(m., 62; f., 55), representing patients who had been in one or other of the mental hospitals. To the first admissions 13 immigrants, who became insane within a year of landing here, contributed. Of this number, 2 were foreigners (both males); 7 men came from the United Kingdom, 2 of whom had had previous attacks of insanity; and 3 men, 2 of whom had had previous attacks of insanity, and 1 woman, came from the Commonwealth. In addition, 2 New-Zealanders, both of whom had had previous attacks of insanity, were admitted shortly after their return from residence abroad.

Ratio of Admissions to Population.

Excluding the Native race (12 male and 4 female patients) and all transfers, the proportion of admissions (whether first or not) and first admissions to the estimated general population at the end of the year stands respectively at 7:30 and 5:96 per 10,000; or, in other words, every 1,369 persons in the general population contributed an admission and every 1,678 a first admission.

Hereunder are tabulated the returns since 1901:-

			Ratio to 10,000 of Population of		Number of Persons in Population contributing	
	Year.		Admissions.	First Admissions.	One Admission.	One First Admission.
1901 1902 1903	•••		6·83 6·48 6·78	5·61 5·07 5·60	1,464 1,542 1,473	1,774 1,971 1,783
1904 1905	•••		6·55 6·76	$\begin{array}{c} 5.42 \\ 5.59 \end{array}$	1,526 1,478	1,844 1,786
Quinquennial average			6.68	5.47	1,496	1,828
1906 1907 1908 1909 1910			7·16 6·39 7·63 7·15 7·70	5·82 5·04 6·24 5·76 6·23	1,396 1,567 1,311 1,398 1,299	1,718 1,982 1,604 1,737 1,604
Quinquennial average			7.22	5.83	1,384	1,714
Decennial average			6.97	5.66	1,434	1,765
1911	•••		7.30	5.96	1,369	1,678

As a measure of the increase of mental disease in relation to the increase in the population, this table provides a surer guide than the figures detailing the proportion of total insane to the total population. The first division in each section deals with insanity officially known as occurring during the year; the second separates from the first patients whose mental disorder, as far as the official register is concerned, was manifested for the first time. As one attack of insanity predisposes to another, the return of many patients after a period of freedom is not surprising. During the last thirty-six years 11,043 cases have been discharged, and 4,001 have been readmitted; thus death alone may be said to settle all doubts. The value, therefore, of the second columns, in which relapsed cases are eliminated, becomes apparent. Despite irregularities in individual years (e.g., 1911 being more favourable than 1910), the general tendency, as demonstrated by the proportions at the quinquennia, indicates an increase of occurring insanity slightly in excess of the increase in the population. At this point Table III in the appendix should be consulted. It gives the ages of admissions and demonstrates that insanity is an adult disease, for the number of cases below the adolescent age is negligible if compared with the juvenile population.

Every person born in New Zealand passes through a period of immunity, during which, as one of the general population, he contributes his part in increasing the ratio of sane to insane. Every shipload of immigrants landed here is mainly composed of adults whose youthhood diluted the statistical ratios of some other country. With the natural growth of our population there is also this enlargement by accretion; and this being so, it becomes evident that one cannot, upon a fractional increase in the ratio of insanity, build theories of impending degeneracy, nor can one compare our figures with those of other countries.

Discharges and Deaths.

Omitting transfers, where discharge from one institution is coincident with admission into another, the number of cases discharged from the mental hospitals was 376 (m., 190; f., 186), and the deaths numbered 303 (m., 198; f., 105). The total number under care during the year, deducting transfers, was 4,435 (m., 2,608; f., 1,827). Calculated on the same basis the figures for the previous year were 383, 283, and 4,336 respectively. Had last year's relation of discharges and deaths to the total number under care been maintained in 1911, there would have been nearly 16 additional discharges and 14 fewer deaths.

Of the patients discharged, 331 (m., 163; f., 168) were classed as recovered. In 1910 the number discharged as recovered was 327 (m., 182; f., 145). The percentage of recoveries calculated upon the