H.—31.

The Dominion is now unfortunately experiencing a period of want and poverty, and, pending necessary adjustments, there will be some overcrowding of persons in dwellings. Doubtless this will in some measure mar our vital statistics, but such effect is not yet noticeable. It is to be hoped that restoration of the economic balance can be achieved in order that the beneficient influence over many years of steady improvement in the nutrition and the hygienic environment of the poorer people will not be greatly lessened.

9

THE PRINCIPAL CAUSES OF DEATH ITEMIZED.

a	1					
Cause.		1928.	1929.	1930.	1931.	1932,
Heart-disease (all forms) Apoplexy or cerebral hæmorrhage Diseases of the arteries	•••	2,315 643 394	2,533 634 428	2,897 659 432	2,817 634 420	2,935 611 444
Totals	••	3,352	3,595	3,988	3,871	3,990

It is again noteworthy that these diseases of the heart and arteries accounted for 3,990 deaths—i.e., 34 per cent. of the total deaths during the year. In 1928 they accounted for 28 per cent., in 1929 29 per cent., and in 1930 and 1931 32 per cent. of the total.

This, by reason of its magnitude and increasing tendency, appears to present a field worthy of special investigation by the Department and the medical profession. Certain infectious and other diseases such as scarlet fever, diphtheria, and acute rheumatism, and syphilis are known to sometimes affect the heart and blood-vessels, but their potency and influence has definitely waned.

Again, some may regard deaths from these diseases as the inevitable results of fair wear-and-tear, but analysis shows that, during the three years ending 1930, of an approximate total of 11,000 deaths in New Zealand from those causes 2,500 occurred before the age of sixty had been reached, 1,100 before age fifty, and 500 before age forty.

These diseases, then, not only shorten life, but stand out as the main blot on a clearing horizon. Medical attention to individual patients (usually middle-aged or older persons) does by means of detection of arterio-sclerosis, high blood-pressure, or heart incompetency, and the alteration of habits, including dietary, lengthen their lives, but by co-operative effort in a wider field, commencing at an earlier age, and an endeavour to ascertain the fundamental causes of these very common diseases of the heart and blood-vessels it seems possible that longevity could be increased.

Cancer, another important cause of death, is regarded by many as a disease of civilization. If this be true, then the necessary correction of the human errors which predispose to cancer will probably prove to be neither a short nor a simple task. There are, in fact, very few examples in medical history of any disease having been eradicated by rapid cure, and in respect of these diseases of the heart and blood-vessels it may be said with greater force than is true of cancer that the results of early diagnosis and medical attention to individual cases appear to justify a wider and earlier application of the process. Moreover, the very fact that our knowledge of the causes of arterio-sclerosis and of many forms of heart-disease is scanty itself points to the need of special investigation. The number of annual deaths involved is such as to offer a margin of gain worth the effort.

CANCER, 1,472.

The following table, taken from the "New Zealand Official Year-Book," shows the cancer death-rate in the Dominion for the last five years:—

Number of Persons who died from Cancer, the Proportion per 10,000 Persons living, and the Percentage of all Deaths, 1928-32.

	Year.		Deaths from Cancer.	Total Deaths, all Causes.	Deaths from Cancer per 10,000 of Living Persons.	Deaths from Cancer per 100 of all Deaths.
1928	 	 	1,374	11,811	9.87	$11 \cdot 63$
1929	 	 	1,467	12,314	$10 \cdot 43$	$11 \cdot 91$
1930	 	 	1,452	12,199	$10 \cdot 19$	11.90
1931	 	 	1,493	12,047	10.33	$12 \cdot 39$
1932	 	 	1,472	11,683	10.11	$12\cdot 60$

We know not the cause of cancer. It is increasing in prevalence at a slow, not rapid, rate. Being a disease of late life and having in the past often missed detection or registration, its apparent increase is in considerable measure accounted for by our longer span of life and greater skill in diagnosis. The real increase is slight.