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County Borough.**

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County Borough of Burton upon Trent.

EDUCATION COMMITTEE.

ANNUAL REPORT

UPON THE

SCHOOL MEDICAL SERVICE

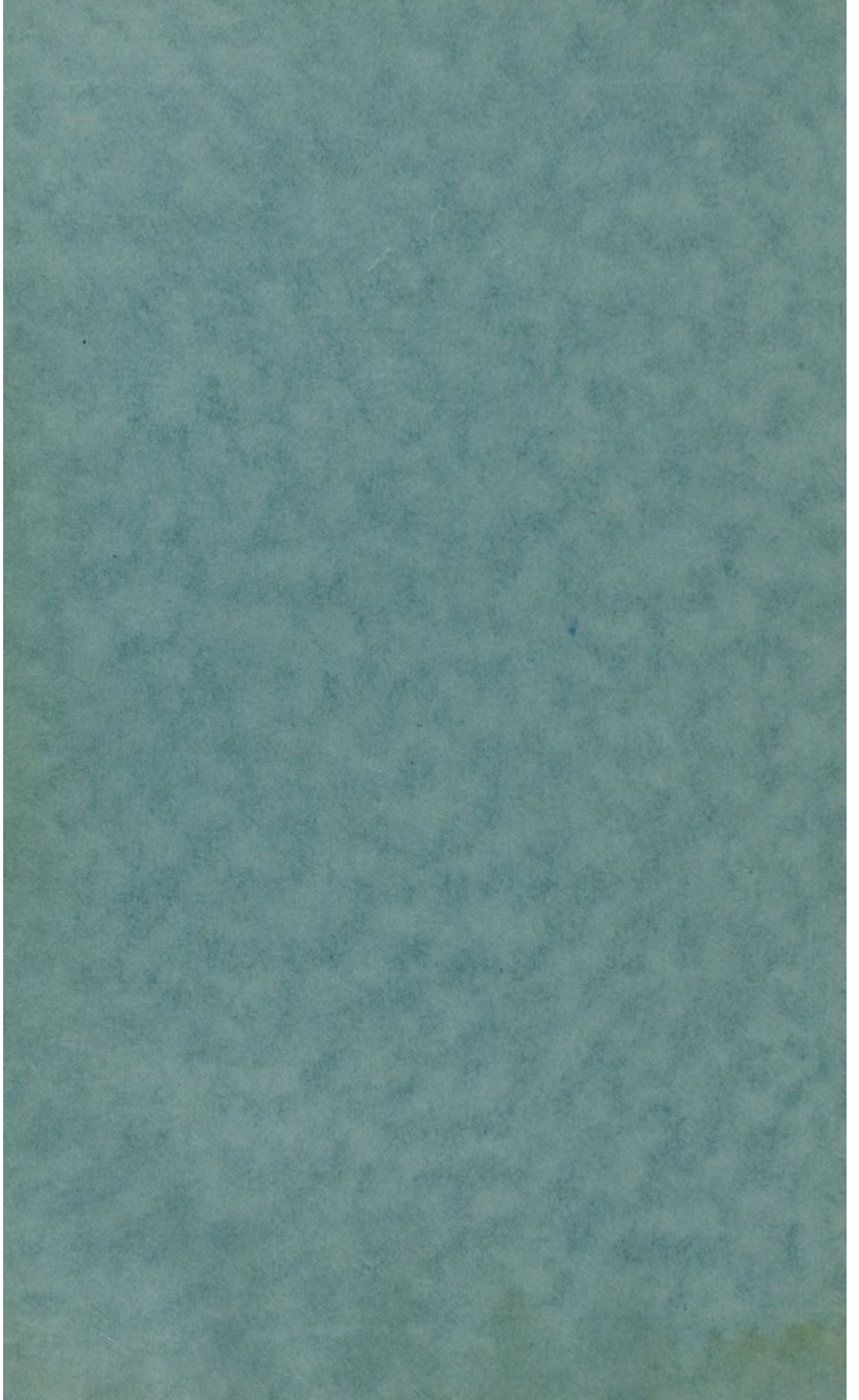
FOR THE YEAR 1937,

BY

JAMES M. COWIE,

M.D., D.P.H.,

SCHOOL MEDICAL OFFICER.





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Journal of the
Faculty of Medicine
of the University of Toronto
ANNUAL REPORT
FOR THE YEAR 1911
JAMES M. COWIE
M.D.
Dean of the Faculty

Staff of the School Medical Service.

School Medical Officer :

JAMES M. COWIE, M.D., Ch.B., D.P.H.

Assistant School Medical Officers :

THOMAS ROSS, M.B., Ch.B., D.P.H.

E. ANNE PERROTT, M.B., B.S., D.P.H.

Orthopaedic Surgeon :

J. H. MOIR, D.S.O., M.C., M.D., Ch.B., D.P.H.

(Part Time).

School Oculist :

EDWIN R. JAGGER, M.R.C.S., L.R.C.P., D.O.M.S.

(Part Time).

School Dentist :

Miss J. H. W. HEPBURN, L.D.S.

School Nurses :

Miss M. E. COLEMAN, State Registered Nurse and State Certified
Midwife.

Miss W. JAMES, State Registered Nurse and State Certified
Midwife.

School Dental Nurse :

Miss M. MOORE, State Registered Nurse and State Certified
Midwife.

Masseuse at Orthopaedic Clinic :

Miss M. J. W. ABBOTTS,

Cert. Ch. Soc. of Massage and Medical Gymnastics and M.E.

(Part Time).

Clerk :

MRS. G. H. WATSON.

Staff of the School Medical Division

John M. Galt, M.D.

Chief of School Medical Division

John M. Galt, M.D.

Assistant Chief of School Medical Division

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Assistant Chief of School Medical Division

Annual Report of the School Medical Officer.

TO THE LOCAL EDUCATION AUTHORITY,
BURTON UPON TRENT.

I have pleasure in submitting the Annual Report of the School Medical Officer for the year 1937.

The report is in the customary form of a commentary on the findings at the statutory medical inspections of school children, and supplementary inspections and treatment provided by the School Medical Service.

As was expected, the incidence of Measles dropped almost to vanishing point during 1937, 1936 having been an epidemic year, but there was a decided increase in the case incidence of Scarlet Fever, Mumps, Chicken Pox, and to a lesser extent, Diphtheria. Scarlet Fever and Diphtheria, moreover, were already at a high level of incidence at the beginning of the year.

An attempt to stimulate interest in the provision for Diphtheria Immunisation by the distribution of explanatory leaflets to children at school, resulted in an appreciable increase in the requests for immunisation of children of all ages. This caused considerable pressure on the time and energy of the School Medical and Nursing Staff for a period, but there were towards the end of 1937, signs of waning interest and a return to former apathy on the part of parents of susceptible children. Later in this Report a summary of results of immunisation against Diphtheria is given. It is to be noticed that while undoubtedly the children immunised have acquired protection against Diphtheria, the total number of children immunised in relation to the body of still susceptible children in the

Borough, is so small as to leave unaffected the case incidence of Diphtheria. Large scale immunisation in other centres, points to the conclusion that at least 60% of children of school age, or better still, about 33% of pre-school children must be immune to Diphtheria before a significant decline occurs in the Diphtheria case rate.

Malnutrition remains about the level of recent years, there being however a slight increase in the number of under-nourished entrants.

1. **Staff.** Personnel remained unchanged during 1937, viz. :—
 Dr. Thomas Ross, Assistant School Medical Officer.
 Dr. E. Anne Perrott, Assistant School Medical Officer.

2. **Co-ordination.** No change has taken place in the administration of the School Medical Service during the year, and close co-operation with the Health, Infant Welfare, Tuberculosis, Mental Deficiency, and other services continues.

The assistance of the General Practitioners, the Factory Surgeon, the staffs of the Voluntary Institutions and Associations has been valuable, and I again express thanks for their co-operation.

2. **School Hygiene.** The opening of Clarence Street School at the beginning of the year resulted in the expected improvement of conditions in several other schools, and the premises at Clarence Street have proved satisfactory in practice. Improved facilities for routine medical inspection of children in school have been one of the lesser gains of the increased accommodation.

The following figures summarise the present position in relation to the points noted :—

Accommodation	...	...	9,502
Average number on roll	...	...	7,008
Average attendance	...	...	6,173

4. **Medical Inspection.** Medical inspection consists of two divisions as before.

1. Routine inspection of
 - (a) Entrants—consisting of children admitted to school during the year, or those children who for any reason have not previously been examined.
 - (b) Intermediates—aged 9 years next birthday.
 - (c) Leavers—aged 13 years next birthday.
2. Supplementary inspections of defects found at routine inspections or specially referred by parents, school teachers, or school nurses. This type of inspection is repeated each term until the defect is remedied.

The number of routine inspections in statutory groups was as follows :—

Entrants	...	...	...	678
Intermediates	...	...	...	738
Leavers	...	...	...	643
				2,059

The number of supplementary inspections was 8,472.

In addition, the School Nurses made 20,255 examinations during 12 visits to each school. These general inspections are made with the particular objects of detecting uncleanliness, and contagious skin diseases, of giving hygienic advice to scholars and teachers, and of following up the results of treatment and advice given by them and the School Medical Officers.

In the main, a slight decline is again to be observed in the numbers under each of the above headings.

**AVERAGE HEIGHT AND WEIGHT OF CHILDREN ROUTINE
EXAMINED DURING THE PAST 2 YEARS.**

Boys.

Age.	1936.		1937.	
	Height.	Weight.	Height.	Weight.
4 yr.	103.9	17.7	102.7	17.5
5 yr.	108.1	18.9	107.6	18.5
6 yr.	112.7	20.4	114.8	20.8
8 yr.	125.4	25.5	124.9	25.9
9 yr.	129.6	27.5	128.2	27.2
12 yr.	144.0	37.1	144.9	37.7
13 yr.	145.9	38.8	145.8	40.0

Girls.

Age.	1936.		1937.	
	Height.	Weight.	Height.	Weight.
4 yr.	103.2	17.6	101.9	17.3
5 yr.	107.2	18.1	106.5	18.3
6 yr.	111.5	19.1	111.4	19.8
8 yr.	125.8	25.2	123.3	24.9
9 yr.	129.0	27.4	128.1	27.0
12 yr.	144.9	38.1	146.2	39.3
13 yr.	150.7	42.1	149.2	40.7

The Height is in centimetres.

The weight is in kilogrammes.

5. Findings of Medical Inspections.

(a) **Nutrition** is now assessed on clinical grounds and is classified as

- A. Excellent
- B. Normal.
- C. Slightly subnormal.
- D. Bad.

Table II. B. at the end of this report gives the numbers and percentages coming into each of the above categories. 7.44% of

the children examined at routine inspections were found to be under-nourished, and three (0.14%) were classified as badly nourished.

Lack of sufficient sleep continues to have a harmful effect on general nutrition and in this parents are much to blame by failing to exercise due control.

(b) **Uncleanliness.** A slight decline in children found to be unclean is to be noted, 444 children having been found in an unclean condition, requiring 515 exclusions during the year. The same families are responsible for the majority of these instances of uncleanliness in several successive years.

(c) **Minor ailments and diseases of the skin.** 698 cases were reported to the Minor Ailments Clinic, or to own doctor or hospital as a result of routine and special inspections. 11 were cases of scabies and 116 of skin diseases other than scabies.

(d) **Visual defects and external eye diseases** found at the medical inspections to require treatment were as follows :—

1. Defective vision not including squint	...	...	...	308
2. Squint	...	...	...	3
3. External eye disease	...	...	...	121

of the latter, 92 were blepharitis or conjunctivitis.

(e) **Nose and Throat defects** found were as under :—

1. Chronic Tonsillitis only	...	...	...	125
2. Adenoids enlarged	...	...	...	3
3. Tonsillitis and Adenoids	...	...	...	16
4. Other conditions of nose and throat	...	...	...	71

Of the total tonsils and adenoids found defective, viz., 144, 21 were regarded as requiring treatment and so notified to parents. These figures indicate a tendency to conserve tonsils and adenoids except when they actually interfere with the efficiency of the scholar.

(f) **Ear disease and defective hearing** accounted for 69 of the defects found at medical inspections and the distribution under different headings is as follows :—

Defective hearing	14	(6)
Otitis Media... ..	19	(18)
Other ear diseases	36	(31)

The bracketed figures indicate the number of defects recommended for treatment, the remainder continuing under observation.

Otitis Media remains an important factor in the production of permanent deafness, and we attach much importance to the early and vigorous treatment of such cases. The majority of cases respond rapidly to Zinc Ionisation treatment carried out at the School Clinic in those cases which are not complicated by other defects more deeply seated in the ear than Otitis Media. No child was found during the year so deaf as not to benefit from the ordinary school curriculum.

(g) **Dental defects.** 6,555 children were examined by the School Dentist in the course of routine and special inspections. Of this total, 3,960 were found to require treatment.

(h) **Orthopaedic and Postural defects.** Defects of this type found at medical inspections numbered 34, of which 18 required treatment, and the remainder observation.

(i) **Heart Disease and Rheumatism.** Any child who has a history of rheumatism in any form, or of chorea, or is found to have a heart lesion with or without antecedent rheumatism or chorea, is closely supervised medically and it is probable that much permanent and crippling damage to hearts has been prevented by measures largely directed to restricting over-work of a damaged heart. It is difficult of course to make an apparently fit child understand the need for curbing a natural urge to dissipate energy,

but with the co-operation of parents and teachers impressed with the very real danger to the child's ultimate well-being, that energy can be so directed as to relieve the heart of strain.

The following table shows the incidence of heart disease and related conditions in school children at the end of 1937.

Children suffering from Heart or Rheumatic Diseases.

	Males	Females	Total
Congenital heart disease	1	5	6
Acquired heart disease			
(1) With no antecedent rheumatism...	7	3	10
(2) Following Chorea	0	4	4
(3) Following sub-acute or Chronic Rheumatism	7	5	12
(4) Following Rheumatic Fever ...	2	5	7
(5) Following Rheumatism and Chorea	1	1	2
No sign of Heart Disease but,			
(1) History of Chorea	4	11	15
(2) History of Rheumatic Fever ...	8	5	13
(3) History of sub-acute or Chronic Rheumatism	10	17	27
(4) History of Rheumatism and Chorea	1	2	3
	—	—	—
	41	58	99
	—	—	—

(j) **Tuberculosis.** Two cases of Non-Pulmonary Tuberculosis were found during the year, one of glands of neck requiring treatment, and the other of bones and joints requiring observation.

All Tuberculosis contacts were examined each term as has been done in previous years.

(k) **Crippling Defects.** During 1937 there was a considerable reduction in the number of children on the Register of physically defective children, viz., from 62 to 48.

The following table gives an analysis of these figures :—

	Number added in 1937.	Total number on Register.
Organic Heart Disease		
(Compensation not fully acquired)		
(a) Congenital —		2
(b) Acquired —		7
Tuberculosis of Bones and Joints ... —		3
Tuberculosis of other parts —		9
Deformities following Poliomyelitis ... —		9
Defective Vision (High Myopia, etc.) 2		10
Defective Hearing —		4
Congenital Deformities —		2
Miscellaneous 1		2
	—	—
	3	48
	—	—

Exclusions from School.

	No. of exclusions.
Uncleanliness	515
Skin Diseases—Impetigo and Sores	183
Scabies	21
Ringworm : Scalp	—
Body	7
Herpes	15
Miscellaneous Dermatitis	15
Ear Diseases—Otorrhoea	16
Furunculosis	3
Eye Diseases—Conjunctivitis	44
Blepharitis and Hordeola	6
Myopia	2
Throat—Tonsillitis and Sore Throat	33
Enlarged Glands	13
Other Diseases—Bronchitis	1
Rheumatism and Chorea	6
Epilepsy	1
Miscellaneous	75
	—
TOTAL ...	956
	—

6. **Following up.** This procedure is an important part of the School Medical Service, and is very often successful in producing the required action on the part of parents, a home visit being apparently much more effective than repeated written notices. Should the visits of the School Nurses fail to obtain the necessary treatment, recourse is occasionally made to the Inspector of the N.S.P.C.C. for action, on information from the Director of Education. Sparing use is made of this course of action but it is highly successful in urgent cases.

Following up by the School Nurses is of course complementary to the following up at medical re-inspections in schools.

The School Nurses made 107 visits during the year to the homes of school children in this connection and 36 for other purposes.

7. **Arrangements for Treatment.**

(a) **Malnutrition.** This condition when observed was treated on its merits, an attempt being made to assess factors other than actual lack of food contributing to its production. Anaemia was prescribed for, or the child was referred to its own doctor for treatment. Debility, causing the failure of assimilation was the reason for recommending and arranging holidays for a large number of children. Milk in school was recommended in every case of malnutrition and where the family income was below a certain level the milk was provided free, one-third pint twice per day. Difficulty is still being met in persuading parents of the supreme value of milk for children.

(b) **Uncleanliness.** Children found unclean in school are required to be cleansed by the parents as soon as practicable and usually the child is excluded until certified fit at the School Clinic. Failure to cleanse the child in a reasonable time may result in prosecution of the parents for the non-attendance at school of the excluded child. Four such prosecutions occurred during the year.

(c) **Minor Ailments and Diseases of the Skin.** 706 cases were treated at the Minor Ailments Clinic at the School Clinic, of these, 371 having skin conditions, 117 eye defects, 48 ear defects, and 170 having various minor injuries. 104 other cases received treatment at home from own doctor, or at Institutions.

These treatments, together with head examinations, necessitated 10,245 attendances at the School Clinic.

(d) **External Eye Disease.**

i. 117 cases, largely of conjunctivitis were treated at the School Clinic, whilst 32 cases received treatment otherwise.

ii. **Ophthalmic Report by the School Oculist, Edwin R. Jagger, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.O.M.S. (Lond.).**

Report on Refraction Clinic for 1937.

The total number of attendances at the Eye Clinic during 1937 was 903. It is customary to tabulate the various forms of refractive error found and such a list is appended hereto.

I claim no credit for recording the numbers and classification of patients examined at the School Clinic.

On attempting to review the work of the past year, one is impressed by the increasing volume. It is a growing practice for parents to visit the clinic to discuss problems arising out of the defective vision of their children, and this procedure while right in itself, occupies much time of the session. It is easy to see that approach of that limit where quality of work must of necessity give place to quantity, an inevitable consequence where increased work is crowded into a fixed time.

A noteworthy feature is the readiness with which treatment is accepted at the clinic, and it would seem that a former suspicion has been eradicated, but there are certain faults and errors which persist despite untiring efforts to overcome them. The chief of these is the rooted idea that glasses are ordered for school work

only. There seems to be no means of separating the term "School Clinic" from the idea of "glasses for school work only." It is incomprehensible how this idea is engendered and perpetuated. I would suggest that printed notices be supplied to all schools and to all parents concerned stating that "SPECTACLES PRESCRIBED AT THE SCHOOL CLINIC ARE TO BE USED CONSTANTLY AND FOR ALL PURPOSES." If some propaganda on these lines could be undertaken it would be a great benefit and would save much time and trouble.

The same helpful co-operation has been accorded to me, as in former years, by Drs. Cowie, Ross, and Perrott, and by the Nursing Staff, and I acknowledge my indebtedness to them for easing the work and smoothing out difficulties.

TREATMENT OF DEFECTIVE VISION, 1937.

Total number of children attending Refraction Clinics...	320†
Total number of attendances	903
Number prescribed glasses... ..	292‡
Number referred to Infirmary	1
Number found not to require glasses	28
Present glasses suitable	1
Refused treatment	1

† Includes 10 secondary school children.

‡ Includes 10 secondary school children.

ANALYSES OF FINDINGS.

Hypermetropia	208
Hypermetropic Astigmatism	277
Myopia	52
Myopic Astigmatism	72
Mixed Astigmatism	37
Squint and Hypermetropia	20
Squint and Hypermetropic Astigmatism	3
Squint and Myopia	1
Emmetropia	10

For the purposes of the analyses each eye has been taken into consideration separately.

There were six cases of marked Anisometropia.

(e) **Nose and Throat Defects.** The Local Education Authority has no special scheme for the treatment of diseased tonsils and adenoids, but such treatment is readily available at the Local General Hospital, and through the courtesy of the Infirmary Staff, we are provided with the information that 42 operations upon school children for diseased tonsils and adenoids were performed during 1937.

(f) **Ear Disease and Defective Hearing.** Treatment was continued during 1937 on the lines indicated in the 1936 report.

Zinc Ionisation was carried out in 11 cases.

Results : Cured 8 (72.7%). Not Cured 1 (9.1%). Incomplete Course 2 (18.2%).

The following table summarises the work of the Ear Clinic :—

Number of ear examinations	...	...	...	...	509
1. Minor conditions—					
Wax Impaction	...	...	...	...	31
Defective hearing	...	...	...	...	5
Furunculosis...	...	...	...	...	2
Foreign bodies	...	...	...	...	1
Polypus	...	...	...	...	2
					—
					41
					—
2. Otorrhoea. Result of treatment—					
(a) Routine treatment.					
Ears dry	...	...	...	...	21
Improved but still attending	...	...	...	...	5
Ceased attending	...	...	...	...	3
Transferred to own Doctor	...	...	...	...	2
Transferred to Infirmary	...	...	...	...	3
					—
					34
					—

(b) Special Treatment (Zinc Ionisation).						
Cured...	...	...	...	...	...	8
Not cured	...	...	...	...	...	1
						9
						—

(g) **Dental Defects.** 2,260 children were treated by the School Dentist. A total of 1,561 fillings were made, while 3,024 extractions were made, very largely of permanent teeth. The rise in the number of administrations of Nitrous Oxide Gas for general anaesthesia is a reflection of the increasing choice of this method as against the alternative local anaesthesia. Gas administrations numbered 411.

(h) **Orthopaedic and Postural Defects.** This department of remedial work continues to function at the Orthopaedic Clinic, Cross Street, under the direction of Dr. J. H. Moir, assisted by Miss M. J. W. Abbotts. Cases were seen on the first Friday of each month by Dr. Moir.

The following table shows the number of cases dealt with during the year :—

	Number of new cases.	Total number of attendances.
Health Committee	2	38
Maternity and Child Welfare Committee	13	173
Education Committee ...	27	2,696

Hospital Treatment is carried out where necessary by the Warwickshire Orthopaedic Hospital for Children at Coleshill. One new case was sent during 1937, and in all, 2 cases were treated at Coleshill.

(i) **Heart Disease and Rheumatism.** There is no special provision made for treatment of this type of case but a careful supervision is maintained of known affected children and their activities controlled so far as our advice is taken. One child suffering from rheumatic disease of the heart is being maintained at the Liverpool Home of Rest and her education is being continued.

(j) **Tuberculosis.** Six children were admitted to the Outwoods Sanatorium during the year through the Tuberculosis service.

Abdominal Tuberculosis	...	2
Spinal Disease	... ..	1
Observation	... ..	3

The observation cases were all discharged as non-tuberculous and the spinal case transferred to an Orthopaedic Hospital.

8. **Infectious Diseases.** A table of the common infectious diseases and their distribution throughout the schools is presented below :—

SCHOOLS AND INFECTIOUS DISEASES.

SCHOOL.	Whoop- ing Cough.	Chicken Pox.	German Measles and Measles	Scarlet Fever.	Diph- theria.	Mumps
Clarence Street	0	5	1	19	3	3
Winshill	4	1	0	10	3	9
Horninglow	9	26	1	13	34	52
Broadway	16	33	0	16	10	36
Mission Room, Stapenhill	13	1	21	3	1	11
Victoria Road	2	8	1	17	18	67
Grange Street	32	11	1	12	14	119
Holy Trinity	0	8	0	1	3	4
Christ Church	1	57	0	14	3	5
Shobnall Road	0	6	0	0	2	3
Hill Street and St. Peter's Street...	17	6	2	10	9	24
Guild Street	2	0	1	13	5	10
Wetmore Road	2	5	1	2	0	9
Uxbridge Street	11	51	6	42	9	35
St. Modwen's... ..	7	1	10	6	0	1
Goodman Street and Stafford Street	11	29	2	13	17	16
High Schools (Girls)	0	0	0	1	2	0
Grammar School	0	0	0	0	3	1
No School	28	20	17	109	50	8
Private School	0	0	0	1	0	0
Bond Street	7	6	0	2	0	16
Totals	162	274	64	304	186	429

Throughout the year, the incidence of Scarlet Fever maintained an unusually high level except for the months of September and October when the numbers were about the expected rate. Complications appear to be more frequent in the type of Scarlet Fever now prevalent, especially Otitis Media. In this connection, two school children required to have Mastoidectomy performed. Recovery was complete in each case before discharge from Hospital. Three deaths of school children from Diphtheria occurred during the year.

Six visits were made to school departments to investigate possible sources of Scarlet Fever or Diphtheria when an unusually large number of cases were coming from a particular school, or even class. The visits were equally divided as between Scarlet Fever and Diphtheria outbreaks.

As mentioned earlier in this Report, immunisation against Diphtheria was vigorously pursued and the following figures represent a summary of the results obtained.

Primary Schick Tests—Negative	334
Schick Negative three months after course of inoculations	900
Schick negative after extra injections	...	...	5
Incomplete courses but having two or more injections			47	
Incomplete course with less than two injections	...		24	

The Primary Schick Negative cases noted above represent those older children (above 7 years) who proved to be naturally immune by the Schick Test.

From the above results it is fair to say that 1,286 children out of 1,310 who commenced treatment may be regarded as having adequate protection against Diphtheria. Failure to complete courses was largely due to an understandable impatience with the length of time required for absolute completion of the course. It is to be noted that at least five visits per child is required and

in about 50% of the cases, those over 7 years of age, one more visit is necessary.

There were 12 deaths amongst children of school age during the year 1937.

Cause of Death.	Number.
Diphtheria	3
Broncho-pneumonia	1
Pulmonary Tuberculosis	1
Acute Primary Pneumonia	1
Acute Rheumatism	1
Septic Meningitis	1
Acute Gastro-Enteritis	1
Acute Nephritis with Rheumatic Heart Disease	1
Accident	2

VACCINATION TABLE, 1937.

Age Period.	Unvaccinated per cent.	Vaccinated per cent.	
		Under 4 Marks.	4 or more Marks.
Entrants ...	87.7	12.3	0
Intermediates	80.2	5.3	14.4
Leavers ...	58.7	8.3	33.0

The percentage of unvaccinated children continues to increase.

9. **Open Air Education.** There is no open air school in the Borough. Playground classes, school camps, and journeys to places of interest have been held as in previous years.

10. **Physical Training.** Remedial exercises are given in cases referred from school medical inspections, at the Orthopaedic Clinic, with generally good results. In addition, where necessary, Head Teachers are informed when modified physical training is thought necessary for particular children.

11. **Provision of Meals.** Provision of meals has not been found to be necessary in view of the supply of cheaper milk available under the Milk Marketing Board Scheme.

Free milk is supplied when the family income is below the scale set up by the Local Education Authority.

The particulars indicate the scope of the scheme during 1937.

Number of individual children supplied with free milk	... ..	316
Average number of children supplied with milk in school at a special price	... ..	2,911
Number of one-third pint bottles supplied free...		91,327
Number of one-third pint bottles supplied on payment	... ..	508,894

The children receiving free milk and those paying for milk on the recommendation of the Assistant School Medical Officers are examined each term, weight and general condition being ascertained.

Almost invariably an improvement is noted.

12. (a) **Co-operation of Parents.** The co-operation of parents is increasingly evident, especially in relation to specialist services such as Dental, Orthopaedic and Ophthalmic services. Routine inspections continue to be well attended by parents, with the exception of leavers, especially boys.

PERCENTAGE OF PARENTS PRESENT AT ROUTINE
INSPECTIONS, 1937.

School.	Infants.	Intermediates.		Leavers.		Total.
		Boys.	Girls.	Boys.	Girls.	
Bond Street	81	16.7	0	—	—	61.7
Broadway	76.1	33.3	75	6.1	18.8	42.9
Christ Church	76.5	32.1	42.8	—	—	54.0
Goodman St. and Stafford Street	81.3	14.3	66.6	—	14.3	34.2
Grange Street	83	33.3	45	—	—	71.4
Guild Street	—	—	—	3.1	30.8	15.3
Holy Trinity	50	12.5	9.1	—	—	42.7
Horninglow	58.1	20.1	12.8	—	—	33.3
Shobnall	100	47.1	62.3	9.9	39.4	58.3
Stapenhill	21.4	34	85.7	10	14.3	45.8
Stapenhill M.R.	79.5	—	33.3	—	33.3	60.0
St. Modwen's... ..	25	6.3	0	14.3	7.1	10.2
Uxbridge Street	71.9	30.8	39.5	—	—	47.6
Victoria Road	66.8	39.4	50	9.4	—	36.7
Wetmore Road	99	28.6	42.8	—	—	62.5
Winshill	62.9	13.3	42.7	4.5	20	41.3
Clarence Street	—	—	—	11.1	20	14.3

(b) **Co-operation of Teachers.** We must again repeat our thanks of previous years to the teachers for the part they play in the smooth running of the medical inspections. Their day-to-day contact with the children enables them to contribute valuable information when the children deviate from normal, either in function or behaviour, and this information is always readily given.

(c) **Co-operation of School Attendance Officers.** These officers serve as a useful link between the homes of children suffering from non-notifiable infectious diseases and the School Medical Service.

(d) **Co-operation of Voluntary Bodies.** We again sincerely thank the voluntary charitable bodies in Burton upon Trent for the invaluable work they have done for the children of the Borough. The Voluntary Aid Association never fails us when we invite their help, and have been particularly concerned in providing railway fares in necessitous cases to the Convalescent Homes.

The Children's Care Committee and the "Burton Observer" Uncle Jack's Fund enabled many children during the year to have holidays when most needed, for example, following a debilitating illness, and we are pleased to record that nearly always much benefit was gained.

A detailed report of the work of the Children's Care Committee is appended.

CHILDREN'S CARE COMMITTEE.

Report for the year 1937.

The Children's Care Committee was re-appointed by the Education Committee in November, 1936, and was constituted as follows :—

Mrs. Curzon, Miss Evershed, Mrs. Oakden, Mrs. Pidcocke, Mrs. Rowland, Mrs. Sanders, Mrs. Slator, Mrs. Templeman, Mrs. Walley, and Mrs. Williams.

The Officers were re-elected for 1937, viz. :—

Chairman—Mrs. Oakden.

Vice-Chairman—Mrs. Sanders.

Hon. Secretary and Treasurer—Miss Evershed.

In September, the resignation of Mrs. Oakden on account of leaving the town, was received with the deepest regret. Mrs. Oakden had been a very valuable member of the Committee for a very long period, and an able Chairman for many years.

In November, Mrs. Griffiths was appointed to the Committee.

106 cases were reported to the Committee during the year and were dealt with as follows :—

1. Girl, aged 12, kept at the Rest Home, Liverpool, for 6½ months.
2. Boy, ,, 12, sent to Convalescent Home, Rhyl.
- *3. Girl, ,, 11, do. do.
- *4. Girl, ,, 7, do. do.
5. Girl, ,, 9, do. do.
6. Girl, ,, 8, do. do.
7. Girl, ,, 9, do. do.
8. Girl, ,, 8, do. do.

9.	Boy, aged	$6\frac{1}{2}$,	sent to Convalescent Home, Rhyl, for 2 months
10.	Girl,	„	$9\frac{3}{4}$, do. do.
11.	Girl,	„	10, do. do.
12.	Boy,	„	6, do. do.
13.	Girl,	„	12, do. do.
14.	Girl,	„	8, do. do.
15.	Girl,	„	11, do. do.
16.	Boy,	„	12, do. do.
17.	Girl,	„	6, do. do.
*18.	Boy,	„	7, do. do.
19.	Boy,	„	6, do. do.
*20.	Girl,	„	13, do. do.
*21.	Girl,	„	12, do. do.
22.	Girl,	„	$8\frac{1}{2}$, do. do.
23.	Boy,	„	9, do. do.
24.	Boy,	„	9, do. do.
25.	Girl,	„	8, do. do.
26.	Girl,	„	9, do. do.
27.	Girl,	„	7, do. do.
*28.	Girl,	„	9, do. do.
*29.	Boy,	„	13, do. Bournemouth.
30.	Boy,	„	8, do. Rhyl.
31.	Girl,	„	5, do. do.
32.	Boy,	„	7, do. do.
33.	Girl,	„	13, do. do.
34.	Boy,	„	5, do. do.
35.	Boy,	„	11, do. do.
36.	Boy,	„	12, do. Bournemouth.
37.	Girl,	„	12, do. Rhyl.
38.	Boy,	„	11, do. do.
*39.	Girl,	„	6, do. do.
40.	Girl,	„	6, do. do.
41.	Boy,	„	$9\frac{1}{2}$, do. do.
*42.	Girl,	„	13, do. Southport.
43.	Boy,	„	9, do. Rhyl.

*44.	Girl, aged	6,	sent to Convalescent Home,	Southport.
45.	Girl,	„	10 $\frac{3}{4}$,	do. Rhyl.
46.	Girl,	„	9 $\frac{1}{2}$,	do. do.
47.	Girl,	„	10,	do. Southport.
*48.	Girl,	„	11,	do. Rhyl.
49.	Girl,	„	6 $\frac{1}{2}$,	do. do.
50.	Boy,	„	9,	do. Southport.
51.	Boy,	„	9,	do. do.
*52.	Boy,	„	9,	do. do.
*53.	Boy,	„	7,	do. do.
*54.	Girl,	„	10,	do. do.
*55.	Boy,	„	6 $\frac{1}{2}$,	do. do.
*56.	Girl,	„	10,	do. Rhyl.
*57.	Boy,	„	8,	do. do.
*58.	Boy,	„	12 $\frac{1}{4}$,	do. Southport.
*59.	Boy,	„	9,	do. do.
*60.	Boy,	„	11,	do. do.
61.	Girl,	„	14,	do. Rhyl.
*62.	Boy,	„	5,	do. Southport.
63.	Girl,	„	12,	do. Rhyl.
64.	Girl,	„	12,	do. do.
65.	Boy,	„	6,	do. do.
*66.	Boy,	„	11,	do. Southport.
*67.	Boy,	„	11,	do. do.
*68.	Boy,	„	6,	do. do.
69.	Boy,	„	7,	do. Rhyl.
*70.	Boy,	„	10,	do. Southport.
*71.	Boy,	„	10,	do. do.
72.	Boy,	„	7,	do. Rhyl.
73.	Boy,	„	8,	do. do.
74.	Boy,	„	11,	do. do.
*75.	Boy,	„	13,	do. Southport.
*76.	Girl,	„	11,	do. Rhyl.
77.	Girl,	„	6,	do. do.
78.	Boy,	„	5,	do. do.
79.	Boy,	„	10,	do. do.

*80.	Boy, aged	4½,	sent to Convalescent Home, Southport.
*81.	Boy,	„ 12,	do. Rhyl.
82.	Boy,	„ 10,	do. Southport.
83.	Girl,	„ 7,	do. Rhyl for 7 weeks.
84.	Girl,	„ 11,	do. Bournemouth.
85.	Girl,	„ 9½,	do. Rhyl.
*86.	Boy,	„ 12,	do. Southport.
87.	Boy,	„ 11,	do. Rhyl for 2 mths.
88.	Boy,	„ 6,	do. do. do.
89.	Girl,	„ 9,	do. Rhyl.
90.	Boy,	„ 13,	do. Southport.
91.	Girl,	„ 6,	do. Rhyl.
*92.	Boy,	„ 13,	do. Southport.
93.	Boy,	„ 6,	do. Rhyl.
94.	Boy,	„ 7,	do. do.
95.	Girl,	„ 11,	do. do.
96.	Girl,	„ 7,	recommended for Convalescent Home treatment. Parents will not allow her to go.
*97.	Girl,	„ 7,	sent to Convalescent Home, Southport.
98.	Boy,	„ 10,	do. Rhyl.
99.	Boy,	„ 8,	do. do.
100.	Girl,	„ 10,	do. do.
101.	Boy,	„ 7,	do. do.
102.	Girl,	„ 7,	do. do.
103.	Boy,	„ 4,	do. Southport.
104.	Boy,	„ 7,	do. do.
105.	Boy,	„ 8,	do. Rhyl.
106.	Boy,	„ 8,	do. do.

The cases marked * were sent by the "Burton Observer" Uncle Jack Fund to Convalescent Homes, the Children's Care Committee visiting them after examination at the Clinic by the Assistant School Medical Officer.

The Public Assistance Committee sent one case to a Convalescent Home.

The assistance of the Inspector of the N.S.P.C.C. has been most helpful.

The Mayoress' Needlework Guild gave clothing for children in need of it, who were going to Convalescent Homes.

The Voluntary Aid Association investigated cases where railway fares were required and advanced the fares.

The Feoffees gave a grant of £25, provided 75 tickets for the Convalescent Homes, and the maintenance of one case at the Liverpool Rest Home for 6½ months.

The Committee acknowledge all this help received with grateful thanks.

In most cases the health of the children improved and many expressions of appreciation were received from the parents.

(Signed) J. M. SLATOR,

Chairman.

Phyllis M. Evershed,

Hon. Secretary.

13. **Blind, Deaf, Defective and Epileptic Children.** There are three blind children in the Borough, one of whom is at no school or institution, whilst the other two, together with three partially-blind children, are in the Birmingham Royal Institution for the Blind. Four partially-sighted children attended ordinary elementary schools, a special curriculum being provided for them.

There were two deaf and one partially-deaf children attending certified schools for the deaf, and one partially-deaf child attending a public elementary school.

There were twenty children examined during 1937, with reference to their mental condition, and three of these were found to be feeble-minded, whilst one was notified to the Local Authority as an imbecile. Four were found not defective, the remainder, dull or backward. There are now 34 feeble-minded children in the Borough, of which 19 attend public elementary schools. In addition, one feeble-minded and epileptic child attended no school or institution during 1937.

There were 10 epileptic children, of which 7 attended public elementary schools, and the remainder no school or institution.

14. **Nursery Schools.** These are not provided in the Borough.

15. **Secondary Schools.**

(a) **Medical Inspection.** The Girls' High School and the Grammar School controlled by the Governors of the Endowed Schools were inspected three times during the year, the following age groups being examined:—

- (a) Children on admission.
- (b) Children at the age of eight years.
- (c) Children at the age of twelve years.
- (d) Children at the age of fifteen years.
- (e) All other children over twelve years were also examined special attention being paid to defects previously noted.

In addition to the above routine examinations all children with known defects were re-examined to discover if treatment had been adopted, or if the defect had become aggravated.

At the end of this report is a table showing a detailed return of defects found at routine inspections. The principal defects observed were defective vision and dental diseases.

(b) **Medical Treatment.**

i. FORMS OF TREATMENT PROVIDED. The following forms of treatment are provided by the Local Authority, viz. :—

Dental treatment, Orthopaedic treatment, Eye testing, X-ray treatment for ringworm of the head, Treatment of minor ailments.

ii. TYPES OF PUPIL FOR WHOM TREATMENT IS AVAILABLE. Treatment is available for all types of pupils, but in most of the fee-paying pupils treatment is arranged privately.

iii. ARRANGEMENTS FOR RECOVERING COST OF TREATMENT FROM PARENTS.

All scholarship children attending the Secondary Schools may receive treatment provided by the Local Authority on the same terms as children attending elementary schools, i.e., all the treatment is free except dental treatment, for which 1s. per annum per case is charged.

For children other than scholarship children the charges have been fixed as follows :—

For Dental treatment—5s. per annum.

For Orthopaedic treatment—5s. per annum.

For X-ray treatment of Ringworm of the Scalp—Full charge.

For Eye testing—No charge.

For treatment of Minor Ailments—No charge.

16. **Employment of School Children.** The following table indicates the number of children medically examined in connection with fitness for several kinds of employment during 1937 :—

	Boys.	Girls.	Total.
Newspaper delivery	104	—	104
Errands	7	—	7
Milk delivery	8	1	9
	—	—	—
	119	1	120
	—	—	—

Two boys presenting themselves for examination proved unfit.

17. **Teacher Bursars.** During 1937, three teacher bursars were examined in connection with their fitness to pursue the vocation of teachers.

18. Dr. T. Ross, Assistant School Medical Officer, has been responsible for the preparation of this Report, and his assistance in this respect is hereby acknowledged.

J. M. COWIE,

School Medical Officer.

ELEMENTARY SCHOOLS.

TABLE I.
RETURN OF MEDICAL INSPECTIONS.

Year ended 31st December, 1937.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed groups :—

Entrants	...	...	...	...	678
Second age group	...	...	...	...	738
Third age group	...	...	...	...	643
Total	...	...	...	...	2,059

Number of other Routine Inspections ... —

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	1,115
Number of Re-Inspections	...	...	...	7,357
Total	...	...	...	8,472

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

Number of individual children found at Routine Medical Inspection to require treatment (excluding defects of nutrition, uncleanliness and dental diseases).

<i>Group.</i>	<i>For defective vision (excluding squint).</i>	<i>For all other conditions recorded in Table II A.</i>	<i>Total.</i>
Entrants	3	49	51
Second Age Group ...	52	43	94
Third Age Group ...	18	19	37
Total (prescribed Groups)...	73	111	182
Other Routine Inspections	—	—	—
Grand Total	73	111	182

ELEMENTARY SCHOOLS.

TABLE II.

A—Return of Defects found by Medical Inspection in the year ended 31st December, 1937.

DEFECT OR DISEASE.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
(1)	(2)	(3) Requiring to be kept under observation, but <i>not</i> requiring Treatment.	(4)	(5) Requiring to be kept under observation, but <i>not</i> requiring Treatment.	
Skin	(1) Ringworm—Scalp	—	—	1	—
	(2) " Body	—	—	11	—
	(3) Scabies	—	—	11	—
	(4) Impetigo	2	—	24	—
	(5) Other Diseases (Non-Tuberculous)	—	1	74	3
	TOTAL (Heads 1 to 5)...	2	1	121	3
Eye	(6) Blepharitis	4	—	30	2
	(7) Conjunctivitis	—	—	58	2
	(8) Keratitis	—	—	1	—
	(9) Corneal Opacities	—	—	—	—
	(10) Other Conditions (excluding Defective Vision and Squint)	—	4	28	2
	TOTAL (Heads 6 to 10)	4	4	117	6
	(11) Defective Vision (excluding Squint)	73	58	235	—
	(12) Squint	3	3	—	—
Ear	(13) Defective Hearing	2	7	4	1
	(14) Otitis Media	1	1	17	—
	(15) Other Ear Diseases	10	4	21	1
Nose and Throat	(16) Chronic Tonsillitis only	12	113	—	—
	(17) Adenoids only	—	2	—	1
	(18) Chronic Tonsillitis and Adenoids... ..	3	3	6	4
	(19) Other Conditions	3	3	56	9
(20) Enlarged Cervical Glands (Non-Tuberculous)... ..	1	32	8	7	
(21) Defective Speech	—	4	—	—	
Heart and Circulation	Heart Disease :				
	(22) Organic	—	—	1	—
	(23) Functional	—	9	—	—
(24) Anaemia	31	11	7	1	

ELEMENTARY SCHOOLS.

TABLE II—continued.

A—Return of Defects found by Medical Inspection.

DEFECT OR DISEASE.		ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
		No. of Defects.		No. of Defects.	
(1)	(2)	(3) Requiring to be kept under observation, but not requiring Treatment.	(4)	(5) Requiring to be kept under observation, but not requiring Treatment.	
Lungs	{ (25) Bronchitis	5	51	2	9
	{ (26) Other Non-Tuberculous Diseases	—	16	—	1
Tuber- culosis	{ Pulmonary :—				
	{ (27) Definite	—	—	—	—
	{ (28) Suspected	—	—	—	—
	{ Non-Pulmonary :—				
	{ (29) Glands	—	—	1	—
	{ (30) Bones and Joints	—	1	—	—
	{ (31) Skin	—	—	—	—
	{ (32) Other Forms	—	—	—	—
TOTAL (Heads 29 to 32)		—	1	1	—
Nervous System	{ (33) Epilepsy	—	—	1	1
	{ (34) Chorea	—	—	1	—
	{ (35) Other Conditions	—	3	10	5
Defor- mities	{ (36) Rickets	—	—	—	—
	{ (37) Spinal Curvature	6	3	1	3
	{ (38) Other Forms	8	20	3	—
(39) Other Defects and Diseases (excluding defects of Nutrition, Uncleanliness and Dental Diseases)		25	36	243	22
Total		189	389	855	74

ELEMENTARY SCHOOLS.

B.—Classification of the Nutrition of Children Inspected during
the Year 1937 in the Routine Age Groups.

Age-groups	Number of Chil- dren In- spected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	678	87	13	522	76·9	68	10	1	0·1
Second Age-group	738	148	20	549	74·4	40	5·4	1	0·13
Third Age-group	643	231	35·9	369	57·4	42	6·5	1	0·15
Other Routine Inspections ...	—	—	—	—	—	—	—	—	—
TOTAL ...	2059	466	22·6	1440	69·9	150	7·3	3	0·14

ELEMENTARY SCHOOLS.

TABLE III.

Return of all Exceptional Children in the Area,
December 31st, 1937.

BLIND CHILDREN.

A blind child is a child who is too blind to be able to read the ordinary school books used by children.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
2	—	—	1	3

PARTIALLY SIGHTED CHILDREN.

Children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted.

At Certified Schools for the Blind.	At Certified Schools for the Partially Sighted.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
3	—	4	—	—	7

DEAF CHILDREN.

A deaf child is a child who is too deaf to be taught in a class of hearing children in an elementary school.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
2	—	—	—	2

TABLE III—*continued.*

PARTIALLY DEAF CHILDREN.

Children who can appropriately be taught only in a school for the partially deaf.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
1	—	1	—	—	2

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	18	—	3	21

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	7	—	3	10

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	1	—	—	1

TABLE III—*continued.*

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

At Certified Special Schools	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
—	8	3	—	11

B. DELICATE CHILDREN.

At Certified Special Schools	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	32	—	—	32

C. CRIPPLED CHILDREN.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	13	—	—	13

D. CHILDREN WITH HEART DISEASE.

Confined to children whose defect is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School.

At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
—	8	1	—	9

ELEMENTARY SCHOOLS.

Children Suffering from Multiple Defects.

Defects.	At Certified Special Schools.	At Public Elementary Schools.	At Other Instit'ions	At no School or Institution.	Total.
Feeble-minded and Epileptic ...	—	—	—	1	1

TABLE IV.

Return of Defects treated during the year 1937.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Table VI.).

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
Skin :—			
Ringworm Scalp (i) X-Ray treatment	—	—	—
(ii) Other „	2	—	2
Ringworm Body	8	—	8
Scabies	5	2	7
Impetigo	290	33	323
Other Skin Disease	66	13	79
Minor Eye Defects	117	32	149
(External and other, but excluding cases falling in Group II.)			
Minor Ear Defects	48	2	50
Miscellaneous	170	22	192
(e.g., minor injuries, bruises, sores, chilblains, etc.)			
Total	706	104	810

ELEMENTARY SCHOOLS.

Group II.—Defective Vision and Squint (excluding Minor Eye Defects Treated as Minor Ailments.—Group I.).

	No. of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
ERRORS OF REFRACTION (including squint)... ..	310	3	313
Other defect or disease of the eyes (excluding those recorded in Group I.)	—	—	—
Total	310	3	313
	Under the Authority's Scheme.	Otherwise.	Total.
No. of Children for whom spectacles were			
(a) Prescribed	282	3	285
(b) Obtained	257	3	260

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.

Received Operative Treatment.													
Under the Authority's Scheme, in Clinic or Hospital.				By Private Practitioner or Hospital, apart from the Authority's Scheme.				Total.				Received other Forms of Treatment.	Total number treated.
Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Other Defects.	Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Other Defects.	Tonsils only.	Adenoids only.	Tonsils & Adenoids.	Other Defects.		
—	—	—	—	—	4	38	—	—	4	38	—	—	42

ELEMENTARY SCHOOLS.

Table VI.—Uncleanliness and Verminous Conditions.

(i.) Average number of visits per school made during the year by the School Nurses	12
(ii.) Total number of examinations of children in the Schools by School Nurses	20,255
(iii.) Number of <i>individual</i> children found unclean	444
(iv.) Number of individual children cleansed under Section 87 (2) & (3) of the Education Act 1921	Nil
(v.) Number of cases in which legal proceedings were taken:—	
(a) Under the Education Act 1921	Nil
(b) Under School Attendance Byelaws	4

Statement of the Number of Children notified during the year ended December 31st, 1937, by the Local Education Authority to the Local Mental Deficiency Authority.

Total number of Children notified, 1.

ANALYSIS OF THE ABOVE TOTAL.

DIAGNOSIS.	BOYS.	GIRLS.
1. (i.) Children incapable of receiving benefit or further benefit from instruction in a Special School—		
(a) Idiots	—	—
(b) Imbeciles	—	1
(c) Others	—	—
(ii.) Children unable to be instructed in a Special School without detriment to the interests of other children		
(a) Moral Defectives	—	—
(b) Others	—	—
2. Feeble-minded children notified on leaving a Special School on or before attaining the age of 16 ...	—	—
3. Feeble-minded children notified under Article 3 i.e., "special circumstances" cases	—	—
4. Children who in addition to being mentally defective were blind or deaf	—	—
Grand Total	—	1

SECONDARY SCHOOLS.

TABLE 1.

Return of Medical Inspections for year ended
the 31st December, 1937.

A.—ROUTINE MEDICAL INSPECTIONS.

Age	{	Under 9 years	...	34
		9	,,	12
		10	,,	18
		11	,,	56
		12	,,	108
		13	,,	73
		14	,,	89
		15	,,	74
		16	,,	42
		17	,,	18
		18	,,	6
		19	,,	2
				532

B.—OTHER INSPECTIONS.

Number of special inspections	...	...	...	3
Number of re-inspections	...	...	...	419
				422

C.—INDIVIDUAL CHILDREN.

Found to require treatment	...	...	...	41
(excluding uncleanness and dental diseases)				

SECONDARY SCHOOLS.
Medical Inspection Returns.

Table 2.

A—Return of Defects found by Medical Inspection in
the year ended 31st December, 1937.

DEFECT OR DISEASE.	ROUTINE INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of Defects.		No. of Defects.	
	Requiring Treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring Treatment.	Requiring to be kept under observation, but not requiring treatment.
SKIN DISEASE	—	1	—	—
Blepharitis	—	—	—	—
EYE Other eye conditions (ex- cluding defective vision or squint)	—	—	—	—
Squint	—	—	—	—
Defective vision	14	9	3	—
EAR Defective hearing	—	—	—	—
Otitis Media	1	—	—	—
Other ear diseases	1	—	—	—
Tonsils only	—	3	—	—
Cervical glands enlarged	—	—	—	—
Heart Disease—Organic	—	—	—	—
Functional... ..	—	4	—	—
Anæmia	7	—	—	—
LUNGS Bronchitis	—	—	—	—
Other chest (non T.B.)	1	1	—	—
Spinal curvature	—	—	—	—
Other deformities	6	1	—	—
Teeth	12	1	—	—
Other defects and disease	5	6	—	—
Total	47	26	3	—

SECONDARY SCHOOLS.

**Return of Defects treated during the year ended
the 31st December, 1937.**

Defective Vision and Squint.

	Number of defects dealt with.		
	Under Authority's Scheme.	Otherwise.	Total.
ERRORS OF REFRACTION (including squint)	10	11	21
Number of children for whom spectacles were			
(a) Prescribed	10	11	21
(b) Obtained	10	11	21

Dental Treatment, 1937.**HIGH SCHOOL.**

Number of cases treated	6
Number of attendances	16

GRAMMAR SCHOOL.

Number of cases treated	8
Number of attendances	17
Fillings—Permanent Teeth	21
Temporary Teeth	0
Extractions—Permanent Teeth	8
Temporary Teeth	4
Number of cases in which general anaesthetics were given for extractions	5
Other operations—Permanent Teeth	12
—Temporary Teeth	0

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