

demonstrated to be proclaiming wares or services which were not in the best interests of the State. I have no hesitation in saying that in no part of the world could a cleaner advertisement part be found than in the daily papers of New Zealand. Many of the operators have left the colony, and the reasons assigned for departing are as curious as they are varied. Because his New Zealand clients have become so numerous, he has determined to administer his business from Sydney, is the reason offered by one firm; and because his reputation is so great he asks his New Zealand patients to send their letters to another address and inscribed to another name. No one is foolish enough to imagine that quackery and fraud can be stopped entirely, but the inclusion of section 9 of the Post Office Act Amendment amongst our laws has satisfied me that much can be done.

I have pleasure in reporting that there has been no epidemic of any serious nature during the past year. Measles appeared during the early part of this year in the South Island; but, fortunately, there were not many deaths. Scarlet fever has again broken out, but so far the number of cases has been small compared with past years. Provision for the isolation of infectious disease has been made in all the large centres, with the exception of Dunedin. The long-standing difficulty with respect to the selected site has been settled, and soon the chain will be complete.

The effective isolation of the first cases is of the utmost importance, and in many instances but for the fact that adequate provision had been made for the institutional treatment of these cases the few might easily have blossomed into an epidemic. There are several points worthy of careful consideration in reference to the question of hospital accommodation for persons suffering from infectious diseases. The initial cost of such an institution by reason of its nearness, to use an illustration from optics, occasionally assumes such importance in the eyes of the ratepayer that it blots out or prevents his being able to see anything behind it. A marble placed within a few feet of the eye of the observer is able to prevent his seeing the sun. We must look past the marble, so to speak, in order to estimate the value of scenery beyond. So with all matters of preventive medicine. Some experts have drawn attention to the futility of setting up large and expensive institutions for such ailments as scarlet fever. There is no doubt that in some countries money has been wasted in attempting to provide for the housing of all or nearly all of the cases. This mistake has not been made in New Zealand. As I have pointed out in previous reports, unless the first cases are segregated there is little or no use in sending the later cases into hospital. An epidemic cannot be averted by this means. It is absolutely necessary, of course, that, in addition to the provision necessary for these first cases, the hospital should be large enough to take in *all* cases occurring in hotels, boardinghouses, and places where foodstuffs are prepared or sold. The economic waste attendant upon keeping a case of scarlet fever in a house where isolation of the patient cannot be obtained is evident. Take the case of a shop where milk is sold. Should scarlet fever break out in such a family every one has to cease earning money unless the patient can be immediately removed to hospital. We are apt to forget that this loss of wage-earning power is not only an individual, but a communal, privation. The wealth of a nation is the sum total of the wealth and wage-earning power of its units, and if these be prevented from working, the loss is as much the State's as the individual's. This aspect of the value of preventive medicine is frequently overlooked. The principle has been accepted that no individual must die of starvation or want. If he be not kept in a hospital he must be kept—that is, supported—outside. Apart altogether from the wrongness of keeping capital unemployed—in the case of the working-man his labour is his capital—harm results to the individual by the enforced abstention from work.

This much in answer to the small band who continually ask us to view the initial cost, to the obscuration of the future benefit.

I am pleased to say that nowhere have we met those who object to the setting-up of such hospitals. There is usually entire agreement on the central factor, but infrequently they are better able to see that the obligation to provide rests on the shoulders of some other body than the one requisitioned. I consider it one of the best tributes to the common-sense and tact of the officers of the Department that our relations with local bodies from one end of the colony to the other are of the most cordial and helpful nature.

INFECTIOUS DISEASES AMONG SCHOOL-CHILDREN.

Several of the common infectious diseases, such as scarlet fever, measles, diphtheria, &c., are acknowledged to be in a large measure diseases of early life.

This ought to be an effectual answer to the mother who, objecting to sanitary restrictions, says, "Johnnie has it; all the others are bound to have it. What is the use of bothering? Mix them all up, let them all have it, and then I'll be done with it." Every year added to the child's life diminishes its chance of contracting diphtheria or scarlet fever. Surely, then, it is worth while to try and protect them during their more susceptible period.