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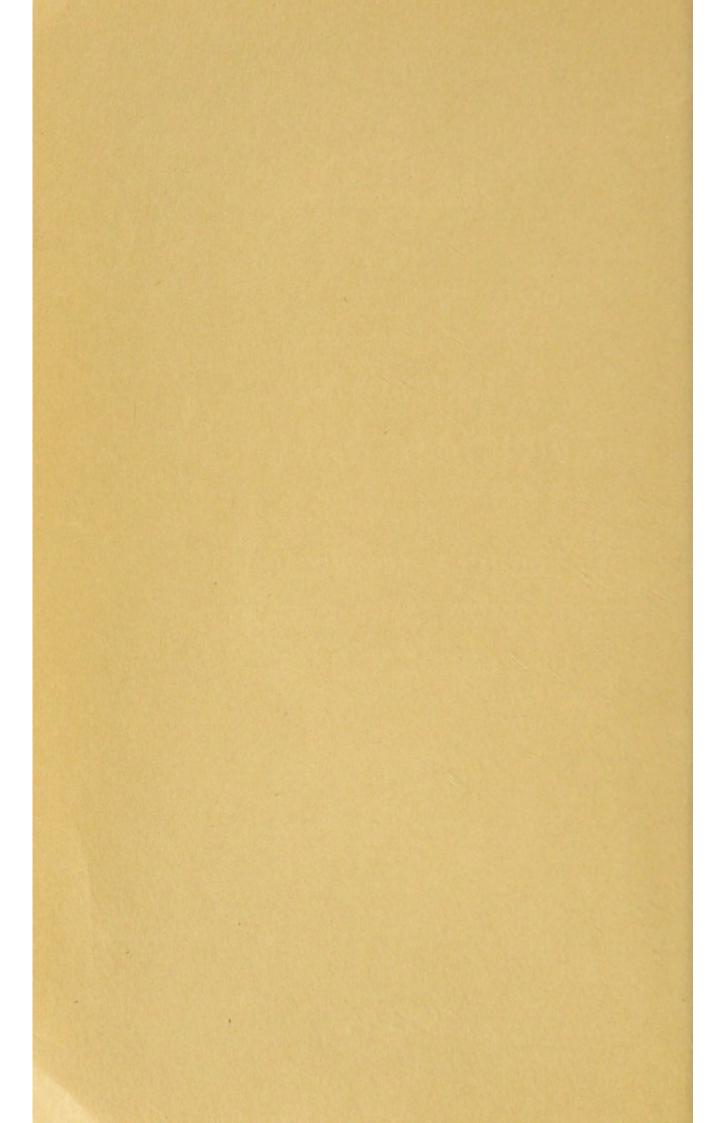
County Council of the County of Lanark EDUCATION COMMITTEE

FORTY-FIFTH ANNUAL REPORT

ON THE

MEDICAL INSPECTION, SUPERVISION, AND TREATMENT OF SCHOOL CHILDREN

1953-54



County Council of the County of Lanark EDUCATION COMMITTEE

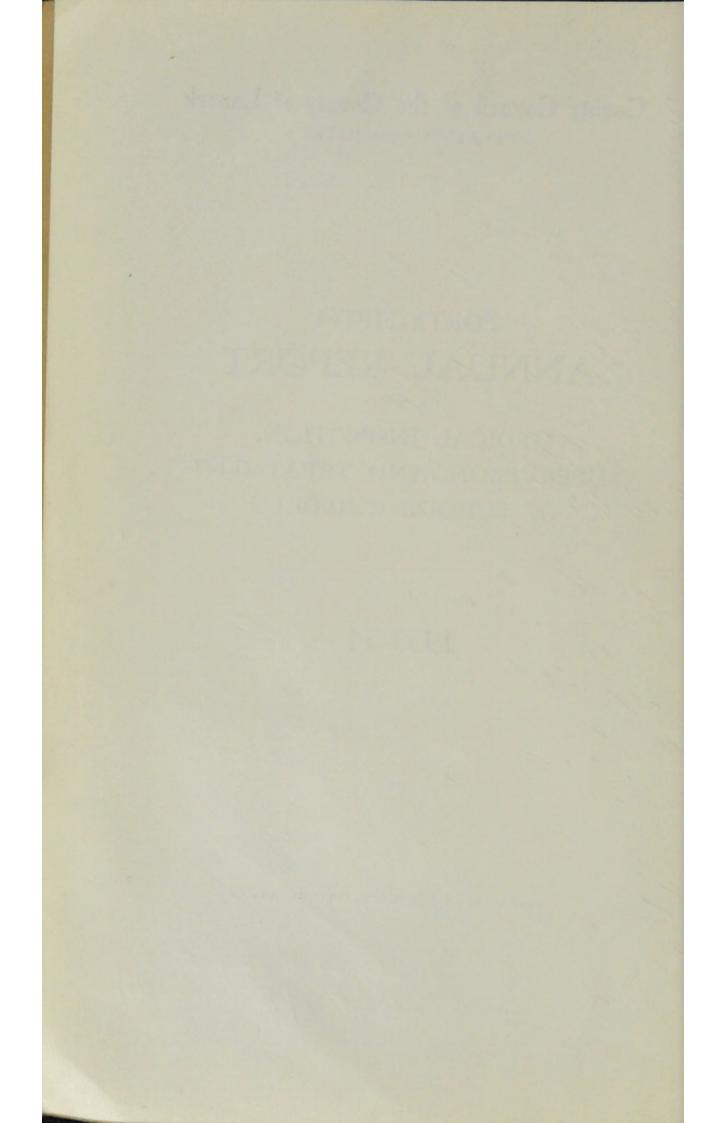
FORTY-FIFTH ANNUAL REPORT

ON THE

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1953-54

ROBERT ANDERSON & SONS, LTD., PRINTERS, GLASGOW.



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, 1954, prepared in accordance with the terms of D.H.S. Circular No. 60/1938 and amending Circulars.

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

School Medical Department, County Health Offices, Hamilton, January, 1956.

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. 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. 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.

SAMUEL GALBRAITH, M.B., Ch.B., D.O.M.S.
JAMES HILL, M.B., Ch.B., D.O.M.S.
JOHN A. MORTIMER, M.D., F.R.C.P.E.
ALFRED G. SHANKS, M.B., Ch.B., D.P.H., D.O.M.S.
(1) WILLIAM A. M. SMITH, M.B., Ch.B., D.O.M.S.

Part-time Ear, Nose and Throat Specialist.

(2) ROBERT A. GRAY, M.B., Ch.B.

Nurses.

	MARY M. BENNETT		MARY A. M'FADDEN
	JESSIE M'K. BLACK		SUSAN M'FADYEN
(3)	MARTHA CHISLETT		EMILY M'GEE
	RACHEL B. I. DOBIE		MARGARET S. M. MACKINNON
	ANNIE N. DOUGLAS		MARGARET NEILSON
	ADA FOWLIE		HELEN PARK
	JEAN L. GREEN		HELEN O. PENRICE
	MARIA HUGHES		ANN A. PRENTICE
	CATHERINE C. JOHNSTON		BERNICE SHEVLIN
	MARY W. JOHNSTON		ANNE I. SORLEY
	JANE KENNEDY	(6)	MARY STEWART
	CATHLEEN LENAGH		MARGARET C. R. SUTTER
(4)	CHRISTINA M'G. MITCHELL		MARY WALLACE
	(Temp.)		MARY L. WATSON
	EUPHEMIA MACDOUGALL		ELIZABETH WILLIAMSON
(5)	MARGARET M'FADDEN		(Temp.)
1.1			

Clerical Staff.

Chief Clerk-JOHN PORTER

MARK ALLAN MARGARET BARR MARY W. BOYD AGNES J. BROWN MARY B. GOUGH ARCHIBALD MASON MARION P. SINCLAIR RAYMOND SMITH

Dental Department Staff (see page 26).

- (1) Resigned 11/3/54
- (2) Resigned 15/3/54
- (3) Resigned 30/4/54
- (4) Resigned 16/11/53
 - (5) Commenced 10/5/54
 - (6) Resigned 24/7/54

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REPORT on the MEDICAL INSPECTION, SUPERVISION and TREATMENT of SCHOOL CHILDREN in the COUNTY OF LANARK for the year ended 31st July, 1954.

1. LIST OF STAFF.

The personnel of the medical, nursing and clerical staff is shown on page 4 of the Report. (Dental staff on page 26).

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

2. GENERAL STATISTICS.

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

(a)	Primary					 017
(b)	Junior Secondary					 217
(c)	Secondary					 13
(<i>d</i>)	Special Schools					 5
(e)	Nursery Schools					 2
(<i>f</i>)	Special Classes at	Certifi	ied Inst	titution	s	 2
(g)	Technical Colleges					 4
(h)	Agricultural Colleg	ge				 1
Pop	ulation of the area	(estin	nated, 1	1948)		 533,451
*Nu	mber of children on	the se	chool re	gisters		 94,293
Nun	nber of children in a	verag	e atten	dance		 85,405

* The figures are taken from the official return for June, 1954.

3. SANITARY CONDITION OF SCHOOLS.

An important assignment in the programme of each School Medical Officer is the School Hygiene Report. This is furnished as required under Section 20(3) of the Education (Scotland) Act, 1946, on a special record card. This record describes in each school items such as heating, lighting, condition of classrooms, lavatories, washing facilities, etc.

The reports reveal criticism of older amenities and urge reforms of various types. Details are sent to the County Architect who considers what is possible and undertakes repairs. It is impossible to say that existing defects lead to spread of disease but health education becomes difficult where general facilities for cleanliness are meagre and inadequate. Work on new schools, extensions completed since July, 1953, has been as follows :---

Stonehouse J.S. School	Additions and Adaptation.
Lesmahagow J.S. School	Lavatories, etc.
Auchengray P. School	Central Heating and Cloakroom accom- modation.
Drumclog P. School	Elect. Installation.
Cleland R.C. J.S. School	Extension.
Netherton P. School	Hot water system and improved scullery facilities.
Auchinraith Special School	Heating improvements.
Bellshill Academy (Domestic	
Science Block)	Remodelling.
Carluke J.S. School	Heating installation in H.O.R.S.A. buildings.
Kildonan J.S. School Coatbridge	Heating installation in H.O.R.S.A. buildings.
Holytown P. School	Internal alterations.
Low Blantyre P. School	Central Heating.
Quarter P. School	New Lavatories.
Auchinairn P. School	Piping of open ditch.
Strathaven Academy (Crosshill	
Annexe)	Improvements to scullery facilities.
Auchenheath P. School	Improvements to scullery facilities.
Glengowan P. School	Improvements to scullery facilities.
Glenboig R.C. P. School	Improvements to scullery facilities.
New Stevenston J.S. School	Reconstruction of hut for School Meals Service.
Stonehouse J.S. School	Adaptation of hut for School Meals Service.
Cleland J.S. School	Lavatories and Hot and Cold Water installation.
Viewpark R.C. School	Extension.
Walston P. School and School-	
house	Alterations.
Carstairs Jct. J.S. School	Adaptations and alterations.

4. ORGANISATION AND ADMINISTRATION.

A. SYSTEM AND EXTENT OF MEDICAL INSPECTION AND TREATMENT.

Systematic examinations remain the basic source of our information regarding the health of the school child. He is asked to present himself for examination at the age of 5, 9, 13 and 16 years. This year, therefore, those examined were children born in :—

1948.	
1944.	
1940.	
1937.	
1946-Vision and he	earing only.
	0

That routine medical examination is still necessary is shown by the fact that 54 per cent of all school entrants examined during the year had defects of one type or another. Many are speedily remediable, but could develop if not treated and followed up.

Supplementary classroom inspection is now a regular feature which follows the school doctor's routine examination. Teachers are thus able to bring to the notice of the physician any child not included in the scheduled examination, for special overhaul.

Parents regularly accompany the entrant child but interest appears to have waned by the time the later examinations are carried out.

Numerous special examinations, e.g. pre-apprenticeship, school attendance, Remand Home, come within our remit and will be detailed later.

Treatment of minor ailments appears not to have changed with the coming of the National Health Service. Attendances at such clinics during the year numbered 81,201.

Special school visits to undertake immunisation for diphtheria were made.

Children suffering from serious conditions, such as epilepsy, anaemia, rheumatism, orthopaedic defects, etc., received their treatment through family doctor, Consultant or Hospital.

B. SYSTEM AND EXTENT OF DENTAL INSPECTION AND TREATMENT.

The report of the Chief Dental Officer appears in Section 7, page 27.

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

School Nursing arrangements remain as described in my last report.

D. CO-ORDINATION WITH PUBLIC HEALTH SERVICES.

Links grow with County and Burgh Public Health Services and add greatly to an effective contribution to the Community, and I think theirs.

Co-operation includes the following :--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.

Recent growth of certain voluntary agencies reveals fields in which they work along parallel lines with us and we are particularly grateful for the work of the R.S.P.C.C., the Red Cross Society and the St. Andrew's Ambulance Association.

F. CO-OPERATION WITH TEACHERS AND PARENTS.

Team work with parents and teachers is essential if the work of the School Health Service is to issue in improvement of health among pupils.

On visiting school, the Head Teacher is contacted and the Medical Officer discusses with him, the routine procedure of the medical inspection. During the progress of the inspection, Headmaster and teachers frequently look in to discuss individual pupils, or other health matters with the visiting doctor.

As has been said on previous occasions, parents attend more regularly with entrant children than with those in the older age groups.

Parent-Teacher Associations are now requesting more frequently, the services of medical staff for their meetings and these occasions give rise to valuable opportunities for discussion of health problems.

5. FINDINGS OF MEDICAL INSPECTION.

Table I(A) provides details of the numbers of children examined in the various age groups. These numbered in all 28,364, and their school health record reveals the findings, which are detailed in the following pages.

Table I(B) gives the number of special (non-routine) cases examined at school (11,047) and those re-examined by the doctors at their subsequent visits. From this Table also, it will be seen that 4,752 pupils were notified to their parents as suffering from conditions requiring treatment.

These conditions are shown in Table II where each age group is noted separately.

The following Table shows the average heights and weights of school children in the County and gives satisfactory evidence of maintained standards :—

AVERAGE HEIGHT IN INCHES.

AGE	$5\frac{1}{2}$		91		131		$16\frac{3}{4}$		
		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		43.42	43.0	52.33	51.66	60.32	60.21	68.51	64.19

AVERAGE WEIGHT IN LBS.

Age	$5\frac{1}{2}$		91		131		16_{4}^{3}	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Anthropometric Committee's								
Standard	 40.5	40.0	64.9	59.3	82.6	87.0	119.0	112.7
County of Lanark	 45.23	41.39	66.50	63.79	97.21	101.02	140.82	119.87

Condition of Clothing.—The number of children found at routine inspection who had defective clothing was 360 boys and 354 girls, a total of 714 or a percentage of 2.52.

Number of children examined						 28,364	
Number with	defectiv	e cloth	ing			 714	
Percentage						 2.52	
Percentage las	st year					 2.88	
Number of sp	ecial cas	es four	nd defe	ctive		 179	

Footgear unsatisfactory.—The condition of the footgear showed a similar figure to that of last year. 75 boys and 30 girls, a total of 105, were recorded as having defective footwear.

Number of children exa	mined			 	28,364
Number with defective	footw	ear		 	105
Percentage				 	0.37
Percentage last year				 	0.41
Number of special cases	found	l defe	ctive	 	20

Uncleanliness of Head.—This is divided into three categories—nits present, lice present and simple dirtiness. The total of these three groups was 2,242; 435 boys and 1,807 girls, or a percentage of 7.99. This figure is a decrease on 9.1 in the previous year.

Details of each group are as follows :---

Number of children examined. 28,364	Number with Nits. 2,092	Percentage. 7-47	Percentage last year. 8·61	Special Cases. 659
28,364	Lice present. 131 Dirty	0.46	0.41	87
28,364	only. 19	0-07	0.07	7

Uncleanliness of Body.—This is divided also into three groups as in Uncleanliness of Head, i.e., nits present, lice present and simple dirtiness. 186 boys and 99 girls were recorded, a total of 285 or .998 per cent.

Number of children examined. 28,364	Number with Nits. 1	Percentage. 0.003	Percentage last year. 0.02	Special Cases.
28,364	Lice present. 2	0.007	0.02	1
28,364	Dirty only. 282	0.99	1.09	43

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 342; 204 boys and 138 girls, a percentage of 1.2. They are classified as (1) Ringworm, (2) Impetigo and (3) Other diseases.

1)	Number of children exam	nined			 28,364
	Number with Ringworm	of the	e head		 1
	Percentage			***	 0.003
	Percentage last year				 0.014
	Special cases found affect	ted			 1

The total number affected (2) compares favourably with 6 in the previous year.

(2)	Number of children examined				28,364
	Number with Impetigo (head)				90
	Percentage				0.31
	Percentage last year				0.24
	Special cases found affected				58
These	figures show an increase in In	netigo	The	total	of 148

These figures show an increase in Impetigo. The total of 1 compares with 113 in the year previous.

(3) Other diseases of Head include all other diseases of the head except Ringworm and Impetigo.

Number of children exami	ned	 	 28,364
Number found affected		 	 251
Percentage		 	 0.88
Percentage last year		 	 0.65
Special cases affected		 	 66

Diseases of the Skin of the Body.—These diseases are classified into Ringworm, Impetigo, Scabies and Other diseases. The total number affected was 1,036: boys 593, girls 443, or a percentage of 3.64.

Number affected with Ringworm. 4	Number of children examined. 28,364	Percentage. 0-014	Percentage last year. 0.03	Special Cases.
Number affected with Impetigo. 102	28,364	0.36	0.16	75
Number affected with Scabies. 12	28.364	0.042	0.08	10
Number with Other Diseases. 918	28,364	3.23	3.06	287

These figures show a decrease in Ringworm, a total of 6 cases as against 15 in the previous year. Scabies continues to show a decline, 22 cases being recorded as against 29 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 slightly more than those of last year (1,205 this year; 1,125 last year). Malnutrition.—This subject is of special public interest and is generally defined under two degrees (1) Slight and (2) Bad. During the past year those recorded under (1) numbered 272, a figure which keeps falling. The number recorded suffering from more definite symptoms was 8, giving a total number under the general heading of malnutrition of 280, or a percentage of \cdot 99, as compared with a percentage of 1.34 in the previous year. The number of children recorded for slight malnutrition was 272 or a percentage of \cdot 96 as compared with 366 and a percentage of 1.28 in the previous year. Those suffering from more marked malnutrition numbered 8, a percentage of \cdot 03 as compared with 18 and \cdot 06 in the past year.

Details are given below :---

Number of children examined. 28,364	Number found suffering from slight malnutrition. 272	Percentage. 0.96	Percentage last year. 1.28	Special Cases. 3
	Number with malnutrition.			
28,364	8	0.03	0.06	4

The balanced school meal and the provision of school milk have undoubtedly played a part in the virtual elimination of malnutrition, but it is still in our view advisable for this aspect to be kept in mind during school medical examinations.

Oral Sepsis.—133 boys and 141 girls, or a percentage of 0.97, were recorded as suffering from septic conditions of the mouth.

Number of children	examine	 	 28,364	
Number affected			 	 274
Percentage			 	 0.97
Percentage last year			 	 1.098
Special cases			 	 15

Diseases of the Naso-Pharynx.—These include diseases of the Nose—totalling 1,934; boys 1,055, girls 879, or a percentage of 6.81, Diseases of the Throat—total 4,593; boys 2,281, girls 2,312, or a percentage of 15.84, and Diseases of Glands—total 1,899; boys 1,022, girls 877, or 6.69 per cent. The total number of all three

categories was 8,426 or 29-33. Below is a tabular statement :---

Conditions.		Number found d. defective.	Percentage.	Percentage last year.	Special Cases.
Nasal conditions f		1,211	4.26	3.48	26
For treatment (Adenoids)	28,364	289	1.02	1.27	67
Other conditions Nose	of 28,364	434	1.53	1.96	68
Tonsils for observ tion	a- 28,364	3,308	11.31	12.99	67
Tonsils for treatme	ent 28,364	1,285	4.53	4.31	239
Glands for observ	a- 28,364	1,871	6.59	5.88	18
Glands for treatme	nt 28,364	28	0.098	0.105	8

External Eye Diseases.—These include Blepharitis, Conjuntivitis, Corneal Opacities, Squints and Other diseases of the external eye. The total number affected was 1,524; boys 808, girls 716, or a percentage of 5.36. Details are given below :—

Condition.	Number of children examined.	Number found affected.	Percentag	Percentage e. last year.	Special Cases.
Blepharitis	 28,364	648	2.28	2.38	159
Conjunctivitis	 28,364	115	0.40	0.55	57
Corneal Opacities	28,364	7	0.024	0.07	2
Squints	 28,364	644	-2-27	2.51	104
Other Diseases	 28,364	110	0.39	0.46	63

Visual Acuity.—This 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 847, girls 990 with a total of 1,837 or 10.36 per cent.

Visual Acuity.	Number of children examined.	found	Percentage.	Percentage last year.	Special Cases.
6/9 or 6/12 in better eye	*17,761	1,498	8.45	8.415	194
6/18 or worse in better eye	17,761	339	1.91	2.061	101

*Infant and 7-year-old children not included.

The number of children recommended for treatment of errors of refraction was 1,002 or 5.64 per cent, as compared with 6.13 per cent last year.

Ear Diseases.—Ear diseases are of two categories—(1) Otorrhoea, (2) Other diseases of Ear. The total number recorded was 784 or a percentage of 2.76. Details are as follows :—

Condition.		Number of children examined.	found	Percentage.	Percentage last year.	Special Cases,
Otorrhoea		28,364	196	0.69	0.86	95
Other diseases Ears	of 	28,364	588	2.07	1.84	129

Defective Hearing.—Hearing deficiency 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 (deaf-mutism, etc.). These children require education in special schools for the deaf. The total number of children in the four groups was 417; 224 boys and 193 girls, or 1.45 per cent. Details are given as follows :—

Number of children examined.	Hearing Group.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
*28,364	I	280	0-98	1.0	71
*28,364	IIA	131	0.46	0.59	46
*28,364	IIB	5	0.017	0*01	5
*28,364	III	1	0.0035	_	-

*7-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 338, of whom 246 were boys and 92 were girls. The percentage of defects was 1.18.

Condition of Speech.	Number children examined.	Number found defective.	Percentage.	Percentage last year.	Special Cases.
Defective Articulation	 28,364	277	0.97	0.78	69
Stammering	 28,364	61	0.21	0.199	19

Mental and Nervous Conditions.—Such conditions include 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 children in these groups was 421 or a percentage of 1.48, of whom 256 were boys and 165 were girls.

A detailed statement appears below :---

Condition.		Number of children examined.	Number found defective.	Percentage.	Percentage last year.	Special Cases.
Backwardness		28,364	156	0.55	0.51	23
Dullness	+++	28.364	122	0.34	0.54	15
M.D. educable		28,364	42	0.15	0.17	13
M.D. ineducable		28.364	1	0.1135	0.017	1
Nervous or unstable		28,364	80	0.28	0.24	12
Behaviour difficult		28,364	20	0.069	0.09	2

Heart Diseases.—Cardiac defects are of three kinds—Congenital, Acquired and Functional. The total number of children affected was 548; 275 boys and 273 girls, a percentage of 1.93. 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		28,364	57	0.2	0.23	10	
Acquired Heart		28,364	140	0.49	0.56	20	
Functional Heart		28,364	351	1.24	1.36	14	

Lung Diseases.—This group includes Chronic Bronchitis, Suspected Tuberculosis of Lungs and Other diseases of Lungs. The total number of children affected was 982, a percentage of 3.45; 2 599 were boys and 383 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	28,364	79	0.28	0.18	2
Suspected tuberculosis	28,364	32	0.113	0.09	8
Other diseases of lungs	28,364	871	3.055	3.27	47

Deformities.—These 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 430, a percentage of 1.82. Of these 248 were boys and 182 were girls.

Condition.	Number of children examined.	Number found affected.	Percentage.	Percentage last year.	Special Cases.
Congenital deformities	28,364	107	0.37	0.38	12
Acquired deformities due to Infantile Paralysis	28,364	33	0.115	0.14	-
Probable Rickets	28.364	140	0.49	0.76	
Other causes	28,364	150	0.53	0-61	19

Children born in 1946, 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 5,016 boys and 4,722 girls, a total of 9,738. Of these 177 had squints, 1,109 had fair vision, and 161 bad vision. The number recommended for examination for errors of refraction was 804.

Number of children examined	Defect.	Number found affected.	Percentage.
9,738	Squint	177	1.82
9,738	Fair Vision	1,109	11.39
9,738	Bad vision	161	1.65

24

Details of the 1946 group of children examined for hearing defects are as follows :---

The number of children examined was 9,738. Of these 307 were found to have defects of hearing of varying degree. 213 had Grade I hearing; 92 Grade IIA. There were 2 in Grade IIB and None in Grade III. Details are as follows :—

Number of children examined.	Grade of defect.	Number found affected.	
9,738	Grade I	213	2.19
9,738	Grade IIA	92	0.94
9,738	Grade IIB	2	0.02
9,738	Grade III		-

Infectious Diseases.—Only 9 Routine and 6 Special cases suffering from infectious disease were discovered in schools during the year.

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 673. Special cases with similar diseases totalled 212. The more important of these conditions are recorded below :—

Anaemia 172; enuresis 145; rheumatism 26; obesity 135; debility 41; goitre 7; hernia 21; gastro-intestinal 20; fractures and sprains 17; coeliac disease 3; chorea 13; laryngitis, tonsillitis and tracheitis 8; intestinal worms 7; hydrocele and varicocele 4; tumours 13; nephritis 3; diabetes 1; hypothyroidism 5; albinism 1; vaginitis 1; migraine 2; Bell's palsy 2; periostitis 1; Hydronephrosis 1; osteomyelitis 1; Perthe's disease 1; muscular dystrophy 1; Hirschprung's disease 1.

EXAMINATIONS CONDUCTED BY THE SCHOOL MEDICAL STAFF OTHER THAN ROUTINE SCHOOL EXAMINATIONS.

Such examinations are many and varied, ranging from minor details to exhaustive medical overhauls. Interviews, home visits, special reports and consultations are required to provide the necessary information or opinion. Requests for opinion come to us from the Director of Education, Area Sub-Committee Clerks, Child Guidance Service, Headmasters, Remand Home, Probation Officers, Hospital Almoners, Parents, Children's Officer, etc., etc.

The following outlines types of cases dealt with :---

- (a) Examination of absentees from schools and irregular attenders. They totalled 1,637.
- (b) Examination of physically and mentally invalid children in attendance at the four special schools. They numbered 1,051.
- (c) Examinations of invalid children for admission to day special schools. The numbers were—Physically Invalid 56; Mentally Invalid 105.
- (d) Children employed under the Employment of Children Act. They numbered 963. The chief employments engaged in are delivery of papers 447; messages 277; milk and rolls 239.
- (e) Children examined under the Children and Young Persons Act. The majority of these cases were examined at the Remand Home—179.
- (f) Students in preliminary training as teachers totalled—Nil.
- (g) Examinations for admission to the holiday camps and Residential Schools—3,069.
- (h) Examination of deaf-mute children-8.
- (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 was 102.
- (k) Special examinations of children at the Minor Ailments Clinics—2,003.
- (l) Immunisation of school children-12,154.
- (m) Examination of mentally defective children suspected of being ineducable. These totalled 32, of whom 11 were found to be definitely ineducable, and were reported to the General Board of Control.

(n) Youth Employment Service-5,494.

(o) Dental cases requiring a general anaesthetic-609.

6. MEDICAL TREATMENT.

A. MINOR AILMENTS TREATMENT.

Our treatment services are still in very considerable demand, and in the limited field of minor conditions in which they operate, we consider they serve a need which is not at present supplied by any other medical service.

Treatment clinics are twelve in number while there are also in the County area eleven subsidiary clinics. A mobile clinic serves many of the isolated rural schools.

The total number of children treated at the main clinics was 11,734 and the number of attendances was 59,308. At the subsidiary clinics the number treated was 5,186 and involved 21,893 attendances.

The total for all clinics was 16,920 with 81,201 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 1,865 and attendances made 12,494.
- (2) Skin conditions treated 8,613 and attendances made 38,359.
- (3) Ear diseases treated 1,088 and attendances made 7,093.
- (4) Nasal conditions treated 174 and attendances made 1,362.

Cleansing of children suffering from verminous conditions is carried out at all the clinics. During the past year 1,849 children were cleansed, of these 332 were boys and 1,517 were girls. In the special schools a nurse is in daily attendance to treat minor ailments. The total number of treatments given was 44,290.

At the Minor Ailments Clinics other examinations than those mentioned above are carried out. These examinations totalled 2,003 during the past year.

A tabular statement of the clinics, children treated and attendances made is given below :---

Clin	vic.	Medical Office	r.	Children treated.	Attendances, made.
Airdrie		 Dr. Hood		1,209	6,021
Baillieston		 Dr. Hood		1,148	5,194
Bellshill		 Dr. Perry		737	3,355
Blantyre		 Dr. Perry		1,104	5,795
Cambuslang		 Dr. Cunningham		2,383	9,769
Coatbridge		 Dr. Pollock		1,593	7,737
Hamilton		 Dr. Douglas		898	6,730
Larkhall		 Dr. Douglas		551	2,530
Motherwell		 Dr. Prentice		583	3,662
Rutherglen		 Dr. Cunningham		796	3,630
*Shotts		 Dr. Livingstone		60	624
Wishaw		 Dr. Bruce		672	4,261
		Totals		11,734	59,308

ESTABLISHED CLINICS.

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

	C	linic.			Children treated.	Attendances made,
Uddingston			 		 77	322
Blackwood			 		 431	1,368
Lesmahagow			 		 609	1,789
Carluke			 		 605	3,764
Carnwath			 		 395	1,720
Lanark			 		 123	578
Forth			 		 144	1,666
Stonehouse			 		 697	1,392
Strathaven			 		 236	1,705
East Kilbrid	e		 		 819	3,333
Benhar			 		 325	1,301
Mobile Clinic			 		 725	2,956
				Totals	 5,186	21,893

SUBSIDIARY CLINICS.

B. DEFECTIVE VISION AND SQUINT.

Our Ophthalmic Surgeons continued during the year to deal very satisfactorily with the considerable list of cases submitted to them. Waiting time for new cases and the interval between examination and provision of spectacles are now reduced to normal.

We have twenty-eight visual clinics in the County.

Classroom inspections, added to routine medical inspection, bring up defects in the non-routine age groups and so the ophthalmic waiting list covers all pupils attending County schools.

The total number of children examined by the Ophthalmic Surgeons during the past year was 3,999 and 6,837 re-inspections of children previously tested were made.

The number of spectacles prescribed was 3,164, and 835 children were otherwise treated.

Other eye conditions noted :---

Squint (convergent) 513; squint (divergent) 34; squint (alternating) 73; corneal nebulae and opacities 30; corneal ulcers 5; blepharitis and conjunctivitis 19; phlyctenular conjunctivitis and keratitis—Nil; choroido-retinal changes (Myopia) 9; choroidoretinal changes (non-myopic) 14; nystagmus 16; optic atrophy 9; cataract 9; ptosis 3; aphakia 4; coloboma of lens 1; epicanthus 1; vitrious opacities 2; detached retina 1; phthisis bulbi 1.

C. NOSE AND THROAT OPERATIVE TREATMENT.

Our Medical Officers give special attention to ear, nose and throat conditions. Infected tonsils and enlarged tonsillar glands are reported to the Ear, Nose and Throat Surgeon who decides whether operative treatment is necessary. Our operation lists were left steadily, as in the previous year, at a low level.

The number of children operated on at the various centres is tabulated below :---

CLELAND HOSPITAL.

Number operated on for tonsils and	adenoids	 306
Number treated for ear conditions		 5



24	
Number treated for nasal conditions	17
Number examined and advised no operation needed	26
CARNEGIE HEALTH INSTITUTE, MOTHERWELL.	
Number operated on for tonsils and adenoids	148
Number of attendances made by patients	306
LADY HOME HOSPITAL, DOUGLAS.	
(Dr. Brown Kelly).	
Number operated on for tonsils and adenoids	39
LAW HOSPITAL, CARLUKE.	
(Dr. Brown Kelly).	
Number operated on for tonsils and adenoids	889

AUDIOMETRIC TESTING.

Audiometric testing continues to be carried out as in former years, and a summary of results follows :---

SUMMARY OF RESULTS OF AUDIOMETRIC TESTS.

ci	No. of hildren listed.	childre	en	. Defecti	Grade ive. I	Grade IIA	
Children born 1945	3,124	2,937	79·503% 2,335	20-497% 602	18·113% 532	2·213% 65	·170%
Children for whom an opinion was asked	520	468			33.547% 2 157		$\cdot 231\%$ 1
Retest of children show ing defects at pre- vious test		295	25-081% 74		35.059% 105		1%

D. ORTHOPAEDIC SCHEME.

In the course of their school visits, Medical Officers regularly report defects which require specialist orthopaedic opinion. These cases are duly sent for examination to surgeons at Stonehouse, Strathclyde, Hairmyres and Law Hospitals.

Orthopaedic Sisters give after-care.

In the hospitals where such children have to spend varying periods of time, children are given tuition by specially trained teachers.

There were 1,553 New Cases and 4,696 Revisits.

7. DENTAL INSPECTION AND TREATMENT.

STAFF.

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

Assistant Dental Officers.

- (a) ANDREW C. F. RANKIN, L.D.S. Mrs. MARY H. OWENS, L.D.S.
 (b) ARCHIBALD HAY, L.D.S. Miss MARGARET MACDONALD, L.D.S. GORDON M'INTYRE, L.D.S. GEORGE REID, L.D.S. ALEXANDER WESTWOOD, L.D.S. ALLEAARDER WESTWOOD, L.D.S.
 WILLIAM A. THAIN, L.D.S.
 MARTYN L. H. DAVIES, L.D.S.
 (c) Mrs. MARY M. SPRACKLAN, B.D.S.
 (d) Miss MARGARET M'LACHLAN, L.D.S.
 (e) Mrs. A. P. THOM, L.D.S.
 (f) Mrs. WHAN CONTROL OF A DAMAGED AND A DAMAGED AND

- (f) Miss WILMA S. PRINGLE, L.D.S.

Dental Attendants.

MARY GOLD (g) MARGARET JAMES

- NELLIE WARDROPE JESSIE BALLOCH (h) MARGARET DICK CATHERINE WALLACE JANET ESPIE
- ANNE ANDERSON JEAN BUCHANAN MARY M'LAUGHLIN Mrs. LILY A. M'KNIGHT VIOLET H. B. BAXTER (k) ELSPETH CAMERON (1) ZITA BIGGINS
- (m) JANET CABLE

Dental Technicians.

Senior Technician in Charge—HENRY DICK Senior Technician—ROBERT F. NEIL (n) Technician-WILLIAM C. A. PARIS (0)

Clerical Staff.

GEORGE M'LELLAN HELEN STEVEN

ETTA HARDIE

MARGARET CLARK

- (a) Died 4/11/53 (b) Resigned 31/7/54
- (c) Appointed 16/10/53 as Miss M. Bennie—married 5/3/54
- (d) Appointed 1/12/53
- (e) Appointed 21/12/53 (f) Appointed 1/1/54
- (g) Resigned 16/9/53

- (h) Resigned 31/5/54
- (i) Appointed 16/9/53
- (*j*) Appointed 16/3/35 (*k*) Appointed 16/11/53 (*l*) Appointed 16/11/53

- (m) Appointed 1/6/54 (n) Appointed 19/10/53
- (o) Apprenticeship completed 19/6/54

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, 1954.

Consequent to the Authorisation in July, 1953, of an additional three Assistant Dental Officers, thus raising the establishment to twelve Assistants, the following appointments were made:— Miss Mary M. Bennie B.D.S., on 16th October, 1953, Mrs. Agnes P. Thom, L.D.S., on 21st December, 1953, and Miss Wilma S. Pringle, L.D.S., on 1st January, 1954. Three additional Dental Attendants were also appointed to assist these officers. To meet the demand in the Dental Laboratory authority was given to appoint a senior grade Dental Technician and Robert F. Neil filled the vacancy. Mr. Archibald Hay, L.D.S. has resigned as from 31st July, 1954, following his appointment as Chief Dental Officer to the City of Aberdeen.

It is with regret that I have to report the death of Mr. Andrew C. F. Rankin, L.D.S., the Senior Assistant Dental Officer, on 4th November, 1953. Mr. Rankin was first appointed as a School Dental Officer in November, 1919, and his death has brought to an end a period of 34 years continuous service with this Authority. He was employed principally in Hamilton Burgh, Larkhall, and the surrounding area where his work was much appreciated, and where his personality made him a very popular and respected figure. Miss Margaret M'Lachlan, L.D.S., was appointed as his successor on 1st December, 1953.

Illness among the officers resulted in a loss of 121 working days or 222 sessions and, National Service for Mr. A. Westwood, L.D.S., another 12 days or 22 sessions.

Nos. 4 and 5 self-propelled Mobile Dental Units were delivered during May, 1954, and are now operating satisfactorily in their respective areas. New clinics were also equipped in the Medical Rooms at Stane Primary School, Shotts, and Bishopbriggs Higher Grade School:

In former years the figures for the supply of dentures to school children, orthondontic treatment, X-rays, etc., were incorporated in the County Medical Officer's Report at the end of each calendar year but, as from 1st January, 1954, they have been transferred to this report. Table Va (Supplementary) at the end of this volume has been introduced for the purpose and gives the figures for the six months ending June, 1954.

Dental Inspection and Treatment of Expectant and Nursing Mothers and Pre-School Children continues and on 1st May a scheme was started to set aside one session per month for inspection of these patients at each of the twenty Child Welfare Centres. The response has generally been very good and the provision of the necessary treatment involved has taken up a considerable amount of the Dental Officers' time. Details of the work carried out will be given in the Dental Section of the County Medical Officer's next Annual Report.

It should be noted that, while the actual strength of Assistant Dental Officers is 12, the effective strength during the year is equivalent to only $10\frac{1}{2}$ full-time officers. The number of school children inspected during the year, namely 40,853, is in proportion the same as last year, but is still less than half the total school population. The percentage of children requiring treatment has increased from 73 to 81.8, and this indicates too long an interval between inspections. With the acceptance rate remaining almost unchanged, this increased percentage has caused the Inspection/Treatment session ratio to rise from 1/9.7 last year to 1/10.7 this year.

Our constant aim is still the preservation of teeth and this year the figures show another step in the right direction, fillings being proportionately higher and extractions lower than last year.

With the increased establishment of Assistant Dental Officers, the use of dual, and in some cases triple purpose rooms, is becoming an ever increasing problem involving the School Medical, Ophthalmic, Child Guidance and Dental Services. This difficulty affects my staff most because, when an officer is operating in an area, he requires the use of the fixed dental equipment every day and, although a close liaison is maintained with the other services, many instances do occur where, to accommodate his medical colleagues, the Dental Officer has to do additional school inspection, or be transferred to another area. In either case there is undue delay between the dental inspection and treatment of the children. Occasionally, however, these alternatives are impossible, and the position becomes more serious. To add to these difficulties in some areas, the treatment of Expectant and Nursing Mothers involves considerable travelling to the nearest M. & C. W. Dental Clinic. This is undesirable and unless local facilities are made available, those mothers are virtually excluded from our priority scheme. The solution to the overall problem of accommodation would appear to be either :

(a) The abolition of dual purpose rooms in school clinics and the treatment of mothers in school clinics or

(b) The provision of combined M. & C. W. and Education treatment facilities outwith school buildings.

As mentioned earlier, there is still far too long a period between the inspection and treatment of school children. During the treatment sessions we find that numerous children, whose parents had previously signed "Perpetual Consent", do not keep their appointments for the simple reason that in the long interval they have been treated by a Private Practitioner. Letters are also received frequently from parents complaining that treatment is not being offered to their children often enough, and asking that their previous consent be cancelled to allow the children to be treated privately as required.

With the school population at 94,000 and considering all the facts above mentioned, I feel that it is absolutely essential to increase the staff considerably and would suggest as a first step a further six appointments as soon as possible to provide a better and more regular service to the children and other priorities in the County. I give below a statement of the items of importance and Tables V and Va at the end of the Senior Assistant School Medical Officer's Report show the full details of the work carried out by the staff :—

Number of children inspected 40,853 Number of children notified as being in need of dental

treatment 17,086 16,350	boys girls	}	33,436
Percentage of children requiring treatment			81.8
Number of children accepting treatment			14,488
Number of children treated			9,928
Number of attendances made for treatment			26,348

Treatment.		Temporary Teeth.	Permanen Teeth.	t Total.
Extractions		9,869	2,682	12,551
Fillings, amalgam		1,434	10,171	11,605
Fillings, cement		1,171	1,154	2,325
Other treatment (Scalings, etc.)		2,106	7,205	9,311
Number of sessions	spent	on inspection		386
Number of sessions	-			4.1261

The undernoted Table and Table Va (supplementary) show the work carried out by each officer :---

Dental Officer.		No. of Children treated.	Extractions (temporary teeth.)	Extractions (Permanent) teeth.)	Fillings, Amalgam or Cement.	Other Treatments.	General Anaesthetics.
Mr. Gibson		20	65	37	3	3	16
Mr. Rankin		110	67	26	125	11	6
Mrs. Owens	***	701	963	266	1,431	157	109
Mr. Hay		982	843	185	1,239	1,021	6
Miss M'Donald		716	1,378	295	386	399	114
Mr. M'Intyre		881	539	246	1,372	929	15
Mr. Reid		1,044	1,112	324	1,410	616	_
Mr. Westwood		907	809	297	1,212	1,294	58
Mr. Thain		1,339	1,050	233	2,075	1,180	-
Mr. Davies		981	1,255	197	1,572	923	129
Mrs. Spracklan		861	693	311	1,010	759	99
Miss M'Lachlan		416	469	75	688	721	57
Mrs. Thom		628	413	81	576	659	-
Miss Pringle		342	213	109	831	639	-
Totals		9,928	9,869	2,682	13,930	9,311	609

WILLIAM GIBSON, Chief Dental Officer.

DENTAL DEPARTMENT,

13 CLYDESDALE STREET, HAMILTON.

August, 1954.

8. SPECIAL SCHOOLS AND CLASSES.

The handicapped child receives a considerable and increasing degree of attention. From the educational and medical points of view such children—physically handicapped and mentally handicapped—receive attention in four special schools with clinics attached and one occupational centre. These schools are :---

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

Motor buses take children from scheduled stopping places at or near their homes to school every morning and take them home in the late afternoon.

School meals are provided. A school nurse holds a daily minor ailments clinic, while a school medical officer visits the school once a month and keeps detailed records of the health of each child.

Physically handicapped children are specially examined every six months for transfer, if fit, to an ordinary school. Mentally retarded children are seen at more infrequent intervals regarding possible transfer, as naturally most of these require the statutory period of education in a special school till the age of 16.

The Occupational Centre is in much demand. This receives pupils who are not fit for scholastic education, but who are trainable. There is no doubt that an increased number of this type of school is required.

Provision is also made for other classes of handicap as follows :---

Deaf and partially deaf scholars attend Auchinraith School for the Deaf. Other deaf children who live too far away to attend the Day School, 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.

Blind pupils receive their education chiefly at the Royal School for the Blind, Craigmillar Park, Edinburgh, and at St. Vincent's School for the Blind, Tollcross. Myopic pupils, of course, are treated in special classes with physically handicapped pupils. The total number is 28.

Cripples, i.e. children with very severe orthopaedic defect, receive medical care and education at East Park Home.

Bridge of Weir Epileptic Colony receives Protestant epileptic children who are educable and cannot, by reason of their infirmity, be educated at an ordinary or special school.

Children cared for and educated in special schools are as follows:---

PHYSICALLY INVALID CHILDREN.

Castlecraig Residential School, Blyth Bridge, West	
Linton, Peeblesshire	17
East Park Homes for Infirm Children, (Largs and	
Glasgow)	17
The Colony for Epileptics, Bridge of Weir	5
The Trefoil Residential School, Hermiston, Currie	3
Westerlea School for Spastics, Edinburgh	2
MENTALLY INVALID CHILDREN.	
Birkwood Certified Institution, Lesmahagow	8
Garvald Rudolph Steiner School, Dolphinton, West	0
Linton	1
Lennox Castle Certified Institution, Lennoxtown	3
St. Charles' Certified Institution, Carstairs	3
or charles octaned institution, carstans	
DEAF-MUTE AND EDUCATIONALLY DEAF CHILDREN.	
St. Vincent's School for the Deaf, Tollcross	21
The Royal Deaf and Dumb Institution, Edinburgh	8
BLIND OR EDUCATIONALLY BLIND CHILDREN.	
St. Vincent's Special School, Tollcross (Blind)	2
The Royal School for the Blind, Edinburgh	11
CHILDREN AT SPECIAL CLASSES OUTWITH THE EDUCATIONAL	
Ashgrove Special Classes, Maybole, Ayrshire	2
Astley Ainslie Hospital Classes, Edinburgh	1
Balgray Special School, Glasgow	1
Besford Court Special School, Worchester	1
Biggart Memorial Home Classes, Prestwick	15
Craft Training Centre, Glasgow	1
Elmvale Occupational Centre, Glasgow	2
Kennyhill Special School, Glasgow	2
Nerston Residential Clinic, East Kilbride	1
Percy Street Special School, Glasgow	1
Renfrew Street Special School, Glasgow	3
Rottenrow Special School, Glasgow	1
St. Aidan's Special School, Glasgow	1
St. Kenneth's Special School, Glasgow	1
St. Kevin's Special School, Glasgow	2
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 96.

The number of children who got suitable employment was 80.

9. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

A. Trends in Scandinavian and other countries are being emulated by the ever increasing place given to physical education in schools.

Physical training organisers and teachers are an enthusiastic group who make a distinct contribution to the health of the school child.

B. SWIMMING BATHS.

Swimming has always played an important part in the work of physical recreation in Lanarkshire.

Arrangements exist with the Burgh Authorities for the teaching and practice of this beneficial and health maintaining activity.

C. PLAYING FIELDS.

Playing fields are a feature of school physical recreation facilities. Where these as yet do not exist, use is made of public parks, etc.

D. HOLIDAY CAMPS AND CAMP SCHOOLS.

As in previous years a series of holiday camps was conducted in rural schools for periods during the summer vacation.

Medical reports on the health of children attending reveal encouraging improvement. There is no doubt of the value of these organised summer activities.

The camps were held at the following :--

In Lanarkshire.

Biggar High School. Douglas West Public School. Leadhills Public School. Lanark R.C. School.

Lanark Grammar Primary School. Strathaven Academy.

In Banffshire.

Whitehills J.S. School. Findochty J.S. School. Cullen J.S. School. Portsoy J.S. School.

In Fife.

St. Theresa's Home, Aberdour.

³

The camps in Lanarkshire which ran for four weeks were so arranged as to provide each group of children with one week's holiday with the exception of Lanark Grammar P. School where one group of children, drawn from Auchinraith and Dalton Special Schools, were in residence for two weeks. The children attending the camps in Banff and Fife were also in residence for two weeks, the duration of the camps. The selection of the children to participate in the camps was made by the Head Teachers, but they were directed in making their choice to have regard to home circumstances, and to give preference to children who seemed most in need of a holiday and who would not be otherwise having one. Approximately, 735 children in the eleven to twelve age group drawn from 84 schools attended the camps, 570 being accommodated at Lanarkshire camps, 132 at Banffshire camps, and 33 at the camp in Fife. *Trek Camps*.

The trek camp for boys from Junior Secondary Schools held last year for the first time was extended this year by the introduction of a similar camp for girls. Ninety-four boys spent seven days and fifty-nine girls five days in the Upper Ward of Lanarkshire visiting during their trek such places as Douglas, Daer and Coulter. A pleasant feature of the trek camps was the inclusion of pupils from Midlothian.

Camp Schools.

Three Camp Schools were conducted at Glengonnar Camp, Abington, during the months of September, 1953, and April and May, 1954. Eighteen schools participated, six schools each month sending the qualifying class. The average number of pupils in residence each month was two hundred and twenty.

1,617 medical examinations for admission to the camps were carried out.

E. INSTRUCTION IN PERSONAL HYGIENE.

Opportunities occurring naturally during the course of examinations, interviews and group instruction are utilised by medical and educational staffs in fostering the right attitude to health and cleanliness.

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.	1953-54	1952-53	1951-52
September, 1953	 76,503	74,507	77,438
October, 1953	 76,360	73,646	71,939
November, 1953	 75,744	72,916	75,076
December, 1953	 74,633	70,562	68,395
January, 1954	 74,948	72,991	68,987
February, 1954	 74,636	72,131	68,856
March, 1954	 74,589	74,011	70,277
April, 1954	 75,888	75,083	72,492
May, 1954	 76,152	74,347	73,206
June, 1954	 76,250	74,511	75,932

SCHOOL MEALS SERVICE.

During the year, restrictions on capital expenditure for new buildings remained, and consequently improvements to the service were confined to re-modelling or extending existing facilities, where practicable.

No change has been made in the charge for meals to children since the last report, but the increase of 2d. imposed by the Government in March, 1953, has made itself evident now that a full year has elapsed. The total number of meals provided during the year was 6,383,426, which compares with 7,535,214 for the preceding year.

CONSULTANT SERVICE.

Special cases require special investigation and opinion, and this is given by our Consultant Physician and Consultant Paediatrician.

This service is of great value to the School Medical Officer, and we have evidence that it is also appreciated by the family doctors to whom copies of specialist reports are sent in each case.

The number thus referred during the year was 48.

REHABILITATION SCHEME.

The Disabled Persons Register now deals with those formerly dealt with under this scheme.

MINIATURE MASS RADIOGRAPHY.

The X-ray examination of children aged 12 years and over has become a valuable addition to the school medical examination.

The Area Tuberculosis Service has been responsible for this work and pupils in most of the Senior and Junior Secondary Schools have been examined.

In cases where significant abnormalities were found, the family doctor was, with the parent's consent, informed. Cases requiring dispensary observation, treatment and after-care were referred to the Tuberculosis Physician for the area and the appropriate Medical Officer of Health.

INTENSIVE COURSES IN FIRST-AID AND HOME NURSING.

As in previous years, pupils who completed their Leaving Certificate examination in March and were thus free to take this special course, were enrolled at the undernoted school.

Difficulty arises in fitting these courses into the curriculum, but they are being continued meantime.

The school taking part, and results of examinations, were as follows :---

INTENSIVE COURSE IN HOME NURSING.

(Session 1954).

School.	Number enrolled.	Pupils presented for examination.		Pupils who gained higher awards.
Wishaw High	 18	17	17	

CHILD GUIDANCE SERVICE.

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

Though the total number of children referred for the attention of the staff again shows an increase, as it has done each session since the inception of the present service (621 in 1946; 2,224 in 1954), the tendency is naturally for saturation point to be reached. This would appear to centre round the 2,000 mark, with staff remaining at the present limit of establishment, i.e. six psychologists and six speech therapists. The aim, doubtless perfectionist, has always been to provide for the whole County a complete service embracing the diagnostic, advisory and clinical aspects of the work in both general and child guidance and speech therapy. While much has been achieved with that goal in view, two further developments need to be made :

(1) Requests for clinical speech therapy are constantly being made for three groups of children :—

- (a) Certain pupils in the special schools.
- (b) Pre-school children.
- (c) Certain children in the children's wards of the three County hospitals at Law, Hairmyres, and Stonehouse.

These requests cannot at present be met except at the "under observation" or advisory levels. Even with the present number of therapists fully employed, there is a "screened" speech waitinglist of 92 as the new session opens.

(2) In general child guidance, the number of days set aside for purely clinical work with certain individual children needs to be increased beyond the present limit of one day per psychologist. More than this would mean, however, that the very necessary diagnostic and advisory work in the schools and the equally important home-visiting periods (already affected by the drive to save car mileage) would inevitably be seriously curtailed. The clinical side of the work, though naturally a time-consuming function, ought to become a stronger feature of a growing service.

SPEECH THERAPY SECTION.

New centres were opened at Shotts and Stonehouse, each being for half-day per week. Altogether, there are 19 centres where therapy is given, as follows :----

One half day per week each-Blantyre, Carluke, Harthill, Shotts, Strathaven (including Stonehouse)

(including Stonehouse).
One day per week—Baillieston, Bishopbriggs, Burnbank, Cambuslang, Lanark, Larkhall, Uddingston (including Bothwell).
One and a half days per week—Airdrie, Rutherglen.
Two days per week—Bellshill, Hamilton, Wishaw.
Two and a half days per week—Motherwell.
Three days per week—Coatbridge.

Apart from clinics and rooms used in schools, the therapists work in Y.M.C.A. premises, Masonic Rooms, Health Institutes, District Council Offices, and Community Centres. Biggar, Chryston, and East Kilbride areas cannot at present be served, except when special cases travel a considerable distance to the nearest centre.

In an attempt (a) to discover in good time the children suffering from speech defect requiring therapy, and (b) to obtain for planning purposes a possible estimate of the percentage of such school children for the whole County, the senior speech therapist made a small survey in a representative area, taking three schools therein. The following results were obtained :-

School.	No. of children Examd.	No. requiring speech therapy.	%	No. requiring to be kept under observation.	%	Total.	%
Craigneuk							
R.C.	700	33	4.7	10	1.43	43	$6 \cdot 1$
Wishaw							
Academy	710	23	3.24	8	1.1	31	4.3
Vishaw High	544	25	4.59	_		25	4.59
(Exc	cl. 4th, 5th 5th Years)	1,					
Total	1,954	81	4.14	18	.92	99	5.06

The senior speech therapist makes the following comments: "These results would seem to indicate that about 5 per cent of the school population require treatment for speech disorder of some kind. Allowing for the fact that some 5 per cent of the cases coming to our notice have to be discharged, because of lack of co-operation, or non-attendance at clinics, and allowing also for those children who do not need regular treatment, but are kept under observation, then at any time roughly 4.5 per cent of the school children have speech defect of a kind requiring clinical treatment. This takes no account of those pre-school children who have genuine speech defect (as distinct from the many cases of a minor developmental nature referred to us, e.g. baby speech, for which clinical work is not necessary). There is also the point that the percentage of speech defect in special schools is likely to be higher than 4.5."

A G-B Tape Recording Unit was supplied in April. This has already proved of great value in the treatment and study of speechdisordered children attending the clinics. Each therapist will shortly have her own tape which can be "edited" as she requires.

The number of children who received attention from some section of the service during the session was 2,224 (Boys: 1,506. Girls: 718) made up as follows:—

		Boys.	Girls.	Total.
1.	Child Guidance (excluding speech cases)	971	504	1,475
2.	Examined individually for the Director at the request of the Promotion			
	Board	25	42	67
3.	Speech cases taken on for treatment	446	144	590
4.	Speech cases examined and interviewed by a psychologist, but awaiting			
	treatment	64	28	92
	Totals	1,506	718	2.224

Age	5	5	6	7	8	9	10	11	12	13	14	15	16	17	17	Total
Boys	45	141	190	158	100	71	68	49	55	39	40	18	20	1	1	996
Girls	37	85	92	94	49	45	47	33	28	10	11	6	7	1	1	546
Totals	82	226	282	252	149	116	115	82	83	49	51	24	27	2	2	1,542

AGE TABLE (EXCEPTING SPEECH CASES).

AGE TABLE (SPEECH). Under Age 5 6 7 8 9 10 11 12 13 14 15 Total. 5 13 Boys 56 100 37 54 49 29 28 26 29 23 2 446 Girls 1 16 34 19 12 11 17 12 10 5 144 Totals 20 72 134 73 49 60 46 40 36 29 28 3 590

More than half of the total number of children seen by both sections of the service are in the seven-years-and-under category. About 25 per cent more pre-school children were referred than last session, the main complaints being backward general development, lack of speech, sleep disturbance and tempers.

TABLE OF I.Q. (EXCEPTING SPEECH).

	Under					Over	
<i>I.Q.</i> Boys Girls	 $70 \\ 150 \\ 98$	$70-79 \\ 189 \\ 119$	80-89 237 113	$90-109 \\ 320 \\ 170$	$110-120 \\ 75 \\ 27$	$ \begin{array}{r} 120 \\ 25 \\ 19 \end{array} $	<i>Total.</i> 996 546
Totals	 248	308	350	490	102	44	1,542

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	L	Inde	r		Over					
I.Q Boys Girls			70-79 35 28	80-89 77 26	$\begin{array}{r}90\text{-}109\\218\\63\end{array}$	$ \begin{array}{r} 110-120 \\ 75 \\ 18 \end{array} $	$ \begin{array}{r} 120 \\ 36 \\ 7 \end{array} $	<i>Total.</i> 446 144		
. Totals		7	63	103	281	93	43	590		

Slightly fewer children with serious mental handicap were referred to us than last session, but we were asked to examine a greater number of "permanently backward" pupils (i.e. roughly from I.Q. 70-80). Where these pupils are *educationally* retarded, almost the only satisfactory methods of meeting their problems in the ordinary school are either through group methods of teaching or tutorial-type classes, both of which have the same fundamental principle, namely, to allow the child to progress according to his particular level of capacity which will, of course, be below that appropriate to his chronological age. The larger schools are sometimes not attracted to these methods, unfortunately, because of the triple administrative difficulty involving numbers, staffing and accommodation.

The speech group of "Under 70" is small, because therapy produces comparatively little improvement except in special circumstances, e.g. where the defect is of a very simple mechanical character.

The child guidance group of "Under 70" includes 96 children examined at home in presence of Dr. Macleod or Dr. Cunningham, and of that number about two-thirds were seriously mentally handicapped.

TABLE OF CLASSIFICATIONS (EXCEPT SPEECH).

General Instability						8]	
Emotionally Retarded						157	
Anxiety and Obsessiona	I States					63	
Marked Sleep Disturbar						11	
Enuresis and Soiling						99	
Psychopathic Personalit						7	Emotional
Marked Adolescent Inst						8	Disorders
Unmanageable Behavio						33 >	and
Temper Tantrums and						78	Delinquency
Truancy and Wandering						70	e sundarme)
Marked Irregularity in						141	
Theft and Petty Pilferin						126	
38 3 3 7 1	~			***		32	
Marked Lying Malicious Mischief				***		45	
C- Officers						7	
Sex Offences				***		1	
Referred for General Ed	ucation	al Bacl	wardn	1095		598]	
Referred for Single-Subj						523	
Suitable for Adjustment						450	Educational.
Children whose educatio						55	Luucarionan
condicit whose condaction	mai pro	gross w	as ic-a	550550U		00)	
Marked Home Factors						348]	
Marked Physical Factor						140	
School-Parent Friction						44	
Faulty early Home-Trai						146	Influences,
Parental Anomalies	ming					87	innuences.
Children on Probation					***		
Culturen on Frobation			***			50 J	

NOTES :

- 1. The above figures refer to frequency of occurrence. A child may be included in more than one classification.
- 2. "Marked Irregularity in Attendance" refers not to truancy but to frequent short absences for minor health reasons or trifling causes.
- 3. "Home Factors" include poor home background, divorce, separation, parental quarrelling, weak or divided discipline.
- 4. Of the 99 cases of psychological bed-wetting (enuresis) 37 are being continued for treatment, 30 were discharged as satisfactory, 10 were only partially satisfactory, 16 were unsatisfactory because of lack cf cooperation, while the remainder were gravely mentally handicapped and unsuitable for psychological treatment.
- 5. It may be of interest that 69 of the children referred to us were lefthanded, but this was not, of course, the reason for which they received attention from us.
- The main types of "Physical Factor" were Spastic Paralysis, Tuberculosis, Deafness, Epilepsy, and Meningitis.
- 249 Cases (168 Boys; 81 Girls) are being continued for treatment or observation next session.

	Disord	er.	А		Stuttering.	Cleft Palate.	Voice.
Boys			***	254	195	12	14
Girls	••••			91	52	5	12
Totals				345	247	17	26

SPEECH CLASSIFICATIONS.

NOTES :	
 These figures, like those of the child guidance classifications, re to frequency of occurrence. 44 Children had multiple speech One child appears in three classifications. 	
 3 Children, not accounted for in the tables, were given relaxation only, at the request of the psychologists. They suffered from extreme degree of physical tension and benefited greatly by re- work over a period of several weeks. 	a fairly
 3. 334 Children are continuing treatment into the new session. 144 were discharged as completely satisfactory. 40 were discharged as partially satisfactory only. 21 were discharged as unsatisfactory (in every case owing to co-operation from home or repeated non-attendance at centre 23 were discharged after one consultation-visit only. 19 left school before treatment was quite complete.) lack of s).
MISCELLANEOUS.	
Special case-reports to Director	56
Special case-reports to Dr. Macleod, School Health	
Service	79
Special case-reports to others, e.g. Probation Officers, Children's Officers, Ministry of Pensions, Hospital	
Almoners, Youth Employment Service, etc Children examined at home in presence of Dr. Macleod	34
an members of his staff	96
Children examined in Remand Home	70
Children examined for purposes of Promotion Board	67
Children examined for purposes of Class Placing	84
Vocational Guidance	10
Pre-School children examined in connection with	
admission to Nursery Schools	14
Sources from which Children were referred.	1.110
Headmasters	1,410
School Health Service	379
Director of Education	215
Parents	57 17
General Practitioners	19
Royal Hospital for Sick Children Probation Department	15
Other agencies (including County Hospitals, Children's Officers, Public Health Department, Medical Specialists, other Child Guidance Services, Youth	11
Employment Officers, Nurses, etc	24
	2,132

VISITS AND INTERVIEWS (WHOLE STAFF).

Schools Visited				181
School Visits (All-day attendance	e at	one so	hool	
reckoned as 2 visits)			"	1,486
Home Visits				702
Visits to Remand Home				38
Visits to Institutions and Hospitals				33
Speech Clinic Sessions				1,865
Treatment Interviews (excluding spe	eech)			1,523
Speech Treatments				9,239
Parent-Guidance Interviews				1,674

NURSERY SCHOOLS.

Admissions to these schools have now been formally delegated to the School Health Service and we are impressed by the public demand.

An Assistant School Medical Officer and Nurse saw these children at regular intervals when routine and special medical examinations were carried out.

Immunisation against diphtheria and whooping cough and all other School Health facilities were made available to the pre-school group.

The health of the children during the year was excellent.

TABLE I. (1953-54).

Total number of children examined at

A. Systematic Examina	TIONS :-				Sys	Other stematic ninations
Entrants				9,490	1,	113
Ordinary Schools Second Age (Group			9,126		
Third Age G	roup			7,964		-
Secondary Age Group			•••	671		-
	Te	otal		27,251	1,	113
B. OTHER EXAMINATIONS Special (Non-routine) Re-inspections by Me) Cases	 Officers				4,230 6,817
		fotal				11,047

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

		Total	 		4,752
Other Syst	ematic Examinations		 	•••	203
Secondary	Age Group		 		60
Schools	Third Age Group		 	•••	1,213
Ordinary Schools	Second Age Group		 		1,583
	Entrants		 		1,693

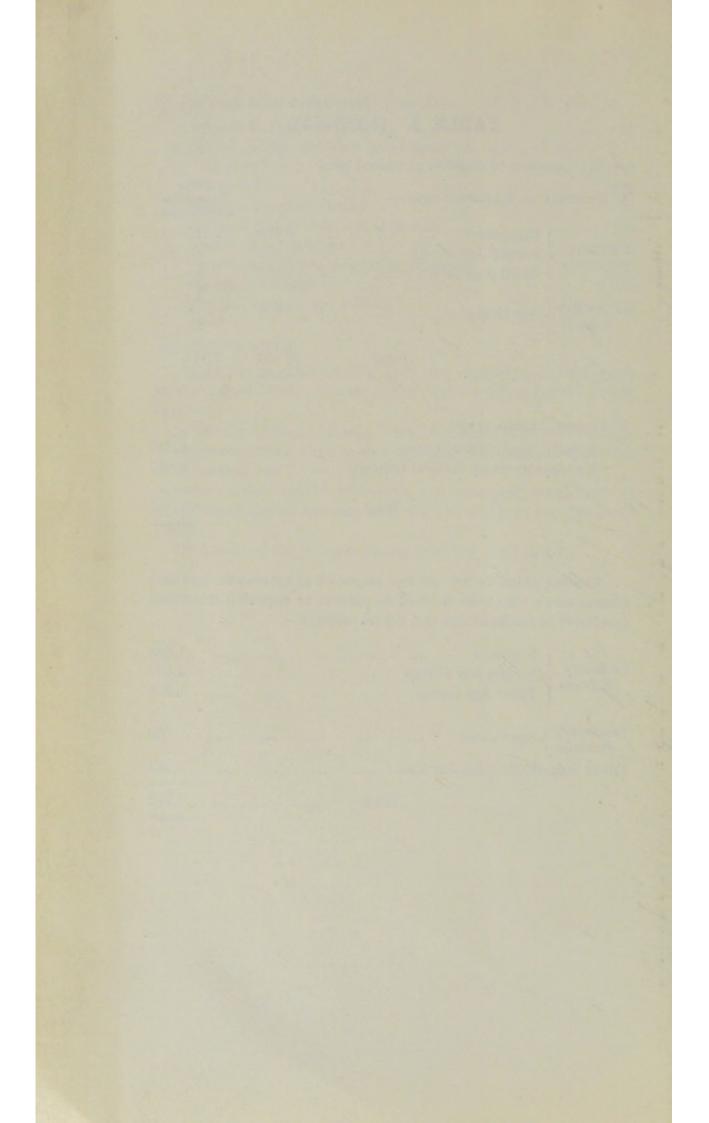


TABLE I																							2	SYS	TEA	MA	TIC	EX	CAN	AIN/	ATIO	ONS	(1	952-	53).																										
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Beys	6.452	138 2-90 153 3-44	* 45 12	845 0	39 D I	11	0.0	0 1 7	8	1 1	28 1	20	9.62	12	0.64	5-90	0-50 30	0.00	12			201	1.26	577	3.04	1 1 26	0.05		103	100		10-1	14.5	0114	0.00	-0-64	118 2-32 111 2-10	1.25	000	0.01		1.1		16 2.1		44 0					40 0		20 0				43 0.1	18 0.0		10	
A Roys	3.928	13 1:81 43 3:00	+ 10	1-34 H	-01 -	1		0.1		310	10.0	21		0.05	0.00	2-33	12		123	0 1	36 0	13 1	생활	723	2-50	4-71	0.01	1.4	9.4	7 00	1 1.8	4 0.0	1.4	6 2.1	0.05			0.48	94	0.00		4.3	17 Ø 3		1 00	18 0					10 0	04 64 1 40 07 1	23 0	24 10	12 11		25 -	10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2 0 5		
Boys	118	0-35 0-35		1 1 1 1				1111			- 1	24				3-12				1	48 (0 74	24		8-30	9-28	1-42		1.1	0.4		0.9	1 0.0	6.1	0 3.7	4-55	1.2	1-11	1 -	0.0			0.3	8 0-1	- 18						- 19	-37 8	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13 0	45		5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	28 0.2	1 8.2			1
Bryn Proceedings Goyla Proceedings	13,887 15,994	2-14	0-55 24	2-17	25 0	1	1 0.0	1 13	24	1 4	33 1	82	0.00	32.5	0.65	3-85	0.50	0.01	1.1	0 1	24 2	-01 134	100	15.06	1.12	6.54	0.0		2 0-4	2 0.0	2 23	1 0 4	124	8 1.8	3-42	0.41	2.95		0.0	0.01			0 0.1	B 93	13 0	53 0	14	. *	24 0	2.2	12 0	20.00	28 0	14	10 21	0. 6.	34 11	1.6	3 0.40	0.0	
I Boys	338	51 3-55 14 2-50	P-17	20 1	10	5 E			4	3	34 1	18		0.00		3/31	1-0.		23		10 2	83 2	11	10.02	4-35	8-00	D-M	12-1	2 6-3	0 -	1 2 3	P 0 1	=		1 3	운전	2.23	44	3 H.			1.0		12 0-1			50 -	- +	34		17 0			100		a	50 11.7		0 1-18 5 2	0.1	2 1
Boys	10.02	2.05	0.02	2-53	-28 0- 28	7	- 0.0	1 1	E I	1 4	24.5	42	0.00	33.5		5-35	0.00	0.01	1			106	202	1040	4-32	6.04	0-0	2-2	0.1	2 0.0	5 24	6 94	1.1	8 1-4 0 - 1-8		0.00	1. 100	1.05	0.4	0.00		10	1 0-2	4 1 2 3	0.0	02 0			25 +	0.0	21 0	87. 10	23 0	28	14 2.5		54 + 1 29 + 1	15 6	2 (9.55 4 78	0.0	2 2
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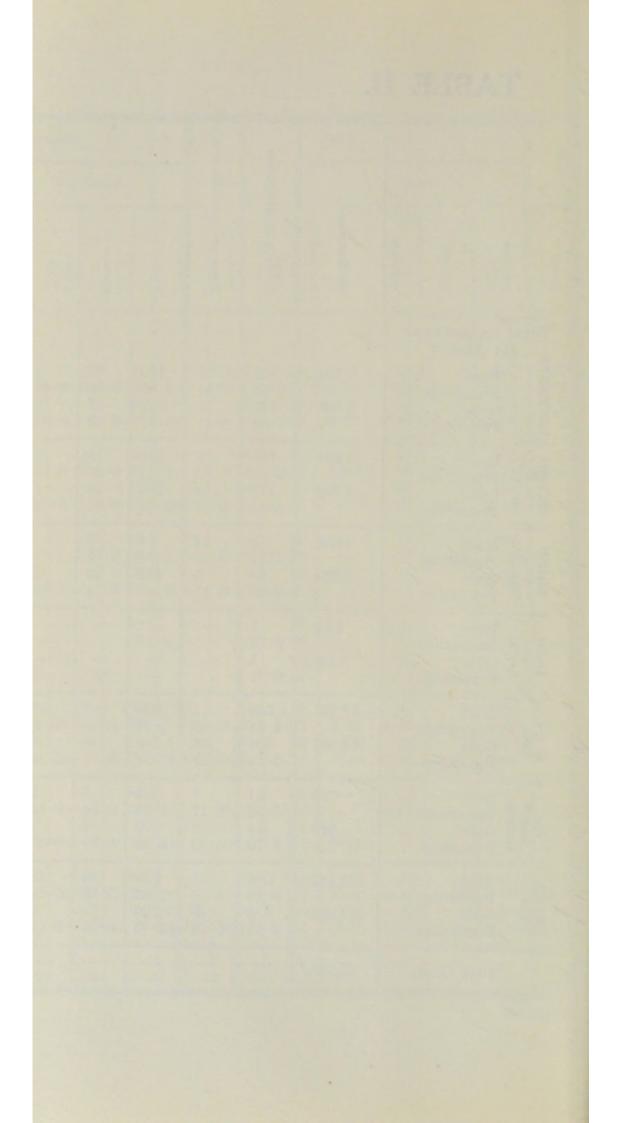
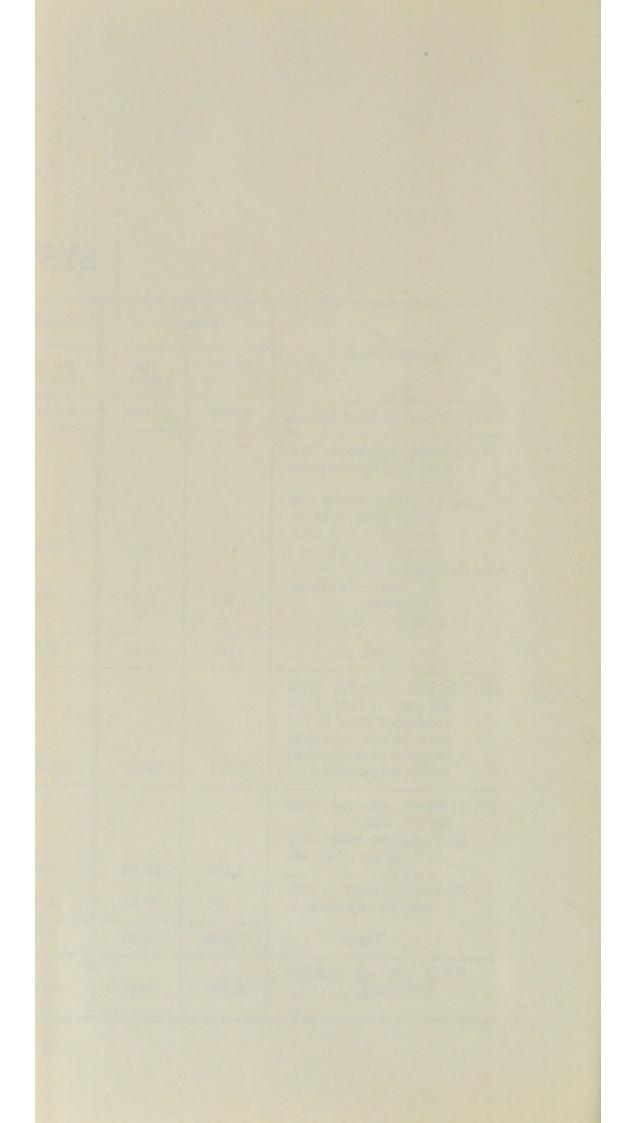


TABLE III. (1953-54)

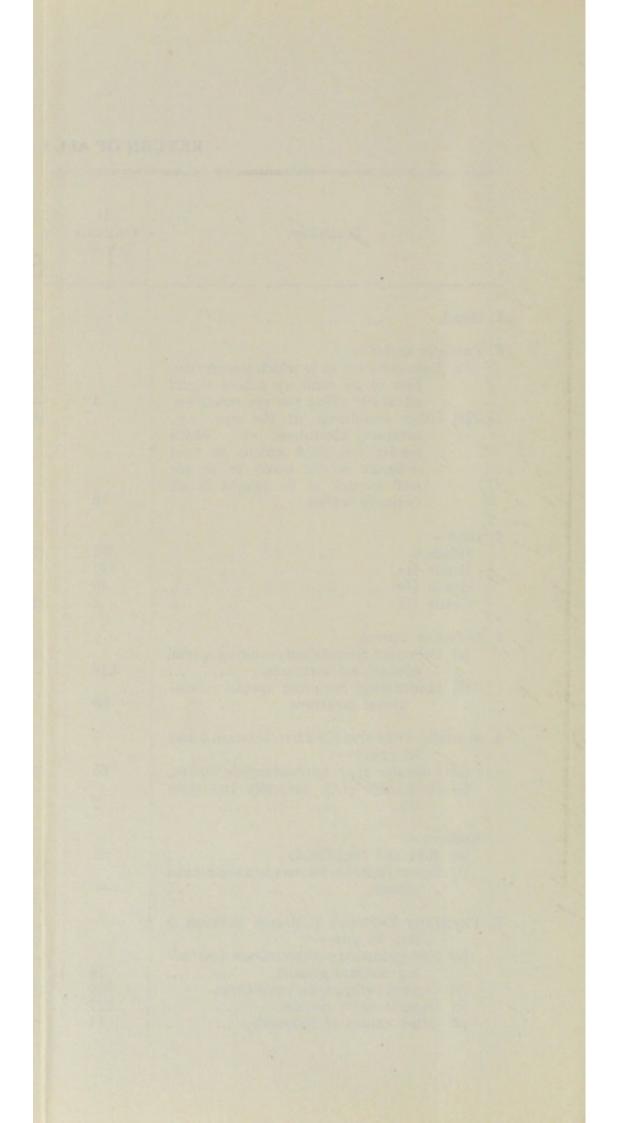
OTHER SYSTEMATIC EXAMINATIONS. SECONDARY SCHOOLS AGE GROUP. ROUTINE EXAMINATION TOTAL. ENTRANTS. SECOND AGE GROUP. THIRD AGE GROUP. GRAND TOTAL. CLASSIFICATION. No. of Children. No. of Children No. of Children. Per-centage. Per-centage. Per-centage No. of Children. Per-centage. No. of Children. Per-centage. Per-centage. No. of Children Per-centage No. of Children. 45.45 57.97 I. Children free from defects, 4,313 4,349 47.663,942 49.50 389 12,993 47.68523 46.99 13,516 47.65 915 10.03 1,178 14.79 16.09 108 2.201 8.08 _ 2,201 $7 \cdot 76$ $21 \\ 5$ $0.23 \\ 0.05$ $0.20 \\ 0.02$ ${0\cdot 53 \atop 0\cdot 02}$ 107 1.13 $\frac{16}{2}$ 144 201.80 - $0.58 \\ 0.02$ Total, ... 107 1.13 10.31 15.01 108 16.09 941 1,196 8.63 8.36 2,352 20 1.80 2,372 III. Children suffering from ailments (other than those mentioned in II.) from which complete recovery is anticipated within a few weeks, ... 25.10 3,794 39.98 2.939 32-20 1.999 127 18.93 8.859 32.51 405 36.39 9,264 32.661,199 12.63 766 8.39 8.73 26 3.88 2,686 9.86 158 14.19 2,844 10.03 695 2177 0.81131 1.44 132 1.66 3.13 361 1.327 0.63368 $1 \cdot 30$ Total, 1,276 13-44 897 9.83 827 10.3947 $7 \cdot 01$ 3,047 11.18 165 $14 \cdot 82$ 3,212 11.33 Total No. of children examined, ... 100% 100% 27,251 9,490 100%9,126 100% 7,964 671 100% 1,113 100% 28,364 100%

SYSTEMATIC MEDICAL EXAMINATIONS.

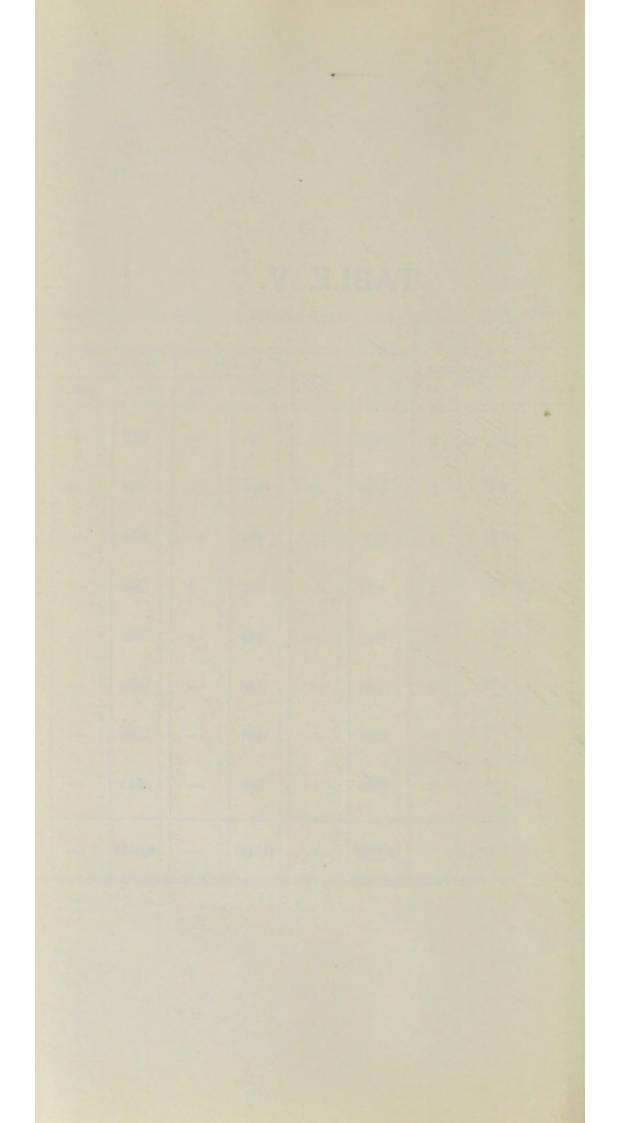


Disability.	At Ordinary Schools.	At Special Schools or Classes.	Total.	Disability.	At Ordinary Schools.	At Special Schools or Classes.	Total.
1. Blind,	-	-	-	8. Multiple Defects-			
 Partially sighted— (a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition, (b) Other conditions of the eye, e.g., 	1	25	26	 (a) Mentally defective (ineducable) and physically defective ("general orthopaedic conditions") (5(b) and 7(b)). 	-	9	9
cataract, ulceration, etc., which render the child unable to read ordinary school books or to see				(b) Mentally defective (ineducable) and epilepsy (mild) (5(b) and 6(a)).	-	1	1
well enough to be taught in an ordinary school,	6	15	21	 (c) Mentally defective (ineducable) and epilepsy (severe) (5(b) and 6(b)). 	_	1	1
3. Deaf— Grade I, Grade IIA, Grade IIB,	351 177 10	$ \begin{array}{c} 19 \\ 36 \\ 5 \end{array} $	$370 \\ 213 \\ 15$	 (d) Mentally defective (ineducable) and blind (5(b) and 1) (e) Mentally defective (educable) and 	—	-	-
Grade III, 4. Defective Speech-	10	49	50	(e) Mentally defective (education) and physically defective ("general orthopaedic conditions ") (5(a) and 7(b))	3	48	51
 (a) Defects of articulation requiring special educational measures,	346 80	88 8	434 88	(f) Mentally defective (educable) and epilepsy (mild) (5(a) and 6(a)) \dots	1	21	22
5. Mentally Defective (Children between 5 and 16 years)—	00	0	00	(g) Mentally defective (educable) and epilepsy (severe) (5(a) and 6(b)) \dots	-	2	2
(a) Educable (I.Q. approximately 50-70), (b) Ineducable (I.Q. generally less than 50),	55 2	544 35	599 37	(h) Mentally defective (educable) and physically defective ("other causes of ill health ") (5(a) and 7(d))	2	57	59
 6. Epilepsy— (a) Mild and occasional, (b) Severe (suitable for care in a residential 	21	32	53	(i) Mentally defective (educable) and deaf $(5(a) \text{ and } 3) \dots \dots \dots$	3	33	36
school),	-	1	1	(j) Mentally defective (educable) and blind (5(a) and 1)	_	_	_
 Physically Defective (Children between 5 and 16 years)— (a) Non-pulmonary tuberculosis (exclud- 				(k) Other multiple defects	3	82	85
ing cervical glands), (b) General orthopaedic conditions, (c) Organic heart disease, (d) Other causes of ill-health,	$ \begin{array}{r} 15 \\ 254 \\ 227 \\ 14 \end{array} $	$30 \\ 132 \\ 43 \\ 278$	$45 \\ 386 \\ 270 \\ 292$				

TABLE IV. (1953-54).RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.



	AB	LE	٧.													DEI	NTA	_ IN	SPEC	TIO	V A	ND .	TRE	ATA	IENT	(195	3-54).																
DIL DI			1		- 1	Line	-					S. P.NAMI			-	-		- chula	16.7			-	-				Noristan.		Percertage	Handhor of Fayers		Tunber of	Line			FILLD			Co.	ana ana	Sighter of	ten	
								# _ Pol							5 3	4 1	0.016	214	Tet	316		p.t		216	Trai		Siz la	- India	Instant	Accepting front mana			Timp	240.		Fyrm.				Pass.	dears.	Treat-	lar te
1	198		363	362		278		- 14	288	274		205		40		- 70	- 1	2 -				-			2,547	1,112	1.043	2,165	84-2	1,242	208	2,780	1,003	810	50	860	145	114		002	1	179	
2	286		2.0.4	335		170	- 2	**	317	286		2340		04 -	1	- 10		- 1	26		89				8,125	1,354	1,09	7,643	84-3	3,207	491	1,835	6.01	154	194	108	10	210	174	144	1	2425	
3	307		475	452	1	528		- 01	350	377		291		02		- 123	- 10	-	1			-			3,727	1,999	1,480	3.080	82.9	1,256	3,998	2,812	1,214	282	202	304		π.	373	505	25	HU.	
4	827		9.17	788		18	- 1	- 07	800	234		712		u .	-	149 -	- 11	- 18		-	14	-	00		7,883	0,942	3,154	4,116	82-8	2,048	950	2,600	1,677	270	05)	622	103	85		112	120	663	
*	215		244	125		- 155		- 00	144	91	-	**				1 -			-			-			1,118	611	525	1,010	88-7		875	2,579	1.120	155	Dan	174	202	18	m	421	205	425	
6	185		260	321		- 10			673	617		123		ist -		- 00	- 54	4 -	503		-39	-	05		3,410	1,927	2,556	4,285	91-2	2.073	1.366	3,678	1,399	543	130	1/640	111	π	118	963	175	0003	
	800		100	800		-		H2 -	443	139	- 1	LEP .	- 1,	NT .	- 1,	- 174	- 31	- 1	354		202	-	32		11,110	4,495	3,724	8,210	81-3	8.118	1.942	5,546	1,275	610	200	2,477	145	216	417	1,006	ъ	794)	
	140		000	023		101		- 10	437	686		642	- 1	× .		- 181	- 21	0 -	51		**	-	10		6,900	2,440	2,675	3,140	73-3	2.08	2,055	1,440	1,617	402	969	1,476	105	210	109	1.990	78	790]	
																			1000			The late					0.000000						-			-		-			0.0		



District of			N	umber	of Not	tificatio	118.			Died.	Left Dis-	Present Number			Age (roups.				Net
County.	 1912	1913	1914	1915	1916	1917	1918	1919	Total.	CETTER TRANS	trict.	of Cases.	-5	5-15	15-25	25-45	45-60	60 +	Insured	Not Insured
Central	 25	39	29	36	20	36	25	39	249	146	15	{ M. 53 F. 35		9 8	13 12	23 12	6 3	2	36 10	17 25
Eastern	 33	61	45	44	34	39	30	26	312	175	31	$\left\{ {\begin{array}{*{20}c} M. & 66 \\ F. & 40 \end{array} \right.$	=	9 8	17 18	33 12	5	2	53	13 33
Western	 11	16	13	9	13	11	11	9	93	54	11	$\left\{ {\begin{array}{*{20}c} M. & 16 \\ F. & 12 \end{array} \right.$	_	=	5 4	8 7	3 1	=	$14 \\ 2$	2 10
Total	 69	116	87	89	67	86	66	74	654	375	57	{ M. 135 F. 87		18 16	35 34	64 31	14	4	103 19	32 68

Table XII.-COUNTY OF STIRLING-PULMONARY TUBERCULOSIS, 1912-1919.

N		No. who	Sumitivity			Condition o	f Patients.		
Nature of Treatment.	Total Cases.	Died or left the Districts.	Surviving Cases.	Welland Working.	Improved.	Fairly Well.	Not Well.	Very Ill.	Under Institutiona Treatment.
Institutional, with or without a further period of Domiciliary Treatment	257	152	105	53	11	19	12		
Domiciliary (only)	55	41	14	6	_	5	2	1	_
Ordinary treatment at home	342	239	103	67	8	22	6	_	_
Total	654	432	222	126	19	46	20	2	

SANATORIUM AND OTHER TREATMENT.

TABLE VI. (1953-54).

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.

TREA CEN	TMEN VTRE.		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		 	7	8	15	6	1	
Biggar		 	10	47	57	9	1	-
Blantyre		 	145	177	322	127	18	
Cadder		 	89	157	246	55	34	-
(Bishopbrig		10000 CLORODO						1
Carluke		 	48	84	132	41	7	
Carnwath		 	25	35	60	22	3	-
East Kilbride		 	30	28	58	19	11	-
Lanark		 	117	220	337	93	24	. —
Larkhall		 	226	268	494	181	45	-
Lesmahagow		 	46	113	159	33	13	
Shotts		 	103	212	315	64	39	-
Strathaven		 	31	66	97	17	14	-
Uddingston		 	111	187	298	89	22	
Wishaw		 	232	546	778	195	37	
Knowetop Sp			4	37	41	4		-
Airdrie		 	360	694	1,054	280	80	-
Baillieston		 	77	142	219	49	28	-
Bellshill		 	322	620	942	256	66	-
Cambuslang		 	234	412	646	191	43	_
Rutherglen		 	139	247	386	112	27	-
Dalton Specia			21	40	61	16	5	-
Drumpark Sp			14	43	57	10	4	-
Coatbridge		 	508	875	1,383	381	127	-
Hamilton		 	644	645	1,289	505	139	
Motherwell		 	456	934	1,390	409	47	-
Te	otal	 	3,999	6,837	10,836	3,164	835	-

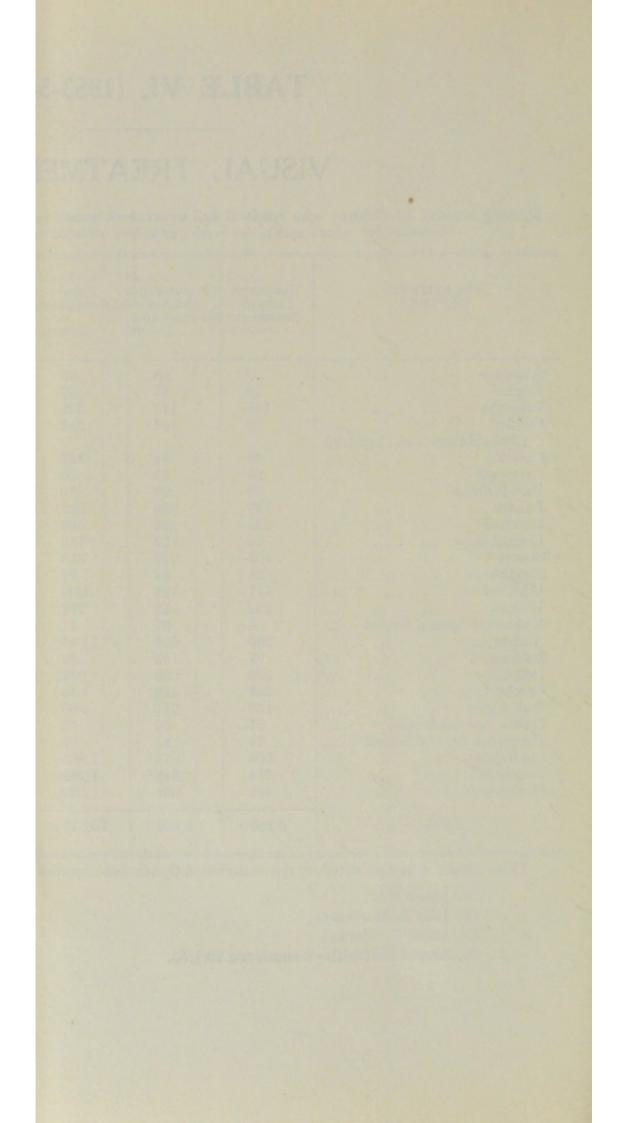
These Clinics were conducted by the undernoted Ophthalmic Specialists :---

Dr. James Hill.

Dr. John A. Mortimer.

Dr. Alfred G. Shanks.

Dr. Samuel Galbraith-commenced 19/1/53.



	ALE	DRIE CLI	NIC.	BAILI	LIESTON	CLINIC.	BEI	LSHILL	CLINIC.	82.4	NTYRE	LINIC.	CANES	VISLANG	CLINIC.	COAS	anipol	E CLINIC.	HA	ELTON	CLINIC.	LAB	NHALL C	LINDC.	MOTH	LIWEL	CLINIC	RUTI	LERGLE	N CLINIC.	51	HOTTS CL	INIC.	w	ISHAW C	LINK.
	Boys.	Garia Ja	Total	Boys.	Garla.	Total Attendance	Boys.	Girla.	Total Attendance	Boys.	Gurba.	Tutal Attendance	Buys	Gala	Total Attendance	Boys.	Girts.	Total Attendance	Boys.	Girla.	Total Allendance.	Boys.	Girls J	Total thredance.	Boys.	Gala.	Total	Bern	Girls	Total Attroiance	- Born	an	Total	Der	64	Total
SEAMS OF THE EYE- Bioplanitis,	48 1 10 2	4 9 1 4	1,025 15 - - 42 6 10		3211121	432 325 1	81 28 - 0 10 1	64 14 13 1	169 227 	255 11 13 3	38 11	546 45 30 14	44 15 	57 16 1 33 8	500 112 	80 6 1 1 1 1 4 2	131 1 1 10 1	1,437 31 5 29 	20 9 6 2	58 13 1 1 1	1,322 147 	111 *	17 8 1 1 7 2	164 84 	850 11 15	11 e 1 1 & 5	1,164 71 11 14 125 -	43 14 1 	36 9 11 7	509 112 4 	*	11 4 + 1 3	259 00	3811211 0]	8611 12	1,638 207 29 25 1 12
Тоты,	61	88	1,098	75	83	916	120	91	1,085	65	66	667	92	115	856	102	103	1,556	76	82	1,659	26	35	289	111 -	7.5	1,385	50	63	700	5	19	362	83	115	2,021
nstaats or THE Sens	42 -1 - 52 214 1 50	1 102 3	386 6 42 1,831 14 888 12 763	95 1 1 54 10 243 53	50 1 - 163 153 157 - 36	575 5 3 1,138 122 1,168 608	32 = 4 = 10 = 4 25 = 33	17 21 22 511 59 33	213 1 13 16 475 117 700 15 307	48 1 3 3 30 30 30 30 30 5 175 85	38 ²¹ - 11 ⁵⁸ ⁴ 17 ²⁵	377 13 14 15 45 877 122 1,777 18 1,166	83 5 1 2 8 13 5 846 182	45 7 5 8 91 7 606 1 134	501 118 1 25 44 45 33 4,659 3 2,304	14 255 2	37 2 1 6 4 333 10 163 1 84	408 194 6 44 50 1,582 63 1,519 22 1,212	57 3 3 15 37 5 200 42	28 1 4 12 55 1 55 1 55	399 3 1 35 131 1,229 32 1,229 32 1,249 	48 3 1 8 1 1 5 1 6 9 26	40 1 2 6 6 7 6 7 6 7 5 30	388 28 64 75 44 437 312 312 350	15 5 1 1 1 1 1 1 1 2 1 5	11 100 = 13 13	109 46 508 130 130 130 132 157	50 4 2 6 3 222 90	29 2 2 2 2 3 4 104 60	393 44 13 4 215 50 1.067 807	1 5 5 4	2 - - 2 - 2	4 122 6 135 150	33 2 1 5 5 8 29	11 6 1 53 53 53 25	314 68 2 297 69 004 014
TOTAL	412	496	3,900	454	423	3,446	241	199	1,897	453	417	4,002	1,145	904	8,163	494	661	5,120	363	252	4.027	174	240	1,780	121	174	1.191	367	200	2,595	15	10	197	173	152	1.471
ntastes or the Ecs- Chronic Supparative Inflammation, Creaniacous Collection, Chronic Catarth, Other Diseases, Totas,	19 22 4	13	600 77 69 776	25 22 	27 16 	450 78 158 702	26 13 	14 10 -6	215 63 14 294	23 16 	14 23 13	628 60 68 625	17 27 2 1	18 41 6 3	400 254 10 19	36 41 16	32 42 7	115 170 110	23 26 1 2	16 17 5	472 256 3 175	17 6 1 4	10 11 1 7	196 66 2 43	33 7 1 2	15 17 3	768 39 1 34	18 2 	10 1 1 3	291 20 2 4	3 1 	4 	53 1 -5	14 59 5 2	9 42 3 5	412 157 14 9
BEASES OF THE NOSE-						102	4.5		224		30	010	47	65	683	\$3	- 81	995	52	38	910	28	29	307	63	35	832	20	15	317	4	- D-	59	80	59	592
Nasal Catarrh Nasal Obstruction,	10	8	145	3	9 2	107 4	4 6	3	56 21	-	82	69 9	6	<u>s</u>	63 	- -	-	52	18 2	12 3	209 25	5	10 2	117 28	16		254	1	3	18	1	1	6	5	3	177
TOTAL,	10	8	148	3	11	111	. 8	3	77	8	10	78	6	5	62	6	2	52	20	15	234	5	12	145	16	11	254	2	3	18	1	1	6	5	3	177
Ringworm of Head, Ringworm of Body,		ī	19 30		7	19	1	1	2	22	-	8 14	-		-	32	1	Ţ		1	-	-	-				-						-			
TOTAL,	9	1	49	1	1	19	1			4	-	22	-	-				14	-	-	-					-	-							-		

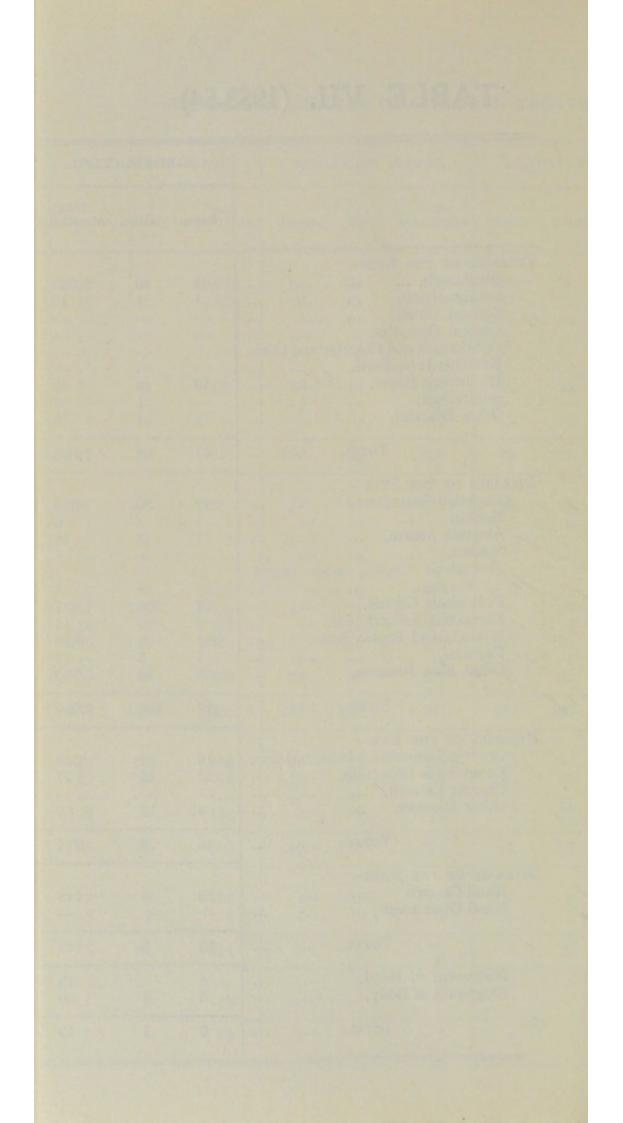


TABLE VIIa. (Supplementary), 1953-54.

MINOR AILMENTS (Treatment at Emergency Clinics).

	EY	E DISE.	ASES.	SK	IN DISE	ASES.	EA	R DISE.	ASES.	DISE	ASES OF	NOSE.
CLINIC.	Boys.	Girls.	Attend- ances.	Boys	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.
Blackwood	 17	13	242	208	170	999	10	6	50	2	5	77
Lesmahagow	 23	41	383	280	232	1,221	14	12	84	.4	3	101
Carluke	 14	13	282	272	269	3,046	15	10	354	10	2	82
Carnwath	 4	4	64	220	160	1,641	4	1	10	2	_	5
Lanark	 3	5	18	50	55	496	8	2	64	-	-	—
Forth	 2	10	34	68	60	1,624	-	4	7	-	-	—
Stonehouse	 15	22	164	293	335	1,110	13	18	103	1	—	15
Strathaven	 11	10	181	105	103	1,445	1	3	32	3		47
East Kilbride	 21	23	296	379	357	2,664	15	5	142	11	8	231
Benhar	 24	32	296	142	112	976	8	5	25	2	-	4
Mobile Clinic	 7	12	247	348	330	2,511	13	9	168	3	3	30
Uddingston	 10	6	66	7	50	243	1	_	4	-	3	9
Totals	 151	191	2,273	2,372	2,233	17,976	102	75	1,043	38	24	601

Total number of children treated ... 5,186 21,893

Total number of attendances made

