

The ratios of deaths to registered live cases at 31st December, 1947 and 1946, are as follows:—

			1947.	1946.
Non-Maori	..	..	1-14	1-12
Maori	..	..	1-7	1-6.5
Combined races	..	..	1-11.2	1-10

In spite of the improved position as disclosed by these figures, it is probable that intensified case-finding by mass radiography and tuberculin testing of presumably healthy groups of the population will bring to light more cases, particularly in the Maori race.

Further particulars are as follows:—

1. THE DISPOSITION OF REGISTERED CASES (MALES, 5,238; FEMALES, 4,583), ALL FORMS, BOTH RACES, BY YEARS, AT 31ST DECEMBER

Year.	Supervised in Institutions.			Supervised Outside Institutions.				Total under Supervision.
	In Hospital.	In Sanatoria.	Total.	In Home.	Huts.	Boarding-house and Nomadic.	Total.	
1944 ..	1,114	661	1,775	5,308	182	466	5,956	7,731
1945 ..	1,116	706	1,822	6,535	181	539	7,255	9,077
1946 ..	1,055	688	1,743	7,067	207	600	7,874	9,617
1947 ..	1,072	648	1,720	7,403	163	535	8,101	9,821

It is to be noted that, since 1945, cases in institutions are relatively less for each successive year and those outside institutions have increased. Cases in hospitals are reduced as the result of closing down of beds due to shortage of nursing staff.

Hutted patients (Maoris) show a decrease, and this is probably due to better Maori housing being provided.

It is gratifying to note that the boardinghouse and nomadic group is not rising unduly.

2. CLASSIFICATION OF REGISTERED CASES, ALL FORMS, BOTH RACES, BY YEARS, AT 31ST DECEMBER

Year.	Classified.						Classification Unknown.
	Active.			Inactive.			
	Deteriorating and Stationary (a).	Improving (b).	Totals, (a) and (b).	Quiescent and Arrested (c).	Apparently Cured (d).	Totals, (c) and (d).	
1944 ..	1,445	1,321	2,766	2,374	381	2,755	2,201
1945 ..	1,068	1,253	2,321	3,654	488	4,142	2,614
1946 ..	1,293	2,011	3,304	4,610	645	5,255	1,058
1947 ..	1,296	1,965	3,261	4,762	705	5,467	1,093

The 1944 to 1947 figures show no marked reduction in the cases classified as "active," but there is an increase in those classified as "inactive," suggesting that intensified supervision and treatment is producing an over-all favourable effect. A greater proportion of the known cases are being rendered less dangerous or infectious, a fact which should contribute towards a fall in incidence and mortality in the future.

The known "active" infectious or potentially infectious cases, however, amount to 35 per cent. of all registered cases. Over one-half of these are being supervised with difficulty outside institutions.

It is to be noted that there are still a number of registered cases whose classification has yet to be determined. Efforts are being made to reduce this figure to the absolute minimum.