

*Return of Infectious Diseases among Soldiers attached to the Camps of the Expeditionary Forces in New Zealand for the Year 1917, with comparative Figures for 1916.*

Disease.	Featherston.		Trentham.		Awapuni.		Narrow Neck.		Totals.	
	1917.	1916.	1917.	1916.	1917.	1916.	1917.	1916.	1917.	1916.
Cerebro-spinal meningitis	10	24	3	35	..	..	..	..	13	59
Measles .. ..	28	1,521	26	836	..	21	..	16	54	2,394
Diphtheria .. ..	11	4	8	3	2	..	..	..	21	7
Enteric fever ..	1	..	1	3	..	..	1	2	3	5
Scarlet fever ..	2	4	2	5	..	..	..	7	4	16
Chicken-pox .. ..	2	..	3	7	..	..	..	..	5	7
Erysipelas .. ..	1	2	1	2	..	..	..	..	2	4
Simple pneumonia ..	7	..	4	12	2	..	1	8	14	20
Malignant (post-measles) pneumonia	..	19	..	31	..	..	..	..	..	50
Totals .. ..	62	1,574	48	934	4	21	2	33	116	2,562

*Infectious Diseases contracted in and out of Camps in 1917.*

	Featherston.	Trentham.	Awapuni.	Narrow Neck.
Contracted in camps .. ..	42	30	4	1
Contracted out of camps .. ..	20	18	..	1
Totals .. ..	62	48	4	2

It will be seen that, except in the case of diphtheria, all diseases show a satisfactory diminution. As regards diphtheria, the increase is not surprising when we consider that in the civil population a very widespread epidemic existed throughout the year, 5,458 cases having occurred, as compared to 2,376 in 1916. In 4 of the cases the disease was contracted and developed out of camp. At no time was there anything approaching an epidemic, and the infection in the majority of the cases was contracted by men while on leave. The comparative immunity of the camps was no doubt due to the careful examination and treatment of suspected throats. Many carriers were detected and treated, some showing great resistance to all methods of inhalation or swabbing.

The complete disappearance in all camps of the malignant type of pneumonia which in 1916 caused 35 deaths is very satisfactory. Of simple pneumonia only 1 case was fatal, the illness and death occurring out of camp—an alcoholic patient.

*Cerebro-spinal Meningococcal Infections.*

*Incidence.*—Thirteen cases of meningococcal infection occurred in 1917, as against 109 (of both types) in 1916. The attached table shows the seasonal distribution in the two camps and the incidence of associated diseases :—

Month.	Featherston.			Trentham.		
	Cerebro-spinal Meningitis.	Influenza.	Measles.	Cerebro-spinal Meningitis.	Influenza.	Measles.
January .. ..	..	30	16	1	6	12
February .. ..	..	19	14	..	8	4
March .. ..	..	29	4	..	2	2
April .. ..	1	28	..	..	12	..
May .. ..	..	31	1	..	23	..
June .. ..	1	19	3	..	19	1
July .. ..	2	28	..	..	10	1
August .. ..	..	43	..	..	6	..
September .. ..	3	233	..	..	54	..
October .. ..	3	72	..	1	77	..
November .. ..	..	57	..	..	21	4
December .. ..	..	27	..	1	7	2

It will be seen that this year Featherston suffered much more than Trentham, due doubtless to the fact that the troops underwent the first part of their training at the former camp, and, as in previous years, the majority of the cases arose during the first six weeks of training. Of the 3 cases at Trentham, one shown as occurring in January properly belongs to the epidemic in the previous year, since the patient had left Trentham for Christmas leave and developed the