

and dispensary building at Penrhyn with accommodation for six beds will require replacement within the next two or three years. Pukapuka has no medical facilities, but is scheduled to receive a cottage and hospital similar to that being provided for Mangaia and other islands. Palmerston Island has no medical facilities.

Medical Problems

Tuberculosis is prevalent throughout the Group, pulmonary tuberculosis, tubercular peritonitis, and tubercular adenitis being the commonest manifestations. Tuberculosis of the bone is relatively uncommon.

In Rarotonga, out of a population of 5,537, 104 deaths occurred during the last twelve months; of these, 29—32·7 per cent of the total deaths—were due to tuberculosis. This figure may be taken as representative of the whole Group. To date no organized attack has been made on the disease, but individual cases are being treated as they are discovered. The reluctance of the local population to enter the sanatorium appears to be diminishing, and a stage has now been reached where the number of available beds is inadequate.

Several educational films have been shown throughout Rarotonga during the year, but unfortunately they were not made available long enough to allow them to be shown throughout the Group. These appear to have stimulated local interest in the disease, although the type of film available was not wholly suitable for Maori audiences, and it is hoped that in future they will be made available for sufficient time to enable them to be shown throughout the Group.

At the last meeting of the Legislative Council a Building Ordinance was passed which gives power to order repairs or demolition of buildings if required. This lays the foundation for a future campaign in the Cook Islands, where tuberculosis is undoubtedly related to bad housing and overcrowding.

Helminthiasis

Filiariasis is endemic in the Cook Islands, and the problem of its control has been carried out under the scheme recommended by Mr. Amos, of Fiji. Mosquito Inspectors have been trained and are now stationed throughout the Group. Control measures have been operating for some time in Rarotonga and Aitutaki. The principle of controlling the carrier of the disease, *Aedes pseudo scutillaris*, appears to be effective, and a marked reduction in the number of filarial mosquitoes is evident where the scheme is in operation.

The progress being made with anti-filarial drugs is being watched, and orders have been placed for suitable drugs.

Lectures and demonstrations of mosquito control have been given throughout the Group and a limited survey of selected groups for micro-filarial infestations have been made.

Ascariasis

The predominant intestinal infestation in the Group is *Ascaris lumbricoides*, and supplies of suitable drugs have been obtained to enable mass treatment of school-children.

Hookworm

There is now only an occasional case of hookworm reported, and the conditions of soil sanitation are such that it is unlikely that this disease will re-establish itself.

Leprosy

Leprosy is endemic in part of the Group, notably Penrhyn and Aitutaki. A large number of cases have been removed from Penrhyn in the past. During 1948, 10 leper suspects were sent from Aitutaki to Makogai, no case being found in the remainder of the Group.