

*Scarlet Fever.*—It is satisfactory to record a decline in the prevalence of scarlet fever. The same may also be said of diphtheria, poliomyelitis, influenza, and pneumonia.

*Tuberculosis.*—The death-rate of 6·5 per 10,000 of the mean population indicates a slight increase on the previous year's rate, 6·48. In last year's report attention was drawn to the housing conditions in this country, and the obvious part such play in the encouragement and dissemination of this disease. The striking figures quoted in the report of the Board of Health have attracted much attention, and there is evident a growing desire on the part of local authorities to initiate remedies for such conditions.

Much prominence has been given during the past year in the public Press to what is known as the Spahlinger treatment of consumption. The Department has been in close touch with the High Commissioner for New Zealand on this subject. The difficulty of obtaining an adequate supply—or, indeed, any of the Spahlinger serum is well known, and the medical profession of New Zealand have had practically no opportunity of estimating its value. In this connection the following extract from an editorial appearing in a recent issue of the *Lancet* may be of interest:—

“The issue being thus clear-cut, it is with keenest regret that we have noted during the last week evidences of a Press campaign to raise funds in this country on the ground that the reports already published prove beyond doubt the great national importance of the movement. A memorandum ostensibly prepared by several medical men as an authoritative statement of facts contains such regrettable exaggerations as that the methods of Spahlinger make it clear that tuberculosis can be prevented, and that when the treatment is over there is no trace of the disease remaining. There is a suggestion that, had they not been prevented from doing so by the fear of ‘oblique advertisement’ (in the sense of the General Medical Council), many important signatures would have been appended to this statement. It seems to us improper to infer the weight of medical opinion in such a way. The Ministry of Health has found it necessary to reissue a statement of its position—namely, that up to the present the Minister has neither approved nor disapproved of the treatment. The memorandum justifies the appeal for funds by the grave danger from financial pressure to which Dr. Spahlinger's work is exposed. We can only trust that he will submit to the independent investigation of his remedy, which would put him right with the medical world and relieve him of his immediate difficulties. Could some arrangement be made to carry out this investigation with the usual controls, at one or other of the research institutes in this country, two objects would be served—(1) the money could be raised without risk of forfeit, and (2) the control would bring conviction to those among whom it is carried out. We appeal to Mr. Spahlinger, in the name of humanity no less than in that of science, to consent to this course.”

We can reasonably expect more of the antigens of Professor Dreyer, the report of whose researches are awaited with the greatest interest.

*Puerperal Septicæmia.*—There were fifty-two deaths recorded from this disease, giving a death-rate of 1·79 per thousand live births, as against 1·68 for last year. During the past year the Department has given much attention to this question of maternal deaths, and it is satisfactory to report that in the St. Helens Hospitals there has been a fall from six deaths in 1921 per 1,308 births to three deaths in 1922 per 1,470 births. A great deal, however, remains to be done before this mortality can be reduced to a satisfactory minimum. An amendment in the Hospital Act is urgently needed to deal with unlicensed houses; and the means of providing better accommodation in our private maternity hospitals is a matter that cannot be too strongly impressed upon those responsible. I am glad to say that some of our hospitals—*e.g.*, North Canterbury, Ashburton, and South Canterbury—are endeavouring to make adequate provision for maternity cases in their respective districts. A great deal more is being done in this respect than was the case a few years ago. It is hoped that the hands of the Department will be strengthened as regards the supervision and control of private hospitals.

*Plague.*—The Dominion is fortunate in having escaped a visitation of this disease, especially in view of the fact that it broke out in certain of the Australian States.

*Cancer.*—Of the non-notifiable diseases, cancer still claims its high place in the mortality-rate, accounting for no fewer than 1,066 deaths, giving a death-rate of 8·52 per 10,000 of persons living, in comparison with 8·53 for the previous year. The work of the Cancer Research Fund is being followed with great interest.

Of the other non-notifiable diseases, mention must be made of the very excellent work carried out by Professor C. Hercus, of Dunedin, and Dr. E. S. Baker, with regard to the prevention of goitre. The work of these officers shows very plainly that the greatest encouragement should be given to research work.

Of other diseases under this category we must draw attention to the low death-rates from those diseases of childhood—whooping-cough and measles.

*Venerable Diseases.*—During the past year the report of the special committee of the Board of Health set up to inquire into the question of venereal diseases in New Zealand was presented to Parliament. The committee may be congratulated on the manner in which it handled a very difficult problem. From an administrative standpoint it is of interest to note that the recommendations of the committee generally support the Department's long-outlined policy for dealing with these diseases. I have to thank the committee for its appreciation of the services of departmental officers who in clerical and routine matters assisted in the production of the report.

*Deaths under Anæsthetics.*—For some time past the Department has been concerned as to the number of deaths taking place under this heading. While associated with the Department Dr. Wylie investigated this question, and the conclusions contained in a paper read by him before the annual meeting of the British Medical Association in 1923, and published in the *New Zealand Medical Journal*, are worthy of careful consideration. The keeping of better anæsthetic records and the appointment of anæsthetists to our larger hospitals are matters that demand attention. That chloroform is being too extensively used seems indicated, especially so in regard to dental work.