

Seizure of Unsound Food.—The foods seized and destroyed included a large quantity of bacon that had been canned in rashers without any heat processing. Bacteriological examination showed that in all the bacon tested *staphylococcus* was present. This micro-organism is a common cause of food poisoning and any toxin produced is resistant to heat. Other condemned foods included rabbits, canned fish, dried fish, fruit, dried fruit, desiccated coconut, pickles, sandwich spreads, and wine.

Prosecutions.—Prosecutions under the Food and Drugs Act totalled 87.

Inspection of Pharmacies.—At the request of the New Zealand Pharmacy Board, the Department's Dangerous Drug Inspectors now carry out general inspections of pharmacies and report to the Board. This work has necessitated the appointment of additional Inspectors.

DAINGEROUS DRUGS AND POISONS

Heroin.—During the year New Zealand's relatively high consumption of heroin was given full publicity by the world-wide publication of the first post-war report of the Permanent Central Opium Board. The facts as reported gave a somewhat exaggerated impression of the increased consumption in 1946 by comparing it with that for 1936. The consumption normally fluctuates from year to year, and the figure for 1936 was unusually low. Nevertheless, as had already been pointed out in the Department's report of last year, New Zealand's *per capita* consumption of heroin was higher than that of any other country except Finland.

This state of affairs was well known to the Department and active steps were begun in 1946 to exercise more stringent control. The matter was referred to in the Department's annual reports for 1947 and 1948. The action taken has been effective and the consumption of heroin has fallen from 7.8 kilograms in 1946 to 6.4 kilograms in 1947 and 5.8 kilograms in 1948. This last figure still shows an unduly high consumption, and as an additional measure of control the Drug Tariff has been amended to restrict the amount of any liquid preparation of heroin obtainable at the cost of the Social Security Fund to not more than sixteen doses. This, it is hoped, will prevent the prescribing and dispensing of larger quantities of heroin, but will still enable any doctor to prescribe the drug in unlimited quantities if there is clearly a necessity to do so.

Morphine.—An increase in the consumption of morphine has also become apparent recently, and this drug requires closer control. The introduction of new drugs such as pethidine was expected to result in the consumption of less morphine, but this has proved not to be the case.

Supplies of morphine are permitted to be carried on ships for first-aid purposes, even in the absence of a medical officer. An amendment of the Dangerous Drugs Regulations is being promoted to permit of the same concession in the case of aircraft.

Drug Addiction.—The Department's reports show a slight increase in the number of drug addicts, but this is certainly due rather to a more intensive search for addicts than to any actual increase. Already one case of pethidine addiction has been brought to light, which is remarkable considering the short time this drug has been in use. The activities of certain addicts are made easier by the carelessness with which certain pharmacists fill prescriptions for dangerous drugs allegedly signed by doctors whose prescriptions they do not normally dispense and whose signatures are not known to them. Two addicts recently in the same city were found to have presented a number of forged prescriptions.

Prosecutions.—A pharmacist who was suspected of having misused dangerous drugs was prosecuted for obstructing the Inspector and was convicted and fined.