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# Contributors

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# Berkshire Education Committee.

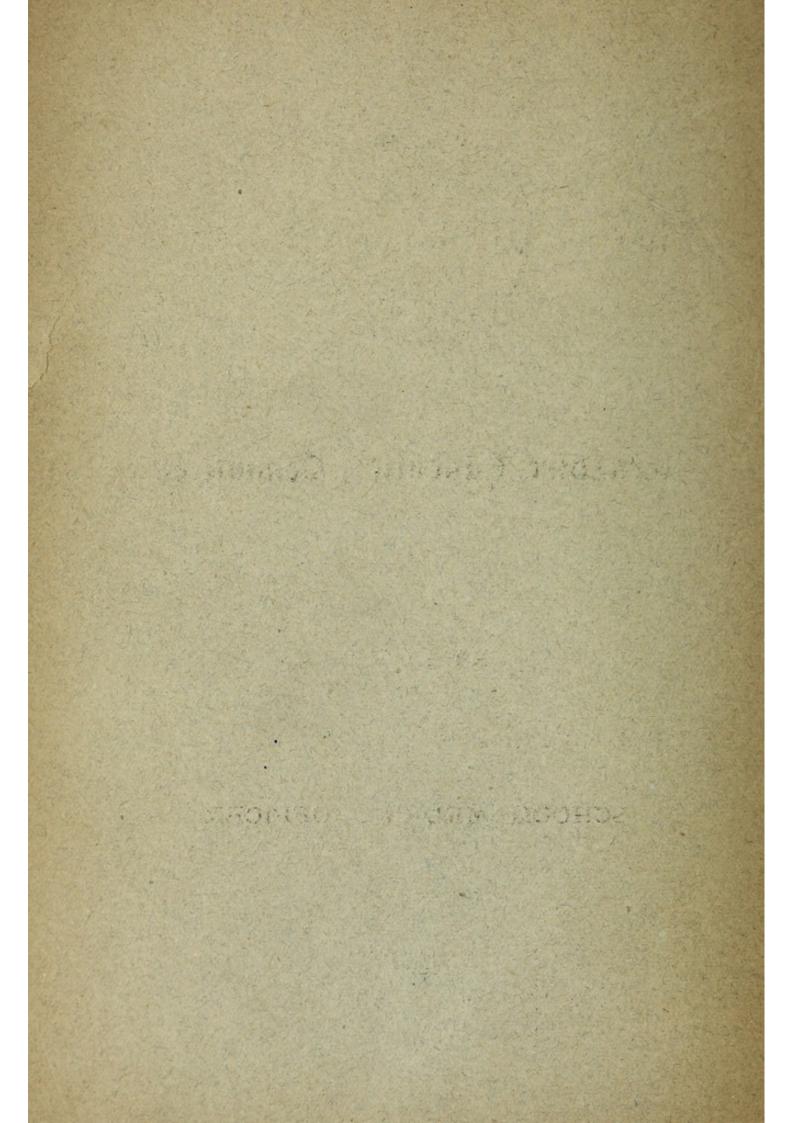
REPORT

OF THE

# SCHOOL MEDICAL OFFICER

FOR THE YEAR

1920.





# Berkshire Education Committee.

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OF THE SCHOOL MEDICAL OFFICER FOR THE YEAR 1920.

AREA AND POPULATION.

The area of the Berkshire Education Authority for Elementary School purposes is 448,058 acres, *i.e.*, the whole Administrative County with the exception of the Boroughs of Windsor, Maidenhead, and Newbury.

The total civil population of this area at the middle of the year 1920 is estimated to have been about 145,448, and the number of children on the rolls of the Elementary Schools in June last was about 22,559. There are 203 Public Elementary Schools with 239 separate Departments in the area.

The district is almost entirely rural in character and contains no town with an estimated population over 7,000.

## CLOSURE OF SCHOOLS OWING TO INFECTIOUS SICKNESS.

During 1920, 77 closure certificates were issued affecting 51 schools or departments; 5 schools were closed by the District Medical Officers of Health with the approval of the School Medical Officer, and 46 by the Local Education Authority or the School Managers acting on the advice of the School Medical Officer.

Number of Schools closed during 1920 :---

27 on account of measles.

4	••	,,	,, <sup>1</sup>	whooping cough.
6	••	. 11	,, 1	numps.
5	,,	,	,, (	chicken-pox.
2	,,	.,	,, (	liphtheria.
1	,,	,,	,, s	carlet fever.
1	,,	,,	,, i	nfluenza.
1	,,	,,	,, 5	scarlet fever, influenza and bronchitis.
1	"	,,	,, 1	vhooping cough and influenza.
*1	,,	,,	,, -	mumps. diphtheria,

\* These Schools were closed twice owing to different epidemics.

### SANITARY CONDITION OF SCHOOL PREMISES.

Only minor alterations to the sanitation of school premises have been carried out during the year, and have mainly consisted of maintenance of fabric and improvements to drainage and ventilation. The school premises are under the constant supervision of the School Buildings Inspector, Mr. W. Sargeant.

### MEDICAL INSPECTION OF SCHOOL CHILDREN.

#### STAFF.

In addition to the School Medical Officer, the staff consists of three whole-time Assistant School Medical Officers, four whole-time School Nurses and two nurses whose work includes the duties of Health Visitor as well as School Nurse.

Assistant School Medical Officers.

Dr. H. Davies -	Appointed early in 1918. Left to take up appoint- ment as County Medical Officer of Health and School Medical Officer, Breconshire County Council, 31 May, 1920.
Dr. G. H. Culverwell	Resumed work from military duties, 20 May, 1919. Left to take up appointment under Home Office, 31 January, 1920.
Dr. H. M. Agnew -	Commenced duty, 1 January, 1920.
Dr. W. R. H. Heddy	Commenced duty, 1 January, 1920.
Dr. E. J. Manning -	Commenced duty, 12 July, 1920.
	SCHOOL NURSES.
Miss B. J. Nott -	Appointed in 1916.
Miss Thomas -	Appointed in 1916. Left 30 April, 1920.
Miss G. C. Petherick	Appointed 1 November, 1919.
M. E E D.	
Miss F. E. Paris -	Appointed 6 July. 1920.
Miss F. E. Paris - Miss E. M. Taylor	Appointed 6 July. 1920. Appointed 13 July, 1920. Left 30 November, 1920.

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MEDICAL INSPECTION.

Medical inspection was carried out during the year in all but 23 of the elementary schools, and 40 of the schools were inspected a second time. The omission was in most instances due to the allocation of a definite area to each Assistant School Medical Officer and in the remainder to closure for infectious disease at the time arranged for Medical Inspection.

In every school visited entrants, leavers, children aged 8 years and special cases were examined.

It is now practicable for each Assistant School Medical Officer to adhere strictly to a definite group of schools, and one day a week is set aside for re-inspections.

The Assistant School Medical Officers carry out all routine medical inspections and devote one day each week to the re-inspection of children needing to be kept under observation or previously recommended for treatment. They also examine candidates for County Scholarships and for posts as Pupil Teachers and all children under 14 years of age who apply for permission to take up part-time employment. The last mentioned work is difficult to arrange, owing to the scattered distribution of applicants, and occasional delay in settling a time and place for the examination is inevitable.

At the end of each week an informal meeting of School Medical Officers and School Nurses is held at my office to discuss the work and arrange a time table for the ensuing week.

The duties of the School Nurses include periodic inspection of all children in school with a view to promoting general cleanliness and detecting affections such as ringworm and itch. home visits to follow up children recommended for treatment, and children excluded from school for uncleanliness and skin disease. An important section of the work comprises preparation of the lists of children with defective vision, visits to the parents to urge attendance at the eye clinics, arrangements for the administration of atropine preliminary to examination, attendance at the eye clinics, measuring for spectacle frames and subsequent revisits to the homes to deliver the glasses and obtain payment for them and to see that they fit correctly. Incidentally a large number of visits are paid to the schools and homes at the request of the School Teachers and School Attendance Officers.

Throughout the year a high standard of work has been maintained by the Assistant School Medical Officers and the School Nurses, and I find that the help thus given is thoroughly appreciated by Teachers and other people intimately associated with the schools, FOLLOWING UP AND GENERAL SUPERVISION.

The system now in practice with regard to following up with a view to ensuring treatment is as follows :—The School Nurse visits the homes of all children for whom treatment has been recommended by the Assistant School Medical Officers; if she thinks that local assistance is required in any individual case she then sees someone in the neighbourhood who is likely to take an interest in the family, or else she refers the case to me and I forward the particulars to the local Care Committee.

Owing to the re-establishment of medical staff on the pre-war footing, I have found it practicable to arrange for re-inspection by the School doctors within about three months of the routine medical inspection at a school. The doctors are thus placed in a position to advise with regard to the urgency of any particular case previously referred for treatment.

Mention must also be made of the valuable assistance of the Tuberculosis Officer, Dr. A. Richmond, to whom many children are referred for advice and supervision.

The following summary of the work done by the School Nurses during the year includes visits paid in connection with general supervision as well as following up :—

Nun	nber	visits to schools	773
• ,	,	" homes 2,7	75
	,	inspections	13
,	,	instances in which verminous conditions (lice and nits) were found in the children's	
		heads 2,7	59
,	,	exclusions owing to verminous conditions 7	84

The appointment in July, 1920, of an additional whole-time School Nurse, has ensured a more effective supervision over the children.

#### TREATMENT.

Up to 1918 the only treatment undertaken at the expense of the Education Committee was X-ray treatment of ringworm. This disease was formerly treated at three centres—Reading, Newbury and Oxford; but owing to circumstances arising out of the war only the first has been available during the past four years. Twenty-five cases were treated in 1920.

The Managing Committee of the Newbury District Hospital has decided not to re-open the Newbury Centre for X-ray treatment of ringworm. No definite reply has at present been received with regard to the Oxford Centre.

In February, 1918, treatment of scabies by means of soft soap and sulphur ointment (half B.P. strength) was instituted, the treatment being limited to cases not receiving medical attention.

The School Nurses distribute the soft soap and ointment, and give directions as to their proper use and as to the necessary disinfestation of clothing, bedding, etc.

During 1920 the number of cases under treatment by the School Nurses showed a considerable reduction on the number reported in 1919; but I am inclined to think that this disease has become so generally disseminated that it will be many years before the incidence is reduced to its pre-war level.

The 102 cases under treatment (12 carried on from the previous year) occurred in 57 families and 37 different localities. Twelve of the children were still under treatment at the end of the year, the remaining 90 were cured. Of the 90 cured cases, cure was effected within a month in 39 cases, six weeks in 2 cases, two months in 27, and three months in 8. Of the remaining 14 cases that were cured, treatment was not finally effective until four months in 1 case, five months in 6 and six months in 7.

In the 102 cases under treatment the probable source of infection could not be ascertained in 58 cases. In 11 instances it was ascribed to school mates, in 11 to soldier or sailor brothers, in 2 to members of the W.A.A.C., and in 20 to other relatives or members of the household.

In 1918 a scheme for travelling eye-clinics for the estimation and correction of errors of refraction in elementary school children was approved by the Education Committee and sanctioned by the Board of Education.

Arrangements were made for holding refraction clinics at convenient centres, and Mr. Adams, Honorary Surgeon to the Oxford Eye Hospital, and Dr. Charsley, Assistant Surgeon to the Royal Westminster Ophthalmic Hospital, were appointed for the purpose—the former for the north and west of the county, the latter for the south and east. In 1919 Mr. Adams resigned his appointment and Dr. H. G. Frean took over his clinics from 1st October, but, owing to illness, was unable to continue the work and resigned in January, 1920. Mr. Adams very kindly consented to resume duty temporarily and carried on till the appointment ot Dr. O. B. Pratt in April, 1920. During 1920, 81 sessions were held at 14 different centres. The total number of children examined was 608; glasses were prescribed in 495 cases and were obtained in 368 cases. No contribution towards the cost of the glasses was made by the Education Committee: in the majority of cases the parents were able to afford the cost and in some of the remainder assistance from charitable persons was forthcoming.

The selection of children for examination by the specialists was carried out by the School Nurses in consultation with the Head Teachers and assisted by the records of previous medical inspections. In addition, the School Nurses arranged for the administration of Atropine preliminary to examination, assisted at the clinics and followed up the cases in order to ensure that the glasses were obtained and correctly used. The Ophthalmic Surgeons arranged for any necessary re-examination of cases.

During 1919, a scheme for dental treatment was submitted to the Education Committee and approved. The scheme provided for the appointment of a whole-time dentist and also part-time work. The appointment of a whole-time dentist was temporarily postponed but local arrangements were made for the Abingdon and Clewer school children, the Education Committee having appointed Mr. F. S. Dunkin School Dentist at Abingdon, and Mr. H. Treleaven School Dentist at Clewer. Work in both places was commenced in December, 1919, but treatment was not completed until after the beginning of the New Year.

In consequence of the difficulty found in working a part-time dental scheme on the "session" basis, I suggested the adoption of payment per case treated and the Education Committee is still in correspondence on the matter with the Board of Education. Meanwhile, the dental work in Abingdon has been suspended and the Berkshire Education Committee has ceased to be responsible for the Clewer Schools, owing to the incorporation of the parish of Clewer Without in the Borough of Windsor.

In the Parish of Aldermaston gratuitous dental treatment has been available for many years through the generosity of a private individual, and in two other areas special terms for the dental treatment of elementary school children have been arranged by the local Care Committees.

#### SECONDARY SCHOOLS.

During 1920 provision was made for the medical inspection of children attending Secondary Schools and the work of inspection was commenced in September.

Dr. Florence Armitage of Reading was appointed as a part-time officer for the medical inspection of the girls and arrangements were made for the inspection of the boys by the existing staff of Assistant School Medical Officers.

The arrangements provide for medical inspection of every child on admission to school and for annual inspection of all children over 12 years of age.

In order to ensure the examination of children within a short time of admission to school, each school is visited every term ; this practice allows for re-inspection of children who need to be kept under observation and also enables the school staff to submit any special case for examination.

Attendance of parents at the time of medical inspection is encouraged, as much more influence can usually be effected through a personal interview than by written advice. I am glad to say that the invitation to attend is generally accepted and appreciated.

Children from the Secondary Schools are allowed to attend the eye clinics established for Elementary School children and there would be no objection to use being made of the existing arrangements for X-ray treatment of ringworm.

The schools on the list for medical inspection are as follows :--

#### COUNTY SCHOOLS.

Faringdon County Girls' School Maidenhead County Boys' School Maidenhead County Girls' School Newbury County Girls' School Wallingford County Grammar School (Boys and Girls) Windsor County Boys' School Windsor County Girls' School.

#### AIDED SCHOOLS.

Winkfield, Bracknell Ranelagh School (Boys and Girls) Newbury Grammar School (Boys).

Statistics for the Secondary Schools considered as a group, are given in the last two tables inserted at the end of this report.

Shire Hall, Reading, 30th April, 1921. GERARD C. TAYLOR, School Medical Officer. TABLE 1.

NUMBER OF CHILDREN INSPECTED 1st JANUARY, 1920, TO 31st December, 1920. A. "Code" Groups.

		Entrants.								
1	\ge.	3	4	5	6	Other Ages.	Total.			
Boys			18	731	259	129	1137			
Girls		 	18	649	278	112	1057			
Total	s	 	36	1380	537	241	2194			

Age.	Inter- mediate Group.	Leavers.							
1130.	8	12	13	14	Other Ages.	Total.	Grand Total.		
Boys	1016	909	290	22	1	1222	3375		
Girls	919	925	. 314	31	1	1271	3247		
Totals	1935	1834	604	53	2	2493	6622		

#### B. GROUPS OTHER THAN "CODE."

	Intermediate Group (other than 8 years).	Special Cases.	Re-examinations ( <i>i.e.</i> , No. of Children Re-examined).
Boys	 1271	664	473
Girls	 1150	667	466
Totals	 2421	1331	939

#### INSPECTION, TREATMENT, &C., OF CHILDREN DURING 1920.

(1)	Total number of children medically inspected	10374
(2)	Number of children in (1) suffering from defects (other than un- cleanliness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment)	1142
(3)	Number of children in (1) who were referred for treatment (exclud- ing uncleanliness, defective clothing, &c.)	3000
(4)	Number of children in (3) who received treatment for one or more defects (excluding uncleanliness, defective clothing, &c.)	1279

	2			
- 12	· A.	DI	12	0
	14	BL	1.	L.
-		~~~		-

RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1920.

	pa	100 + +		160
Defect or Disease.	Number referred for treatment.	Number requiring to be kept under observation, but not referred for treatment.	Number referred for treatment.	Number requiring to be kept under observation, but not referred for treatment.
Malnutrition	40	320	8	32
Uncleanliness Head	190 126	22 6	42 30	4 3
( Pingworm   Head	3			·
i body	1 43		1	
Skin Skin Impetigo	45		3	
Other Diseases				
(non-Tubercular) Blepharitis	26 45	25	4	1
Conjunctivitis	19		i	
Corneal Ulcer	1	1		
Eye Corneal Opacities	4	i	2	
Defective Vision	438	90	56	10 -
Squint Other conditions	47 21	15	6	5
( Defective Hearing	23	4	1	
Ear Otitis Media	34	2	3	
Other Ear Diseases Enlarged Tonsils	12 . 95	132	5	- 3
Adenoids	41	13	3	1
Throat Enlarged Tonsils and Adenoids	99	31	12	5
Other conditions	31	15	6	5 3
Enlarged Cervical Glands (non-Tubercular)	22	38 27	1	ï
Defective Speech Teeth-Dental Diseases	3 380	8	31	3
Heart and ( Heart ) Organic	5	51	5	3 8 6
Circulation Disease ( runctional	2 87	21 16		6 2
(Bronchitis	34	22	í	2
Lungs Other non-Tubercular				
Diseases	1	. 2	1	1
Pulmonary : Definite	58	15	4	10
Suspected	48	122	8-	9
Tabasia Glands	35	10	4	2
Tuberculosis Spine	1			2 1
Hip				2
Other Bones and Joints Skin	2		1	
Other forms	2	25	1	32
Nervous Epilepsy	ï	5		2
System Chorea	1 6	11	2	
( Rickets	3	2 2 5		1
Deformition   Spinel Currenture		2		1
Other forms	4	5	1	

#### TABLE 3.

## NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA IN 1920.

			Boys.	Girls.	Tota
Blind (inclue partially b	ding blind).	Attending Public Elementary Schools Attending Certified Schools for the Blind Not at School	2 4 	3 6 1	5 10 1
Deaf and Du (including deaf).		Attending Public Elementary Schools Attending Certified Schools for the Deaf Not at School	 15 1	 4 	19 1
Mentally	Feeble	Attending Public Elementary Schools	35	23	58
Deficient.‡	Minded.	Attending Certified Schools for Mentally Defective Children Notified to the Local (Control) Authority	1		1
		during the Year	1 13	··· 8	21
	Imbeciles	At School	3 27	18	3 45
	-	during the Year	7	4	11
	Idiots.	Notified to the Local (Control) Authority	4	5	9
		during the Year	2	1	3
Epileptics.		Attending Public Elementary Schools Attending Certified Schools for Epileptics		6 	15 3
		Not at School	6	6	12
Physically Defective.	†Pulm. Tuber-	Attending Public Elementary Schools Attending Certified Schools for Physically	2	2	4
	culosis.	Defective Children Not at School	3 5	2 3	5 8
	†Other forms of	Attending Public Elementary Schools Attending Certified Schools for Physically	4	5	9
	Tuber- culosis.	Defective Children	6 7	27	8 14
	curosis.	Not at School	'		14
	Cripples other	Attending Public Elementary Schools Attending Certified Schools for Physically	57	47	104
	than - Tuber-	Defective Children Not at School	2 15	8	23
	cular.				
Dull or Bacl	kward.*	Retarded 2 years	224	166	390

\* Judged according to age and Standard.

† Notified cases only.

‡Over 5 but under 14 years of age.

#### TABLE 4.

#### TREATMENT OF DEFECTS, 1920.

In the following table are set out particulars obtained as to the number of defects treated, and the results of such treatment.

	No. of defects found for which treatment was considered necessary.			ts for which . available.	s treated.		Results of Freatment,			f. d.
Condition.	From pre- vious year.	New.	Total.	No. of defects for which no report is available.	No. of defects treated.	Remedied.	Improved.	Unchanged.	No. of defects not treated.	Percentage of defects treated
Clothing	3	1	4		3		3		1	75.0
Footgear				4.11						
Cleanliness of head	141	209	350	79	224	65	122	37	47	63-9
Cleanliness of body	92	171	263	89	139	39	79	21	35	52.3
Nutrition	104	71	175	42	121	15	68	38	12	69-1
Nose and throat	208	325	533	183	167	73	28	66	183	31-3
External eye disease	13	37	50	14	31	15	12	4	5	62.0
Ear disease	10	58	68	16	41	15	20	6	11	60.2
Teeth	166	390	556	131	129	70	7	52	296	23.2
Heart and Circulation	102	134	236	103	116	23	55	38	17	49.1
Lungs	37	165	202	62	129	48	75	6	11	63-8
Nervous system	4	12	16	4	11	3	7	1	1	68.7
Skin	67	119	186	44	142	112	23	7		76.3
Rickets	1	4	5	1	2		2		2	40.0
Deformities		6	6	1	3		3		2	50.0
Non-pulmonary		10	10	3	- 7		7			70.0
tuberculosis Speech	1		1		1		1 .			100.0
Mental condition		4	4	2	1			1	1	25.0
Vision and squint	187	475	662	121	436	334	85	17	105	65.8
Hearing	. 5	20	25	7	14		7	7	4	56.0
Miscellaneous	144	121	265	98	148	47	62	39	19	55.8
			-		-	-				
Totals	1,285	2,332	3,617	1,000	1,865	859	666	340 ·	752	51.5

	Age in Years,	Con	dition.	Name of Institution.	Admitted.
DAC have	16	Dentin		IND. Deighten Cohoolfer Dlind	1/6/12
R.A.C., boy	16	Partial	ly Blind	Brighton School for Blind Boys	4/6/13 (Left 16/7/20)
D.E.L.C., girl	17	Ditto		Swiss Cottage Institution	3/6/14
				for the Blind	Liability for main-
					tenance taken over by Higher Educa-
					tion Sub-
					Committee from
S.L.H.T., boy	12	Ditto		Edgbaston Royal Institu-	January, 1920) 14/10/14
	10	There		tion for the Blind	
C.W.N., boy	16	Ditto	••• •••	School for the Blind, West- bury-on-Trym, Bristol	5 9/16 (Left 16/12/20)
B.S., girl	9	Ditto		Edgbaston Royal Institu-	
P.P.A. wint		D'44		for the Blind	16 (1.17)
E.E.A., girl	11	Ditto		School for the Blind, West- bury-on-Trym, Bristol	16/1/17
D.A.A. girl (sis-	9	Ditto		Ditta	28/8/17
ter of E.E.A.) K.J., girl	9	Ditto		Exeter Institution for the	8/3/18
K.J., girl		Ditto		Blind	0/3/10
B.I.G., girl	11	Ditto			11/3/20
W.P. J., boy	9	Ditto		bury on-Trym, Bristol Brighton School for Blind	1/9/20
		Dino		Boys	10,20
D . / T	1.5	D		ND DUMB.	22/0/11
B.A.T., girl	15	Dear an	nd Dumb	Royal Institution for the Deaf and Dumb, Derby	
G.H.P., boy	13	Ditto		Ditto	29/8/13
G.A.S., boy	15	Ditto		Edgbaston Royal Institu- tion for the Deaf and	3/9/13 Liability for
				Dumb, Birmingham	taken over by
					. Windsor Borough
					Education Authority,
A.E.M., boy	14 .	Ditto			3/9/13 / 9/11/20
S.J.N., boy	15	Ditto		Royal Institution for the	16/1/14
L.F., boy	16	Ditto		Deaf and Dumb, Derby Royal School for Deaf	
				and Dumb Children,	
L.J.C., boy	12	Ditto		Margate Ditto	1/1/15
A.J.P., boy	13	Ditto		Edgbaston Royal Institu-	8/3/15
				tion for the Deaf and	
L.H., boy	12	Ditto		Dumb, Birmingham Royal Institution for the	20/8/15
				Deaf and Dumb, Derby	
L.P., boy(brother	11	Ditto		Ditto	26,8/16
of G.P.H.) P.H.F., boy	15	Ditto		Edgbaston Royal Institu	25/9/16
				tion for the Deaf and	
E.E.P , boy (bro-	10	-Ditto		Dumb, Birmingham Royal Institution for the	10/8/17
ther of B.N.P.)	10	Ditto	••• •••	Deaf and Dumb, Derby	
M.A.F., girl (sis-	· 11	Ditto	•••	Royal School for Deaf	4/9/17
ter of L.F.)				and Dumb Children Margate	
S.H.C., boy	10	Ditto		Royal Institution for the	
				Deaf and Dumb, Derby	

#### CHILDREN IN RESIDENTIAL SPECIAL SCHOOLS DURING 1920.

	Age in Years.	Condition.	Name of Institution.	Admitted.
J.E.H., boy	10	DEAF AN Deaf and Dumb	D DUMB. Royal School for Deaf and Dumb Children, Margate	
B.M., girl E.O.G., girl E.W.J., boy	10 13 8	Ditto Ditto Ditto	Ditto Ditto Royal Institution for the Deaf and Dumb, Derby	
W.N., boy	12	Ditto	Royal School for Deaf and Dumb Children, Margate	(Liability for
				Borough Education Authority, 9/11/20)
R McC., boy A.E.G.E., boy W.F.G., boy	15 14 9	Epileptic Ditto Ditto	Much Hadham, Herts Lingfield Colony Ditto	1/10/17 16/4/19 16/12/20
G.W.G.B., boy	15	MENTALLY Feeble-minded	DEFECTIVE. Littleton House, Cambridge	27/4/14
A.W.S., boy E.J.R., boy	9 12	PHYSICALLY Birth Palsy Dislocation Left Hip	DEFECTIVE. Heritage Craft Schools, Chailey Ditto	15/10/19 (Left 3/11/20) 3/11/20

CHILDREN IN RESIDENTIAL SPECIAL SCHOOLS DURING 1920-Contd.

NUMBER OF CHILDREN INSPECTED, 1920.

SECONDARY SCHOOLS.

Specials.	23	80	133	
Total.	227	161	388	
17	13	-	3	
16	5	4	9	
15	19	12	. 31	
14	27	12	39	
13	5	15	49	
12	37	31	68	
11	4	47	16	
10	29	21	50	
6	15	4	19	
œ	9	-	1	
2	e	2	0	
9	4	4	00	
in	ŝ	7	12	
	1	• • 1	:	
	:	:	1	
Age	. :	:	Totals	
	Boys	Girls		

15

SECONDARY SCHOOLS.								
	Routine Inspections.		Specials.					
De	Number referred for treatment.	Number requiring to be kept under observation, but not referred for treat - ent.	Number referred for treatment.	Number requiring to be kept under observation, but not referred for treatment.				
Malnutrition		7	31	4	2			
Uncleanliness	(Head							
Oncicaminess	Body							
	Ringworm Head Body	2						
	Scabies							
Skin	Impetigo							
	Other Diseases							
	(non-Tubercular)							
	Blepharitis							
	Conjunctivitis Keratitis							
	Corneal Ulcer							
Eye	Corneal Opacities							
	Defective Vision	24	6	1				
	Squint	5	1					
	Other conditions	1 .	1					
P	Defective Hearing		1 1					
Ear	Otitis Media Other Ear Diseases	1						
•	(Enlarged Tonsils	6	6	ï				
	Adenoids	1	1 I					
Nose and	Enlarged Tonsils and				1.19			
Throat	Adenoids	2		1	P day			
	Other conditions	4	·					
Enlarged Cervi	ical Glands (non-Tubercular)							
Defective Spee		10	1					
Teeth-Dental	( Heart (Organia	19	2	3				
Heart and	Disease Functional		6					
Circulation	Anæmia	12		14				
	Bronchitis		4					
Lungs	Other non-Tubercular							
	Diseases							
	Pulmonary : Definite		1					
	Successfed	2	1					
Tuberculosis (	Non-Pulmonary :	-	1					
	Glands							
	Spine							
	Hip							
	Other Bones and Joints							
	Skin	*** *						
	Other forms			1				
Nervous	Chorea		3					
System	Other conditions	1		2				
	Rickets				1			
Deformities	Spinal Curvature				1			
01. 5.	Other forms				1			
Other Defects and Diseases								

# RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION, 1920.

