

Hydatid Disease.—Sir Louis Barnett, in an article in the *New Zealand Medical Journal*, October, 1941, points out with regret that although for years past the Research and Preventive Medicine Departments of the Medical School, Otago University, with the co-operation of the Government Departments of Health and Agriculture, have carried out an intensive campaign of education and persuasion, it has not yet been effective in dealing with this preventable disease. However, it is hoped that the apathy of a large section of the farming community to measures recommended to safeguard the lives of their families will in time give place to a spirit of active and willing co-operation. In the educational field the Department distributed to sheep-farmers some twelve thousand copies of a leaflet on this disease by Sir Louis Barnett. This recognized authority has also written an illustrated booklet on hydatid disease which it is hoped to publish in the near future.

REPORTS OF DIVISIONAL DIRECTORS, ETC.

The reports of Divisional Directors show that a reasonably satisfactory standard of service has been maintained in the various fields of departmental work. Close attention has been given to problems of sanitation and water-supply; maternal- and infant-welfare work has been maintained; observations on health of school-children show no alarming trends; nursing services have been developed to meet civil and military demands; there has been an extension in the scope of the work of the School Dental Service, while in the field of nutrition a vigorous attempt has been made to form more wholesome feeding habits and to achieve a widespread knowledge of food values. Some special comment is called for in regard to certain aspects of departmental activity.

Hospitals.—The estimates of requirements of all Hospital Boards provided for net estimated maintenance expenditure of £1,794,292 19s. 2d., which represented an increase of £353,656 16s. 5d. over the amount provided for 1940–41. As a consequence of this increase the amounts to be contributed by levy and subsidy were respectively £100,683 12s. 6d. and £252,973 3s. 11d. more than the amounts for the previous year.

The principal factors accounting for the increase in requirements were the less favourable commencing position, there being a total deficit of £26,548 16s. in Maintenance Accounts of Boards, as compared with substantial surpluses totalling £318,601 5s. 7d. at 1st April, 1940, and the necessity to increase the provision for maintenance of hospitals by £409,131 1s. 1d., brought about by increases in costs and occupied beds. Also, £152,290 12s. 9d. of the increase is due to the fact that Boards were required to refund subsidy to the Government under clause 7 (1) of the Fourth Schedule of the Hospitals and Charitable Institutions Act, 1926, to the extent of £83,580 8s. 11d., whereas last year Boards received a refund of £68,710 3s. 10d. These factors were partly offset by the further rise of £275,394 2s. 10d. in the estimated receipts, mainly from benefits under Part III of the Social Security Act, 1938.

The estimates for capital requirements again provided for increased expenditure, principally for building programmes.

The total net capital requirements, which are contributed equally by levy and subsidy, amounted to £404,993 16s. 4d., a decrease of £3,249 7s. on the estimates for the previous year. The estimated expenditure from loan-moneys totalled £2,356,857 13s. 9d., of which £566,079 9s. 8d. had already been raised at the commencement of the year.

Maori Hygiene.—The following table shows a comparison between Maori and European vital statistics:—

	Maori.	European.
Birth-rate per 1,000 of population	44·77	22·81
Infant-mortality rate per 1,000 live births	122·88	29·74
Crude death-rate per 1,000 of population	20·30	9·81

Social Security. During the year under review the following further classes of benefits under the social security legislation were inaugurated:—

- (1) Pharmaceutical supplies (1941/66; 1941/131; 1942/3).
- (2) X-ray diagnostic services (1941/122; 1942/14).
- (3) General medical services (1941/187; 1942/13).

In existing circumstances it is practicable to furnish only the following brief outline of the scope of these benefits, but for ready reference the serial numbers of the regulations relating to the benefits have been shown above.

Pharmaceutical Supplies: This class of benefits was inaugurated on 5th May, 1941. The general arrangement for the provision of pharmaceutical supplies is a form of contract between the proprietor of a licensed pharmacy and the Minister of Health, in terms of which the pharmacist undertakes to supply pharmaceutical requirements in accordance with the regulations. Pharmaceutical requirements are defined as including all such medicines, drugs, appliances, and materials as are included in the Drug Tariff, for the time being in force under the regulations.

The Drug Tariff at present in force is cited as the "Drug Tariff (January, 1942)," and replaces the original Drug Tariff dated 24th April, 1941. The Drug Tariff specifies the drugs, medicines, and medicinal preparations which are included in the expression "pharmaceutical requirements," and in addition enumerates the substances which are excluded from the scope of the benefits. The Drug Tariff also imposes certain limits on the quantities of drugs, &c., which may be supplied on any one prescription, but the Medical Officer of Health may in special cases authorize supplies for an extended period.

Such medicines and drugs as are included in the Drug Tariff and are prescribed by any medical practitioner on and after the commencing date—namely, 5th May, 1941—and dispensed or compounded by a contracting chemist are the subject of payment from the Social Security Fund.

In the meantime no bandages or other appliances have been included in the Drug Tariff.