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PETERBOROUGH

JOINT EDUCATION BOARD

Annual Report

of the

Principal School Medical Officer

for the Year

1956

G. NISBET, M.B., Ch.B. (Ed), D.P.H., R.C.S. (Ed)

PETERBOROUGH JOINT EDUCATION BOARD

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER FOR THE YEAR 1956

STAFF

Principal School Medical Officer	....	George Nisbet, M.B., CH.B. (ED), D.P.H., R.C.S.(ED).
Deputy Principal School Medical Officer		Gerald Dison, M.C., L.R.C.P., L.R.C.S.(ED), L.R.F.P. & S.(GLAS.), D. OBST. R.C.O.G., D.P.H.(ED).
Assistant School Medical Officer	....	Diana O. McKnight, M.B., B.S., D.C.H. (commenced duty 22. 5. 56).
Principal School Dental Officer	....	Thomas Henry Roberts, L.D.S.
School Dental Officer	....	Vacant.
Anaesthetist (Dental) part-time	....	J. G. Inglis, M.B., CH.B.
School Nurses (in order of length of service)	....	Mrs. L. Young, S.R.N., R.F.N. Mrs. S. A. Coward, S.R.N., B.T.A. Miss B. M. Wyatt, S.R.N., S.C.M., H.V.CERT.
Speech Therapist	....	Mrs. M. Samways, L.C.S.T.
Dental Attendant	....	Miss D. E. Nichols.
Chief Clerk (School Health Dept.)	....	J. J. Dunford.

CONSULTANT STAFF

The services of the following Consultants have been made available during the year, by arrangement with the East Anglian Regional Hospital Board :

Consultant Ear, Nose & Throat Surgeon	A. A. Finlayson, M.B., CH.B., F.R.C.S.(ED).
Consultant Paediatrician	B. W. Powell, M.B., B.CHIR., M.R.C.P., M.R.C.S., L.R.C.P., D.C.H.
Consultant Ophthalmic Surgeon	G. M. Barling, M.B., D.O.M.S.

To The Chairman and Members of the Peterborough Joint Education Board.

Ladies and Gentlemen,

I have the honour to present my eighth Annual Report on the health of school children in the County of the Soke of Peterborough.

During the year, Dr. Diana McKnight was appointed as Assistant Medical Officer—she devoting seven-elevenths of her time to the School Health Service. She took up her duties on May 22nd, and this new and additional appointment has made it possible for the work of school medical inspection to be brought up to date.

Every school in the area was inspected and re-inspected during the year, and the total number of medical examinations was the highest ever recorded.

For the first time since I have been Principal School Medical Officer, it has been possible for the medical re-inspections to be brought up to date, and nearly a thousand re-inspections were carried out in 1956, in addition to the examination of every child who was due for routine medical inspection.

Routine examinations numbered 2,928, special inspections 65, re-inspections 943—a total of 3,936, compared with 3,822 last year. Other special examinations carried out by the medical staff on behalf of the Joint Education Board numbered 231, so that a total of 4,167 examinations were undertaken during the year.

27,555 examinations were made by the school nurses for cleanliness, compared with 26,188 last year. 80 individuals were found to be infested with vermin, which, among a school population of over 10,000, must be considered very satisfactory. There are but a few cases of gross and persistent uncleanliness among the children, most of the cases being of slight severity.

In spite of further advertisements, we have not been able to fill the vacancy for a School Dental Officer. The Principal School Dental Officer (Mr. T. H. Roberts) inspected 4,198 children, and actually treated 2,474.

The work of the School Health Service proceeded smoothly during the year, and was not interrupted by illness or resignations. I should like to express my thanks to my colleagues, Dr. Dison and Dr. McKnight, to the Principal School Dental Officer, Mr. T. H. Roberts, the Speech Therapist, Mrs. Samways, and to the three School Nurses for their loyal and ungrudging service.

I am also indebted to the Chief Education Officer and his staff for their help and co-operation, and to the members of the Special Services Sub-Committee of the Joint Education Board, whose continued help and interest is greatly appreciated.

Finally, I should like to thank my own clerical staff, who have again contributed so much to the efficient running of the School Health Service. I do appreciate all the hard work they have carried out, under the able direction of Mr. Dunford.

I have the honour to be,

Your obedient Servant,

GEORGE NISBET

County Medical Officer
and
Principal School Medical Officer
to the Joint Education Board.

GENERAL STATISTICS

Area

Area of Administrative County (in acres)	53,464

Civilian Population

City of Peterborough	54,380
Peterborough Rural District	7,630
Barnack Rural District	4,340
Administrative County	66,350

School Population

Nursery School	51
Average number of children on registers of Primary Schools during 1956	6,910
Average number of children on registers of Secondary Modern Schools during 1956	2,263
Average number of children on registers of Grammar Schools during 1956	1,238
	10,462

(This is an increase of 435 on the figures for 1955)

Number of Schools

Nursery Schools	1
Primary Schools	36
Secondary Modern Schools	7
Grammar Schools	3
Total	47

MEDICAL INSPECTION

I append details of school medical inspections carried out during the year 1956, and, for comparison, the figures for 1955.

	1956	1955
Entrants	1116	1450
Second Age Group	966	1089
Third Age Group	805	819
Additional Periodic Inspections	41	72
Total Routine Inspections	2928	3430

Other Inspections

Number of Special Inspections	65	43
Number of Re-inspections	943	349
Grand Total	3936	3822

For the first time for many years, it has been possible (owing to the appointment of an Assistant Medical Officer) to carry out medical inspections and re-inspections in every school in the County.

While the number of routine examinations were rather less than in 1955, 600 more re-inspections were carried out, and the total number of medical examinations is the highest ever recorded in this County.

In addition to the above examinations, 188 children were examined for work out of school hours. Adult medical examinations carried out on behalf of the Joint Board numbered 43, viz., college candidates, 22, teachers 13, other examinations 8.

FINDINGS OF MEDICAL INSPECTION

Diseases and Defects

Of the 2,928 children examined at the periodic medical inspections, 277 were found to be suffering from a disease or defect requiring treatment (other than dental diseases and infestations with vermin). This represents 9.4% of all pupils inspected, compared with a percentage of 13.4% last year, 16.3% in 1954, and 21.0% in 1953.

The following Table shows the number of pupils inspected and the number found to be in need of treatment in the various age groups. (The figures in brackets refer to 1955.)

	Inspected		*Requiring Treatment*		*Percentage*	
Entrants	1116	(1450)	107	(204)	9.5	(14.0)
Second Age Group	966	(1089)	104	(164)	10.7	(15.0)
Third Age Group	805	(819)	63	(93)	7.8	(11.1)
Other Inspections	41	(72)	3	(1)	7.6	(1.4)
Total	2928	(3430)	277	(462)	9.4	(13.4)

As occurred last year (but contrary to the findings of previous years) the greatest percentage of children found to require treatment occurred in the Second Age Group (i.e., children examined at 11 years of age). Usually the most children with defects are found among the Entrants and the least among the Third Age Group (" Leavers ").

It may well be that the increasing care given to pre-school children, through infant welfare clinics, etc., resulting in the remedying of defects before a child goes to school, that in future we shall find the highest percentage of pupils in need of treatment occurring in the Second Age Group, by which time a certain number are, for instance, found to be suffering from defective vision.

By the time a child leaves school, defects such as defective vision, nose, throat and orthopaedic defects should normally have been treated and remedied.

There has been a striking decrease in the percentage of children found with defects requiring treatment. As will be seen from the above Table, a total percentage of 9.4 of the children examined in the routine groups were found to have defects requiring treatment, compared with 13.4% in 1955 and 16.3% in 1954.

The decrease is largely due to the smaller number of children referred for treatment with defects of the nose and throat. In 1955 a total of 106 such children in the routine age groups were referred for treatment, compared with 17 only in 1956. The comparable percentages are—1955—23%, 1956—5.8%.

Eye defects accounted for 29% of the children referred for treatment, and orthopaedic defects for 26%.

General Condition

In previous years, children were classified under three headings, viz.

A—Good health and nutrition
B—Fair health and nutrition
C—Poor health and nutrition.

The Ministry of Education requested that in 1956, pupils should be classified in two categories only, viz. Satisfactory and Unsatisfactory.

Eight children only, of the 2928 examined in the routine age groups in 1956, were classified as unsatisfactory, or 0.28%. In 1955, 4.6% of the pupils examined were classified as being of poor health and nutrition, and if this is taken as a criterion it will be seen that a great improvement is noted in the children examined in 1956.

Seven of the above children (all boys) were examined in the Third Age Group (all at one school), and one was an entrant.

The Ministry asked that a detailed report on the home circumstances, etc., should be obtained for all pupils classified as unsatisfactory. This was done, and it may be of interest to summarise briefly the reports of the eight children who came under this category in 1956.

(1) Boy, aged 15. Only child (adopted). Home conditions satisfactory. Quiet, unassuming, nervous boy, with high I.Q. Did not have school meals or milk at school. (Does not like cold milk.) Had bad attack of athletes' foot for several months.

(2) Boy, aged 14. Only child (illegitimate). Home conditions fair. Boy lacking in energy, slipshod, and of poor posture. Had milk at school, but not school meals. No unusual illnesses.

(3) Boy, aged 14. Youngest of family of five. Home conditions good. Quiet, retiring boy, with high I.Q. Poor appetite. Had milk at school, but not school meals. No unusual illnesses. Other members of family of poor physique.

(4) Boy, aged 14. Fourth of family of eight. Home conditions very poor. Dirty, damp, overcrowded hut on Camp site. Both parents unsatisfactory —father alcoholic and often off work owing to illness. Has school meals and school milk. History of otorrhoea since 1949.

(5) Boy, aged 14. Fifth of family of six. Home conditions not very satisfactory. Mother anaemic. Has school milk but not school meals. No unusual illnesses.

(6) Boy, aged 14. Third of family of four. Home conditions satisfactory. Has school meals and milk. Younger brother has been to open-air school. No unusual illnesses.

(7) Boy, aged 14. Youngest of three. Home conditions satisfactory. Mother works two hours daily. Has school milk but not school meals. History of pneumonia, bronchitis, asthma and eczema. Operations for tonsils and adenoids, circumcision and appendicectomy.

(8) Girl, aged 5. Youngest of family of three. Home conditions most unsatisfactory. Child is having school milk and school meals. When she commenced having dinners at school, table manners were appalling. She did not know how to use knife, fork or spoon, and at first had to be fed with a spoon. Child " smelly " and dirty. Parents said to drink and child is kept up until a late hour at night. Child has since been admitted to Open-Air School.

It will be seen from the above brief summaries that in four cases the home conditions were described as fair, or unsatisfactory ; in two cases they were extremely poor. Most of the children were rather late in going to bed—9.30 to 10 p.m. in six cases, and 9 p.m. in two others.

It must be regarded as most satisfactory that eight children only out of a total of nearly 3,000 examined were classified as " Unsatisfactory," and it will probably be found that our percentage of such children is one of the lowest in the country. In one only of the eight cases was there an element of parental neglect. This was not considered to be sufficient to warrant referring the case to the N.S.P.C.C. but after being kept under supervision, the child was sent to an Open-air School, where she is making good progress.

School Meals Service

School Canteens are in operation in 16 schools. The following Table shows the number of school meals supplied to school children on a typical school day in December, 1956.

		Meals supplied
(a)	City Schools—container meals	1145
(b)	City Schools—own canteens	1396
(c)	Rural Schools—container meals	80
(d)	Rural Schools—own canteens	883
(e)	Total number of meals supplied	3504
(g)	Percentage of children taking meals	32.40

At the end of 1955, 33.47 % of children in attendance at schools in the area were having school meals.

Cleanliness

Three school nurses are employed by the Peterborough Joint Education Board, whose time is fully occupied in duties in connection with the School Health Service.

During the year 1956, they carried out a total of 27,555 examinations for cleanliness in the schools, compared with 26,188 inspections carried out in 1955, and 25,773 in 1954.

It is satisfactory to report that out of the 27,555 inspections for cleanliness, only 80 individual pupils were found to be infested with vermin, compared with 74 last year and 107 in 1954. Cleansing orders were issued in respect of 36 children, against 32 in 1954.

At one school during the year, the school nurse inspected the heads of over 1,000 children. All were clean, but one of the staff complained of irritation in her head, which, on examination by the Nurse, was found to be verminous ! The source of infection was eventually traced to trying on hats in various shops. The moral of this is surely for the ladies to buy the first hat they try on.

Following-up.

For the first time for a number of years it was possible for all children suffering from defects or diseases to be re-examined at school, as well as those found to have some condition requiring observation. Where necessary, visits are paid to the homes by the school nurses.

Close liaison is maintained with the specialists at the Memorial Hospital. When children fail to keep an appointment at the Hospital, I arrange for one of the school nurses to pay a visit to the home to find out why, for it seems most unusual for parents to take the trouble to inform the hospital authorities when an appointment cannot be kept.

Treatment of Defects

The arrangements whereby all treatment, other than speech therapy and minor ailments treatment, are carried out by the National Health Service, have continued to work satisfactorily.

Table II of the Statistical Summary in the Appendix of this Report details the defects found at the routine and special inspections, and Table IV deals with the defects treated.

Minor Ailments

A Minor Ailments Clinic is held at the School Clinic premises, Town Hall, Peterborough, on each Monday morning, and, if necessary, on other days, when I personally take charge of the Clinic. A school nurse attends to treat minor ailments on other mornings between 9 and 10 o'clock, and between 4 and 5 p.m., when I am also available to see children considered by the nurses to require my attention or advice.

I append details of the minor ailments treated during the year.

	Number of cases treated
Ringworm of Body	3
Scabies	4
Impetigo	6
Other skin diseases	13
Minor ear defects	36
Minor eye defects	3
Miscellaneous conditions	197
Minor injuries	12
Total	274

In 1955, 293 minor ailments were treated at the Clinic.

School Clinics

The Ministry of Education request up to date information regarding the location of school clinics and the type and number of sessions held in each.

As stated above, there is one central school clinic situated in the Town Hall, Peterborough, which is comparatively central for all the schools in the City area. A school medical officer is always in attendance on a Monday morning, and is available for consultation every other morning from 9 - 10 o'clock, and from 4 - 5 p.m. each day. A school nurse is always in attendance at these times. Special examinations, which require a longer period than that normally available at a routine inspection at the schools, are carried out at the school clinic, and minor ailments and miscellaneous injuries and defects are treated by the doctors or nursing staff.

In the rural areas, a weekly clinic is held (usually on a Monday morning) at Arthur Mellows Village College, Medical Inspection Room, by the school nurse who is responsible for the village schools. Other cases of minor ailments are treated by the nurse, either in the schools or are brought to the Town Hall Clinic.

Defective Vision

Dr. G. M. Barling, the Consulting Ophthalmologist of the Regional Hospital Board, continues to carry out the school ophthalmic work at the Peterborough Memorial Hospital, and I again express my thanks to Dr. Barling and also to Sister Lindsay for their co-operation and help.

This is not a " red-tape " department, and a telephone message is sufficient to ensure that any urgent case is attended to promptly.

During 1956, 487 children suffering from errors of refraction (including squint) were referred by me to the Ophthalmic Surgeon. Glasses were prescribed for 379 of these children and were obtained by the end of the year, or early in 1957.

Three children suffering from slight blepharitis were treated at the School Clinic during the year.

Defects of Ear, Nose and Throat

Seventeen children examined in the routine age groups or as " Specials " were referred through their general practitioner to the E.N.T. Surgeon for his opinion regarding operative treatment, and another 344 pupils required to be kept under observation for enlarged tonsils and adenoids. Therefore, 12% of all children examined in the routine and special groups during the year were found to be suffering from a greater or lesser degree of defects of the nose and throat, antra or sinuses, compared with 13% in 1955, and 17% in 1954.

In 1956, far fewer children were referred for treatment (17 against 112 last year), and a greater percentage were referred for observation. This is in accordance with modern medical practice, where the emphasis is placed on conservative treatment.

During the year, 369 children were operated on for adenoids and chronic tonsillitis. Most of these had been brought forward from previous years or had been referred to the Hospital by their own general practitioners. 225 of the operations were carried out at the Peterborough Memorial Hospital, 143 at Stamford Hospital, and one at the R.A.F. Hospital, Ely.

At the end of the year 1956, according to my records, there were 679 school children in the area awaiting operative treatment for enlarged tonsils and adenoids, compared with 718 waiting at the end of 1955, but again, many of these had been referred for operation by their own doctors.

As requested by the Ministry of Education, a note was made during the year of all children examined in the routine age groups who had previously been operated upon for enlarged tonsils and adenoids. I found that a total of 340 children (or 11.7%) of those examined had previously received operative treatment. Details are as follows :

Age Group	*Boys*	*Girls*	*Total*	*Percentage*
Entrants	33	24	57	5.1
Second Age Group	118	87	205	21.2
Third Age Group	39	39	78	9.6
Totals	190	150	340	11.7

Nine children were operated on at the Peterborough Memorial Hospital during the year for other nose and throat conditions, and three received other forms of treatment.

I should like once again to express my thanks to Mr. A. F. Finlayson, the E.N.T. Surgeon, and to the Registrar, Dr. M. E. Johnston, for their continued co-operation and assistance.

All children have the ears examined at the routine medical inspections by electric auroscope by the school medical officers. 41 children suffering from ear defects (chiefly aural wax) and six suffering from otitis media were found at the routine medical examinations, and two others among the ' Special ' examinations. 56 other children with a minor degree of otitis media or aural wax were under observation, and treated by conservative measures during the year.

In 1955 in England and Wales at periodic medical inspections of the School Health Service 0.26% of the children examined were found to be suffering from ' otitis media needing treatment.' In the Soke of Peterborough in 1956 0.02% only were found to require treatment, and 0.13% were referred for observation. About 3% of men examined before National Service are found to have chronic otitis media, and in one study 55% of these were described as active (i.e., pus or granulation tissue was observed) at the time of examination.

One child examined in the routine age groups was referred for treatment on account of deafness, and another 17 were kept under observation for defective hearing.

Children requiring treatment for removal of aural wax, etc., were immediately treated by me at school or were invited to come to the Minor Ailments Clinic at the Town Hall on a Monday morning, and 36 such children were treated by the school medical officers during the year. The usual numbers of seeds, beads, pieces of lead pencil, etc., were removed.

Orthopaedic Defects

Children with orthopaedic defects again comprise a considerable percentage of defects found at medical inspection. Out of a total of 3,093 children examined in the routine and special groups as many as 366, or 11.1%, were found to have orthopaedic defects of a greater or lesser degree, viz. :

Posture	....	77
Foot Defects	....	103
Other defects	....	186
	Total	366

In 1955 11.4% of the children examined were found to have orthopaedic defects, and in 1954, 13%.

Child Guidance

There is at present no Child Guidance Clinic in Peterborough, but correspondence is going on with the East Anglian Regional Hospital Board with a view to such a service being established in the area. In the meantime, Dr. R. E. Glennie, the Consultant Child Psychiatrist to the Cambridgeshire Education Committee, had kindly seen several children referred by me during the year, as well as several referred by their own general practitioners, and I am much indebted to Dr. Glennie for his help and co-operation.

Speech Therapy

The report of Mrs. Samways, Speech Therapist, is appended.

169 children suffering from speech defects have been treated this year—69 children were admitted and 36 discharged.

The number of children attending the speech clinics has increased since last year. This does not necessarily mean that there are more children suffering from speech defects but that increasing vigilance by doctors, school nurses and parents has brought more cases to light.

Weekly sessions were held as follows :

(a) Six sessions at the Town Hall
(b) One session at Dogsthorpe School
(c) One session at Eastholm School
(d) Half session at A.M.V.C.
(e) Half session at Glinton Primary School
(f) One session at Walton School

SPEECH THERAPY TABLE

	Admitted	*Brought forward from 1955*	*Discharged*	*Left District*	*Uncooperative*	*Deceased*	*Total*
Dyslalia	66	48	34	—	1	1	150
Stammer	3	10	2	—	—	—	15
Cerebral Palsy	—	—	—	—	—	—	—
Dysphonia	—	1	—	—	—	—	1
Cleft Palate	—	1	—	—	—	—	1
Multiple Physical Handicap	—	1	—	1	—	—	2
Total	69	61	36	1	1	1	169

Home visits—45 School visits—17 Total of visits—62

Margaret Samways, L.C.S.T.

Handicapped Pupils

Under the Education Act, 1944, the Local Education Authority is responsible for ascertaining handicapped children from the age of two years. As the Medical Officer responsible for the administration of the Maternity and Child Welfare Services of the Local Health Authority, many of these children are known to me before they reach school age, and are already classified as ' Handicapped Infants.'

Handicapped children are those suffering from disability of mind or body to such an extent that they require education by special methods.

During the year further discussions and conferences took place with a view to getting accommodation for educationally sub-normal boys, but up to the time of writing we have not got much further with the projected scheme, whereby a residential school, in combination with the Cambridgeshire, Huntingdonshire, the Isle of Ely and the Soke of Peterborough is to be established.

There was a tentative suggestion that Paston Hall, Peterborough might be adapted as a day school for educationally sub-normal boys, but this proposal came to naught. So the educationally sub-normal boys in the area continue to pass through the ordinary schools, if not altogether unheeded by the teachers, certainly unloved by them !

The needs of the educationally sub-normal girls have been, to a great extent, met by the opening of Orton Hall, near Peterborough, where there is accommodation for 100 girls (46 boarders and 54 day pupils).

At the end of the year, 22 girls from the Soke of Peterborough were in attendance at Orton Hall, 21 as day pupils and one as a boarder.

The following Table shows the number of handicapped pupils on the Register during the year 1956 :

Blind or partially blind	4
Other visual defects	2
Deaf or partially deaf	9
Delicate	34
Epileptic	14
Educationally sub-normal	140
Physically handicapped	85
Maladjusted	8
Total	296

At the end of the year 1955, 312 children were on the Register.

Special Schools

One blind girl is being educated at the Barclay School for Partially-sighted girls at Sunninghill, Berks., and another girl (who is also partially deaf) is being educated at the Birmingham Royal Institution for the Blind. One boy was at the Royal Normal College during the year.

One deaf boy is being educated at the Royal School for the Deaf, Derby. Two others (brothers) are at St. John's Residential School for the Deaf, Boston Spa, Yorks., and a fourth boy was at Donnington Lodge Nursery School, Newbury, Berks. during the year. One girl is being educated at the Yorkshire Residential School for the Deaf, Doncaster.

A girl suffering from spastic paraplegia was at the Palace School, Ely, and another girl suffering from rheumatic chorea was at St. Patrick's Open-air School, Hayling Island during the year. A diabetic boy was admitted to Shaftesbury House Hostel for Diabetic Children, Rustington on 23.5.56.

Eight children suffering from pulmonary tuberculosis were resident at the Children's Sanatorium, Kelling during 1956.

Thirty-four delicate children were in residential open-air schools during the year, viz :

Port Regis Open-air School, Broadstairs (girls)	10
Holy Cross Open-air School, Broadstairs (boys)	20
St. John's Open-air School, Woodford Bridge	2
St. Patrick's Open-air School, Hayling Island	2
Total	34

In the previous year 47 children were in open-air schools.

Except for one spastic boy who was resident at St. Vincent's R.C. Orthopaedic Hospital School, Pinner, our spastic children are well catered for at the ' Wilfred Pickles ' School, Tixover Grange (15 miles from Peterborough) where we now have one boarder and eight day pupils.

I have a personal interest in this school, being a member of the Management Committee.

Co-operation with Teachers, Parents and Doctors

I am appreciative of the helpful co-operation I receive from the teachers of the Peterborough Joint Board, not only at the time of the medical examination, but in completing medical inspection lists and making smooth running arrangements at the time of the examinations. The majority of the head teachers do everything possible to make the visit of the school medical staff pleasant.

Great importance is placed upon obtaining the co-operation of parents. Letters are sent out from my Office to the parents or guardians of all children due for routine examination—usually a week in advance—informing them of the exact time and place of the inspection, and inviting their attendance. The parents are asked to complete a form giving the family and child's previous medical history. In one or two instances the parents have objected to completing this form, but in the vast majority of cases the parents willingly co-operate in this, and appreciate that the questions are not asked out of idle curiosity but to enable the school medical officers to get an accurate picture of the child's medical history.

72.4 per cent of the parents attended the medical examination of their children, compared with 73.8 % last year, and 65 % in 1954.

54 boys and 58 girls—a total of 112—were absent from school on the day appointed for their examination. In most cases their absence was due to illness or similar causes. When it is suspected that a child has been deliberately kept away from school on the day of the medical examination, a letter is sent to the parents pointing out that medical examination is compulsory and requesting them to bring the child to be examined by the School Medical Officer at the Town Hall.

A number of American children living in the area were examined during the year. One small boy was impressed that the school medical examination was not used as an opportunity to give him an injection. After the examination he remarked ' Hiyah ! I'll sure tell the doctor at the Base the school doctor doesn't stick needles inyer.' Since then comments by American children have borne out that they associate their doctor with an injection, usually of a preventive nature. It is a matter for conjecture whether British children will ever attain the same outlook.

Now that it is forbidden that school medical officers can refer a child to hospital (except for visual defects) one is very dependent upon the co-operation of general practitioners. Where defects requiring treatment are found at school medical inspections, a communication is sent to the child's doctor asking him to consider referring the case to hospital, or otherwise treating the condition himself.

I am glad to report that I have received good co-operation from the doctors, and if some make a practice never to reply to letters, do at least telephone or call at my Office.

The relationship between the general practitioners and the School Medical Service is happy and cordial.

Vaccination and Diphtheria Immunisation

As in past years, a note was made on each child's medical inspection card as to whether vaccination and diphtheria immunisation had been carried out.

2,026 of the 2,928 children examined in the routine age groups had been immunised against diphtheria, or 69.1 per cent, compared with 65.4 % in 1955, and 65 % in 1954.

1,025 of the 2,928 children were known to have been vaccinated, or 35 %, compared with 30.4 % last year, and 26.3 % in 1954.

Some complaints were made to me that in the Dogsthorpe area parents were not being encouraged by their own family doctor to have their children vaccinated. I do not know if this is so, but I find that of 378 children medically examined at Dogsthorpe/Newark School during the year only 107 (or 28.2 %) had been vaccinated, which is 7 % below the average for the County.

At Wittering School, where there are many Service families, the results were most satisfactory. Of 56 children examined there, 55 had been immunised against diphtheria, and 49 vaccinated against smallpox.

Walton is another satisfactory area, especially as regards diphtheria immunisation. Of 175 children examined at the Infants and Junior Schools, 147 or 84 % had been immunised, and 64, or 36 %, vaccinated.

When, at the medical inspection, it is found that a child has not been immunised against diphtheria, the school medical staff take the oppotunity of stressing upon the parents the importance of this.

The chief reasons mothers give for not having the child immunised is the bald statement, ' I don't believe in it,' or, more frequently, ' My husband doesn't believe in it.'

Often when the father is approached, he states he has never been consulted and is keen for the immunisation to be carried out.

SCHOOL DENTAL SERVICE

I append a report of dental inspection and treatment of school children for the year 1956, as submitted by Mr. T. H. Roberts, the Principal School Dental Officer, to whom I am much indebted for his continued co-operation and interest.

REPORT OF DENTAL INSPECTION AND TREATMENT OF SCHOOL CHILDREN FOR THE YEAR 1956

This is my eighth consecutive Annual Report.

The following Schools were inspected during the year :

	City	*Soke*	*Grammar*
(1)	Walton Senior	Castor Infants & Juniors	County Grammar
(2)	Walton Junior	Thornhaugh C.P.	
(3)	Cromwell Road Junior Girls	Barnack C.E.	
		Helpston C.P.	
(4)	Fulbridge Infants		
(5)	West Town Juniors		
(6)	Lincoln Road Boys		
(7)	Queen's Drive Infants		
(8)	Walton Infants		
(9)	Fulbridge Juniors (part)		

The following figures and remarks amplify the statistical return required by the Ministry of Education.

Between 9 a.m. and 10 a.m. is set aside for the treatment of Specials, chiefly children suffering from toothache, but also children coming voluntarily to have their teeth examined and given any necessary treatment, after an interval of about 10 months since the last inspection at school. Those who do come for this voluntary inspection and treatment are more likely to leave school with a complete set of natural teeth.

4,198 children were examined during the year, made up of 3,054 examined at schools, and 1,144 examined as specials at the Clinic. Of the 4,198 children examined, 3,467 required treatment (82.5 %) and 3071 of those requiring treatment were referred for treatment (88.5 %) and 2,474 (80 %) were actually treated. These 2,474 children paid 4,761 visits to the Clinic. The 2,474 children who were treated at the Clinic consisted of 1,330 Routine Cases who attended on 2,653 occasions, and 1,144 Specials who attended on 2,108 occasions. There were nearly as many children attending the Clinic as Specials as there were Routine cases. This means that it takes me longer now to inspect the schools —the time between inspections being nearly $3\frac{1}{2}$ years.

The average attendance, per session, at the Clinic for treatment was 10.4. There were 2,728 Permanent teeth filled, and they had 2,974 fillings put in them and one upper front tooth had a root filling inserted. There were also 126 temporary teeth filled.

There were 365 Permanent teeth extracted and 2,247 temporary teeth extracted. The ratio of Permanent teeth filled, to Permanent teeth extracted, is $2728 : 365 = 7\frac{1}{2} : 1$. There were also 12 Permanent teeth and 120 temporary teeth and 6 supernumerary teeth extracted because of overcrowding.

There were 927 other operations on Permanent teeth, consisting of scalings, orthodontic treatment, the fitting of dentures, gum treatment and zinc-oxide dressings in large cavities. There were 1,256 dressings in temporary teeth, consisting of treatment with a solution of silver nitrate, which hardens the decay and so saves the teeth from being extracted.

There were 19 Regulation cases started during the year, and 14 of these were completed ; the other 5 cases will be completed early in the year 1957. There were 3 repairs to orthodontic plates. There were 239 visits to the Clinic for orthodontic treatment. There were 14 dentures fitted, and one repair to a denture, and these required 58 visits to the Clinic. The orthodontic cases consisted of one or more upper front teeth in bad alignment, and the results had a marked improvement in the appearance of the children. Each case took about 3 months to complete.

There were 63 children under 5 years of age sent from the M. & C.W. Clinic to have their teeth examined, and 7 of them had sound sets of teeth, 56 of them required treatment, and 55 had treatment, and they attended on 89 occasions. The treatment of these children consisted of 12 temporary teeth being filled, 62 temporary teeth were extracted, one being a supernumerary tooth, and 55 temporary teeth were treated with silver nitrate, and there were 2 other operations. There were 17 administrations of gas and oxygen, and 26 local anaesthetics, and 18 of these were mandibular injections and 5 were middle superior alveolar injections.

The School Medical Officer, Deputy School Medical Officer and Assistant School Medical Officer, referred children for treatment and 170 of them were treated, attending on 321 occasions. They were children who had not been inspected for some time, and usually required a number of teeth extracting because of pain or sepsis. The teeth were usually septic, and treatment resulted in healthy mouths, and an improvement in their general health. A few children required teeth extracting because of overcrowding. 4 children were sent to have their teeth X-Rayed before having them extracted. 2 children from the occupational class were given dental treatment, and they attended on 3 occasions, and had 1 temporary and 1 permanent tooth extracted, both children being given a general anaesthetic for the extractions.

4 children from other areas were examined, and 3 required treatment and had 2 permanent teeth filled and a dressing in a permanent tooth.

1564 local anaesthetics were given, and of these 1237 were regional local anaesthetics, consisting of 758 mandibular injections, 454 middle superior alveolar injections and 25 anterior superior alveolar injections.

General anaesthetics were given on 341 occasions, occupying 40 half sessions (1¼ hours) which averages 8½ patients per session. Dr. Inglis is an excellent anaesthetist, and is liked by both children and parents.

The average number of children inspected at each session at school was 109. In the case of Infant Schools, the mothers were invited to attend, and 422 did attend. The whole dental scheme was explained to them individually, and also the condition of the children's teeth and advice given. This meant that only 60 children could be examined each session, but the acceptance rate was good.

Number of children given Routine Dental Inspection at schools—in each age group.

Under 5	5	6	7	8	9	10	11
45	296	285	371	295	221	145	259
12	13	14	15	16	17	18	*Total*
376	336	242	132	33	15	3	3054

The average for each treatment session was :
Number of patients treated—10.4 ; Number of teeth extracted—5.8
Number of teeth filled—6.2 ; Number of other operations—4.8

I have occasionally referred patients to Mr. Haxton, Dental Surgeon, Peterborough Memorial Hospital, and wish to thank him for his help.

I wish to thank the Medical Officers, Head Teachers and Nurses for their able co-operation, which has been a great help in the success of the scheme.

I also wish to thank Miss Nichols for her help in the completion of the Statistics for this report.

A film entitled " The life of a Dental Student " was shown to the girls of the Westwood House School and the boys of Deacon's Grammar School, given under the aegis of the Local Dental Executive Committee. It is to be hoped that as a result some of the children will become dental students.

T. H. ROBERTS, L.D.S.
Principal School Dental Officer.

1956

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1)	Number of pupils inspected by the Authority's Dental Officer		
	(a) Periodic Groups		3,054
	(b) Specials		1,144
		Total (1)	4,198
(2)	Number found to require treatment		3,467
(3)	Number referred for treatment		3,071
(4)	Number actually treated		2,474
(5)	Attendances made by pupils for treatment		4,761
(6)	Half-days devoted to inspections (a)		28
	Half-days devoted to treatment (b)		458
		Total (6)	486
(7)	Fillings (a) Permanent Teeth		2,974
	(b) Temporary Teeth		126
		Total (7)	3,100
(8)	Number of teeth filled : (a) Permanent Teeth		2,728
	(b) Temporary Teeth		126
		Total (8)	2,854
(9)	Extractions (a) Permanent Teeth		365
	(b) Temporary Teeth		2,247
		Total (9)	2,612
(10)	Administration of General Anaesthetics		341
(11)	Orthodontics :		
	(a) Cases commenced during the year		19
	(b) Cases carried forward from previous year		3
	(c) Cases completed during the year		14
	(d) Cases discontinued during the year		0
	(e) Pupils treated with appliances		19
	(f) Removable appliances fitted		19
	(g) Fixed appliances fitted		0
	(h) Total attendances		239
(12)	Number of pupils supplied with artificial dentures		14 + 1 Remake
(13)	Other operations (a) Permanent Teeth		927
	(b) Temporary Teeth		1,256
		Total (13)	2,183

APPENDIX

MEDICAL INSPECTION AND TREATMENT RETURNS

TABLE 1
Form 8.M. (i)

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Special Schools).

(A) PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups	
Entrants	1,116
Second Age Group	966
Third Age Group	805
Total	2,887
Additional Periodic Inspections	41
Grand Total	2,928

(B) OTHER INSPECTIONS

Number of Special Inspections	65
Number of Re-Inspections	943
Total	1,008

(C) PUPILS FOUND TO REQUIRE TREATMENT

Number of Individual Pupils found at Periodic Medical Inspections 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* III	*Total individual pupils*
(1)	(2)	(3)	(4)
Entrants	2	105	107
Second Age Group	24	81	104
Third Age Group	25	38	63
Total	51	224	274
Additional Periodic Inspections	—	3	3
Grand Total	51	227	277

(D) CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE 1.A.

Age Groups Inspected	*Number of Pupils Inspected*	*Satisfactory*		*Unsatisfactory*	
		No.	*% of Col. (2)*	*No.*	*% of Col. (2)*
(1)	(2)	(3)	(4)	(5)	(6)
Entrants	1116	1115	99.91	1	0.090
Second Age Group	966	966	100.00	—	—
Third Age Group	805	798	99.13	7	0.87
Additional Periodic Inspections	41	41	110.00	—	—
Total	2928	2920	99.72	8	0.28

TABLE II.

INFESTATION WITH VERMIN

(i)	Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	27,555
(ii)	Total number of individual pupils found to be infested	80
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Sectn. 54 (2), Education Act, 1944)	—
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Sectn. 54 (3), Education Act, 1944)	36

TABLE IV.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

Group 1. EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with by the Authority	*Otherwise*
External and other, excluding errors of refraction and squint	3	—
Errors of refraction (including squint)	—	487
Total	3	487
Number of pupils for whom spectacles were prescribed	—	379

Group 2. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been treated by the Authority	*Otherwise*
Received operative treatment		
(a) for diseases of the ear	—	—
(b) for adeniods & chronic tonsilitis	—	369
(c) for other nose & throat conditions	—	9
Received other forms of treatment	36	3
	36	381

Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1956	1
(b) in previous years	5

Group 3 ORTHOPAEDIC AND POSTURAL DEFECTS

	by the Authority	*otherwise*
Number of pupils known to have been treated at clinics or out-patient departments	—	140

Group 4 DISEASES OF THE SKIN (excluding uncleanliness)

	Number of cases treated or under treatment during the year by the Authority
Ringworm (i) Scalp	—
(ii) Body	3
Scabies	4
Impetigo	6
Other skin diseases	13
Total	26

Group 5 CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	3	* See below

Group 6 SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority	169

(continued on page 24)

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN TABLE III

A. PERIODIC INSPECTIONS

Defect	*Defect or Disease*	*Entrants*		*Leavers*	
Code No. (1)	(2)	*Requiring treatment* (3)	*Requiring observation* (4)	*Requiring treatment* (5)	*Requiring observation* (6)
4	Skin	8	37	7	6
5	Eyes (a) Vision	2	3	25	26
	(b) Squint	19	22	1	3
	(c) Other	6	9	—	6
6	Ears (a) Hearing	1	5	—	4
	(b) Otitis Media	4	24	1	2
	(c) Other	15	5	8	5
7	Nose and throat	12	226	3	20
8	Speech	21	15	1	3
9	Lymphatic Glands	—	51	—	1
10	Heart	—	47	—	10
11	Lungs	3	52	—	11
12	Developmental :				
	(a) Hernia	4	25	—	1
	(b) Other	1	42	1	5
13	Orthopaedic :				
	(a) Posture	2	27	4	12
	(b) Feet	11	23	9	6
	(c) Other	23	87	4	13
14	Nervous system :				
	(a) Epilepsy	1	2	—	—
	(b) Other	—	7	—	2
15	Psychological :				
	(a) Development	—	16	—	2
	(b) Stability	—	37	—	7
16	Abdomen	—	—	—	1
17	Other	—	3	—	3

B. SPECIAL INSPECTIONS

Total (including all age groups inspected)		*Special Inspections*	
Requiring treatment	*Requiring observation*	*Requiring treatment*	*Requiring observation*
7	8	9	10
19	63	—	—
51	62	5	1
29	46	1	1
6	19	—	—
1	17	—	—
6	39	—	1
41	16	2	1
17	339	—	5
24	20	1	2
—	73	—	2
—	83	1	—
4	101	1	2
4	35	—	2
7	108	—	2
8	68	—	1
36	63	—	4
32	152	—	2
2	4	1	1
—	11	—	1
1	33	—	2
—	68	—	2
—	2	—	—
1	7	—	—

Group 7 OTHER TREATMENT GIVEN

(a)	Number of cases of miscellaneous minor ailments treated by the Authority	197
(b)	Pupils who received convalescent treatment under School Health Service arrangements	34
(c)	Pupils who received B.C.G. vaccination	189
(d)	Other than (a), (b) and (c) above (specify)	
	1. Minor injuries	12

* While no pupils were treated under arrangements made by the Authority, three were treated during the year by the Consultant Psychatrists of the R.H.B. by personal arrangements made by the Principal School Medical Officer.