

The clinic at the Dunedin Public Hospital is visited bi-weekly. During the year 132 new cases were seen, of which 69 were in the wards and the remainder as out-patients; 23 of the latter were recommended by practitioners. Of the total clinic figures, 22 were committed, 15 admitted as voluntary boarders, and 31 discharged; 48 were reported upon and 8 were under treatment at the end of the year.

The Invercargill Clinic was visited monthly by Dr. Hunter, and later by Dr. Brown. Forty-two cases were seen, of which 3 were referred by the Borstal, and of the others, 3 were subsequently committed and 3 admitted as voluntary boarders.

Concerts have been provided during the year by various parties, but the most welcomed event was the installation of a talkie plant donated by the citizens of Dunedin, through the efforts of Mr. Cummings and the Patients' and Prisoners' Aid Society. To Mr. Stevens, the Chaplain and agent of this society, I have to record my thanks for regular weekly visits on behalf of the patients and also for assistance from time to time, both materially and by supervision, in placing patients without friends on probation.

Mr. Cummings, the patients' friend, visits every week and displays his usual keen interest in the hospital and patients, and to the visiting Ministers I wish to tender thanks for their visits and services which are much appreciated.

My thanks are due to Dr. Hunter, Dr. Brown, and Dr. Bowell for their assistance during the year, for most of which we have been short-staffed. In conclusion, I wish to thank the various executive officers, Matrons, and Head Attendants, and the staff generally for their good work during the year.

STATISTICAL.

The patients on the register at the end of the year numbered 7,433 (m. 4,133, f. 3,300), or 151 (m. 68, f. 83) more than at the beginning; and the daily average under treatment during the year was 6,938 (m. 3,899, f. 3,039), or 197 (m. 90, f. 107) more than in the previous year; while the total under care was 8,265. Patients belonging to the Native race numbered 122 (m. 68, f. 54) at the end of the year.

The admissions numbered 983 (m. 479, f. 504), or 134 less than in the previous year. Of these 155 had been previously under care, making the proportion of readmissions 15·8 per cent., and 828 patients were admitted for the first time.

The ratio to population of all admissions (exclusive of Maoris) was 6·44 (m. 6·14, f. 6·75) to 10,000, and of first admissions 5·45 (m. 5·21, f. 5·69), so that 1,551 persons in the general population contributed one patient, and 1,835 contributed a patient admitted for the first time.

The discharges (excluding transfers) numbered 396, or 23 more than in 1933. 136 (or 24 more) harmless unrecovered persons were returned to the care of friends; and 260 (m. 114, f. 146) recovered—1 less than last year—representing a percentage of 26·45 (m. 23·80, f. 28·97) on the total admitted. With voluntary boarders added the percentage rises to 31·53. Altogether, 50 per cent. of the inmates admitted were able to leave institutional care.

Of a total of 8,265 patients under care, 436 (m. 233, f. 203) died, or 6·28 per cent. on the average number resident. An inquest is held in the case of every death, whatever the cause. The causes are detailed in Table V, and the following is the percentage of causes mainly contributing: Senile decay, 29·13; diseases of the brain and nervous system group, 22·02; heart-disease, 19·03; tuberculosis, 6·42.

In Table VI the principal causes assigned for the mental breakdown in the admissions are stated; but as a matter of fact they are merely approximations, and these, with the small numbers with which we have to deal, show such divergencies from year to year that the proportion assigned to any one cause in any one year cannot be assumed to be our average incidence. Causation is always complex, and the most potent factor is the individual. Hereunder the assigned causations in the table referred to are grouped and shown in their relative proportions:—

	Males.		Females.		Total.
Heredity	6·89		8·53		7·74
Congenital	19·00		15·48		17·19
Predisposed by previous attack	13·36		12·30		12·82
Critical periods	22·55		31·35		27·06
Child-bearing (puerperal, non-septic, and lactation) .. .. .	..		4·76		2·44
Mental stress	17·54		18·65		18·11
Toxic, including—					
Syphilis	4·17	0·40	8·56	2·58	5·49
Alcohol	3·97	1·39			
Traumatic	0·41		..		0·20
Disorder of nervous system, including—					
Epilepsy	5·22	2·78	6·68	4·17	5·39
Other bodily affections .. .. .	..	..	5·01	2·18	3·56
No definite cause assigned .. .. .	..	..	..	..	..
	100·00		100·00		100·00