Plans for Expanding the School Dental Service.

The first step in the expansion of the School Dental Service was the appointment in 1936 of an increased number of student dental nurses. The number appointed was fifty, which was the maximum for the accommodation that was then available. By 1937, the accommodation of the training-school had been increased by the provision of the annexe in Tinakori Road, and seventy-five trainees were appointed. These entered the training-school in two drafts at six-monthly intervals. For 1938, seventy-six appointments have been made. Of these appointees, forty will commence training in April, 1938, and the remainder in October.

As the minimum training-period is two years, a number of the 1936 draft will be available for new clinics in the field during 1938. At the date of this report (31st March, 1938) arrangements are well in hand for establishing school dental clinics at twenty-two new centres, and for strengthening the staff at fourteen of the existing centres in order to enable local extension to be carried out.

The centres to which the appointment of school dental nurses has been authorized are:—

(i) New centres—

Beresford Street, Auckland.
Cornwall Park, Auckland.
Kawa Kawa.
Putaruru.
Rawene.
Takapuna.
Te Karaka.
Tuakau.
Tahuna.
Whakatane.
Ohura.
Okato.
Opunake.
Taupo.
Kawhia.
Whangamomona.
Mornington, Dunedin.
Phillipstown, Christchurch.
Cheviot.
Darfield.
Tolaga Bay
Meadowbank, Auckland.

(ii) Existing centres to be reinforced—

Whangarei.
Warkworth-Wellsford.
Ellerslie.
Tauranga - Te Puke.
Thames.
Pukekohe.
Whangarei Country.
Rotorua.
Linwood.
Beckenham.
Westland.
Nelson.
Dannevirke.
Napier.

Variations in the Incidence of Dental Caries.

Clinically it has long been observed that the incidence of dental caries in school-children varies in different districts. With the object of obtaining definite data on this point the Department carried out a survey which involved the detailed dental examination and charting of 2,268 children of school-entrance age—viz., five to six years. The children being of uniform age, the opportunity presented of comparing not only the proportion of carious teeth in different districts, but also what was considered to be an equally important factor, the degree of caries present. All carious teeth were therefore charted according to the accepted classification as first, second, third, or fourth degree. A formula was evolved for calculating the caries index, and the result is shown in the accompanying graph. Although the survey covers 2,268 children, the number examined in each district cannot be considered sufficient to give an accurate index of the position, and the results require to be checked by the examination of further children in the same age-group. However, the results as shown are interesting in that they confirm the variation between districts, which has so often been observed clinically, and, moreover, they may well be of value as a basis for further investigation.

Dental Treatment of North Auckland Maoris.

In August and September, 1937, a party of eight senior students from the Otago School of Dentistry, under Mr. O. E. L. Rout, B.D.S., a member of the staff, went to North Auckland, under arrangements made by the Department, to carry out emergency dental treatment for the Native population. The local arrangements were in the hands of the Medical Officer of Health for North Auckland, Dr. Duncan Cook. The district was divided into areas, to which the members of the party were allotted. Each member had the assistance of a district health nurse who was familiar with the district and who enjoyed the confidence of the Native people. The expedition was successful beyond expectation. As the treatment was necessarily of an emergency nature, it was practically limited to extractions, and these were done under local anæsthesia. During the ten days that were devoted to this work 2,881 patients received attention, and the number of teeth extracted was 16,270. Reporting on the work of the party, Mr. Rout said that only those teeth urgently requiring to be removed were extracted, and those showing only early signs of caries or gum disease were left, if they were likely to be serviceable for some time. Mr. Rout added that, in addition to extractions, a good number of scalings were done, both pre-operative and prophylactic, and a considerable number of Maoris were examined who did not require any treatment.