[Report 1952] / School Medical Officer of Health, Glasgow.

Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
https://wellcomecollection.org

CORPORATION OF GLASGOW

Health and Welfare Department

EDUCATION HEALTH SERVICE

REPORT

ON THE

Medical Inspection and Treatment of School Children

FOR THE YEAR ENDED 31st JULY, 1952

Ordered by the Committee on Health and Welfare to be printed

W608

CORPORATION OF GLASGOW

Health and Welfare Department

EDUCATION HEALTH SERVICE

REPORT

ON THE

Medical Inspection and Treatment of School Children

FOR THE YEAR ENDED 31st JULY, 1952

Ordered by the Committee on Health and Welfare to be printed

W608

CONTENTS.

STATISTICAL AND OTHER APPENDICES.

GENERAL INTRODUCTION

This REPORT is the forty-third since the establishment of medical inspection in Glasgow in the year 1909, the twenty-second since the transfer to the Health Department in 1930, and the fourteenth since the form of report was recast following the introduction throughout the country of a uniform method of recording at the request of the Department of Health for Scotland.

The session was one which, in retrospect, can be viewed with a certain degree of satisfaction. Despite the almost inevitable fluctuations of staff, the general scheme of work proceeded without major interruption, the planned programme being completed within the period. It was also found possible to effect some reorganisation of effort in respect of various activities directly, or indirectly, connected with the School Health Service.

School medical officers devoted more time than in the previous year to the basic work of systematic inspection and treatment. More periods were also spent on certain other duties, notably those relating to the examination of children for residential schools and school camps, the general inspection of schools (including the sanitary arrangements therein) and the examination of pre-vocational students and school meals' service employees.

In the course of routine medical inspection, school medical officers examined 51,349 pupils attending " ordinary " schools—the largest number previously seen in any one year since 1938. The phenomenal increase was due mainly to the influx of five-year-old children.

The results of routine inspection were gratifying. In respect of most defect groups, fewer children were found to be suffering from one or other of the listed ailments and 42·8 per cent. of all pupils examined were recorded as having *no defect* of any kind—a percentage which was the highest ever recorded in these Reports. Moreover, of those with any disease, fewer than ever before were discovered with the less remediable type of malady. Average measurements also showed general improvement, only the weights of the five-year-olds (particularly of the girls) failing to conform to pattern. As evidence of the improved physique of the Glasgow school child in the post-war years, the increases

in the average heights and weights at three ages are given in the Table below, ranged according to sex.

	Increase at 1952 compared with 1945.	
	Boys.	Girls.
5-*year-olds* ...	0·48 ins., 0·50 lbs.	0·43 ins., 0·37 lbs.
9-*year-olds* ...	0·56 ins., 1·02 lbs.	0·42 ins., 1·08 lbs.
13-*year-olds* ...	0·62 ins., 1·65 lbs.	0·32 ins., 1·75 lbs.

Increased attendances at school clinics were reported for most groups of minor ailments. Many of the increases were due either to the provision of additional facilities, or to the tendency of pupils to resort more and more to the school clinic for treatment of superficial conditions which frequently were cured after one visit. Skin diseases furnish an example of the latter ; cuts and bruises, etc., and " single visit cases " supplying a fair proportion of the total numbers treated. Improved facilities resulting in increased numbers of cases being discovered and treated are exemplified in ear diseases (including children with defective hearing), in connection with which the audiometric survey scheme was reorganised, minor cases were " screened " by experienced school medical officers, and teachers and others were encouraged to report any child suspected of defective hearing. Incidentally, hearing aids were supplied to a record number of school children during the year.

The School Eye Service maintained steady progress, the continued assistance of the oculists allotted by the Hospital Board organisation enabling more children to be seen at refraction clinics. The greatest number of new spectacles since the year 1948 was supplied to the children during the session. In this connection, a free range of spectacles is now available to school children of all ages and, in addition, special provision is made for older pupils.

Another scheme which continued to function satisfactorily was that relating to the treatment of heart cases. Dr. Rogen, the cardiologist, in a published article, from which extracts have been included in this Report, traces the progress of the scheme since its inception in 1947. It is noteworthy that out of the total children proved to have heart disease, less than 30 per cent. were considered unfit for any form of physical exercise.

The perennial problem of uncleanliness was dealt with even more vigorously than before. Hygiene units were reorganised, cleanliness

inspectresses re-examined more children than in any year since 1942 (the year in which the scheme was initiated) and more prosecutions than ever before were successfully undertaken. The mobile spray bath unit continued to operate at selected schools and children in many other schools were encouraged to use the fixed spray baths available.

Co-operation with the Hospital Boards was continued, the assistance of the various specialists and the use of hospital facilities being invaluable. The provision of more hospital accommodation resulted in increased numbers of children with enlarged tonsils and/or adenoids being admitted for operation to various institutions, and in more orthopaedic cases (many suffering from disability following poliomyelitis) being treated in Mearnskirk Hospital.

Attention is also directed to the continued improvement with regard to scabies. In Appendix XIV, the rise and fall over a period of years is described and illustrated by graphs.

Routine dental inspection was carried out in additional schools and as a result of the greater numbers inspected, the percentage of those requiring treatment showed some increase. The total numbers treated at dental clinics were fewer but more fillings were performed; the ratio of fillings to extractions (permanent teeth) increasing to 238 : 100 compared with 227 : 100 in the previous year. More orthodontic cases were dealt with and X-ray examinations were also more numerous. Increased numbers attended the general anaesthetic clinic, while fewer were treated at the emergency dental clinic probably because private practitioners found themselves able to accept more of such cases.

Other items of interest appearing in this Report are (*a*) the graphs of the average heights and weights of Glasgow school children each year since 1943, and (*b*) the appendix devoted to the mortality of children aged five to fifteen years. In the latter connection it will be noted that road traffic fatalities were fewer than in 1951 (the first year in which this particular section was included in the Report) and that diphtheria claimed three victims, none of whom had ever been immunised although immunisation facilities are provided to an extent as never before.

The usual information, abridged where full details were previously given, has again been supplied, a note on scabies (as mentioned above) being substituted for the information on housing conditions which appeared in Appendix XIV of last year's report.

I wish to express my gratitude and appreciation to the Conveners and members of both Health and Welfare and Education Committees for their continued interest in the work of the School Health Service; their support at all times is an encouragement to the staff to give of their best. To the Director of Education, officials of the Education Department, Head Teachers and Class Teachers, I also offer thanks for their valuable co-operation and assistance.

Finally, I would gratefully acknowledge the help willingly rendered by the Medical, Dental, Nursing and Clerical staffs throughout the year and, in particular, my thanks are due to Mr. James A. Stewart, Chief Administrative Clerk, for his assistance in collating the statistical and other information which this Report comprises.

JAMES EWAN,
M.B., Ch.B., D.P.H., D.P.A.,
Principal Medical Officer.

155 BATH STREET,
GLASGOW, C.2.
6*th February*, 1953.

1.—LIST OF STAFF

(*a*) *WHOLE-TIME STAFF.*

1 Principal Medical Officer ; 2 Assistant Principal Medical Officers (1 for Child Guidance Work) ; 19 School Medical Officers (1) ; 1 Chief Dental Officer ; 16 School Dental Officers ; 1 Superintendent School Nurse ; 71 Nurses (including 7 employed as Cleanliness Inspectresses) (2) ; 2 Speech Therapists (3) ; 2 Audiometricians ; 2 Physiotherapists (4) ; 1 Chief Clerk ; 35 Clerks (5) ; 16 Dental Attendants ; 1 Default Officer.

(1) *Dr. George T. Donald resigned from the staff on* 22-9-51 *and Dr. Margaret E. Chapman resigned on* 15-7-52. *Dr. Margaret McKay and Dr. Flora C. Cowan were appointed to the staff on* 7-1-52 *and* 1-5-52 *respectively.*

(2) *During the session* 10 *nurses resigned and* 8 *were appointed.*

(3) *During the latter part of the session Miss Coats and Miss Main resigned.*

(4) *Miss Jessie J. Alexander and Miss Sheila H. Smart were appointed on* 3-9-51.

(5) *During the session,* 4 *clerks resigned and* 4 *were appointed.*

(*b*) *PART-TIME STAFF.*

2 Dentists ; 11 Consultants ; 1 Dental Attendant.

Local doctors and dentists undertook emergency duties at the residential schools and at Mossbank Approved School in accordance with separate arrangements made with the local Executive Councils.

Other members of the staff, primarily engaged in the dental treatment of ante-natal patients and nursing mothers, are detailed below. The whole-time staff devoted a small proportion of their time to school dental work.

ANTE-NATAL DENTAL STAFF.

Whole-time.

1 Dental Officer ; 2 Nurses ; 5 Workshop Technicians.

Part-time.

1 Dental Officer ; 1 Nurse.

Of the total of 10,740 periods (half-days) worked by the School Medical Officers, 9,200 were given to the work of Medical Inspection and Treatment and 1,540 periods were devoted to other work as follows :—residential school examinations, 307 ; junior club and school

camp examinations, 327 ; holidays abroad, 24 ; harvesters' examinations, 129 ; diphtheria immunisation, 507 ; general inspection of schools, 117 ; examinations of school meals' service staff, 99 ; and 30 periods to examinations of pre-vocational and nursing students and printers' apprentices.

Of the total of 8,468 working periods, School Dental Officers devoted 8,344 periods to the normal work of Dental Inspection and Treatment, and 124 periods to duties (including holiday relief) in the Ante-Natal section.

Included in the working periods shown above is the time spent on administrative duties by the Principal Medical Officer, the Assistant Principal Medical Officer and the Chief Dental Officer, as well as the half-days allocated to the meetings of both medical and dental staffs.

2.—GENERAL STATISTICS

Area of City in acres		39,725
Population of the area (estimated) ...		1,087,400
Density of Population per acre ...		28
Number of Schools—		
(*a*) Primary	160	
(*b*) Junior Secondary	48	
(*c*) Senior Secondary	29	
(*d*) Schools for Handicapped Children	23	
(*e*) Approved Schools	1	
(*f*) Residential Schools ...	12	
(*g*) Nursery Schools	40	
(*h*) Hospital Schools	5	
(*i*) Agricultural Schools ...	1	
(*j*) Gardening Schools	1	
(*k*) Occupational Centres ...	9	
Total Schools Under Education Authority	329	
(*l*) Schools in receipt of grant and under medical inspection	4	
		333
Average number of children on register ...		173,037
Average number of children in attendance...		154,716 (89·4%)

3.—SANITARY CONDITION OF SCHOOLS

School Medical Officers acting under Section 20 (4) of the Education (Scotland) Act, 1946, paid a total of 117 visits to 112 schools (including nursery and residential schools). General inspection of the premises in each instance was undertaken, special regard being given to lighting, heating, ventilation and to the sanitary arrangements. Moreover, on the occasion of each visit, the Head Teacher and class teachers were interviewed by the School Medical Officer who took the opportunity of discussing with them the health and well-being of their pupils and giving advice in particular cases.

Of the schools visited, 25 were returned as " nothing to report " and the various defects found in the remainder by the Medical Officers were notified to the appropriate section of the Education Department for consideration and, if practicable, necessary action. In some instances, the defects were attributable to the age of the buildings and could not easily be rectified.

The principal defects reported were—inadequacy of washing facilities, including the absence of hot water, (27) ; inadequacy of lavatory accommodation, (20) ; disrepair of lavatories, (20) ; insufficiency of cloakroom accommodation, (18) ; defects of lighting and heating, (18) ; disrepair of playground surfaces and lack of sufficient shelters, (18) ; and absence or inadequacy of a medical inspection room, (15). Other complaints included the disrepair or insufficiency of drinking fountains (10), insufficiency of classroom accommodation (5), and various other defects, mostly structural.

The Property Section of the Education Department in their annual report give details of the work wholly completed during the year ended 31st July, 1952 (exclusive of work carried out on a jobbing basis) in schools and other educational establishments. A summarised version of the report is given below, the number of establishments affected in each instance being shown in parenthesis.

Heating. Installation or overhauling of boilers ; new radiators ; installation of piping ; installation or alteration of heating system. (28).

Lighting. Installation of or alterations to electric lighting. (22).

Washing facilities. Installation or renewal of baths, shower fittings, wash-hand basins, sinks, water heaters and hot water supplies. (25).

Water supply. Installation or renewal of drinking fountains and storage cisterns ; installations of and alterations to supplies ; renewal of supply pipes and mains. (32).

Lavatories. New W.C'S. and cisterns ; renewal of or repair to existing lavatories. (19).

Playgrounds, etc. Provision of and repairs to playgrounds, footpaths and boundary walls. (38).

New accommodation and alterations. Cloakrooms ; classrooms ; staffrooms ; janitors' houses ; hygiene and medical rooms ; bathrooms ; playing fields ; coal bunkers ; incinerator ; new buildings. (89).

Floors and stairs. New flooring or re-surfacing of halls, classrooms and gymnasia ; tiling. (17).

Roofs, walls, ceilings, etc. Provision, renewal or repair of chimneys, roofs, gutters, conductors and walls. (48).

Miscellaneous. Fencing, railings and gates, (11) ; linoleum and furnishings (exclusive of supplies by requisition), (29) ; wireguards or panels for windows, radiators and heaters, (29) ; fire extinguishers, (39) ; Rayburn cookers, (7). New Dining Rooms, (11) and Kitchens (2) were opened during the year, 5 Dining Rooms were closed, and there were some alterations and improvements made to existing centres. (22).

4.—ORGANISATION AND ADMINISTRATION

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

See Report for 1949, page 11.

Inspection

The scheme of inspection in Session 1951-52 was carried out in accordance with the requirements of the Secretary of State for Scotland as set out in D.H.S. Circular No. 76/1951, dated 1st August, 1951, and is shown below. Statistical and other details are given elsewhere in this Report. Arrangements in connection with Nursery Schools will be found in Appendix VII, page 82.

In *ordinary* schools the systematic (routine) medical inspection was as follows :—

(*a*) Children in the Infant Department who had not previously been subjected to detailed routine inspection (" Entrants-Infants ").

(*b*) Children born in 1938 (" Leavers ").

(*c*) Children born in 1942 (" Intermediates ").

(*d*) Children born in 1935 (" Secondary Pupils ").

(*e*) Children born in 1944 (Vision and hearing only).

Groups (*a*), (*b*), (*c*) and (*d*) were presented in the order stated above and 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.

Other inspections made were :—

(*a*) Pupils outwith the groups already named who were specially presented at any inspection on account of disease or defect observed by teacher.

(*b*) Pupils approaching " fixed dates " for leaving school presented for " Leaving Interviews."

(*c*) Pupils found at previous inspection to be suffering from disease or defect who were presented for re-examination at intervals determined by the School Medical Officer.

In schools and classes for *physically* and *mentally handicapped* children routine medical inspection was also provided ; the groups examined were : " entrants " (which included children of any age who had not previously been examined), " intermediates " and "leavers " (pupils approaching 15 or 16 years of age). In addition, *physically handicapped* pupils were specially examined twice annually with a view to fitness for ordinary school, on approaching 12 years of age as to secondary education and at intervals before leaving with regard to fitness to enter employment. *Mentally handicapped* pupils were examined biennially with regard to fitness for ordinary school and at intervals as required and before leaving by the visiting Psychiatrist.

Other arrangements continued throughout the Session included Routine Dental Inspection by dental officers of pupils in selected schools, Cleanliness Inspection by nurses, Diphtheria Immunisation (including an annual campaign in schools), Mass Radiography of children when the Unit was available, and the General Inspection of schools by medical officers.

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 Ray	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	—	—	1	—
Henderson Street School, N.W.	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	4	—	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	2	—	1	1	1
20 Harriet Street, S.3	1	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	—	—	—	—

Harriet Street Orthopaedic Clinic instituted October, 1951.
Crail Street " A " Dental Clinic re-introduced 19-11-51.
Calton Dental Clinic open one day only per week regularly from 19-11-51.

Additional medical facilities were again available for school children in hospitals administered by the Western Regional Hospital Board. Arrangements for tonsils and adenoids operations were continued in the various hospitals as well as facilities for X-ray examination and for operative and other treatment of children referred from the school clinics for ear disease. Heart and orthopaedic cases were admitted to hospital as and when advised by the respective consultants.

All treatment at clinics or in hospital 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.*

See Report for 1949 (page 14).

The scheme of inspection and treatment in the period under review was similar to that introduced in 1949, but more schools were added to the list of those coming under Routine Dental Inspection.

Details of the year's work, including extracts from the report of the Chief Dental Officer, are given on page 36 and in Table V, pages 76 to 78.

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

See Report for 1949 (page 15).

The " nursing " staff, including supervisor, cleanliness inspectresses and dental attendants, devoted 41,836 working periods (half-day) to the work of medical inspection and treatment of school children (including home visitation), 307 to examinations of children proposed for admission to residential schools, 480 to examinations in connection with holidays abroad, junior club and school camps and harvesting, 507 to diphtheria immunisation, 99 to examinations of school meals' staff, and 30 periods to examinations of pre-vocational and nursing students and printers' apprentices—total periods, 43,259. Home and other visits totalled 1,592 and nurse inspectresses from the Sanitary Divisions also visited 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.*

See Report for 1949 (page 16).

Co-operation with the Child Welfare section in connection with the *Diphtheria Immunisation ad hoc* clinics was continued throughout the Session. In Appendix X, page 85, details of the Annual Campaign in Schools are given.

Liaison with the *Children's Department* and the *Probation Department* was maintained, particularly with regard to the psychiatric examination of children under their care.

The medical examination of students attending *pre-vocational courses* was continued and 273 of these students were examined during the Session.

School Meals' Staff Examinations. During the year 884 employees in school meals' kitchens were examined by School Medical Officers. The results of the examinations were as follows :—

	New Staff.	*Old Staff.*	*Total.*
Number certified fit	227	592	819
Number failed to attend ...	1	—	1
Number certified unfit	58	6	64
	286	598	884

The diseases or defects which caused rejection were :—

Old Staff ... ... Otorrhoea, 2 (now fit) ; albuminuria, 2 (1 now fit) ; varicose phlebitis, 1 ; tuberculosis, 1.

New Staff ... ... Tuberculosis, 7 ; varicose veins, 6 ; uncleanliness (including nits, vermin) 13 ; heart conditions, 3 ; high blood pressure, 7 ; skin disease, 2 ; albuminuria, 2 ; oral hygiene, 4 ; hernia, 2 ; pes planus, 2 ; miscellaneous, 10.

Close co-operation with the *Youth Employment Service* has existed since its inception, information being forwarded regarding the health of children about to leave school, especially as to their unsuitability for employment in certain occupations. Recently, there has been a closer liaison with the adoption of a permanent arrangement whereby the School Medical Officer, immediately after the final " passing-out " examination of handicapped pupils, consults with the local Youth Employment Officer and discusses, in the light of the physical disability of each pupil, the most suitable type of available employment for each. As a result, an even greater safeguard has been provided against the dangers of placing physically handicapped children in employment which might be injurious to their health or aggravate existing disabilities.

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

See Report for 1949 (page 19).

The Education Health Service co-operated with the *University of Glasgow* in connection with the curriculum for the Diploma in Public Health—arrangements were made during the year for 33 students to visit various schools and school clinics.

The Service also co-operated with the *Joint Committee of the Institute of Child Health, the Society of Medical Officers of Health and the Population Investigation Committee* in a national survey of the health and development of children born in a certain week in March, 1946. Approximately 140 homes were visited by school nurses, and school medical officers examined the children at clinics. The relative schedules were completed and subsequently forwarded to the Joint Committee.

The *infectious diseases hospitals* referred 145 school children (post-pneumonia cases) to Education Health Service clinics for examination and after-care. Of the number reported, 31 failed to appear or intimated that they were receiving private treatment, 11 were found to be requiring no further attention, 13 were dealt with at the " general " school clinics, 12 were referred for convalescent holidays, 3 were given orthopaedic treatment and 1 was recommended for tonsils and adenoids operation. The remaining 74 were referred for artificial light therapy.

School clinics referred 342 school children (208 boys and 134 girls) to *hospitals* during the session. The ailments from which they suffered were as follows :—

	Boys.	Girls.
Skin—		
Wounds, etc. (minor injuries) ...	126	73
Fractures	28	7
Other skin conditions	38	36
General	6	8
Eye	7	7
Ear, nose and throat	3	3
	208	134

Biggart Hospital Home, Prestwick, continued to allocate 40 beds for Glasgow school children selected by the Education Health Service. During the year, 200 children were summoned to school clinics for preliminary medical examination ; of the 164 who attended, 140 were considered suitable for admission to the Home.

Medical examination of 17 children going to the Children's Village, Humbie, was undertaken at the request of the *Invalid Children's Aid Association.*

Private medical practitioners were communicated with on 25 occasions regarding children who had been absent from school for long periods and were informed of the special treatment facilities available through the Education Health Service. The ailments from which these children suffered were :—skin diseases (2), chest conditions (7), ear, nose and throat defects (2), rheumatism (5) and other diseases (9).

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

The co-operation of the teaching staffs was again available throughout the session and, as has been stated on many occasions in the past, the assistance given by teachers is invaluable in facilitating not only the work of medical supervision and treatment but in connection with the other schemes bearing on the health and well-being of school children. Special reference may be made to the annual diphtheria immunisation campaign, the success of which is due in no small measure to the enthusiastic assistance of the teachers and to their encouragement of the children.

Attendance of parents at the routine medical inspection of their children was again poor, falling to the lowest percentage (58·8) ever recorded in these Reports. On this occasion, moreover, the percentage of parents accompanying girls in the " entrant " group was considerably reduced. It cannot be over-emphasized that the presence of parents when their children are being examined is of great value—in the case of the younger pupils almost essential—in order that the medical officer may obtain at first hand particulars of the medical history and discuss with parents matters affecting the health of their children.

Several lectures bearing on the health of the school child were given during the year by medical officers and dental officers to parents', teachers' and other organisations.

5.—THE FINDINGS OF MEDICAL INSPECTION

GENERAL REVIEW

(Detailed statistics on pages 45 to 70).

The average number of children on the register of all schools during 1952 was 173,037 compared with 172,382 in 1951 and 173,306 in 1950. Additional schools were opened during the session, 3 primary, 3 nursery and 1 hospital school.

Table I (pages 45 and 46) shows the total number of school children, in the various groups, examined during the year ended 31st July, 1952, and similar statistics for the previous two years are given for comparison. In the period reviewed, 51,349 pupils attending "ordinary" schools, were systematically examined—the greatest number of children in this category to be examined in any previous year back to 1938—most of the increase being in the entrant/infant group. More handicapped children were systematically examined in 1952 than in 1951 but the total was otherwise the smallest since 1946.

Fewer children with defects suspected by teachers were seen, but practically all other examinations *in schools* continued to increase. Total examinations *mainly at clinics* again showed a slight increase, reductions in some groups offsetting increases in others. Cleanliness inspections by nurses, however, resulted in the largest number of children being examined for this purpose in schools since the year 1942.

The total number of pupils inspected, systematically or otherwise, during the 1952 school session, was the greatest since 1940, the year of emergency inspections undertaken prior to evacuation.

Appendix Ia, page 47, gives the numbers and percentages of children in the routine age-groups who were notified to parents as requiring treatment for certain defects observed by the School Medical Officer. Further information regarding notification to parents is recorded in Appendix IIa, page 56, and it will be observed that slightly fewer children were notified for "other defects" but that there was an increase in the numbers notified in respect of clothing, cleanliness or minor dental defects.

Appendix Ib, page 48, shows the age distribution of the children at the date of systematic examination. The increase in the entrant/infant group, to which reference has been made above in connection with Table I, will be seen to have been due mainly to the examination of more five-year-olds than usual—the largest number, in fact, since 1931.

In Table II, pages 50 to 55, the results of the routine medical inspection of all children in schools, during the period, are arranged

in the selected age-groups and according to the numbers and percentages of the pupils in each group found to be suffering from the listed defects. Totals for each of the years 1951 and 1950 are supplied for comparison. The following points of interest may be noted :—

Unsatisfactory clothing improved to the best percentage (*0·1*) ever recorded and *unsatisfactory footgear* equalled the previous best (*0·1*) of the year 1950. Assessment of these conditions, as invariably remarked in these Reports, may differ according to the individual standards of medical officers but, on the whole, it is reasonable to assume that inadequacy of clothing or footgear, such as to affect adversely the health of the Glasgow school child, is seldom encountered at the present time.

Uncleanliness continued to deteriorate, the percentage (*11·3*) being the highest for some years. The increase was again due to nits of the head, the major conditions being no worse and, in some instances, even better than in previous years.

Skin conditions (*1·9%*) were slightly less numerous than in 1951 and fewer, except for 1950, than in any previous year. The smaller number of impetigo cases was responsible for the improvement over 1951.

Defective nutrition—another condition tending to be judged by varying standards—showed an improved percentage (*5·4*) over that of 1951 and was better than in any year prior to 1949. The greatest improvement was in the " slightly defective " class.

Mouth and teeth unhealthy (that is, any gross condition amounting to oral sepsis), was less frequently recorded. Here again, no precise standard is applicable and any conclusion must be indeterminate.

Naso-pharyngeal defects were fewer than in 1951 and the percentage (*9·6*) was better than in any year prior to 1949. Reductions in the numbers of observation cases of both nasal obstruction and tonsils' enlargement were offset by a slight increase in the number of nasal obstruction cases recommended for operation.

External eye diseases at *4·1%* were improved to the extent that in only one instance (the year 1949) was there a better percentage ever recorded ; blepharitis and strabismus cases were responsible for the reduction.

Defective vision was also much improved, the percentage (*14·0*) being the best, except for 1949, than in any previous year—" fair " vision was responsible for the more satisfactory position.

Ear diseases were slightly fewer than in the previous year, but more cases of mildly defective hearing were recorded.

Speech defects showed slight increase, the percentage (*0·9*) being the highest since 1947 ; *mental and nervous conditions* (*0·3%*) were slightly more numerous than in 1951, the year in which the percentage was the lowest ever recorded ; and *diseases of the circulatory system*, although at *1·4%* being not so good as the 1951 figure, compared favourably with any previous year.

Diseases of the lungs (*2·7%*) improved to equal the best percentage previously recorded (the 1950 figure)—fewer catarrh cases being responsible ; *deformities* also improved to *1·5%* which was, excepting for the years 1950 and 1949, better than in any year since 1941 ; *infectious diseases* were again negligible, and *other diseases or defects* fell to *3·0%*, the best, with the exception of that returned in 1950, percentage ever recorded.

Appendix IIa, page 56, provides additional information extracted from the statistical returns of routine medical inspection. The *attendance of parents* at the systematic examination of their children was again the smallest recorded, the considerable fall in the percentage of those accompanying daughters in the entrants' group being remarkable. More parents were notified of conditions requiring treatment but fewer children were noted for re-inspection. Exclusions from schools were again the smallest for many years. The percentage (*42·8*) of children with *no recorded defect* was the highest ever appearing in these Reports. *Sound teeth* was recorded more frequently and the percentage (*65·9*) was superior to that in any other year. *Visual acuity* of children showed improvement, the percentage of " good " sight among those wearing glasses being the best for many years. More pupils were found to be protected against diphtheria than in any previous year, in contrast to smallpox vaccination where the percentage of children found to be protected was smaller than in 1951—the first year in which the information was recorded.

In Appendix IIb, page 58, the results of the partial examination of children born in 1944 are given and totals for 1951 and 1950 have been supplied for comparison. The percentage with good vision was

again improved and that for hearing compared favourably with preceding years. The average heights and weights of school children are shown in Appendix IIc, page 59. Nine and thirteen-year-old children showed more or less consistent increases for height and weight, while the five-year-olds showed increases for height but not for weight.

Table III, page 66, attempts to classify the results of systematic medical inspection according to the remediability of the major defects observed in the children. The percentage (*66·4*) of children free from defects (other than clothing, cleanliness or minor dental defects) was an improvement over 1951 and was, in fact, only exceeded once (in 1949) since the introduction of this particular table in 1939. As already stated, in the notes referring to Appendix IIa, the percentage of children with no defect of any kind was the highest ever recorded.

Appendices IIIa and IIIb, page 68, give fuller details of certain "other examinations" listed in Table I—notably the results of the examination by medical officers of children specially presented by teachers on account of suspected defects ("non-routines"), the re-examination of pupils seen on a previous occasion ("abnormals"), the inspection of children proceeding to holiday camps or to harvesting, and the cleanliness inspections undertaken by nurses. Appendix IIIc, page 70, gives a description of the reorganisation of the Hygiene Units and detailed results of two general inspections made during the session.

The results of medical inspection in nursery schools are given in Appendix VII, page 82.

6.—MEDICAL TREATMENT

GENERAL REVIEW

(Detailed statistics on pages 23 to 36).

With few exceptions, attendances at school clinics continued to increase. In some instances this was due to administrative improvements, including the adaptation of existing facilities, by means of which increased provision was enabled to be made for the treatment of children suffering from certain ailments; notably ear, nose and throat conditions (including tonsils and adenoids operations) and defects of hearing and vision. The decreases were mostly found in connection with diseases which had shown some decline over a number of years; e.g., external eye and "general" conditions. Statistical and other information relating to the work during the Session will be found in succeeding pages and brief explanatory notes concerning each group of defects are given below.

Minor injuries cases again showed increased attendances, attaining the highest level since 1939 and thus confirming the tendency observed over some years for the school clinic to be used more and more by children for treatment of superficial ailments.

Ear diseases were more numerous than of late, new cases seen by specialists being the largest in number since the year 1949 and those put on treatment at the clinics being larger than in any previous year since 1948. Otorrhoea, retracted membrane and wax were mainly responsible for the increased numbers at clinics and of the recommendations by specialists, X-ray examinations and hospital treatment formed a larger proportion of the total than usual.

Fewer children with *defective hearing* were classified by the certifying aurist owing to the latter's prolonged absence from duty. Increased numbers of hearing aids were supplied to school children during the year. Audiometric survey cases were dealt with on a larger scale and the treatment figures were correspondingly increased.

Eye disease patients were fewer in 1952 compared with those treated in three of the four immediately preceding years. This more or less steady decline is due, in the main, to the reduced incidence of conjunctivitis, cases of which were less numerous in 1952 than in any previous year back to 1942.

New cases of *skin disease* were again slightly increased, although the total was still far below the comparatively high figure for 1948. Warts and "single visit cases" (*i.e.*, cases of minor defect treated and discharged at the time of the one and only visit necessary or children with no apparent disease) were principally responsible. Scabies continued the remarkable decline to which reference has been made in previous Reports and dropped to the lowest figure ever recorded—see page 91 for special note on the improved scabies position over a number of years. The special cleansing clinics reported a slight increase in the numbers attending; ringworm cases were also slightly more numerous but, for obvious reasons, fewer children received the special bath treatment for scabies.

Increased numbers of children with *defective vision* were examined at refraction clinics, the total being the largest since 1948. Spectacles were also supplied in greater numbers but just failed to reach the total of 1948 which was previously the highest since 1939.

Operations for the removal of enlarged tonsils and/or adenoids were more numerous than in 1951 as the result of additional hospital

periods being obtained for this work. Fewer children were given operations for other ear, nose and throat conditions.

Orthopaedic cases were admitted in greater numbers to Mearnskirk Hospital during the year, a considerable proportion of these being children suffering from disability following poliomyelitis—this type of case was also prominent in a steadily growing hospital waiting list. Fewer children were examined at clinics by school medical officers but there was a slight increase in the number of patients seen by the visiting orthopaedic surgeon. New cases put on treatment at the clinics were fewer than for some years past but attendances were much increased. Less children were treated outwith the clinics but more exercise classes were held at special schools.

" General diseases " treated at clinics were fewer than in 1951 and, except in 1950, fewer than in any other year since 1943. Moreover, the decline since 1948, which had been remarked upon in previous Reports, has merely been resumed following the brief interruption of the downward trend represented by the increased figures in the year 1951. Practically all the listed " general " ailments shared in the decrease but " single visit cases " provided a noticeable exception having, in fact, been steadily on the increase for some years past.

Attendances for *medicine* were greater than in the previous two years and *artificial light treatment* was provided for the largest number of cases in any year since 1948. At the special *cardiac clinics* fewer new cases were examined but re-examinations were increased and more suitable children with heart disease were placed in selected employment.

(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—	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
Cuts, bruises, sprains, etc.	1,922	938	2,860	2,749	2,715
Burns and scalds	224	167	391	399	329
Totals	2,146	1,105	3,251	3,148	3,044

The attendances are included with those for skin conditions (page 26).

(2*a*) Diseases of the Ear.

Examined only.

	1952. Boys.	Girls.	Totals.	1951. Totals.	1950. Totals.
Recommended operation for tonsils and/or adenoids ...	220	225	445	553	622
Other operations recommended	4	—	4	9	2
Referred to Hospitals ...	6	3	9	2	—
Single visit cases	492	389	881	838	909
Totals	722	617	1,339	1,402	1,533

Treated at clinics.

Details of new cases—	1952. Boys.	Girls.	Totals.	1951. Totals.	1950. Totals.
Chronic suppurative inflammation (otorrhoea)—Single ...	238	177	415	362	449
Double ...	48	42	90	69	99
Results of above disease ...	40	35	75	86	73
Retracted membrane	61	53	114	61	55
Chronic aural catarrh ...	—	—	—	—	6
Ceruminous collection (wax) ...	193	171	364	288	301
Nasal catarrh	20	13	33	41	74
Laryngitis	3	—	3	5	—
Polypus	—	—	—	1	1
Other diseases	108	91	199	173	187
	711	582	1,293	1,086	1,245
Cases from previous session ...	597	509	1,106	1,153	1,030
Totals	1,308	1,091	2,399	2,239	2,275
Clinic attendances of above cases ...	34,388	24,770	59,158	56,119	57,139

Examinations by Specialists.

In addition to the foregoing, 1,436 cases (832 boys and 604 girls) were summoned for examination by aurists : 329 (185 boys and 144 girls) failed to attend and the remainder were dealt with as under :—

	1952. Boys.	Girls.	Totals.	1951. Totals.	1950. Totals.
Recommended operation for tonsils and/or adenoids ...	27	32	59	87	84
Other operations recommended	9	2	11	19	31
Referred to Hospitals ...	93	62	155	47	74
For X-ray	99	62	161	25	60
Others	419	302	721	595	670
Totals	647	460	1,107	773	919

X-ray Examinations.

The following cases, which include children from the audiometric surveys, were X-rayed during the course of the year as recommended by the specialists.

	Stobhill Hospital.		Southern General Hospital.		Totals.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Sinuses	53	40	62	32	115	72
Sinuses and Chest	1	5	3	3	4	8
Sinuses and Mastoids	3	—	4	3	7	3
Mastoids	2	4	6	5	8	9
Other Ear Conditions	1	—	1	—	2	—
Totals	60	49	76	43	136	92

(2*b*) Defective Hearing.

Due to the prolonged absence of the certifying aurist during the session, fewer children with hearing difficulties were classified and assessed according to their ability to take advantage of the educational facilities available to them. Examinations totalled 26 and of these, 11 children were graded as follows :—school for the deaf, 6 ; semi-deaf classes or to remain therein, 3 ; ordinary school or to remain therein, 2. The remainder were not classified pending review after treatment.

Hospital treatment was advised or was pending for 4 children, 12 were referred for treatment at clinic or school, a hearing aid was advised in 4 instances and the remainder were recommended for special investigation or other forms of treatment.

Hearing aids. During the session, 33 children (23 boys and 10 girls) were supplied with hearing aids. At 31st July, 1952, another 17 children were awaiting receipt of instruments.

When a school child is supplied with a hearing aid, the Head Teacher is asked to ensure that the pupil is encouraged in the use of the instrument and is not subjected to the teasing of schoolmates. A progress report for the month following the issue of the aid is also obtained and a copy of the information is forwarded to the Hearing Aid Clinic.

Audiograms. In the course of the year, 201 children (104 boys and 97 girls) were referred to the Audiometric Clinic, Florence Street, for audiograms at the request of specialists, school medical officers and others ; 182 (90 boys and 92 girls) were completed and the remainder either failed to appear or were considered to be too young for testing. During the same period, 151 (83 boys and 68 girls) were tested by

audiogram at the Ear, Nose and Throat Hospital Hearing Aid Clinic and 4 girls were tested by peep-show at the same clinic.

Audiometric Survey Scheme. Details of this scheme, including the findings of the aurists and the treatments provided, are shown in Appendix XII, page 87.

(3) Diseases of the Eye, excluding Defective Vision.

Details of new cases—	1952. Boys.	1952. Girls.	1952. Totals.	1951. Totals.	1950. Totals.
Blepharitis	301	323	624	619	547
Hordeolum (stye)	214	245	459	451	413
Conjunctivitis, catarrhal	231	248	479	622	573
Conjunctivitis, muco-purulent	1	1	2	12	8
Ophthalmia, strumous (includes phlyctenular conjunctivitis and keratitis)	10	17	27	39	25
Keratitis (interstitial)	—	—	—	1	4
Corneal ulcers	16	15	31	28	43
Corneal opacities	—	—	—	5	5
Dacrocystitis	—	—	—	1	1
Epiphora	—	—	—	4	1
Injuries	35	16	51	69	57
Other diseases	18	31	49	38	48
Single visit cases	138	140	278	230	192
	964	1,036	2,000	2,119	1,917
Cases from previous session	72	87	159	161	239
Totals	1,036	1,123	2,159	2,280	2,156
Clinic attendances of above cases	8,859	8,992	17,851	20,414	19,857

(4*a*) Diseases of the Skin, excluding Ringworm and Favus.

Details of new cases—	1952. Boys.	1952. Girls.	1952. Totals.	1951. Totals.	1950. Totals.
Scabies	119	147	266	276	426
Pediculosis capitis	1	1	2	13	11
Impetigo contagiosa	1,506	761	2,267	2,156	2,281
Ped. cap. and imp. cont.	7	15	22	27	23
Ecthyma	79	25	104	137	50
Dermatitis seborrhoeica	149	193	342	389	361
Eczema	105	76	181	207	189
Alopecia areata	15	19	34	48	39
Psoriasis	15	23	38	47	37
Herpes zoster (shingles)	104	99	203	189	170
Lupus	—	—	—	2	—
Ulcers and abscesses	2,409	1,160	3,569	3,585	3,165
Urticaria	78	45	123	97	157
Warts	323	397	720	647	502
Other skin diseases	186	201	387	471	463
Single visit cases	1,966	1,406	3,372	2,858	2,691
	7,062	4,568	11,630	11,149	10,565
Cases from previous session	256	191	447	533	691
Totals	7,318	4,759	12,077	11,682	11,256
Clinic attendances of above and ringworm cases	63,300	43,080	106,380	106,307	102,727

Special Cleansing Clinics—

	1952.	1951.	1950.
New cases	413	386	520
Attendances	804	603	900

(4*b*) RINGWORM.

Drug Treatment—

Details of new cases—

	Boys.	1952. Girls.	Totals.	1951. Totals.	1950. Totals.
Ringworm (head)	35	12	47	23	74
Ringworm (body)	64	72	136	143	174
Totals	99	84	183	166	248

X-ray Treatment—

45 children (34 boys and 11 girls) were given X-ray treatment for ringworm of the scalp, making 48 attendances for radiation, and receiving 236 X-ray exposures (generally 5 exposures per child).

Other skin conditions were also treated by X-ray, 1 boy making 1 attendance and receiving 1 exposure, and 5 girls making 12 attendances and receiving 15 exposures.

(4*c*) BATH TREATMENT OF SCABIES.

	Boys.	1952. Girls.	Totals.	1951. Totals.	1950. Totals
Cases receiving baths ...	119	131	250	265	377
Baths given	711	1,084	1,795	1,725	2,285

(B) *DEFECTIVE VISION*

Throughout the year, the School Eye Service continued to function as before. More refraction clinic sessions were held and, in consequence, more patients were dealt with during 1952 than in any other year since 1948. The average number of attendances per clinic session also showed an appreciable increase.

New cases were provided with spectacles under the scheme in total almost reaching that for the year 1948, previously the highest number since 1939. Nickel frames were mostly supplied following the introduction of the new range of spectacles mentioned in the 1951 Report.

Incidentally, during the latter part of the school year the range of frames available for school children was increased by the addition of one more cellulose acetate type. The complete range of new spectacles now comprises (1) six varieties of nickel frame, obtainable in sizes

suitable for *all ages* and *free* of cost to parents; (2) two kinds of cellulose acetate frame supplied only to *secondary school children* on request by parent and on payment of a contribution towards the cost, and (3) special type of cellulose acetate frame for school children *aged 16 and over*, also upon payment by parent of contributory charge.

Below are given the figures relating to (*a*) the cases dealt with at refraction clinics during the year, and (*b*) the spectacles supplied as prescribed at the school clinics.

(*a*) CASES DEALT WITH AT REFRACTION CLINICS.

	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
Subjected to refraction —					
Spectacles prescribed	2,783	2,902	5,685	5,426	4,529
Spectacles not prescribed—					
For further treatment			1,450	1,175	933
No treatment required			1,356	1,200	859
			8,491	7,801	6,321
Not subjected to refraction—					
For further treatment			1,051	1,039	1,195
No treatment required			404	448	550
Spectacles checked			121	80	59
Postponed			1,487	1,215	776
			3,063	2,782	2,580
Total number dealt with at refraction clinics			11,554	10,583	8,901
Number of clinics held			1,111	1,057	919
Average number of children per clinic			10·4	10·0	9·7
Average number subjected to refraction at each clinic			7·6	7·4	6·9

At the occlusion clinics, 84 new cases were put on treatment and an additional 92 were kept under observation. The number of children referred to hospital for further treatment was 51, while another 46 were put off treatment.

Approximately 1,470 children at the end of the school session were awaiting refraction, distributed as follows :—

New cases—65; "failed to attend"—350; re-tests—1,055.

(*b*) Provision of Spectacles.

New cases were supplied with spectacles under the scheme to the number of 5,516, the nickel type being provided in 5,374 and the cellulose acetate in 142 instances.

Replacements or repairs totalled 1,781, the details being as follows :—New lenses, 242 ; replaced lenses, 734 ; frames, sides, etc., 805 (nickel, 706 ; cellulose acetate, 98 ; gold-filled, 1).

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

(i) Tonsils and Adenoids Operations.

With a view to maintaining an up-to-date waiting list of cases for tonsils and adenoids operation, the parents of children who had been on the list for more than eighteen months were circularised and asked to state if the operation was or was not still required. Forms totalling 1,003 (385 boys and 618 girls) were issued during the year and of the 435 returned, 308 signified that treatment was still desired and 127 that treatment was "not now required." Included in the above figures are 29 cases who had removed to new addresses and had to be traced through the efforts of School Attendance Officers.

The Table below shows the number of operations performed in the several hospitals during 1951-52 compared with the figures for the previous two years.

	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
Tonsils removed—					
Western District Hospital ...	1	—	1	5	5
Mearnskirk Hospital	1	—	1	2	1
Adenoids removed—					
Western District Hospital ...	2	1	3	9	9
Mearnskirk Hospital	33	13	46	36	67
Stobhill Hospital	—	1	1	—	3
Southern General Hospital ...	1	—	1	—	2
Tonsils and Adenoids removed—					
Western District Hospital ...	501	489	990	866	1,191
Stobhill Hospital	29	37	66	1	63
Mearnskirk Hospital	80	59	139	97	182
Southern General Hospital ...	—	—	—	1	—
	648	600	1,248	1,017	1,523
Number of operation periods			*91	*79	*114
Average number of cases per period			*11	*11	*11
Clinic (including hospital) attendances			3,959	3,297	5,053

* These figures relate only to the Western District Hospital.

In addition to the above, 15 children (10 boys and 5 girls) were admitted to hospital during the year, but were discharged without operation for various reasons, mostly medical.

Other forms of treatment were also given to children receiving tonsils and adenoids operation, and a few patients were detained in hospital for more than the normal period before or after operation for medical reasons.

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

The number of cases on the waiting list at 31st July, 1952 was 2,075.

(ii) Other Ear, Nose and Throat Operations.

In addition to those treated for tonsils and/or adenoids, children to the number of 13 were admitted to hospital during the year for operative and other treatment of various ear, nose and throat conditions. Some of the patients were treated for more than one defect. Treatments were given for one or more of the following ; mastoid, 2 ; other ear conditions, 1 ; nasal defects, 10.

The number of cases on the waiting list at 31st July, 1952, was 123.

(D) *ORTHOPAEDIC AND POSTURAL DEFECTS*

The Orthopaedic Surgeon continued to visit regularly the Education Health Service orthopaedic clinics and to make arrangements when he judged necessary, for the admission of patients to Mearnskirk Hospital. Harriet Street Clinic was added to the list of orthopaedic clinics from the end of October, 1951.

Admission of patients to the Orthopaedic Unit at Mearnskirk Hospital continued at a satisfactory level, 75 cases being admitted during the session compared with 64 in the previous year. In spite of this, however, the waiting list for hospital at the end of the period under review numbered 89, a large proportion of these being post-poliomyelitis cases. Moreover, of the children treated in hospital more than half were suffering from disability following poliomyelitis. The numbers of such cases could be expected to increase in the future as the result of the outbreaks of this disease in Glasgow during 1947 and 1950.

Details of the cases treated in hospital, at the school clinics and elsewhere are given below.

(*a*) Deformities Treated in Mearnskirk Hospital.

Cases in hospital at 1-8-51	19
Number admitted during session	75
	94
Number dismissed during session	70
Number still in hospital at 31-7-52	24

All the above cases had been selected at the Education Health Service orthopaedic clinics by the visiting Orthopaedic Surgeon. Of the 70 patients dismissed, the causes of disability were as shown in the following table :—

Foot Deformities—	
Congenital	1
Post-Poliomyelitis	33
Others	7
Spinal Deformities	1
Other Deformities (all due to poliomyelitis) ...	3
Cerebral Palsy	7
Torticollis	12
Miscellaneous	6
	70

7 of the above patients were discharged after investigation and/or remedial exercises without operation; upon the remaining 63, operations totalling 83 were performed as follows :—

Foot Operations—Manipulation and plaster (including tenotomy and wrenching), 27; arthrodesis, 11; tendon transplant, 18; elongation of tendo Achilles, 12.

Other Operations—Tenotomy for torticollis, 12; miscellaneous, 2.

The average stay in hospital of these 70 cases was 64·4 days.

On 31st July, 1952, the number of patients on the waiting list for admission to hospital was 89.

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

	1952. Boys.	1952. Girls.	1952. Totals.	1951. Totals.	1950. Totals.
Number of children examined by—					
School Medical Officers	370	444	814	853	933
Orthopaedic Surgeon	518	518	1,036	997	677
Number of attendances of "old" cases reporting for observation	591	566	1,157	1,198	1,046
Number of Plaster cases (Avenuepark Street Clinic) ...	64	74	138	235	117

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

	1952. Boys.	1952. Girls.	1952. Totals.	1951. Totals.	1950. Totals.
Details of new cases put on treatment at Clinics—					
Deformities of spine (kyphosis lordosis, scoliosis)	51	92	143	188	239
Paralysis, infantile and other	73	63	136	173	70
Flat-foot and other deformities of the foot	49	82	131	166	176
Wry-neck (torticollis) ...	2	17	19	6	7
Fracture (result of), sprains and dislocations	—	—	—	5	4
Deformities of chest	12	7	19	23	32
Knock-knees	5	4	9	25	37
Others	13	17	30	42	38
	205	282	487	628	603
Cases from previous session ...	113	129	242	178	171
Totals	318	411	729	806	774
Discharged from Orthopaedic Clinics—					
Fit	129	201	330	409	374
For hospital treatment ...	9	11	20	29	10
To Convalescent Homes ...	1	—	1	—	7
Transferred to other clinics or treated by appliances ...	23	23	46	56	40
For other reasons (leaving school, etc.)	34	38	72	70	165
Totals	196	273	469	564	596
Number still on treatment ...	122	138	260	242	178
Number of attendances made by children for treatment	...	...	16,878	15,258	14,584

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

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

	Special Schools.	Nursery Schools.	Totals.
Number of cases treated individually	34	85	119
Number of treatments given	839	193	1,032
Number of classes held	554	4	558

(E) *OTHER DISEASES*

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

	1952.			1951.	1950.
Details of new cases—	Boys.	Girls.	Totals.	Totals.	Totals.
Bronchitis and bronchial catarrh	415	293	708	890	732
Anaemia and/or debility ...	720	776	1,496	1,673	1,507
Rickets	6	3	9	6	13
Tubercular conditions—					
Pulmonary (including contacts)	65	69	134	193	147
Non-pulmonary	6	—	6	9	11
Paralysis	1	2	3	4	5
Heart disease	26	35	61	70	102
Chorea	19	8	27	25	38
Enlarged tonsils and/or adenoids	57	85	142	183	243
Adenitis	19	37	56	57	75
Rheumatism	36	80	116	150	143
Enuresis	277	325	602	668	581
Malnutrition	6	3	9	30	33
Epilepsy	11	3	14	20	18
Digestive disorders	83	105	188	194	168
Infectious diseases	13	13	26	54	71
Mental deficiency	2	—	2	1	1
Nervous disorders	23	27	50	57	45
Others	154	172	326	369	380
Single visit cases	892	830	1,722	1,494	1,311
Totals	2,831	2,866	5,697	6,147	5,624
Clinic attendances of above cases ...	8,873	8,399	17,272	18,543	16,704

(*b*) SUPPLY OF MEDICINES.

	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
Details of new cases seen elsewhere than at "General" Clinics—					
Sent from school inspection for immediate supply	629	625	1,254	1,331	955
Sent from skin, eye and ear clinics	348	406	754	783	705
Additional attendances at "General" clinics for medicine	8,543	7,940	16,483	15,997	15,080
Totals	9,520	8,971	18,491	18,111	16,740

(*c*) Artificial Light Treatment.

Details of new cases—	1952. Boys.	1952. Girls.	1952. Totals.	1951. Totals.	1950. Totals.
Rickets	26	7	33	24	31
Anaemia and/or debility ...	377	481	858	821	831
Nervous disorders	7	1	8	4	1
Enlarged glands	10	12	22	22	16
Chronic bronchitis	230	251	481	489	398
Rheumatism	28	85	113	90	107
Skin conditions	37	23	60	55	37
Eye conditions	5	10	15	30	4
Ear conditions	19	19	38	39	18
Other diseases	64	51	115	102	50
Single visit cases	36	57	93	121	71
Totals	839	997	1,836	1,797	1,564
Clinic attendances of above cases ...	11,541	13,417	24,958	23,099	21,148

(*d*) Cases seen at Cardiac Clinics.

The heart specialist from Stobhill Hospital again attended school clinics for the purpose of examining school children specially referred by School Medical Officers, and recommending any necessary treatment. During the session, 370 children (163 boys and 207 girls) were summoned, of whom 54 (20 boys and 34 girls) failed to attend. The remainder reported as follows :—

New Cases.		Re-examinations.		Totals.	
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
80	82	63	91	143	173

The specialist referred 8 children (4 boys and 4 girls) for electrocardiogram or X-ray investigation and 16 (4 boys and 12 girls) for admission to hospital. In 13 instances (7 boys and 6 girls) he advised that they should be passed out to ordinary school suitably graded as regards physical training, and recommended 1 boy for special school. In addition, 12 children (6 boys and 6 girls) were recommended other forms of specialist and school clinic treatment.

The numbers of children interviewed during the year at special clinics and assessed as to their capabilities for employment in suitable posts are given below with the numbers summoned in parenthesis.

December, 1951, 16 (17); April, 1952, 8 (8); June, 1952, 18 (18). Since the commencement of the scheme in June, 1950, 79 children in all have been seen.

In his annual report the specialist stated that the work had continued along the usual lines. There had been an endeavour to make as accurate a diagnosis as was possible in each individual case, to appreciate signs of active disease and to treat such when found, to select for surgical treatment those children thought to have operable congenital lesions, to grade physical training according to individual capabilities, and, more recently, with the enthusiastic co-operation of Professor Ferguson, to place the child leaving school in suitable employment. This last service has been most enthusiastically welcomed by parents as the attendance figures proved, and a recent follow-up of children placed in employment so far had given convincing evidence of its usefulness.

By way of a footnote to the above, it may be mentioned that the specialist (Dr. A. S. Rogen), in a recently published article (*Glasgow Medical Journal*, November, 1952), has reviewed the progress of the cardiology service from its inception in February, 1947. The scheme was instituted for the purpose of combating cardiac invalidism among Glasgow school children and offering treatment to those with incipient or established heart disease. School medical officers referred all the cases to the specialist including some who had, on the instructions of private practitioners, been excluded from school or from joining in physical training because of heart disease—justification for which was doubted by the school medical officers.

During the period February, 1947 to February, 1951, children to the number of 917—768 attending ordinary schools and 149 at special schools—were examined by Dr. Rogen. Of the ordinary school children, 57 per cent. showed no evidence of heart disease and 32 per cent. of those from special schools gave a similar result. Rheumatic heart disease was found in 340 instances compared with 91 cases of congenital heart disease and it was notable that in 44 per cent. of those with rheumatic disease no history of previous rheumatic infection could be obtained. Only 97 out of 330 ordinary school children suffering from heart disease were considered unfit for *any* form of exercise, the remainder being allowed physical training suitably graded according to

the degree of individual disability. The placing of the handicapped child in suitable employment after leaving school was an extension of the scheme which was showing valuable results.

(*e*) Asthma Clinic Cases.

This special clinic continued to function at Crail Street and during the session forty new cases of asthma had been investigated.

It was not yet possible to assess the full value of treatment of these patients as many of them were still undergoing treatment. The progress being made by many of them was, however, very encouraging and a follow-up of cases treated in 1951 showed that the improvement produced was likely to be lasting.

Dr. Gemmell hoped by the end of the 1952-53 session to be able to give a detailed report of the results of investigation and treatment of the first hundred cases.

7.—DENTAL INSPECTION AND TREATMENT

The scheme of work was continued as before and no major changes occurred during the Session. Increases in the number of periods devoted to routine inspection and to orthodontic treatment were partly offset by a decrease in the number of ordinary treatment periods.

More schools were added to the *Routine Dental Inspection* list and the consequent addition of 5,000 children from schools not previously under inspection raised the percentage found to require treatment by 0·9. Those accepting the offer of clinic treatment showed a 0·8 per cent. decrease while those promising to seek private treatment rose by 1·7 per cent.

The total number of children *actually treated* during the year fell by almost 4,000, but this was due to the greater proportion of fillings performed—these increased by just over 3,000. In this connection, the ratio of fillings to extractions (permanent teeth only) showed a considerable increase at 283 : 100 compared with 227 : 100 in 1951.

Attendances at the *orthodontic clinic* totalled 4,109, patients being selected by the various School Dental Officers throughout the city; 358 such cases were treated in the period and 644 appliances were made and inserted. *Artificial dentures* were supplied to 135 children, about half of the dentures being semi-orthodontic in purpose and intended to prevent closure of space following accident to incisors; these were

in addition to the 644 appliances mentioned above. *Special treatments* comprising 19 root treatments, 8 crowns and 7 special surgical treatments were performed, while X-ray examinations numbering 367 were increased by 112 over the previous year's figures.

The *general anaesthetic clinic* was continued, a specialist anaesthetist allotted by the Western Regional Hospital Board being in attendance on Saturday forenoons; 320 cases selected by the Dental Officers were treated during the period. Also continuing to function was the *emergency clinic* where 3,413 children were treated for toothache without prior appointment; the decrease of 1,108 compared with the previous year was probably due to the private paractitioner service being able to accept an increasing proportion of such cases.

8.—SPECIAL SCHOOLS AND CLASSES AND RESIDENTIAL SCHOOLS

(*a*) *FOR HANDICAPPED CHILDREN*

The Corporation continued to make provision for children handicapped as follows :—

(1) Mentally handicapped—18 Day Schools and 9 Occupational Centres.

(2) Physically handicapped, delicate or convalescent—11 Day Schools, 6 Residential Schools, 6 Hospital Schools and a Home Tuition scheme.

(3) Defective vision—1 Day/Residential School for blind children, and 1 Day School for the partially sighted.

(4) Defective hearing—1 Nursery/Infant Day School, 1 Day School and 1 Day/Residential School for the partially deaf, and 2 Day/Residential Schools for the deaf.

At 30th June, 1952, the number of children receiving special educational treatment in schools administered by the Corporation was as given below :—

Physically handicapped children, 1,452; children with hearing defects, 359; children with defects of vision, 104; mentally handicapped (educable) children, 2,962; mentally handicapped (trainable) children, 398; total 5,275. This total compares with 5,397 handicapped children in 1951 and 5,445 in 1950.

Children who are classified as handicapped are required to remain at school until the " leaving date " following their sixteenth birthday.

Educational provision is made from the age of 3 years for blind and deaf children while for all other categories the age of entry to school is 5 years.

School Medical Officers examine all handicapped children, at frequent intervals, to ascertain progress and to recommend, where possible, return to ordinary school. In addition, specialist services are provided for children with defects of hearing or vision and for orthopaedic and heart cases.

The Residential Centres outwith the City are now as follows :—

Hospital Schools—Victoria Auxiliary Infirmary, Philipshill; Strathblane Home; Mearnskirk Hospital; Stobhill Hospital; Lenzie Home; and Drumchapel Home.

Residential Schools—

Caol Ruadh, Colintraive	...	36 Protestant P.H. boys.
Southpark, Ascog	...	23 Protestant P.H. girls.
Craig, Kilmarnock	...	48 Roman Catholic P.H. and convalescent boys.
Lumsden, Maybole	...	29 Roman Catholic P.H. and convalescent girls.
Hillfoot, Bearsden	...	65 Protestant convalescent girls.
Seafield, Ardrossan	...	50 Protestant convalescent boys.

There is also a residential school at Nerston, East Kilbride, having accommodation for 40 " maladjusted " children.

Periods of residence vary according to the needs of the individual child, averaging from three to six months for physically handicapped children, about six weeks for convalescents and from three to nine months for patients admitted to Nerston.

Home Tuition Scheme.

This scheme, set up in May, 1947, continued to provide for the education of children of normal intelligence who, even with the provision of transport, were unable to attend school because of severe physical disability. Suitable cases were included in the scheme on the recommendation of the Principal School Medical Officer and certified teachers visited the children in their homes for one hour on two evenings per week.

At 30th June, 1952, the number of children participating in the scheme was 63 and the main causes of incapacity from which they suffered were :—

Heart disease, 5 ; non-pulmonary tuberculosis, 4 ; spina bifida, 8 ; spastic paralysis, 6 ; Perthe's disease, 5 ; pseudo-hypertrophic muscular dystrophy, 3 ; cerebral diplegia, 2 ; epilepsy, 2 ; miscellaneous, 28.

EXAMINATION AND AFTER-CARE OF MENTALLY HANDICAPPED CHILDREN.

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

	1952			1951	1950
	Boys	Girls	Total	Total	Total
First Examinations	410	326	736	649	578
Re-Examinations	1,053	766	1,819	1,897	1,573
	1,463	1,092	2,555	2,546	2,151

Provision for After-Care, in terms of the National Health Service (Scotland) Act, 1947, was continued throughout the year by the Health and Welfare Department.

In addition to the above schemes, Glasgow children in need of special care and attention were accommodated and educated at the following Centres not under the management of the Corporation :—

Biggart Memorial Home, Prestwick—40 physically handicapped children requiring nursing care.

Eastpark Homes, Glasgow and Largs—43 severely physically handicapped children requiring long-term nursing care.

Westerlea School for Spastics, Edinburgh—4 Protestant children suffering from cerebral palsy.

The Colony for Epileptics, Bridge-of-Weir—12 Protestant children suffering from serious epilepsy.

The Royal Blind School, Edinburgh—21 Protestant blind children.

The Mary Hare Grammar School for the Deaf, Newbury—3 deaf children requiring academic secondary education.

The Rudolph Steiner Schools, Aberdeenshire—8 Protestant mentally handicapped children with additional severe physical handicap.

Barns Hostel School, Ancrum—1 maladjusted boy requiring long-term psychological treatment.

Orchil House, Braco—1 mentally handicapped boy requiring residential care.

Lennox Castle Certified Institution—57 boys (Protestant and Roman Catholic), aged 12-16 years, mentally handicapped and including several with serious epilepsy and mental deterioration.

St. Charles' Certified Institution, Carstairs—50 Roman Catholic mentally handicapped children.

St. Joseph's Certified Institution, Rosewell—11 Roman Catholic mentally handicapped children with gross physical handicap.

Waverley Park Certified Institution, Kirkintilloch—21 Protestant mentally handicapped girls.

Birkwood Certified Institution, Lesmahagow—5 Protestant mentally handicapped children.

(*b*) *FOR NORMAL CHILDREN*

There are 4 Residential Schools outwith the City for normal children who go in school groups and stay for a period of four weeks. Accommodation in the various schools is as follows :—

48 places at Achnamara, Lochgilphead (Protestant, post-primary boys and girls).

58 places at Agnes Patrick/Stevenson, Ascog (Roman Catholic primary boys and girls).

100 places at Castle Toward, by Dunoon (Protestant primary boys and girls).

60 places at Galloway, Wigtown (Protestant, primary boys and girls).

There is also a Residential Nursery School at Southannan, Fairlie, with 36 places for children who go in groups from each Glasgow nursery school in turn for a period in residence of, generally, four weeks.

In addition, the Corporation leased Glengonnar Camp, Abington, for the month of November, 1951, Dounans Camp, Aberfoyle, in February, 1952, and Belmont Camp, Meigle, Perthshire, during June, 1952, for the accommodation respectively of approximately 160, 90 and 225 children.

Arrangements were also made for parties of post-primary school children to undergo courses at either Moray Sea School, Burghead, or at Glenmore Lodge, Aviemore. 129 boys were sent to the Moray Sea School and 241 boys and girls were sent to Glenmore Lodge in six groups.

(c) *FOR MALADJUSTED CHILDREN*

CHILD GUIDANCE.

The Child Guidance Clinics dealt with 3,409 children as compared with 3,232 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—1,442 instances); *behaviour disturbances* (unmanageable behaviour, aggression and temper tantrums, sadistic tendencies, exhibitionism, truancy and wandering—687) ; *delinquency* (theft, lying, malicious mischief and sexual offences—417) ; *educational disability* (general backwardness and specific disability—938) ; *speech defect*—799 instances. Of these children, 115 were given residential treatment at Nerston Home as compared with 128 in the preceding session.

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

SPEECH THERAPY.

Increased staff enabled more treatments to be given to children with speech defects than was previously possible.

Details of the type of work done throughout the year are given in Appendix XI, page 86.

9.—ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE

The Physical Education Staff at the end of Session 1951-52 consisted of the Superintendent of Physical Training, two assistant superintendents (a man and a woman), 43 Principal Teachers (28 men and 15 women), 111 assistant men teachers, including one seconded, and 101 assistant women teachers, including 6 physiotherapists engaged in the four orthopaedic clinics. 4 men and 4 women assistant teachers (1 woman part-time) were employed in Further Education Classes.

One woman Principal Teacher had charge of the four orthopaedic clinics, the staff of which included in their duties visits to schools for handicapped pupils and nursery schools. Principal Teachers from secondary schools visited neighbouring primary schools to demonstrate physical training lessons and to advise class teachers. A number of primary schools also received a weekly visit from an assistant teacher.

Instruction in personal hygiene and simple first aid was given in secondary schools as part of the scheme of physical education, and in primary schools class teachers gave short lessons on health habits. These lessons were based on the Model Syllabuses in General Hygiene drawn up by the Scottish Council for Health Education and adopted for use in schools by decision of the Education Committee.

In schools where facilities were available, pupils, with the consent of their parents, attended spray baths at one of the periods set apart for physical training. During the months of September and October, 1951, and May and June, 1952, 24,500 boys and girls attended weekly at school ponds or at Corporation Public Baths for instruction in swimming. One pond previously undergoing reconstruction became available during the session. During the winter months, November, 1951, till April, 1952, approximately 17,500 boys and girls, with the consent of their parents, continued to receive weekly a period of instruction in swimming.

The Mobile Spray Bath Unit continued to function, six selected schools being visited regularly. Approximately 200 baths were provided daily, an Education Health Service nurse being in attendance to examine the children before they used the sprays. During the year, 35,749 baths were given.

10.—ARRANGEMENTS FOR FEEDING AND CLOTHING OF CHILDREN

(a) ADMINISTRATION AND NATURE OF MEALS—

See Report for 1945, page 34.

At 31st July, 1952, there were 24 Kitchens and 5 School Meals Centres preparing meals for school children.

On an average day in June, 1952 (Friday, 6th June) the total number of meals served was 67,280 of which 65,706 were dinners. Of the meals supplied, 17,156 dinners and 2 teas were provided free of charge.

The meals were served in 297 Dining Rooms, 225 of which were in school premises and 72 in church halls or other rented premises. Of the 225 Dining Rooms in schools, 30 were at schools for handicapped children and 38 were in nursery schools.

(b) NUMBER AND COST OF MEALS—

The number of meals prepared in kitchens during each of the years ending 31st May, 1951, and 1952, were as follows :—

Year Ending.	Breakfasts.	Dinners.	Teas.	Total.
31st May, 1951 ...	200,009	13,821,896	1,179,500	15,201,405
31st May, 1952 ...	222,730	14,378,183	1,305,604	15,906,517

Dinners only were supplied to pupils of ordinary day schools and schools for handicapped children. In nursery schools, dinners and teas were served, while the Remand Home and Health and Welfare Department day nurseries received breakfasts, dinners and teas. During holiday periods, meals were supplied only to children entitled to free meals.

No alteration was made during the year in the charges for school meals and the rates remained as follows :—

Dinners—5 days a week ... 2/8 for the first child of family ;
... 2/3 for second child ;
... 2/1 for third and subsequent children.

Dinners—6 days a week ... 3/1 for the first child of family ;
... 2/7 for second child ;
... 2/6 for third and subsequent children.

The charges for pupils in schools for handicapped children and nursery schools remained unaltered at 1/10 and 2/11 a week respectively.

(c) BOOTS AND CLOTHING—

Boots and clothing, or both, were supplied to 2,059 children during the school year compared with 2,083 in 1951. The undertaking given by the National Assistance Board, that children whose parents were in receipt of allowances from the National Assistance Board, the Ministry of Labour or the Ministry of National Insurance would be in a fit state to attend school, was carried out satisfactorily and only in exceptional cases was it necessary to take action under Section 48 of the Education (Scotland) Act, 1946.

(d) MILK SUPPLY TO SCHOOL CHILDREN—

The total number of milk rations during the year ending 31st July, 1952, was 32,878,930 compared with 32,282,329 in 1951. The most recent census figures showed that 85·8 per cent. of the children on the registers in October, 1951, were taking school milk compared with 86·6 per cent. in October, 1950.

The Senior Food Inspector of the Health and Welfare Department reported that 160 samples of milk were taken from various schools supplied by eight creameries. These samples were taken at regular intervals for examination by the City Bacteriologist and the City Analyst. The average fat content of the samples was 3·76 per cent. and the average non-fatty solids equalled 8·65 per cent. All unsatisfactory results are brought to the attention of the contractors and investigation with a view to improvement is made. In one instance only was this necessary during the year when a deficiency of non-fatty solids below the statutory limit of 8·5 per cent. was investigated at the creamery concerned ; all subsequent samples from this creamery proved genuine.

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 11), and (*b*) OTHER SYSTEMATIC EXAMINATIONS, i.e., children missed at recommended age groups or otherwise outwith these groups.

GROUP.	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
(*a*) Entrants	10,042	9,795	19,837	16,833	17,848
Second Age Group	7,247	7,211	14,458	14,370	14,612
Third Age Group ...	7,620	7,693	15,313	14,720	14,905
Fourth Age Group	569	498	1,067	1,001	1,063
	25,478	25,197	50,675	46,924	48,428
(*b*) Others	305	369	674	722	568
Totals ...	25,783	25,566	51,349	47,646	48,996

For age distribution of these children see Appendix Ib on page 48.

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.	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
Physically handicapped children	204	482	686	432	448
Mentally handicapped children	194	365	559	750	831
Totals ...	398	847	1,245	1,182	1,279

(B) Other Examinations—

GROUP.	1952.	1951.	1950.
(i) *In Schools*—			
Systematic Inspection of Nursery School Children	976	892	941
Other Examinations in Nursery Schools ...	4,092	3,945	3,486
1944 age-group (Visual Acuity and Hearing only)—(by school nurses)	15,046	14,616	14,546
Special Cases (in respect of particular defects)	9,958	11,883	11,680
Re-inspections by Medical Officers	12,055	11,891	10,851
Leaving Interviews	7,921	7,176	5,127
Examinations regarding Mental Defect ...	2,555	2,546	2,151
Discharges in Special Schools and Classes ...	197	202	308
Totals	52,800	53,151	49,090
(ii) *Mainly at Clinics*—			
Applicants for preliminary training as Teachers	—	—	39
Applicants for Licences under the Corporation Bye-laws for the Employment of Children	799	925	814
Adult Employees of the Corporation ...	1,054	732	795
*Certifications—Blind Persons Act, 1920 ...	9	9	9
Candidates for Printers' Apprenticeships ...	140	134	118
Children as to fitness for camps, etc.—			
Harvesters, etc.	5,987	6,289	7,629
School and Junior Club groups	11,801	11,060	9,518
Children as to fitness for "School Journeys" abroad, etc.	842	745	344
Children as to fitness for admission to Residential Schools and Institutions ...	8,215	8,434	7,303
Pre-vocational Students	673	496	569
Other Special Cases	128	22	19
Examinations in Remand Home	1,487	1,803	2,730
Totals	31,135	30,649	29,887
(iii) *Cleanliness and Special Examinations*—			
†Cleanliness inspections—(by school nurses)	162,220	157,248	153,616

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

† In addition, Nurse Inspectresses of the Sanitary Division made 133,574 cleanliness inspections in 1,114 visits to 84 schools (see page 70).

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.	1952.			1951.	1950.
	Boys.	Girls.	Totals.	Totals.	Totals.
Entrants ...	3,367	3,112	6,479	5,929	5,601
	(33·5)	(31·8)	(32·7)	(35·2)	(31·4)
2nd Age Group ...	2,733	2,726	5,459	5,073	4,546
	(37·7)	(37·8)	(37·8)	(35·3)	(31·1)
3rd Age Group ...	2,003	2,333	4,336	4,193	3,740
	(26·3)	(30·3)	(28·3)	(28·5)	(25·1)
4th Age Group ...	133	115	248	180	105
	(23·4)	(23·1)	(23·2)	(18·0)	(9·9)
Others	94	120	214	231	155
	(30·8)	(32·5)	(31·7)	(32·0)	(27·3)
Totals	8,330	8,406	16,736	15,606	14,147
	(32·3)	(32·9)	(32·6)	(32·8)	(28·9)

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 56.

APPENDIX Ib.—*AGE DISTRIBUTION OF CHILDREN*

(*a*) Children within groups recommended

(*b*) Children outwith groups

‡ Entrants-Infants.

Ages.		4	5	6	7	8
BOYS.						
Non-transferred Schools	(*a*) ...	226	6,631	205	53	1
Do.	(*b*) ...	—	—	1	12	13
Transferred Schools	(*a*) ...	126	2 666	105	28	1
Do.	(*b*) ...	—	—	—	7	24
Totals	(*a*) ...	352	9,297	310	81	2
Do.	(*b*) ...	—	—	1	19	37
Totals, 1952		352	9,297	311	100	39
Totals, 1951		504	7,652	303	138	52
GIRLS.						
Non-transferred Schools	(*a*) ...	184	6,496	196	47	2
Do.	(*b*) ...	—	—	3	7	9
Transferred Schools	(*a*) ...	107	2,652	86	23	2
Do.	(*b*) ...	—	—	—	6	9
Totals	(*a*) ...	291	9,148	282	70	4
Do.	(*b*) ...	—	—	3	13	18
Totals, 1952		291	9,148	285	83	22
Totals, 1951		414	7,359	380	104	41
ALL.						
Totals	(*a*) ...	643	18,445	592	151	6
Do.	(*b*) ...	—	—	4	32	55
Totals, 1952		643	18,445	596	183	61
Totals, 1951		918	15,011	683	242	93

‡ 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.

8	9	10	11	12	13	14	15	16	17	18	Totals
150	4,229	725	—	283	4,521	496	7	413	96	—	18,036
—	6	43	33	12	5	40	27	1	—	2	195
87	1,721	335	—	142	2,005	173	—	30	23	—	7,442
—	13	7	12	4	4	12	27	—	—	—	110
237	5,950	1,060	—	425	6,526	669	7	443	119	—	25,478
—	19	50	45	16	9	52	54	1	—	2	305
237	5,969	1,110	45	441	6,535	721	61	444	119	2	25,783
242	6,388	685	37	476	6,374	485	64	497	110	3	24,010
95	4 010	928	—	235	4,664	513	2	296	119	—	17,787
—	12	54	42	23	3	37	31	—	—	—	221
44	1,768	366	—	157	1,965	159	1	62	18	—	7,410
—	8	42	19	7	4	30	23	—	—	—	148
139	5,778	1,294	—	392	6,629	672	3	358	137	—	25,197
—	20	96	61	30	7	67	54	—	—	—	369
139	5,798	1,390	61	422	6,636	739	57	358	137	—	25,566
167	6,089	972	94	502	6,518	561	45	300	90	—	23,636
376	11,728	2,354	—	817	13,155	1,341	10	801	256	—	50,675
—	39	146	106	46	16	119	108	1	—	2	674
376	11,767	2,500	106	863	13,171	1,460	118	802	256	2	51,349
409	12,477	1,657	131	978	12,892	1,046	109	797	200	3	47,646

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.		1952.	1951.	1950.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
Number examined	10,042	9,795	7,247	7,211	7,620	7,693	569	498	25,783	25,566	51,349	47,646	48,996
Nature of defects found													
1. CLOTHING — Insufficient	1 (0·0)	1 (0·0)	—	1 (0·0)	1 (0·0)	7 (0·1)	—	—	2 (0·0)	9 (0·0)	11 (0·0)	17 (0·0)	13 (0·0)
UNSATISFACTORY — Ragged ...	—	1 (0·0)	2 (0·0)	1 (0·0)	1 (0·0)	3 (0·0)	—	—	3 (0·0)	5 (0·0)	8 (0·0)	18 (0·0)	20 (0·0)
Dirty ...	7 (0·1)	6 (0·1)	4 (0·1)	9 (0·1)	3 (0·0)	27 (0·4)	—	—	14 (0·1)	44 (0·2)	58 (0·1)	43 (0·1)	55 (0·1)
Totals	8 (0·1)	8 (0·1)	6 (0·1)	11 (0·2)	5 (0·1)	37 (0·5)	—	—	19 (0·1)	58 (0·2)	77 (0·1)	78 (0·2)	88 (0·2)
2. FOOTGEAR UNSATISFACTORY — Unsatisfactory	4 (0·0)	4 (0·0)	23 (0·3)	6 (0·1)	9 (0·1)	18 (0·2)	—	—	36 (0·1)	28 (0·1)	64 (0·1)	81 (0·2)	67 (0·1)
None ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	4 (0·0)	4 (0·0)	23 (0·3)	6 (0·1)	9 (0·1)	18 (0·2)	—	—	36 (0·1)	28 (0·1)	64 (0·1)	81 (0·2)	67 (0·1)
3. UNCLEANLINESS — Dirty	1 (0·0)	16 (0·2)	—	—	—	3 (0·0)	—	—	2 (0·0)	19 (0·1)	21 (0·0)	4 (0·0)	3 (0·0)
(a) *Head* — Nits	482 (4·8)	1,361 (13·9)	362 (5·0)	1,299 (18·0)	236 (3·1)	1,775 (23·1)	—	3 (0·6)	1,097 (4·3)	4,508 (17·6)	5,605 (10·9)	4,522 (9·5)	3,636 (7·4)
Verminous ...	17 (0·2)	37 (0·4)	10 (0·1)	19 (0·3)	6 (0·1)	32 (0·4)	—	—	33 (0·1)	89 (0·3)	122 (0·2)	116 (0·2)	133 (0·3)
(b) *Body* — Dirty	11 (0·1)	4 (0·0)	11 (0·2)	1 (0·0)	8 (0·1)	4 (0·1)	—	—	32 (0·1)	10 (0·0)	42 (0·1)	43 (0·1)	60 (0·1)
Verminous ...	—	—	2 (0·0)	2 (0·0)	—	—	—	—	2 (0·0)	2 (0·0)	4 (0·0)	6 (0·0)	3 (0·0)
Totals	511 (5·1)	1,418 (14·5)	385 (5·3)	1,321 (18·3)	250 (3·3)	1,814 (23·6)	—	3 (0·6)	1,166 (4·5)	4,628 (18·1)	5,794 (11·3)	4,691 (9·8)	3,835 (7·8)

4. Skin	Ringworm ...	5 (0·0)	1 (0·0)	—	—	—	—	—	—	5 (0·0)	1 (0·0)	6 (0·0)	6 (0·0)	3 (0·0)
(a) *Head*	Impetigo ...	30 (0·3)	20 (0·2)	23 (0·3)	6 (0·1)	11 (0·1)	6 (0·1)	—	—	66 (0·3)	32 (0·1)	98 (0·2)	131 (0·3)	88 (0·2)
	Injuries ...	3 (0·0)	2 (0·0)	3 (0·0)	—	1 (0·0)	—	—	—	7 (0·0)	2 (0·0)	9 (0·0)	3 (0·0)	7 (0·0)
	Others ...	33 (0·3)	34 (0·3)	29 (0·4)	21 (0·3)	28 (0·4)	25 (0·3)	5 (0·9)	3 (0·6)	97 (0·4)	83 (0·3)	180 (0·4)	171 (0·4)	103 (0·2)
(b) *Body*	Ringworm ...	2 (0·0)	3 (0·0)	4 (0·1)	2 (0·0)	1 (0·0)	2 (0·0)	—	—	7 (0·0)	7 (0·0)	14 (0·0)	11 (0·0)	16 (0·0)
	Impetigo ...	21 (0·2)	11 (0·1)	15 (0·2)	9 (0·1)	1 (0·0)	4 (0·1)	—	—	37 (0·1)	24 (0·1)	61 (0·1)	47 (0·1)	35 (0·1)
	Scabies ...	5 (0·0)	3 (0·0)	4 (0·1)	4 (0·1)	1 (0·0)	4 (0·1)	—	—	10 (0·0)	11 (0·0)	21 (0·0)	16 (0·0)	28 (0·1)
	Injuries ...	1 (0·0)	1 (0·0)	3 (0·0)	1 (0·0)	4 (0·1)	3 (0·0)	—	—	8 (0·0)	5 (0·0)	13 (0·0)	15 (0·0)	11 (0·0)
	Others ...	118 (1·2)	115 (1·2)	74 (1·0)	59 (0·8)	71 (0·9)	113 (1·5)	7 (1·2)	15 (3·0)	271 (1·1)	305 (1·2)	576 (1·1)	540 (1·1)	463 (0·9)
Totals		218 (2·2)	190 (1·9)	155 (2·1)	102 (1·4)	118 (1·5)	157 (2·0)	12 (2·1)	18 (3·6)	508 (2·0)	470 (1·8)	978 (1·9)	940 (2·0)	754 (1·5)
5. Nutrition	Slightly defective	396 (3·9)	577 (5·9)	441 (6·1)	537 (7·4)	287 (3·8)	297 (3·9)	—	1 (0·2)	1,133 (4·4)	1,427 (5·6)	2,560 (5·0)	2,644 (5·5)	2,306 (4·7)
	Bad	29 (0·3)	40 (0·4)	24 (0·3)	52 (0·7)	29 (0·4)	37 (0·5)	—	—	83 (0·3)	131 (0·5)	214 (0·4)	224 (0·5)	254 (0·5)
Totals		425 (4·2)	617 (6·3)	465 (6·4)	589 (8·2)	316 (4·1)	334 (4·3)	—	1 (0·2)	1,216 (4·7)	1,558 (6·1)	2,774 (5·4)	2,868 (6·0)	2,560 (5·2)
6. Mouth and Teeth Unhealthy		198 (2·0)	168 (1·7)	132 (1·8)	132 (1·8)	72 (0·9)	132 (1·7)	5 (0·9)	2 (0·4)	415 (1·6)	436 (1·7)	851 (1·7)	1,068 (2·2)	1,015 (2·1)

TABLE II—Continued.

Age Groups.	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1952.	1951.	1950.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
7. NASO-PHARYNX													
(a) *Nose*													
Obstruction—for observation	116	98	56	27	17	12	1	—	192	137	329	409	258
	(1·2)	(1·0)	(0·8)	(0·4)	(0·2)	(0·2)	(0·2)		(0·7)	(0·5)	(0·6)	(0·9)	(0·5
Obstruction—for operation	95	73	22	22	11	5	—	—	129	102	231	151	146
	(0·9)	(0·7)	(0·3)	(0·3)	(0·1)	(0·1)			(0·5)	(0·4)	(0·4)	(0·3)	(0·3)
Catarrh	59	37	49	23	29	25	—	2	138	88	226	236	195
	(0·6)	(0·4)	(0·7)	(0·3)	(0·4)	(0·3)		(0·4)	(0·5)	(0·3)	(0·4)	(0·5)	(0·4)
Other conditions	4	2	8	3	5	2	—	—	17	8	25	40	18
	(0·0)	(0·0)	(0·1)	(0·0)	(0·1)	(0·0)			(0·1)	(0·0)	(0·0)	(0·1)	(0·0)
(b) *Throat*													
Tonsils—for observation ...	762	703	270	306	118	256	1	4	1,155	1,275	2,430	2,442	2,347
	(7·6)	(7·2)	(3·7)	(4·2)	(1·5)	(3·3)	(0·2)	(0·8)	(4·5)	(5·0)	(4·7)	(5·1)	(4·8)
Tonsils—for operation ...	494	451	166	182	58	135	—	1	720	776	1,496	1,411	1,301
	(4·9)	(4·6)	(2·3)	(2·5)	(0·8)	(1·8)		(0·2)	(2·8)	(3·0)	(2·9)	(3·0)	(2·7)
Other conditions	5	7	1	7	1	7	—	—	7	22	29	20	22
	(0·0)	(0·1)	(0·0)	(0·1)	(0·0)	(0·1)			(0·0)	(0·1)	(0·1)	(0·0)	(0·0)
(c) *Glands*													
For observation	63	56	23	19	9	15	—	—	95	90	185	193	276
	(0·6)	(0·6)	(0·3)	(0·3)	(0·1)	(0·2)			(0·4)	(0·4)	(0·4)	(0·4)	(0·6)
For operation	2	1	—	—	—	—	—	—	2	1	3	3	1
	(0·0)	(0·0)							(0·0)	(0·0)	(0·0)	(0·0)	(0·0)
Totals	1,600	1,428	595	579	248	457	2	7	2,455	2,499	4,954	4,905	4,564
	(15·9)	(14·6)	(8·2)	(8·0)	(3·3)	(5·9)	(0·4)	(1·4)	(9·5)	(9·8)	(9·6)	(10·3)	(9·3)
8. EYES													
(a) *External Diseases*													
Blepharitis	81	80	64	73	66	64	3	2	214	222	436	445	310
	(0·8)	(0·8)	(0·9)	(1·0)	(0·9)	(0·8)	(0·5)	(0·4)	(0·8)	(0·9)	(0·8)	(0·9)	(0·6)
Conjunctivitis	11	8	3	5	9	7	—	—	23	20	43	66	56
	(0·1)	(0·1)	(0·0)	(0·1)	(0·1)	(0·1)			(0·1)	(0·1)	(0·1)	(0·1)	(0·1)
Corneal opacities	3	3	5	2	5	7	1	—	14	12	26	27	31
	(0·0)	(0·0)	(0·1)	(0·0)	(0·1)	(0·1)	(0·2)		(0·1)	(0·0)	(0·1)	(0·1)	(0·1)
Strabismus	381	385	227	188	121	148	6	5	745	734	1,479	1,442	1,536
	(3·8)	(3·9)	(3·1)	(2·6)	(1·6)	(1·9)	(1·1)	(1·0)	(2·9)	(2·9)	(2·9)	(3·0)	(3·1)
Other diseases	18	24	25	17	12	21	1	1	56	63	119	111	96
	(0·2)	(0·2)	(0·3)	(0·2)	(0·2)	(0·3)	(0·2)	(0·2)	(0·2)	(0·2)	(0·2)	(0·2)	(0·2)
Totals	494	500	324	285	213	247	11	8	1,052	1,051	2,103	2,091	2,029
	(4·0)	(3·9)	(4·5)	(4·0)	(2·8)	(3·2)	(1·9)	(1·6)	(4·1)	(4·1)	(4·1)	(4·4)	(4·1)

8. Eyes													
(*b*) *Visual acuity (Snellen)**													
Fair, 6/9 or 6/12	—	—	814	849	670	912	50	57	1,558	1,858	3,416	3,631	3,559
			(11·2)	(11·8)	(8·8)	(11·9)	(8·8)	(11·4)	(9·9)	(11·8)	(10·8)	(11·8)	(11·4)
Bad, 6/18 or worse	—	—	184	212	255	291	14	10	466	529	995	981	1,084
			(2·5)	(2·9)	(3·4)	(3·8)	(2·5)	(2·0)	(3·0)	(3·4)	(3·2)	(3·2)	(3·5)
Totals	—	—	998	1,061	925	1,203	64	67	2,024	2,387	4,411	4,612	4,643
			(13·7)	(14·7)	(12·2)	(15·7)	(11·3)	(13·4)	(12·9)	(15·2)	(14·0)	(15·0)	(14·9)
Recommended for Refraction	138	112	434	415	438	477	31	22	1,061	1,056	2,117	2,066	1,673
	(1·4)	(1·1)	(6·0)	(5·8)	(5·7)	(6·2)	(5·4)	(4·4)	(4·1)	(4·1)	(4·1)	(4·3)	(3·4)
Recommended for Re-test ...	4	10	120	127	110	165	6	10	246	316	562	551	326
	(0·0)	(0·1)	(1·7)	(1·8)	(1·4)	(2·1)	(1·1)	(2·0)	(1·0)	(1·2)	(1·1)	(1·2)	(0·7)
Totals	142	122	554	542	548	642	37	32	1,307	1,372	2,679	2,617	1,999
	(1·4)	(1·2)	(7·6)	(7·5)	(7·2)	(8·3)	(6·5)	(6·4)	(5·1)	(5·4)	(5·2)	(5·5)	(4·1)
9. Ears													
(*a*) *Diseases*													
Otorrhoea	75	68	74	66	80	89	1	1	236	226	462	469	406
	(0·7)	(0·7)	(1·0)	(0·9)	(1·0)	(1·2)	(0·2)	(0·2)	(0·9)	(0·9)	(0·9)	(1·0)	(0·8)
Other diseases	12	5	10	9	9	3	—	—	31	18	49	49	46
	(0·1)	(0·1)	(0·1)	(0·1)	(0·1)	(0·0)			(0·1)	(0·1)	(0·1)	(0·1)	(0·1)
(*b*) *Defective hearing*													
Grade I—For ordinary class	21	25	15	18	14	40	1	1	53	84	137	117	87
	(0·2)	(0·3)	(0·2)	(0·2)	(0·2)	(0·5)	(0·2)	(0·2)	(0·2)	(0·3)	(0·3)	(0·2)	(0·2)
„ IIa—For front seat ...	5	2	10	7	8	10	1	1	25	20	45	42	27
	(0·0)	(0·0)	(0·1)	(0·1)	(0·1)	(0·1)	(0·2)	(0·2)	(0·1)	(0·1)	(0·1)	(0·1)	(0·1)
„ IIb—For class for semi-deaf	—	—	—	—	—	1	—	—	—	1	1	4	2
						(0·0)					(0·0)	(0·0)	(0·0)
„ III—For deaf class ...	—	—	—	—	—	—	—	—	—	—	—	1	—
												(0·0)	
Totals	113	100	109	100	111	143	3	3	345	349	694	682	568
	(1·1)	(1·0)	(1·5)	(1·4)	(1·5)	(1·9)	(0·5)	(0·6)	(1·3)	(1·4)	(1·4)	(1·5)	(1·2)

* The record of defective vision applies to the better eye, and is *with spectacles if worn at examination*. The figures do not include entrants, as they cannot be examined by means of test types. The percentages given, therefore, relate to the children outwith the entrants group: 31,487 children in all—25 cases fewer than the total number examined outwith the "entrants" age group. (See, however, Appendix IIb, page 58, for the results of examination of children born in 1944.)

TABLE II—Continued.

Age Groups.	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1952.	1951.	1950.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
10. Speech													
Defective articulation	158	83	30	45	19	5	—	—	208	133	341	255	209
	(1·6)	(0·8)	(0·4)	(0·6)	(0·2)	(0·1)			(0·8)	(0·5)	(0·7)	(0·5)	(0·4)
Stammering	26	5	26	4	20	12	1	—	75	21	96	69	80
	(0·3)	(0·1)	(0·4)	(0·1)	(0·3)	(0·2)	(0·2)		(0·3)	(0·1)	(0·2)	(0·1)	(0·2)
Totals	184	88	56	49	39	17	1	—	283	154	437	324	289
	(1·8)	(0·9)	(0·8)	(0·7)	(0·5)	(0·2)	(0·2)		(1·1)	(0·6)	(0·9)	(0·7)	(0·6)
11. Mental and Nervous Condition													
Backward	6	6	13	9	9	3	—	—	28	18	46	42	59
	(0·1)	(0·1)	(0·2)	(0·1)	(0·1)	(0·0)			(0·1)	(0·1)	(0·1)	(0·1)	(0·1)
Dull	2	2	13	4	3	5	—	—	19	12	31	17	24
	(0·0)	(0·0)	(0·2)	(0·1)	(0·0)	(0·1)			(0·1)	(0·0)	(0·1)	(0·0)	(0·0)
Mentally defective (educable)	—	3	1	1	—	—	—	—	1	4	5	2	7
		(0·0)	(0·0)	(0·0)					(0·0)	(0·0)	(0·0)	(0·0)	(0·0)
„ „ (ineducable)	—	—	—	—	—	—	—	—	—	—	—	—	—
Highly nervous	17	12	6	6	—	2	—	—	23	20	43	19	36
	(0·2)	(0·1)	(0·1)	(0·1)		(0·0)			(0·1)	(0·1)	(0·1)	(0·0)	(0·1)
Difficult in behaviour	1	3	1	—	1	1	—	—	3	4	7	11	9
	(0·0)	(0·0)	(0·0)		(0·0)	(0·0)			(0·0)	(0·0)	(0·0)	(0·0)	(0·0)
Totals	26	26	34	20	13	11	—	—	74	58	132	91	135
	(0·3)	(0·3)	(0·5)	(0·3)	(0·2)	(0·1)			(0·3)	(0·2)	(0·3)	(0·2)	(0·3)
12. Circulatory System													
(a) *Organic Heart Disease*													
Congenital	31	35	14	30	21	8	—	1	66	75	141	104	111
	(0·3)	(0·4)	(0·2)	(0·4)	(0·3)	(0·1)		(0·2)	(0·3)	(0·3)	(0·3)	(0·2)	(0·2)
Acquired	14	6	28	22	43	49	4	4	90	82	172	211	271
	(0·1)	(0·1)	(0·4)	(0·3)	(0·6)	(0·6)	(0·7)	(0·8)	(0·3)	(0·3)	(0·3)	(0·4)	(0·6)
(b) *Functional Conditions*	126	71	42	68	40	46	1	2	212	190	402	326	354
	(1·3)	(0·7)	(0·6)	(0·9)	(0·5)	(0·6)	(0·2)	(0·4)	(0·8)	(0·7)	(0·8)	(0·7)	(0·7)
Totals	171	112	84	120	104	103	5	7	368	347	715	641	736
	(1·7)	(1·1)	(1·2)	(1·7)	(1·4)	(1·3)	(0·9)	(1·4)	(1·4)	(1·4)	(1·4)	(1·3)	(1·5)

13. Lungs													
Chronic Bronchitis	24 (0·2)	21 (0·2)	29 (0·4)	21 (0·3)	26 (0·3)	17 (0·2)	—	—	80 (0·3)	60 (0·2)	140 (0·3)	125 (0·3)	100 (0·2)
Suspected Tuberculosis ...	26 (0·3)	29 (0·3)	23 (0·3)	15 (0·2)	15 (0·2)	15 (0·2)	1 (0·2)	1 (0·2)	66 (0·3)	62 (0·2)	128 (0·2)	127 (0·3)	111 (0·2)
Catarrh	375 (3·7)	271 (2·8)	147 (2·0)	97 (1·3)	98 (1·3)	56 (0·7)	6 (1·1)	2 (0·4)	634 (2·5)	434 (1·7)	1,068 (2·1)	1,345 (2·8)	1,069 (2·2)
Other diseases	5 (0·0)	10 (0·1)	5 (0·1)	6 (0·1)	10 (0·1)	5 (0·1)	1 (0·2)	—	22 (0·1)	21 (0·1)	43 (0·1)	27 (0·1)	26 (0·1)
Totals	430 (4·3)	331 (3·4)	204 (2·8)	139 (1·9)	149 (2·0)	93 (1·2)	8 (1·4)	3 (0·6)	802 (3·1)	577 (2·3)	1,379 (2·7)	1,624 (3·4)	1,306 (2·7)
14. Deformities													
(*a*) *Congenital*	60 (0·6)	55 (0·6)	36 (0·5)	18 (0·2)	20 (0·3)	28 (0·4)	1 (0·2)	4 (0·8)	119 (0·5)	105 (0·4)	224 (0·4)	233 (0·5)	194 (0·4)
(*b*) *Acquired*													
Infantile Paralysis	22 (0·2)	21 (0·2)	7 (0·1)	4 (0·1)	4 (0·1)	10 (0·1)	1 (0·2)	1 (0·2)	34 (0·1)	39 (0·2)	73 (0·1)	43 (0·1)	48 (0·1)
Probable Rickets	39 (0·4)	33 (0·3)	26 (0·4)	9 (0·1)	5 (0·1)	7 (0·1)	—	—	71 (0·3)	49 (0·2)	120 (0·2)	108 (0·2)	101 (0·2)
Other causes	60 (0·6)	41 (0·4)	40 (0·6)	48 (0·7)	57 (0·7)	89 (1·2)	4 (0·7)	8 (1·6)	163 (0·6)	190 (0·7)	353 (0·7)	379 (0·8)	321 (0·7)
Totals	181 (1·8)	150 (1·5)	109 (1·5)	79 (1·1)	86 (1·1)	134 (1·7)	6 (1·1)	13 (2·6)	387 (1·5)	383 (1·5)	770 (1·5)	763 (1·6)	664 (1·4)
15. Infectious Diseases	4 (0·0)	4 (0·0)	2 (0·0)	2 (0·0)	—	—	—	—	6 (0·0)	6 (0·0)	12 (0·0)	29 (0·1)	17 (0·0)
16. Other Diseases or Defects ...	339 (3·4)	344 (3·5)	231 (3·2)	218 (3·0)	136 (1·8)	245 (3·2)	4 (0·7)	17 (3·4)	714 (2·8)	834 (3·3)	1,548 (3·0)	1,637 (3·4)	1,336 (2·7)

APPENDIX IIa.—*ADDITIONAL INFORMATION REGARDING RESULTS OF SYSTEMATIC EXAMINATIONS.*

Except in respect of the dual information regarding children who wore glasses, no child appears more than once in each section. "Sections" are indicated by horizontal lines across the columns.

Age Groups.	Entrants.		2nd age group.		3rd age group.		4th age group.		All ages.		1952.	1951.	1950.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.	Totals.
Parents present at examination ...	9,351 (93·1)	8,088 (82·6)	4,598 (63·4)	4,937 (68·5)	1,189 (15·6)	1,734 (22·5)	29 (5·1)	44 (8·8)	15,281 (59·3)	14,935 (58·4)	30,216 (58·8)	28,562 (59·9)	29,566 (60·3)
Children notified to parents as requiring treatment :—													
(a) Defects of clothing and/or cleanliness and trivial caries of the temporary teeth — Verbally	1,778 (17·7)	1,952 (19·9)	549 (7·6)	636 (8·8)	78 (1·0)	387 (5·0)	—	—	2,420 (9·4)	2,995 (11·7)	5,415 (10·5)	4,363 (9·2)	2,330 (4·8)
(a) Defects of clothing and/or cleanliness and trivial caries of the temporary teeth — By printed notice.	334 (3·3)	600 (6·1)	212 (2·9)	434 (6·0)	112 (1·5)	727 (9·5)	—	—	665 (2·6)	1,784 (7·0)	2,449 (4·8)	2,188 (4·6)	1,571 (3·2)
(b) Other defects ... — Verbally	2,070 (20·6)	1,887 (19·3)	1,488 (20·5)	1,503 (20·8)	984 (12·9)	1,082 (14·1)	85 (14·9)	75 (15·1)	4,675 (18·1)	4,597 (18·0)	9,272 (18·1)	9,037 (19·0)	9,454 (19·3)
(b) Other defects ... — By printed notice.	1,297 (12·9)	1,225 (12·5)	1,245 (17·2)	1,223 (17·0)	1,019 (13·4)	1,251 (16·3)	48 (8·4)	40 (8·0)	3,655 (14·2)	3,809 (14·9)	7,464 (14·5)	6,569 (13·8)	4,693 (9·6)
Children noted for re-inspection :—													
(a) Defects of clothing, etc. (as above)	1,001 (10·0)	1,335 (13·6)	354 (4·9)	578 (8·0)	88 (1·2)	928 (12·1)	1 (0·2)	—	1,451 (5·6)	2,864 (11·2)	4,315 (8·4)	4,061 (8·5)	2,539 (5·2)
(b) Other defects...	3,036 (30·2)	2,790 (28·5)	2,274 (31·4)	2,312 (32·1)	1,712 (22·5)	2,272 (29·5)	90 (15·8)	109 (21·9)	7,188 (27·9)	7,567 (29·6)	14,755 (28·7)	14,546 (30·5)	13,629 (27·8)
Children excluded from attendance at school	40 (0·4)	27 (0·3)	11 (0·2)	8 (0·1)	2 (0·0)	10 (0·1)	—	—	53 (0·2)	46 (0·2)	99 (0·2)	98 (0·2)	110 (0·2)
Children " free from defects " in terms of Table III :—													
(a) No recorded defect	3,920 (39·1)	3,426 (35·0)	3,020 (41·7)	2,705 (37·5)	4,563 (59·9)	3,301 (42·9)	404 (71·0)	334 (67·0)	12,064 (46·8)	9,934 (38·9)	21,998 (42·8)	18,995 (39·9)	20,882 (42·6)
(b) Defects of clothing and/or cleanliness only	101 (1·0)	419 (4·3)	83 (1·1)	426 (5·9)	104 (1·4)	754 (9·8)	—	1 (0·2)	295 (1·1)	1,626 (6·4)	1,921 (3·7)	1,628 (3·4)	1,316 (2·7)
(c) Minor Dental Defect only...			596 (8·2)	482 (6·7)	755 (9·9)	664 (8·6)	52 (9·1)	37 (7·4)	1,433 (5·6)	1,216 (4·8)	2,649 (5·2)	2,998 (6·3)	—
(d) Minor dental defect with or without clothing and/or cleanliness defect(s)	2,533 (25·2)	2,710 (27·7)	884 (12·2)	888 (12·3)	124 (1·6)	353 (4·6)	2 (0·4)	—	3,562 (13·8)	3,976 (15·6)	7,538 (14·7)	6,855 (14·4)	10,358 (21·1)

Teeth—	Sound	5,680 (56·6)	5,376 (54·9)	4,535 (62·6)	4,646 (64·4)	6,207 (81·5)	5,963 (77·5)	489 (85·9)	445 (89·4)	17,135 (66·5)	16,697 (65·3)	33,832 (65·9)	30,035 (63·0)	31,996 (65·3)
Number Recorded 51,348	One to four decayed	3,430 (34·2)	3,519 (35·9)	2,463 (34·0)	2,350 (32·6)	1,362 (17·9)	1,675 (21·8)	78 (13·7)	52 (10·4)	7,409 (28·7)	7,694 (30·1)	15,103 (29·4)	15,278 (32·1)	15,119 (30·9)
	Five or more decayed	931 (9·3)	900 (9·2)	249 (3·4)	215 (3·0)	51 (0·7)	55 (0·7)	2 (0·4)	1 (0·2)	1,238 (4·8)	1,175 (4·6)	2,413 (4·7)	2,332 (4·9)	1,879 (3·8)
Visual acuity (Snellen) :—														
Children who wore glasses at examination	With glasses— Good, 6/6 ...	Visual acuity of entrants not recorded		375 (5·2)	454 (6·3)	393 (5·2)	495 (6·4)	68 (12·0)	87 (17·5)	848 (5·4)	1,049 (6·7)	1,897 (6·0)	1,594 (5·2)	1,423 (4·6)
	Fair, 6/9, 6/12			197 (2·7)	220 (3·1)	134 (1·8)	250 (3·3)	24 (4·2)	29 (5·8)	361 (2·3)	504 (3·2)	865 (2·7)	915 (3·0)	778 (2·5)	
	Bad, 6/18, etc.			47 (0·6)	50 (0·7)	28 (0·4)	48 (0·6)	4 (0·7)	3 (0·6)	80 (0·5)	103 (0·7)	183 (0·6)	197 (0·6)	173 (0·6)	
	Without glasses Good, 6/6 ...			217 (3·0)	248 (3·4)	156 (2·0)	249 (3·2)	20 (3·5)	36 (7·2)	401 (2·5)	539 (3·4)	940 (3·0)	777 (2·5)	665 (2·1)	
	Fair, 6/9, 6/12			213 (2·9)	253 (3·5)	150 (2·0)	228 (3·0)	10 (1·8)	16 (3·2)	377 (2·4)	503 (3·2)	880 (2·8)	823 (2·7)	765 (2·5)	
	Bad, 6/18, etc.			189 (2·6)	223 (3·1)	249 (3·3)	316 (4·1)	66 (11·6)	67 (13·5)	511 (3·2)	614 (3·9)	1,125 (3·6)	1,106 (3·6)	944 (3·0)	
Children not wearing glasses at examination	Good, 6/6 ...	See page 53.		5,864 (81·0)	5,687 (79·0)	6,300 (82·7)	5,993 (77·9)	437 (76·8)	344 (69·1)	12,857 (81·7)	12,322 (78·2)	25,179 (80·0)	24,586 (79·8)	25,051 (80·5)	
	Fair, 6/9, 6/12			617 (8·5)	629 (8·7)	536 (7·0)	662 (8·6)	26 (4·6)	28 (5·6)	1,197 (7·6)	1,354 (8·6)	2,551 (8·1)	2,716 (8·8)	2,781 (8·9)	
	Bad, 6/18, etc.			137 (1·9)	162 (2·2)	227 (3·0)	243 (3·2)	10 (1·8)	7 (1·4)	386 (2·5)	426 (2·7)	812 (2·6)	784 (2·5)	911 (2·9)	
Immunisation (Diphtheria).	Partial ...	106 (1·1)	101 (1·0)	37 (0·5)	35 (0·5)	19 (0·2)	11 (0·1)	—	—	165 (0·6)	147 (0·6)	312 (0·6)	243 (0·5)	191 (0·4)	
Number Recorded 51,344	Completed ...	7,394 (73·6)	7,303 (74·6)	6,753 (93·2)	6,797 (94·3)	6,976 (91·5)	7,190 (93·5)	500 (88·0)	470 (94·4)	21,889 (84·9)	22,093 (86·4)	43,982 (85·7)	40,136 (84·2)	41,651 (85·0)	
	Not immunised	2,540 (25·3)	2,391 (24·4)	457 (6·3)	379 (5·3)	623 (8·2)	492 (6·4)	68 (12·0)	28 (5·6)	3,724 (14·4)	3,326 (13·0)	7,050 (13·7)	7,262 (15·2)	7,145 (14·6)	
Vaccination (Smallpox)	Successful vaccination	6,827 (68·0)	6,742 (68·8)	4,967 (68·5)	4,955 (68·7)	4,672 (61·3)	5,420 (70·5)	343 (60·3)	299 (60·0)	17,015 (66·0)	17,685 (69·2)	34,700 (67·6)	29,213 (61·3)	—	
Number Recorded 51,347	Successful re-vaccination	424 (4·2)	391 (4·0)	819 (11·3)	868 (12·0)	1,978 (26·0)	1,513 (19·7)	180 (31·6)	161 (32·3)	3,438 (13·3)	2,980 (11·7)	6,418 (12·5)	10,047 (21·1)	—	
	Unsuccessful or no vaccination	2,791 (27·8)	2,662 (27·2)	1,461 (20·2)	1,387 (19·2)	969 (12·7)	760 (9·9)	46 (8·1)	38 (7·6)	5,329 (20·7)	4,900 (19·2)	10,229 (19·9)	8,382 (17·6)	—	

APPENDIX IIb.—*VISUAL ACUITY AND HEARING OF CHILDREN BORN IN* 1944.

See Report for 1948, page 52.

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. Detailed results of inspection during the period are given below under the relative sub-headings, and columns of 1951 and 1950 totals are also supplied for purpose of comparison.

VISUAL ACUITY.

Result of Eyesight (Snellen) Test.

		No. and percentage. 1952. Boys.	Girls.	Totals.	1951. Totals.	1950. Totals.
Children who wore glasses at examintion.	With Glasses—					
	Good, 6/6 ...	105 (1·4)	129 (1·7)	234 (1·6)	177 (1·2)	137 (0·9)
	Fair, 6/9, 6/12 ...	271 (3·6)	304 (4·1)	575 (3·8)	516 (3·5)	431 (3·0)
	Bad, 6/18, etc. ...	55 (0·7)	51 (0·7)	106 (0·7)	104 (0·7)	95 (0·7)
	Without Glasses—					
	Good, 6/6	58 (0·8)	71 (0·9)	129 (0·9)	105 (0·7)	62 (0·4)
	Fair, 6/9, 6/12 ...	228 (3·0)	243 (3·3)	471 (3·1)	398 (2·7)	363 (2·5)
	Bad, 6/18, etc. ...	145 (1·9)	170 (2·3)	315 (2·1)	294 (2·0)	238 (1·6)
Children not wearing glasses at examination	Good, 6/6	4,361 (57·6)	4,140 (55·4)	8,501 (56·5)	8,058 (55·1)	7,879 (54·2)
	Fair, 6/9, 6/12 ...	2,198 (29·0)	2,248 (30·0)	4,446 (29·5)	4,618 (31·6)	4,779 (32·9)
	Bad, 6/18, etc. ...	578 (7·6)	606 (8·1)	1,184 (7·9)	1,143 (7·8)	1,225 (8·4)
	Totals	7,568	7,478	15,046	14,616	14,546

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

	No. and percentage. 1952. Boys.	Girls.	Totals.	1951. Totals.	1950. Totals
Good, 6/6	4,466 (59·0)	4,269 (57·1)	8,735 (58·0)	8,235 (56·3)	8,016 (55·1)
Fair, 6/9, 6/12	2,469 (32·6)	2,552 (34·1)	5,021 (33·4)	5,134 (35·1)	5,210 (35·8)
Bad, 6/18, etc.	633 (8·4)	657 (8·8)	1,290 (8·6)	1,247 (8·5)	1,320 (8·8)
Totals	7,568	7,478	15,046	14,616	14,546

Of those with defective eyesight, 1,358 (665 boys and 693 girls) were recommended for refraction or for re-test.

HEARING.

Result of Hearing Test.

	No. and percentage. 1952. Boys.	Girls.	Totals.	1951. Totals.	1950. Totals.
Normal	7,523 (99·4)	7,418 (99·2)	14,941 (99·3)	14,534 (99·4)	14,465 (99·4)
Defective—					
Grade I, for ordinary class ...	23 (0·3)	39 (0·5)	62 (0·4)	23 (0·2)	38 (0·3)
Grade IIa, for front seat	2 (0·0)	9 (0·1)	11 (0·1)	35 (0·2)	17 (0·1)
Grade IIb, for class for semi-deaf ...	17 (0·2)	9 (0·1)	26 (0·2)	24 (0·2)	19 (0·1)
Grade III, for deaf class	3 (0·0)	3 (0·0)	6 (0·0)	—	7 (0·0)
Totals	7,568	7,478	15,046	14,616	14,546

23 of the above children (14 boys and 9 girls) were referred to clinic for investigation of the cause of deafness.

APPENDIX IIc.—*AVERAGE MEASUREMENTS OF SCHOOL CHILDREN.*

The averages for age, height and weight of children measured in the course of routine inspection during the year 1951-52, are given and commented upon in the succeeding pages.

PUPILS AGED SIXTEEN YEARS.

Details of the averages in this age-group are as follows :—

	Non-transferred		Transferred		All	
	Boys	Girls	Boys	Girls	Boys	Girls
Number examined ...	414	296	30	62	444	358
Average age (in months beyond year of age) ...	6·12	7·34	7·63	5·65	6·22	7·05
Height (in inches) ...	67·52	64·15	67·17	62·69	67·50	63·90
Weight (in pounds) ...	133·87	122·83	127·77	119·65	133·45	124·52

PUPILS IN OTHER AGE-GROUPS.

The table on page 63 shows the averages of 5, 9 and 13 year-olds and the relative average measurements adjusted to uniform ages for the year 1952 and for each of the previous years to 1943. To simplify the study of these adjusted measurements, the highest in each column

is printed in **heavy** type and the second highest in *italics*. The findings may be summarised thus :—

(1) Pupils aged five years.

(*a*) Boys. Height average for "non-transferred" pupils was highest in the series, that for "transferred," although better than in the previous year, again failed to attain second place, but the "all" figure was the *highest* in its series. Weights failed to reach second place in any series but the figure for "transferred" pupils showed an improvement over that of the previous year.

(*b*) Girls. "Non-transferred" pupils attained highest place for height, "transferred" improved to second highest, and the influence on the "all" figure was to raise it to the *highest* position. Weights showed some deterioration, falling below even the second position in each column.

(2) Pupils aged nine years.

(*a*) Boys. In five out of the six columns, *highest* place was reached, only the weight of "non-transferred" pupils showing deterioration.

(*b*) Girls. Heights and weights occupied *highest or second highest* position in all columns—little or no change from the previous year's figures being recorded.

(3) Pupils aged thirteen years.

(*a*) Boys. *Highest* place was attained in each series.

(*b*) Girls. In four out of six *highest* place was reached. "Transferred" pupils just failed to equal the highest figure for weight and the second highest for height recorded in the previous year.

(4) In each relative group the average measurement in 1952 was higher than the highest average in any year prior to 1943.

Graphs of the average measurements for the past ten years of pupils in the age-groups, 5, 9 and 13 years, are given on pages 64 and 65.

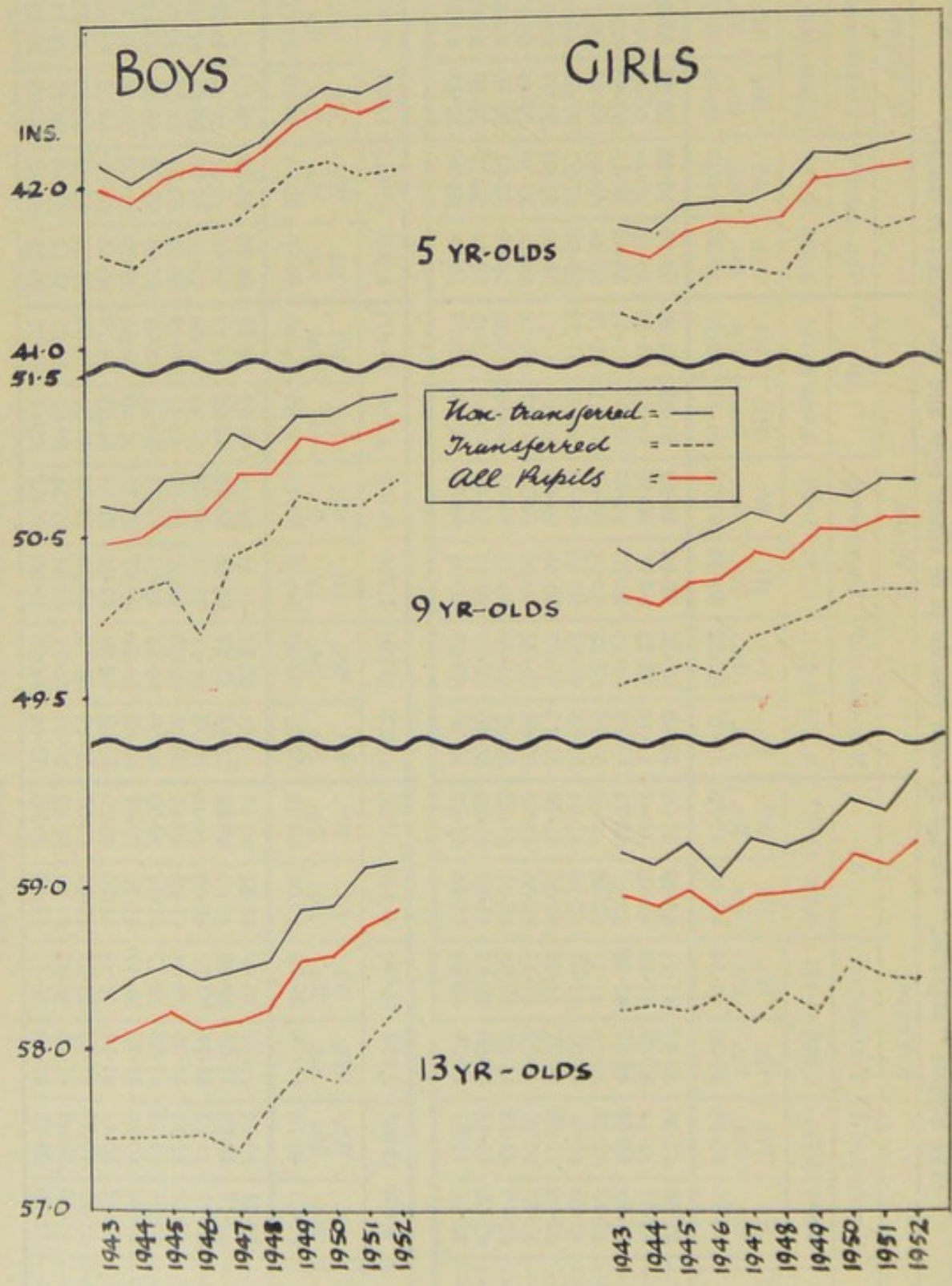
Continuous improvement since 1943 in the physique of Glasgow school children may be inferred from perusal of these graphs—due allowance having been made for the inevitable fluctuations. The accelerated growth of adolescent girls is clearly shown—for both height and weight. In the same connection, it is interesting to note that, with one exception—height of the " transferred " pupil—the average thirteen-year-old girl in 1943 was taller and heavier than the average boy of the same age and category in 1952.

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.	5 YEARS.						9 YEARS.						13 YEARS.					
Type of School	Non-transf'd		Transferred		All		Non-transf'd		Transferred		All		Non-transf'd		Transferred		All	
No. of Boys & Age (months)*	6,631 (3·70)		2,666 (4·12)		9,297 (3·82)		4,235 (6·17)		1,734 (5·92)		5,969 (6·10)		4,526 (5·73)		2,009 (5·60)		6,535 (5·69)	
Actual Average Measurements 1952	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.
	42·61	42·23	42·09	41·34	42·46	41·98	51·57	62·82	50·99	61·35	51·41	62·39	59·30	91·47	58·36	87·76	59·01	90·33
Adjusted Average Measurements (uniform ages of 5 yrs. 4 mths., 9 yrs. 5 mths., and 13 yrs. 5 mths. respectively) 1952—	**42·65**	42·30	42·07	41·31	**42·49**	42·02	**51·38**	62·30	**50·84**	**60·93**	**51·22**	**61·90**	**59·16**	**90·90**	**58·25**	**87·29**	**58·88**	**89·80**
1951—	42·55	*42·40*	42·05	41·23	42·40	*42·05*	*51·35*	**62·43**	50·70	60·40	*51·15*	61·82	*59·11*	*90·50*	*58·05*	*86·82*	*58·79*	*89·38*
1950—	*42·60*	**42·60**	**42·13**	**41·59**	*42·47*	**42·31**	51·26	*62·33*	50·70	*60·79*	51·08	*61·84*	58·89	89·19	57·80	86·33	58·60	88·43
1949—	42·47	42·25	*42·10*	*41·57*	42·36	*42·05*	51·26	62·23	*50·75*	60·57	51·11	61·73	58·85	88·86	57·88	86·28	58·57	88·13
1948—	42·29	41·85	41·91	41·05	42·18	41·61	51·05	61·62	50·49	60·57	50·89	61·32	58·54	87·97	57·65	85·19	58·28	87·18
1947—	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	87·60	57·37	83·97	58·20	86·67
1946—	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	87·70	57·47	85·12	58·18	87·01
1945—	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	87·91	57·46	84·45	58·26	87·15
1944—	42·02	41·48	41·50	40·83	41·87	41·28	50·66	60·77	50·17	59·65	50·50	60·42	58·44	88·17	57·46	84·69	58·18	87·23
1943—	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	86·99	57·43	84·74	58·07	86·39
No. of Girls & Age (months)*	6,496 (3·96)		2,652 (4·28)		9,148 (4·05)		4,022 (6·39)		1,776 (6·33)		5,798 (6·37)		4,667 (5·64)		1,969 (5·40)		6,636 (5·57)	
Actual Average Measurements 1952	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.
	42·20	40·73	41·76	39·75	42·07	40·45	51·07	60·96	50·38	59·15	50·86	60·40	59·80	95·91	58·49	91·62	59·41	94·64
Adjusted Average Measurements (uniform ages of 5 yrs. 4 mths., 9 yrs. 5 mths., and 13 yrs. 5 mths. respectively) 1952—	**42·21**	40·74	*41·72*	39·69	**42·07**	40·44	*50·83*	**60·27**	*50·15*	*58·49*	**50·62**	**59·72**	**59·70**	**95·33**	58·43	*91·25*	**59·32**	**94·12**
1951—	*42·18*	**40·89**	41·66	**39·83**	*42·03*	**40·58**	**50·84**	**60·27**	**50·16**	**58·52**	**50·62**	*59·71*	59·46	*94·42*	*58·45*	**91·26**	59·15	*93·46*
1950—	42·11	*40·78*	**41·74**	39·72	42·00	*40·46*	50·73	*60·22*	50·13	58·38	*50·54*	59·64	*59·52*	94·10	**58·53**	91·02	*59·22*	93·16
1949—	42·12	40·73	41·65	39·61	41·98	40·41	50·76	60·05	50·02	58·18	*50·54*	59·49	59·32	92·94	58·23	90·24	59·01	92·16
1948—	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	92·28	58·33	89·87	58·98	91·58
1947—	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	92·50	58·16	88·74	58·96	91·41
1946—	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	92·07	58·32	89·82	58·86	91·47
1945—	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	93·08	58·23	90·26	59·00	92·37
1944—	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	91·93	58·27	89·11	58·90	91·19
1943—	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	92·02	58·23	89·52	58·96	91·37

*Beyond years of age given at head of sections.

AVERAGE HEIGHTS



AVERAGE WEIGHTS

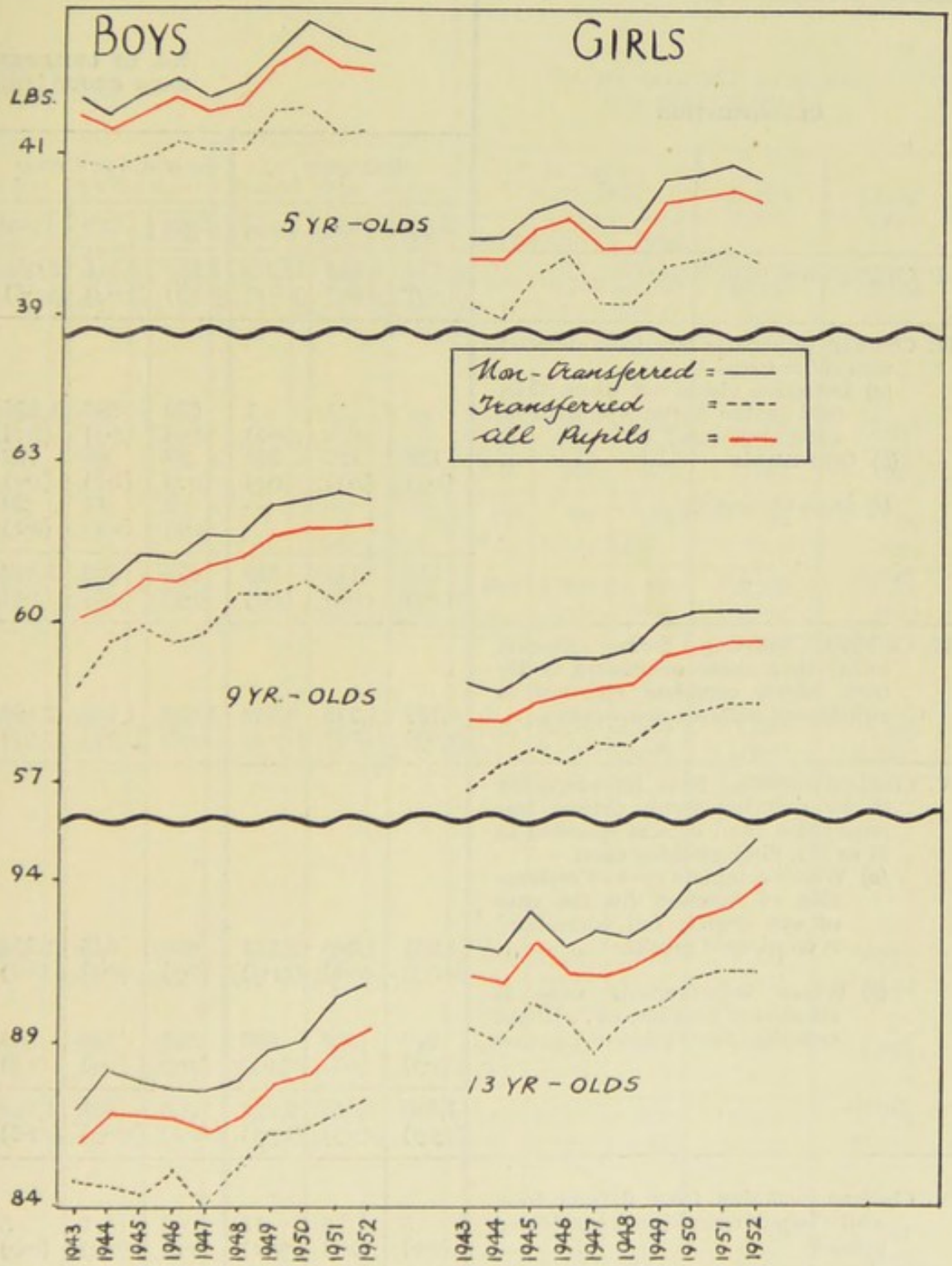


TABLE III.—*SYSTEMATIC MEDICAL EXAMINATION OF ... ACCORDING TO REMEDIABILITY OF THE MAJOR ...*

Classification	No. of children each group (and					
	Entrants			Second Age Group		
	Boys	Girls	Total	Boys	Girls	Total
I. Children free from defects	6,554 (65·3)	6,555 (66·9)	13,109 (66·1)	4,583 (63·3)	4,501 (62·4)	9,084 (62·8)
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	—	1 (0·0)	1 (0·0)	579 (8·0)	596 (8·3)	1,175 (8·1)
(*b*) Oral Sepsis	126 (1·3)	112 (1·1)	238 (1·2)	87 (1·2)	85 (1·2)	172 (1·2)
(*c*) Both (*a*) and (*b*)	—	—	—	9 (0·1)	11 (0·2)	20 (0·1)
Totals	126 (1·3)	113 (1·2)	239 (1·2)	675 (9·3)	692 (9·6)	1,367 (9·5)
III. Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks ...	1,777 (17·7)	1,775 (18·1)	3,552 (17·9)	1,057 (14·6)	1,129 (15·7)	2,186 (15·1)
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 ...	1,231 (12·3)	1,040 (10·6)	2,271 (11·4)	629 (8·7)	645 (8·9)	1,274 (8·8)
(*b*) Where improvement only is considered possible, *e.g.* without complete restoration of function	349 (3·5)	306 (3·1)	655 (3·3)	301 (4·2)	243 (3·4)	544 (3·8)
Totals	1,580 (15·7)	1,346 (13·7)	2,926 (14·7)	930 (12·8)	888 (12·3)	1,818 (12·6)
V. Children suffering from defects from which improvement is not considered possible	5 (0·0)	6 (0·1)	11 (0·1)	2 (0·0)	1 (0·0)	3 (0·0)
Total numbers of children examined ...	10,042	9,795	19,837	7,247	7,211	14,458

• Includes 674 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, 1952			Totals, 1951	Totals, 1950
Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total		
5,546 (72·8)	5,072 (65·9)	10,618 (69·3)	458 (80·5)	372 (74·7)	830 (77·8)	17,354 (67·3)	16,752 (65·5)	34,106 (66·4)	30,476 (64·0)	32,556 (66·4)
538 (7·1)	708 (9·2)	1,246 (8·1)	47 (8·3)	52 (10·4)	99 (9·3)	1,179 (4·6)	1,387 (5·4)	2,566 (5·0)	2,594 (5·4)	2,645 (5·4)
50 (0·7)	89 (1·2)	139 (0·9)	3 (0·5)	1 (0·2)	4 (0·4)	273 (1·1)	289 (1·1)	562 (1·1)	667 (1·4)	679 (1·4)
4 (0·1)	9 (0·1)	13 (0·1)	1 (0·2)	1 (0·2)	2 (0·2)	14 (0·1)	21 (0·1)	35 (0·1)	45 (0·1)	50 (0·1)
592 (7·8)	806 (10·5)	1,398 (9·1)	51 (9·0)	54 (10·8)	105 (9·8)	1,466 (5·7)	1,697 (6·6)	3,163 (6·2)	3,306 (6·9)	3,374 (6·9)
802 (10·5)	892 (11·6)	1,694 (11·1)	29 (5·1)	27 (5·4)	56 (5·2)	3,705 (14·4)	3,870 (15·1)	7,575 (14·8)	7,535 (15·8)	7,300 (14·9)
388 (5·1)	564 (7·3)	952 (6·2)	16 (2·8)	22 (4·4)	38 (3·6)	2,277 (8·8)	2,296 (9·0)	4,573 (8·9)	4,393 (9·2)	4,051 (8·3)
290 (3·8)	354 (4·6)	644 (4·2)	15 (2·6)	23 (4·6)	38 (3·6)	972 (3·8)	938 (3·7)	1,910 (3·7)	1,881 (3·9)	1,664 (3·4)
678 (8·9)	918 (11·9)	1,596 (10·4)	31 (5·4)	45 (9·0)	76 (7·1)	3,249 (12·6)	3,234 (12·6)	6,483 (12·6)	6,274 (13·2)	5,715 (11·7)
2 (0·0)	5 (0·1)	7 (0·0)	—	—	—	9 (0·0)	13 (0·1)	22 (0·0)	55 (0·1)	51 (0·1)
620	7,693	15,313	569	498	1,067	25,783	25,566	51,349	47,646	48,996

†with normal Age Groups.

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

DEFECTS FOUND IN CHILDREN PRESENTED FOR MEDICAL INSPECTION AS "NON-ROUTINES."—11,918 children were presented for "non-routine" inspection (generally on account of defect observed or suspected by teachers); 10,531 of these were pupils in ordinary schools and 1,387 in special schools.

Some of these children were found on examination to have more than one defect. The individual results were: nits minor, 246; nits major and/or vermin, 255; skin conditions, 1,120; eye conditions (including defective vision), 3,617; ear, nose and throat defects, 1,384; "general" defects, 4,300; defective teeth, 187; no apparent disease, 196; and other causes, 690.

RE-INSPECTION BY MEDICAL OFFICERS OF "ABNORMALS."—The total number of re-inspections was 9,898. Of these, 3,522 (*35·6* per cent.) were found to be receiving treatment at the school clinics, 1,919 (*19·4* per cent.) were being treated elsewhere, 2,914 (*29·4* per cent.) did not require treatment, and 1,543 (*15·6* 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 are given on page 83).

APPENDIX IIIb.—*OTHER SPECIAL INSPECTIONS.*

(*a*) LEAVING INTERVIEWS.—These were granted to 7,914 pupils in order to bring medical records up-to-date and to give advice regarding suitability for certain occupations.

(*b*) HOLIDAY CAMPS, ETC.—Arrangements were again made for the inspection of pupils attending schools, junior clubs, and play centres who had been proposed for holiday camps in the summer and for school children going to harvesting camps in the autumn. More children than last year were seen in connection with holiday camps, but fewer harvesters were examined.

(i) *School, Junior Club and Play Centre Holiday Camps (June-July, 1952).*

	Boys.		Girls.	
	Preliminary Inspection.	Final Inspection.	Preliminary Inspection.	Final Inspection.
	No. and %.	No. and %.	No. and %.	No. and %.
Fit	2,837 (*84·6*)	3,307 (*97·2*)	1,656 (*65·8*)	2,320 (*91·7*)
*Fit?	466 (*13·9*)	—	838 (*33·3*)	—
Unfit	52 (*1·5*)	94 (*2·8*)	21 (*0·8*)	210 (*8·3*)
Totals ...	3,355	3,401	2,515	2,530

* Doubtful fitness at preliminary inspection.

In the above table the percentages shown for children recorded as " fit " at the preliminary inspection were inferior to those of 1951. Most of the rejections were due to uncleanliness.

(ii) *Children for Harvesting Camps (October,* 1951).

	Boys.		Girls.	
	Preliminary Inspection.	Final Inspection.	Preliminary Inspection.	Final Inspection.
	No. and %.	No. and %.	No. and %.	No. and %.
Fit	2,232 (*83·9*)	2,379 (*95·9*)	232 (*53·3*)	336 (*81·8*)
*Fit ?	391 (*14·7*)	—	181 (*41·6*)	—
Unfit	38 (*1·4*)	101 (*4·1*)	22 (*5·1*)	75 (*18·2*)
Totals ...	2,661	2,480	435	411

* Doubtful fitness at preliminary inspection.

Compared with the returns for 1951, more children were passed as " fit " for harvesting at the first inspection.

(*c*) Cleanliness Inspection in Schools.—Cleanliness Inspectresses examined slightly fewer children at first inspections but considerably more than usual at re-inspections, the overall figure greatly exceeding that in any year since the introduction of the cleanliness inspection scheme by nurses in 1942. Nurse Inspectresses of the Sanitary Divisions, however, saw fewer children at general inspections than for some years but paid slightly more visits to schools. The results of inspection showed that the children examined by cleanliness inspectresses gave evidence of some improvement in respect of major verminous conditions but little or none as regards nits infection. Similar findings were recorded by the nurse inspectresses. Details of these inspections are given below.

Cleanliness Inspectresses of the Education Health Service.

	Boys.		Girls.	
	1952	1951	1952	1951
First Inspections.				
Examined ...	50,686	51,355	51,378	52,325
Infested ...	1,086 (*2·1*)	1,068 (*2·1*)	3,271 (*6·4*)	3,393 (*6·5*)
Infected ...	3,141 (*6·2*)	2,608 (*5·1*)	11,067 (*21·5*)	10,839 (*20·7*)
Re Inspections.				
Examined ...	16,096	10,511	44,060	30,765
Infested ...	1,201 (*7·5*)	881 (*8·4*)	5,450 (*12·4*)	4,788 (*15·6*)
Infected ...	4,958 (*30·8*)	3,140 (*29·9*)	20,842 (*47·3*)	14,545 (*47·3*)

In 536 instances, formal notices to cleanse children within 24 hours were issued, mainly by Cleanliness Inspectresses and Senior Woman Assistants. On re-inspection, 128 were found to have been cleansed at home by the parents and 132 to have been compulsorily disinfested at school or clinic. 51 parents were successfully prosecuted under the Education (Scotland) Act, 1946, Section 52; 44 were fined £1, and 7 were admonished.

Nurse Inspectresses of the Sanitary Divisions.

	Boys.		Girls.	
	1952	1951	1952	1951
General Inspections.				
Examined ...	50,243	53,791	47,886	48,476
Infested ...	103 (*0·2*)	131 (*0·2*)	323 (*0·7*)	385 (*0·8*)
Infected ...	5,461 (*10·9*)	5,780 (*10·6*)	14,594 (*30·5*)	13,993 (*28·9*)

The Nurse Inspectresses also visited 5,458 houses and re-visited 516. They issued 238 formal printed notices to parents to cleanse the children within 24 hours, and reported that 31 children had been cleansed at clinics and 8,443 by the parents.

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

See Reports for 1950 and 1951, page 68 in both volumes.

The scheme was reviewed and some reorganisation was put into effect during the year. The more important administrative changes are discussed below.

(1) Expansion was ruled out for the present since the satisfactory operation of the scheme was dependent upon the Senior Woman Assistant being freed from teaching duties for at least part of the day and because the current shortage of teaching staff was likely to continue. It was decided, therefore, that the number of Units be kept at twenty-six meantime.

(2) Three of the Units—those at Springfield, Provanmill and St. Thomas's Schools—were discontinued, and three other schools (St. Mark's Primary, St. Anne's and Annfield) were selected to take their place in the scheme, but were not in complete working order by the end of the school session.

(3) All the Welfare Attendants received a special course of instruction and new applicants were approved by the Principal School Medical Officer and were given a similar course of instruction before taking up their duties. In addition, new employees were considered to be on probation for three months, at the end of which period a report on each was supplied by the visiting School Medical Officer.

(4) An experiment was conducted whereby Welfare Attendants in certain schools were appointed on a full-time basis to ascertain the extent to which they could usefully be employed. The Hygiene Units attached to three schools (Broomloan Road, St. Aloysius', C.4. and St. Francis' Girls and Infants) were chosen and the Attendants were appointed on a full-time basis for welfare work from 18th February, 1952, to the end of the session. Satisfactory reports were subsequently obtained on the operation of the scheme and it was decided that the experiment would be continued during Session 1952-53 in the three schools already selected and extension of the scheme would be limited meantime to a further three schools to be chosen later.

(5) Re-equipping of the Units was approved and it was hoped that all would be in working order at an early date in the 1952-53 Session.

(6) Medical Officers when visiting schools with Hygiene Units were instructed to advise Head Teachers on the operation of the Units and to report to the Principal Medical Officer.

Below is a Table showing the percentages of children in the selected schools found to be " clean and well-cared for in every respect" at two general inspections during the session.

	First Inspection.		Second Inspection.	
	Boys.	Girls.	Boys.	Girls.
Six original schools (January, 1941) ...	86·2%	57·9%	92·4%	67·0%
Other schools (June, 1942 and later) ...	85·6%	64·1%	89·0%	68·9%
All selected schools	85·7%	62·5%	89·9%	68·4%

In the *six original schools* the boys at first inspection fell below the comparatively high percentage attained in 1951 and also failed to improve upon the 1950 figure; but they were better than in any other year back to 1941, the year in which the scheme was initiated. At second inspection, the boys' percentage was the best ever recorded. The girls, however, although slightly improved at second inspection, were unable to show a similar progress at first inspection.

Boys in the *other schools*, on the whole, gave evidence of fairly steady improvement over many years at both inspections. Girls were inconsistent, the improvement noted at both inspections in 1951 not being maintained in 1952; although the percentages, especially at first inspection, compared favourably with most of those in previous years.

As regards *all selected schools*, it was apparent that the boys were, on the whole, showing improvement—in fact, at second inspection, the latest percentage was the highest ever recorded. The girls showed a slight decline for the year at both inspections probably as the result of the withdrawal of the three Units with the best returns; prior to 1952, however, there had been a steady improvement for some years.

To illustrate the tendency since 1941 a Table showing the percentages of cleanliness at two inspections and a Graph of these results are given below.

Percentages of Clean Children Examined in Selected Schools at Two Inspections Each Year since 1941.

Year of Examination	First Inspection		Final Inspection		No. of Schools Represented
	Boys	Girls	Boys	Girls	
1941	55·0	29·2	78·4	65·8	6
2	61·8	33·5	80·5	58·8	11
3	*76·4	*54·9	84·9	60·2	17
4	80·0	51·3	89·4	70·0	17
5	81·5	60·3	88·6	72·3	19
6	81·7	61·4	89·5	71·4	26
7	86·4	63·8	88·4	65·7	26
8	81·5	57·6	86·8	67·3	26
9	82·6	59·7	87·8	67·9	26
1950	86·2	64·3	87·6	68·7	26
1	86·1	66·6	89·4	71·2	26
2	85·7	63·3	89·9	68·4	23

*Children at 1 school only.

GRAPH OF CLEANLINESS PERCENTAGES IN SELECTED SCHOOLS

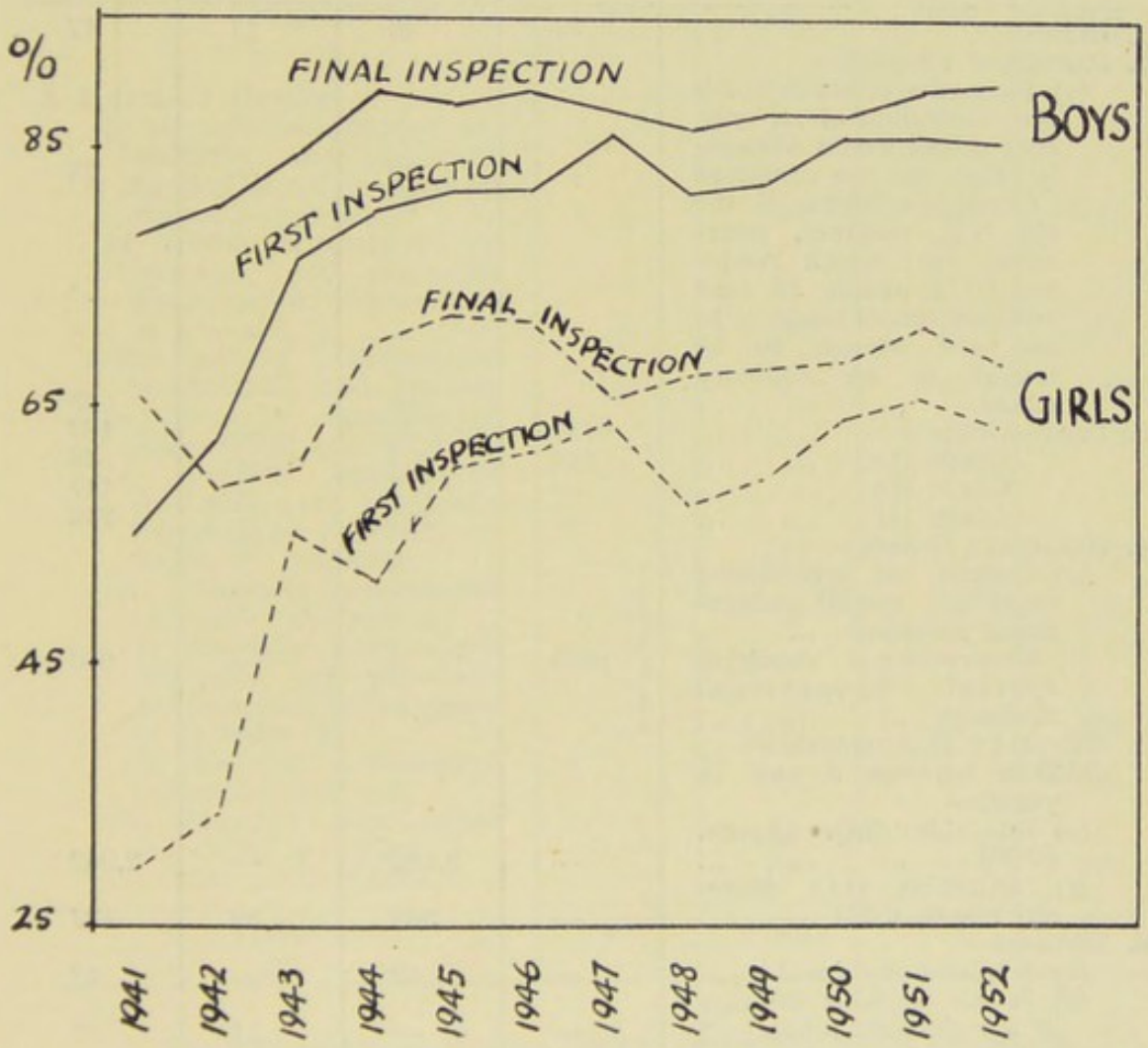


TABLE IV.—*RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.*

Disability.	(*a*) At ordinary school.	(*b*) At special schools or classes.	(*c*) At no school or institution.	Totals.
1. BLIND	—	46	‡1	47
2. PARTIALLY SIGHTED—				
(*a*) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	—	28	—	28
(*b*) Other conditions of the eye, *e.g.*, cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	—	48	—	48
3. DEAF—Grade I	*137	—	—	137
Grade IIA	*45	—	—	45
Grade IIB	—	117	—	117
Grade III	—	242	—	242
4. DEFECTIVE SPEECH—				
(*a*) Defects of articulation requiring special educational measures	†675	5	—	680
(*b*) Stammering requiring special educational measures				
5. MENTALLY HANDICAPPED— (Children between 5 and 16 years)—				
(*a*) Educable (I.Q. approx. 50-70)	—	2,962	—	2,962
(*b*) Ineducable (I.Q. generally less than 50)	—	398	89	487
6. EPILEPSY—				
(*a*) Mild and occasional ...	—	43	—	43
(*b*) Severe (suitable for care in a residential school) ¶	—	—	‡2	2
7. PHYSICALLY HANDICAPPED— (Children between 6 and 16 years)—				
(*a*) Non - pulmonary tuberculosis (excluding cervical glands)	—	151	‡5	156
(*b*) General orthopaedic conditions	—	183	‡27	210
(*c*) Organic heart disease ...	—	72	‡5	77
(*d*) Other causes of ill-health	—	492	‡31	523
Carried forward ...	857	4,787	160	5,804

Disability.	(a) At ordinary school.	(b) At special schools or classes.	(c) At no school or institution.	Totals.
Brought forward ...	857	4,787	160	5,804
8. MULTIPLE DEFECTS—				
(i) Mentally handicapped (ineducable) and physically handicapped ("general orthopaedic conditions") ...	—	34	21	55
(ii) Mentally handicapped (ineducable) and physically handicapped ("other causes of ill-health")	—	94	11	105
(iii) Mentally handicapped (ineducable) and epilepsy	—	21	15	36
(iv) Mentally handicapped (ineducable) and blind ...	—	—	3	3
(v) Mentally handicapped (educable) and physically handicapped ("general orthopaedic conditions") ...	—	117	—	117
(vi) Mentally handicapped (educable) and epilepsy ...	—	36	—	36
(vii) Mentally handicapped (educable) and physically handicapped ("other causes of ill-health")	—	1,021	—	1,021
(viii) Mentally handicapped (educable) and deaf ...	—	—	—	—
(ix) Mentally handicapped (educable) and blind ...	—	—	—	—
(x) Other multiple defects ...	—	106	‡1	107
Totals	857	6,216	211	7,284

* 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.

TABLE V.—*DENTAL INSPECTION AND TREATMENT.*

DENTAL INSPECTION.—

(1) NUMBER OF CHILDREN INSPECTED BY THE DENTAL OFFICERS.	1952			1951	1950
AGE.	Systematic Examinations.	Other Cases.	Totals.	Totals.	Totals.
2	—		—	—	—
3	3		3	—	—
4	66		66	48	22
5	5,089		5,089	3,778	3,305
6	4,802		4,802	4,672	3,866
7	5,135		5,135	5,086	3,621
8	5,585		5,585	4,585	3,379
9	4,961	Nil.	4,961	4,512	3,553
10	5,135		5,135	4,561	3,404
11	4,838		4,838	4,451	3,284
12	2,839		2,839	2,745	1,843
13	2,324		2,324	1,862	1,060
14	2,223		2,223	1,831	995
15	310		310	290	75
16	19		19	1	—
Totals	43,329	—	43,329	38,422	28,407
(1A). No. of schools inspected	72		72	65	43
(1B). Half-days spent at inspection	192		192	173	110
(2). Found to require treatment	33,242 (76·7%)	Nil.	33,242 (76·7%)	29,132 (75·8%)	21,474 (75·6%)
(2A). Number of children accepting treatment	18,436 (55·4%)		18,436 (55·4%)	16,372 (56·2%)	12,677 (59·0%)
(2B). Cards not returned or returned blank	1,072 (3·3%)		1,072 (3·3%)	1,211 (4·2%)	851 (4·0%)
(2c). Promised private treatment	13,734 (41·3)%		13,734 (41·3%)	11,531 (39·6%)	7,946 (37·0%)

DENTAL TREATMENT.—

	1952			1951	1950
	Systematic Examinations.	Other* Cases.	Totals.	Totals.	Totals.
(3). Actually treated by the school dental officers	14,953	10,066	25,019	28,973	23,078
(3A). Number of the above cases where treatment was completed ...	11,734 (78·5%)	6,609 (65·7%)	18,343 (73·3%)	18,385 (63·5%)	16,684 (72·3%)
(4). Number of attendances *for treatment*	38,923	21,608	60,531	61,267	57,074
(4A). Attendances, but treatment not given	2,415	1,382	3,797	4,590	4,941
(5). Fillings—					
(*a*) Permanent teeth	11,841	4,844	16,685	13,453	13,908
(*b*) Temporary teeth	1,640	498	2,138	2,356	2,970
(6). Extractions—					
(*a*) Permanent teeth—					
Without anaesthetic	6	43	49	14	6
With local anaesthetic	2,068	3,334	5,402	5,590	4,818
With general anaesthetic	238	205	443	326	—
(*b*) Temporary teeth—					
Without anaesthetic	19	11	30	41	47
With local anaesthetic	17,809	11,606	29,415	33,979	32,569
With general anaesthetic	579	533	1,112	472	—
(7). Number of administrations of general anaesthetic for extractions	183	137	320	205	—
(8). Other operations—					
(*a*) Permanent teeth—					
Scalings	1,951	895	2,846	2,872	2,962
Gum treatment ...	607	470	1,077	1,499	1,377
Silver nitrate dressings	432	121	553	625	611
Temporary fillings	2,999	1,979	4,978	4,528	4,412
Others	1,857	993	2,850	2,574	1,997
(*b*) Temporary teeth—					
Scalings	29	5	34	212	53
Gum treatment ...	84	46	130	197	109
Silver nitrate dressings	5,055	1,423	6,478	7,793	8,176
Temporary fillings	170	135	305	421	452
Others	236	56	292	644	207

*Obtained from sources other than Routine Dental Inspection, including emergency treatment cases and patients referred by school medical officers, teachers, etc.

	1952			1951	1950
	Systematic Examinations.	Other Cases.	Totals.	Totals.	Totals.
(9) Half-days devoted to inspection	192	—	192	173	110
Half-days devoted to treatment	4,640	2,482	7,122	6,931	6,452
Half-days devoted to orthodontic treatment	Not available.		658	611	400
(10) Number of children treated under private arrangements ...	Not known				
(11) Ratio of fillings to extractions (permanent teeth only) ...	512 : 100	135 : 100	283 : 100	227 : 100	288 : 100

Orthodontic Treatment—358 cases were treated, 107 being completed; attendances totalled 4,109 and there were 28 attendances without treatment being given. Treatment included: appliances—first impression, 436; progress impression, 769; insertions—first, 210; subsequent, 434; total, 644. Adjustments numbered 2,535, another 1 was referred to original clinic for adjustment, and 265 other operations were performed.

Other work—Crowns, 8; artificial dentures, 135; root treatments, 15; special operations, 7; X-ray examinations, 367; gold inlay, 1.

AGE DISTRIBUTION OF "OTHER CASES."—

Age in years ...	1	2	3	4	5	6	7	8
Number treated ...	1	25	120	351	1,097	854	1,052	1,167
Age in years ...	9	10	11	12	13	14	15	16 or over
Number treated ...	1,311	1,026	799	748	842	561	106	6

TOTAL 10,066

APPENDIX VI.—*SUMMARY OF MEDICAL INSPECTION AND TREATMENT STATISTICS* (of which details are given throughout Report) showing comparison with Statistics for previous two years.

A. INSPECTION.

Type.	Cases 1952	Cases 1951	Cases 1950
Systematic Examinations (*page* 45)	51,349	47,646	48,996
Systematic Examinations— Special Schools (*page* 45)	1,245	1,182	1,279
Other Examinations in Schools (*page* 46) ...	52,800	53,151	49,090
Other Examinations mainly in Clinics (*page* 46)	31,135	30,649	29,887
Cleanliness Examinations (*page* 46)	162,220	157,248	153,616
Dental Inspections (*page* 76)	43,329	38,422	28,407
Totals	342,078	328,298	311,275

B. Treatment.

Disease or Defect.	Cases.			Attendances.		
	1952	1951	1950	1952	1951	1950
(*a*) *MINOR AILMENTS*—						
Ear—						
Examined only ...	1,339	1,402	1,533	59,158	56,119	57,139
Clinic Treatment ...	2,399	2,239	2,275			
Aurists' Examinations	1,107	773	919	1,107	773	919
Aurists' Classifications	11	78	63	26	94	73
Audiometric Surveys...	1,034	742	754	1,201	749	857
(*page* 24)	5,890	5,234	5,544	61,492	57,735	58,988
Eye ... ... (*page* 26)	2,159	2,280	2,156	17,851	20,414	19,857
Skin—						
Cuts, minor injuries, etc.	3,251	3,148	3,044	106,380	106,307	102,727
Clinic Treatment ...	12,077	11,682	11,256			
Cleansing Clinics ...	413	386	520	804	603	900
Ringworm—Head ...	47	43	75	48	43	80
Body ...	136	143	174	*Included under "Clinic Treatment."*		
Scabies Baths ...	*(250)	*(265)	*(377)	1,795	1,725	2,285
(*pages* 26 *and* 27)	15,924	15,402	15,069	109,027	108,678	105,992
(*b*) *DEFECTIVE VISION*— Clinic Treatment	9,946	9,288	8,066	11,554	10,583	8,901
Spectacles supplied ...	5,516	5,446	4,593	7,297	7,155	5,215
(*page* 28)	15,462	14,734	12,659	18,851	17,738	14,116

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

Disease or Defect.	Cases.			Attendances.		
	1952	1951	1950	1952	1951	1950
(*c*) *EAR, NOSE AND THROAT—*						
Tonsils and Adenoids operations	1,248	1,017	1,523	3,959	3,297	5,053
Other operations ...	13	38	31	13	38	31
(*page* 29)	1,261	1,055	1,554	3,972	3,335	5,084
(*d*) *ORTHOPAEDIC—*						
Examined only ...	1,363	1,222	1,007	1,363	1,222	1,007
Plaster Cases	138	235	117	138	235	117
Treated by exercises ...	729	806	774	18,035	16,456	15,630
Treated outwith clinics	119	127	152	1,032	1,035	1,301
(*page* 32)	2,349	2,390	2,050	20,568	18,948	18,055
(*e*) *OTHER DISEASES—*						
General	5,697	6,147	5,624	17,272	18,543	16,704
Supply of Medicines	2,008	2,114	1,660	16,483	15,997	15,080
Artificial Light ...	1,836	1,797	1,564	24,958	23,099	21,148
Cardiac Cases ...	164	244	223	316	382	404
(*page* 33)	9,705	10,302	9,071	59,029	58,021	53,336
(*f*) *DENTAL* ... ... (*page* 77)	25,019	28,973	23,078	64,328	65,857	62,015
(*g*) *REMAND HOME* ... (*page* 84)	459	51	296	459	51	296
(*h*) *DEFECTIVE SPEECH* ... ... (*page* 86)	773	718	559	7,721	5,494	5,128
TOTALS	79,001	81,139	72,036	363,298	356,271	342,867

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

See Report for 1950, page 79.

At the end of June, 1952, the Education Department was responsible for the administration of 40 Nursery Schools having places for 1,387 children and of Southannan Residential Nursery School, Fairlie and Dunclutha Nursery School, Kirn, where 36 and 19 children respectively were accommodated. On the same date, the Health and Welfare Department had under its management 15 Day Nurseries with approximately 700 places and one 24-hour Day Nursery for 40 children whose mothers worked on nightshifts.

The arrangements for the medical supervision of children in nursery schools were similar to those which obtained in the previous school session, each school being visited fortnightly by a School Medical Officer and by a school nurse in the alternate week when the doctor was not due. During the year ended 31st July, 1952, children to the number of 976 (483 boys and 493 girls) were subjected to "routine inspection" and 4,092 were medically examined at the request of teachers. The results of these examinations are detailed below.

ROUTINE INSPECTION.

(i) *Numbers and Percentages of Children Suffering from Defects, (see Table II, page 50 for full details of headings).*

Nature of defects found	1952				1951		1950	
	Boys.	Girls.	Totals.		Totals.		Totals.	
Unsatisfactory clothing	—	9	9	(0·9%)	2	(0·2%)	2	(0·2%)
Uncleanliness of head (nits) ...	10	26	36	(3·7%)	26	(2·9%)	50	(5·3%)
Skin conditions of head or body	11	8	19	(1·9%)	19	(2·1%)	20	(2·1%)
Defective nutrition	19	18	37	(3·8%)	49	(5·5%)	49	(5·2%)
Mouth and teeth unhealthy ...	2	2	4	(0·4%)	8	(0·9%)	11	(1·2%)
Naso-pharyngeal conditions ...	89	89	178	(18·2%)	173	(19·4%)	187	(19·9%)
Eye diseases (excluding defective vision)	21	24	45	(4·6%)	42	(4·7%)	42	(4·5%)
Defective vision	11	22	33	(3·4%)	19	(2·1%)	8	(0·8%)
Ear diseases (including defective hearing)	2	4	6	(0·6%)	10	(1·1%)	11	(1·2%)
Defective speech	15	9	24	(2·5%)	15	(1·7%)	13	(1·4%)
Mental and nervous conditions	1	1	2	(0·2%)	2	(0·2%)	—	
Defects of circulatory system ...	12	10	22	(2·3%)	16	(1·8%)	14	(1·5%)
Pulmonary conditions	40	38	78	(8·0%)	72	(8·1%)	94	(10·0%)
Deformities	10	12	22	(2·3%)	52	(5·8%)	61	(6·5%)
Other diseases or defects ...	20	20	40	(4·1%)	35	(3·9%)	55	(5·8%)

(ii) *Classification of Children according to Remediability of Major Defects Found in the Individual Child* (*see Table III, page* 66, *for full details of headings*).

Classification.	1952			1951	1950
	Boys.	Girls.	Totals.	Totals.	Totals.
Free from defects	288	308	596 (*61·1%*)	519 (*58·2%*)	527 (*56·0%*)
Defects of mouth and teeth only	2	2	4 (*0·4%*)	2 (*0·2%*)	5 (*0·5%*)
Temporary ailments	112	114	226 (*23·2%*)	207 (*23·2%*)	225 (*23·9%*)
"Curable" defects	66	50	116 (*11·9%*)	98 (*11·0*)%	103 (*10·9%*)
"Improvable" defects	15	18	33 (*3·4%*)	66 (*7·4%*)	81 (*8·6%*)
Defects "not improvable" ...	—	1	1 (*0·1%*)	—	—
Totals	483	493	976	892	941

(iii) *Additional Information.*

Parents were notified of defects found in 393 instances, 109 (*11·2* per cent.) of these being due to clothing, cleanliness, or minor dental defects, and 284 (*29·1* per cent.) being in respect of other defects. School Medical Officers also noted 97 cases (*9·9* per cent.) for re-inspection as a result of defects observed in clothing, cleanliness, or for minor dental defects, and 343 children (*35·1* per cent.) having other defects. "Sound teeth" was recorded in 717 cases (*73·5* per cent.), 779 pupils (*79·8* per cent.) were recorded as having had complete diphtheria immunisation and 652 (*66·8* per cent.) as having been successfully vaccinated or re-vaccinated. The age distribution of the children at the date of inspection was: 2 years, 258; 3 years, 390; 4 years, 301; 5 years, 26; not stated, 1.

Inspection of Non-Routine Cases.

Children to the number of 4,092 were presented for inspection on account of defects observed or suspected by teachers. The individual results were as follows:—

Nits minor, 1; nits major, 3; skin conditions, 408; eye conditions, 218; ear, nose and throat defects, 324; "general" defects, 2,404; defective teeth, 28; no apparent disease, 643; and other causes, 64.

Re-Inspection of "Abnormal" Cases.

No pupils were re-inspected during the session.

APPENDIX VIII.—*MASS MINIATURE RADIOGRAPHY.*

The Mass Radiography Unit were able to examine the children from two schools only during the year ending 31st July, 1952.

Pupils totalling 358 (98 boys and 260 girls) were examined and of these 343 (91 boys and 252 girls) had miniature film only taken. Of the remainder, 6 boys and 5 girls were recalled for large film only, 2 boys for medical examination only, 1 boy for medical examination and large film, and 1 boy for observation at the Mass Radiography Centre.

Abnormalities were discovered in 28 instances (12 boys and 16 girls) and of those, inactive pulmonary tuberculosis was found in 6 cases (1 boy and 5 girls), other pulmonary abnormalities in 10 (4 boys and 6 girls), cardiac disease in 3 (1 boy and 2 girls) and there were 11 cases (6 boys and 5 girls) with other abnormalities including scoliosis, etc. Of the foregoing, 1 case of pulmonary fibrosis was kept under observation by the Unit, but in all other instances no further action was considered necessary after the taking of the miniature film or after investigation.

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

The medical supervision of children in the Remand Home continued to be undertaken by School Medical Officers who visited the Home on a weekly rota and were on call at any time of the day or night. Children were medically examined within twenty-four hours of admission, immediately prior to discharge and at any other time considered necessary by the visiting Medical Officer or the Superintendent. As before, Friday afternoon each week was reserved for the routine inspection of every child in the Home.

On admission, all children were treated for nits and vermin to ensure the Home against preventable infestation, as it was found that the child who was free from such conditions on arrival was the rare exception. These and any other defects found by the Medical Officer in the course of visitation subsequently, were dealt with as considered advisable.

During the year ending 31st July, 1952, children to the number of 1,396 (1,287 boys and 109 girls) were admitted to the Home and during this period there were 3,817 (3,571 of boys and 246 of girls)

medical examinations. Children found to be suffering from various ailments were, on the advice of the visiting School Medical Officer, treated as follows :—

Treated in the Home, 400 ; treated at clinic, 31 ; X-rayed, 9 ; removed to hospital, 19.

APPENDIX X.—*DIPHTHERIA IMMUNISATION CAMPAIGN.*

See Report for 1949, page 86.

The annual " drive " in schools was organised on similar lines to those obtaining each year since 1949—that is, the offer of immunisation included provision for " re-inforcing " doses to be given to all requiring such.

In the following table, details of the numbers of injections given at schools (as compiled from School Medical Officers' returns) *during the course of the campaign* are compared with the numbers recorded at the standing clinics *throughout the whole year.* The comparative figures for 1951 and 1950 are also shown.

Fewer injections were given in 1952 than for some years, the considerably reduced number of " re-inforcing " doses being mainly responsible. The proportion of children dealt with in schools compared with those at the standing clinics remained at the high level of three to one, a fact which clearly indicates the importance of a short term campaign.

		At Schools.			At Clinics.		
		Under 5 years.	Over 5 years.	Totals.	Under 5 years.	Over 5 years.	Totals.
First Injections	1952	365	7,376	7,741	4,695	300	4,995
	1951	*618*	*7,842*	*8,460*	*4,707*	*285*	*4,992*
	1950	*434*	*5,619*	*6,053*	*5,524*	*214*	*5,738*
Final Injections (completed)	1952	329	7,199	7,528	3,985	676	4,661
	1951	*380*	*6,695*	*7,075*	*4,227*	*634*	*4,861*
	1950	*349*	*4,739*	*5,088*	*5,179*	*633*	*5,812*
Re-inforcing Doses	1952	223	15,530	15,753	123	405	528
	1951	*349*	*21,091*	*21,440*	74	*505*	*579*
	1950	*131*	*18,675*	*18,806*	*108*	*418*	*526*
Total Number of Injections	1952	917	30,105	31,022	8,803	1,381	10,184
	1951	*1,374*	*35,628*	*36,975*	*9,008*	*1,424*	*10,432*
	1950	*914*	*29,033*	*29,947*	*10,811*	*1,265*	*12,076*

APPENDIX XI.—*SPEECH THERAPY.*

Details of Cases.	Advice only.	Cases Treated		Number of Treatments		DISCHARGED.										Current Cases.	
						Satisfactory.		Improved.		Unsatis-factory.		Failed to Co-operate.		Transferred.			
		Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Stutter	25	187	38	2,274	519	62	13	25	9	4	1	12	2	21	2	63	11
Dyslalia																	
Multiple	34	179	72	2,018	726	70	23	18	8	1	—	9	4	9	2	72	35
Simple	3	59	28	546	268	42	15	6	1	—	—	1	3	—	1	10	8
Idioglossia	1	3	7	29	87	—	1	—	1	—	—	—	—	1	2	2	3
Delayed Speech ...	—	8	3	38	34	—	—	—	—	—	—	—	—	1	1	7	2
Partially Deaf	14	17	9	187	60	2	1	1	—	—	—	1	—	3	5	10	3
Cleft Palate	1	12	11	194	200	3	1	1	—	—	—	—	—	1	1	7	9
Dysphonia	2	8	3	82	14	2	—	3	—	—	—	—	—	—	—	3	3
Aphasia	—	4	1	70	30	—	—	—	—	—	—	—	—	—	—	4	1
Others	18	19	7	221	124	—	1	6	1	—	—	—	—	5	2	8	3
Totals	98	496	179	5,659	2,062	181	55	60	20	5	1	23	9	41	16	186	78
		675		7,721												264	

APPENDIX XII.—*AUDIOMETRIC SURVEYS.*

See Report for 1950, page 89.

The full benefit of the re-organisation as envisaged in the 1951 Report was not experienced owing to the absence through illness of the Certifying Aurist during a large part of the session. In spite of this unforeseen circumstance, however, and the continuing scarcity of available specialists, it was found possible to dispose of a large number of the minor cases mainly through the efforts of the school medical officer allotted to the work of "screening" all such cases referred from the surveys.

During the period under review, the audiometricians visited 183 schools, testing by the "sweep" method 13,597 pupils born in 1943 of whom 1,221 failed. Subsequently, 381 of the latter were given the pure-tone test and of these 309 were indicated for otological examination. In addition to the children in the specified age-group, 70 were tested at the request of headmasters, 52 of these failing in the pure-tone test. The Audiometric Clinic at Florence Street also tested 6 cases referred from Child Guidance Clinics and special schools, 13 referred by School Medical Officers and 57 sent for re-test as to progress after having received treatment.

The results of the otological examination of cases referred from the surveys are included elsewhere in this Report, under various headings, with similar information from other sources. Some details, however, of the work accomplished during the session in connection with the particular surveys are given in the following pages. Cases from Survey No. IV (the 1943 group) were dealt with as soon as was conveniently possible after referral and by the end of the session, all cases from Surveys No. I, II and III had been summoned at least once.

Medical Examination.

The following Table gives details of the numbers of children summoned, the numbers who attended, a summary of the recommendations made by the specialists, and details of the cases classified according to the degree of deafness found at the first examination during the year.

	Survey No. I.		Survey No. II.		Survey No. III.		Survey No. IV.		Totals.		
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Total.
SUMMONSES—											
First examination	24	17	339	250	238	241	87	76	688	584	1,272
Re-examination	90	61	124	112	21	24	—	—	235	197	432
ATTENDANCES—											
First examination	13	8	216	157	171	173	72	62	472	400	872
Re-examination	63	40	102	93	11	16	—	—	176	149	325
Not examined	1	1	—	2	—	—	—	—	1	3	4
RECOMMENDATIONS—											
Clinic treatment	12	15	213	88	70	88	30	23	325	214	539
Tonsils and adenoids operation	5	2	39	37	60	66	19	23	123	128	251
Audiogram	35	23	45	52	44	43	4	6	128	124	252
X-ray examination	7	4	18	11	7	3	—	—	32	18	50
Hospital treatment	13	—	35	32	—	5	—	—	48	37	85
Hearing aid	2	1	1	—	—	1	—	—	3	2	5
Front seat in class	4	1	32	31	24	18	4	4	64	54	118
Specialist examination	—	1	10	8	20	17	7	7	37	33	70
Review later	28	25	55	45	18	29	—	1	101	100	201
Other recommendations	5	1	16	11	10	5	5	1	36	18	54
GRADINGS—First examination only—											
Normal	—	—	—	—	—	1	—	—	—	1	1
1—for ordinary class	10	8	197	144	112	111	67	55	386	318	704
2A—for front seat	—	—	3	7	32	40	1	2	36	49	85
2B—for semi-deaf class	—	—	—	—	2	—	—	—	2	—	2
Not graded meantime	2	—	17	4	26	22	4	5	49	31	80
	12	8	217	155	172	174	72	62	473	399	872

In the course of the session, the undernoted cases were passed to the Education Department for disposal in respect of their educational needs, most of them having been graded. The numbers of cases are arranged in the Table under the various Audiometric Surveys to which they refer and the reasons for disposal are given.

	Survey Number.				
Reason for Disposal—	I	II	III	IV	Total.
Graded according to degree of deafness	167	446	265	122	1,000
Repeatedly failed to attend ...	42	82	38	1	163
Parent intimated private treatment being obtained	7	24	10	4	45
Refused treatment	7	5	—	—	12
Transferred to other local authorities	3	6	1	—	10
	226	563	314	127	1,230

TREATMENT.

All cases recommended for clinic treatment were summoned in the usual manner to the local Education Health Service clinic, given the prescribed treatment and subsequently referred again to the specialist. Operations and other forms of treatment and investigation were undertaken in conjunction with the various hospitals and special clinics; the results of some of these are given below.

Ear, nose and throat operations—Over the period, 116 children (57 boys and 59 girls) from the various Surveys were summoned to the school clinic for preliminary examination as to suitability for tonsils and/or adenoids operation. Of the total, 40 (22 boys and 18 girls) were not admitted to hospital by reason of failure to attend clinic or because intimation was received that operative treatment had been arranged privately by the parent. The remainder, 76 (35 boys and 41 girls) had tonsils and/or adenoids removed in one of the three hospitals, Western District, Stobhill or Mearnskirk. In addition, as the result of a special arrangement with the specialist for the south-side area of the City, 10 cases (3 boys and 7 girls) were admitted to his ward in Mearnskirk Hospital for treatment of various ear, nose or throat conditions.

Audiograms—Audiograms totalling 222 (69, 104 and 49 respectively from Surveys No. I, II and III) were completed during the session. Of that number, 125 were performed at the Audiometric Clinic, Florence Street, and the remainder at the Ear, Nose and Throat Hospital Hearing Aid Clinic where bone and air conduction tests were given.

Wassermann tests—By arrangement with the V.D. section of the Hospital Board, 5 boys were given the Wassermann test—1 each from Surveys I and III and 3 from Survey No. II—all proved negative.

APPENDIX XIII.—*MORTALITY OF SCHOOL CHILDREN.*

Appended is a Table showing the numbers of children aged between 5 and 15 years who died during the year ended 31st July, 1952. The causes of death are listed and the figures arranged in two age-groups and according to sex. Totals for the year 1951 are given for comparison.

Analysis of the statistics reveals the following points of interest :—

(1) In the period under review, the total number of deaths was appreciably smaller compared with the previous year, mainly on account of fewer deaths in the younger age-group —particularly of boys.

(2) Just over 58 per cent. of the total deaths in 1952 compared with 66 per cent. in 1951 were of children in the 5-10 year-old group.

(3) Violence again accounted for 35 per cent. of all deaths, more than two-thirds of these occurring to boys in the younger group. Road traffic fatalities were, however, fewer in 1952, an improvement which may indicate a measure of success for the efforts of the Special Committee on Accident Prevention and the influence of the National Road Safety Campaign.

(4) Diphtheria was responsible for 3 deaths, all in the 5-10 group. None of these children had ever been immunised, a fact which is of tragic significance in view of the facilities available to children at school and elsewhere for protection against this disease.

Cause of Death	5-10 years.		10-15 years.		All Ages.		1952	1951
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Totals.	Totals.
Tuberculosis—								
Respiratory	1	2	3	5	4	7	11	5
Meningeal	3	—	4	1	7	1	8	15
Others	—	1	—	2	—	3	3	2
Infectious Disease—								
Diphtheria	2	1	—	—	2	1	3	—
Dysentery	—	1	—	—	—	1	1	—
Others	—	—	—	—	—	—	—	2
Mental and Nervous Diseases—								
Epilepsy	—	—	—	1	—	1	1	2
Meningitis	1	—	1	2	2	2	4	—
Others	2	1	—	4	2	5	7	12
Circulatory Diseases—								
Heart Disease	—	—	—	2	—	2	2	2
Rheumatic Fever	—	—	—	2	—	2	2	3
Respiratory Diseases—								
Influenza	—	1	—	—	—	1	1	2
Pneumonia	—	1	—	1	—	2	2	3
Others	1	—	—	—	1	—	1	—
Digestive Diseases—								
Enteritis and Colitis ...	1	—	—	—	1	—	1	3
Others	2	—	—	—	2	—	2	6
Cancer—								
Cerebral	1	—	1	—	2	—	2	2
Circulatory	2	1	1	—	3	1	4	2
Respiratory	—	—	1	—	1	—	1	—
Others	1	—	1	1	2	1	3	4
Congenital Malformations—								
Circulatory	—	—	—	2	—	2	2	2
Digestive	—	1	—	—	—	1	1	1
Others	—	—	1	—	1	—	1	1
Violence—								
Road Traffic Accidents ...	9	1	1	—	10	1	11	18
Other Violent Causes ...	17	3	4	3	21	6	27	26
All Other Causes	1	5	1	—	2	5	7	10
Totals	44	19	19	26	63	45	108	123

APPENDIX XIV.—*NOTE ON SCABIES.*

Scabies is a contagious skin disease caused by the itch mite, *Sarcoptes scabiei*, which burrows under the human skin raising spots or blisters or even eczema with resultant itching to the sufferer, especially at night. The disease is readily transmitted from person to person, irrespective of age, and whole families are almost invariably infected through a member of the household having contracted the ailment. Overcrowding and inferior standards of cleanliness are favourable to the spread of the disease and add to the difficulties of eradication.

As this note is somewhat in the nature of a historical review of the incidence of scabies among Glasgow school children and of the

methods employed to control the disease, it will be convenient to take the school year 1920 as a starting point. In that year a portion of one of the school clinics was adapted to provide special bath treatment for children with scabies, a method instituted as the result of a fairly severe outbreak of the disease in the city during the First World War. In the following six years the numbers of cases treated at school clinics fell but began to rise again in 1927 and continued to do so until 1933.

It was, in the meantime, becoming increasingly apparent that control was ineffective if treatment was confined to members of the family attending school while others in the household were practically ignored. Many of those treated successfully at school clinics were, in fact, becoming *re-infected* from other members of the family under or over school age, living in the same house. In 1931, therefore, a system was evolved whereby the school medical officer: (1) reported immediately to the central administration any cases of scabies discovered in the course of duty and (2) supplied the dates of commencement and termination of the bath treatment of all children dealt with at the school clinic. Provision was then made for visitation of the home by the sanitary inspector for the purpose of dealing with any pre-school or adult cases and with any clothing, bedding or other infected material.

The above scheme was extended in January, 1933, infected families being reported by the school health service for supervision and treatment in a Reception House, if possible, while the home was being rendered non-infective. In addition, lotion and ointments were supplied to adults and pre-school children respectively who remained at home and the school clinics were kept informed of all school cases whether admitted to the reception house or not. Incidentally it was found that an average stay of five weeks' duration in the reception house was necessary before a cure could be effected. During a period of five years—1933 to 1937—the numbers of cases discovered and treated fell rather than increased.

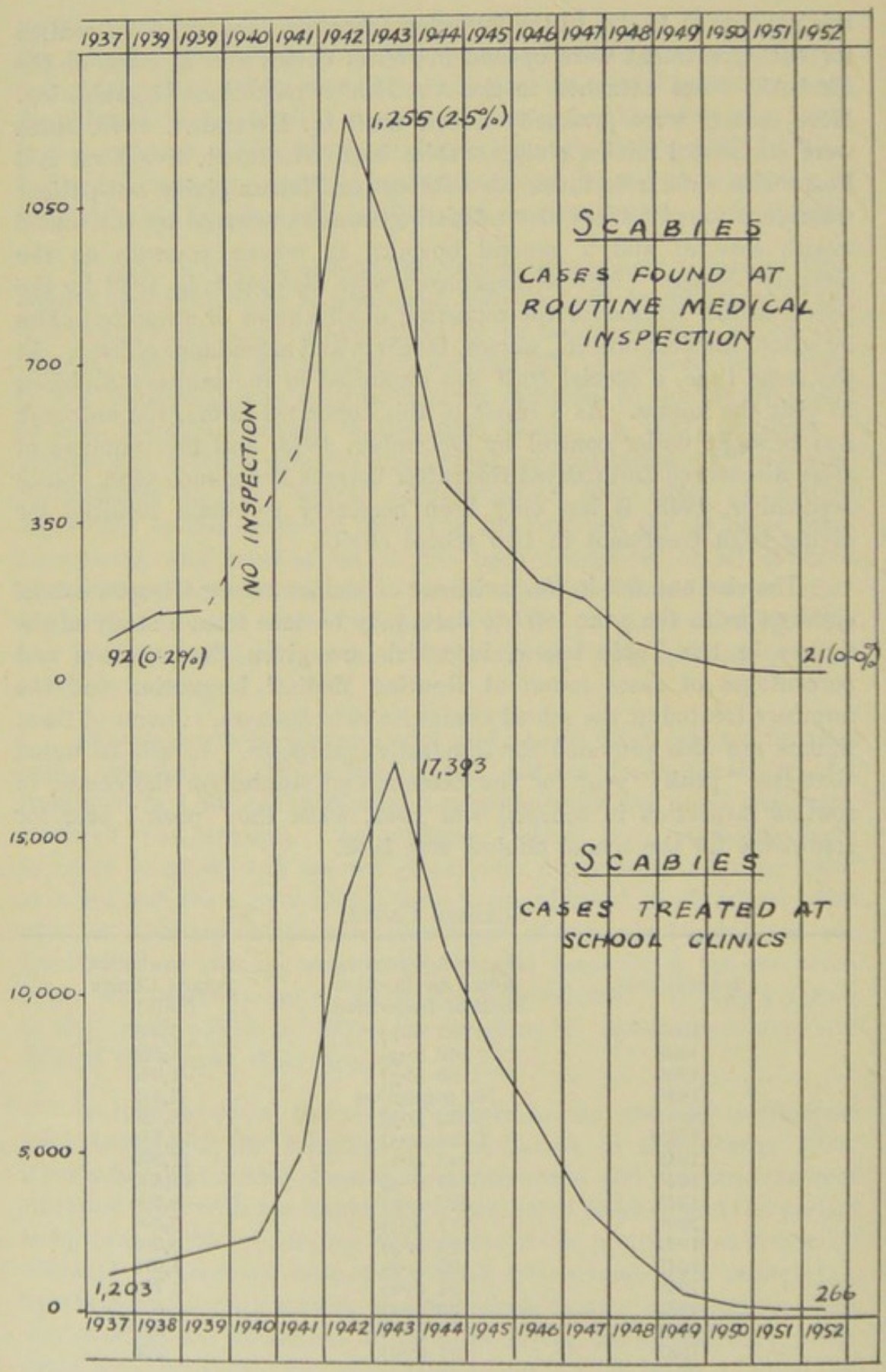
In 1938, however, the numbers began to rise, not only in Glasgow but throughout the country, and continued to rise during 1939. Evacuation and school closures then intervened and obscured the real situation until with the return of the evacuated children and the partial re-opening of the schools, the seriousness of the position was gradually revealed. Emergency inspections in Glasgow schools were undertaken by the school health service and the whole system of reporting cases was overhauled. Increased facilities for giving the special bath treatment were provided, two additional school clinics being adapted for

this purpose in 1941. In the following school session, two more centres for bath treatment were opened in school clinics and in three of the First-Aid Posts attached to the Air Raid Precautions Organisation. More centres were gradually added until by December, 1943, there were six school clinics giving scabies bath treatment, five First Aid Posts with similar facilities, two Reception Houses giving out-patient treatment (one of them also admitting families referred by the school health service) and a general hospital to relieve pressure on the reception houses. New arrangements were also made in 1942 by the school health service for the reporting of all known or suspected cases by school medical officers, nurses, teachers and attendance officers. At the same time, a special staff was organised in the sanitary divisions to visit the homes. As a result of this concerted effort, the outbreak was brought under control by December, 1943, and the numbers of cases discovered and treated thereafter became fewer each year. Since September, 1948, it has only been necessary to retain facilities for giving bath treatment in two school clinics.

The rise and fall in the incidence of scabies among Glasgow school children from the year 1937 to date, may be seen from a study of the figures in the Table below, in which are given the numbers and percentages of cases found at Routine Medical Inspection and the numbers treated at the school clinics for skin diseases. Charts of these figures are also provided for illustrative purposes. It will be noted that the " peak " year for the detection of scabies (in the course of routine inspection in schools) was 1942, while the " peak " year for treatment (in the school clinics) was 1943.

SCABIES CASES.

School Year.	No. and percentage found at Routine Medical Inspection.	No. treated at School Clinics (Skin).
1937	92 (*0·2*)	1,203
1938	146 (*0·3*)	1,566
1939	158 (*0·3*)	1,995
1940	No inspection	2,412
1941	522 (*1·3*)	5,039
1942	1,255 (*2·5*)	13,358
1943	947 (*2·1*)	17,393
1944	440 (*0·9*)	11,532
1945	323 (*0·7*)	8,409
1946	217 (*0·5*)	5,994
1947	178 (*0·4*)	3,307
1948	85 (*0·2*)	1,975
1949	54 (*0·1*)	751
1950	28 (*0·1*)	426
1951	16 (*0·0*)	276
1952	21 (*0·0*)	266


1937 1939 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952
1,255 (2·5%)
1050
700
350
0
SCABIES
CASES FOUND AT ROUTINE MEDICAL INSPECTION
NO INSPECTION
92 (0·2%)
21 (0·0%)
17,393
15,000
10,000
5,000
0
SCABIES
CASES TREATED AT SCHOOL CLINICS
1,203
266
1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952