

## APPENDICES.

## APPENDIX I.—MEDICAL ADMINISTRATION.

THE following table sets out the nature of the disabilities for which war pensions are being granted.

In many cases a pensioner is suffering from more than one disability, but in this classification only the dominant disability is considered, so that the total number of these is the same as the total number of individuals in receipt of war pension on the 31st March, 1924.

Wounds—						Permanent.	Temporary.	Total.
Upper extremity	..	..	..	..	..	1,577	600	2,177
Lower extremity	..	..	..	..	..	1,648	858	2,506
Head and neck	..	..	..	..	..	440	289	729
Thorax	..	..	..	..	..	356	292	648
Abdomen	..	..	..	..	..	160	109	269
						4,181	2,148	6,329
Amputations—								
Upper extremity	..	..	..	..	..	430	8	438
Lower extremity	..	..	..	..	..	584	17	601
Double	..	..	..	..	..	39	..	39
						1,053	25	1,078
Special senses—								
Ocular—								
Totally blind	..	..	..	..	..	21	..	21
Loss of one eye	..	..	..	..	..	337	9	346
Other disabilities of eye	..	..	..	..	..	150	33	183
						508	42	550
Auditory	..	..	..	..	..	261	84	345
Nasal	..	..	..	..	..	2	16	18
Respiratory system—								
Pulmonary tuberculosis	..	..	..	..	..	6	1,462	1,468
Other diseases	..	..	..	..	..	23	929	952
						29	2,391	2,420
Circulatory system	..	..	..	..	..	95	358	453
Nervous system—								
Organic disease	..	..	..	..	..	27	31	58
Functional disease	..	..	..	..	..	30	827	857
						57	858	915
Insanity	..	..	..	..	..	2	28	30
Gastro-intestinal	..	..	..	..	..	43	271	314
Genito-urinary	..	..	..	..	..	43	121	164
General diseases	..	..	..	..	..	93	848	941
Fractures (not due to wounds)								
Upper extremity	..	..	..	..	..	54	28	82
Lower extremity	..	..	..	..	..	52	40	92
						106	68	174
Diseases of bone	..	..	..	..	..	14	18	32
Injuries of joints (not due to wounds)	..	..	..	..	..	204	242	446
Spinal disease	..	..	..	..	..	9	81	90
Deformities	..	..	..	..	..	38	23	61
Disease of skin	..	..	..	..	..	3	8	11
Miscellaneous	..	..	..	..	..	43	101	144
						6,784	7,731	14,515

It will be seen that pensions are classified as “permanent” and “temporary.”

When a disability reaches a condition which may reasonably be regarded as final and stationary a permanent pension is granted. This is desirable in the interests both of the pensioner and the Department. A man in receipt of a permanent pension has a feeling of security in regard to his pension, and he is not subjected to the annoyance and inconvenience of undergoing periodical medical examinations. At the same time he knows that, should the disability for which he is in receipt of pension become worse, he will be re-examined on application to the Department, his pension adjusted accordingly, and any necessary treatment given. From the point of view of the Department the administrative work and expense (often considerable) associated with the constant review of temporary pensions are avoided.

*Wounds.*—It will be noted that a considerable number (about one-third) of the disabilities classified as “wounds” are still in receipt of temporary pension. These are cases in which inflammatory processes have persisted or recurred, scars are painful, foreign bodies have required removal.