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## NORFOLK COUNTY COUNCIL.

# Annual Report

OF THE

County Medical Officer of Health

AND

## SCHOOL MEDICAL OFFICER

(J. T. C. NASH, M.D., C.M., D.P.H.)

FOR THE YEAR

1918.

Report of the School Medical Officer.

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## School Medical Officer's Report for 1918.

Acreage of Administrative County of Norfolk, 1,300,503 acres. No. of Elementary Schools, 495. No. of Scholars, 50,033.

- 1. Ordinary routine Medical Inspection of Entrants and Leavers and other age groups continued in abeyance, all the Medical Inspectors and the permanent clerical staff being on War Service.
  - 2. School Dentistry was also in abeyance for the same reason.
- 3. The S.M.O. is the County Medical Officer of Health. He had no Deputy or Assistant Medical Officer: but he endeavoured to keep alive school medical work until time or circumstances should restore the regular organised School Medical Service.
- 4. In the course of visits to Schools (generally in connection with the control of outbreaks of infectious diseases or to see mentally deficient children, or by special request) the S.M.O. had the majority of the children in attendance under review; in all he more or less medically inspected 3,480 children and referred for treatment individual children as follows:—

Malnutrition	 9	Enlarged Tonsils		53
Verminous Heads	 22	Adenoids		20
Uncleanliness of Body	 4	Tonsils and Adenoids		9
Ringworm—Head	 2	Defective Speech		2
Scabies	 6	Anæmia		1
Impetigo	 10	Pulmonary Tuberculosis	3	1
Other Skin Diseases	 8		ected)	4
Defective Vision	 111	Deformities		6
External Eye Disease	 12	Mental Deficients		10
Defective Hearing	 5	Other Defects		16
Ear Disease	 6			

5. The whole-time School Nurse (Miss Bullock) continued to discharge her duties as hitherto. In addition she took notes of children at the Schools she visited as to children with defective vision, or mouth breathers, etc., and reported them to the S.M.O. She made 6,760 examinations and re-examinations. In all she visited 201 schools and paid 60 Home Visits.

Her work was again chiefly concentrated on Ringworm and Scabies.

- 6. A continued use was made during the year of nurses of the Norfolk Nursing Federation and other Associations, more especially in connection with applications from Teachers as to Verminous Conditions. Some part of the work in connection with Ringworm, Scabies, and Impetigo, was also deputed to these nurses. The time of one Federation Nurse was practically wholly devoted to School work.
- 7. The main feature of the year was the pandemic of Influenza in the latter months of the year, involving a huge correspondence and the closure of nearly every School in the County between October and December.

A Tabular Statement of the Nurses' work is here given.

#### NURSING WORK

SCHOOL NURSE (Miss Bull	ock) :i			
Children inspected and	re-inspected	l	 	6760
Homes Visited			 	60
Parents present			 	152
Number of Visits made	to Schools		 	201
				9

FEDERATION NURSES :-

Number of children who were inspected and re-examined by Federation Nurses during 120 Visits to Schools.

	200 . 10	rep to solitonio.		DOAE
Pediculosis			 	2645
Ringworm			 	10
Other Defects			 	112

Included in the above number, the Federation Nurses visited 21 Schools where the heads of all children present were examined. Of the 1513 children examined, 545 were found to be suffering from Pediculosis and 3 from Ringworm.

OTHER (NON-AFFILIATED) NURSES :-

Number of children who were followed up by Nurses other than Federation Nurses making 12 visits to Schools

 ***	 283
	 2

In 4 Schools the heads of all the children were examined. Of the 270 children examined, 72 were found to be suffering from Pediculosis.

All the above were remedied by the Nurses under the instructions of the School Medical Officer.

Prosecutions were instituted, under the Attendance Bye-Laws, where parents persistently neglected to carry out instructions for ridding their children of Vermin. The results are shewn in the following table:—

Petty Sessional Division.	Number of Prosecutions.	Number Fined.	Adjourned and withdrawn uponImprovemnt.	Discharged with a Caution or Dismissed.
Clackclose	 2		2	_
Mitford & Launditch	 4	_	-	4
Guilteross & Shropham	 2	2	_	_
Depwade	 4	4		-

7. VISION DEFECTS AND PROVISION OF SPECTACLES.—92 Vouchers were issued to doctors on the Committee's list for the testing of visual defects by the method of refraction. As a result:—

72 Spectacles prescribed for were provided through the Committee.

14 cases were reported as not requiring glasses.

6 cases still outstanding.

In addition to the above the S.M.O. personally examined 43 children by the Shadow Test (under atropin) and in 41 cases spectacles were provided through the Committee. In addition spectacles for 6 other cases (prescribed for by their own doctors privately), were procured through the Committee.

The total number of spectacles provided by the Committee was thus 119 in 1918, at a total cost of £45 19s. Od., including voucher fees and makers' contract charges. In nearly every case some small contribution was made by the parents; these refunds (paid or promised), amounted to £20 9s. Od.

8. OPERATIONS for Tonsils and Adenoids.

Forty-five Vouchers for operations were issued to Doctors on the Committee's list. 39 operations were performed at a cost of £60 7s. 6d. including anæsthetist's fees: 6 cases are outstanding. Refunds promised by parents amounted to £11 9s. 6d.

A further 19 cases were dealt with under the arrangements made with the West Norfolk and Lynn Hospital—the Committee's contribution to the Hospital being £10. Total operations for Tonsils and Adenoids, 58.

9. LABORATORY WORK.

The S.M.O. microscopically examined 180 specimens of hair submitted by the nurses. 151 definitely showed the presence of the Ringworm Fungus, 16 were definitely negative. No spores were found in the remaining 10 specimens, but otherwise they were unhealthy hairs, Throat Swabs—

78 swabs were sent to King's College Laboratory.

Reported Positive ... ... ... ... 9

,, Hofmann ... ... ... ... ... 52

,, Negative ... ... ... ... ... 17

Cost—£13 6s. 1d.

10. BLIND AND DEAF CHILDREN ACT.

4 children were certified as deaf and 3 as blind within the meaning of the Act. 21 deaf Norfolk children and 14 blind Norfolk children were accommodated in East Anglian Home at Gorleston during 1918.

11. Tuberculosis.

One case of early Pulmonary Tuberculosis was sent to the Sanatorium for children at Holt, and remained there two months, when her removal was requested owing to persistent bed wetting

No case has relapsed up to the present.

One child, suffering from Tubercular Disease of the Ankle, was also sent to Lord Mayor Treloar Cripples' Hospital and College, Alton. After a stay of 10 weeks she was discharged with the disease arrested.

It is possible that the County Council may adopt a comprehensive scheme

for the treatment of Tuberculosis during the present year (1919).

12. Scables.—A large number of cases had to be dealt with. Where possible a nurse was instructed to follow up these cases. The following instructions, printed on cards, were sent to parents where no Doctor was in attendance

#### INSTRUCTIONS FOR DEALING WITH ITCH.

 Give the child a warm bath at night, using Sulphur Soap. (If not obtainable use ordinary soap).

2. After drying, apply Sulphur Ointment (strength 1 in 10) all over the

body.

3. Put the child to bed.

4. Bathe the child thoroughly in the morning.

Repeat for 3 or 4 nights until cured.

N.B.—All washable clothing worn by an infected person should be boiled. If this cannot be done, bake the clothes in the oven.

WARNING.—The complaint is very catching.

The School Nurse (Miss Bullock) reports that where mothers conscientiously carried out this simple method a speedy cure was effected.

Fuller instructions for Nurses are given in the following alternative

methods.

#### TREATMENT OF ITCH (SCABIES).

#### ALTERNATIVE METHODS.

SULPHUR OINTMENT. "A."

(1). A hot bath of half-an-hour's duration is taken on three consecutive days. During the bath, the body and limbs, especially the hands and wrists and buttocks, are scrubbed with soft soap by a flesh brush.

(2). After each bath the patient, if old enough, rubs in the ointment and puts on an old sleeping suit, gloves, and socks and goes to bed, and is to

remain there until it is time for the bath on the next day.

The baths and inunctions must on no account be continued beyond the three days. The patient gets up and dresses after the three days and usually requires no further treatment, but is kept under observation for another three days.

5

If the treatment has been thoroughly carried out the patient is cured and free from infection after the three baths and inunctions.

If such a case is not cured in this way, it is probably not Scabies.

Any such case to be reported to the School Medical Officer.

Clothes may be disinfected, but in practice this is found to be unnecessary. Brushing and airing of outside clothes and washing of underclothes suffice.

"B"

- (1). Hot bath—temp. 100° to 106° F.
  Dissolve 2 ozs. Sodium Carbonate in it.
  Lie in bath covered to neck for 20 minutes.
- (2) Rub over limbs and body with 2 ounces soft soap using a hard brush. Scrub all over except head and face. Take 10 minutes over this. Scrub webs and sides of fingers thoroughly with hard tooth brush, also between toes, also fronts, and inner margins of wrists, buttocks, feet and ankles, penis, scrotum, and fronts of armpits. (After use boil brush one or two minutes).
- (3) Patient lies down in bath and rinses well. Then dries with clean towel.
- 4. Place 3 to 4 ozs. of Liq. Calcis Sulphurata in a clean saucer. Nurse to put on rubber gloves, dip a 4 inch square of clean lint in liquid, rub all over body giving special attention to parts mentioned already (taking care to avoid the glans penis). Patient, if possible, to stand near a stove or fire to facilitate drying. Do not dry with towel—the application to dry by evaporation.

If skin very sensitive, dilute liquid with equal part of hot water, and

moderation in use of hard brush.

When skin dry, dress in clean clothing. Repeat bath, etc., next day, Patients should undergo this treatment on two consecutive days only.

13. INFECTIOUS DISEASES.—The method instituted in 1908 of Teachers notifying both to the S.M.O. and the District M.O.H. cases of infectious or supposed infectious or contagious diseases was continued.

## CLOSURES OF SCHOOLS AND DEPARTMENTS IN 1918 IN CONNECTION WITH INFECTIOUS DISEASES.

Disease.	1 week or under.	2 weeks.	3 weeks.	4 weeks.	5 weeks.	6 weeks.	7 weeks.	8 weeks.	9 weeks.	Total No. of Closures (Schools and Departments).
Measles	 11	20	31	29	7	4	2		1	105
Diphtheria	 5	5		1						11
Whooping Cough		3	7	8	5	2	1	1		27
Scarlet Fever	 1			1		1				3
Influenza	 38	163	172	121	42	9	9			554
Mumps			3	1						4
Mixed Infections	 3	2	1	4	2		2	2		16
	_	-	-	-	-	-	-	-	-	
Totals	 58	193	214	165	56	16	14	3	1	720

Of the above Closures, 545 were advised by the School Medical Officer, 76 were advised by the District Medical Officers of Health, with the subsequent approval of the S.M.O., and 97 by the Managers, which were subsequently approved by the S.M.O., whilst 2 were closed by the Sanitary Authority.

The dislocation of the School Service during the last 3 months of the year by the pandemic outbreak of Influenza, is indicated by the above figures. Where an attempt was made to deal with early outbreaks of Influenza, by exclusion of individual children, the following instructions were issued by the S.M.O.

INSTRUCTIONS Re INFLUENZA, by School Medical Officer.

Patients should stay in bed for 2 or 3 days at least, at the commencement of illness.

All Scholars should gargle with solution of 1 in 5000 Permanganate of Potash, and should also sniff same solution through the nostrils.

Rooms should be well aired, but Patients must not be in draughts.

Handkerchiefs should be held in front of mouth when coughing or sneezing and afterwards boiled.

Contacts in perfect health need not be excluded, but any contact shewing the slighest evidence of a cold is to be excluded until well, because the disease is most infectious in its early stages.

#### EXCLUSION OF CHILDREN.

(a) STATEMENT OF NUMBER OF CHILDREN, INCLUDING CONTACTS, TEMPORARILY EXCLUDED AND RE-EXCLUDED FROM SCHOOL DURING 1918.

Infectious Diseas	ies-					
Diphtheria			263	Influenza		200
Mumps			642	Coughs and Colds		185
Chicken Pox			552	Sore Throats	***	30
Scarlet Fever			163	Whooping Cough		1058
Measles			918	German Measles	444	91
Other Rashes			8			
Contagious Affect	tions—					
Ringworm of Se		rules		Scabies		148
are complied	with)		169	Ringworm (body)		31
Pediculosis		122	266	Impetigo		177
Eczema			6			
Other Diseases (g	enerally fr	om Ce	rtificate	issued by Family Docto	)	
				monday I willing wood	,,,	
Lung Affection			69	Jaundice		6
Lung Affection Tuberculosis—	s (not tube	rcle)				6 9
Lung Affection Tuberculosis—	s (not tube	rcle) y*	69	Jaundice		
Lung Affection Tuberculosis—	s (not tube Pulmonar	rcle) y*	69 11	Jaundice Rheumatism		9
Lung Affection Tuberculosis—	s (not tube Pulmonar Glandular Osseous	rcle) y*	69 11 5 4 13	Jaundice Rheumatism Chorea Anæmia Debility, general		9 4
Tuberculosis—	s (not tube Pulmonar Glandular Osseous	rcle) y* 	69 11 5 4 13 20	Jaundice Rheumatism Chorea Anæmia Debility, general Otorrhæa		9 4 17
Tuberculosis—	s (not tube Pulmonar Gland <b>u</b> lar Osseous ds	rcle) y* 	69 11 5 4 13	Jaundice Rheumatism Chorea Anæmia Debility, general Otorrhæa Gastritis		9 4 17 48
Tuberculosis— Enlarged Glan Tonsilitis	s (not tube Pulmonar Glandular Osseous ds	rcle) y*	69 11 5 4 13 20	Jaundice Rheumatism Chorea Anæmia Debility, general Otorrhæa Gastritis Accidents		9 4 17 48 6
Tuberculosis— Enlarged Glan Tonsilitis Epilepsy	s (not tube Pulmonar Glandular Osseous ds	rcle) y*	69 11 5 4 13 20 13 1 4	Jaundice Rheumatism Chorea Anæmia Debility, general Otorrhæa Gastritis Accidents Malnutrition		9 4 17 48 6 4
Tuberculosis— Enlarged Glan Tonsilitis Epilepsy Rickets	s (not tube Pulmonar Glandular Osseous ds	rcle) y*	69 11 5 4 13 20 13 1 4 3	Jaundice Rheumatism Chorea Anæmia Debility, general Otorrhæa Gastritis Accidents Malnutrition Swabbed		9 4 17 48 6 4 18
Enlarged Glan Tonsilitis Epilepsy Rickets Neurasthenia	s (not tube Pulmonar Glandular Osseous ds	rcle) y*	69 11 5 4 13 20 13 1 4	Jaundice Rheumatism Chorea Anæmia Debility, general Otorrhæa Gastritis Accidents Malnutrition		9 4 17 48 6 4 18 4

In addition, on 32 occasions complete classes were excluded owing to Measles, and on 2 occasions for Whooping Cough.

#### (b) PARTICULARS OF PERMANENT EXCLUSIONS ISSUED IN 1918.

Mental Deficiency	10	Peritonitis	944	1
Lung Affections (not tubercle)	3	Poliomyelitis		2
Epilepsy	4	Blind		2
Tuberculosis-Pulmonary	5	Deaf		4
" Glands	1	Heart Disease		1
,, Osseous	1	Hip Joint Disease	***	1
Puberty Changes	5	Rheumatism		1

Total Permanent Exclusions during the year = 41.

### 14. MISCELLANEOUS WORK DONE BY THE SCHOOL MEDICAL OFFICER IN 1918.

During 1918 the S.M.O. examined seven candidates for Nursing Training, and also reported on medical certificates sent in by candidates for Pupil Teacherships.

#### 15. MENTALLY DEFECTIVE CHILDREN.

7 children were notified to the Local Authority under the Mental Deficiency Act of 1913, during 1918.

16. Defective Teeth.—It is much to be regretted that the School dental work has been interrupted by the War. No work is of more importance—except preventive work. The large percentage of young children with carious teeth strongly indicates some dietary fault. This is possibly due to a lack of balance in the constituent proximate principles, as, for instance, an excess of starchy food (bread), and a deficiency of proteid food (meat, milk, etc.), and vitamines. These are questions for scientific investigation, which should be extended to the feeding of mothers during the periods of gestation and lactation.

J. T. C. NASH.