[Report 1955] / School Medical Officer of Health, Cambridgeshire County Council.

Contributors

Cambridgeshire (England). County Council.

Publication/Creation

1955

Persistent URL

https://wellcomecollection.org/works/m656jjzh

License and attribution

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

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

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



Ac 4442

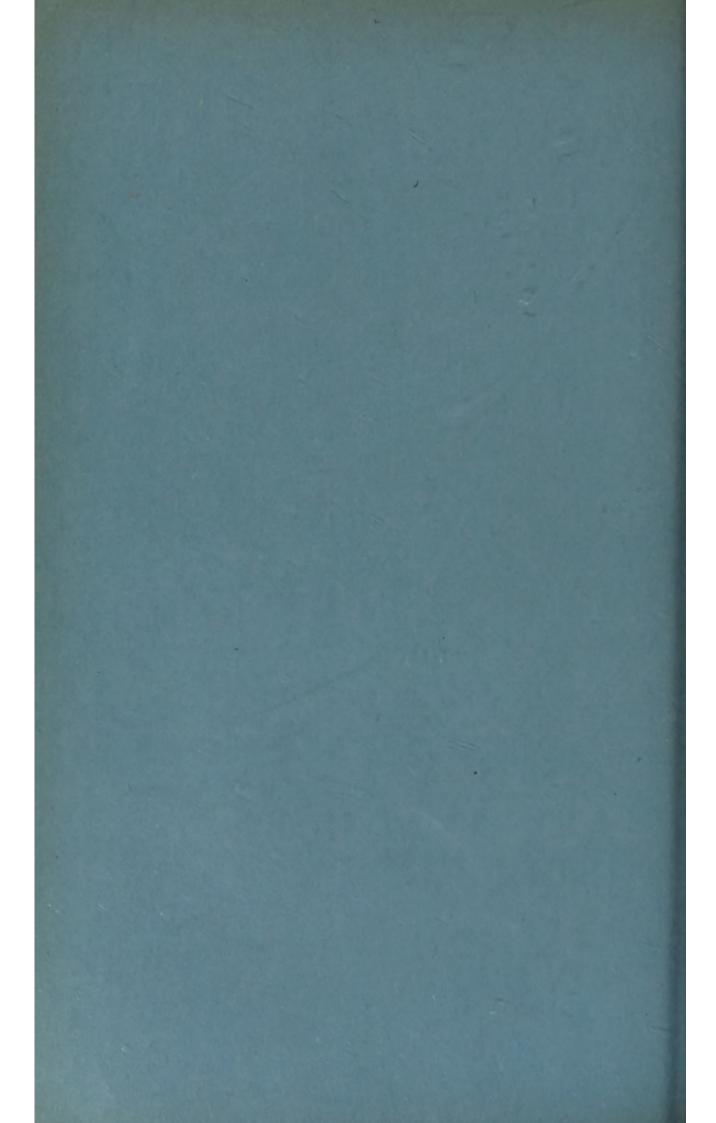
CAMBRIDGESHIRE EDUCATION COMMITTEE

ANNUAL REPORT

OF THE

Principal School Medical Officer

For the Year 1955



CAMBRIDGESHIRE EDUCATION COMMITTEE

ANNUAL REPORT

OF THE

Principal School Medical Officer

For the Year 1955

Digitized by the Internet Archive in 2017 with funding from Wellcome Library

INDEX

Arrangements for Trea	tment					 		7
Blind, Deaf, Defective	and E	pilepti	c Child	ren		 		11
Child Guidance						 		12
Dental Defect and Trea	atment					 		9
Educational Retardation	n					 		11
" Following-up "						 		7
Hospital Treatment						 		10
Hygienic Conditions of	f Prem	ises				 		5
Infectious Diseases, Co	ontrol o	of				 		10
Malnutrition						 		7
Meals, Provision of						 		11
Medical Inspection and	d Treat	ment				 		5
Milk, Supply of						 		11
Minor Ailments						 		8
Neglect						 		10
Nose and Throat Defe	cts					 		6
Nutrition						 		6
Orthopaedic Treatmen	t					 		7
Other Defects Treated						 		10
School Nurses						 		7
Skin Diseases						 		8
Special Educational or	Institu	itiona	Treat	ment		 		9
Spectacles						 		8
Staff		2	mary		M	 1		4
Technical College, Med	dical I	nspect	ion of			 		13
Tuberculosis						 		10
Uncleanliness						 		7
Visual Defects					Lead	 		8
Tables:—								
Medical and Dent	al I to	V				100	THE STATE OF	14-19

Introduction

At the end of 1955 there were 114 Primary Schools (including one Nursery School), 6 Secondary Modern Schools (two with grammar school streams) and Soham Grammar School in the rural area of the Local Education Authority. Of the Primary Schools, 55 were County Schools and 59 Voluntary Schools.

In January, 1956, the number of children on the registers of the Primary and Secondary Modern Schools was 10,983. There were also 357 boys on the register at Soham Grammar School who form part of the total number under consideration in the paragraphs which

follow.

Staff

Services in connection with school medical work in the rural area were rendered by the following:

R. French, M.D., D.P.H., Principal School Medical Officer and Medical Officer of Health.

P. A. TYSER, M.D., B.S., D.P.H., Deputy do. (Part-time).

EILEEN M. BRERETON, M.A., M.B., CH.B., School Medical Officer.

ANNA R. WADE, M.A., M.B., CH.B., Ophthalmic Surgeon.

W. B. GRANDISON, F.D.S., L.D.S., Principal Dental Officer (Parttime).

ROSA B. SCHMELTZER, D.M.D. (Berlin), L.D.S., School Dental Surgeon.

J. R. Toller, M.Sc.D., Northwestern U., U.S.A., L.D.S., do.

BETTY ASTILL, L.D.S., do. (Until February 12th).

OLIVE FOULDS, L.D.S., do. (Part-time).

SARAH MEE, S.R.N., S.C.M., Superintendent of Nurses and Health Visitors.

M. BOWYER, Enquiry Officer under the Mental Deficiency Acts. H. J. SADLER, Chief Clerk.

In the City of Cambridge, which is an Excepted District, the following is the School Medical Staff:—

C. G. EASTWOOD, M.D., D.P.H., Principal School Medical Officer and Medical Officer of Health.

HILDEGARD P. BRODA, M.D. (Vienna), School Medical Officer.

DOROTHY DAVEY, M.B., CH.B., do. (Part-time).

ISOBEL NICHOLLS, M.B., CH.B., D.P.H., do. (Part-time) (from June 1st).

W. B. GRANDISON, F.D.S., L.D.S., Principal Dental Officer (Parttime).

MARJORIE E. C. PAGE, L.D.S., School Dental Surgeon.

E. Burn, L.D.S., School Dental Surgeon.

R. Alsop, L.D.S., School Dental Surgeon (Part-time).

JESSIE M. BOUNTAIN, L.D.S., School Dental Surgeon (Part-time). WENDY M. JONES, L.D.S., School Dental Surgeon (Part-time) (from October).

G. F. WRIGHT, M.A., M.B., B.CHIR., D.O.M.S., Ophthalmic

Surgeon.

Speech Therapy Staff for whole area:—
HEATHER G. HRAMTSOV (née Melvill), L.C.S.T., Speech Therapist.
OLIVE ABOTOMEY, L.C.S.T., Speech Therapist.
HILARY WESTRUP, L.C.S.T., Speech Therapist (until May 31st).
MAVIS POYSER, L.C.S.T., Speech Therapist (from September 12th).

Hygienic Condition of Premises

In 1955 a beginning was made with the correction of some of the defects in the hygienic condition of schools noted by the medical staff in the course of their visits. The difficulty of dealing with these matters which existed for so long has brought about a state of affairs which cannot be expected to disappear in a very short time but it is gratifying to be able to feel that a real start has at last been made.

Amongst other things which may be mentioned are the conversion of the pail closets to water closets at Comberton and Harston schools, the provision of new classrooms at Barton, Great Shelford, Sawston Junior and Soham Infants' schools, together with the rebuilding of the closet accommodation at the last named, the introduction of mains water supplies in the Haslingfield, Horningsea and Longstowe schools, the provision of additional wash basins at Coton and Steeple Morden schools and of Elsan closets at Babraham, Childerley Gate, Grantchester, Reach and Weston Colville schools. The supply of electricity was introduced into five schools and although work was not completed in 1955, the provision of additional classrooms at Melbourn, Stapleford, Teversham and Willingham schools and the installation of mains water supplies at Foxton and Shepreth schools was begun.

This list does not pretend to be exclusive and there were many minor improvements which it is not possible to mention. It is hoped that steady progress with this type of work may be made from now

onwards.

Medical Inspection

Dr. Brereton working on a full time basis and Dr. Tyser working on a part time basis of four sessions per week continued the work of school medical inspection in exactly the same way as in the previous year with one modification, four routine age groups being inspected. The modification to which reference is made consists of the interview of certain children at the medical inspection immediately prior to their leaving school. In the great majority of cases under this head no actual medical examination is carried out but an endeavour is made to ascertain any untoward medical event in the child's life which may have taken place since what would normally be the last routine inspection. If the interview indicates the need for it a further examination is carried out.

The following figures show the number of inspections carried out

in 1955:-

The number of routine inspections in the previous year was 4,225

and the number of re-inspections 4,736.

The number of special inspections in the previous year was 87, the increase in 1955 being due to the above mentioned interview of leavers.

The number of children found to require treatment was 680 or 99 more than in the previous year. Some of these children had more than one defect.

Details as to certain of the conditions discovered are in the following paragraphs.

Nutrition.—Of the 4,668 examined, 2,198 or 47.09 per cent were considered to be of good nutrition as against 44.24 per cent in the previous year.

Fair nutrition was found in 2,462 or 52.74 per cent, as against

55.55 per cent in the previous year.

Poor nutrition was found in 8 children or 0.17 per cent, as against 0.12 per cent in the previous year.

The general trend continues to be satisfactory.

Visual Defect.—The total number of cases of visual defect, including squint, found at routine and special inspections was 870 as against 765 in the previous year, of which 275 required treatment as against 213 in the previous year and 595 required observation only as against 552 in the previous year.

While these figures represent a rise over those of the previous year,

it is not possible to attach any precise significance to them.

Nose and Throat Defects.—Three hundred cases of nose and throat defects were discovered, as against 257 in the previous year, an increase of 43. The number of cases requiring treatment was found to be 53 as against 39 in the previous year.

Although the number of defects is higher than that of the previous year, it offsets the fall in that year and is still lower than the number in the year 1953. The number of cases requiring treatment has reverted

to virtually the same level as that in 1953.

Orthopaedic and Postural Defects.—The total number of orthopaedic and postural defects discovered was 339, as against 305 in the previous year. The number of cases classed as flat foot fell from 69 to 57, which continues a fall noted in the previous year. The number of cases considered to require treatment was 109, as against 110 in the previous year.

Following up.—The following figures relate to the work of nurses acting as school nurses:-

1. Visits to Schools:-

2.

(a)	Assistance with medica	al inspecti	ons	355
(b)	Special—Verminous			483
(c)	Other purposes			502
Visits	to homes of scholars:-			
(a)	Follow up to secure tre	atment		3,569
(b)	Special enquiries into	infectious	ог	
	contagious disease			617
(c)	Other purposes			378

Arrangements for Treatment

School Clinics.—There are no fixed clinics actually situated in the rural area but there are two travelling dental clinics which operate each day during school hours in varying situations. There is also a dental clinic in the Shire Hall grounds which is used by a full time dental surgeon at weekends and during school holidays, and by the part time dental surgeon for three regular weekly sessions including one for the treatment of under school age children.

Malnutrition.—Cod liver oil and malt was authorised for 58 children and in 67 cases the supply was discontinued or the children had left school, resulting in a total of 178 children in receipt of this facility at the end of the year.

The need for the sending of children to open air schools for malnu-

trition only seems to have almost completely disappeared.

Uncleanliness.—School Nurses made 483 visits to schools for the detection of verminous children as against 470 in the previous year, or an average of 4.03 per school. The total number of children examined was 39,605 and the number of individual children found unclean was 63. In addition 4,668 children were examined by the school medical officers of whom four were found to be unclean, making the total for the year 67. The total number found unclean in the previous year was 73.

It will be remembered that in the previous year it appeared that there had been a halt to the fairly steady fall in the incidence of these conditions and it is pleasing to be able to say that the fall has now recommenced though the extent of it has been very insignificant. While the number found in the County as a whole cannot be regarded as large, it does seem that there is a hard core of families unsatisfactory in this respect which it is going to be very difficult to eliminate.

Visual Defects.—The number of cases known to have had refraction carried out during the year was 712, as against 648 in 1954, of which 583 were examined by Dr. Wade and 129 in other places. Dr. Wade prescribed glasses for 289 and, of the 129 otherwise examined, 68 were found to require them, a total of 357 (318 in 1954). Of this total 346 had received their spectacles by the end of the year.

No doubt the increase in the number requiring and receiving spectacles is connected with the increase in the number of refractive

errors mentioned earlier in the report.

Minor Ailments.—Two cases of scabies were reported during 1955 as against 7 in 1954 and both were treated through arrangements other than those provided by the Authority.

The number of cases of impetigo rose in 1955 to 40 as against the

figure of 25 in 1954.

There were 14 cases of body ringworm (13 in 1954) and no cases of ringworm of the scalp.

Ear, Nose and Throat Defects.—Ninety four cases of adenoids and chronic tonsillitis were known to have received operative treatment during the year, 80 less than the figure for the previous year. Four of these cases were referred through the School Medical Department as against 3 in the previous year. Of the 4 cases, one was on the waiting list at the end of 1954. The total number of cases referred during 1955 was 9, one more than the figure for the previous year. Three required no treatment, three received operative treatment, 2 received other forms of treatment and one remained on the waiting list for operative treatment at the end of the year.

There has been no great variation in the number of cases referred through the School Medical Department and it is difficult to know what may be the reason for the fall in the number of cases referred from other sources. It is a fact however that this form of treatment seems to follow a fashion. For a time it is relatively popular and these periods of popularity are followed by periods of doubt as to the need for it. Possibly the present fall represents one of the periods during

which enthusiasm for it is in abeyance.

One case received operative treatment for another nose and throat condition and one for disease of the ear. One hundred and nine cases of ear, nose and throat conditions received non-operative treatment, 9 being dealt with under the Department's own arrangeemnts.

Dental Treatment.—It will be remembered that reference to the fact that the third School Dental Surgeon had left was made in the Report for the previous year and it is hardly necessary to stress that this has caused the dental service to revert to its previous rather unsatisfactory position.

In 1955, 9,066 children were inspected as against 9,673 in 1954. Of these 7,489 were found to require treatment, or 82.61 per cent as against 81.36 per cent in the previous year.

Of the 7,489 requiring treatment, 2,921 received it, or 37.67 per cent, as against 47.74 per cent in 1954. The considerable fall in the percentage treated would appear to be due to the fact that in 1954 treatment was offered in 89.82 per cent of the cases found to require treatment, and in 1955 in only 74.72 per cent. In actual fact, of the numbers offered treatment, 53.15 per cent were treated in 1954 and 52.19 per cent in 1955. The number treated was 836 less than in the previous year.

The reason for the fall in the numbers of children to whom treatment is offered is that no offer is now made to children known to have been persistent refusers in previous years. Experience shows that even if a chance acceptance does result from an offer in this type of case, the time spent in putting a very unsatisfactory mouth into order is usually wasted because the former refusal is repeated in subsequent years. This might not be of great consequence if an adequate dental staff to deal with every eventuality were in existence but the time of a limited number of dentists is better spent on children whose parents really appreciate it.

There were 1,925 extractions done by the staff of the rural area as against 2,694 in the previous year of which 378 were of permanent teeth (520 in 1954) and 1,547 of temporary teeth.

Orthopaedic Treatment.—Seven cases were referred to Addenbrooke's Hospital, Newmarket General Hospital or the outlying clinics during the year, of which 4 were found to require treatment. Returns from the hospitals show, however, that a total of 18 children of the area received orthopaedic treatment, 4 as in-patients and 14 as out-patients All these figures represent decreases as compared with those of the previous year.

Other Forms of Special Educational Treatment or Institutional Treatment.— Two of the 4 maladjusted children mentioned as being in residential schools at the end of 1954 left during 1955. The other 2 remained in special schools at the end of the year. One new child was admitted to a special school for maladjusted boys in 1955 making the total number at the end of the year 3.

Of the three children in hostels for maladjusted children at the end of 1954 one left during 1955 and the other two remained there at the end of the year.

The girl mentioned as being in a special school for asthmatic

children at the end of 1954 remained there at the end of 1955.

Tuberculosis.—Two new cases, one pulmonary and one non-pulmonary, were admitted to institutions during the year making with the one remaining at the end of 1954 a total of three cases in institutions at some time during the year. The two non-pulmonary cases were discharged, leaving on January 1st, 1956, one pulmonary case still in an institution.

Other Defects Treated.—Sixty nine cases were referred to Addenbrooke's Hospital or Newmarket General Hospital, 9 for ear nose and throat defects, 7 for orthopaedic defects, 47 for visual defects including squint, 3 for skin defects, 1 for a heart defect and 2 for enuresis.

Neglect.—Nine families were referred to the N.S.P.C.C. of which 4 were on account of general neglect, 3 for failure to obtain dental treatment, 1 for failure to have a child's eyes examined and 1 for failure to take a child to hospital on account of spinal curvature and flat feet.

Infectious Diseases

The following table shows the number of schools from which notifications of infectious disease were sent by Head Teachers during the year:—

Scarlet Fever	 	 6
Diphtheria	 	 Nil
Measles	 	 29
German measles	 	 8
Chickenpox	 	 33
Whooping cough	 	 20
Mumps	 	 33

There was a rise in the number of notifications of measles and mumps but it is probable that this represents one of the normal periodic alterations in the incidence of these diseases.

Provision of Milk and Meals

The arrangements for the supply of milk in schools have continued as before and the following are the figures as to types:—

Tuberculin	Tested			 2 s	chools
Pasteurised				 116	,,
Tuberculin	Tested	Pasteu	rised	 4	,,
Accredited				 Nil	
Ordinary				 Nil	

On October 5th, 1955, there were 8,982 children receiving milk or 82.45 per cent of the total in attendance. Of those in attendance at the Nursery School 100 per cent received it, at Primary Schools 87.76

per cent, and at Secondary Schools 65.48 per cent.

Cooked mid-day meals were available at all schools and a total of 7,004 children or 64.28 per cent received them, approximately 3 per cent more than on the corresponding day in the previous year. At the Nursery School 100 per cent took the meals, at Primary Schools 56.88 per cent, and at Secondary Schools 87.23 per cent.

The number of children receiving free meals on a scale of means

approved by the Education Committee was 300.

Blind, Deaf, Defective and Epileptic Children

The following table sets out the position with regard to the institutional or residential treatment of defective children:—

	Educationally Retarded	Partially Sighted	Blind	Deaf	Epileptic	Physically Defective
Remaining Dec. 31st, 195	54 39	9		9	2	4
Admitted in 1955	2	_		1	1	1
Discharged in 195	5 2	0 -	-		-	. 1
Remaining Dec. 31st, 195	55 42*	7†	2†	10	3	4

^{*}Three of the educationally retarded children remaining in special schools at the end of the year were taken over from another Authority.

The column relating to deaf children includes partially hearing children.

Educational Retardation.—Thirty three cases of educational retardation were brought to the notice of the Education Committee during the year. Two of these were later reported to the Mental Health Sub-Committee of the Health Committee as ineducable and

[†]Two of the children regarded as partially sighted at the end of 1954 were re-classified as blind during the year.

were placed under Statutory Supervision. Of the remainder, 6 were approved for admission to residential schools of whom 2 were admitted during the year, leaving 4 on the waiting list.

The child remaining on the waiting list for admission to a special school at the end of 1954 remained on the waiting list at the end of

1955, making a total of 5.

As was pointed out in the 1954 Report, the opening of Orton Hall School had largely removed the difficulty with regard to the placing of educationally retarded girls in special schools although the fact that girls under the age of nine are not admitted does not make it possible to say that there is no difficulty whatever.

All the five children remaining on the waiting list at the end of 1955 were boys, a reflection of the difficulty which exists almost all

over the country in this respect.

Child Guidance

The year under consideration was the first complete year in which the Education Committee had no direct responsibility for the maintenance of the Child Guidance Clinic. The work passed completely into the hands of the Regional Hospital Board and liaison between the Education Committee and the Board was maintained chiefly by the Educational Psychologist who is in the direct employ of the Authority.

Only ten cases were referred to the Clinic by the School Medical Department though it is known that fifty one children from the rural area of the County actually received treatment there during the year. All ten of the cases referred direct to the Clinic were boys and the

reasons for their reference may be classified as follows:-

Behaviour difficulties	 	5
Educational failure	 	1
Enuresis	 	1
Failure to talk	 	1
Refusal to attend school	 	1
Nervous habits	 	1

It will be noted that the number of cases referred direct through the School Medical Department is comparatively small and there are two main reasons for this. The first is the knowledge that the Child Guidance Clinic has a long waiting list and that it is only the most urgent cases which can be seen with a reasonable degree of promptitude and the second is the existence of the Educational Psychologist who can deal with many of the difficulties in the course of his ordinary work and thus save pressure on the time of the Clinic. He has continued to work during 1955 on the lines described in the Report for the previous year. He was appointed chiefly to deal with educational problems but he does encounter behaviour difficulties in the course of that side of his work and so is able to obviate the necessity to refer all of them to the Child Guidance Clinic.

The arrangements for speech therapy continued unchanged, three Speech Therapists serving the needs of the City of Cambridge and of the rural area.

The number of cases referred in 1955 was 225, exactly the same number as in the previous year. This represents a fall of 18 cases in the City of Cambridge and a rise of 18 in the rural area. Four hundred and twenty four children received treatment as against 494 in the previous year and 150 were discharged. At the end of the year there were 287 cases still under treatment, 140 awaiting treatment and one case awaiting examination.

Dyslalia was again the most common defect requiring treatment. In contrast with the position in the previous year the number of cases of stammer was slightly higher in the County than it was in the City, and the total number in the whole of the County again slightly in-

creased.

Further detailed figures will be found at the end of the Report.

Medical Inspection at the Technical College

The following figures give details of the work done:

Number of routine inspection	ne	Male 57		Female 104
Principal Defects Discovered	t	Male	Female	Total
Subnormal nutrition		_	_	_
Defective vision:				
For observation		7	17	24
For treatment		4	8	12
Nose and Throat defects:				
For observation		_	1	1
For treatment		_	2	2
Hearing		1	2	3
Orthopaedic		4	11	15
Circulatory		_	_	-
Skin		_	_	_
Other conditions		2	4	6

The nutritional condition of the pupils can be further subdivided as follows:

		Good	Fair	Poor
Boys	 	 24	33	1 1 1
Boys Girls	 	 55	49	-

The percentages of good nutrition were 42.11 in boys and 52.88 in girls. The corresponding percentages in the previous year were 56.0 and 44.85. There was no change in the observers as between the two years.

TABLE 1. MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

A.—PERIODIC MEDICAL INSPECTIONS.

Age groups inspected and number of children examined in each:

Entrants					1304
Second Age Group					1047
Third Age Group					824
Tot	al				3175
Additional	Peri	odic In	spectio	ns	1493
Gra	nd T	otal			4668

B.—OTHER INSPECTIONS.

Number of Special Inspections Number of Re-inspections	 337 4204
Total	 4541

C.—Pupils Found to Require Treatment.

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin.)

Age Groups Inspected	For defective vision (excluding squint).	For any of the other conditions recorded in Table IIA.	Total individual pupils
(1)	(2)	(3)	(4)
Entrants Second Age Group Third Age Group	 33 78 52	187 118 71	195 175 108
Total Additional Periodic Inspections	 163 73	376 153	478 202
Grand Total	 236	529	680

TABLE II.—A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1955.

Defect to be kept to be kept	13/3		Periodic I	nspections	Special In	nspections	
Defect Code No. Defect or Disease No. Requiring treatment Code No. Defect or Disease Requiring treatment Code No. Requiring treatment Code No. Requiring treatment Code No. Co		12000	No. of	defects	No. of defects		
4 Skin 77 123 2 3 5 Eyes—a. Vision 236 513 11 2 b. Squint 25 80 3 - c. Other 22 62 - - 6 Ears—a. Hearing 6 39 - - 7 Nose or Throat 50 245 3 2 8 Speech . 22 77 2 1 9 Cervical Glands 5 47 1 1 10 Heart and 4 41 - - 2 2 77 2 1 1 3 10 Heart and 5 17 - - - 4 4 41 - - - - - </th <th>Code</th> <th></th> <th>treatment</th> <th>to be kept under ob- servation, but not requiring treatment</th> <th>Requiring treatment</th> <th>but not requiring treatment</th>	Code		treatment	to be kept under ob- servation, but not requiring treatment	Requiring treatment	but not requiring treatment	
b. Squint c. Other Ears—a. Hearing b. Otitis Media c. Other 5 6 1 7 Nose or Throat Speech 9 Cervical Glands 10 Heart and Circulation 11 Lungs 12 Developmental— a. Hernia b. Other 13 Orthopaedic— a. Posture a. Epilepsy b. Other 14 Nervous system— a. Epilepsy b. Other a. Development b. Stability 12 88 1 3	Land I	(1)	(2)	(3)	(4)	(5)	
b. Squint c. Other Ears—a. Hearing b. Otitis Media c. Other 5 6 1 7 Nose or Throat Speech 9 Cervical Glands 10 Heart and Circulation 11 Lungs 12 Developmental— a. Hernia b. Other 13 Orthopaedic— a. Posture a. Epilepsy b. Other 14 Nervous system— a. Epilepsy b. Other a. Development b. Stability 12 88 1 3	4	Skin	77	123	2	3	
6 Ears—a. Hearing b. Otitis 6 39 — — Media c. Other b. Other b. Other c. Other c. Other c. Other b. Other c. Other b. Other c. Other	5	Eyes—a. Vision		513		2	
6 Ears—a. Hearing b. Otitis Media 11 41 — — — — — — — — — — — — — — — — —				00.782	_	_	
C. Other 5 6 1 — Nose or Throat 50 245 3 2 Speech	6				10.5	-	
7 Nose or Throat 50 245 3 2 8 Speech		Media	11	41	Name of	10/-(1)	
8 Speech				6	1	_	
9 Cervical Glands 5 47 1 1 10 Heart and Circulation 4 41 — — 11 Lungs . 17 112 1 1 12 Developmental— a. Hernia . 5 17 — — b. Other . 11 37 2 — — 13 Orthopaedic— a. Posture . 14 56 — 1 b. Flat foot . 16 41 — — — 1 14 Nervous system— a. Epilepsy 2 23 — 2 2 b. Other . 16 29 — 1 1 15 Psychological— a. Development 5 90 — 2 2 b. Stability 12 88 1 3 3	7				3	2	
Heart and Circulation 4 41	8			15.01	2	1	
Circulation 4 41 — — 11 Lungs			5	47	1	1	
11 Lungs	10	The second secon		44			
12 Developmental— a. Hernia 5 17 — — b. Other 11 37 2 — 13 Orthopaedic— a. Posture 14 56 — 1 b. Flat foot 16 41 — — c. Other 78 131 1 1 14 Nervous system— a. Epilepsy 2 23 — 2 b. Other 16 29 — 1 15 Psychological— a. Development 5 90 — 2 b. Stability 12 88 1 3	11			100000000000000000000000000000000000000		1	
a. Hernia 5 17 — — b. Other 11 37 2 — 13 Orthopaedic— a. Posture 14 56 — 1 b. Flat foot 16 41 — — — c. Other 78 131 1 1 14 Nervous system— 2 23 — 2 b. Other 16 29 — 1 15 Psychological— a. Development 5 90 — 2 b. Stability 12 88 1 3			1/	112	1	1	
b. Other 11 37 2	12		5	17	A DECEMBER		
13 Orthopaedic— a. Posture 14 56 — 1 b. Flat foot 16 41 — — c. Other 78 131 1 1 14 Nervous system— a. Epilepsy 2 23 — 2 b. Other 16 29 — 1 Psychological— a. Development 5 90 — 2 b. Stability 12 88 1 3			1000000	T. 107.11	2		
a. Posture 14 56 — 1 b. Flat foot c. Other 16 41 — — c. Other 78 131 1 1 14 Nervous system— 2 23 — 2 b. Other 16 29 — 1 15 Psychological— a. Development 5 90 — 2 b. Stability 12 88 1 3	13		11	31	-		
b. Flat foot c. Other 78 131 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE REAL PROPERTY.		14	56	BRI_VI	1	
14 C. Other 78 131 1 1 Nervous system—				The state of the s	-	_	
14 Nervous system— a. Epilepsy b. Other 16 29 1 1 15 Psychological— a. Development b. Stability 12 88 1 3 			1000000		1	1	
b. Other 16 29 — 1 Psychological— a. Development 5 90 — 2 b. Stability 12 88 1 3	14	Nervous system—					
15 Psychological—					_	2	
a. Development 5 90 — 2 b. Stability 12 88 1 3	None pro-		16	29	-	1	
b. Stability 12 88 1 3	15			00			
16 Other 126 186 3 2					-	2	
10 Other 120 180 3	16	-	A STATE OF THE PARTY OF THE PAR		1	3	
	10	Other	126	180	3	2	

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups	Number		A. ood)	B. (Fair)		C. (Poor)	
	Pupils Inspected	No.	of col. 2	No.	of col. 2	No.	of col. 2
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Entrants	1304	579	44.40	722	55.37	3	0.23
Second Age Group	1047	584	55.78	460	43.93	3	0.29
Third Age Group Other Periodic	824	394	47.82	430	52.18	-	_
Inspections	1493	641	42.93	850	56.93	2	0.14
Total	4668	2198	47.09	2462	52.74	8	0.17

TABLE III.—INFESTATION WITH VERMIN.

ols by ersons 44,273
to be
67
whom
54 (2),
whom
54 (3),
1

TABLE IV.—TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

GROUP 1.—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III).

				or under	cases treated treatment the year
				by the Authority	otherwise
Ringworm—(i)	Scalp	 		 _	_
(ii)	Body	 		 _	14
Scabies		 		 _	2
Impetigo		 		 _	40
Other skin dise	ases	 		 8	69
		Tot	al	 8	125

Group 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases deal with	
	by the Authority	otherwise
External and other, excluding errors of refrac-		
tion and squint	8	16
Errors of refraction (including squint)	575	113
Total	583	129
Number of pupils for whom spectacles were		
(a) Prescribed	289	68
(b) Obtained	278	68

Group 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

Number of	cases treated
by the Authority	otherwise
	94
_	1
9	100
9	196
	by the

Group 4.—ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals	The M	4
	By the Authority	otherwise
(b) Number treated otherwise, e.g., in clinics or out-patient departments	-01	14
Total	_	18

Group 5.—CHILD GUIDANCE TREATMENT.

MENT.		
Number of	cases treated	
In the Authority's Child Guid- ance Clinics	Elsewhere	
_	51	
Number of cases treated		
by the Authority	otherwise	
193	_	
EN.		
Number of	cases treated	
by the Authority	otherwise	
6	51	
-	18	
- CO	8 2	
_		
6	79	
CARRIED	OUT BY	
Dental O	fficers:—	
	8775	
	291	
	9066	
	and the same of th	
	7489	
	7489 5596	
	In the Authority's Child Guidance Clinics Number of by the Authority 193 EN. Number of 6 by the Authority 6 CARRIED Dental O	

(6) Half days devoted to: Periodic Inspection Treatment	88 942	
Total (6)	1030	
(7) Fillings: Permanent Teeth Temporary Teeth	3961 1146	
Total (7)	5107	
(8) Number of teeth filled: Permanent Teeth Temporary Teeth	3904	
Total (8)	4917	
(9) Extractions: Permanent Teeth	378 1547	
Total (9)	1925	
(10) Administration of general anaesthetics for extract	etion —	
(11) Other operations: Permanent Teeth Temporary Teeth	558 2045	
Total (11)	2603	
Total (11) SPEECH CLINIC—STATISTICS FOR YEAR ENDED I	_	955.
SPEECH CLINIC—STATISTICS FOR YEAR ENDED I	_	
SPEECH CLINIC—STATISTICS FOR YEAR ENDED I Cases: City Co	DECEMBER, 1	al
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: Referred during the year 117 Number requiring treatment 105	DECEMBER, 1 unty Total 108 22: 99 204	al 5
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Tota 108 225 99 204 193 424	al 5 1
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150	al 5 4 4
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287	al 5 1 1 1 1 7
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150	al 5 1 1 1 1 7
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287	al 5 4 1 7
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287 72 140	al 5 1 1 1 7 0)
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 nunty Total 108 225 99 204 193 424 71 150 134 287 72 140 —	al 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287 72 140	al 5 1 1 1 7 0 1
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287 72 140 — 28 53 46 88 19 33	al 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287 72 140	al 5 1 1 1 7 0 1
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287 72 140 — 28 53 46 88 19 33 2 4 4 20	al 5 1 1 1 1 3 3 3 4 5 6
SPEECH CLINIC—STATISTICS FOR YEAR ENDED IT Cases: City Co Referred during the year	DECEMBER, 1 unty Total 108 225 99 204 193 424 71 150 134 287 72 140 — 28 53 46 88 19 33 2	al 5 1 1 1 1 3 3 3 4 5 6