The Dental Clinic in Relation to the Prevention of Physical Defects.

By F. CONSTANT, L.D.S.

TO those who are most closely in touch with the working of the Dental Clinic, and are aware of its actual and potential value, the careless and matter-of-fact attitude towards it which is taken by the general public would occasion surprise, were they not uncomfortably aware that it is an attitude adopted also by many members of the medical profession itself. And yet it is just as certain as that day follows night, that one of the most potent factors in the great problem of the best means to improve the health of the people will be the Dental Clinic. Here is the means for watching and guarding the first outpost of the health of the individual, not only from birth onwards, but even in the ante-natal state. By this means, it is no exaggeration to say, one can not only feel the pulse of the nation, but to a large extent influence and control it. Many of the ailments of the bulk of humanity are directly due to bad teeth, many others are traceable to the same cause. Anæmia, ear and eye troubles, glandular enlargements possibly leading to tuberculosis, nervous diseases, joint affections, neurasthenia, intestinal complaints—truly an appalling list. Oral sepsis and its attendant ailments are the outcome of the deplorable condition of the mouths of the greater proportion of the lower classes of the country, mainly due, perhaps, to apathy and ignorance, but largely contributed to by the lack, until recent years, of any effectual effort on the part of the governing authorities to combat the evil. Fortunately we are now on the right track, but there is a lot of leeway to be made up. But we shall reach the point at which we aim by the aid of the Dental Clinic.

The Dental Clinic is associated or should be associated with a Maternity and Care Committee. This Committee concerns itself with the welfare of the expectant mother as regards dental treatment which will render her mouth healthy, and thus prevent any septic absorption which, it has been proved, so seriously prejudices the health of her offspring, and, after the birth of the child, with imparting information on the importance of breast-feeding and diet, and the warnings against the artificial teat and bottle-feeding. After the child is weaned, the question of diet becomes important—a matter of indeed far greater importance than is usually realised. It is here that the greatest help may be looked for from the Dental Clinic in the future, because it is by the statistics tabulated in the Clinic, and only by these statistics, that the health of the mouths of the children, and

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consequently the health of the children of the nation can be shewn. In this relation some remarkable figures are given. They present a problem which might possibly have the effect of changing or modifying the nature of our diet. They refer to the dental inspection of the children between the ages of 5 and 8 in the elementary schools in Folkestone, in the years 1918-21, inclusive.

1918,	881	examined,	33	sound	—	3·7	per cent.
1919,	572	„	69	„	—	12	„
1920,	799	„	178	„	—	22	„
1921,	962	„	243	„	—	25	„

It will be seen that in 1918 only 3 per cent. of the children examined had sound teeth. In 1919, 12 per cent., 1920, 22 per cent., and this year the figures just completed show no less than 25 per cent. There is no reason to doubt that this improvement is fairly general throughout the country. This gratifying result may be attributed, perhaps, partly to the first results of the services of the excellent Maternity and Care Committees, but there can be little doubt that the primary cause is the simpler diet necessitated by the exigencies of the war. For, remember, the teeth of the children inspected in 1918 were fully erupted on the average five years previously, i.e., in 1913—almost two years before the war. The teeth of the children inspected this year were fully erupted in 1916—nearly three years after the war commenced. In 1913 food was cheap and continued so until 1916. After the war started sugar, sweets, milk, etc., became dearer and presumably scarcer in every household. Bread, too, became coarser in 1916. Thus, it will be seen that the teeth of the children inspected in 1918 were erupted for three years before the prices of food increased, whilst those inspected this year were not erupted until nearly the highest point had been reached in the values of food.

The need for the attendance of children at the Clinic for inspection and treatment at the earliest possible age can be scarcely too strongly insisted on. At six years of age, many permanent molars are hopelessly carious. At five, many temporary molars are in the same condition, and the problem is presented of extraction and consequent deficient lack of masticatory apparatus combined with possible later permanent irregularities, or septic absorption with all its possible and probable grave results. Children of tender age are not as a rule good subjects for “instrument” treatment, but a few minutes’ advice to the mother may mean much benefit to the child. Children should be re-inspected every three months. Six months is too long, as in that period a tooth may become carious and break down into a cavity sufficiently large to be very painful to the patient to stop. With re-inspection and necessary treatment every three months until the

age of 14, there is no reason why nearly every child when it leaves school should not be dentally sound.

It will be seen that the influence on the child of the Clinic and its associated Maternity Committee extends from the ante-natal stage to the finish of its school career. The attention and advice given to the mother conduces to the child's arrival in the world in a healthy condition, and if the after care of the child be on the lines laid down for the mother's guidance, the jaws and air passages should develop normally, and at the age of five the child's teeth should be without caries. This desirable state of things can only be brought about by the intelligent care of the child by the parent, and every effort should be made to impress upon the mother's mind the enormous importance to her child of her strictly carrying out the advice given her. This advice would cover the point of proper diet. The question of the nature of an ideal diet from the dental point of view is outside the scope of this paper, but it may be said that the Dentist at a School Clinic cannot but notice that the children of the poorer families—those who have few luxuries, jam, sweets, soft foods, etc.—have the best teeth. The value of sound teeth in its bearing on the general health of the child cannot be too strongly insisted on.

Comparison by the School Medical Officer of the physical condition of the children whose mouths are in good condition, with that of the children suffering from bad teeth would reveal a difference in the former's favour. This is so at even the early ages, but when the comparison is between children of say ten or twelve, the difference is marked.

Enough has been said to indicate the serious responsibility which devolves on parents to see that their children not only attend regularly at the School Clinic, but that they are strict also in their observance of the rules laid down by the Dentist for their guidance in the care of their teeth. It is, however, a regrettable fact that this responsibility sits but lightly on the shoulders of many of the parents, and that the penalty of their sloth or ignorance is paid by the children in unnumbered hours of pain and ill-health.

It will be seen that the steps which have been taken during the last few years should secure to the child proper dental attention throughout its school age, and should turn it out into the working world equipped with a properly functioning masticatory apparatus. But what after that? It is to be feared, nay it is practically certain, that in a large number of cases the boy or girl will neglect his or her teeth. From the point of view of the working classes, private dentists' fees are large, and dental hospitals are few and far between. There is as yet no public dental or national

dental service in the country. And so the teeth of the careless ex-scholar get bad, and from bad to worse. The result is not difficult to imagine. The condition of the mouths of the majority of the working classes of this country is known to be very bad. The deplorable state of things revealed in the evidence before the Committee appointed by the Lord President of the Privy Council to inquire into the gravity of the evils connected with the practice of dentistry by unqualified persons, so impressed one of our legislators that, after making full inquiry, he determined to take steps to set up an institution in the district which he represented, which would enable the poorest of his adult constituents to obtain, at a nominal cost, similar dental treatment to that at the command of those in better financial circumstances. This, of course, refers to Sir Philip Sassoon, by whose public-spirited generosity Folkestone possesses a Dental Clinic at present unique, and which it is to be hoped will, in the future, lead to far reaching results as the forerunner of a National Dental Service. The scheme elaborated by Sir Philip Sassoon, co-ordinates an adult clinic with the school clinic, and secures to the ex-scholar a continuity of dental treatment from the hands of the School Dentist. The Sir Philip Sassoon Dental Clinic for Adults consists of a fully equipped surgery and mechanical laboratory, and occupies the rooms used by the School Dental Clinic. The whole cost of the installation and upkeep has been borne by Sir Philip Sassoon. Started eight months ago the clinic has proved entirely successful. Thanks to the Folkestone Education Committee it is worked in conjunction with the School Clinic, and the Dentist and the rooms are known to the scholars, ex-scholars, and parents alike, and it is to this fact that the major portion of the success is undoubtedly due. To the ex-scholar the clinic should be especially attractive. Possessed of good teeth when leaving school he will be able to present himself at the clinic from time to time to have his mouth inspected, and this at no cost to himself, and should his teeth require treatment, he will be able to secure this at a nominal charge. It may be mentioned here, that competition with the private dental practitioner is not set up, as every care is taken that the financial position of the patients is such as to preclude them from paying the fees ordinarily charged by the profession. The small charges for the work done at the Clinic are made primarily to eliminate any suggestion of charitable aid, as it is expected that should the numbers at present attending be maintained or augmented, the Clinic will be self-supporting. The terrible state of the majority of the mouths seen at the adult clinic prove the urgent necessity for the initiation at once of a scheme for a National Dental Service. In the future a school Dental Clinic will be incomplete unless an adult clinic

is co-ordinated with it. The adult clinic will be self-supporting. Without an adult clinic, viewed from the point of view of the dental soundness of the adult four or five years after leaving school, the expenditure on School Clinics is largely wasted. The matter is of great importance to the country at large, and should any School Medical Officers or members of the Congress desire the details of the working of the scheme they will be given with great pleasure.

It has been estimated that there are over 20 millions of adults in this country who cannot afford the ordinary fees of a dentist. If this be so I am sure that over 19 millions of the adults of this country are being poisoned in a greater or lesser degree by pus-laden mouths. This awful state of things, being preventible, should not be. It is curable, and, with an adult clinic, preventible.

The Opportunities afforded by the Day Continuation Schools for the Extension of the Teaching of Hygiene, Child Welfare and the Laws of Health to our Young Workers.

By Miss L. WINIFRED ELLIS SCARLETT (Associate).

MANY persons interested in the education of the children of the working classes have deplored the fact that formal education has usually ceased just at the age when it became specially valuable and fruitful, namely at the dawn of the adolescent period.

This was felt to be specially unfortunate in the case of instruction in matters of Health and Hygiene. The children left school just at the age when they became really interested in the subject, and when sound instruction in matters of health became specially necessary.

We have now in the Day Continuation School scheme a most valuable opportunity of extending the education of our young workers and of giving them sound teaching in matters of health and hygiene at an age when they are able to benefit by it.

Science forms part of the Day Continuation School curriculum, and in the Camberwell Day Continuation School, the Principal has decided that a part of the science course shall deal with the science of health, and lessons are given daily in elementary physiology, personal and communal hygiene, and the laws of health.

The great value of such teaching, and the special need for it, will at once be apparent when we consider the fact that all the students in these schools are already, or will be, workers. Health is the worker's greatest