CORRESPONDENCE

of St. Mary's Hospital, Paddington, are to be found in the St. Mary's Hospital Gazette of June, 1955.-We are, etc.,

London S.W.3.

BERNARD S. SWEETMEN. REFERENCES

MORRIS CUTNER.

<sup>1</sup> Abramson, H. A., Ann. Allergy, 1948, 6, 511. <sup>2</sup> — N.Y. St. J. Med., 1949, 49, 1151.

# School Medical Examinations

SIR,-I really am most surprised at the general tone of Dr. R. G. Newton's letter (January 5, p. 57). School medical inspections were introduced at a time when many children in this country were living in very poor conditions. Malnutrition, rickets, the late results of infectious fevers, tuberculosis, postural defects, and verminous infestation were all of common occurrence. Among other aspects, it was clear that many children were not deriving full benefit from their education because of poor health.

It may be said that in our present affluent society, with a National Health Service and with greatly improved housing and nutrition, the need for the routine medical examination of schoolchildren no longer exists. Be that as it may, it would be foolish indeed to underestimate the great value of the School Health Service in the past.

Is the compulsory nature of the school medical inspection really so terrible as Dr. Newton seems to think ? To begin with, it is a well-known fact that very often it is just those children of uncooperative parents who may need help most of all. Having myself performed school medical inspections for a year, it is my experience that the vast majority of parents certainly do not regard them as an "intrusion of officialdom into the liberty of the individual," but are sensible enough to appreciate the interest that is being taken in their children's welfare. Ideally, perhaps, these examinations might be performed by the family doctor, but under the present system few would have the time.

In any organized society there has to be an element of compulsion for the good of the community as a whole. Would Dr. Newton like to see voluntary attendance at school, voluntary driving tests, voluntary pre-employment examinations in industry, and voluntary medical examination of air-crew ?-I am, etc.,

## Godalming, Surrey.

### A. E. P. TWORT.

SIR,—In writing thus vehemently of his objection to the compulsory medical examination of his small daughter (January 5, p. 57), does Dr. R. G. Newton, I wonder, lose sight completely of the large number of instances in which such a compulsory medical examination is widely accepted without demur? For example, in local government service, few object to such an examination when applying for jobs as teachers, police, clerks, librarians, or even doctors, and even fewer would expect to be able to take out life insurance without a similar compulsory medical examination by an independent M.O.-usually nominated in a way which is quite arbitrary.

In the circumstances, therefore, a parent who is prepared to avail himself of the facilities of a State school surely lays himself open to the charge of being over-sensitive if he objects later to compliance with the regulation regarding medical examination. There is, of course, always open to him the alternative of making other arrangements for his child's education.

Regarding Dr. Newton's further point concerning the age and experience of M.O.s employed by local authorities, I can only say that his experience differs greatly from my own. Under the authority for which I work at present, the age distribution is as follows: Aged 50-60, 4; 40-50, 2; circa 30, 1 (with D.C.H. and M.R.C.O.G.).

In my own case, gravitation into public health work followed 12 years in general practice, and this again came after three years at a busy children's hospital. Even now, as an employee of the local authority, my regular fortnightly attendance at specialist paediatric 'rounds" is a regular feature of my work.

In conclusion, may I perhaps mention that in this area a very high proportion of the local "private school " children avail themselves, quite voluntarily, of the school medical examination, and remind Dr. Newton that the existence of the "compulsory powers" is commonly made quite clear on the notice forms summoning children to examination ?-I am, etc.,

#### Swansea.

**GLADYS GREENHALGH-LOWE.** 

SIR,-May I express my wholehearted agreement with your correspondent Dr. R. G. Newton (January 5, p. 57) on the subject of school medical examinations? Until recently, when I threw it away in a fit of tidying up, I treasured a letter from a medical officer of health which, after providing me with the same information as Dr. Newton obtained, also threatened me with the full rigour of the law if I had the temerity to object further to my daughter's examination.

I think that the ultimate absurdity has been reached when medical examination is compulsory but when the individual is then still permitted the luxury of ignoring any findings or of refusing any treatment suggested. Surely either all or nothing should be compulsory and I am firmly of the opinion that it should be nothing.-I am, etc., G. D. MIDDLETON.

Fenham, Northumberland.

# **Infectious Diseases**

SIR,-The list of notifications of infectious diseases contained in the Registrar-General's Weekly Return for England and Wales reveals that for the week ended January 5, 1963, there were no cases of poliomyelitis, diphtheria, smallpox. and typhoid fever. If this is the unique occasion which I think it must be, then it should not be allowed to pass without notice. The Public Health Service has played a major part in the prevention of this group of severe infectious diseases which have been responsible for so many extensive and lethal epidemics in the past. Continued vigilance is, of course, still essential, but the fact that a week has passed with no notified case of poliomyelitis, diphtheria, smallpox, and typhoid fever is indeed a landmark and a great tribute to preventive medicine.-I am, etc.,

Oxford

J. F. WARIN.

## **Operating Theatre Staff**

SIR,-In Devon (and I understand that the situation is not peculiar to Devon) not only is the present theatre work run on a shoestring, but whenever the question of increasing surgical facilities comes up for discussion it has to be abandoned when the brick wall of the shortage of trained theatre staff is met. There appear to be three reasons for this shortage: that theatre work is not