

“During this year 2,271 new patients commenced treatment, thus completely eliminating those names standing at 31st March, 1938. Of the 229 now waiting none have been listed for more than six weeks.

“Contrary to expectations (and in spite of a great increase in the number of operators over that of former years) it has been found necessary to maintain a small list of patients waiting for treatment. Applications are becoming steadily greater in volume as the increased facilities for treatment are more widely known. The rate of absorption, however, varies with the various stages of training of the student dental nurse, and thus a waiting list becomes essential to ration the supply to the varying demand.

“As mentioned in the last annual report, it is of interest to know that in addition to the ‘official’ waiting list there is an unofficial waiting list containing the names of children under the age of two years and a half. When these children reach two years and a half it is the custom to place their names on the ‘official’ list, and call them up for examination at the earliest possible date.

“At the 31st March, 1938, there were 350 on this list. In spite of calling up over 200 during the last twelve months, the list has increased to 469.

“In conclusion, I would like to express my appreciation of the efficient way in which Mr. Brice, the Acting-Principal, organized the work of the institution during the period of change and rapid growth.

“I would also like to extend my thanks to the members of the staff, who by their loyal co-operation have maintained the smooth running and efficiency of the training-school and dental clinic, to the Principal and officers of the Teachers’ Training College, and the Director and officers of other Divisions of this Department who have assisted in various ways in the course of training, and finally, to those members of the dental profession who continue to co-operate and assist with the work of the Wellington Dental Clinic.”

DENTAL HEALTH EDUCATION.

Treatment alone, if unaccompanied by preventive teaching, will not bring about that improvement in the standard of dental health which is the aim of a School Dental Service. Operative treatment shows immediate results, and of necessity it figures prominently in school dental activities. Preventive teaching, on the other hand, shows little in the way of tangible results, and to carry it out with any degree of success calls not only for knowledge, but also for imagination, sustained enthusiasm, and the gift of arousing and holding the interest of listeners.

School dental nurses are encouraged to foster and develop these attributes. Their training includes not only instruction in the principles of prevention of dental disease, but also a short course at the Teachers’ Training College in methods of teaching. This is followed by the giving of prepared talks before primary-school classes and before their fellow-students for criticism by instructors. In addition, they are required to draw up dental health education programmes and to submit original work in posters and other educational material.

As a result, a considerable proportion of the dental nurses show commendable enthusiasm in regard to this matter. This is evidenced by the fact that during the year under review educational activities carried out by dental nurses numbered 1,403, exclusive of chair-side instruction, which is carried out as a routine procedure in conjunction with treatment. I look forward to the time when dental health education will be carried out on an organized basis, just as treatment is now.

One of the chief obstacles to early success in health education is that, however enthusiastic children may become in regard to carrying out the precepts that they are taught, it is the parents who ultimately control the situation, in that it is they who provide the food for the family and pay for dental and other attention. Not until parents as a whole become imbued with the principles governing the prevention of dental and other diseases will satisfactory results be apparent.

Those who would carry out health education must be possessed of vision, patience, and persistence.

SENIOR DENTAL NURSES.

Reference was made in the last annual report to the fact that the instructional staff of the Wellington Dental Clinic had been augmented by the appointment of several selected dental nurses as dental nurse instructors. During the past year the system of utilizing the services of experienced dental nurses in a senior capacity has been extended to the districts, and four dental nurses have been appointed as Senior Dental Nurses to assist the officers in charge of the dental districts. The system is operating satisfactorily, both in the training-school and in the districts.

RESEARCH.

The Medical Research Council, through its Dental Committee, to which reference was made in the last annual report, has commenced a survey with a view to ascertaining the factors that are associated with dental caries in the Dominion. For this purpose the services of Mr. A. D. Brice, B.D.S., of this Department, have been made available to the Medical Research Council for a period of one year.