

received during the twelve months 1st April, 1935, to 31st March, 1936. An examination of the waiting list shows that—

Twenty-four children have had their names on the list over three years; 1,346 children have had their names on the list over two years; 1,231 children have had their names on the list over one year; and 925 children have had their names on the list under one year: Total number of names on waiting list at 31st March, 1936, 3,526.

Various steps have been taken to hasten the time when it will be possible to commence the treatment of children whose names are on the waiting list. It is obvious, however, that it is only by the maintenance of a greatly increased staff of dental nurses that the requirements of Wellington City can be met.

METHODS AND RESULTS.

As long ago as 1918, Sir George Newman, until recently Chief Medical Officer of the Ministry of Health in Great Britain, said in the course of his annual report:—

“The dental problem remains, after ten years of the School Medical Service, one of the most important, urgent, and difficult. All over the country there is prevalent, as I have pointed out for some years, a high degree of dental defect, deleterious in itself and far-reaching in its injurious effects on the health of the children, adolescents, and adults. The problem stands in the front rank of the questions of preventive medicine with which the country is faced.”

Since then, Sir George Newman has on more than one occasion set out what he considered the fundamental principles that should be observed in the organization of a satisfactory school dental service. It is of interest to note that, approaching the subject independently from an entirely different angle, a number of the principles formulated in this country are on the same lines as those laid down by Sir George Newman. Not only were these principles adopted here as something to aspire to, but they have definitely been incorporated in the organization of the New Zealand School Dental Service. Among those enunciated by Sir George Newman and applied in the New Zealand Service are—

- (1) The aim of the School Dental Service should be to secure that as many children as possible shall leave school without the loss of permanent teeth, free from dental disease, and trained in the care of the teeth.
- (2) Regular re-inspection (with treatment if necessary) of every child brought into the scheme.
- (3) Until sufficient staff is available to deal with the pupils of all schools, the scheme must temporarily be restricted to certain districts in order to carry out the principle enunciated in (1).
- (4) If much time is devoted to the treatment of children other than those who attend in connection with systematic dental inspection, routine work is disorganized, and efficiency is impaired.

(NOTE.—To this might be added that the giving of casual treatment indiscriminately tends to remove the incentive for parents to accept regular—and therefore preventive—treatment for their children).

- (5) A dental scheme should include some provision for educating children in the need for care of the teeth.
- (6) The treatment should be conservative in character, and accordingly the bulk of the treatment should be by filling rather than by extraction.

These principles are being applied in New Zealand, and their soundness can best be demonstrated by the results obtained. In previous reports, the ratio of fillings to extractions has been commented on, and the table is repeated here, with the addition of the figure for the year under review. It is also shown in graph form. It is gratifying to find that there is a still further reduction in the number of extractions compared with fillings. This can be interpreted broadly as the ratio of unsaveable to saveable teeth, and a record of only 16.1 teeth extracted for every 100 fillings performed is evidence that the application of the principles enumerated above is attended with good results. A comparison with statistics from other countries shows the New Zealand figures in a very favourable light. The following table shows the steady reduction that has taken place in this ratio since the service was first established.

	Fillings.	Extractions.	Ratio: Extractions per Hundred Fillings.
1921-22	13,047	14,939	114.5
1922-23	24,603	25,436	103.3
1923-24	47,610	37,978	79.7
1924-25	59,322	43,181	72.6
1925-26	61,506	41,339	67.2
1926-27	84,723	53,232	62.8
1927-28	116,916	66,523	56.8
1928-29	146,354	76,555	52.3
1929-30	190,934	71,128	37.2
1930-31	258,546	75,973	25.5
1931-32	334,827	80,389	24.0
1932-33	382,289	74,633	19.5
1933-34	397,437	69,208	17.4
1934-35	399,560	70,207	17.5
1935-36	450,757	72,782	16.1