26 selected schools throughout the year.

In the following table, the percentages of children in the 26 schools who were found to be "clean and well-cared for" in every respect at two general inspections during Session 1948-49 are compared with the results of similar inspections during 1947-48.

		First Inspection.		Second Inspection.	
		Boys.	Girls.	Boys.	Girls.
Six original schools (January, 1941)	1949	84.8%	53.4%	88.3%	67.2%
	1948	85.4%	62.5%	88.1%	62.1%
Other schools (June, 1942 and later)	1949	81.9%	59.2%	87.7%	68.1%
	1948	80.6%	56.2%	86.4%	69.0%
All twenty-six schools	1949	82.6%	59.7%	87.8%	67.9%
	1948	81.5%	57.6%	86.8%	67.3%

The percentages for the 6 original schools show a deterioration from the 1948 position at the first inspection but an almost corresponding improvement at the second inspection. One school in particular returned very low percentages at both inspections.

In the other schools an improvement is apparent except for a negligible fall in the percentages for girls at the second inspection. The low percentages in a few schools brought down the general average considerably, especially at the first inspection.

All over, the net result was one of slight improvement amongst both boys and girls.

**TABLE IV.—RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.**

Disability.	(a)	(b)	(c)	Totals. —
	At ordinary school.	At special schools or classes.	At no school or institution.	
1. BLIND ... ..	—	27	—	27
2. PARTIALLY SIGHTED—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	—	38	—	38
(b) Other conditions of the eye, <i>e.g.</i> , cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school ... ..	—	45	—	45
3. DEAF—Grade I ... ..	*114	—	—	*114
Grade II <sub>A</sub> ... ..	*18	—	—	*18
Grade II <sub>B</sub> ... ..	—	82	—	82
Grade III ... ..	—	125	—	125
4. DEFECTIVE SPEECH—				
(a) Defects of articulation requiring special educational measures ... ..	} †421	8	—	429
(b) Stammering requiring special educational measures ... ..				
5. MENTALLY DEFECTIVE— (Children between 5 and 16 years)—				
(a) Educable (I.Q. approx. 50-70) ... ..	—	2,205	—	2,205
(b) Ineducable (I.Q. generally less than 50) ... ..	—	363	13	376
6. EPILEPSY—				
(a) Mild and occasional ... ..	—	52	—	52
(b) Severe (suitable for care in a residential school) ¶	—	—	—	—
7. PHYSICALLY DEFECTIVE— (Children between 5 and 16 years)—				
(a) Non - pulmonary tuberculosis (excluding cervical glands) ... ..	—	185	‡3	188
(b) General orthopaedic conditions ... ..	—	210	‡16	226
(c) Organic heart disease ... ..	—	91	‡9	100
(d) Other causes of ill-health	—	477	‡11	488
<i>Carried forward</i> ... ..	553	3,908	52	4,513

Disability.	(a)	(b)	(c)	Totals.
	At ordinary school.	At special schools or classes.	At no school or institution.	
<i>Brought forward</i> ...	553	3,908	52	4,513
<b>8. MULTIPLE DEFECTS—</b>				
(i) Mentally defective (ineducable) and physically defective ("general orthopaedic conditions") ...	—	—	43	43
(ii) Mentally defective (ineducable) and epilepsy (mild) ...	—	—	—	—
(iii) Mentally defective (ineducable) and epilepsy (severe) ...	—	—	20	20
(iv) Mentally defective (ineducable) and blind ...	—	—	10	10
(v) Mentally defective (educable) and physically defective ("general orthopaedic conditions") ...	—	285	—	285
(vi) Mentally defective (educable) and epilepsy (mild) ...	—	38	—	38
(vii) Mentally defective (educable) and epilepsy (severe) ...	—	—	—	—
(viii) Mentally defective (educable) and physically defective ("other causes of ill-health") ...	—	437	—	437
(ix) Mentally defective (educable) and deaf ...	—	133	—	133
(x) Mentally defective (educable) and blind ...	—	—	—	—
(xi) Other multiple defects	—	433	§22	455
Totals ...	553	5,234	147	5,934

\* Pupils examined at Routine Medical Inspection during the session.

¶ A number of cases of severe epilepsy not "suitable for care in a residential school" are lodged in Certified Institutions and the Colony for Epileptics, Bridge of Weir.

† Children attending Child Guidance Clinics during the session.

‡ Home Tuition cases.

§ Includes 7 Home Tuition cases.

**TABLE V.—DENTAL INSPECTION AND TREATMENT.**

## DENTAL INSPECTION.—

(1) NUMBER OF CHILDREN INSPECTED BY THE DENTAL OFFICERS.	1949			1948	1947
	Systematic Exam- inations.	Special & Emer- gency Cases.	Totals.	Totals.	Totals.
AGE.					
2 ... ..	10			—	
3 ... ..	20			—	
4 ... ..	22			42	
5 ... ..	3,836			4,676	
6 ... ..	4,215			5,476	
7 ... ..	3,192			4,532	
8 ... ..	2,529			3,369	
9 ... ..	2,071			3,587	
10 ... ..	1,890			3,605	
11 ... ..	1,612			3,222	
12 ... ..	637			2,148	
13 ... ..	301			1,460	
14 ... ..	345			758	
15 ... ..	7			129	
16 ... ..	—			15	
17 ... ..	—			5	
18 ... ..	—			3	
19 ... ..	—			1	
Totals ... ..	20,687	935	21,622	33,028	32,728
(1A). No. of schools in- spected ... ..	53	—	53	65	83
(1B). Half-days spent at inspection ... ..	92	—	92	134	140
(2). Found to require treatment ... ..	16,143 (78.0%)	827 (88.4%)	16,970 (78.5%)	24,503 (74.2%)	22,940 (70.1%)
(2A). Number of children accepting treatment	9,663 (59.9%)	720 (87.1%)	10,383 (61.2%)	14,854 (60.6%)	12,106 (52.8%)
(2B). Cards not returned or returned blank	782 (4.8%)	26 (3.1%)	808 (4.8%)	1,520 (6.2%)	2,143 (9.3%)
(2c). Promised private treatment ... ..	5,698 (35.3%)	81 (9.8%)	5,779 (34.1%)	8,129 (33.2%)	8,691 (37.9%)

*Note.*—The figures on this page appearing under the heading "Special and Emergency Cases" refer to pupils who, absent from school at the time of Routine Dental Inspection, were later summoned to the clinic.

## DENTAL TREATMENT.—

The figures given below refer to all children, not merely those found at Dental Inspection.

	1949			1948	1947
	System- atic Exam- inations.	Special & Emer- gency Cases.	Totals.	Totals.	Totals.
(3) Actually treated by the school dental officers	10,463	11,773	22,236	22,946	18,738
(3A). Number of the above cases where treatment was completed ...	6,076 (58·1%)	8,184 (69·5%)	14,260 (64·1%)	8,744 (38·1%)	Not available
(4). Number of attendances for treatment	26,425	30,193	56,618	52,998	48,844
(4A). Attendances, but treatment not given	1,620	1,818	3,438	3,759	4,277
(5). Fillings—					
(a) Permanent teeth	3,123	5,763	8,886	9,249	8,064
(b) Temporary teeth	3,068	813	3,881	1,076	1,457
(6). Extractions—					
(a) Permanent teeth—					
Without anaesthetic	1	—	1	19	28
With local anaesthetic	654	3,194	3,848	3,909	3,010
With general anaesthetic ...	—	—	—	—	—
(b) Temporary teeth—					
Without anaesthetic	7	17	24	35	44
With local anaesthetic	19,126	19,127	38,253	32,886	32,578
With general anaesthetic ...	—	—	—	—	—
(7). Number of administrations of general anaesthetic for extractions ...	—	—	—	—	—
(8). Other operations—					
(a) Permanent teeth—					
Scalings ...	749	1,344	2,093	3,901	3,707
Gum treatment ...	423	1,271	1,694	3,079	2,564
Silver nitrate dressings	1,519	722	2,241	1,940	2,298
Temporary fillings	1,029	2,377	3,406	4,268	3,516
Others ...	517	778	1,295	1,694	1,674
(b) Temporary teeth—					
Scalings ...	61	39	100	42	37
Gum treatment ...	107	87	194	180	417
Silver nitrate dressings	7,328	3,001	10,329	9,522	8,403
Temporary fillings	435	247	682	301	273
Others ...	130	34	164	49	125



	1949			1948	1947
	System- atic Exam- inations.	Special & Emer- gency Cases.	Totals.	Totals.	Totals.
(9). Half-days devoted to inspection ... ..	92	—	92	134	140
Half-days devoted to treatment ... ..	3,022	2,898	5,920	5,096	4,903
Half-days devoted to orthodontic treatment	Not available.		93	72	—
(10). Number of children treated under private arrangments ... ..	Not known.				
(11) Ratio of fillings to extractions (permanent teeth only) ... ..	478 : 100	180 : 100	231 : 100	235 : 100	265 : 100

*Orthodontic Treatment.*—An aggregate of 1,096 treatments was given to approximately 90 children at the school clinic, about 40 cases being completed. By special arrangement also, 67 pupils were notified to attend Glasgow Dental Hospital for orthodontic treatment and 59 of these were accepted, the remainder failing to appear.

*Other Work.*—Crowns were inserted in 7 cases, 9 artificial dentures were supplied, and X-ray examinations to the number of 56 were given.

**APPENDIX VI.—SUMMARY OF MEDICAL INSPECTION AND TREATMENT STATISTICS** (of which details are given throughout Report) showing variations from Statistics for previous year.

A. INSPECTION.

Type.	Cases 1949	Cases 1948	Cases 1947
Systematic Examinations ( <i>page 51</i> ) ... ..	49,466	47,938	47,073
Systematic Examinations— Special Schools ( <i>page 51</i> ) ... ..	1,439	1,434	1,295
Other Examinations in Schools ( <i>page 52</i> ) ...	44,480	46,490	41,053
Other Examinations mainly in Clinics ( <i>page 52</i> )	25,264	20,386	15,527
Cleanliness Examinations ( <i>page 52</i> ) ... ..	160,999	141,084	146,471
Dental Inspections ( <i>page 76</i> ) ... ..	21,622	33,028	32,728
Remand Home Inspections ( <i>page 85</i> ) ...	1,521	1,483	1,165
Totals ... ..	304,791	291,843	285,312

## B. TREATMENT.

Disease or Defect.	Cases.			Attendances.		
	1949	1948	1947	1949	1948	1947
<i>(a) MINOR AILMENTS—</i>						
EAR—						
Examined only ...	1,708	2,071	1,471	} 57,018	57,721	51,699
Clinic Treatment ...	2,384	2,570	2,162			
Aurists' Examinations	1,284	1,157	1,071	1,284	1,157	1,071
Aurists' Classifications	75	59	60	75	59	60
<i>(page 28)</i>	5,451	5,857	4,764	58,377	58,937	52,830
EYE ... .. <i>(page 31)</i>	2,406	2,513	1,939	22,559	23,360	19,542
SKIN—						
Cuts, minor injuries, etc. ... ..	2,923	2,974	2,361	} 108,423	138,182	115,539
Clinic Treatment ...	11,868	18,191	15,185			
Cleansing Clinics ...	423	513	408	695	962	652
Ringworm—Head ...	†106	126	168	106	126	154
Body ...	201	280	361	<i>Included under "Clinic Treatment."</i>		
Scabies Baths ...	*(708)	(1,841)	(3,047)	4,015	12,942	19,686
<i>(pages 28 and 31)</i>	15,521	22,084	18,483	113,239	152,212	136,031
<i>(b) DEFECTIVE VISION—</i>						
Spectacles ordered ... <i>(page 34)</i>	2,166	5,577	4,502	2,193	7,761	5,961

† Includes 7 cases from other authorities.

\* Cases are included under "clinic treatment" but attendances are shown separately.

Disease or Defect.	Cases.			Attendances.		
	1949	1948	1947	1949	1948	1947
<i>(c) EAR, NOSE AND THROAT—</i>						
Tonsils and Adenoids operations ... ..	1,966	1,137	1,670	4,903	3,488	5,111
Other operations ... ..	22	55	122	22	55	122
<i>(page 35)</i>	1,988	1,192	1,792	4,925	3,543	5,233
<i>(d) ORTHOPAEDIC—</i>						
Examined only ... ..	1,052	1,069	206	1,052	1,069	206
Treated by exercises ... ..	859	806	687	17,585	17,719	16,588
Treated by appliances	—	105	103	—	212	180
Treated outwith clinics	242	<i>Not available</i>		1,393	<i>Not available.</i>	
<i>(page 37)</i>	2,153	1,980	996	20,030	19,000	16,974
<i>(e) OTHER DISEASES—</i>						
General ... ..	6,072	8,702	7,435	18,113	23,331	19,296
Supply of Medicines	1,802	2,368	1,603	17,799	22,608	18,803
Artificial Light ... ..	1,625	1,870	1,623	21,323	24,516	22,081
Cardiac Cases ... ..	239	268	73	*16	<i>Included in "General"</i>	
<i>(page 39)</i>	9,738	13,208	10,734	57,251	70,455	60,180
<i>(f) DENTAL ... ..</i> <i>(page 77)</i>	22,236	22,946	18,738	60,056	56,757	53,121
<i>(g) REMAND HOME ... ..</i> <i>(page 85)</i>	252	339	124	252	339	124
TOTALS ... ..	67,277	86,535	71,666	344,681	404,648	361,019

\* Remainder included in "General."

**APPENDIX VII.—NURSERY SCHOOLS AND DAY NURSERIES.**

At the end of June, 1949 36 Nursery Schools were functioning under the Education Department with places for 1,380 children and there were 40 children in Southannan Residential Nursery School, Fairlie. On the same date the Public Health Department had under its management 15 Day Nurseries with about 700 places, and one Weekly Nursery for 40 children whose mothers worked on night-shifts.

Throughout the year visits were paid to the Nursery Schools by Child Welfare and School Medical Officers. The latter attended at regular intervals for the purpose of routine inspection but also examined children presented on account of defects observed by teachers ("non-routines") and those previously noted for re-inspection ("abnormals").

(Routine Inspection denotes the systematic examination, by School Medical Officers, of all children attending Nursery Schools, visits being so arranged that each pupil is surveyed annually. Medical records of every nursery school pupil are subsequently forwarded to the day school at which the child enrolls on leaving the nursery).

During the period under review, 809 children (404 boys and 405 girls) were subjected to "routine inspection," 480 were examined as "non-routines," and 59 were re-inspected ("abnormals"). The results of these examinations are given below.

**ROUTINE INSPECTION.**

(i) *Numbers and Percentages of Children Suffering from Defects (see Table II, page 56, for full details of headings).*

Nature of Defects Found.	Number Examined.		
	Boys.	Girls.	Totals.
Unsatisfactory clothing and footgear ...	1	3	4 (0.5%)
Uncleanliness of head or body ...	14	49	63 (7.8%)
Skin conditions of head or body ...	9	12	21 (2.6%)
Defective nutrition ...	23	36	59 (7.3%)
Mouth and teeth unhealthy ...	1	1	2 (0.2%)
Naso-pharyngeal conditions ...	82	75	157 (19.4%)
Eye diseases (excluding defective eyesight) ...	19	25	44 (5.4%)
Ear diseases (including defective hearing)	5	7	12 (1.5%)
Defective speech ...	12	3	15 (1.9%)
Mental and nervous conditions ...	2	2	4 (0.5%)
Defects of circulatory system ...	7	3	10 (1.2%)
Pulmonary conditions ...	27	32	59 (7.3%)
Deformities ...	31	24	55 (6.8%)
Other diseases or defects ...	20	10	30 (3.7%)

(ii) *Classification of Children according to Remediability of Major Defects Found in the Individual Child (see Table III, page 68, for full details of headings).*

Classification.	Number Examined.		
	Boys.	Girls.	Totals.
Free from defects ... ..	220	232	452 (55.9%)
Defects of mouth and teeth only ...	1	—	1 (0.1%)
Temporary ailments ... ..	92	101	193 (23.9%)
"Curable" defects ... ..	52	38	90 (11.1%)
"Improvable" defects ... ..	37	32	69 (8.7%)
Defects not "improvable" ... ..	2	2	4 (0.5%)
Totals ... ..	404	405	809

(iii) *Additional Information.*

Parents were notified of defects found in 326 instances, 39 (4.8 per cent.) of these being due to clothing, cleanliness, or minor dental defects, and 287 (35.5 per cent.) being in respect of other defects. School Medical Officers also noted 32 cases (4.0 per cent.) for re-inspection as a result of defects observed in clothing, cleanliness, or for minor dental defects, and 318 children (39.3 per cent.) having other defects. "Sound teeth" was recorded in 638 cases (78.9 per cent.) and 732 pupils (90.5 per cent.) were recorded as having had complete diphtheria immunisation.

#### INSPECTION OF NON-ROUTINE CASES.

Children to the number of 480 were presented for inspection on account of defects observed or suspected by teachers and 482 examinations were given. The individual results were as follows:—

Nits minor, 3; skin conditions, 29; eye conditions, 25; ear, nose and throat defects, 90; "general" defects, 184; defective teeth, 26; no apparent disease, 68; and other causes, 57.

#### RE-INSPECTION OF "ABNORMAL" CASES.

The total number of re-inspections was 59, and 39 of these pupils were found to be receiving treatment at school clinics whilst 9 were being treated elsewhere. Treatment was not required in 5 cases and 6 others were not obtaining the necessary treatment for various reasons.

**APPENDIX VIII.—MASS MINIATURE RADIOGRAPHY.**

The Education Health Service continued to arrange with the Mass Miniature Radiography Centre for the x-raying of pupils attending Glasgow schools. Children mostly of 13 years and over were dealt with, a miniature photograph being taken of each and any case of apparent abnormality being recalled for a large film.

In the course of Session 1948-49, pupils to the number of 17,377 (8,906 boys and 9,471 girls) were examined at the Ashley Street Centre and at other centres temporarily set up for local convenience. The number was the highest recorded since the scheme commenced in 1944-45.

Details of those examined during the year, together with the abnormalities discovered, are shown in the tables below, particulars of 13-year-olds being separately arranged. Totals of the previous two years are added for purpose of comparison.

NUMBERS AND PERCENTAGES OF CHILDREN EXAMINED AT  
THE MASS RADIOGRAPHY CENTRES.

*All Ages.*

	1949			1948	1947
	Boys.	Girls.	Totals.	Totals.	Totals.
Number examined.	8,906	9,471	17,377	12,231	10,943
Abnormal conditions found—					
Active pulmonary tuberculosis	36 (0·4)	62 (0·6)	98 (0·6)	49 (0·4)	46 (0·4)
Inactive pulmonary tuberculosis	24 (0·3)	34 (0·4)	58 (0·3)	87 (0·7)	100 (0·9)
Healed primary pulmonary tuberculosis	790 (8·9)	704 (7·5)	1,494 (8·6)	781 (6·4)	844 (7·7)
Non-tubercular conditions (previously known or unknown)	784 (8·8)	656 (6·9)	1,440 (8·3)	1,078 (8·8)	1,091 (10·0)
Totals ... ..	1,634 (18·3)	1,456 (15·4)	3,090 (17·8)	1,995 (16·3)	2,081 (19·0)

*Thirteen Years.*

	1949			1948	1947
	Boys.	Girls.	Totals.	Totals.	Totals.
Number examined	4,074	4,484	8,558	6,576	9,225
Abnormal conditions found—					
Active pulmonary tuberculosis	17 (0·4)	28 (0·6)	45 (0·5)	21 (0·3)	39 (0·4)
Inactive pulmonary tuberculosis	7 (0·2)	15 (0·3)	22 (0·3)	50 (0·8)	87 (0·9)
Healed primary pulmonary tuberculosis	379 (9·3)	386 (8·6)	765 (8·9)	380 (5·8)	718 (7·8)
Non-tubercular conditions (previously known or unknown)	286 (7·0)	295 (6·6)	581 (6·8)	624 (9·5)	946 (10·3)
Totals ... ..	689 (16·9)	724 (16·1)	1,413 (16·5)	1,075 (16·3)	1,790 (19·4)

**APPENDIX IX.—MEDICAL SUPERVISION OF REMAND HOME.**

From the beginning of the session the School Medical Officers, on a weekly rota, undertook the medical supervision of children in the Home, and were available to be called out at any time of the day or night on request. The children were examined shortly after admission and immediately prior to dismissal, and at other times considered necessary by the Medical Officer or the Superintendent.

Details of the examinations and the numbers treated for ailments were as follows :—

	Boys.	1949 Girls.	Totals.	1948 Totals.
Examined ... ..	1,423	98	1,521	1,483
Treated in the Home	140	5	145	180
Treated at Clinic ...	5	—	5	7
Sent to Hospital ...	3	—	3	2

In addition to the foregoing, 99 children (83 boys and 16 girls) were treated in the Home for pediculosis capitis.



**APPENDIX X.—DIPHTHERIA IMMUNISATION CAMPAIGN.**

During the spring a diphtheria immunisation campaign in the schools was undertaken but it differed in some respects from previous annual "drives." It was launched earlier than usual (in February, 1949) in order to make available a greater margin of time in the latter part of the year for overtaking routine inspection and other normal school health work unavoidably disrupted during the period of the campaign. The principal difference, however, was the inclusion of "re-inforcing" doses in the offer of immunisation made to school children during this period only.

In former years it had not been considered practicable or advisable to offer re-inforcing injections in school to all children in primary classes and only nine-year-olds were attempted, children of other ages being referred to the regular diphtheria immunisation clinics which were open all the year round. As a result, complaints were received each year from the clinics of inability to cope with the demands for re-inforcing doses. As a remedy and because it was felt that more children would avail themselves of the facilities in the familiar surroundings of the school, the general offer of immunisation was extended to all pupils in primary classes who had never been immunised or whose last immunisation was more than four years previously. The response to the appeal was most gratifying and was in great measure due to the enthusiastic co-operation of the school teaching staffs.

In the table on the next page a comparison is given of the numbers of children immunised during each of the school years 1948 and 1949, and showing those dealt with (*a*) by School Medical Officers in the schools, and (*b*) at the diphtheria immunisation *ad hoc* clinics.

		At Schools.			At Clinics.		
		Under 5 years.	Over 5 years.	Totals.	Under 5 years.	Over 5 years.	Totals.
First Injections	1949	Not available.		7,512	8,081	245	8,326
	1948	Not available.		10,391	10,833	605	11,438
Final Injections	1949	394	4,882	5,276	7,811	695	8,506
	1948	1,006	8,272	9,278	10,110	954	11,064
Re-inforcing Doses	1949	Not available.		22,645	141	789	930
	1948	Not available.		3,494	168	3,465	3,633
Total Nos. of Injections	1949	Not available.		35,433	16,033	1,729	17,762
	1948	Not available.		23,163	21,111	5,024	26,135

A study of the figures clearly brings out the following points :—

- (i) The total injections given in 1949 showed an increase of nearly 4,000 over 1948.
- (ii) This increase was entirely due to the unprecedented demand for re-inforcing doses at schools.
- (iii) The number of injections given by School Medical Officers in the *schools* was twice that given at the regular clinics during the year 1949.
- (iv) Total injections in 1949 compared with 1948 showed an increase for schools of 12,300 and a reduction at clinics of 8,300.

It should be noted also that 99 per cent. of the children immunised at schools were dealt with during the few weeks of the campaign.

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