

[Report 1952] / School Medical Officer of Health, Southampton County Borough.

Contributors

Southampton (England). County Borough Council.

Publication/Creation

1952

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County Borough of Southampton



ANNUAL REPORT
ON THE
SCHOOL HEALTH SERVICE

For the Year 1952

BY

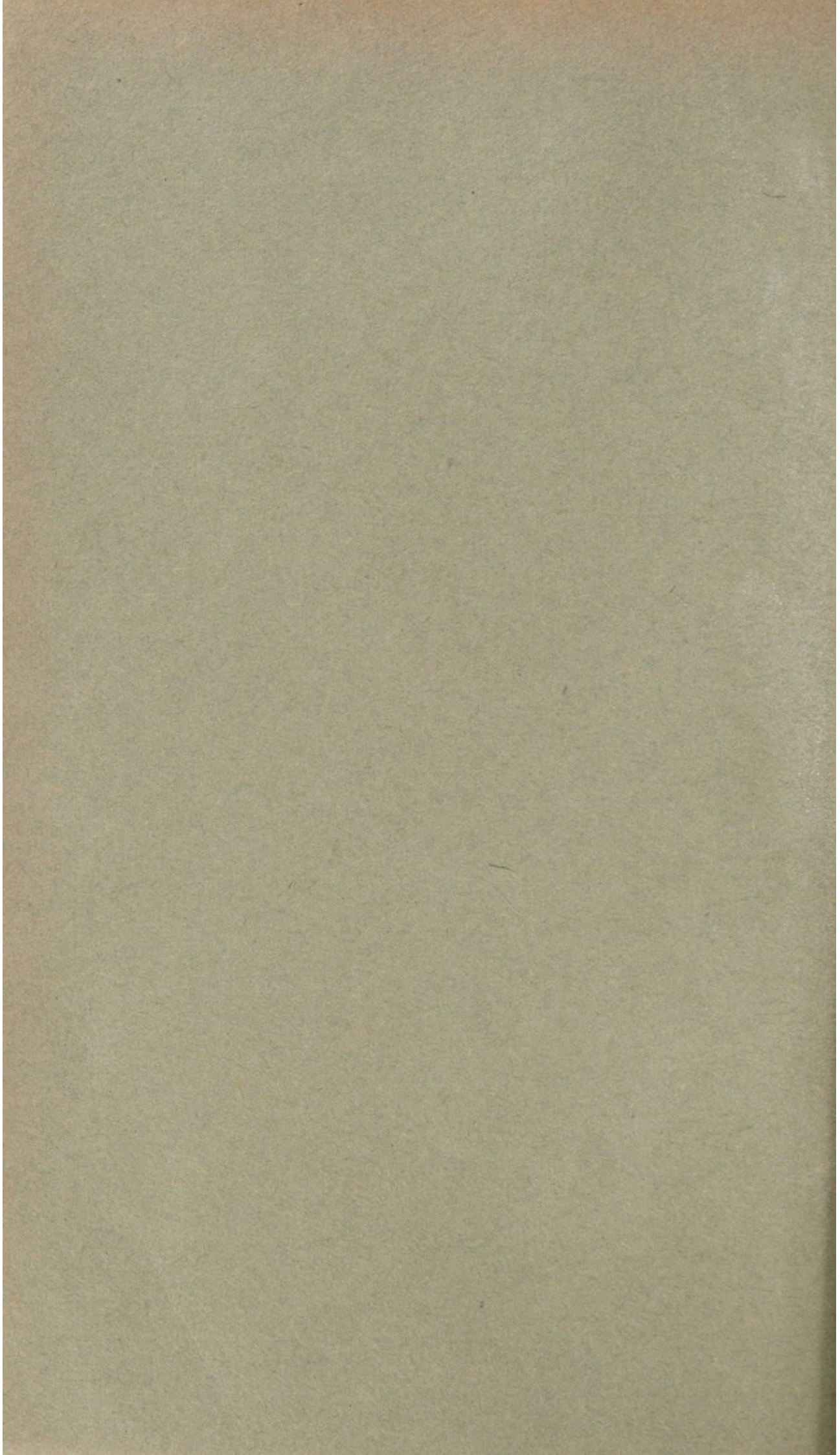
H. C. MAURICE WILLIAMS, O.B.E.

M.R.C.S., L.R.C.P., D.P.H.

School Medical Officer and Medical Officer of Health

TO THE

County Borough and Port of Southampton



pe ask.
20/9/53

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THE REV. D. MARLAIS DAVIES, B.A., D.LITT.	MRS. W. LEWIS, O.B.E.
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THE REV. A. IBBETT	THE VICE-CHANCELLOR, University of Southampton
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School Clinic (Joint) Sub-Committee

Members of the Education Committee :

THE WORSHIPFUL THE MAYOR (Alderman E. Burrow)	
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Councillor L. J. GULLIFORD	

Staff

Medical Officer of Health and School Medical Officer :—

H. C. MAURICE WILLIAMS, O.B.E., M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health and School Medical Officer :—

W. P. CARGILL, B.Sc., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Senior Assistant School Medical Officer :—

C. R. M. GREENFIELD, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Assistant School Medical Officers :—

CATHERINE M. ATKINS, M.B., Ch.B.

KATHLEEN M. CAIRNS, M.B., B.S., M.R.C.S., L.R.C.P.

E. GRETA HUMBLE, M.B., Ch.B. (Commenced 28.4.52)

MARTHE LEBERMANN, M.D.

H. D. ROSSITER, M.B., B.Ch., D.P.H. (Assistant Port Medical Officer, 26.4.52)

Superintendent Health Visitor :—

MISS E. C. MIDDLETON, S.R.N., S.C.M.

To the Chairman and Members of the Education Committee.

LADIES AND GENTLEMEN,

As Medical Officer to the Education Committee, I have the honour to submit my twenty-second Annual Report. This document is the forty-fifth in the series which deals with the work of medical inspection, treatment, and the physical condition of children attending schools within the County Borough of Southampton.

I am pleased to report again this year that all primary and secondary modern schools (with the exception of Bitterne Park) were visited by the Assistant School Medical Officers. War damage repairs prevented arrangements being made for a visit to Bitterne Park Secondary (Modern) School. Medical inspections were also carried out at the Grammar School for Girls, Itchen Grammar School, King Edward VI Grammar School, St. Anne's Grammar School, and Taunton's School. The Atherley School also received medical inspection, this being arranged at the request of the school authorities. The total number of children to receive routine inspections during the year was 8,924. Head teachers were also encouraged to present for examination children who were thought to be in need of medical advice, but who were outside the prescribed age groups. Arrangements were made to re-inspect those children who were found at routine examination to be requiring treatment or to be kept under observation.

The procedure for the routine cleanliness examinations remains unchanged. At the commencement of each term, health visitors visit all schools to examine children in attendance. During the year 80,788 examinations were carried out and 598 cleansing notices were issued. Detailed statistics relating to this branch of the work will be found on page 10. Children found infested are excluded from school for twenty-four hours, and the parents are given written advice as regards the correct method to remedy the condition. Instructions are also given to the effect that children must attend the school clinic for final inspection.

The number of remedial centres established at schools is 21, including the five at the grammar schools. The work of these centres is supervised by the lady Physical Training Organiser whose report is printed on page 28.

Pre-school children attending the day nurseries received medical examinations at intervals of approximately four months ; children found with defective conditions were referred either to their own private practitioner or to the respective clinic.

For the second year in succession an increase is recorded in the provision of school meals and the consumption of milk in schools. In the case of meals, the increase was 134,484 and for milk, 220,032 third pints of milk. Detailed statistics covering the provision of meals, the consumption of milk and the supply of cod liver oil and malt will be found on page 32.

The orthopaedic clinic continued to function smoothly, and the arrangements whereby cases of a major nature are referred to the Lord Mayor Treloar Orthopaedic Clinic held at the Royal South Hants Hospital, prove very satisfactory.

Dr. Greenfield has been carrying out an investigation into the causes and treatment of plantar warts, and his report will be found on page 17.

The child guidance clinic continued to progress, and a full account of the work of this clinic will be found on page 22. Miss F. M. Clements, Educational Psychologist, resigned her appointment in September.

Although the position in the dental service is far from satisfactory, progress has been made. Mr. A. Topping was appointed Senior Dental Officer on the 28th April, 1952, and Messrs. F. Owen, A. C. Sorrell and J. A. Boyd were appointed part-time dental officers on 4th February, 25th February and 2nd December, respectively. The Committee also recommended the appointment of Mr. R. Allen as Assistant Dental Officer, who will be commencing duty early in the new year.

The dental clinic at Oatlands House commenced to operate in May, 1952, and it is hoped that Sydney House dental clinic will be functioning in 1953. It is with pleasure I have to report that routine school dental inspections have also been re-introduced.

Two branch clinics were closed during the year, leaving only three only in operation. The minor ailment clinic at Bassett Green School closed down on 5th January, 1952, owing to the fact that attendances at this clinic had become so few. This was due, no doubt, to the comparative proximity of Swaythling Clinic. The Avenue Clinic was discontinued as from the 18th December, when the rehousing of the families in the "Huts" on the Common was nearly complete. Branch clinics serve a most useful purpose in that they free the main clinics, and in addition avoid a good deal of loss of schooling where children attend for treatment.

The speech clinic, this year, again did not function, owing to the post of speech therapist still being vacant. However, a candidate for this post is being interviewed early in the new year and I hope to report favourably during the coming year.

Dr. H. D. Rossiter resigned his appointment as Assistant School Medical Officer on the 26th April, 1952 to take up the post of Assistant Port Medical Officer. This vacancy was filled by Dr. E. Greta Humble who was appointed on the 28th April, 1952 and commenced to conduct clinics at Oatlands House on that date.

A further three health visitors were appointed during the year under the health visitors' training scheme, but there were three resignations. The total, therefore, remained at seventeen. The Superintendent Health Visitor is included in this figure.

Co-ordination of the Public Health Service and School Health Service continued smoothly as my duties as Medical Officer of Health are combined with those of Medical Officer to the Education Committee.

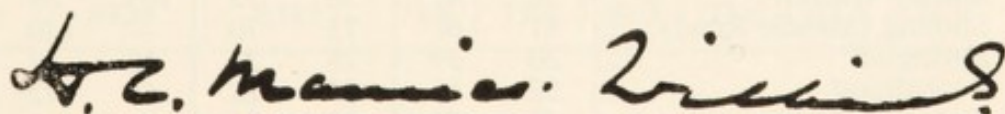
In conclusion, I desire to express my appreciation for the support and encouragement which have been given by the Chairman and Members of the School Clinic (Joint) Sub-Committee, and for the courtesy with which they have considered my many suggestions and recommendations.

I wish also to thank the following for their co-operation and assistance: Officers of the Education Department, the National Society for the Prevention of Cruelty to Children, the hospitals and the teachers. To the staff of the department — medical, dental, nursing and clerical — I tender my best thanks for the willing and conscientious work carried out during the year.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,



School Medical Officer.

SCHOOL MEDICAL INSPECTION

Number of schools and departments in the Borough :—

Schools	43
Departments : Primary	55
Secondary Modern	17

(including the Secondary Technical School)

In addition there are five Grammar Schools.

Details of the number of children examined in the routine age groups.

School	Entrants		2nd Age Group		3rd Age Group		Total
	Boys	Girls	Boys	Girls	Boys	Girls	
Aldermoor	37	31	53	38	—	—	159
Ascupart	60	60	52	31	—	—	203
Bassett Green	75	59	72	58	—	—	264
Beechwood	—	—	24	22	—	—	46
Bevois Town	30	23	31	25	—	—	109
Bitterne C. of E.	45	43	54	64	—	—	206
Bitterne Manor	34	40	17	21	—	—	112
Bitterne Park	84	91	50	69	—	—	294
Central	47	52	77	59	98	—	333
Deanery	—	—	—	1	58	79	138
Foundry Lane	56	59	141	154	—	—	410
Freemantle	35	34	30	26	—	—	125
Girls' Grammar	—	—	—	15	—	138	153
Heathfield	51	60	30	20	—	—	161
Highfield	34	34	27	24	—	—	119
Itchen Grammar	—	—	10	15	101	101	227
King Edward VI	—	—	32	—	287	—	319
Ludlow Road	112	111	110	105	—	—	438
Merry Oak	—	—	8	—	116	—	124
Mount Pleasant	56	46	—	10	—	114	226
Northam	64	63	27	38	—	—	192
Portswood	22	26	29	32	50	60	219
Regents Park	78	82	11	7	107	97	382
St. Anne's Grammar	—	—	—	—	—	48	48
St. Denys	85	87	28	52	—	—	252
St. John's	17	11	17	15	—	—	60
St. Joseph's	7	6	5	8	9	6	41
St. Jude's	25	21	—	—	—	—	46
St. Mark's	30	33	16	15	—	—	94
St. Mary's	6	34	—	26	—	—	66
St. Monica	26	34	38	40	—	—	138
Shirley	135	127	87	72	—	—	421
Shirley Warren	56	42	56	33	105	88	380
Sholing (Middle Road)	81	69	75	70	—	140	435
Springhill	30	39	28	27	12	17	153
Swaythling	52	61	33	28	63	72	309
Tanner's Brook	43	56	17	21	—	—	137
Taunton's	—	—	120	—	251	—	371
Western	72	73	9	8	57	77	296
Weston Park	90	75	29	25	—	—	219
Wimpson	59	62	4	3	—	—	128
Woolston	31	20	1	10	126	107	295
Woolston R.C.	26	21	11	9	5	4	76
TOTALS	1791	1785	1459	1296	1445	1148	8924

Attendances of Parents

Attendance of parents during 1952 with comparative figures for previous five years.

AGE GROUP	Number of Children Inspected	Number of Parents Present	Percentage of Parents present in					
			1952	1951	1950	1949	1948	1947
Entrants								
Boys	1791	1725						
Girls	1785	1707						
	3576	3432	96.0	94.1	95.2	90.4	90.7	86.6
2nd Age Group								
Boys	1459	1007						
Girls	1296	1098						
	2755	2105	76.4	79.5	74.9	70.1	69.1	70.6
3rd Age Group								
Boys	1445	471						
Girls	1148	577						
	2593	1048	40.4	41.6	36.8	38.6	32.9	40.6
TOTALS	8924	6585	73.8	75.5	69.3	73.6	67.5	71.9

WEIGHT AND HEIGHT MEASUREMENTS

The weighing and measuring of children are carried out periodically at all schools. Statistics for previous years are shown below for comparison. Details for 1949 are not available owing to the fact that no provision was made for the inclusion of these when the new medical inspection cards were introduced.

	BOYS				GIRLS			
	Weight			Height inches	Weight			Height inches
	st.	lbs.	ozs.		st.	lbs.	ozs.	
5 years								
1952	3	1	3.1	42.9	2	13	7.8	42.6
1951	3	0	4.6	43.3	2	13	3.5	42.5
1950	2	13	14.9	42.6	2	12	11.6	42.4
1949	—	—	—	—	—	—	—	—
1948	2	12	14.3	41.9	2	11	6.2	41.5
1947	2	12	12.8	42.7	2	9	3.5	42.2
8 years								
1952	3	13	13.2	48.8	3	11	3.5	48.1
1951	4	3	4.3	50.5	3	13	0.8	49.4
1950	4	0	14.5	49.3	3	12	15.3	49.1
1949	—	—	—	—	—	—	—	—
1948	3	10	14.9	47.9	3	9	14.3	48.2
1947	3	11	0.6	47.7	3	10	6.4	48.4
12 years								
1952	6	0	12.9	57.7	6	1	9.8	58.2
1951	5	11	4.7	57.4	6	0	5.9	58.5
1950	5	9	7.2	56.6	5	13	9.8	57.2
1949	—	—	—	—	—	—	—	—
1948	5	7	13.1	56.4	5	8	5.5	56.8
1947	5	9	11.2	57.2	5	12	11.5	58.0

The following tables give details of defects found requiring treatment or observation.

DEFECTIVE VISION AND EYE DISEASE

Age Group	Number Examined	Defective Vision		Squint		Other Conditions		Total	
		No.	%	No.	%	No.	%	No.	%
Entrants	3576	634	17.7	171	4.8	52	1.5	857	24.0
2nd Age Group	2755	482	17.5	44	1.6	24	0.9	550	20.0
3rd Age Group	2593	437	16.8	15	0.6	15	0.6	467	18.0
TOTALS	8924	1553	17.4	230	2.6	91	1.0	1874	21.0

NOSE AND THROAT

Age Group	Number Examined	Number of Defects	Percentage
Entrants	3576	910	25.5
2nd Age Group	2755	296	10.7
3rd Age Group	2593	171	6.6
TOTALS	8924	1377	15.4

EAR DISEASE AND DEFECTIVE HEARING

Age Group	Number Examined	Defective Hearing		Otitis Media		Other Ear Diseases		Total	
		No.	%	No.	%	No.	%	No.	%
Entrants	3576	303	8.5	55	1.5	72	2.0	430	12.0
2nd Age Group	2755	87	3.2	18	0.6	47	1.7	152	5.5
3rd Age Group	2593	21	0.8	4	0.2	9	0.3	34	1.3
Totals	8924	411	4.6	77	0.9	128	1.4	616	6.9

ORTHOPAEDIC AND POSTURAL DEFECTS

Age Group	Number Examined	Posture		Flat Foot		Other Deformities		Total	
		No.	%	No.	%	No.	%	No.	%
Entrants	3576	231	6.5	431	12.0	553	15.5	1215	34.0
2nd Age Group	2755	255	9.2	327	11.9	349	12.7	931	33.8
3rd Age Group	2593	222	8.6	218	8.4	267	10.3	707	27.3
Totals	8924	708	7.9	976	10.9	1169	13.1	2853	31.9

Following Up.—The following up of the defects found to require treatment or observation may be divided into two sections, namely the re-examination by medical officers of the cases referred at routine medical inspection, and the subsequent following up by health visitors of the cases for which treatment has not been obtained.

Visits paid to the homes by the Health Visitors :—

Dental cases	.....	.....	.....	.....	12
Vision cases	.....	.....	.....	.....	151
Ear, Nose and Throat cases	.....	.....	.....	.....	75
Skin cases	.....	.....	.....	.....	48
General cases	.....	.....	.....	.....	361
Orthopaedic cases	.....	.....	.....	.....	74
Other cases	.....	.....	.....	.....	631
					—1352
Visits paid to schools	.....	.....	.....	.....	1603
					—2955

Cleanliness.—The health visitors have continued to carry out the periodic cleanliness examinations of all the children attending school. As a result of 80,788 examinations, 598 cleansing notices were issued (Section 54(2), Education Act, 1944) necessitating exclusion from school. All related to infestation with head lice. 522 individual children were concerned, some being found infested more than once during the year.

Facilities are provided at the school clinics for the cleansing of children found infested. The following details show the work performed :—

Number of children cleansed	.....	.....	619
Of this number 447 children attended once			
„ „ „ 113	„	„	twice
„ „ „ 46	„	„	three times
„ „ „ 9	„	„	four times
„ „ „ 3	„	„	five times
„ „ „ 1 child	„	„	six times
Total	.....	.....	619

There were, therefore, 898 attendances for cleansing. In addition to those children excluded from school these figures include children found verminous at special examinations at clinics.

MUNICIPAL CLINICS

During the year, 67,533 attendances were made by children at the various clinics, which are summarised in the following table :—

Clinic	King's Park Road	Sydney House	Oatlands House	Swaythling	Bitterne Park	Cardigan Road	Branch Clinics in Schools	Total
Dental Service	—	—	1901	—	—	7121	—	9022
Eye Clinic	7982	5491	5060	6059	1469	—	3408	29469
General Inspt'n	1059	1431	1662	1228	972	—	—	6352
Asthma Clinic	739	—	—	—	—	—	—	739
Rheumatism & Heart Clinic	177	—	—	—	—	—	—	177
Artificial Sunlight Clinic	1283	838	358	683	1008	—	—	4170
Ophthalmic Clinic	5194	—	—	—	—	—	—	5194
Ear, Nose & Throat Clinic	2682	—	—	—	—	—	—	2682
Orthopaedic Clinic	2648	—	—	—	—	—	—	2648
Vaccination Clinic	905	1133	1272	842	393	—	344	4889
Child Guidance Clinic	1899	—	—	—	—	—	—	1899
Special Cases	292	—	—	—	—	—	—	292
TOTALS	24860	8893	10253	8812	3842	7121	3752	67533

Details of the work in the various clinics are given with a review of the activities of each school clinic :—

Dental Service.—Against a need for some seven or eight, the school dental service had for the year 1952, the equivalent of two full-time officers, and although this is an improvement on the year 1951 when there was only one full-time officer, the position remains far from satisfactory.

Some progress has, however, been made in the right direction. In addition to Cardigan Road clinic, which has remained open full-time, Oatlands House dental clinic was opened in May, and has continued to give nearly full-time service throughout the year.

Routine school dental inspections were also re-introduced, on a limited scale and this is some cause for satisfaction as an essential move towards a regular full service for the children.

We have been able to cautiously extend the scope of the school dental service within the limits imposed by a depleted staff, and we have made preparation for a quick expansion of the service, just as soon as more dental officers become available.

Skin Clinic.—There is a decrease in the number of children attending this clinic. The incidence of scabies and impetigo continues at a low level, and treatment has been satisfactory. Ringworm has been confined almost entirely to the body, and cases have responded well to treatment. No serious outbreaks have come to light.

Plantar warts have shown an increase, 118 cases in 1951 as compared with 135 cases in 1952. Carbon dioxide snow has been tried as a treatment at King's Park Road. This treatment has shown considerable reduction in the time taken to cure most cases, and further research is being carried out.

Inspection Clinic.—There has been a further decline in attendance at this clinic, due to the present policy of referring children with coughs, sore throats and similar ailments, to their own general practitioners for treatment. Useful work, however, is still carried out at this clinic, in dealing with enuresis, debility, minor injuries, etc., as well as in giving advice to parents in the care and welfare of their children.

Asthma Clinic.—A slight increase in the number attending this clinic is again recorded. The table below shows that quite good results have been obtained.

As in previous years, the arrangements by which the County Authority refers cases to this clinic has continued, and this proves to be very satisfactory.

A total of 21 children, 18 boys and 3 girls, who reside within the county area, attended this clinic making a total of 71 attendances.

	Boys	Girls	Total
Number of cases treated	96	51	147
Average age at onset (years)	3½	4	
PROGRESS—			
Greatly improved	12	3	15
Improved	30	18	48
Slight improvement	30	15	45
No improvement	7	5	12
Too early to report	5	1	6
Ceased attendance	4	3	7
Discharged	8	6	14

Rheumatism and Heart Clinic.—It is very satisfactory to note that the incidence of acute rheumatism continues to be low. A fair number of children attend on account of chorea and growing pains.

Heart cases are chiefly those of functional or congenital type.

All children are kept under observation to ensure that they take as large a part in normal school life, both work and play, as is compatible with their comfort and well being.

TABLE A

Under supervision, January, 1952	.....	67
Number seen for first time in 1952	.....	42
Discharged or ceased attending in 1952	.....	15
Under supervision, December, 1952	.....	94
Total number of visits	.....	177

TABLE B

New Cases :—		
History of —		
Rheumatic fever	.....	1
Rheumatic pains	.....	7
Chorea	.....	5

TABLE C

Diagnosis in new cases :—		
Suspected carditis	.....	1
Congenital abnormality	.....	9
Functional	.....	19

TABLE D

Recommendation made during the year with regard to individual children :—		
Referred to Hospital	.....	2
Referred to other clinics	.....	1
Stopped physical training	.....	1

Artificial Sunlight Clinics.—Useful work has been carried out at the five centres, and a considerable number of children have received treatment.

A certain amount of difficulty was experienced at King's Park Road owing to technical faults, but these were rectified as soon as possible. Interference owing to electricity "load shedding" was not experienced this year.

ATTENDANCES AT ARTIFICIAL SUNLIGHT CLINIC

	King's Park Road Clinic		Sydney House Clinic		Oatlands House Clinic		Swaythling Clinic		Bitterne Park Clinic		
	Sch.	Pre-Sch. Total	Sch.	Pre-Sch. Total	Sch.	Pre-Sch. Total	Sch.	Pre-Sch. Total	Sch.	Pre-Sch. Total	
Children who attended for the first time in 1952	27	102	71	27	26	14	41	23	59	48	107
Attendances in 1952	288	995	622	216	228	130	426	257	620	388	1008

External Eye Disease and Defective Vision.—The Ophthalmic Surgeon, J. Keyms, B.A., M.D., Ch.B., B.A.O., conducts three sessions weekly at King's Park Road. Details of the work carried out during the year, together with comparative figures for the years 1951 and 1950 are summarised in the following table :—

	1950	1951	1952
Attendances at the Clinic	3990	4537	5194
Individual children seen by the specialist	2000	2246	2640
Submitted to refraction	1107	1271	1303
Glasses prescribed	1015	1196	1200
Received other treatment	53	41	16
Placed under observation	668	814	996
Found not to require treatment or observation	172	99	158
Number of children for whom spectacles were :			
(a) Prescribed		1200	
(b) Obtained		1142*	

* This figure includes children for whom glasses were prescribed but not provided during the previous year.

Arrangements continue with the use of the Supplementary Ophthalmic Services, whereby the Local Health Authority pays a sessional fee to the Ophthalmic Surgeon and claims on the Local Executive Committee for each case refracted.

Ear, Nose and Throat Clinic.— This clinic is conducted by J. B. Sugden, M.B., B.S., M.R.C.S., L.R.C.P., D.L.O., Aural Surgeon (part-time) employed by the Regional Hospital Board.

	1950	1951	1952
Total Attendances	3003	2841	2682
New cases for consultation	1357	1238	1184
Return cases for review or treatment	1646	1605	1498
Tonsil and adenoid operations	423	474	356
Nasal and aural operations	28	26	25

Analysis of the returns of this clinic show about a 5% annual reduction in the outpatient work over the last four years, a result of the leeway being made up after resuming normal post-war clinics. This has resulted in a most satisfactory balance being obtained in the waiting periods for consultation and operation.

The closest liaison is maintained between this clinic and the hospital services both as regards the facilities for in-patient treatment and any out-patient specialised examination such as X-ray and audiometric investigation of deafness.

The service offered to children by the local authority at this clinic will reach completeness with the appointment of a full time Speech Therapist in the new year whose work will prove to be of the greatest value to the children of Southampton.

Orthopaedic Clinic.—The minor orthopaedic clinic continues its close liaison with the major clinic which functions at the Royal South Hants Hospital, and this arrangement proves very satisfactory. The following table gives details of the defects treated at the minor orthopaedic clinic.

CONGENITAL —		OTHERS (<i>continued</i>) —	
Short leg	1	Osteo chondritis	4
Talipes equino varus	6	Pes cavo varus	5
Other forms	5	Pes cavus	47
		Pes plano valgus	40
TRAUMATIC —		Pes planus	231
Osgood Slatters disease	2	Pes valgus	425
Slipped epiphysis	1	Pes varus	25
Sprains	4	Pigeon chest	4
Other forms	10	Poor posture	253
		Rickets, other forms	1
OTHERS —		Scoliosis	123
Claw toes	42	Short leg	57
Exostosis ocalcis	4	Sterno mastoid torticollis	1
Foot eversions	155	Tight pectorals	42
Ganglion	1	Tight tendo Achilles	10
Genu valgum.....	389	Torticollis	3
Genu varum	41	Winged scapulae	2
Hallux rigidus	3	Other foot deformities	8
Hallux valgus	56	Other forms	155
Hammer Toes	19		
Kypholordosis	86	PARALYSIS —	
Kyphosis	77	Poliomyelitis	1
Lordosis	9		
Metatarsus primus elevatus	15		2375
Metatarsus varus	12		

VERRUCAE VULGARES (Plantar Warts)

Dr. C. R. M. Greenfield, Senior Assistant School Medical Officer, carried out an investigation in plantar warts. As the etiology of this condition appears to be somewhat conjectural, and its causation is sometimes stated to be due largely to carrying out Physical Training in bare feet, it was thought that some research might be of value in throwing light on this difficult problem.

On the 1st April, 1951, at one of the health centres in the County Borough of Southampton, an investigation was begun, and has been continued since that date.

Every fresh case of verruca infection, reporting at the centre, was questioned and accurate records kept, as to any habits in each individual which might possibly be associated with the causation of infection.

Physical training in bare feet, communal use of plimsolls, attendance at swimming baths, use of school showers, etc., were all carefully enquired into and recorded for every child who developed verruca infection. Naturally, in some cases, more than one factor was found which might have led to the infection gaining entry and in these cases, as is shown in the table, all known causes were recorded.

It will be seen from the table that in both of the years under review, there was a much greater proportion of infection among "wet" cases than among "dry" cases. "Wet" cases include all verruca infections from whatever cause, provided that the use of swimming baths, school showers or footbaths were reported in addition to any other possible causes, whether these latter were present or not, and "dry" cases are those in which there was no history of the use of swimming baths, school showers or footbaths.

This finding supports the belief that damp conditions favour the survival of the causative virus and, therefore, infection is more likely to occur, possibly through minute sites of injury, especially where such conditions are associated with communal use. It would not seem desirable, therefore, in the present state of our knowledge, to deprive children of the well known advantages of carrying out physical training in bare feet, although precautionary measures, such as dry floors, kept as clean as possible, and treated regularly with a suitable disinfectant, together with the use of wax or other floor coating to reduce the incidence of splinters to a minimum in the case of wood floors, should always be carried out.

Treatment.—In a School Clinic, methods of treatment are limited. Diathermy, X-rays, excision or scraping under an anaesthetic and all such methods are, for obvious reasons, impracticable.

Formaldehyde, Salicylic acid and Podophyllin were found to be not very satisfactory, as such treatment may take as long as 3-4 months in some cases, each treatment having to be carried out at the clinic under proper supervision, during school hours, thus causing a considerable loss of school attendance.

Freezing with CO₂ snow, obtained by the Sparklet method, has been in use for some months. The pencil is applied to the verruca with firm pressure for a period of three minutes, then a ring-pad of orthopaedic felt is placed over the site, retained in place with adhesive strapping and the child is instructed to keep the dressing on as long as possible, to avoid getting it wet and to report back in four weeks' time or sooner if the dressing comes off, or if pain develops, which occurs rarely and is usually cured by relieving the pressure with a larger ring-pad. After these four weeks, the majority of verrucae are found to have been "floated out" with an aseptic blister and have disappeared completely or there is found to be a blister with the verruca attached to the dead skin, which is snipped off with scissors and an aseptic dressing applied for one week.

With the larger verrucae, where the surface area cannot be fully covered with the CO₂ pencil and, therefore, not completely frozen, results are not quite so good and a second freezing has to be carried out. If first impressions are found to be confirmed by further experience, as, so far, only about fifty cases have been so treated, an attempt will be made to obtain a pencil of greater diameter to deal with the larger type of verruca.

At first, the blisters were snipped off as soon as well formed, but experience shows that it is better to leave them untouched for four weeks or so. Preliminary soaking of the area before application of the CO₂ pencil and treating of the verruca site, after separation, with AgNO₃ have been tried, but the simpler method, in our present small experience, appears to give the best results.

A "follow-up" of all cases is carried out to watch for recurrences, a record being kept of the site of the original lesion to exclude fresh infections. So far, no recurrences have been met with; incompletely treated cases, which require further freezing are not classified as recurrences.

I would like to add my very grateful thanks to the clinic sisters — Miss A. J. Ryder and Miss P. P. Piercy — without whose helpful co-operation this investigation could not have been carried out.

	1951 (1.4.51 to 31.12.51)		1952	
	No.	%	No.	%
P.T. in bare feet	16	18.0	13	9.6
School shoes	9	10.1	10	7.4
Swimming Baths	27	30.3	24	17.8
School showers or footbaths	4	4.5	3	2.2
Contacts at home	1	1.1	3	2.2
No known cause	5	5.6	6	4.4
P.T. bare feet & swimming baths	14	15.7	21	15.5
P.T. bare feet, school shoes & swimming baths	2	2.2	15	11.1
School shoes & swimming baths	7	7.9	12	8.9
School showers & swimming baths	1	1.1	5	3.7
Swimming baths & contact	—	—	5	3.7
P.T. bare feet, swimming baths & contact	—	—	4	3.0
School shoes, swimming baths & contact	—	—	2	1.5
P.T. in socks	—	—	1	0.7
Shoes changed in school corridor	—	—	1	0.7
P.T. bare feet & school shoes	3	3.4	7	5.2
P.T. bare feet & showers	—	—	1	0.7
P.T. bare feet, swimming baths & Showers	—	—	1	0.7
P.T. bare feet, swimming baths, school shoes & contact	—	—	1	0.7
TOTAL CASES	89*	—	135	—
“Dry” Cases	29	32.6	35	25.0
“Wet” Cases	55	61.8	94	69.6

*Total cases for complete year — 118

ANALYSIS OF ATTENDANCES AT MINOR ORTHOPAEDIC CLINIC

Classification	Under School Age		School Age		Total	
	New	Old	New	Old	New	Old
Crippling diseases:—						
Feet and others	191	131	1183	469	1374	600
Spine	—	—	485	182	485	182
TOTAL	191	131	1668	651	1859	782

Immunisation against Diphtheria.—The number of children receiving complete treatment during the year was 2,560 as compared with 2,464 in the previous year. Of this number, 1,671 were treated at the various municipal clinics and 889 by private practitioners. Reinforcing injections were given to 1,953 children, 1,607 at clinics and 346 through private practitioners.

No publicity campaign was held in 1952. The full effect of the campaign held in the latter part of 1951 was not apparent until the first few months of 1952 when large numbers of consent forms were received. During the year, however, no opportunity was lost at school medical inspections to obtain the parents consent for reinforcing and primary injections.

Immunisation against Whooping Cough.—Facilities for immunisation against whooping cough were available at the various clinics for children whose parents wished to take advantage of this treatment.

TABLE A

The following table gives details of the treatment undertaken during the year :—

(i)	New cases	.....	.....	.....	.....	.....	.....	1611
	Protective injections :—							
	Purified Toxoid Alum Precipitated	.....	.....	.....	.....	.....	.....	1611
	“	“	“	“	“	Second	“	1671
	“	“	“	“	“	Addn.	“	1607
								4889
(ii)	IMMUNISATION AT CLINICS :—							
	Number of clinics held	.....	.....	.....	.....	.....	.....	316 (339)
	Total number of attendances	.....	.....	.....	.....	.....	.....	4889 (5479)
	Number of children who have completed course	.....	.....	.....	.....	.....	.....	1671 (1502)
	Number of re-inforcing courses	.....	.....	.....	.....	.....	.....	1607 (2276)
	IMMUNISATION BY PRIVATE DOCTORS :—							
	Number of children who have completed course	.....	.....	.....	.....	.....	.....	889 (962)
	Number of re-inforcing courses	.....	.....	.....	.....	.....	.....	346 (442)
	Total number immunised	.....	.....	.....	.....	.....	.....	2560 1953 (2464) (2718)

(Figures in brackets refer to the year 1951)

TABLE B

(Ministry of Health Annual Return for the Year Ended 31st December, 1952).

I. IMMUNISATION IN RELATION TO CHILD POPULATION

Number of Children who had completed a full course of Immunisation at any time up to 31st December, 1952

Age at 31/12/52 i.e. born in year	Under 1 1952	1 1951	2 1950	3 1949	4 1948	5-9 1943-1947	10-14 1938-1942	Total Under 15
Number immunised	47	1223	1815	1826	2214	10317	8356	25798
Estimated Mid-Year child population, 1952	15700					26400		42100

Child Guidance Clinic

Work at the Clinic.— In all 1,899 child attendances were made, which consisted of :—

Consultations	.....	.....	.....	238
Treatments	.....	.....	.....	1142
Intelligence tests	.....	.....	.....	289
Remedial teaching	.....	.....	.....	322

1,340 interviews were given to parents in the Clinic ; owing to shortage of staff on the social work side it was only possible to pay 88 home visits.

Sources of Referral—

Doctors from various clinics	.....	.....	.....	59
Private Doctors	.....	.....	.....	25
Hospitals	.....	.....	.....	30
Health Visitors	.....	.....	.....	2
Speech Therapist	.....	.....	.....	2
Head Teachers	.....	.....	.....	37
Chief Education Officer	.....	.....	.....	4
Children's Officer	.....	.....	.....	32
Probation Officers and Chief Constable	.....	.....	.....	31
Parents	.....	.....	.....	20
Dr. Barnardo's Homes	.....	.....	.....	2
				<hr/>
				244
				<hr/>

Reasons for referral were as follows :—

(a) Nervous disorders—				
Fears, anxieties and nervousness	.....	.....	.....	23
Night terrors	.....	.....	.....	15
				Total 38
(b) Habit disorders and physical symptoms—				
Enuresis	.....	.....	.....	20
Speech difficulties	.....	.....	.....	7
Double incontinence	.....	.....	.....	3
Hysteria	.....	.....	.....	3
Restlessness and excitability	.....	.....	.....	2
Encopresis	.....	.....	.....	1
Feeding difficulties	.....	.....	.....	2
Asthma	.....	.....	.....	—
Tic	.....	.....	.....	2
Epilepsy	.....	.....	.....	—
				Total 40

(c) Behaviour disorders—		
Pilfering	26	
Unmanageable	23	
Truancy	4	
Aggressiveness, destructiveness & cruelty	7	
Tempers	11	
Sex problems	5	
Depression	6	
Immaturity	2	
Withdrawn behaviour	2	
Day-dreaming	2	Total 88
(d) Psychotic behaviour	—	Total —
(e) Educational and vocational difficulties—		
Backwardness at school	11	
Inability to concentrate	1	Total 12
(f) Special examinations—		
Intelligence tests only	20	
Reports for children on remand	23	
Advice regarding placement	23	Total 66

Fewer children, who fall into the “aggressive” or unmanageable group were referred this year, and fewer head teachers referred children. While it would be unwise to draw definite conclusions from this, it may be that an accumulation of disturbed children in the schools has now been dealt with, and that there remain only those to be expected in the normal school intake.

Ages of referral :

Ages	2 and under	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Over 16	Totals
Boys	4	6	9	12	14	25	9	11	7	19	11	9	8	3	2	—	149
Girls	5	3	4	7	10	10	10	11	6	11	6	3	5	3	1	—	95

Staff

Part-time Medical Director and Consultant Psychiatrist :

Dr. Mary Capes (who was given leave of absence from February - May to assist World Health Organisation as Director of Studies for Scandinavian Seminar on Child Guidance Work).

Part-time Consultant Psychiatrist :

Dr. W. J. T. Kimber (who deputised during the absence of Dr. Capes, and has since continued to hold three sessions weekly).

Full-time Psychiatric Social Worker :

Miss Opie (who was given leave of absence during September to act as Resident Tutor to Home Office Refresher Course for Boarding out Officers, arranged in conjunction with the University of Southampton).

Full-time Educational Psychologist :

Miss Clements (who left in September to take up a post as Lecturer in Education at Hong Kong University).

Full-time Therapist and Psychologist : Mrs. Ellingham.

DISPOSAL OF CASES

After Treatment —

Much improved	25
Improved	59
Unchanged	9
Transferred to other agencies	22
Unco-operative	2
Moved	8
Total	125

After Investigation —

Consultation and advice.....	137
Intelligence tests only	14
Transferred to other agencies	28
Periodic supervision	—
Unco-operative	8
Total	187

Uneventuated Cases —

Unsuitable referrals	11
Unco-operative, not seen	27
Total	38

Total 350

Of the 548 children seen during the year, 7 were ascertained as maladjusted in order that they might go to a boarding school for maladjusted children, as this was felt to be in their best interests.

Training.—During the year, four Social Science students from Southampton University and one from the London School of Economics have spent varying periods of time at the clinic to gain practical experience in child guidance work.

Work in the Schools.—The school work has been interrupted since Miss Clements left. It is hoped that an Education Psychologist will shortly be appointed to continue this work.

Individual intelligence tests and diagnostic interviews	45
Interviews with teachers	129

Preventive Work—

Lectures	13
Discussions with other departments and organisations	97

Sydney House School Clinic.—The work of the school clinic continued smoothly throughout the year, but attendances in December were much below normal. This drop was undoubtedly due to the widespread measles epidemic. Although said to be a mild form, generally, the measles in this area, from hearsay from parents and health visitors, appeared to be moderately severe and was followed in several cases by pneumonia.

The conditions treated during the year were the usual assortment of minor ailments — skin conditions (*e.g.*, acne, psoriasis, eczema), nervous states (*e.g.*, enuresis, insomnia, somnambulism), and various conditions requiring observation and investigation before either the parent could be reassured or the child referred for further treatment (*e.g.*, chronic “cough,” deafness, loss of weight or excessive gain in weight). The nursing staff have been diligent in dressing sprains, abrasions, superficial burns, discharging ears, severe infantile eczemata, etc. The ultra violet light clinic has been used throughout the year and grateful parents have testified to the excellent results obtained by its use in suitable cases. The younger children are given a tuberculin jelly test before commencing a course of ultra violet light. In the older children plantar warts have recurred more frequently this year. Treatment is lengthy and has meant a moderate loss of school attendance. Recently, however, a carbon dioxide snow pencil has been borrowed once a week from the central clinic at King’s Park Road, and results so far have seemed more effective and speedy with this.

Oatlands House School Clinic.—This clinic continues to treat children referred from school medical inspections, as well as those brought along independently by parents.

Where thought necessary, children are referred to the Childrens’ Hospital Consultants, and to the major clinics at King’s Park Road. Several cases of maladjustment were also referred to the child guidance clinic.

The clinic held on Monday afternoons deals particularly with skin conditions, consisting of eczema, impetigo, septic conditions and verrucae. Cases of impetigo are becoming less frequent, but there are still as many cases of verruca as last year. Verrucae, however, are being more easily dealt with as these conditions are being seen in the early stages.

Swaythling School Clinic.—A great variety of conditions were seen at this clinic during the year. Children who attended in large numbers for troublesome coughs were given a thorough examination, this being followed by further investigation whenever any serious chest condition was suspected. Where treatment was necessary, referral to their own private practitioner was made. Only in cases where parents refused to take their children to their own general practitioners was medicine supplied at the clinic. However, the general conditions of children received due attention and wherever signs of a poor state of health and a deficiency of calcium or vitamins were present appropriate treatment was given.

The results on the whole were gratifying, particularly in children who presented states of debility, listlessness, anaemia, etc. Courses of artificial sunlight again proved very beneficial in these cases as well as various skin conditions such as boils, styes and cases of acidosis. These were usually preceded by tuberculin jelly tests to exclude the presence of tuberculous infection.

Fewer cases of thread-worm infestation attended during the year but these were successfully treated.

Bitterne Park Clinic.—This is the first full year that Bitterne Park Clinic has been open and work done in the school section has increased progressively. This work has two main functions :

- (a) Investigation of defects found at routine school medical inspection.
- (b) Treatment of minor ailments.

The conditions most frequently investigated were persistent cough (especially cough following an attack of pertussis), recurrent coryza, anorexia, anaemia, malnutrition, enuresis and other nervous conditions. Where no specific cause for defect was found, simple treatment, *i.e.*, nasal drops for coryza, tonics or a course of ultra violet light or both for anorexia and malnutrition were given. A number of enuretics responded well. Other cases were referred to their own doctors or the appropriate specialist clinic. The ultra violet light department was in full use during the winter months, 64 children were treated, the majority with good results. A large number of tuberculin jelly tests were done, and this was routine before a course of ultra violet light ; the few cases showing a positive result were referred to the chest clinic.

Among minor ailments treated were minor injuries including sprains, septic cuts and abrasions ; these were treated with simple dressings, lotions or ointments.

The following skin conditions were also treated, chilblains, urticaria, acne, boils, impetigo, blepharitis, dermatitis, warts and verrucae ; the incidence of the latter dropped considerably in the winter months.

HANDICAPPED PUPILS

ASCERTAINMENT

Children suspected to be suffering from physical or mental defects requiring special educational treatment are referred for examination by the Education Department, private practitioners, health visitors, parents and from school medical inspection.

During the year under review, the following examinations were made :—

Referred as physically defective children	158
Referred as educationally subnormal or maladjusted children	134
Total examinations	292

As a result of these examinations, the under-mentioned recommendations were made to the Education Committee :—

PHYSICAL CASES—

Open-air School for Delicate Pupils	60
Epileptic Colony	3
School for Physically Handicapped Pupils	6
Deaf School	1
Partially Deaf School	1
Home Tuition	6
Diabetic	1
Hospital School	1

OTHER CASES—

Incapable of receiving education at school	4
Incapable of receiving education at school on the ground that it is inexpedient that he/she should be educated in in association with other children	1
Required supervision after leaving school	5
Special School (Day) as Educationally sub-normal	19
Special School (Boarding) as Educationally sub-normal	14
Special School as Maladjusted	9
Ordinary School as Educationally sub- normal	46
Deferred	22

HANDICAPPED PUPILS ON REGISTER

Blind	3
Partially Sighted	13
Deaf	17
Partially Deaf	25
Partially Deaf and Delicate	1
Delicate	111
Diabetic	1
Educationally Sub-normal	246
Educationally Sub-normal and Deaf	1
Educationally Sub-normal and Partially Deaf	2
Educationally Sub-normal and Delicate	7
Educationally Sub-normal and Epileptic	1
Educationally Sub-normal and Maladjusted	10
Educationally Sub-normal and Physically Handicapped	3
Educationally Sub-normal and Speech Defect	1
Epileptic	5
Maladjusted	34
Maladjusted, Partially Sighted and Delicate	1
Maladjusted and Delicate	1
Physically Handicapped	37
Speech Defect	1
Total	521

Handicapped Pupils newly placed in Special Schools or Homes :

Physically Defective	65
Educationally Sub-normal	7
Maladjusted	9
Total	81

SCHOOL REMEDIAL EXERCISE CENTRES

Report of the Physical Training Organiser.—The remedial classes in the town have progressed satisfactorily this year. The problem of new schools has arisen and in one case a new remedial centre has been set up, and in another a remedial class is under consideration. It is interesting to note that in one new school in a new housing estate the parents asked for a remedial class for their children and a "Keep Fit Class" for themselves to remedy and prevent postural defects and stiffness.

Since climbing and hanging apparatus has been provided in so many of the infant, junior and secondary schools — and since bare foot physical education has been accepted by the boys' schools as well as the girls', the number of children suffering from physical defects has very noticeably decreased. Some difficulty has been experienced over stripping and particularly over the question of bare foot work and the possible incidence of plantar warts. The Medical Officer of Health was asked to arrange with Mr. Langston, Orthopaedic Surgeon, to address a meeting of head teachers of all schools. A demonstration of climbing and agility work was given, and Mr. Langston and the assistant medical officer gave most helpful talks which convinced the head teachers that the risk of plantar infection was small in school halls and that the benefits derived out-weighed the risk of plantar wart infection. Mr. Langston said that warm wet conditions such as the swimming baths were a much more likely source of infection. Many searching questions were asked by the head teachers which were dealt with convincingly by Mr. Langston. Undoubtedly, this meeting has done a great deal to encourage sensible stripping for physical education lessons.

The following table gives details of the work carried out during 1952 :—

Name of Centre	No. of children for whom accommodation is available	Individual children dealt with during 1952	Total attendances made by children during 1952
Aldermoor	30	22	858
Bassett Green	30	34	1688
Bitterne Park Junior	25	28	827
Bitterne Park Sec. Mod.	20	15	207
Deanery	25	18	454
*Foundry Lane	22	10	250
Girl's Grammar	30	21	710
Itchen Grammar	25	19	246
King Edward VI	25	28	426
Ludlow Road	25	22	729
Mount Pleasant	25	24	553
Portswood	25	31	968
Regents Park	25	51	1344
Shirley	30	27	1327
Shirley Warren	25	40	767
Sholing (Middle Road)	27	34	920
St. Anne's	25	14	124
‡Swaythling	25	14	213
Taunton's	25	60	591
Western	25	20	464
Woolston (Porchester Road) ..	25	41	815
TOTALS	539	573	14481

* Closed down 12th April, 1952

‡ Closed down 22nd March, 1952

INFECTIOUS DISEASES

The following notifications were received from the head teachers during the year :—

School	Scarlet Fever	Diph- theria	Measles	Chicken Pox	Whooping Cough	Mumps
Aldermoor	9	—	17	37	25	14
Ascupart	—	—	14	4	5	20
Bassett Green	4	—	62	21	2	—
Beechwood	—	—	12	2	2	—
Bevois Town	1	—	2	4	3	5
Bitterne C.E.	8	—	36	135	10	62
Bitterne Manor	1	—	1	9	—	—
Bitterne Park	9	—	108	31	9	104
Central	2	—	11	73	8	45
Deanery	—	—	4	—	—	2
Foundry Lane	2	—	13	78	6	29
Freemantle	7	—	2	57	5	14
Girls' Grammar	—	—	—	—	—	—
Heathfield	3	—	43	43	—	—
Highfield	—	—	—	—	—	—
Itchen Grammar	—	—	—	—	—	—
King Edward VI	2	—	2	2	—	1
Ludlow Road	18	—	339	44	22	56
Merry Oak	—	—	11	3	3	2
Mount Pleasant	—	—	8	8	8	23
Northam	1	—	5	52	15	18
Portswood	6	—	3	65	1	32
Regents Park	6	—	43	37	16	26
St. Anne's Grammar	—	—	—	—	—	—
St. Denys	3	—	6	8	4	44
St. John's	—	—	13	7	—	30
St. Joseph's	—	—	1	—	—	—
St. Jude's	1	—	17	32	—	—
St. Mark's	—	—	—	—	—	—
St. Mary's	1	—	17	10	—	1
St. Monica	3	—	54	107	5	4
Shirley	3	—	21	22	6	47
Shirley Warren	3	—	12	12	13	57
Sholing (Middle Road)	5	—	52	31	36	27
Springhill	1	—	6	41	15	3
Swaythling	2	—	9	3	2	44
Tanner's Brook	3	—	9	89	—	27
Taunton's	—	—	—	—	—	—
Western	4	—	49	35	23	7
Weston Park	—	—	191	53	28	11
Wimpson	2	—	—	1	4	1
Woolston	5	—	122	89	15	43
Woolston R.C.	—	—	36	15	1	—
TOTALS	115	—	1351	1260	292	808

Tuberculosis.—The following table shows the number of children notified under the Public Health (Tuberculosis) Regulations, 1952, giving the previous year's notifications in brackets.

Location of Disease	Boys	Girls	Total
Pulmonary Tuberculosis	22 (14)	9 (20)	31 (34)
Non-Pulmonary Tuberculosis	3 (8)	3 (4)	6 (12)
Totals	25 (22)	12 (24)	37 (46)

Children excluded from School.—The following are particulars of the defects for which children were excluded from school :—

Adenitis	1
Adenoid operation	54
Bronchitis	1
Chicken pox	1
Conjunctivitis	2
Debility	11
Dermatitis	2
Ear trouble	7
Glands	1
Impetigo	29
Measles	1
Miscellaneous	68
Mumps	2
Pediculosis Capitis	522
Rheumatism	3
Ringworm	25
Scabies	6
Tonsil and Adenoid operations	176
Tonsil operations	3
Tonsillitis	3
Whooping Cough	1
Other E.N.T. defects	23
Total	420

School Meals Service.—The total number of meals served during the year was 1,868,011 including those served at the four grammar schools, *viz.*, Taunton's, King Edward VI, Itchen and Girls' Grammar Schools. Of this number, 1,533,642 were supplied on payment and 334,369 were supplied free.

The average number of children to whom meals were supplied at all schools was 10,282, and these were drawn from the following :

Aldermoor Junior & Infants	283	Portswood Junior & Infants	66
Ascupart Junior	97	Regents Park Boys	131
Ascupart Infants	50	Regents Park Girls	137
Bassett Green (all Dpts.)	282	Regents Park Infants	53
Bevois Town	61	St. Denys Junior & Infants	125
Beechwood County Primary	145	St. Mary's C.E.	43
Bitterne C.E. Junior & Infants	334	St. Mark's C.E.	90
Bitterne Park Secondary Mod.	135	St. Monica County Primary	139
Bitterne Park Junior	199	St. Jude's C.E.	82
Bitterne Park Infants	163	St. John's Junior & Infants	86
Bitterne Manor	81	St. Joseph's R.C.	89
Central Secondary	161	Shirley Warren Boys	175
Central Junior	99	Shirley Warren Girls	169
Central Infants	48	Shirley Junior	236
Chestnut Road	208	Shirley Infants	89
Deanery	146	Sholing Secondary	205
Foundry Lane	325	Sholing (Middle Rd.) Junior	158
Freemantle	120	Sholing (Middle Rd.) Infants	103
Girls' Grammar School	413	Springhill R.C. Boys	119
Heathfield County Primary	227	Springhill R.C. Girls	170
Highfield C.E.	121	Springhill R.C. Infants.....	73
Itchen Grammar School	248	Swaythling Secondary Boys	85
Junior Technical	145	Swaythling Secondary Girls	110
King Edward VI	435	Swaythling Junior Mixed	102
Laundry Road	93	Tanner's Brook County Primary	159
Ludlow Road Boys	171	Taunton's School	464
Ludlow Road Girls	105	Western Secondary Modern	147
Ludlow Road Infants	60	Western Infants	52
Merry Oak	453	Weston Park County Primary	217
Mount Pleasant Secondary Mod.	111	Wimpson County Primary	160
Mount Pleasant Infants	37	Woolston Secondary Boys	118
Northam Junior & Infants	97	Woolston Secondary Girls	117
Portswood Secondary Modern	104	Woolston R.C.	169
		Woolston Infants	87

Cod Liver Oil and Malt.—During the year, 1,364 recommendations were made by assistant school medical officers for the supply of cod liver oil and malt and the same number of children were supplied free.

Milk.—During the year 4,543,344 third pints of milk were consumed by children in the schools, and was supplied free of charge.

Medical Inspection Returns

YEAR ENDED 31ST DECEMBER, 1952

TABLE 1

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools

A—PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed Groups :

Entrants	.....	.....	.....	3576
Second age group	.....	.....	.....	2755
Third age group	.....	.....	.....	2593

Total	.....	.....	.....	8924

Number of other Periodic Inspections

Grand Total

—

8924

B—OTHER INSPECTIONS

Number of Special Inspections	.....	.....	.....	10626
Number of Re-inspections	.....	.....	.....	17784

Total	.....	.....	.....	28410

C—PUPILS FOUND TO REQUIRE TREATMENT

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

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table 2a	Total Individual Pupils
(1)	(2)	(3)	(4)
Entrants	110	1148	1197
Second Age Group	263	660	842
Third Age Group	225	436	618
Total (prescribed groups)	598	2244	2657
Other Periodic Inspections	—	—	—
GRAND TOTAL	598	2244	2657

TABLE 2

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

De- fect Num- ber	Defect or Disease (1)	Periodic Inspections		Special Inspections	
		Number of defects		Number of Defects	
		Requiring treatment (2)	Requiring to be kept under ob- servation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under ob- servation but not requiring treatment (5)
4	Skin	210	138	828	16
5	Eyes—				
	a. Vision	598	955	807	860
	b. Squint	158	72	154	152
	c. Other.....	55	36	79	7
6	Ears—				
	a. Hearing	172	239	97	48
	b. Otitis Media.....	51	26	19	3
	c. Other.....	29	99	216	24
7	Nose or Throat	341	1036	387	118
8	Speech	29	111	3	52
9	Cervical Glands	89	565	73	17
10	Heart and Circulation	88	157	41	5
11	Lungs	270	418	168	6
12	Developmental—				
	a. Hernia	15	25	—	—
	b. Other.....	52	278	5	11
13	Orthopaedic—				
	a. Posture	283	425	272	10
	b. Flat Foot	272	704	339	11
	c. Other.....	427	742	530	37
14	Nervous System—				
	a. Epilepsy	7	7	1	1
	b. Other.....	38	102	32	2
15	Psychological—				
	a. Development)	73	273	141	18
	b. Stability)				
16	Other	266	150	1970	151

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

Age Groups	Number of Pupils In- spected	A (Good)		B (Fair)		C (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
(1) Entrants	(2) 3576	(3) 832	(4) 23.3	(5) 2634	(6) 73.6	(7) 110	(8) 3.1
Second Age Group	2755	635	23.0	2005	72.8	115	4.2
Third Age Group	2593	627	24.2	1910	73.6	56	2.2
Other Periodic Inspections	—	—	—	—	—	—	—
TOTAL	8924	2094	23.5	6549	73.4	281	3.1

TABLE 3

INFESTATION WITH VERMIN

Notes.—A statement as to the arrangements made for the examination and cleansing of infested pupils appears on page 10.

All cases of infestation, however slight, are recorded.

The return relates to individual pupils and not to instances of infestation.

(i) Total number of examinations in the schools by the school nurses or other authorised persons	80,788
(ii) Total number of individual pupils examined	27,430
(iii) Total number of individual pupils found to be infested	1,047
(iv) No. of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	522
(v) No. of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—

TABLE 4

TREATMENT TABLES

Notes

(a) Treatment provided by the Authority includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, *i.e.*, whether by periodic inspection, or otherwise, during the year in question or previously.

(b) Treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

GROUP 1—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table 3)

	Number of cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm— (i) Scalp	2	—
(ii) Body	34	1
Scabies	47	—
Impetigo	62	—
Other skin diseases	774	8
TOTAL	919	9

GROUP 2—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	107	4
Errors of refraction (including squint)	1303*	8
TOTAL	1410	12

Number of pupils for whom spectacles were

(a) Prescribed	1029*
(b) Obtained	1142*

GROUP 3—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear	13	7
(b) for adenoids and chronic tonsillitis	356	6
(c) for other nose and throat conditions	12	3
Received other forms of treatment	751	—
TOTAL	1132	16

* Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

GROUP 4—ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals	94	
	By the Authority	Otherwise
(b) Number treated otherwise, <i>e.g.</i> , in clinics or outpatient departments	1864	307

GROUP 5—CHILD GUIDANCE TREATMENT

	Number of cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of pupils treated at Child Guidance clinics	593*	—

*This figure includes 45 children seen at school.

GROUP 6—SPEECH THERAPY

	Number of cases treated	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapists	—	1

GROUP 7—OTHER TREATMENT GIVEN

	Number of cases treated	
	By the Authority	Otherwise
(a) Miscellaneous minor ailments	2062	13
(b) Other		
1. Rheumatism and Heart	86	2
2. Lungs	207	34
3. Nervous System	49	—
4. Developmental	9	1
5. Cervical Glands	103	2
TOTAL	2516	52

TABLE 5

DENTAL INSPECTION AND TREATMENT

(1) Number of Pupils inspected by the Authority's Dental Officers—		
(a) Periodic age groups	.....	3235
(b) Specials	.....	4026
		<hr/>
TOTAL (1)	.....	7261
		<hr/>
(2) Number found to require treatment	.....	5988
(3) Number referred for treatment	.....	5314
(4) Number actually treated	.....	4087
(5) Attendances made by pupils for treatment	.....	7250
(6) Half-days devoted to :		
Inspection	.....	30
Treatment	.....	1082
		<hr/>
TOTAL (6)	.....	1112
		<hr/>
(7) Fillings :		
Permanent Teeth	.....	3484
Temporary Teeth	.....	203
		<hr/>
TOTAL (7)	.....	3687
		<hr/>
(8) Number of teeth filled :		
Permanent Teeth	.....	2955
Temporary Teeth	.....	201
		<hr/>
TOTAL (8)	.....	3156
		<hr/>
(9) Extractions :		
Permanent Teeth	.....	1571
Temporary Teeth	.....	6739
		<hr/>
TOTAL (9)	.....	8310
		<hr/>
(10) Administration of general anaesthetics for extraction	.....	3373
(11) Other Operations :		
Permanent Teeth	.....	1265
Temporary Teeth	.....	231
		<hr/>
TOTAL (11)	.....	1496
		<hr/>