[Report 1951] / School Medical Officer of Health, Lanark County Council.

Contributors

Lanarkshire (Scotland). County Council.

Publication/Creation

1951.

Persistent URL

https://wellcomecollection.org/works/aweeutya

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



County Council of the County of Lanark
EDUCATION COMMITTEE

FORTY-THIRD

ANNUAL REPORT

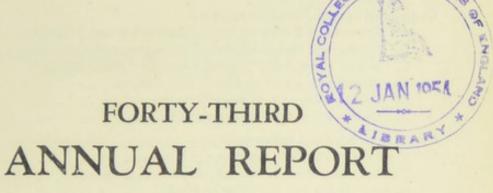
ON THE

MEDICAL INSPECTION,
SUPERVISION, AND TREATMENT
OF SCHOOL CHILDREN



County Council of the County of Lanark

EDUCATION COMMITTEE



ON THE

MEDICAL INSPECTION, SUPERVISION, AND TREATMENT OF SCHOOL CHILDREN

1951-52

CONTENTS.

							P	AGE
Letter of Address								3
List of Staff					***	***	4 8	25
General Statistics								7
Sanitary Conditions of S	chools	s						7
Organisation and Admir	nistrat	tion—						
A. System and Exter								8
B. System and Exten								9
C. School Nursing an D. Co-ordination with					owing-t			9
E. Co-operation with								10
F. Co-operation with	Teach	ers and	l Paren	nts				10
Findings of Medical Insp								
Numbers Examined—								10
Numbers Examined as						•••	***	10
General Health and No			-	Francis				11
Special Disabilities Dis Conditions of Uncleanl							***	11
Nutrition	moss,			***	***			
	•••	***	***	***	***	***	***	14
Special Examinations, et		***				***		20
Provision of Boots, Cloth	ning, e	etc.			***		***	20
Medical Treatment—								100
	d C-					***	***	21
B. Defective Vision a C. Ear, Nose and Th	-		Tron	tment			***	23 23
D. Orthopaedic Treat		-	c lica	···				24
Andless stelle Treatlest								24
Dental Inspection and T	reatm	ent						26
Special Schools and Clas								28

Physical Education and			giene		***	•••	***	31
Holiday Camps				***		***	***	31
Residential School							***	31
"Milk in School" School						***	***	32
School Meals Service								32
Rehabilitation Scheme			***				***	33
Miniature Mass Radiogr	aphy							33
Intensive Course in Aml	buland	ce Wor	k and	Home	Nursi	ing		34
Child Guidance								34
Nursery Schools			***		***		***	37
Statistical Tables (J - VI								_
14								

COUNTY COUNCIL OF THE COUNTY OF LANARK.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

I submit the Annual Report on the School Health Service in your administrative area for the year ending 31st July, 1952, prepared in accordance with the terms of D.H.S. Circular No. 60/1938 and amending Circulars.

Delay in the final preparation and publication of the Report was due to the absence abroad of the Senior Assistant Medical Officer of Health (Schools), representing Scotland on a World Health Organisation Study Fellowship on "School Health Services."

D. MACLEOD,
Senior Assistant Medical Officer of Health (Schools).

SCHOOL MEDICAL DEPARTMENT, COUNTY HEALTH OFFICES, HAMILTON.

STAFF.

County Medical Officer and Chief Executive School Medical Officer.

ANDREW G. REEKIE, M.B., Ch.B., D.P.H.

Senior Assistant Medical Officer of Health (Schools).

D. MACLEOD, M.B., Ch.B., D.P.H.

Assistant School Medical Officers.

JANET M. BRUCE, M.B., Ch.B.

- (a) ANN K. CORMACK, M.B., Ch.B.

 JANET B. CUNNINGHAM, M.B., Ch.B., D.P.H.

 ALEX. C. DOUGLAS, M.B., Ch.B., D.P.H.

 HELEN R. T. HOOD, M.B., Ch.B., D.P.H.
- (b) ROY R. HOUSTON, M.B., Ch.B., D.P.H. VIDA J. PERRY, M.B., Ch.B. ELIZABETH M. POLLOCK, M.D. MARION A. PRENTICE, M.B., Ch.B.

Part-time Ophthalmic Surgeons.

JAMES HILL, M.B., Ch.B., D.O.M.S.

- (c) ELLA MACKINNON, M.B., Ch.B., D.O.

 JOHN A. MORTIMER, M.D., F.R.C.P.E.

 ALFRED G. SHANKS, M.B., Ch.B., D.P.H., D.O.M.S.
- (d) WILLIAM A. M. SMITH, M.B., Ch.B., D.O.M.S.

Part-time Ear, Nose and Throat Specialist.

ROBERT A. GRAY, M.B., Ch.B.

Nurses.

MARY M. BENNETT JESSIE M'K. BLACK MARTHA CHISLETT RACHEL B. I. DOBIE ANNIE N. DOUGLAS ADA FOWLIE JEAN G. GIBSON

- (e) JEAN HANNAH GRAY
 JEAN L. GREEN
 MARIA HUGHES
 CATHERINE C. JOHNSTON
 MARY W. JOHNSTON
 MARGARET LENNOX
 (nee Kelly)
 JANE KENNEDY
- (f) MARGARET K. LAMOND CATHLEEN LENAGH

- (g) CHRISTINA M'G. MITCHELL (Temp.) EUPHEMIA MACDOUGALL
- (h) MARY A. M'FADDEN (Temp.) SUSAN M'FADYEN EMILY M'GEE
- (i) MARGT. S. M. MACKINNON (Temp.) MARGARET NEILSON HELEN PARK
- (j) BERNICE SHEVLIN (Temp. ANNE I. SORLEY
- (k) MARY STEWART
 MARGARET C. R. SUTTER
 MARY WALLACE
 MARY L. WATSON
 ELIZABETH WILLIAMSON
 (Temp.)

Clerical Staff

Chief Clerk-JOHN PORTER

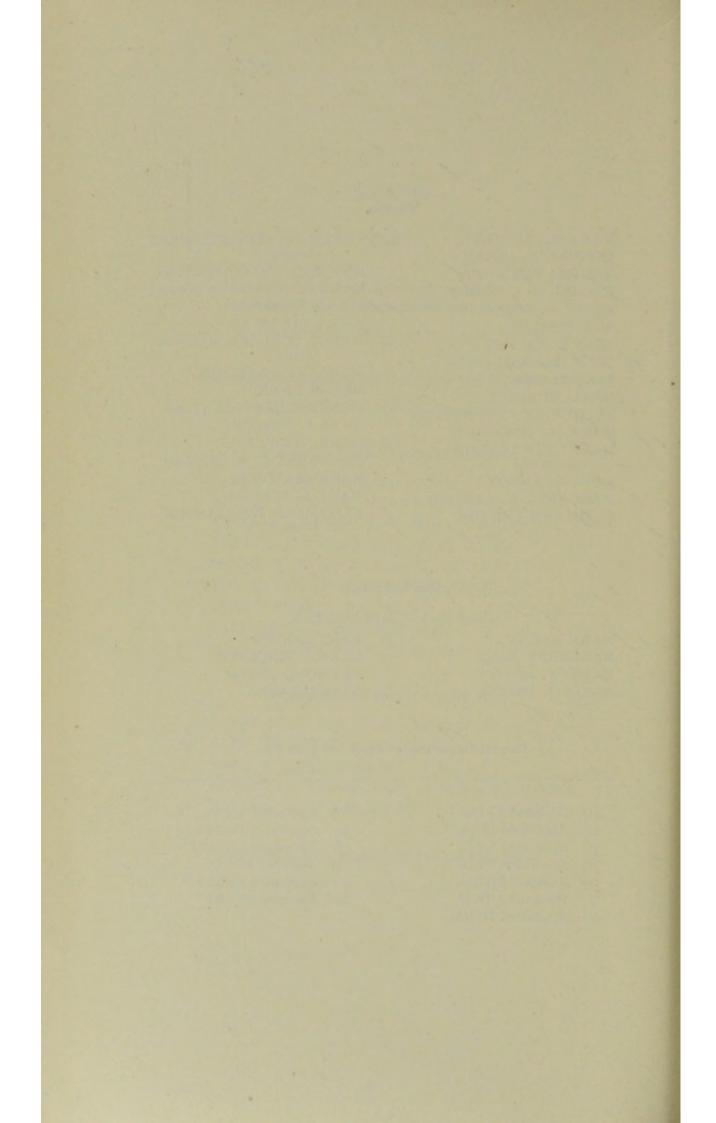
MARK ALLAN MARGARET BARR MARY W. BOYD AGNES J. BROWN

- (I) MARY GOUGH MARION SINCLAIR RAYMOND SMITH
- (m) AGNES SPEIRS

Dental Department Staff (see page 25).

- (a) Resigned 4/11/51
- (b) Appointed 16/10/51
- (c) Appointed 5/2/52
- (d) Appointed 7/2/52
- (e) Resigned 31/7/51
- (f) Resigned 1/10/51
- (g) Appointed 16/1/51

- (h) Appointed 7/1/52
- (i) Appointed 16/5/51
- (j) Appointed 17/12/51
- (k) Resigned 1/12/51
- (I) Appointed 26/2/52
- (m) Resigned 16/2/52



REPORT on the MEDICAL INSPECTION, SUPERVISION and TREATMENT of SCHOOL CHILDREN in the COUNTY OF LANARK for the year ended 31st July, 1952.

1. LIST OF STAFF.

The personnel of the medical, nursing and clerical staff is shown on page 4 of this Report. (Dental staff on page 25).

Changes in personnel which have occurred since the last Report are also indicated.

We record with regret the resignation, on health grounds, of the senior Assistant School Medical Officer, Dr. Ann K. Cormack. The very efficient and conscientious service which she rendered to the County and children of Lanarkshire over the past thirty-two years was school medicine at its best.

This was suitably recognised and a presentation made in the presence of her colleagues and friends.

For all her generous giving in the Service over the years, we take this opportunity of expressing our gratitude and offer our best wishes for a happy retirement.

2. GENERAL STATISTICS.

The number of schools in the educational area is as follows:-

(a)	Primary)	> 216
(b)	Junior Secondary						
(c)	Secondary						13
(d)	Special Schools						5
(e)	Nursery Schools						2
(f)	Special Classes at	Certif	ied Inst	itution	s		2
Pop	pulation of the area	(estin	nated, 1	948)			533,451
*N	umber of children or	n the	school 1	register	S		91,605
Nu	mber of children in	avera	ge atter	ndance			81,694
*7	The figures are taken fr	om the	e official	return f	or June,	1952.	

3. SANITARY CONDITION OF SCHOOLS.

The sanitary arrangements existing in each school were inspected by School Medical Officers during the year and reports were submitted giving in detail the position regarding heating, lighting, ventilation, cleanliness of rooms, lavatories, etc., and the adequacy of drinking water and washing facilities. Premises found to be defective were reported to the Senior School Medical Officer. Defects found chiefly concerned :-

Washing and sanitary facilities.
Playgrounds.
Environmental factors.
Lighting, heating, ventilation, etc.

An extensive programme of renovation, new buildings, etc., is constantly under execution by the Architects Department and is detailed elsewhere.

Where action in the interests of hygiene and health was indicated, the appropriate departments were given the facts, with recommendations.

4. ORGANISATION AND ADMINISTRATION.

A. SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT.

The procedure in the County follows closely the recommendation laid down in D.H.S. Circular 60/1938 regarding the age groups of children to be examined during the year.

Children examined were :-

Those born in ... 1946.
Those born in ... 1942.
Those born in ... 1938:
Those born in ... 1935.
Those born in ... 1944.
(Special group—Hearing and Vision only).

The above examinations formed the greater part of the work carried out by Medical Officers and defects noted were recorded and appropriately followed up.

Any child requiring medical advice, whether falling within the above age groups or not, is referred by education staff to the doctor after routine examinations are completed at the school.

All classrooms are visited by Medical Officers, and teachers questioned regarding physical ailments observed amongst their pupils. In this way the whole school is covered at least once per year.

Parents accompanying their children were interviewed in each case and had the opportunity of discussing their child's health with the doctor.

Children and adolescents applying for further education, preapprenticeship classes, etc., were examined and certified fit or unfit for such activity.

Treatment was given under the supervision of Medical Officers in Minor Ailments Clinics throughout the County (72,837 attendances). Conditions found to be requiring treatment—eye inflammations, skin diseases, minor wounds, etc.—were suitably dealt with.

The treatment of children suffering from more serious conditions, e.g., debility, anaemia, rheumatism, epilepsy, orthopaedic cases, etc., was arranged through the family doctor, the Consultant Physician or in hospital.

As in previous years, immunisation against diphtheria was conducted in all schools in the County area.

B. System and Extent of Dental Inspection and Treatment. The report of the Chief Dental Officer appears in Section 7, page 26.

C. SCHOOL NURSING AND ARRANGEMENTS FOR "FOLLOWING-UP."

The School Nursing Staff consists of twenty-nine nurses. Of these 14 hold their Health Visitor's Certificate. Their duties are varied, but are divided chiefly between Medical Inspection in schools and Treatment in School Clinics. Some have special duty with Consultants and all may be called upon for special duty or interchange of duties at short notice.

D. Co-ordination with Public Health Services.

No section of the Health Service can give its best without recognising its dependance on many other departments, and, in Lanarkshire, we have many links with the County and Burgh Public Health Services, to our mutual advantage.

Co-operation involves :-

The use of clinic accommodation.

Contacts between nursing staffs.

Control of infectious disease in schools.

Treatment of scabies and verminous conditions.

Treatment of ringworm.

Ultra violet ray treatment.

X-ray examination of chest conditions.

Numerous administrative co-activities.

E. Co-operation with Voluntary Bodies and other Outside Agencies.

There is still an extensive field where voluntary agencies can assist in community Health Services, although the National Health Service has made the State responsible for many former activities. We wish once again to record thanks for the good work of the R.S.P.C.C., the Red Cross Society and the St. Andrew's Ambulance Association for assistance given.

F. Co-operation with Teachers and Parents.

School Health workers can accomplish little that is permanently effective without the understanding team work of parents and teachers.

The whole matter of happy personal relationships is, therefore, of great importance and all arrangements for school inspections or home visits are given special attention from this direction. On a visit to school, the Medical Officer first contacts the Headmaster and consults with him on routine or modifications of procedure affecting the proposed inspection. The actual progress of the examinations is often broken for essential talks on individual pupils with their teachers.

Contact with parents occurs chiefly with entrant children, i.e., the five-year-olds. On later occasions the children are generally unaccompanied. Attendance of parents at Minor Ailments Clinics is frequent when children are referred there by Medical Officers for treatment.

One avenue of a useful nature for discussion between doctors and parents is the Parent-Teacher Association, and increasing use is being made of medical staff for talks to meetings of these associations.

From time to time Conferences give opportunities for meetings of School Health personnel and these, in our opinion, are invaluable.

5. FINDINGS OF MEDICAL INSPECTION.

Medical examination of the school child is a basic essential for procuring the essential information required for instituting preventive measures at the right moment in the child's life.

The first examination takes place on admission to school, the second during the last year of attendance at the primary school, the third at the age of 13-14 years and the final inspection during the last year at the secondary school. These examination periods are fixed by the Secretary of State in accordance with Annual Regulations under the Education Act, 1946.

The medical card is the permanent record in which are inserted detailed findings of these examinations and thus, at any age, the most recent examination results are available.

In a fair percentage of children defects are discovered as the Table reveals. These are notified to parents, dealt with, and followed up till the best result is obtained in each case.

Certain cases require contact and consultation with the family doctor.

The total number of children examined during the past year was 26,474.

The following Table shows the average heights and weights of school children in Lanarkshire:—

AVERAGE HEIGHT IN INCHES.

AGE.		51/2		9	l l	131		163	
		Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Anthropometric Committee's									
Standard		41.2	41.0	51.9	51.2	56.6	57.8	64.3	61.8
County of Lanark		43.48	42.64	52.37	51.49	59.81	60.41	67.80	63.6

AVERAGE WEIGHT IN LBS.

AGE.	5	51 91		13	$13\frac{1}{2}$ $16\frac{3}{4}$		32	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Anthropometric Committee's								
Standard	40.5	40.0	64.9	59.3		87.0		
County of Lanark	44.09	41.87	64.72	61.0	93.14	96.58	134.86	122-67

We now append paragraph by paragraph the incidence of specific conditions found during routine inspection, all of which relate to the health of the school child in this area.

A comparative percentage for the previous year is added and also the number of special cases found to be affected:—

Condition of Clothing.—The number of children found at routine inspection who had defective clothing was 536 boys and 556 girls, a total of 1,092 or a percentage of 4.13.

Number of ch	ildren e:	xamine	d		 	26,474
Number with	defectiv	e cloth	ing		 	1,092
Percentage					 	4.13
Percentage las	st year				 	4.58
Number of sp		es four	nd defe	ctive	 	169

The figures for the two years are practically identical.

Footgear unsatisfactory.—The condition of the footgear showed a similar figure to that of last year. 87 boys and 48 girls, a total of 135, was recorded as having defective footwear.

Number of children examined		 	26,474
Number with defective footwear		 	135
Percentage		 	0.5
Percentage last year		 	0.42
Number of special cases found de	efective	 	18

Uncleanliness of Head.—This is divided into three categories—nits present, lice present and simple dirtiness. The total of these three groups was 2,946; 629 boys and 2,317 girls, or a percentage of 11·33. This figure is a small increase on 10·56 in the previous year. Details of each group are as follows:—

Number of children examined. 26,474	Number with Nits. 2,718 Lice present.	Percentage.	Percentage last year. 9.93	Special Cases. 909
26,474	192 Dirty	0.731	0.52	143
26,474	only. 36	0.13	0.11	8

These figures show an improvement, except a small increase in the number suffering from lice. Dirty and verminous conditions of the head are still common in our schools and it is only by constant examination and supervision that there is any hope of combating this evil. There is evidence, however, that very bad cases are decreasing in number.

Uncleanliness of Body.—Is divided into three groups as in uncleanliness of the head, i.e., nits present, lice present and simple dirtiness. 251 boys and 163 girls were recorded, a total of 414 or 1.55 per cent.

Number of children examined	Number with Nits.	Percentage.	Percentage. last year.	Special Cases.
26,474	2 Lice	0.007	0.02	1
26,474	present.	0.02	0.04	5
26,474	Dirty only. 406	1.52	1.87	67

These figures show a slight rise in comparison with those of last year. It will be observed that the number found to be verminous is very low. The presence of lice on the body is becoming rare Diseases of the Skin.—Under this group heading are included diseases of the skin of the head and body. The total number of children suffering from diseases of the skin of the head was 287; 166 boys and 121 girls, a percentage of 1.08. They are classified as (1) Ringworm, (2) Impetigo and (3) Other diseases.

(1)	Number of children examined	 	26,474
	Number with Ringworm of the head	 	3
	Percentage	 	0.01
	Percentage last year	 	0.03
	Special cases found affected	 	3

The total number affected (6) compares well with 16 in the previous year.

(2)	Number of children examined	 	 26,474
	Number with Impetigo (head)	 	 64
	Percentage	 	 0.24
	Percentage last year	 	 0.27
	Special cases found affected	 	 47

These figures show a decrease in Impetigo. The total of 111 compares with 123 in the year previous.

These figures show a decrease on those of last year.

Diseases of the Skin of the Body.—Are divided into Ringworm, Impetigo, Scabies and Other diseases. The total number affected was 1,045; boys 589, girls 456, or a percentage of 3.93.

Number affected with Ringworm.	Number of children examined. 26,474	Percentage.	Percentage. last year. 0.04	Special Cases.
Number affected with Impetigo				
48	26,474	0.18	0.21	30
Number affected with Scabies.				
28	26,474	0.1	0.106	6
Number with other diseases.				222
965	26,474	3.63	2.97	223

These figures show a decrease in Ringworm, a total of 7 cases as against 17 in the previous year. Impetigo decreased. Scabies continues to show a decline, 34 cases being recorded as against 42 in the previous year and, if this improvement is continued, the numbers of Scabies cases will soon be down to the low numbers of pre-war years. The figures for other diseases of the skin of the body are less than those of last year (965 this year; 1,030 last year).

Malnutrition.—Is of two degrees, (1) Slight and (2) Bad. During the past year 351 children were recorded as suffering from slight malnutrition, a fall in number compared with that of 430 in 1950-51. The number of cases of more marked malnutrition recorded was 18, giving a total number under the general heading of malnutrition of 369, or a percentage of 1.39 as compared with a percentage of 1.70 in the previous year. Nutrition of school children remains satisfactory. The general findings of our Medical Officers is that the general health of the scholars is good. Malnutrition is unlikely when school milk and good all round meals are readily available. The number of children recorded for slight malnutrition was 351 or a percentage of 1.33 as compared with 430 and a percentage of 1.64 in the year previous. Those suffering from more marked malnutrition numbered 18, a percentage of 0.06 as compared with 14 and 0.05 in the past year. There is no single definite standard by which degrees of malnutrition can be assessed and it is a matter for determination by School Medical Officers who have a large experience of estimating sub-normal states of nutrition.

Details are given below :-

Number of children examined. 26,474	Number found suffering from slight malnutrition. 351	Percentage.	Percentage last year. 1.64	Special Cases.
26,474	Number with malnutrition. 18	0.06	0.05	2

Oral Sepsis.—196 boys and 193 girls, or a percentage of 1.47, were recorded as suffering from septic conditions of the mouth.

Number of children examin	ned	 	 26,474
Number affected		 	 389
Percentage		 	 1.47
Percentage last year		 	 1.22
Special Cases		 	 15

Diseases of the Naso-Pharynx.—These include diseases of the Nose—totalling 1,675; boys 960, girls 715, or a percentage of 6·3, diseases of the Throat—total 4,720; boys 2,316, girls 2,404, or a percentage of 17·85, and diseases of Glands—total 1,679; boys 923, girls 756, or 6·33 per cent. The total number of all three categories was 8,074 or 30·48. Below is a tabular statement:—

Condition.	Number examined	Number found defective.	Percentage.	Percentage last year.	Specia.
Nasal conditions for observation	26.474	827	3.11	2.43	21
For treatment (Adenoids)		287	1.08	1.09	58
Other conditions of					
Nose Tonsils for observa-	26,474	561	2.11	2.22	68
tion Tonsils for treat-	26,474	3,401	12-86	13.56	56
ment Glands for observa-	26,474	1,319	4.99	6.30	203
tion	26,474	1,655	6.24	6.45	19
Glands for treat- ment	26,474	24	0.09	0.08	4

These figures continue the over all improvement in Naso-Pharyngeal conditions shown last year. "Other conditions of the nose" show a slight increase. Glands for observation (i.e., temporarily enlarged and probably associated with the above) show a decrease but Glands for treatment reveals a fall in incidence.

External Eye Diseases.—Includes Blepharitis, Conjunctivitis, Corneal Opacities, Squints and Other diseases of the external eye. The total number affected was 1,508; boys 795, girls 713, or a percentage of 5.69. Details are given below:—

Condition.		Number of children examined.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
Blepharitis		26,474	596	2.25	2.27	149
Conjunctivitis	***	26,474	130	0.49	0.43	51
Corneal opacities		26,474	13	0.05	0.07	3
Squints		20 454	630	2.38	2.43	130
Other diseases		26,474	139	0.52	0.48	41

There is a general decrease in these conditions, especially in the number of squints. As squinting is usually associated with bad vision, the early treatment of this condition, including the supply of correcting spectacles, is of importance. Orthoptic treatment is also indicated, and provided as available.

Visual Acuity.—Is divided into two classes—(1) Those with 6/9 or 6/12 in the better eye with or without glasses. This is termed "Fair Vision", (2) Those with 6/18 or worse in the better eye with or without glasses. This is "Bad Vision". The number of children in these two categories was boys 857, girls 890, with a total of 1,747 or 10·36 per cent.

Visual A	cuity.		Number of children examined.	found	Percentage.	Percentage last year.	Special Cases.
6/9 or 6/12 eye			*16,878	1,401	8-31	8.14	176
6/18 or v			*16,878	346	2.05	2.31	107
	*In	fan	t and seven	-year-old c	hildren not i	ncluded.	

The number of children recommended for treatment of errors of refraction was 1,113 or 6.59 per cent, as compared with 7.31 per cent last year.

The time which has elapsed between examination and the supply of glasses ordered had very considerably decreased by the end of the year.

Ear Diseases.—Are of two categories—(1) Otorrhoea, (2) Other diseases of Ear. The total number recorded was 649 or a percentage of 2.45. Details are as follows:—

Condition.		Number of children examined.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
Otorrhoea		26,474	225	0.85	0.76	95
Other diseases Ears	of	26,474	424	1.60	1.31	113

The number of children affected by ear conditions shows a slight decrease from those of the previous year. Treatment for Otorrhoea is carried out at the school clinics. In some cases it is very resistant to conservative treatment and operative measures are called for. This is arranged as beds are available.

Defective Hearing.—Is grouped according to severity. Group I includes children with slight deafness. They do not require any special educational treatment. Group 2A are those who need a favourable hearing position in class. Group 2B are those children who require special educational treatment. Group 3 consists of children with severe deafness and serious speech defects (deafmutism, etc.). These children require education in special schools for the deaf. The total number of children in the four groups was

428; 223 boys and 205 girls, or 1.62 per cent. Details are given as follows:—

Number of children examined.	Hearing group.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
*26,474	1	287	1.08	0.89	44
*26,474	2A	138	0.52	0.54	38
*26,474	2в	2	0.01	0.03	2
*26,474	3	1 .	0.005	_	_

^{*}Seven-year-old children not included here but shown separately.

Speech.—Defects are listed in two categories—(1) Defective Articulation, (2) Stammering. The total number of children recorded under these two headings was 287, of whom 191 were boys and 96 were girls. The percentage of defects was 1.07.

Condition of Speech.	Number of children examined.	Number found defective.		Percentage last year.	Special Cases.
Defective articulation	26,474	254	0.95	0.91	58
Stammering	26,474	33	0.12	0.18	18

There is no significant difference between the figures for the two years.

Mental and Nervous Conditions.—Includes all children who are backward, mentally dull, mentally defective but educable, mentally defective ineducable, nervous and unstable and those who exhibit difficult behaviour. The total number of new cases discovered by School Medical Officers in these groups was 330 or a percentage of 1.27, of whom 211 were boys and 119 were girls. A detailed statement appears below:—

Condition.	Number of children examined.	Number found defective.	Percentage.	Percentage last year.	Special Cases.
Backwardness	 26,474	85	0.31	0.40	2
Dullness	 26,474	148	0.55	0.55	17
M.D. educable	 26,474	52	0.19	0.33	5
M.D. ineducable	 26,474	5	0.02	0.009	1
Nervous or unstable	 26,474	33	0.12	0.17	15
Behaviour difficult	 26,474	15	0.06	0.06	6

The incidence in these conditions remains fairly stable from year to year. In the case of Nervous and unstable children, the Child Guidance service, to which they are referred, keeps them under observation and care as long as necessary.

Heart Diseases.—Are of three kinds—Congenital, Acquired and Functional. The total number of children affected was 653; 358 boys and 295 girls, a percentage of 2.46. Below is a detailed statement of the incidence of these three groups:—

Condition.	Number of children examined.	Number found affected.	Percentage.	Percentage. last year.	Special Cases.
Congenital Heart	 26,474	60	0.22	0.17	13
Acquired Heart	 26,474	185	0.70	0.72	19
Functional Heart	 26,474	408	1.53	1.17	20

These figures indicate that incidence in Congenital Heart conditions remains more or less stable.

Lung Diseases.—Includes Chronic Bronchitis, Suspected Tuberculosis of Lungs and Other diseases of Lungs. The total number of children affected was 903, a percentage of 3.40; 523 were boys and 380 girls. Below are the details of these three groups:—

Condition.	Number of children examined.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
Chronic bronchitis	26,474	61	0.23	0.22	5
Suspected tuberculosis	26,474	29	0.11	0.12	5
Other diseases of lungs	26,474	813	3.06	3.16	39

These figures show a slight increase in cases of Chronic Bronchitis, a steady figure in Suspected Tuberculosis and an increase in Other diseases of Lungs.

Deformities.—May be due to Congenital causes or they may be acquired as a sequel to Infantile Paralysis. A number is due to Rickets and the remainder to other causes unspecified. The total number of children affected was 389, a percentage of 1.82. Of these 174 were boys and 215 were girls.

Condition.	Number of children examined.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
Acquired deformities due to Infantile	S	102	0.38	0.40	10
Paralysis	. 26,474	30	0.11	0.12	4
Probable Rickets	. 26,474	212	0.79	0.55	1
Other causes	. 26,474	145	0.53	0.22	29

Under the heading "Probable Rickets" are included all these slight bony deviations from the normal, a great many of which are unlikely to be caused by rickets but can only be classified as such. The genuine case of rickets, previously very common, is now a rarity.

Children born in 1944, that is 7 years of age, were examined only for Vision and Hearing.

The details of this group, in respect of visual defects, is as follows:—

The number of children examined was 4,623 boys and 4,390 girls, a total of 9,013. Of these 217 had squints, 1,029 had fair vision and 195 bad vision. The number recommended for examination for errors of refraction was 843.

Number		1	Number found	
examined.	Defect.		affected.	Percentage.
9,013	Squint		217	2.41
9,013	Fair vision		1,029	11.42
9,013	Bad vision		195	2.16

Details of the 1944 group of children examined for hearing defects are as follows:—

The number of children examined was 9,013. Of these 247 were found to have defects of hearing of varying degree. 171 had Grade I hearing; 76 Grade IIA. There were none in Grade IIB or Grade III. Details are as follows:—

Number of children examined.	Grade of defect.	Number found affected.	Percentage.
9,013	Grade I	 171	1.90
9,013	Grade IIA	 76	0.84
9,013	Grade IIB	 _	_
9,013	Grade III	 _	_

Infectious Diseases.—Only 15 routine cases and 11 special cases suffering from infectious disease were discovered in schools during the year. Such cases, of course, are at once excluded and reported to the Medical Officer of Health of the County or Burgh according to the situation of the school. The diseases consisted mainly of Mumps and Chickenpox.

Other Diseases and Defects.—Under this heading are grouped all those diseases and defects found in schools which have not already been mentioned in the preceding paragraphs. They totalled 758. Special cases with similar diseases totalled 226. The more important of these conditions are recorded below:—

Anaemia 210; enuresis 196; rheumatism 54; obesity 85; debility 38; goitre 20; hernia 36; gastro-intestinal 5; fractures and sprains 28; coeliac disease 5; chorea 7; laryngitis, tonsilitis and tracheitis 23; thread worms 11; appendicitis 3; osteoporosis 1; hydrocele and

varicocele 4; tumours 5; nephritis 5; diabetes 1; habit spasm 3; haemophilia 1; hypothyroidism 2; Albinism 2; achondroplasia 1; pseudo-hypertrophic muscular atrophy 1; gingivitis 1; vaginitis 2; bursitis 1.

Examinations Conducted by the School Medical Staff other than Routine School Examinations.

The School Medical staff undertook many examinations of a special nature during the year. These were requested from many sources—Director of Education, Headmasters, Child Guidance staff, Children's Officer, District sub-committees, family doctors, hospital almoners, etc. Though time consuming, they form a very important part of our work.

These examinations could be outlined as follows:-

- (a) Examination of absentees from schools and irregular attenders. These are done at the request of the Attendance Department. They totalled 1,673. Many of these cases are examined at school clinics by arrangement, but frequently home visits have to be made, very often in outlying parts of the County.
- (b) Examination of physically and mentally invalid children in attendance at the four special schools. These examinations are carried out at regular intervals. They numbered 1,033.
- (c) Examinations of invalid children for admission to day special schools. The numbers were—Physically Invalid 73; Mentally Invalid 136.
- (d) Children employed under the Employment of Children Act. They numbered 782. The chief employments engaged in are delivery of papers 343; messages 190; milk and rolls 249.
- (e) Children examined under the Children and Young Persons Act. The majority of these cases were examined at the Remand Home. All children admitted to the Remand Home are examined within twenty-four hours. Total—189.
- (f) Students in preliminary training as teachers totalled-Nil.
- (g) Examinations for admission to the holiday camps and Residential Schools—2,350.
- (h) Examination of deaf-mute children—12.
- (i) Examination of blind children-3.
- (j) Examination of necessitous children for the supply of clothing and food. The number granted free boots and clothing—280.

- (k) Special examinations of children at the Minor Ailments Clinics —2,854.
- (l) Immunisation of school children—9,041. The children in the nursery schools were immunised against Diphtheria and Whooping Cough.
- (m) Examination of mentally defective children suspected of being ineducable. These totalled 61, of whom 10 were found to be definitely ineducable and were reported to the General Board of Control.
- (n) Youth Employment Service-4,953.
- (o) Dental cases requiring a General Anaesthetic—740.

In addition, the following examinations were carried out:— Janitors 26; school cleaners 41; certifications for Certified Institutions 2; leavers at Certified Institutions 10; epileptics for admission to the Colony of Mercy, Bridge of Weir, 1; teachers 5.

6. MEDICAL TREATMENT.

A. MINOR AILMENTS TREATMENT.

Treatment remains one of our statutory duties. It is confined to minor ailments of a simple nature—those which can be cleared up readily—thus obviating much sickness absence.

Treatment clinics number twelve main and eleven subsidiary. A mobile clinic serves many of the isolated rural schools.

At the main clinics the total number of children treated was 12,691 and the number of attendances was 72,837. At the subsidiary clinics the number treated was 4,898, involving 25,758 attendances.

The total for all clinics was 17,589 with 98,595 attendances.

The following are the totals of children treated in the main clinics and the number of attendances made in the four main categories of conditions:—

- (1) Eye conditions treated 1,982 and attendances made 17,169.
- (2) Skin conditions treated 9,291 and attendances made 42,389.
- (3) Ear diseases treated 1,239 and attendances made 10,679.
- (4) Nasal conditions treated 248 and attendances made 2,468.

As usual, skin conditions were in the majority.

Cleansing of children from verminous conditions is carried out at all the clinics. These cases during the year numbered 1,962; 274 boys and 1,688 girls. After disinfestation, supervision is maintained by the nursing staff.

Minor ailments in the special schools are attended to by the school nurse. Total number of treatments given was 42,787.

Other examinations, totalling 2,854, other than those already mentioned, were carried out at the Minor Ailments Clinics.

A tabular statement of the individual clinics, children treated and attendances made follows:—

ESTABLISHED CLINICS.

Clin	iic.	Medical	Office	r.	Children treated.	Attendances made.
Airdrie	***	 Dr. Hood			1,420	7,064
Baillieston		 Dr. Hood			678	3,264
Bellshill	***	 Dr. Perry		***	900	7,580
Blantyre		 Dr. Perry			1,479	7,538
Cambuslang		 Dr. Cunning	ham		2,449	9,484
Coatbridge		 Dr. Pollock			1,608	9,086
Hamilton		 Dr. Douglas		***	1,018	10,106
Larkhall		 Dr. Douglas			659	3,534
Motherwell		 Dr. Prentice			711	4,648
Rutherglen		 Dr. Cunning	ham		861	4,202
*Shotts		 Dr. Wilson			80	689
Wishaw		 Dr. Bruce			828	5,642
		7	Totals		12,691	72,837

*Conducted by the staff of the County Public Health Department.

SUBSIDIARY CLINICS.

Clin	ic.						Children treated.	Attendances made.
Uddingston			***	***			86	732
Blackwood				***		***	302	1,448
Lesmahagow			***	***	***	***	485	2,555
Carluke		***	***		***		582	3,688
Carnwath						***	288	1,435
Lanark				***			114	456
Forth				***	***	***	221	1,749
Stonehouse			***	***	***		285	1,050
Strathaven					***	***	507	3,546
East Kilbride	9	***				***	902	3,191
Benhar		***			***		509-	2,145
Mobile Clinic							617	3,763
					Totals	***	4,898	25,758

Medical Officers of Health of the County and Burghs provide ultra violet ray treatment at their clinics. Use is made of this provision, which is much appreciated.

B. DEFECTIVE VISION AND SQUINT.

Visual defects were referred by headquarters' staff to the ophthalmic specialists. These consultants dealt expeditiously at our twenty-eight visual clinics, as in previous sessions, with large numbers of cases. This arrangement has existed in the County for many years and appears to work very satisfactorily.

Defects developing between routine examination and others noted by the teacher are notified to the Office.

The total number of children examined by the ophthalmic surgeons during the past year was 3,442 and 6,797 re-inspections of children previously tested were made.

The number of spectacles prescribed was 2,741 and 710 children were otherwise tested.

For details of visual treatment see Table VI of the Report.

Other eye conditions noted and recorded by ophthalmic surgeons were:—

Squint (convergent) 492; squint (divergent) 18; squint (alternating) 89; corneal nebulae and opacities 45; corneal ulcers 2; blepharitis and conjunctivitis 25; phlyctenular conjunctivitis and keratitis 1; choroido-retinal changes (non-myopic) 8; nystagmus 17; optic atrophy 12; cataract 9; ptosis 7; aphakia 4; pseudo neuritis 2; albinism 4; dislocation of lens 1; eccentric fixation 5; papillary membrane defects 1; disc disorders 11; peripheral lens opacity 2; chalazion 1; amblyopia 13; coloboma of lens 10; epicanthus 2; atrophy of macula 2; persistent hyaloid artery 2; posterior senechia 1; aniridia 1.

C. NOSE AND THROAT OPERATIVE TREATMENT.

Ascertainment of cases requiring removal of tonsils and adenoids is carried out by School Medical Officers during routine school examinations. Waiting lists are not high and there is a steady turn over for operation.

The number of children operated on at the various centres is tabulated delow:—

CLELAND HOSPITAL.

(Dr. R. A. Glay.)		
Number operated on for tonsils and adenoids		222
Number treated for ear conditions		9
Number treated for nasal conditions		2
Number examined and advised no operation need	led	43

CARNEGIE HEALTH INSTITUTE, MOTHERWE	ELL.	
(Dr. R. A. Gray.)		
Number operated on for tonsils and adenoids		95
Number of attendances made by patients		269
LADY HOME HOSPITAL, DOUGLAS. (Dr. Brown Kelly.)		
Number operated on for tonsils and adenoids		84
Law Hospital, Carluke. (Dr. Brown, Kelly.)		
Number operated on for tonsils and adenoids		633

AUDIOMETRIC TESTING.

Nurse Gibson, the Audiometric Test Supervisor, examined pupils born in 1943 in nearly all the County schools.

The Head Teachers and staff again gave this young service their co-operation and help and were also interested in its aims and objects.

SUMMARY OF RESULTS OF AUDIOMETRIC TESTS

Group.	No. of children listed.			Grade	Grade IIA	Grade IIB	
Children born 1943	5,559	5,338	4,958 38 92·9% 7·1		176 3·29%	1 .02%	
Children born 1942	469	. 444	415 2 93·47% 6·5		7	Ξ	
Special cases of any other age thought to have hearing							
defect	1,004	948		93 201 2% 21·2%	279 29·43%	13 1·37%	

D. ORTHOPAEDIC SCHEME.

A special look-out is kept during school examinations for orthopaedic defects, and cases are referred for an early visit to the Surgeon.

Treatment is arranged at Stonehouse and Hairmyres Hospitals. Consultative clinics are held regularly at Stonehouse and Strathclyde.

Orthopaedic Sisters supervise after-care.

There were 1,156 New Cases and 471 Revisits.

The above figures are for cases seen by the Specialists and do not include follow-up by orthopaedic sisters.

In the hospitals, children are given education by trained teachers.

7. DENTAL INSPECTION AND TREATMENT.

STAFF.

Chief Dental Officer. WILLIAM GIBSON, L.D.S.

Assistant Dental Officers.

ANDREW C. F. RANKIN, L.D.S. MRS. MARY H. OWENS, L.D.S. ARCHIBALD HAY, L.D.S. MISS MARGARET S. M'DONALD, L.D.S.

- (a) MRS. JANETTE T. CLELAND, L.D.S.
- (b) GORDON E. M'INTYRE, L.D.S.
- (c) GEORGE REID, L.D.S.
- (d) ALEXANDER WESTWOOD, L.D.S.
- (e) WILLIAM A. THAIN, L.D.S.
- (f) MARTYN L. H. DAVIES, L.D.S.

Dental Attendants.

MARY GOLD
MARGARET JAMES
SARAH M'GHIE
NELLIE WARDROPE
JESSIE BALLOCH
(g) MARGARET CLARK

MRS. MARGARET DICK

- (h) CATHERINE WALLACE
- (i) JANET ESPIE
- (j) LILLIAN M'LENNAN
- (k) ANNE ANDERSON

Dental Technicians.

Senior Technician in Charge—HENRY DICK
(1) Apprentice Technician—WILLIAM C. A. PARIS

Clerical Staff.

GEORGE M'LENNAN

(m) Mrs. B. M'DOUGALL (nee Barbara Monaghan)

- (n) MARGARET COCHRANE
 - (g) MARGARET CLARK
- (a) Resigned 19/12/51.
- (b) Appointed 8/10/51.
- (c) Appointed 3/12/51.
- (d) Appointed 25/2/52.
- (e) Appointed 1/4/52.
- (f) Appointed 21/4/52.
- (g) Transferred to Clerical Staff 17/11/51.
- (h) Appointed 3/12/51.
- Appointed 26/3/52.
- (j) Appointed 1/4/52.
- (k) Appointed 21/4/52.
- (l) Appointed 7/1/52.
- (m) Resigned 16/8/51.
 Re-appointed 3/9/51.
- (n) Resigned 17/11/51.

TO THE CHAIRMAN AND MEMBERS OF THE

EDUCATION COMMITTEE OF THE COUNTY OF LANARK.

I beg to submit my Annual Report on the Dental Inspection and Treatment of school children in the County of Lanark for the year ending 31st July, 1952.

This year the Annual Report was completed during the last week in June when attendance figures at the clinics are usually very low and, being found satisfactory, this period will be continued in future years.

During the course of the year, Mrs. J. T. Cleland resigned her appointment (19/12/51) but we were successful in filling the five vacancies in the Dental Officer establishment as follows:—

Gordon M'Intyre, L.D.S. (8/10/51.)

Alexander Westwood, L.D.S. (25/2/52.)

Martyn Davies, L.D.S. (21/4/52.)

George Reid, L.D.S. (3/12/51.)

William Thain, L.D.S. (1/4/52.)

Allowing for the above dates, it will be noted that the actual strength of nine Assistant Dental Officers is equivalent only to approximately seven full-time officers over the whole year. There is quite an appreciable improvement in the various columns of Table V over the previous session and I would estimate that, in a full year, our present staff will inspect about 55,000 children and follow up with Dental Treatment to all those who require and accept it.

With our school population at 90,000 children, I regard the appointment of an additional six full-time Dental Officers as an absolute necessity if this department is to provide a dental service to every school child once a year, and even that is far short of the twice yearly dental inspection and treatment so necessary for the dental welfare of children. Here I might point out that the National Health Service provides for a young person receiving treatment three times a year and an adult twice a year.

Following the increase in staff, the scheme, whereby children of 11 years of age and over who were found on inspection to require treatment were referred to a private practitioner to receive it, was withdrawn on 1/5/52. This scheme could never be regarded as very satisfactory and produced many complaints from parents and staff but it did result in children receiving treatment who might not otherwise have done so. Many private practitioners helped us over our difficulty by accepting child patients during school hours and in the evenings and I would like to record my thanks for their

co-operation. The scheme, allowing attendance of children at private surgeries during school hours, is generally operating very smoothly, but, from time to time, it appears to produce an undue disturbance in classroom routine. The staffing position is such, however, that I cannot seek withdrawal of the procedure meantime.

The Education Health Services Sub-Committee Chairman and myself attended the International Dental Congress in London from 19th to 26th July, 1952. This was a most interesting experience and a special report has already been submitted to the Committee. No representatives attended the Annual Conference of the British Dental Association held in Cardiff from 1st to 5th September, 1952.

I give below a statement of the items of importance and Table V at the end of the Executive School Medical Officers' Report shows the full details of the work performed by the staff:—

Number of children inspected			43,307
Number of children notified as being in nee	d of d	ental	
treatment (16,120 boys; 15,375 girls)			31,495
Percentage of children requiring treatment		***	72.7
Number of children accepting treatment			11,912
Number of children treated			7,841
Number of attendances for treatment			13,564

Treatment.			Temporary Teeth	Permanent Teeth	Total.
Extractions		***	12,355	1,520	13,875
Fillings, Amalgam			1,520	3,610	5,130
Fillings, Cement	***		706	328	1,034
Other treatment (Scalings, etc.)			2,788	1,335	4,123
Number of sessions				404	
Number of sessions	spent	on tr	eatment	2,188	

The undernoted table shows the work carried out by each officer :-

Dental Office	er.	No. of children treated.	Extractions (temporary teeth).	Extractions (permanent teeth).	Fillings, Amalgam or Cement.	Other Treatment.	General Anaesthetic.
Mr. Rankin		1,182	1,793	182	1,201	136	60
Mrs. Owens		931	1,892	223	1,031	150	138
Mr. Hay		1,295	1,487	103	1,714	1,319	
Miss M'Donald		923	2,277	456	232	293	337
Mr. M'Intyre		1,101	1,547	179	740	855	10
Mr. Reid		1,152	1,847	241	254	541	27
Mrs. Cleland Mr. Westwood	}	624	721	76	277	570	17
Mr. Thain		381	463	41	370	70	1
Mr. Davies		252	328	19	345	189	19
Totals		7,841	12,355	1,520	6,164	4,123	608

In addition to the above, certain work was carried out under the Maternity and Child Welfare, Orthodontic and Hospital Dental Schemes and full details are obtainable from the County Medical Officer's Report for 1951, pages 96-98. A total of 526 patients made 1,408 attendances and this includes 85 school children with 425 attendances. Treatment given to school children included 64 extractions under local anaesthesia and 79 under general anaesthesia. 12 fillings were inserted and 3 partial dentures supplied. 37 children attended for orthodontic treatment and 40 appliances were fitted.

WILLIAM GIBSON, Chief Dental Officer.

DENTAL DEPARTMENT,
13 CLYDESDALE STREET, HAMILTON.

8. SPECIAL SCHOOLS AND CLASSES.

Once again we record the steady and valuable work of the special schools during the year:—

Drumpark School, Bargeddie.
Dalton School, Cambuslang.
Auchinraith School, Bothwell.
Knowetop School, Motherwell.
Occupational Centre, Hamilton.

There are two sections to each of the first four schools—viz., (a) physically handicapped, (b) mentally handicapped.

Children are ascertained and recommended for admission by the School Medical Officer and arrangements are made whereby the scholars are brought to and taken from home in motor 'buses which pick them up at scheduled points near their homes. Those unable to walk are collected at their homes. Meals, of a suitable type, are provided at school. Additional nourishment, e.g., milk, virol, etc., can also be provided. A school nurse holds a clinic daily for the treatment of minor ailments; the schools are visited at least once per month by one of our assistant medical officers. Statistics are kept at the schools regarding the health of each child.

These schools, which fulfil a very important role in the School Health and Education systems, unfortunately do not cover more than the more populous areas of the County. Rural areas are unable to take part in these facilities and their needs are becoming an urgent priority.

The Occupational Centre is, by Statute, a Special School and provides for very low-grade children who are not capable of any

real scholastic work, but can be trained in simple habits of hygiene and practical usefulness. It has already been emphasised that we have waiting lists for this type of Centre in many areas.

Special provision is also made for other groups of handicapped children.

The deaf and partially deaf attend Auchinraith Special School as day scholars. Other deaf children outwith the coverage of Auchinraith are sent as residential pupils to the Royal Deaf and Dumb Institution, Edinburgh, St. Vincent's School for the Deaf, Tollcross, or Langside Deaf and Dumb Institution, Glasgow. By mutual arrangement between Authorities, St. Vincent's School for the Deaf is now administered wholly by the Glasgow Education Authority.

The Royal School for the Blind, Edinburgh, or the R.C. St. Vincent's School for the Blind, Tollcross, provide education for blind and educationally blind children from the County.

Certain categories of orthopaedic defect, involving severe crippling, and chronic or congenital disabilities, go to East Park Homes.

The Epileptic Colony at Bridge of Weir contains Protestant children of educable mentality who are prevented from having education at a normal school by reason of epilepsy. There is no similar Home for the education of R.C. epileptics.

Epilepsy is among the outstanding subjects for research and school provision.

Classes for the partially sighted or myopes exist in each of the special schools. The School Ophthalmic Surgeons make their recommendations and, after the child is admitted, further examinations are made by way of supervision.

The total number of children so accommodated is 40.

Children who recover their health are transferred back to ordinary Schools as soon as possible. They numbered 42 during the past year.

Below will be found details of the numbers and conditions of children in special schools:—

PHYSICALLY INVALID CHILDREN.

At the four special schools	426
At Castlecraig Residential School, Blyth Bridge, West	
Linton, Peebleshire	14
At East-Park Homes for Infirm Children (Largs and	
Glasgow)	18
At the Colony for Epileptics, Bridge of Weir	4
At Westerlea School for Spastics, Edinburgh	1

MENTALLY INVALID CHILDREN. At the four special schools 565 7 At Birkwood Certified Institution, Lesmanagow At St. Charles' Certified Institution, Carstairs 3 At Lennox Castle Certified Institution, Lennoxtown 4 At the Camphill-Rudolf Steiner Schools, Aberdeen-1 shire DEAF-MUTE AND EDUCATIONALLY DEAF CHILDREN. At Auchinraith Special School, Bothwell 42 At the Royal Deaf and Dumb Institution, Edinburgh 11 At St. Vincent's School for the Deaf, Tollcross 20 At Glasgow School for the Deaf BLIND OR EDUCATIONALLY BLIND CHILDREN. At the Royal School for the Blind, Edinburgh 6 At St. Vincent's School for the Blind, Tollcross CHILDREN AT SPECIAL CLASSES OUTWITH THE EDUCATIONAL AREA. At Ashgrove Special Classes, Maybole, Ayrshire 1 At Astley Ainslie Hospital Classes, Edinburgh At Balgray Special School, Glasgow ... 1 At Biggart Memorial Home Classes, Prestwick 12 1 At Challenger Lodge, Edinburgh At East Fortune Hospital Classes, North Berwick 1 At Eastmuir Special School, Shettleston 1 At Elmvale Occupational Centre, Glasgow 1 3 At Kennyhill Special School, Glasgow... At Kingston Special School, Glasgow ... 1 ... 1 At Percy Street Special School, Glasgow At Princess Margaret Rose Hospital, Edinburgh At Sandyford School, Paisley ... 1 1 At St. Kenneth's Special School, Glasgow 2 At St. Kevin's Special School, Glasgow At Wolseley Street Occupational Centre, Glasgow 1

The number of children who, in the four special schools, attained the age of 16 and left school was 87.

At Children's Village, Humbie, near Edinburgh

The number of children who got suitable employment was 75.

9. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

A. Physical education is an essential factor in the maintenance of optimum health, and has taken an important place in modern school curricula in this country and abroad. An enthusiastic staff of teachers gave attention to these activities during the year as results seen at annual sports gatherings prove. Gymnastics, rhythmic exercises, country dancing, etc., all make a vital contribution to the all round physical and mental health of the next generation.

B. SWIMMING BATHS.

Swimming is a favourite feature in the recreational curriculum of Lanarkshire schools. In the Burghs, chiefly, arrangements exist whereby swimming baths are available to pupils, and qualified instructors give courses of tuition which are popular.

C. PLAYING FIELDS.

The County school playing fields are good examples of such additions to the facilities for physical recreation. Schools without playing fields make use of public parks, etc.

D. HOLIDAY CAMPS.

The customary series of annual holiday camps were arranged as in previous years. Children were medically examined before going to camp and camps were visited weekly by a School Medical Officer. Medical Officers submitted good reports of the health and happiness of pupils attending.

The camps were :-

Lanark (Lanark Grammar School)—Invalid children from Auchinraith and Dalton Special Schools for two weeks.

Lanark (St. Mary's R.C. School)—R.C. Boys' Camp.

Douglas (Douglas West Public School)—Girls' Camp

Strathaven (Strathaven Academy)—R.C. Girls' Camp.

Leadhills (Leadhills Public School)—Boys' Camp.

Biggar (Biggar H.G. School)—First fortnight Girls' Camp; Second fortnight Boys' Camp.

1,670 medical examinations for admission to the camps were carried out.

The total number of children attending the camps was 735.

E. INSTRUCTION IN PERSONAL HYGIENE.

School Medical Officers, nurses and teachers all play a part during interviews, visits and class instruction for passing on the ideas of health to parents and pupils.

10. OTHER ACTIVITIES IN RELATION TO THE HEALTH OF SCHOOL CHILDREN.

"MILK IN SCHOOLS" SCHEME.

This is a most valuable addition to the diet of school children.
All milk is pasteurised and Grade ATT.

The following table shows the monthly consumption of milk during the year:—

Month.		1951-52	1950-51	1949-50
September, 1951	 	77,438	73,151	73,296
October, 1951	 	71,939	71,616	74,164
November, 1951	 	75,076	70,302	70,464
December, 1951	 	68,395	68,157	68,288
January, 1952	 	68,987	67,282	69,215
February, 1952	 	68,856	69,042	70,604
March, 1952	 	70,277	69,437	71,214
April, 1952	 	72,492	73,711	72,921
May, 1952	 	73,206	71,016	73,340
June, 1952	 	75,932	71,667	71,751

280 children were granted free boots and clothing.

SCHOOL MEALS SERVICE.

No new developments fall to be reported with regard to the School Meals Service. The service, as it exists, is capable of meeting the demand for meals in school. With the continued restrictions on capital expenditure, many projects planned by the Education Committee for the provision of new dining rooms and kitchens to replace unsatisfactory accommodation are held in abeyance and the Committee have had to be content with continuing their policy of making what improvements they can in existing buildings.

Participation in the service during the year under review was maintained at the very satisfactory level of over 40 per cent of the average number of children attending school daily, representing approximately 34,000 children.

CONSULTANT SERVICE.

From time to time special investigation is necessary in exceptional cases. This is arranged through the County Public Health Department who can send cases to the Paediatrician or Consultant Physician.

The reports which come in go to the Medical Officer concerned and the family doctor respectively and treatment is arranged generally through the latter.

The number referred thus during the past year was 37.

REHABILITATION SCHEME.

The Disabled Persons Act now covers practically all who were formerly served by this Scheme.

MINIATURE MASS RADIOGRAPHY.

The Area Tuberculosis Service has been in operation and has examined a large number of school children in most of the Senior and Junior Secondary Schools in this area and day and evening students in a Technical College.

The following is a statistical summary of the results of these investigations:—

Total examined						15,210
Total referred for large						385
No abnormality						133
Abnormality not significa	nt—n	o furtl	her acti	on:-		
Tuberculous						82
Non-tuberculous						38
Significant Abnormalities	:					
Lesions—Probably T	ubercu	lous.				
Treatment						17
Observation						107
Lesions—Probably N	on-Tu	bercul	ous			6
Cardiovascular						10
Observation	Cases	previo	usly kr	own-	43.	

COMMENTS.

The response has been satisfactory and the findings indicate that X-ray examination of children aged 12 years and over is a valuable part of school medical examination. In all cases of significant abnormalities the family doctor was, with the parent's consent, informed. Cases requiring dispensary observation and treatment were referred to the appropriate Medical Officer of Health.

INTENSIVE COURSES IN FIRST AID AND HOME NURSING.

Readers of these Reports may remember that pupils who had completed their Leaving Certificates and were thus more free from routine school work could utilise the time to good purpose for their future in the above special courses.

Though schools are finding difficulty in arranging these courses, they are still sufficiently popular to warrant further experiment.

Schools taking part, with numbers of pupils and results of examinations, were as follows:-

INTENSIVE COURSE IN FIRST AID AND AMBULANCE WORK. (Session 1952.)

School.	Number of pupils enrolled.	for	Proficiency	Pupils who gained Medallions or Re-examination Vouchers.
Airdrie Academy	 60	53	49	4
Biggar High	 15	12	12	_
Hamilton Academy	 30	20	15	_

INTENSIVE COURSE IN HOME NURSING. (Session 1952.)

School.	Number of pupils enrolled.	for	Pupils who passed the elementary examination.	Pupils who gained higher awards.
Albert Secondary	 12	12	12	_
Elmwood R.C. Sec.	 76	44	32	-
Hamilton Academy	 60	60	60	_
Wishaw High	 19	19	18	_

CHILD GUIDANCE SERVICE.

The following summary is made from a Report by Mr. Thomas Smith, Principal Psychologist:-

A recent report of the Advisory Council on Education in Scotland, dealing with pupils who are maladjusted because of social handicaps, contains the following: "The underlying principle that the specialist must commonly visit the child rather than the child visit

the specialist should be applied to all aspects of child guidance in rural areas." This is interesting to us in view of the fact that, although a considerable part of Lanarkshire's 837 square miles cannot be described as rural, the development of the Child Guidance Service during the past six years has, of necessity, followed that underlying principle very closely. In connection with the ultimate object of establishing subsidiary clinic premises in each of the more heavily populated areas, it is pleasing to record that a beginning has now been made along these lines. Thus, in February, at Calderwood School, midway between Cambuslang and Rutherglen, the Director made available to us the part-time use of the medical premises there, through the courtesy of the School Health Service. At present, one day is given over to clinical child guidance work and one to speech therapy. The suite consists of a treatment room, a waiting-room and toilet facilities. Similarly, at Langloan School, Coatbridge, the medical room there has been furnished for part-time child guidance purposes and will be functioning later also as a local centre for a weekly session of speech therapy. The advantages of combined use in this way will be obvious, and the Headmasters of both schools have been very helpful, not least by their general attitude of co-operation and interest.

A psychiatric clinic for treatment of children is now functioning at the Hill Hospital, Hartwood, under the direction of the Physician Superintendent, Dr. Chapman, and is at present being conducted by Dr. David Irwin, psychiatrist, and Mr. Maxwell Paterson, clinical psychologist. The main clinical session is at the moment held on Saturday mornings, but, by the autumn, the staff will be able to deal with about 20 cases and it is hoped that we can make use of these facilities from time to time for consultation, diagnosis and treatment, especially in cases where there is severe emotional and behaviour disturbance.

During the session, fifteen talks on child guidance work and related topics were given by the staff to various groups as follows:—

(1) Women's Organisat	tions	 	7
(2) Parent-Teacher Gro	oups	 	4
(3) Youth Clubs		 	2
(4) Parent Groups		 	1
(5) Public Health Nurs	sing Staff	2.2	1

(The Women's Organisations consisted of four Woman's Guilds, Lanarkshire Infants' Mistresses Association, a Young Mothers' Club and the Soroptimist Club of Hamilton.) The number of children examined during the session was 1,729 (boys, 1,160; girls, 569). This total was made up as follows:—

(5033, 1,100, 8110, 000). 1110 total na	o made up	do ronon	
	Boys.	Girls.	Total.
1. Child Guidance (Group 1—General)	792	392	1,184
2. Speech cases taken on for treatment during the session	245	78	323
3. Speech cases awaiting therapy but examined by a psychologist	54	24	78
4. Examined individually for the Director			
at the request of the Promotion Board	45	56	101
5. Mental Survey Siblings	24	19	43
Totals	1,160	569	1,729
MISCELLANEOUS.			
Special case-reports to Director			52
Special case-reports to Senior School Med			25
Special case-reports to Almoners, Proba			7
Children examined at home in presence			
Dr. Cunningham of the School Heal	th Service		148
Children examined in Remand Home			73
Children examined for Mental Survey for			43 .
Children examined for purposes of Prom	otion Boar	rd	101
Vocational Guidance			11
Sources from which Children were I	REFERRED		
Headmasters		1,052	
School Health Service		307	
Director of Education		251	
Parents		35	
General Practitioners		10	
Royal Hospital for Sick Childre		8	
Research Council		43	
Other Associat	***	23	
Other Agencies			
Total		1,729	
		10000000	

VISITS AND INTERVIEWS.

Schools visited				185
School-visits (all day	attend	ance	at one	
school reckoned	l as two	visi	ts)	1,555
Home visits				744
Visits to Remand H	lome, C	ambı	islang	32
Visits to Institutions	and H	ospita	als	22
Speech-Clinic session	ıs			609
Treatment intervie	ws (o	ther	than	
speech)				988
Speech treatments	(include	ding	small	
groups)				4,298
Parent-Guidance int	erviews	· · · ·		1,582

NURSERY SCHOOLS.

Routine and periodic examinations of nursery school children were carried through by one of our lady medical officers during the year.

Immunisation against diphtheria and whooping cough and all the other school health measures—preventive, specialist and curative—were brought into play. The health of the pupils was satisfactorily maintained.

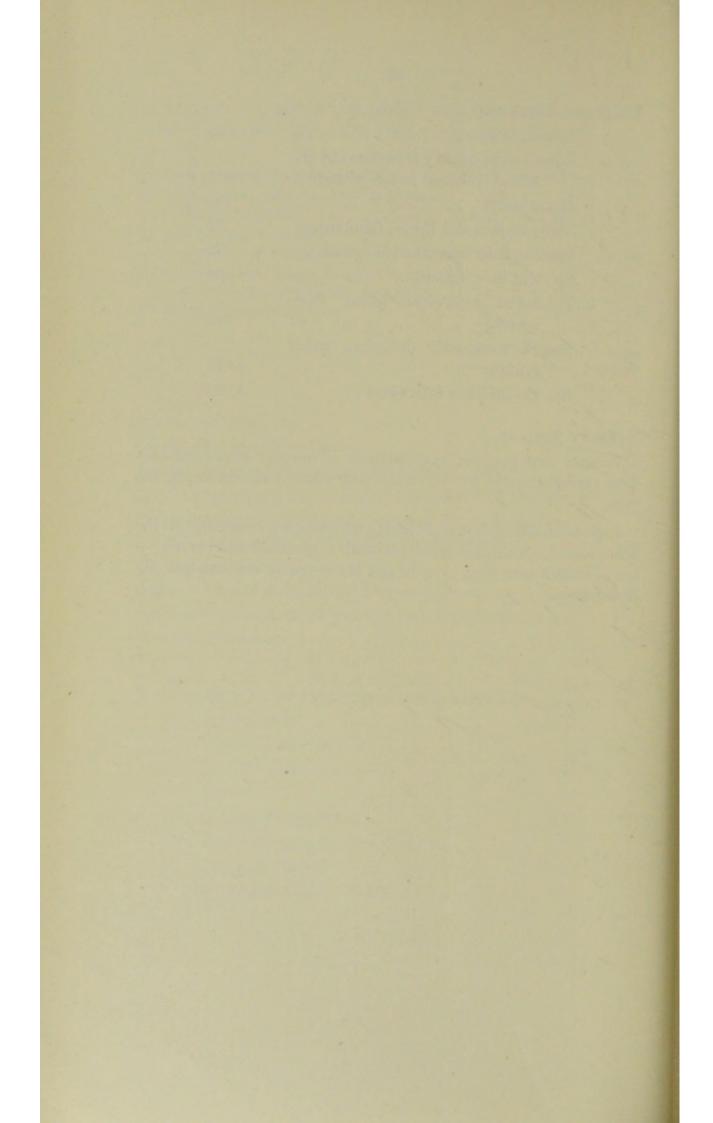


TABLE I. (1951-52).

Total number of children examined at

A. System.	ATIC EXAMINATION	vs :— '		Sys	other tematic
0 11	Entrants		 8,431	1,	165
Ordinary	Second Age Grou	р	 8,383		_
Schools	Third Age Group		 7,901		_
Secondary Schools	Age Group		 594		_
		Total	 25,309	1,1	65
Special	EXAMINATIONS :— (Non-routine) Caspections by Medica	ses	 		4,175 5,506
		Total	 		9,681

Number of individual children inspected at systematic (routine) examinations who were notified to parents as requiring treatment (exclusive of uncleanliness and dental caries):—

0.1	Entrants			 	1,655
Ordinary	Second Age Group			 	1,565
Schools	Third Age Group			 	1,497
Secondary Schools	Age Group			 	77
	ematic Examinations		,	 	210
	Т	otal		 	5,004

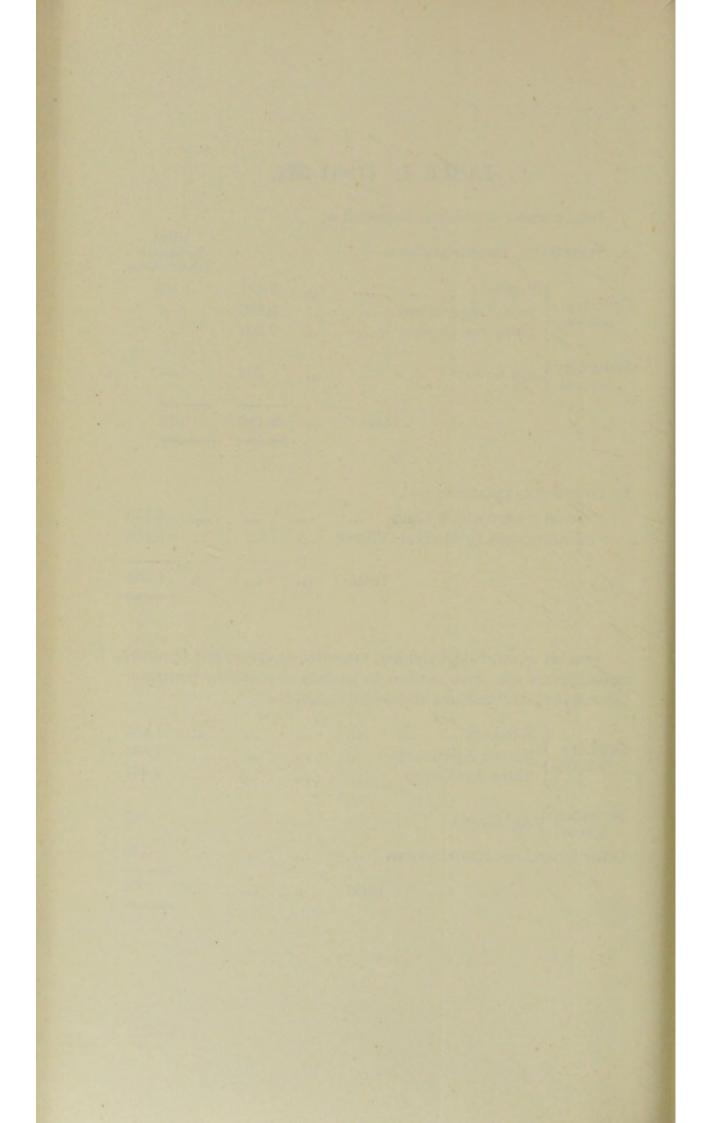


TABLE I	L.																						SY	YST	EM	ATI	C	EXA	MIN	IAI	TIO:	VS.	(193	1-52	0.																										
		6	1600		1.3	NO. BUT	93.K						Sex				×	-					Yatt 9	MATERIA							Lynn							-	Mi.			1 3	PRODUK.		Marre	00 N	erren i				Start.			Livia	1		Inne	na.	T	7	
	14	100	and an		Mean		1	ere.		3	(1942) (1942)			3	OTA.						Ho	2		Tono	-	240	6		Term	M Sus	AREA.			YMIN- ARCY.		D36			aneny.	n Hann	**					8	100	100	See a				4	4	Ti		4.0	genus.		All I	
	Fo. Francis	Custog De	Total Co	Ne	ng.	Rep	Non	4	Burg	Suprem.	Separate.	Distant.	Steren.	shador	Salas	Color French	2002	74	Out Separa	100		Olas.	1	1	No.	Omenda	- Constant	Beginne	Old Control	100	South	Oher Dissent	2000000	No. Assessment	Polician.	Clerken	1	Couls L	1	Coultella	Games 111	Dalent, Anna	Street,	Balbane	Date.	NT. Stand	M.P. (bedee	Removed Up	School B	Couprille	Assessed	Fourteend	Osser Bear	T2 Suparts	Otto Design	Comprehen	East Pares.	Zalash	Other Grown		
Total Extension Af		4-50 197 4-97	0-52 0-67	4-00 560 4-34	0 84 E 1 25	9 22		-00 1	45 33 40		0-54 23 0-32	2 16 28 2 16	0-00 0-00	2.00		9 GB 1050 3 172	54	1-67	200 200 200	100	1 1-1	1 24	200		21 123 67 4	368 6 11 0	4	20 ES 20 ES				17 17 19 19 19				0 45 25 0 10		1000	0-25 0-35			2-17 N 1-23	0.45	0.41	0 05	0.00		(-30)	3 2-01 8-20	0.02	21 0-46 0-02	2.00	0.15	0 07 8	11000	11 9 21 0 30 14	10 223 1 1 1-17 1	95 50 0 53 53 0	23 22 23 24 00 00	0 3 2 4	10000
Bos Percentage Self Gets Percentage		4-53	0-73	5 13	645	-12	51		24 1		25		0.00	2.25		1465				1 33		5 34		35 3	55		72	1-35	: (5)				5-02			Link	1-10	E-E	0.61			0.90		0.90	1-00	0.78	0.65							D 04 2 D 10 1						1 1 1	
Qué Boyn Percentage DE Gato Primatage	3,800	234	0-14	1-15	0-24	-33	EIB	100 3	28		0-08	0.10 (2-35		5 (0)	716	0.17	D-8		8-06	1 23		#5 8	33 E		107	1-29			1-41	1-55	F-34		1-45	C-86		238	P-81	9-10		0.33	0-31	0-02	0.08	G-44		0.02		0.29		1-00	9162	0-07 I							
Dept Percentup Gen - Proceedings	371			- 4		1 35		10	- 31			10 14 1 1-14 1 1-27				106K			DE	0.18			9 4	報子				9-10	20		DES	1.12	5 85	1-80		- 23	0-13	0.65	+ 32									40			1-25	30.00	0.12	- 1	8 0	2			21 -		3
Boys Gels - Percettage		30.00	0.65	3/18	704	125	-10		25		18	80.00				7.05		10.00	3-3	933		\$ P.4		20.14	164 0		25	E31 (-80	004	F-32		1,98		135	0-81		1528	+ 15	0.00			0.03	0.44	0.01	6-26		+ 881		0.11		1 107	8-77	19 4 9-00 2 14 3 0-11 4	10 0	10 10 10 10 10 10 10 10 10 10 10 10 10 1	92 0 4	47 0-3	2 00	6 31 8 2-4 4 81 0 3-3	2
A Don Provider Gets Provider	579	46 7-85 29 10-79	Lill	TIBE	15	na e	911				1-24			1000					0.00	183		6 1 1 1	. 7		85		- 1		100111		37 4-61 30 3-60	100				000		100	2.			2.56 7.71		2	SCOT.				1	100	- 3	11 1	_	0 17 2-	9:10	1	18 5	18.	2 000	1-5	9
Boys Promiser Gold Promiser	17,535	3-93	0.54	3-92 2,183 12-01	6-56		- 500	5 3	-B2 (102		1-93			PSI	123		(P-1)		133			115	40 4	38 E		92	256	- 2011	5 G& 1	5-40 0	13.4	7-65	138 1-86 138 2-34	142	0-80		题	0.53		=		+15	0.00	94 e-69 54 e-12	0-11	1000	190	110	35.	100	146	76	13 4 0-00 5 06 3 0-12 5	140	62 80 80 21 04	19 4	99 117	2 00	4.5	:
1944 Goop	10114	3				-			-1																									185																				- 3						I	
							ı									N	n 6	impl to	ne isd	de s	cante	IC HAILT	Cast is	Paul	ine Age	George	and 0	Alme Sy	- NY 40	1 Inc	XIII/00								chart ch	ôdrea r	or inch	eded.																			

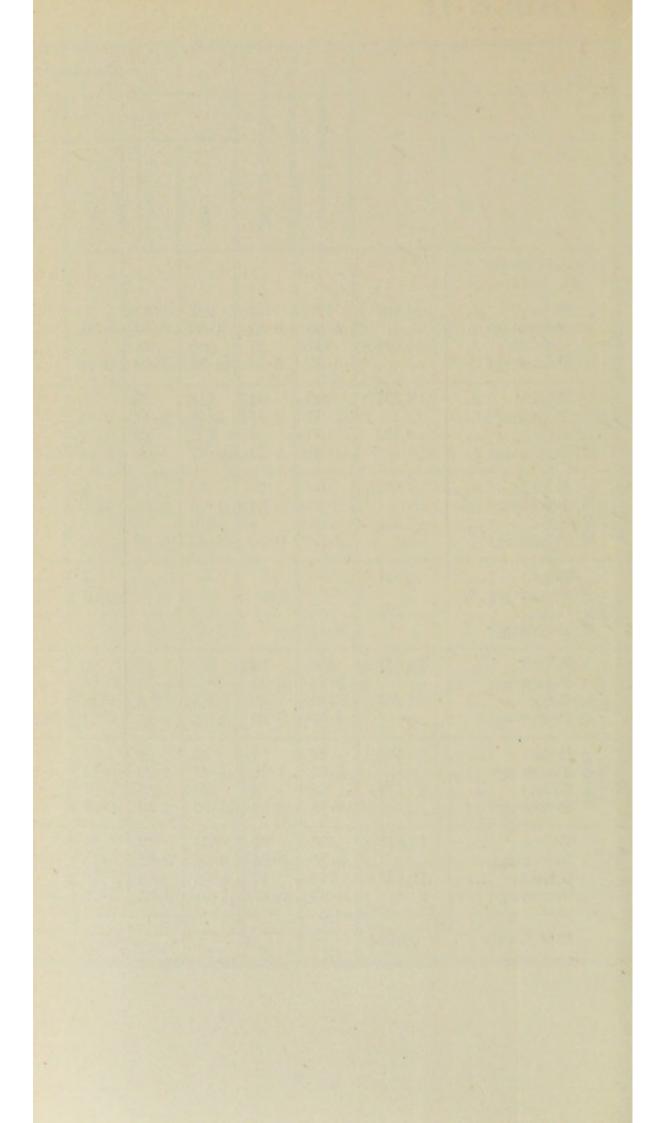


TABLE III. (1951-52)

SYSTEMATIC MEDICAL EXAMINATIONS.

CLASSIFICATION.	Enti	RANTS.	SECOND A	GE GROUP.	THIRD A	GE GROUP.		GROUP.		EXAMINATION TAL.	OTHER S EXAMI	VSTEMATIC NATIONS,	GRAN	D TOTAL.
CLASSIFICATION.	No. of Children.	Per- centage.	No. of Children.	Per- centage										
I. Children free from defects,	3,609	42.81	3,719	44.36	3,941	49-88	333	56.06	11,602	45.84	495	42.49	12,097	45·69
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 (b) Conditions of mouth	_	_	912	10.88	972	12.30	96	16-16	1,980	7.82			1,980	7:48
or teeth requiring													1,500	1.40
treatment, (c) Both (a) and (b),	106	1.26	57 9	0·68 0·11	25 9	0·32 0·11	1	0·17 0·17	189 19	0·75 0·07	20	1.72	209 19	0.79
Total,	106	1.26	978	11-67	1,006	12.73	98	16.5	2,188	8-64	20	1.72	2,208	8.34
II. Children suffering from ailments (other than those mentioned in II.) from which complete recovery is anticipated within a few weeks,	3,402	40.35	2,715	32.39	2,064	26.12	114	19-19	8,295	32.78	451	38.71	8,746	33.04
V. Children suffering from defects where (a) Complete cure may ultimately be ex- pected,	1,227	14.55	847	10.10	726	9-19	29	4.88	2,829	11-18	186	15-96	3,015	11:39
(b) Improvement only may be expected,	87	1.03	124	1.48	164	2.08	20	3.37	395	1.56	13	1.12	408	1.54
Total,	1,314	15.58	971	11.58	890	11.27	49	8-25	3,224	12.74	199	17.08		
Total No. of children						** **			0,221	12.11	100	17.08	3,423	12.93
examined,	8,431	100%	8,383	100%	7,901	100%	594	100%	25,309	100%	1,165	100%	26,474	100%

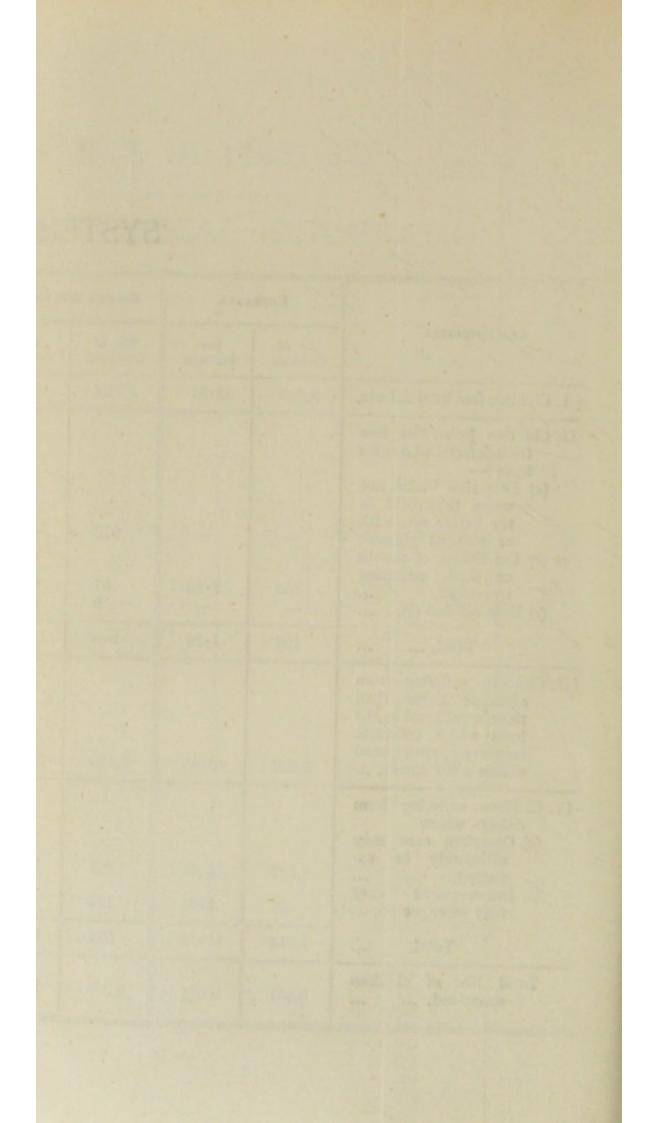
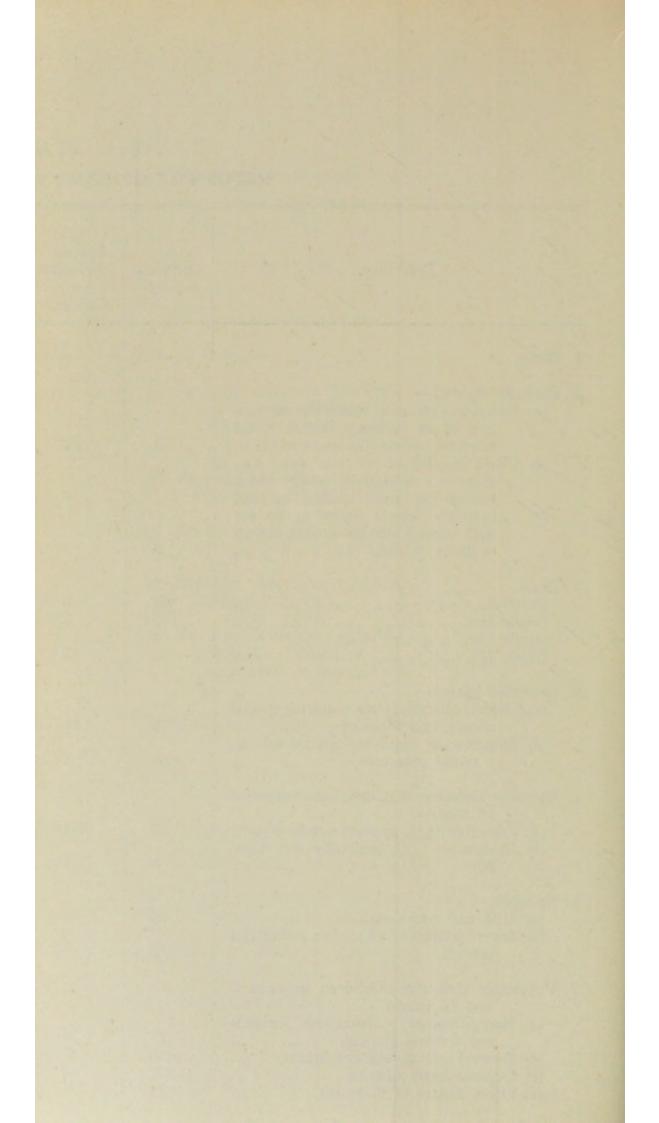


TABLE IV. (1951-52).

RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

Disability.	At Ordinary Schools.	At Special Schools or Classes.	Total.	Disability.	At Ordinary Schools.	At Special Schools or Classes.	Total.
1. Blind,	_	_	_	8. Multiple Defects—			
 Partially sighted— (a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition, (b) Other conditions of the eye, e.g., 	4	21	25	(a) Mentally defective (ineducable) and physically defective ("general orthopaedic conditions") (5(b) and 7(b)).	1		1
cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an				(b) Mentally defective (ineducable) and epilepsy (mild) (5(b) and 6(a)).	_	_	_
ordinary school,	3	9	12	(c) Mentally defective (ineducable) and epilepsy (severe) (5(b) and 6(b)).	_	_	_
3. Deaf— Grade I,	331 176 4 1	3	331 179 4	(d) Mentally defective (ineducable) and blind (5(b) and 1) (e) Mentally defective (educable) and	-	-	-
Defective Speech— (a) Defects of articulation requiring special	1	35	36	physically defective (f general orthopaedic conditions ') [5(a) and 7(b))	-	51	51
educational measures, (b) Stammering requiring special educational measures,	312 51	10	322 52	(f) Mentally defective (educable) and epilepsy (mild) (5(a) and 6(a))	2	17	19
5. Mentally Defective (Children between 5 and 16 years)— (a) Educable (I.Q. approximately 50-70),				(g) Mentally defective (educable) and epilepsy (severe) (5(a) and 6(b))	-	1	1
(b) Ineducable (I.Q. generally less than 50),	6	471 31	528 37	(h) Mentally defective (educable) and physically defective (" other causes of ill health") (5(a) and 7(d))	_	60	60
6. Epilepsy— (a) Mild and occasional, (b) Severe (suitable for care in a residential	16	21	37	(i) Mentally defective (educable) and deaf (5(a) and 3)	_	10	10
school), 7. Physically Defective (Children between 5	2	-	2	(j) Mentally defective (educable) and blind (5(a) and 1)	-	_	_
and 16 years)— (a) Non-pulmonary tuberculosis (excluding cervical glands).	11	34	45	(k) Other multiple defects	2	47	49
(b) General orthopaedic conditions, (c) Organic heart disease, (d) Other causes of ill-health,	230 277 14	69 43 191	299 320 205				



| | | | | | | |

 |

 | | | | | |
 | | - | | de li
 | SPE | CITO | NA | ND | IRI | CAL
 | MENI | (195 | 1-52). | |
 | | | | |
 | | | | | | | | | |
|-----|-------|--|---|---|-------------------|---
--
--
--
--
--
--
--
--
--
--
--
--|---|---|-------|---
---|---|---|---
--|--|------|--|---
--	--	--	--
---	---	---	---
---	-------	---	-------
	W 100	. 1	-

 |

 | | | | IS EXC | | | | | |
 | | | |
 | | | | | |
 | | Manager | | 1 |
 | Note | - | Number of | |
 | | | - | | - | - | | _ | |
| 214 | | | | | Total Test | | or program

 |

 | of Street | Ties. | non l | Hya | De 1 | 12 years
 | | Digitals. | | H years.
 | 16 | | Пу | 117 | 18 9 |
 | Total: | | | 20744 | Percentage
Beyaring
 | | Number
of Popus | | Ima | CTTORU.
 | Ares | | | ent. | 744 | TERR. | Number of
General | San | NAME. |
| | 20.0 | | *** | | | |

 |

 | | | | | |
 | | | |
 | | 360 | Tab. | 84. | 34 | Stel
 | | Serve | Geta | |
 | | Tresses. | Engineer. | Temp. | ties
 | Teop. | Pres | | | 3-00 | Fren. | Theta
Carea | Treat- | Inspec- |
| | 1000 | _ | - 20 | - | 888 | |

 |

 | 8 | | | | |
 | | | |
 | | - | 2 | H | 3 | -
 | 2,047 | 833 | 779 | 1,612 | 33-2
 | 1,121 | 336 | 209 | 349 | 84
 | - | 14 | 32 | 53) | 127 | _ | - | 70 | 243 |
| | 167 | - | 249 | - | 236 | - 3 | - 18

 | - 20

 | - 0 | 226 | - | 229 | - | 271
 | - 1 | 276 | - | 51 -
 | - 15 | - | 3 | | | -
 | 2,533 | 887 | 900 | 1,794 | 70.6
 | 696 | 124 | 202 | 665 | 24
 | 129 | *** | | 410 | | | | | -77 |
| | 464 | - | 60 | - | 539 | - 3 | 31 -

 | - 51

 | - 20 | 40E | | 695 | | 712
 | - 0 | 129 | - 2 | 01 -
 | - 95 | | - 61 | | 21 |
 | 4.043 | 1.707 | 1 606 | 2 222 | 80.4
 | | | | |
 | | *** | | 42 | | 3 | | 1114 | 34 |
| - | 301 | - | 203 | = | 280 | _ 3 | 41 -

 | - 31

 | n - | 414 | - | 270 | | 313
 | | | | 14
 | | | | | |
 | | | | | 1
 | Tr. | 890 | 1,111 | 2,100 | 212
 | 224 | 200 | 13 | 35 | N | 63 | 106 | 290 | 55 |
| | 250 | | | | | |

 |

 | | | | | | | | | |
 | 100 | | 1 2 |
 | | | | _ | |
 | | | | _ |
 | | | | |
 | | | 30 | 36 | 310 | 106 | 204 | 150 | 200 |
| | | | | | | |

 |

 | | | | | | 100
 | - 183 | | 70 | 10
 | - 2 | - | - | El | = | -
 | 5,004 | 2,008 | 2,000 | 4,336 | 95-4
 | 1,215 | 350 | 1,000 | 1,133 | 19
 | 162 | 350 | 18 | 24 | 542 | 281 | 19 | 262 | 61 |
| | | _ | | | _ | |

 |

 | | | | | | 000
 | | | |
 | | 10000 | | | - | -
 | 2.797 | 1,000 | 1,175 | 2,560 | 80-0
 | 1,323 | 901 | 2.00% | 1,400 | 223
 | | 136 | 790 | 15 | | 140 | 104 | - | |
| - | 1,201 | - | 1,362 | - | 1,440 | - 12 | 10 -

 | 1.30

 | e - | 1.182 | | 140 | - 1 | 035
 | - 1 | 07 - | | 27 -
 | 311 | | 68 | | 51 | _
 | 12.007 | 4.829 | 4406 | 0.00 | 77.4
 | 1.000 | 1.000 | | |
 | | | | | | | | | |
| - | 280 | - | 416 | - | 561 | - 4 | 15 -

 |

 | | | | | | | | | |
 | | | |
 | | | | | |
 | | | | |
 | | | | |
 | | | | | 951 | 864 | 10 | 420 | 114 |
| | | - | | | | |

 | 100

 | | - | | | |
 | - 10 | | | "
 | 200 | | 37 | E | |
 | 9,708 | 3,091 | 2,493 | 5,914 | 66.6
 | 1,909 | 1,601 | 2,503 | 1,904 | 222
 | 334 | 435 | 47 | 50 | 740 | 10 | 44 | 602 | 103 |
| - | 3,903 | | 4,270 | - 1 | 4,407 | - 4,0 | 30 -

 | 4,09

 | 0 - | 4,017 | - | A.III | - 4 | 318
 | - 33 | 10 - | | 18 -
 | 342 | - | 171 | | 84 |
 | 43,307 | 16,120 | 15,375 | 11,490 | 22.7
 | 0.902 | 7.941 | 11.004 | IPAN- | 1200
 | 1.550 | 2000 | 200 | | | | | 200 | |
| | | | | | | 1111 |

 |

 | - | | - | | - | -
 | - | - | | -
 | - | - | | - | - |
 | | | | |
 | | | | | 1001
 | | 4100 | - 100 | 22.5 | 100 | 1,335 | 10.8 | 2,088 | 0.1 |
| | 2 | 34 54 54 244 - 254 - 251 - 250 - 343 - 351 | 204 00 004 - 214 107 464 321 520 341 1,001 581 - | 104 ter 364 ter 222 ter 224 t | 284 br 284 br 200 | 100 101 202 101 202 101 102 | No. Set Ort Dad Let Let <td>No. Set No. Del. Set No. 2 204 222 213 233 233 347 240 231 333 444 640 500 341 231 203 341 203 250 346 203 203 250 346 203 203 253 347 354 203 1,390 1,360 1,560 1,560 1,560 1,560 2,510 2,710 1,560 1,560 <td> 100 101 101 102 102 103</td><td>Mod Mod John J</td><td> 10</td><td> Mathematics Mathematics </td><td> Mathematics Mathematics </td><td> Mathematics Mathematics </td><td> Mart Mart </td><td> Mart Mart </td><td> Martin M</td><td> Martin M</td><td> </td><td> March Marc</td><td> March Mar</td><td> March Marc</td><td> March Marc</td><td> March Marc</td><td> March Marc</td><td> March Marc</td><td> No. No.</td><td> No. No.</td><td> March Marc</td><td> No. No.</td><td> No. No.</td><td> No. No.</td><td> No. No.</td><td> No. No.</td><td> </td><td> No. No.</td><td> </td><td> The column The</td><td> 1</td><td> No No No No No No No No</td><td> 1</td><td> </td><td> No No No No No No No No</td></td> | No. Set No. Del. Set No. 2 204 222 213 233 233 347 240 231 333 444 640 500 341 231 203 341 203 250 346 203 203 250 346 203 203 253 347 354 203 1,390 1,360 1,560 1,560 1,560 1,560 2,510 2,710 1,560 1,560 <td> 100 101 101 102 102 103</td> <td>Mod Mod John J</td> <td> 10</td> <td> Mathematics Mathematics </td> <td> Mathematics Mathematics </td> <td> Mathematics Mathematics </td> <td> Mart Mart </td> <td> Mart Mart </td> <td> Martin M</td> <td> Martin M</td> <td> </td> <td> March Marc</td> <td> March Mar</td> <td> March Marc</td> <td> March Marc</td> <td> March Marc</td> <td> March Marc</td> <td> March Marc</td> <td> No. No.</td> <td> No. No.</td> <td> March Marc</td> <td> No. No.</td> <td> No. No.</td> <td> No. No.</td> <td> No. No.</td> <td> No. No.</td> <td> </td> <td> No. No.</td> <td> </td> <td> The column The</td> <td> 1</td> <td> No No No No No No No No</td> <td> 1</td> <td> </td> <td> No No No No No No No No</td> | 100 101 101 102 102 103 | Mod Mod John J | 10 | Mathematics Mathematics | Mathematics Mathematics | Mathematics Mathematics | Mart Mart | Mart Mart | Martin M | Martin M | | March Marc | March Mar | March Marc | March Marc | March Marc | March Marc | March Marc | No. No. | No. No. | March Marc | No. No. | No. No. | No. No. | No. No. | No. No. | | No. No. | | The column The | 1 | No No No No No No No No | 1 | | No No No No No No No No |



TABLE VI, (1951-52).

VISUAL TREATMENT.

Showing number of children who received full ophthalmic examination, number re-examined, and the number for whom spectacles were prescribed or who were otherwise treated.

TREATMENT CENTRE.		Number of Children Examined.	Number of Children Re-examined.	Total Attendances.	Number for whom Spectacles were prescribed.	Number Treated otherwise or Advised.	Cases uncompleted and Cases not requiring Treatment.
Abington		3	7	10	3		
Digger		3		3	3		
Plantura		101	173	274	87	13	1
Coddor	***	73	115	188	44	29	1
	vston)	10	110	100	11	20	
	(Ston)	~0	05	147	52	14	and the same
Carluke	***	52	95	147		1000	
Carnwath	***	25	54	79	19	6	_
East Kilbride		20	26	46	14	6	_
Lanark	***	130	308	438	102	28	_
Larkhall		129	302	431	95	34	_
Lesmahagow		47	76	123	35	12	_
Shotts		171	221	392	114	56	1
Strathaven		48	84	132	27	21	_
Uddingston		77	202	279	65	12	_
Wishaw		204	496	700	175	29	_
Knowetop Special School		20	31	51	16	4	-
Airdrie		381	880	1,261	287	94	_
Baillieston		80	215	295	58	22	_
Bellshill		341	651	992	271	70	
Cambualana		229	338	567	200	29	_
Double and an		148	236	384	128	20	_
Dalton Special School		14	18	32	11	3	_
		15	28	43	11	4	_
Drumpark Special School			603	958	284	68	3
Coatbridge		355		1,080	242	86	0
Hamilton		328	752		398	50	
Motherwell		448	886	1,334	300	50	
Total		3,442	6,797	10,239	2,741	710	5

These Clinics were conducted by the undernoted Ophthalmic Specialists:—

Dr. James Hill.

Dr. Ella I. Mackinnon—commenced 5/2/52.

Dr. William A. M. Smith—commenced 7/2/52.

Dr. John A. Mortimer.

Dr. Alfred G. Shanks.



	AIRDRIE CLINIC.		BIR CLINIC. BAL		LIESTON CLINIC.		INIG. BRITANNILL CLINIC		CLINIC SCANTYRE CLINIC		CAMBUSLANG CLINIC.		COATBRIDGE CLINIC.		HAMILTON CLINIC.		LARSONALL CLINIC.		MOTHERWELL CLINIC		RUTHERGLEN CLUNC		CLUSCE:	SHOTTS CLINIC		02.	WISHAW CLIND		DUIC.						
	Deps.	Ciril At	Total mediance.	Boys	GUIA	Total Attendance.	Boys.	Ciria.	Total Attendance	Beys.	0104	Total Attentions	Boys.	Cirin	Total Attendance	Doys.	Gats.	Total Attendance	Boys.	Cara	Treal Attendance	Zeys.	Gods. Attendant	. Boys.	Ciris	Total Attendance.	Beys.	Gara.	Tetal Attendance.	Beys	Galle At	Total mediance.	Beyn.	GHL.	Total Attendance
BASIS OF THE EYE- Blepharitis, Corparctivitis, Corneal Ulors, Corneal Opacities, Ophthalms and Phytereniar Coop, Kewstitis Internstrian, Herdoctom (Styel, Sezificatizm, Other Diseases,	50 6, 	4 1	1,127 71 10 10 100 111	s s s s	* *	375 24 — — — — 51 41	47 223 2 7 1	41 24 	3,596 477 7 3 160 4	37 37 16 22 4	55 3 7 2 56 1	650 61 7 19 111 117	67 6 -1 	77 16 1 1 4 1 40 	995 1114 25 15 19 3 142 ———————————————————————————————————	10 27	100 8 	1,934 159 — — 10 — 93 — 62	62 2 1 1 9	97 14 17 14 14	2,414 145 — 108 — 258 — 4	10 1 1 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1	42 80T 23 24T — — — — — — — — — — — — — — — — — — —	08 20 1 1 17 111	48 12 1 1 1 11 11 1 1	1,020 205 6 8 190 6 3	38 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	45 16 2 2 1 21 1 1 8	000 207 13 77 	15	147	304 13 	93 13 1 	29 25 	1,666 320 22
TOTAL IEANS OF TES CONTROL Impetigo Costonicos. Alopeios Arenta. Scabico. Pediculatis Capita, with Impet. Corting. Defendants upita. Defendants. Processis. Other Skin Diseases.	34 357 2	17 1 2 4 1 289 9	1,319 171 60 20 32 10 1,449 167 1,635 15 760	35 11 	5 - - 2	471 59 30 501 500 1,366 611	82 18 	80 3 3 7 4 87 52 120 1 61	215 23 23 22 61 612 90 2,139 11 873	30 1 2 18 11 35 6 6 6 33	24 	296 9 11 29 11 1,457 143 2,299 58 900	45 2 2 1 1 2 13 3 842 	21 8 -7 5 98 4 900 -232	253 86 18 22 30 577 37 3,814 2,013	200 1 2 5 5 17 818 8 68	15 3 1 12 3 401 9 135 3 75	148 100 17 50 12 1,897 100 1,037 43 785	28 2 1 8 4 32 6 206 1 39	22 2 - 3 10 172 6 120 - 20	214 31 90 16 106 1233 202 1,878 5 224	33 5 4 2 20 21 24	28 230 4 43 1 19 1 14 6 34 92 538 — 6 84 720 1 2 42 490	32 4 2 10 3 66 4		370 38 	21 -4 -4 -6 -6 225 27 97	15 5 1 51 6 123 78	100 88 — 23 1 157 46 1,174 3 1,112	3 1 9 1 1 8	11 4	18 4 32 	-	28 8 1 6 	388 80 7 90 819 77 000 1 203
FOTAL,	30 34 1 22	23 35 2 24	874 006 12 115	-	13 15	1,977 591 71 144	22 8 -4	335 12 12 12 	6,113 098 100 21	33 31 21 2	047 42 23 1 4	5,307 1,172 145 6 8	1,084 47 12 5 6	26 13 3 3	9,830 951 83 39 22 1,095	41 30 21 92	87 30 15	4,787 1,535 148 207	227 27 21 13 61	32 25 1 4	5,769 150 169 119 1008	12 5 	259 2,079 10 353 	37 23 3 15	200 19 ——————————————————————————————————	1,913 814 104 25 90	373 13 3 2 3 2 3	12 3 -3 16	2,904 280 22 4 15	21 0 1	4 1 -	130 156 8 	23 24 	219 17 36 1 8	2,41 46 18 2
TOTAL,	13		279	3 3	0	36	6 2	6 5	206 141	6 3	6	69	14 3	6	208	17	- 6	118	8	17 2	264 29	6 9	12 216 4 50	18	1	207	5 2	-	32 6	1	=	1	9 1	12	34
Total, Ringworm of Head, Ringworm of Body, Total,	13 1 5	-	279 17 23 40	6	= -	40 = -	=	1	347 1 —	-	-	165	Ξ	= -	226 	18 6 8	4 2 8	163 27 45 72	8 1 1 2		250 4 4 8	1	- 11 11 14 10e		15 	209		=	= -	-	=	1111	-3-3	=	-

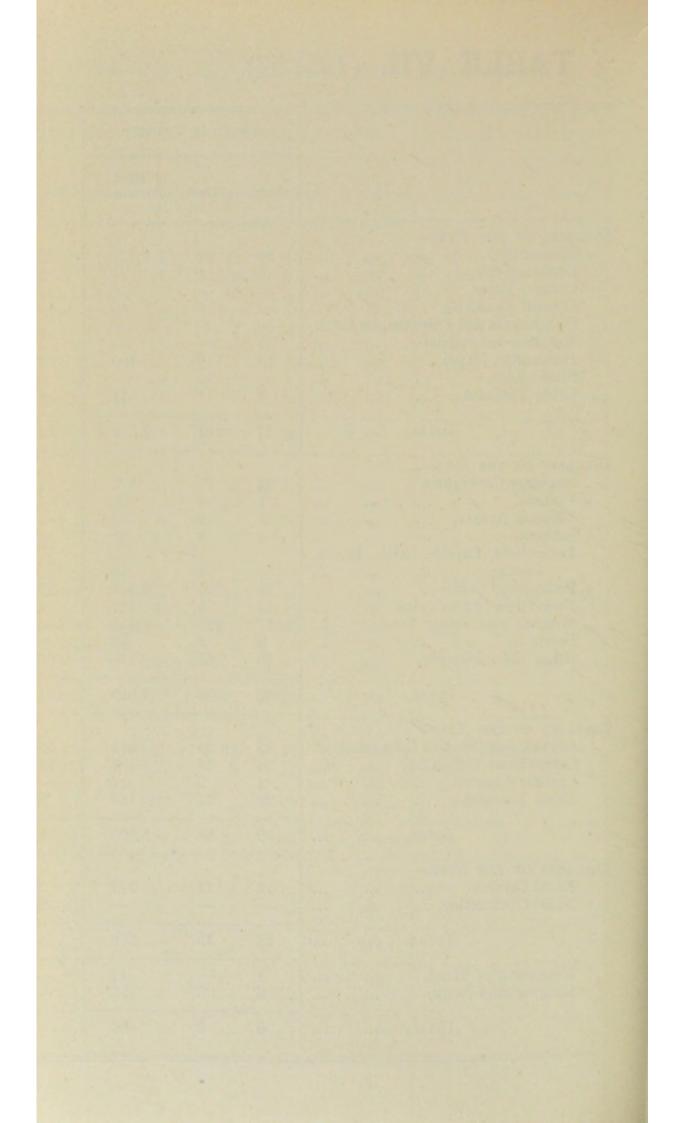


TABLE VIIa. (Supplementary), 1951-52.

MINOR AILMENTS (Treatment at Emergency Clinics).

CLINIC.	EY	E DISE	ASES.	SI	KIN DISH	EASES.	E	AR DISE	ASES.	DISEASES OF NOSE.			
		Boys.	Girls.	Attend- ances.	Boys	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.
Blackwood		22	17	202	135	103	1,149	6	9	49	8	2	40
Lesmahagow		32	27	382	215	172	2,085	16	17	62	4	2	48
Carluke		11	17	204	312	215	3,181	15	9	296	_	3	26
Carnwath		3	1	59	162	113	1,328	4	4	42	1	3	7
Lanark		4	5	70	35	48	321	10	9	55	2	1	6
Forth		3	7	208	106	97	1,501	4	4	40	_	_	10
Stonehouse		17	28	175	109	99	703	14	13	129		5	43
Strathaven		19	36	767	201	183	2,508	35	28	210	4	1	61
East Kilbride		40	39	543	436	357	2,479	15	10	112	3	2	57
Benhar		36	56	721	207	175	1,333	18	14	81	1	2	10
Mobile Clinic		7	25	306	282	273	3,184	15	15	273	_	_	10
Uddingston		8	11	169	24	40	514	_	_	_	_	3	49
Totals		202	269	3,806	2,224	1,875	20,286	152	132	1,349	23	21	317

Total number of children treated 4,898
Total number of attendances made 25,758