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Reading Education Committee.

Report

OF THE

School Medical Officer

FOR THE YEAR

1921.

READING :

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COUNTY BOROUGH OF READING

OLD COLLEGE BUILDINGS,

ST. LAURENCE'S CHURCHYARD,

READING.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

LADIES AND GENTLEMEN,

I beg to submit the Annual Report on the work of the School Medical Department for the year 1921.

The report as before is framed on lines suggested by the Board of Education in order that the work of different areas may be presented in comparable form.

A summary of the work performed is given on page 4. From this and the succeeding pages it will be seen that the amount of work done is more than commensurate with the increased staff which has now finished its first complete year.

The medical examination of Reading School has been done for the first time this year. The conditions found are described on pages 25 and 26. A series of tables, pages 10-12, shewing the heights and weights of the boys of Reading School, of the girls at the Kendrick School, and of children attending the elementary schools probably illustrates more clearly than anything else the more favourable conditions found at the two former schools.

Your attention is also drawn to the large amount of work of a very valuable kind which has been done by the School Dentist who has now completed his first year of duty.

I should again like to express my appreciation of the consideration shewn me by the members of the Committee and of the valued co-operation of the Secretary for Education and his staff.

My special thanks are due to my medical colleagues and to every individual member of the staff of the School Medical Department for their loyal assistance and for the enthusiastic and energetic manner in which they have carried out their duties.

I am, Ladies and Gentlemen,

Your obedient servant,

H. J. MILLIGAN,

School Medical Officer.

March, 1922.

SUMMARY.

The following tabular statement represents the numbers of children who came under review by the Officers of the School Medical Department during the year :—

Children in average attendance at Elementary schools	...	...	13,284
Elementary school children examined	...	...	7,161
Examined at Secondary and Continuation schools	...	...	619
Miscellaneous examinations (employed boys, etc.)	...	...	254
Found defective at Elementary schools	...	...	3,926
Found defective at Secondary schools	...	...	316
Treated at Minor Ailments Clinic	...	...	1,244
Treated at Ringworm Clinic	...	...	151
Treated at Eye Clinic	...	...	345
Treated at Ear Clinic	...	...	78
Total attendances at various clinics	...	...	14,322
Examinations by School Dentist	...	...	4,787
Treated by School Dentist	...	...	2,475
Children examined by nurses for cleanliness...	...	...	25,742
Home visits by nurses	...	...	2,734
Number of baths given to children	...	...	1,284
Number of meals provided for school children	...	...	220,620

COUNTY BOROUGH OF READING.

The numbers of elementary schools and the number of children on the rolls and in average attendance in the borough are as follows :—

Number of schools.	Number on school rolls.	Average attendance.
33	14,816	13,205·4

These schools have 67 separate departments.

The following pages refer to the work of medical inspection and treatment in the elementary schools only.

At page 25 and the following page will be found the results of the medical examinations at the Reading school for boys, the Kendrick secondary school for girls and the Continuation school.

A description of the administrative arrangements and the co-ordination of the work of the school medical department with other health activities of the Corporation was included in the report for last year and needs no further comment.

The hygienic conditions of the schools are, in the main, satisfactory. Certain of the buildings are of old type but their replacement by more modern structures is not at the present time a practical proposition. In a number of class rooms the artificial lighting was not satisfactory but the substitution of incandescent mantles has done something to improve this.

The arrangements for medical inspection in the schools remain unchanged. Each department is visited twice in the year for routine examinations and defective children are re-examined after an interval of three months. Due notice is given to the Teachers in each case. In those schools in which the Teachers' room or other special room is available for examination, there is naturally less disturbance of the school work than where no such provision exists.

Such special accommodation is available in twenty-three of the thirty-three schools in the borough.

MEDICAL EXAMINATIONS IN THE ELEMENTARY SCHOOLS.

The following Table (Table I) in the form prescribed by the Board of Education shews the numbers of children examined at the various ages as well as the number of special examinations and re-examinations carried out during the year.

As was pointed out in the report for 1920 the Board require that certain groups of children shall be examined each year. These are described as "routine" examinations and embrace the following children :—

- (a) All children admitted to school during the year.
- (b) All children between 8 and 9 years of age.
- (c) All children between 12 and 13 years of age, together with children over 13 years of age, who have not already been examined after attaining the age of 12 years.

This means that each child shall be medically examined three times during its school life and the numbers examined in any one year represent approximately one third of the children in average attendance at the schools.

"Special" examinations are carried out either at the schools or at the school clinic of children referred by Teachers, School Attendance Officers and others on account of some physical defect. A record of all children found with some defect is kept and they are periodically re-examined to note if treatment has been obtained.

TABLE I.
NUMBER OF CHILDREN INSPECTED 1st JANUARY, 1921—31st DECEMBER, 1921.
A—Routine Inspection.

Age			Entrants.				Other Ages.	Total.
			3	4	5	6		
Boys	...	...	146	230	305	72	20	773
Girls	...	...	148	215	336	93	29	821
Totals	...	...	294	445	641	165	49	1594

Age			Intermediate Group.	Leavers.			Other Ages.	Total.	Grand Total.
			8	12	13	14			
Boys	...	...	828	671	61	2	180	1742	2515
Girls	...	...	720	682	36	—	250	1688	2509
Totals	...	...	1548	1353	97	2	430	3430	5024

B—Special Inspections.

			Special Cases.	Re-examinations (i.e. No. of children re-examined.)
Boys	...	...	947	2192
Girls	...	...	1190	2211
Totals	...	...	2137	4403

C—Total number of Individual Children Inspected by the Medical Officer, whether as Routine or Special Class (no child being counted more than once in one year).

Number of individual children inspected	...	7161
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The requirements of the Board have been carried out in each particular. The number of "routine" examinations represent 37 per cent. of the average attendance.

It should be noted that the total re-examinations refer only to re-examinations at the schools. Re-attendances at the clinics are dealt with in the appropriate section of this report.

The following statement shews a comparison of the work done during 1921 with that of the preceding year:—

	1920.	1921.
"Routine" examinations ...	4290	5024
"Special" examinations ...	1005	2137
Re-examinations ...	2489	4403
Number of individual children inspected	5295	7161

The examinations at Reading School, Kendrick Girls' School, and the Continuation School are not here included.

FINDINGS OF MEDICAL INSPECTION.

The subjoined table (table II) in the prescribed form, shews the results of the examinations.

Defective children are classified into those requiring immediate treatment and those requiring to be kept under observation only, in accordance with the degree of defect exhibited. It should also be noted that the numbers shewn represent *defects* and not children, so that the same child might occasion more than one entry in the table.

Only the last line shews the number of individual children requiring treatment or to be kept under observation.

TABLE II.

RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION IN 1921.

Defect or Disease.						Routine Inspections.		Specials.	
						Number referred for treatment.	Number required to be kept under observation, but not referred for treatment.	Number referred for treatment.	Number required to be kept under observation, but not referred for treatment.
Malnutrition	...	...	...	...	...	66	167	16	4
Uncleanliness	{	Head	...	...	...	443	8	48	...
	{	Body	...	...	...	177	16	17	1
Skin	{	Ringworm	{	Head	...	11	...	107	...
			{	Body	...	3	...	78	1
	{	Scabies	...	...	...	6	...	53	...
	{	Impetigo	...	...	...	30	...	456	...
	{	Other Diseases (Non-Tubercular)	...	...	...	42	2	247	..
Eye	{	Blepharitis	...	...	...	35	3	43	...
	{	Conjunctivitis	...	...	...	5	1	22	...
	{	Keratitis	...	...	...	...	...	...	...
	{	Corneal Ulcer	...	...	...	...	...	2	..
	{	Corneal Opacities	...	...	...	...	...	...	..
	{	Defective Vision	...	...	...	190	133	6	...
	{	Squint	...	...	...	45	26	2	...
Ear	{	Other Conditions	..	...	...	1	3	7	...
	{	Defective Hearing	..	..	...	52	10	25	...
	{	Otitis Media	...	...	...	33	6	54	...
Nose and Throat	{	Other Ear Disease	..	...	...	3	...	7	...
	{	Enlarged Tonsils	...	...	...	58	175	8	6
	{	Adenoids	...	...	...	5	25	4	...
	{	Enlarged Tonsils and Adenoids	...	...	...	17	5	5	...
Enlarged Cervical Glands (non-tubercular)	{	Other Conditions	...	...	...	26	399	57	5
		Defective Speech	...	...	...	3	9	30	3
		Dental Disease	...	...	...	18	15	1	...
			...	...	...	607	5	14	...
Heart and Circulation	{	Heart Disease :—Organic	...	...	...	...	17	...	1
		Functional	...	...	...	...	20	1	3
		Anæmia	...	...	...	92	10	63	3
Lungs	{	Bronchitis	...	...	...	4	6	5	...
	{	Other Non-Tubercular Diseases	..	...	...	1	109	9	7
Tuberculosis	{	Pulmonary :—	Definite	...	...	4	...	...	...
			Suspected	...	..	8	1	4	...
	{	Non-Pulmonary :—	Glands	...	..	1	4	4	...
			Spine	...	...	...	...	1	...
			Hip	...	...	...	...	1	...
			Other Bones and Joints	...	...	...	...	...	...
			Skin	...	...	...	...	...	...
			Other forms	...	...	...	1	...	...
Nervous System	{	Epilepsy	...	...	...	2	...	3	...
	{	Chorea	...	...	...	1	1	5	...
	{	Other Conditions	...	...	...	...	8	...	...
Deformities	{	Rickets	...	...	...	...	...	...	...
	{	Spinal Curvature	...	...	...	4	367	...	...
	{	Other Forms...	...	...	...	7	170	...	...
Other Disease or Defect						55	200	189	35

Number of Individual Children having defects which required treatment or to be kept under observation

It will be seen that of the 7,161 children examined, 3,926 or 56 per cent. presented some defect worthy of record either for treatment or observation.

A further table (table VI) which refers only to children examined at "routine" examinations, gives a more valuable indication of the physical conditions obtaining amongst the children of the borough. The children are selected by age groups only, and not on account of any supposed defect.

TABLE VI.
SUMMARY RELATING TO CHILDREN MEDICALLY INSPECTED AT THE ROUTINE INSPECTIONS
DURING THE YEAR 1921.

(1)	The total number of children medically inspected at the routine inspections ...	5024
(2)	The number of children in (1) suffering from :—	
	Malnutrition ...	233
	Skin disease ...	94
	Defective vision (including squint) ...	394
	Eye disease ...	48
	Defective hearing ...	62
	Ear disease ...	42
	Nose and throat disease ...	710
	Enlarged cervical glands (non-tubercular) ...	12
	Defective speech ...	33
	Dental disease ...	612
	Heart disease :—	
	Organic ...	17
	Functional ...	20
	Anæmia ...	102
	Lung disease (non-tubercular) ...	120
	Tuberculosis :—	
	Pulmonary { Definite ...	4
	{ Suspected ...	9
	Non-pulmonary ...	6
	Diseases of the nervous system ...	12
	Deformities ...	548
	Other defects or disease ...	255
(3)	Number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation, but not referred for treatment	1049
(4)	Number of children in (1) who were referred for treatment (excluding uncleanliness, defective clothing, etc.)	1277
(5)	Number of children in (4) who received treatment for one or more defects (excluding uncleanliness, defective clothing, etc.)	788

It will here be seen that 1,277 or 25.4 per cent. of all children examined presented some defect requiring treatment, whilst a further 1,049 or 20.9 per cent. were placed on the list for further observation. That is to say, of the 5,024 children selected by ages and representing the average child of the borough, 46 per cent. presented a defect worthy of record.

These figures shew a considerable increase on the numbers found at the corresponding examinations last year, but are fairly comparable with the conditions found in other districts throughout the country.

I have compiled a table giving comparative returns for different types of areas.

They represent the average returns for 24 industrial areas (of which

Reading is one), 24 residential areas, 24 rural areas, and London.

The figures were obtained from the report of the Chief Medical Officer of the Board of Education for the year 1920.

Almost exactly three quarters of a million children have been considered in the survey

COMPARATIVE TABLE.*

	Reading.	Industrial Areas.	Residential Towns.	Rural Areas.	London.
Uncleanliness	12.8	10.7	7.0	9.1	18.9
Malnutrition	4.8	3.8	2.3	4.3	1.1
Skin Disease	1.8	2.4	1.9	2.6	1.8
Defective Vision (including Squint)	7.8	14.5	7.4	9.4	11.7
Defective Hearing and Ear Diseases	2.0	3.8	2.1	2.0	3.0
Nose and Throat Disease	14.1	15.5	9.0	19.9	16.4
Heart Disease & Anaemia	2.7	4.3	3.0	4.2	7.5
Tuberculosis—Definite or Suspected ... ..	.3	.9	.7	1.0	.5

*Shewing percentage of defects found amongst the children examined at *routine* inspections, in the various types of areas indicated.

As was pointed out in last year's report, certain elements of the examinations are considerably influenced by the personal equation of the examiner. Whether a child is sufficiently unclean for the fact to be noted, or what constitutes an under-nourished child, are obviously open to differences of opinion, while on the other hand, defects of vision and of hearing are capable of fairly precise measurement. The returns of uncleanliness for London, for example, are based on examinations carried out by the nurses who obviously apply a higher standard than is applied elsewhere. The comparative uniformity of the results based on such a large number of examinations, leaves no doubt, however, that a very large amount of defect does in fact exist. It is not suggested that all these defects constitute serious maladies, but they do represent deviations from the normal that ought to be prevented.

That they are preventable, can be seen by their small incidence in, for example, the boys attending Reading School.

HEIGHTS AND WEIGHTS OF READING CHILDREN.

For purposes of comparison the following tables have been prepared shewing the heights and weights of children in attendance at the Reading elementary schools, Reading School, and the Kendrick School for Girls.

The standards shewn are taken from the tables of heights and weights of English elementary school children, prepared by Tuxford & Glegg.

The numbers of Reading elementary school children given are small, but may be taken as fairly representative of the school population. It will

be seen that their average heights and weights do not differ to any great extent from those of the standard tables. The advantage in practically every case rests in favour of the children of the Reading schools.

ELEMENTARY SCHOOLS.

Age last birthday.	Number of children.	Height in centimetres.		Weight in kilograms.	
		Standard.	Average height of Reading children.	Standard.	Average weight of Reading children.
5 (boys) ...	129	103.0	104.7	17.5	18.2
(girls) ...	116	102.6	104.5	17.0	17.4
8 (boys) ...	154	119.3	120.5	22.8	23.6
(girls) ...	159	117.6	119.9	22.5	22.7
12 (boys) ...	173	139.8	138.0	33.0	33.2
(girls) ...	174	138.7	140.7	33.5	33.6

On the other hand, the corresponding figures for the Kendrick Girls' School and for Reading School are very markedly higher.

The contrast is all the greater if we sub-divide the elementary school children into two groups—group A (poorer district schools) and group B (better district schools).

GROUPED SCHOOLS. *

Age.	BOYS.		GIRLS.	
	Height in centimetres.	Weight in kilograms.	Height in centimetres.	Weight in kilograms.
5 Group A ...	102.4	17.2	101.4	16.4
Group B ...	105.6	18.5	104.5	17.8
8 Group A ...	118.0	22.7	118.5	22.1
Group B ...	123.3	24.7	121.0	23.4
12 Group A ...	136.6	32.2	137.8	32.2
Group B ...	138.9	33.9	142.0	34.4

*Group A schools are St. Laurence's, Coley, Grey Friars, St. Giles', and St. Mary's.

*Group B schools are Alfred Sutton, Wilson, and George Palmer.

KENDRICK GIRLS' SCHOOL.

Age.	No. of Children.	Height in Centimetres.		Weight in kilograms.	
		Standard.	Kendrick Girls' School.	Standard.	Kendrick Girls.
10	20	129.8	135.0	26.7	31.38
11	34	133.5	141.0	29.5	31.46
12	49	138.7	145.0	33.5	36.7
13	26	144.2	149.0	36.3	40.13
14	7	149.1	156.0	39.8	48.67

READING BOYS' SCHOOL.

Age.	No. of Children.	Height in Centimetres.		Weight in Kilograms.	
		Standard.	Reading Boys' School.	Standard.	Reading Boys' School.
10	35	129.4	139.8	27.4	33.04
11	48	134.2	142.5	29.9	33.50
12	58	139.8	148.7	33.0	34.83
13	73	142.5	149.0	35.1	39.80
14	69	147.1	155.0	38.1	45.23

The tables are an interesting object lesson on the effect which home conditions have on the general well-being of the children.

Incidentally, it must be assumed that the school conditions—for after all the child passes a great part of its time in school—cannot be without their influence.

UNCLEANLINESS.

As has been pointed out, 12 per cent. of all children examined were found to be unclean in head or body. This is a considerable increase on the numbers noted in the last annual report. Part of the increase is undoubtedly due to the higher standard taken by the medical inspectors, but it is also probable that the difficult housing situation creates difficulties for the mothers in keeping their children clean.

For the purpose of maintaining a higher standard of cleanliness, the nurses paid 264 visits to the schools. A survey was made of all children in the schools, and the conditions found will be seen from the following statement :—

No. of children examined.	Clean.	Heads dirty.	Verminous.
25,742	21,824	3,479	439

Further visits were made to re-examine children whose condition was found to be unsatisfactory.

The bathing station provided by the Committee has also been in constant use. Under the direction of the school nurses, 34 verminous children were bathed there during the year, and 51 cases of scabies were dealt with. The total number of baths given was 1,284. The number of cases of scabies treated is smaller than last year.

The more efficient inspection which the nurses are able to carry out, ensures the more complete detection of cases of scabies and more persistent treatment. To this, I think, the lessened prevalence of the disease is due.

FOLLOWING UP.

In all cases parents are notified by the Medical Officer of any defect requiring treatment. If at the re-examination it is found that the necessary treatment has not been obtained, the nurses visit the homes.

Four nurses, appointed through the agency of the Queen Victoria Nursing Institute, are engaged in this work. They also attend at the medical and dental examinations at the schools and in the work of the clinics.

The following summary indicates the work done by the nurses during the year :—

Visits to homes	...	...	...	...	...	2,734
Attendances at medical and dental inspections...	...	...	...	...	...	485
Attendances at various clinics	...	...	...	...	...	727
Cleanliness surveys at schools	...	...	...	...	...	264

No legal proceedings were instituted by the Committee in respect of uncleanness of school children.

During the year the R.S.P.C.C. dealt with 56 cases affecting 116 children. In 30 of these the cases had been satisfactorily concluded at the end of the year, the remaining 26 cases being still under supervision.

The Society prosecuted in two cases and obtained convictions.

CONTROL OF INFECTIOUS DISEASES.

The rules governing the exclusion of children suffering from infectious disease are as set out in the recommendations of the Board of Education on the subject.

In conformity with these rules, the number of children excluded during the year, with the causes, were as follows :—

Scarlet Fever patients	...	104	Diphtheria contacts	...	...	126
Scarlet Fever contacts	...	119	Measles patients	...	...	210
Diphtheria patients...	...	80	Scabies, verminous conditions, etc.	...	...	236

It was not found necessary to close any of the schools during the year on account of infectious diseases.

MEDICAL TREATMENT.

From table VI (page 9) it will be seen that of the 1,277 children discovered at "routine" examinations to require treatment, 788 or 61 per cent. had received the necessary treatment before the end of the year.

The following tables shew the numbers from all sources referred for treatment and the means by which the treatment was obtained.

MINOR AILMENTS.

It will be seen from table IVA that the conditions grouped under the heading of minor ailments, comprise principally skin diseases, the remainder being chiefly ear disease (like running ears) and external eye diseases.

Though few of these conditions cause any menace to life, they indicate a large measure of discomfort and most of the skin diseases are communicable. The majority of the children were treated at the school clinic. Were such

means of treatment not available, it is more than probable that the children would not be medically treated at all. Many of the conditions are such that their treatment has commonly been undertaken by homely remedies and their cure, in consequence, delayed. Some, like running ears, are often so chronic in character that their treatment would become very expensive to the individual.

TABLE IVA.
TREATMENT OF MINOR AILMENTS.

Disease or defect.	Number of Children.			
	Referred for Treatment.	Treated.		
		Local Education Authority.	Otherwise.	Total.
Skin :—				
Ringworm—head	151	145	6	151
Ringworm—body	86	86	—	86
Scabies	63	51	12	63
Impetigo	486	443	28	471
Miscellaneous	289	221	34	255
Ear Disease	163	87	44	131
Eye Disease (external and other) ..	146	122	23	145
Miscellaneous	117	89	28	117
Totals	1504	1244	175	1419

It will be seen that 1,244 children attended the clinic during the year, their attendances numbering 12,081.

In this table, as in all other tables dealing with treatment, the figures include a certain number of children whose treatment was continued from the preceding year.

TONSILS AND ADENOIDS.

It will be seen from the following table (table IVC) that of 137 children referred for treatment for enlarged tonsils and adenoids, only 68 received any treatment. Practically all the operative work was performed at the Royal Berkshire Hospital.

The Committee has already placed on record its inability to agree with the Board of Education in its failure to approve the agreement reached between the Authority and the Hospital. That such a trifling economy should be effected in a matter of such importance appears questionable policy, nor can the interference of a Central Authority in such details of administration be regarded as at all commendable.

TABLE IVC.
TREATMENT OF DEFECTS OF NOSE AND THROAT.
Number of Children.

Referred for Treatment.	Received Operative Treatment.			Received other forms of Treatment.
	Under Local Education Authority's Scheme. Clinic.	By private practitioner or hospital.	Total.	
137	—	54	54	14

RINGWORM OF SCALP CLINIC.

Children suffering from ringworm of the scalp attend the clinic which is held on Wednesday afternoons. In addition, children who are being treated by other methods than by X-Rays, attend the minor ailments clinic daily. All are excluded from school while undergoing treatment, but it has been found repeatedly that cases which have been treated by chemists and others have been re-admitted to school before being completely cured. It is advisable, therefore, that no child who has had ringworm of the scalp should be re-admitted to school without first having the hair microscopically examined, to ensure that the disease has been completely eradicated.

Including 33 who were attending on January 1st, 1921, 151 children were under treatment during the year. This is a slight increase over the number of the previous year. During the latter half of the year, fewer cases have been discovered.

Six cases were treated by private doctors, and 145 at the school clinic.

13 were treated by means of X-Rays and 27 exposures were done.

106 were cured by the application of ointments and other means.

23 were still undergoing treatment at the end of the year.

The average time taken for cure, both by X-Rays and by other methods, was three months.

As in the case of scabies, the work of the nurses assists greatly in bringing cases to light. It is believed that very few now escape observation, and it is, therefore, gratifying to note that there are now fewer cases under treatment than at the corresponding period of last year.

OPHTHALMIC CLINIC.

During the year, 345 children attended the ophthalmic clinic, which is held on Wednesday mornings and Thursday afternoons. The number of attendances was 1,191.

In 240 instances glasses were prescribed.

The following table gives an analysis of the cases dealt with :—

Hypermetropia	...	...	100	Conjunctivitis	...	...	...	8
Hypermetropic astigmatism	...	...	90	Nystagmus	...	...	...	3
Myopia	...	...	34	Keratitis	...	...	...	2
Myopic astigmatism	...	...	16	Injury to eye	...	...	...	2
Blepharitis	...	...	15	Other conditions	...	...	...	5

In the cases of 31 children, glasses were not considered necessary. Four children were referred to the Royal Berkshire Hospital.

Table IV., in the form required by the Board of Education, indicates the sources from which treatment was obtained.

TABLE IVB.

TREATMENT OF DEFECTS OF CHILDREN DURING 1921.

Treatment of Visual Defects.

Referred for refraction.	Number of Children								
	Submitted to Refraction.				For whom glasses were prescribed	For whom glasses were provided	Recommended for treatment other than by glasses	Received other forms of treatment	For whom no treatment was considered necessary
	Under Local Education Authority's Scheme Clinic	By private practitioner or Hospital	Other-wise	Total					
361	317	12	...	329	240	218	2	2	36

EAR CLINIC.

78 new children were examined and classified as follows :—

Otorrhoea ... 39 | Deafness without discharge ... 29

7 children were referred to the Royal Berkshire Hospital for the following defects :—

Mastoid abscess ... 2 | Polypi ... 3
 Septic condition of ear ... 1 | Granulations ... 1
 Referred to dentist 1

Two were brought up for examination but nothing abnormal was found.

The following shews the results of treatment :—

Cured ... 27 | Discontinued attendance ... 27
 Improved ... 20 | Still attending ... 12
 Unimproved ... 3

The total number of attendances was 216.

DENTAL DEFECTS.

I am indebted to Mr. William Adderley, L.D.S., for the following record of dental work carried out during the year.

Mr. Adderley commenced duty at the beginning of February, since when he has devoted his whole time to the duties. The scheme of work is to examine all children of one age group, the group chosen being those between 6 and 7 years of age. At the same time, a re-examination was made of all children treated in previous years. The numbers examined and the conditions found are shewn in the following table (table IV D1.)

The cases described as "special" cases are those referred by the doctors or others on account of some urgent condition requiring treatment.

TABLE IVD 1.
Number of Children dealt with.

	Age Groups.										Special	Total
	5	6	7	8	9	10	11	12	13	14		
(a) Inspected by dentist	...	1011	1039	489	329	338	165	410	162	23	822	4787
(b) Referred for treatment		1458					1740				822	4020
(c) Actually treated ...		503					575				822	1900
(d) Re-treated as result of periodical following up		...					575				...	...

The scheme of work has been carried out in all schools excepting five. The broad result of his examinations are that excluding "special" cases, 80 per cent. of all children examined required treatment, the parents of 40 per cent. of these children expressed their willingness to accept treatment, but 15 per cent. of them failed to keep the appointments given.

The two following tables shew the time given and the character of the work performed :—

TABLE IVD 2.
PARTICULARS OF TIME GIVEN AND OF OPERATIONS UNDERTAKEN.

No. of half-days devoted to inspection.	No. of half-days devoted to treatment.	Total No. of attendances made by the children at the Clinic.	No. of permanent teeth.		No. of temporary teeth.		Total No. of fillings.	No. of administrations of general anaesthetics	No. of local anaesthetics.	No. of other operations.	
			Extrac- ted.	Filled.	Extrac- ted.	Filled.				Per- manent teeth.	Tem- porary Teeth.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
44	311	3132	348	1800	3280	473	2273	5	1994	412	62

SPECIAL CASES

Attendances	Extractions.		Fillings.		Total fillings.	Other Operations.	Anaesthetics.	
	Temporary.	Permanent	Temporary	Permanent.			General.	Local.
1365	1320	247	82	468	550	268	3	894

I should like to draw your attention to the large amount of conservative work which has been carried out. A total number of 2,823 fillings have been inserted, in the great majority of cases in permanent teeth.

A comparison of the work done during the year with that of the preceding year is appended :—

	1920.	1921.
Number inspected	1845	4787
Referred for treatment	1371	4020
Actually treated	596	1900
Re-treated	156	575
Total fillings	206	2823
Total extractions	1317	5195

Mr. Adderley has been able to appraise the value of this work in noting the excellent state of fillings inserted in previous years, and he pays a tribute to the quality of the work of his predecessors. Its value is seen in the much healthier condition of the gums and mouth generally. Like them, he emphasises the need for increased education in the care of the teeth. The better training in the use of the tooth brush, coupled with the training of children in the more efficient mastication of their food, the latter being nature's method of preserving the teeth, is eminently necessary if decay of the teeth is to be prevented. Such efficient mastication also assists in preserving the dental work already done. The aid of the teachers is invaluable in this matter, and I earnestly solicit their co-operation in this as in all the work of the School Medical Department. Some of the Head Teachers have given a little talk to the children on dental matters after the visit of the school dentist. If such a practice could become general, it would be of the greatest possible assistance.

TABLE V.
SUMMARY OF TREATMENT OF DEFECTS AS SHOWN IN TABLE IV (A,B,C,D).

Disease or Defect.	Number of Children.			
	Referred for Treatment.	Treated.		
		Under Local Education Authority's Scheme.	Otherwise.	Total.
Minor Ailments	1504	1244	175	1419
Visual Defects	261	318	13	331
Defects of Nose and Throat	137	—	68	68
Dental Defects	4044	1900	24	1924
Other Defects	889	175	133	308
Total	6935	3637	413	4050

CENSUS OF EXCEPTIONAL CHILDREN.

The subjoined Table III, sets out the number of children so far as can at present be ascertained, who are exceptional by reason of physical or mental defect. The number shews an increase on the return for last year, and it is not improbable that with continued investigation still further cases will come to light.

Such a return cannot fail to be a matter of importance to any community. Excluding entirely the last group of children who are described by their teachers as dull and backward, there remain 419 children of school age in Reading who are crippled either mentally or physically. It will be seen that 118 of these children are mentally defective, 23 being idiot or imbecile, who will lead a life of complete dependency to the end ; even in the case of the great majority of the remainder, the future is extremely precarious. In any case, they are directly or indirectly a considerable charge on the community, and if no public

provision is made, the worse cases become an almost intolerable burden on the individual families. The prevention of mental defect of this character is a subject too wide and too controversial to discuss, but the operations of the Local Control Committee which have been suspended for reasons of economy, would undoubtedly contribute to that end.

With regard to the physically defective child, the outlook is much more hopeful. Each year sees a lessening of the incidence of ophthalmia neonatorum (inflammation of the eyes in the newly born), which is the cause of a large proportion of blindness, and the continually improving midwifery service and health visiting, ought to occasion its complete disappearance in a reasonable measure of time.

The causes of deafness and mutism, whether congenital or acquired, are not so capable of removal, but great progress has been made in the education of these children and their future is now much brighter.

For the large number of children suffering from pulmonary tuberculosis, the prognosis is very favourable. At no period of life can tuberculosis be so effectually arrested as in the case of the young, and I am confident that the sympathetic manner in which the Health Committee deals with these cases, and the efforts of the Tuberculosis Dispensary Care Association will be amply repaid.

It is, however, the case of these children who are crippled in the ordinary sense of the word ; that is, children who are lame, paralysed, etc., that I wish to emphasize. There are 91 such cripples in Reading, of whom 30 suffer from tuberculosis of joints. By improved methods of treatment much of this crippling can be prevented, and the children given useful limbs instead of the stunted members that have so often resulted hitherto. Four of these children have been sent to the Orthopaedic Hospital at Headington. The second principal cause of crippling is infantile paralysis. Here we are in the dark as to the cause but again methods of treatment have greatly advanced. Treatment in both cases must, as a rule, be long and much patience and perseverance is required. Only too frequently in the past after months of attendance at hospitals, the task has proved too great for parents, and the result has been failure. I hope no considerations of false economy will be permitted to stand in the way of everything possible being done for these children.

TABLE III.

NUMERICAL RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA IN 1921.

			Boys.	Girls.	Total.
Blind (including partially blind) within the meaning of the Elementary Education—Blind and Deaf Children Act, 1893.		Attending Public Elementary Schools including Whitley Special	2	4	6
		Attending Certified Schools for the Blind	2	2	4
		Not at School	1	2	3
Deaf and Dumb (including partially deaf) within the meaning of the Elementary Education—Blind and Deaf Children Act, 1893.		Attending Public Elementary Schools including Whitley Special	7	3	10
		Attending Certified Schools for the Deaf	3	6	9
		Not at School	1	1	2
Mentally Defective	Feeble-minded	Attending Public Elementary Schools ...	5	2	7
		Attending Certified Schools for Mentally Defective Children	54	30	84
		Notified to the Local Control Authority by Local Education Authority during the Year... ..	2	...	2
		Not at School	1	1	2
	Imbeciles	At School ... ..	...	...	...
		Notified to the Local Control Authority by Local Education Authority during the Year... ..	5	4	9
		Not at School... ..	7	4	11
	Idiots	... ..	1	2	3
	
	Epileptics		Attending Public Elementary Schools including Whitley Special	2	3	5
		Attending Certified Schools for Epileptics	...	...	...
		In Institutions other than Certified Schools	...	...	...
		Not at School	4	4	8
Physically Defective	Pulmonary Tuberculosis	Attending Public Elementary Schools ...	...	...	...
		Attending Certified Schools for Physically Defective Children	13	13	26
		In Institutions other than Certified Schools	...	3	3
		Not at School	6	6	12
	Crippling due to Tuberculosis	Attending Public Elementary Schools ...	6	4	10
		Attending Certified Schools for Physically Defective Children	5	4	9
		In Institutions other than Certified Schools	3	1	4
		Not at School	2	5	7
	Crippling due to causes other than Tuberculosis, <i>i.e.</i> , paralysis, rickets, traumatism	Attending Public Elementary Schools ..	22	23	45
		Attending Certified Schools for Physically Defective Children	8	4	12
		In Institutions other than Certified Schools	...	..	...
		Not at School	1	3	4
	Other physical defectives, <i>e.g.</i> , delicate and other children suitable for admission to open-air schools and children suffering from severe heart disease.	Attending Public Elementary Schools ...	44	37	81
		Attending Open-air Schools	14	12	26
		Attending Certified Schools for Physically Defective Children, other than Open-air Schools ... ..	...	...	...
		Not at School	6	9	15
Dull or Backward		Retarded two years	297	247	544
		Retarded three years	58	52	110

OPEN-AIR EDUCATION.

School journeys were arranged by the head teachers of St. Giles' and Redlands schools. The journeys occupy from 10 to 14 days, and the boys are encouraged to interest themselves in the history, geography and natural history of the country through which they pass.

Thus, apart from a health point of view, these journeys have a very great educational value.

PHYSICAL TRAINING.

Physical training has been carried on throughout the year on the same lines as during the preceding year. There are two superintendent teachers of physical training, Mr. J. F. Thomas being responsible for the training of boys, and Miss H. M. Naylor for the girls and infants.

In most schools three periods of 20 minutes each per week are devoted to physical training. Swimming classes and games in the public parks are arranged in addition. Both superintendents have organized teachers' classes which will have a very valuable effect on the general work of physical training.

The value of this work in correcting incipient deformities and postural defects is mentioned elsewhere in the report.

CO-OPERATION OF PARENTS, TEACHERS AND ATTENDANCE OFFICERS.

The attendance of parents shews some increase on the attendances of last year. The parents of 53 per cent. of the children examined at the elementary schools accepted the invitation to be present at the examination. In the case of the infants, as many as 79 per cent. of the parents were present but at the examination of the older boys and girls, only 27 per cent. of the parents attended. The failure to attend for the examination of older children is a constant feature of school medical examination, and cannot be regarded as satisfactory, particularly so when compared with the attendances of parents at the medical inspection of Reading School and the Kendrick Girls' School.

At Reading School, 42 per cent. of the parents attended, a very satisfactory figure when it is remembered that many of the boys come from a distance. At Kendrick Girls' School, over 50 per cent. of parents attended.

I am indebted to the Teachers for their aid and interest in school medical work and invite their further co-operation.

Not the least valuable part of the work of school medical inspection is its educational value. The assistance of the Teachers in encouraging the attendance of parents and in procuring the prescribed treatment for the children is invaluable.

Co-operation with the school attendance department is as before complete. The findings at the medical examinations are immediately placed at the disposal of the Attendance Officers, who, on the other hand, bring for examination all children absent on alleged medical grounds.

SPECIAL SCHOOLS.

I am indebted to Dr. J. A. P. Price for the following report on the Special Schools :—

The numbers in attendance, admitted and discharged during the year are as follows :

	Mentally Defective School.		Physically Defective School.		Open-air School.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
On roll January, 1921	51	26	27	15	27	22
Admitted during the year	14	8	3	6	12	11
Left during the year	11	4	3	2	12	7
On roll December, 1921	54	30	27	19	27	26

(a) PHYSICALLY DEFECTIVE SCHOOL.

The children in attendance suffered from one or other of the following defects :—

(1) Defective vision	5	(6) Heart disease	7
(2) Defective hearing	6	(7) Talipes	1
(3) Joint disease (tuberculous) ...	3	(8) Rickets	2
(4) Spinal disease—		(9) Adenitis (T.B.)	2
Caries	4	(10) Cretinism	1
Lateral curvature	3	(11) Pituitarism	1
(5) Nervous diseases—		(12) General delicacy, etc. ...	5
Infantile paralysis	11		

Many of these children are, or have been, patients at the Royal Berkshire Hospital, chiefly attending the Orthopaedic Clinic and when necessary admitted into the Hospital for operative or other treatment.

The cordial co-operation of the staff of the Hospital has contributed materially to the efficiency of this school.

An effort should be made to still further extend the advantages this school affords by providing for the present needs of those deaf children who cannot, for financial or other reasons, be admitted into special schools for the deaf (vide recent instruction of the Board of Education). Two of the teachers at least are capable of teaching lip-reading and workshops are to hand. All that is further needed is the permission of the Board of Education to take into the school deaf children at a younger age than 7 years.

(b) THE OPEN AIR SCHOOL FOR TUBERCULOUS CHILDREN.

Of the 72 children attending during the year, 40 were definitely tuberculous and 32 doubtfully so. A chart is kept of the children's temperatures morning and evening, and of their weights and heights. The temperatures recorded are more erratic than those of ordinary children, but although considerable rise and fall of temperature could be really traced to aggravation of chest or other tubercular trouble, they were in the main due to minor ailments, such as sore throat, tonsillitis, ordinary colds, etc. The weight chart shewed a decrease in summer and an increase during the cold months; this variation

in weight is in part due to the heavier clothing worn in winter as compared with that worn in summer. With three exceptions, all children shewed an increase in weight during the year, and the average increase in the tuberculous was nearly the same as that in the doubtfully tuberculous, viz :—2.3 K, as against 2.5 K.

As would be expected, all these children are backward one to two years, one even to the extent of seven years.

Two children recovered sufficiently to be sent back to an ordinary school. One was transferred to the Mentally Defective School, and one to the Physically Defective School.

(c) THE MENTALLY DEFECTIVE SCHOOL.

Of the 99 feeble minded children who attended during the year

10 are moral defectives	4 epileptic
1 slightly imbecile	1 hydrocephalic
1 mongoloid	9 microcephalic

The majority of these children suffer from physical defects, e.g. :

Nasal obstruction	...	...	47	Infantile paralysis	...	...	3
Defective vision	...	...	22	Congenital heart disease	...	...	1
Defective hearing	...	...	8	Rickets	...	...	3

The following table shews the after careers of children formerly attending the Committee's three Special Schools at Whitley :—

	Mentally Defective School.		Physically Defective School.		Open-Air School.	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
1. Number of children who have left school since 1910	77	43	45	59	80	79
2. Number who—						
(a) have since died	3	5	3	8	...	2
(b) are known to be incapable by reason of mental or physical defect of undertaking employment	7	13	1	1	...	...
(c) are in attendance at an institution for further education	13	4	2	2	...	...
(d) are in any other institution	2	...	...	...	...	...
3. Number who are employed in—						
(a) Industrial or manual occupations	20	7	4	3	14	16
(b) Agricultural or rural occupations	...	...	...	1	4	...
(c) Domestic occupation, including those who are helping in the domestic work at home	...	11	1	14	3	22
(d) Commercial, professional or clerical work	...	...	4	10	2	3
(e) Blind alley or other precarious occupations	4	...	1	...	10	...
4. Number who have left the neighbourhood whose after careers have not been traced	8	2	8	4	9	11
5. In the services or pensioned	6	...	...	...	2	...
6. Returned to ordinary schools	...	...	9	3	24	11
7. Transferred to other special schools	...	...	3	4	4	2
8. Children unfit to attend school	...	...	2	8	6	12
9. Unemployed	14	1	7	1	2	...
	77	43	45	59	80	79

BACKWARD CHILDREN.

During the year, an attempt has been made to thoroughly examine and grade some of the backward children attending the elementary schools. The Stanford revision tests were followed out in all the cases examined which were 73 in all, 7 of whom were subsequently admitted to the mentally defective school. The examinations embraced an enquiry into the family history, home conditions, school history and progress as well as a physical examination.

This examination elicited the following facts as bearing on, or possibly causing such backwardness :—

Family history of mental deficiency in either parent or brother or sister	10
Unfavourable home conditions	14
Frequent change of school	2
Illness	12
Deafness	6
Defective vision	3
Enlarged tonsils and adenoids... ..	2
Minor epilepsy	2

EMPLOYMENT OF SCHOOL CHILDREN.

Examination of Children between 12 and 14 years of age for Employment out of School Hours.

	Boys.	Girls.	Total.
Number examined during 1921	82	3	85
Number considered fit to be employed—			
(a) Milk	6	—	6
(b) Papers	74	3	77
Number unfit	2	—	2
Number of re-examinations—			
(a) fit	62	1	63
(b) unfit	1	—	1

The re-examination did not reveal any impairment of health due to employment.

The children were, if anything, in better health by reason of such employment. What may be the effect of employment on school work this examination does not reveal.

TABLE IIA.

RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION IN 1921.
SECONDARY SCHOOLS.

Number Examined ...				READING BOYS' SCHOOL.		KENDRICK GIRLS' SCHOOL.	
				494		81	
				Number referred for		Number referred for	
Defect or Disease.				Treatment.	Observation.	Treatment.	Observation.
Malnutrition	...	...	...	...	2	...	2
Uncleanliness	{ Head...	...	...	...	...	...	...
	{ Body...	...	...	...	...	...	...
Skin	{ Ringworm	{ Head	...	...	...	...	...
		{ Body	...	...	...	...	...
	{ Scabies	...	...	...	...	...	...
	{ Impetigo	...	...	1	...	...	...
	{ Other Disease (Non-Tub.)	...	...	3	2	1	...
Eye	{ Blepharitis	...	...	2	1	...	...
	{ Conjunctivitis	...	...	...	...	...	...
	{ Keratitis	...	...	...	...	...	...
	{ Corneal Ulcer	...	...	...	...	...	...
	{ Corneal Opacities	...	...	...	...	...	...
	{ Defective Vision	...	...	21	42	3	4
	{ Squint	...	...	1	15	...	...
Ear	{ Other Conditions	...	...	...	...	...	...
	{ Defective Hearing	...	...	1	3	...	...
	{ Otitis Media...	...	...	1	...	...	1
Nose and Throat	{ Other Ear Diseases	...	...	...	...	...	...
	{ Enlarged Tonsils	...	...	2	12	...	3
	{ Adenoids	...	...	...	6	...	1
	{ Enlarged Tonsils & Adenoids	...	...	...	...	...	...
Enlarged Cervical Glands (non-Tuber.)	{ Other Conditions	...	...	1	31	...	4

	Defective Speech	...	...	7	1	...	...
	Teeth	...	...	131	...	6	...
Heart and Circulation	{ Organic	...	...	...	2	...	...
	{ Functional	...	...	...	5	...	2
	{ Anæmia	...	...	...	1	1	...
Lungs	{ Bronchitis	...	...	...	...	...	...
	{ Other non-Tuber. Diseases	...	...	...	22	...	...
Tuberculosis	{ Pulmonary :—Definite	...	...	...	...	...	...
	{ Suspected...	...	...	...	1	...	...
	{ Non-Pulmonary :—Glands	...	...	...	...	...	...
	{ Spine	...	...	...	1	...	...
	{ Hips...	...	...	...	...	...	...
	{ Other Bones and Joints	...	...	...	...	...	...
	{ Skin	...	...	...	...	...	...
Nervous System	{ Other forms	...	...	...	...	...	...
	{ Epilepsy	...	...	...	...	...	...
	{ Chorea	...	...	...	...	...	...
Deformities	{ Other Conditions	...	...	...	1	...	...
	{ Rickets	...	...	...	...	...	...
	{ Spinal Curvature	...	...	1	5	20	7
Other Disease or Defect	{ Other Forms	...	...	...	15	23	2
	...	...	...	5	11	...	...
Number of Individual Children having Defects which required Treatment or to be kept under observation				158	90	45	

SECONDARY SCHOOLS.

On page 25 will be found a detailed table shewing the results of the first medical examination of Reading School and of the further medical examination of the Kendrick Girls' School.

The much better physical condition of the boys and girls attending these schools, when compared with the children attending the elementary schools, is evident at a glance. The total number of children shewn to be defective is increased when compared with the elementary schools by the inclusion of large numbers of boys and girls with defective teeth. Better prospects of having such defects treated makes it advisable to have them pointed out in all cases.

There is an almost complete absence of malnutrition, uncleanliness and skin disease.

The incidence of those defects (excluding carious teeth) found to be common amongst elementary school children falls to less than half amongst the boys attending Reading School.

It is of considerable interest that 14 boys were found to suffer from colour blindness. This would, of course, be a matter of great importance in the choice of occupation.

The number of boys who had undergone treatment was considerable.

Of 170 boys referred for treatment, all excepting 18 were found at the last examination to have been treated satisfactorily. Of the 18 for whom treatment had not been obtained, 15 suffered from carious teeth, 2 from defective vision, and 1 from hernia.

That School Medical inspection supplies a very great need even in better class schools is evident when one notes the large number of boys who had undergone treatment. Some of the defects treated, like hernia, are such as might militate seriously against the future well-being of the boys. To have them corrected at this early stage will confer a permanent advantage.

Practically no organic diseases were found and Dr. Taylor, who carried out the examination at Reading School, mentions only two features requiring emphasis, viz. the need for increased attention to teeth and the need for systematic physical exercises to correct defects of carriage (like round shoulders) which many boys shew.

VOLUNTARY DAY CONTINUATION SCHOOL.

Forty-four youths attending the Continuation School were inspected. Twenty-one required dental treatment, one was slightly deaf, and one suffered from running ears. Three had nits in their hair. Thirteen suffered from certain postural defects which it was thought in some instances might be due to sitting at desks that were too low.

MISCELLANEOUS EXAMINATIONS.

Thirty-three examinations were made of scholarship candidates and 11 of student teacher candidates.

VOLUNTARY DAY CONTINUATION SCHOOL.

Forty-four pupils attended the Continuation School, were instructed. Twenty-one required special instruction, one was slightly deaf, and one suffered from running ears. There had also in their class. Thirteen suffered from certain postural defects which it was thought in some instances might be due to sitting at desks that were too low.

Thirty-three examinations were made of scholarship candidates and 11 of student teacher candidates.

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