

*Nitrite Preparations.*—To provide a further safeguard against accidental poisoning by sodium nitrite, butchers who used this substance are now required by regulation to maintain correct labelling on all containers in which nitrites are kept on their premises. In the past several fatalities have occurred through mistaking nitrite for salt or salt-petre.

*Food Premises and Eatinghouses.*—The regulations controlling food premises and eatinghouses are now very out of date, and it is intended to revise them as soon as staffing difficulties permit this to be done.

#### DANGEROUS DRUGS AND POISONS

*Dangerous Drugs.*—A disquieting feature in connection with dangerous-drug control is the increased consumption of heroin. This is one of the worst of the dangerous drugs, as far as addiction is concerned, and its manufacture and importation are both entirely prohibited in certain countries. While, therefore, it has a legitimate place in medicine, it cannot be regarded as indispensable. The following table will show how the importation and consumption of heroin has increased since 1944 :—

	Heroin (Kilograms).		
	1944.	1945.	1946.
Importations .. ..	4.1	3.6	7.4
Consumption .. ..	4.0	6.3	7.8

Prior to 1944 the corresponding figures had remained remarkably constant.

The supply of free medicine under the social security benefits began in 1941, but it was not expected that this would affect the quantities of dangerous drugs consumed. This assumption proved correct, and the consumption of morphine, cocaine, and heroin remained practically constant up to 1944. There was an increased consumption of codein, but this could be explained by the importation of codein that was used for manufacturing purposes within the Dominion. Previously tablets containing codein as an ingredient had been imported and the codein contained in them would not have been recorded as an importation of codein.

As already stated, the consumption of heroin rose steeply after 1944 and the amount consumed in 1946 was nearly double that used in 1944. It is difficult to explain this rise, except as an example of a changing fashion in prescribing such as occurs from time to time. The attention of medical practitioners is being drawn to the matter, and the manner in which the drug is being used is being closely watched.

*Poisons Act and Regulations.*—An amending regulation was enacted relaxing somewhat the restrictions on the sale of dichlordiphenyltrichlorethane (D.D.T.). This substance had come on to the Dominion market when our knowledge of its poisonous properties was very imperfect and before it was being sold to the public generally in any other countries. It was considered advisable, therefore, to class it as a First Schedule poison, which restricted its sale to pharmacists. When it was found that D.D.T. when used with reasonable intelligence is less toxic than was feared, the regulations were amended to allow for its more ready sale. Preparations containing less than 1 per cent. of D.D.T. may now be sold without any restriction; solutions of D.D.T. containing 1 per cent., but not more than 5 per cent., and dry preparations containing 1 per cent., but not more than 10 per cent. of D.D.T. are now classed as Fourth Schedule poisons and may be sold by any storekeeper, with certain restrictions as to labelling and packing. Preparations of D.D.T. in higher concentrations are still included in the First Schedule and their retail sale is restricted to pharmacists.

A consolidation and revision of the regulations under the Poisons Act, 1934, is now being undertaken.