

Treatment.—Apart from general routine treatment for plain influenza, in which sod. sal. was of great value, that of pneumonic influenza was largely symptomatic. Apart from nursing no special drug or line of treatment seemed to be outstanding. Alcohol (*e.g.*, whisky, brandy, or rum) in my opinion proved of great value in the epidemic, and I am convinced that many lives were saved and illnesses averted by its use during the epidemic in camp. The constant and fairly heavy drinker was not markedly benefited by its use when ill. It was noted that the heavily built, deep-chested type stood pneumonic infection badly, and that the leaner type was the reverse. Returned men stood lung complications badly, and appeared to have no resistive power.

Age seemed to have a marked influence on incidence, the youthful and those over fifty being comparatively immune, as the age-incidence seemed to lie between twenty-five and forty.

In the pneumonic type nursing loomed very largely. Out of a total of 314 men placed on the serious list from direct pneumonic complications, the fact that 50 per cent. recovered bears eloquent testimony to the devoted and excellent nursing under very trying conditions. One must remember that many were admitted to hospital from outside camp in a moribund condition.

Complications were relatively few. (*a.*) Empyemata: Two, one since tubercular, the other recovering. (*b.*) Pulmonary phthisis: One, followed pneumonic type. (*c.*) Cardiac sequelæ: Relatively not a marked feature, though one sudden death occurred during convalescence. (*d.*) Mental aberrations: Not marked, but one case. (*e.*) Simple pleurisies: Not uncommon. (*f.*) Pulmonary abscess: Not noted. (*g.*) Venous thrombosis: Two, both left femoral, and both did well. (*h.*) Cerebro-spinal meningitis: This is dealt with in a separate memo, amplified by a special report by Captain Crawshaw, N.Z.M.C., F.M.C.

Bacteriological Investigations.—Unfortunately, owing to the Camp Bacteriologist having gone down early in the epidemic, practically no work on these lines was possible. Latterly a small supply of mixed streptococci and staphylococci vaccine was obtained from Christchurch; but, owing to the fact that few patients remained, no reliable data could be formed as to its value, although it apparently assisted some.

Preventive Measures., on general lines, were early adopted. Inhalation chambers (of value), systematic gargling, avoidance of crowding, and cancellation of leave were amongst these.

Place must be found here for reference to the splendid way in which combatant units responded to our call for aid, and to the assistance given us so freely by Headquarters. It was a revelation of human self-sacrifice.

The deaths of Sister Wishaw, Captains Christie, Wheeler, and others of our corps is to be greatly deplored, sadly illustrating how unsparing of itself and its efforts had been the N.Z. Medical Corps, Featherston, in combating the scourge which had so suddenly descended upon us.

Return of Admittances, &c., Featherston Military Hospital, as from 11th November, 1918, to 30th November, 1918.

Date.	Admitted.	Serious Cases.	Daily remaining.	Date.	Admitted.	Serious Cases.	Daily remaining.
Nov. 11	266	122	2,462	Nov. 21	73	73	731
12	137	129	2,269	22	5	60	593
13	83	145	2,247	23	3	46	564
14	87	143	1,849	24	5	40	518
15	92	141	1,717	25	6	29	407
16	37	145	1,533	26	1	20	360
17	32	128	1,343	27	6	21	328
18	29	91	1,246	28	3	20	295
19	18	97	1,010	29	18	18	280
20	10	84	813	30	1	14	215

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REPORT OF PRINCIPAL MEDICAL OFFICER ON PREVAILING DISEASES AT TRENTHAM MILITARY CAMP, 1918.

REPORT ON MEDICAL TRANSACTIONS, 1918.

During the year 1918, 10,392 T.A.B. inoculations were carried out. Throat swabs examined, 15,946; special laboratory examination of urine, 40; sputum examinations, 181; special bacterial cultures, 447; pus specimens examined, 289.

Spray Treatment.—As usual, "suspects" after throat-swabbings were sent to isolation camp until their swabbings were negative. Spray treatment on the whole was very effective in cleaning up post-nasal infections. All contacts of infectious cases—*e.g.*, measles—where the infection was suspected to be spread by the oro-nasal passages, were treated by inhalation, I think with good result, for although measles, German measles, and mumps occurred practically throughout the year there was nothing in the nature of an epidemic.