Beyond the construction of the sanatorium at Cambridge, little has been done in the way of combatting this disease. In a few instances which came more especially to our notice we disinfected the rooms where a patient had lived.

PLAGUE.

During the year 1st April, 1902, to 3rd March, 1903, three cases of plague have occurred—one in Grey Lynn in April, one in the city in May, and another in the city in July. The first two were fully reported on in last year's annual report. The case in July was investigated by Dr. Frengley during my absence. The patient seems to have had no direct connection with the New South Wales shipping, but was about the wharves. The disease was of the pneumonic type, and proved fatal, the body being cremated. In this, as in the other cases, the house was very thoroughly fumigated, and the contacts kept under observation for some time.

These cases might be classed as sporadic, as I do not think there was any widespread infection. No mortality among rats was noticed, and in all probability the disease was contracted in each case by coming in contact with very limited foci of infection. Rats were bacteriologically examined from time to time, with negative results. In one instance, in October, a boarding-house-keeper, feeling alarmed by finding a number of dead rats on his premises, informed me of the fact. Careful examination revealed nothing of a suspicious nature, and there was a probability of chemical poison having been the cause of the mortality. Any suspicious cases have been investigated carefully, and, where possible, bacteriological examination made of affected parts. Twelve cases were thus dealt with.

In six cases of sudden death *post-mortems* were made, and the spleen, &c., removed, and bacteriological culture made, with negative results. One case of adenitis proved on examination of the blood to be typhoid, confirmed on *post-mortem* examination. In three cases of bubo, pus was removed for examination, and in two cases of adenitis portions of the gland affected were excised for the same purpose. One case of enlarged glands at Dargaville was isolated and kept under observation by Dr. Purchas, Port Health Officer, till the true cause of the illness became apparent. One case at Rawiti of glandular enlargement in a Maori I visited and found to be of a simple nature.

BLOOD-POISONING.

This is an unsatisfactory return, as medical men are at a loss to know how wide an interpretation to put on the term. Fifty-four cases have been notified, which includes one case of tetanus and three of anthrax. These three cases occurred on a farm in the Waikato in June, and were investigated and reported on by Drs. Frengley and Douglas. A bullock which died suddenly was cut up by these men. Two contracted the disease in their arms, and one, who ate a portion of the meat, developed it in the mouth and eyes. This case proved fatal.

It is a remarkable thing that animals dying of any disease should be considered fit for human consumption; and it is to be hoped that these cases will prove a warning to farmers to exercise the greatest precautions as regards deaths among their stock. The need for sterilisation of imported bones is a matter to which already sufficient attention has been drawn.

INFLUENZA

has been removed from the list of notifiable diseases. One hundred and eighteen cases were notified before this.

DIARRHŒA.

In last year's report I mentioned the outbreak of dysentery in Auckland and suburbs, which occurred in April.

About the middle of September an epidemic of gastro-enteritis broke out, beginning in Auckland and spreading over the country districts during October and November. The illness was so widespread and of so serious a nature that I made some effort toward ascertaining its ætiology, sending out a circular to medical men asking for an opinion on the question. A form was also sent on which it was intended the foodstuffs partaken of by some of the cases might be set down, to ascertain, if possible, if this might be the source of infection. A few replies were received, sufficient to show that the disease had a fairly definite course, beginning suddenly and lasting about six days, accompanied by vomiting, cramp, and severe prostration. Children were not affected more than adults. There seemed to be evidence that it was of an infective nature—thus, when once introduced into a household one member of the family after another would be effected, till sometimes every one had been ill. They were not often seized simultaneously, which argued against any particular foodstuff being the cause of the trouble. This was also shown by the dissimilarity of the food-lists which were filled in, and by the wide distribution of the illness. The only possible foodstuff would have been something very widely used, such as flour. Knowing that a shipment of an adulterated compound was being sold as "cream-of-tartar substitute" at that time, I had analysed several baking-powders which had been used by the sufferers, but without any evidence of adulteration being revealed. I am inclined to indorse the opinion expressed by many medical men that the infective agent was of the influenza type, though whether air-born or distributed by soil or water I am unable to say. The city water-supply was regarded by some as the probable source of the disease in the early stages of the epidemic. I made a bacteriological examination, but found no evidence of serious pollution, and the spread of the disease beyond the area of this supply confirmed my results.

In January, February, and March, 1903, an unusual number of cases of diarrhœa occurred in Tauranga and Rotorua, the illness being severe and of a dysenteric type. I do not think this is the same as the gastro-enteritis referred to above. The sufferers were chiefly children, and a number of deaths occurred in both places. Probably this is more of the nature of the summer diarrhœa, commonly found in places where there is pollution of the soil by sewage, as this condition obtains