

The District Health Officer, Christchurch, reports :—

There has been a considerable increase in the number of cases reported as compared with last year—viz., 521 as against 302—but this was owing to an outbreak in the West Coast districts, where in some localities, owing to laxity in notifications, the disease obtained a hold before measures could be taken to check its spread, and several cases in North Canterbury were distinctly traceable to infection from the west.

That the disease did not spread more freely in the Canterbury districts is attributable solely to the efficiency of the measures taken therein by the Boards and their Inspectors.

DIPHTHERIA.

The District Health Officer, Auckland, reports :—

The cases notified from the health district during the last five years are—

1910	..	..	..	257	|	1913	..	..	..	247
1911	..	..	..	223	|	1914	..	..	..	379
1912	..	..	..	260	|					

The increased case rate referred to in the two previous reports shows no sign of abatement, the colder months being responsible for the heavier returns. Auckland City and suburbs, and Thames and Waihi Boroughs are the districts principally affected. The city shows 66 cases fairly evenly distributed throughout the year, and at no time was there any definite epidemic. In the suburbs it is interesting to note the effect of drainage. Thus Grey Lynn, with its system of slop-water drainage, escapes with 5 cases, while Mount Eden, which is notorious for its absence of sewers, has 32 cases. Mount Albert, which has only a small area sewered, contributed 29 cases, while Onehunga, which has almost completed its drainage system, yields but 8 cases. In Newmarket, which is completely sewered, no cases occurred. Similarly in the country towns the Boroughs of Thames and Waihi, which are quite unsewered, show 15 each, while the well-drained boroughs of Cambridge and Te Aroha had but 2 cases in each.

It might have been hoped that the dry season would have shown a decrease rather than the marked increase in this disease which occurred this year. That the dry spell which began in August had some influence is evident from the drop from 46 and 61 cases notified in June and July to 35 and 30 cases in August and September. But it is disappointing that this disease should not show any tendency to diminish. The distribution shows that this is probably due to the rapid increase of population not being counterbalanced by an improvement in sanitary measures commensurate with the increased needs of a more crowded population.

The mortality in the city and suburbs is 10.

The District Health Officer, Wellington, reports :—

The cases notified from the health district during the last five years are—

1910	..	..	..	341	|	1913	..	..	..	254
1911	..	..	..	322	|	1914	..	..	..	350
1912	..	..	..	283	|					

These figures show that diphtheria has been more prevalent this year. The disease has, on the whole, been of a mild type.

The District Health Officer, Christchurch, reports :—

This disease is endemic in the district, but an outbreak in Timaru assumed the character of an epidemic in the months of May, June, and July, 44 cases having occurred in the borough and immediate neighbourhood, sorely taxing the available hospital accommodation. No special local cause could be assigned to the outbreak, which was distributed over the whole of the borough, but several of the cases were traced to infection from others, and it is reasonable to suppose that carrier cases were responsible for its spread. It would seem that stricter measures should be adopted for more effective isolation of this disease, and the principle of two successive negative swabs being insisted on in all cases before release from isolation, as is done in the North Canterbury Hospital District.

Several cases also occurred late in the year at New Brighton, but these were practically confined to the pupils in the infant classes of the school, the accommodation for which was grossly inadequate, resulting in considerable overcrowding.

ENTERIC FEVER.

The District Health Officer, Auckland, reports :—

The cases notified from the health district during the last five years are—

1910	..	..	..	197	|	1913	..	..	..	412
1911	..	..	..	346	|	1914	..	..	..	537
1912	..	..	..	252	|					

Again the province as a whole shows a high return for enteric fever. Yet Auckland City (30 cases) and suburbs (17 cases) show an unusually low case rate, Mount Eden with 11 cases being the least satisfactory. One suburban outbreak, amounting in all to 20 cases, occurred in the autumn, and was of some interest, in that it was traced to the eating of oysters exposed to sewage-pollution. The oyster-beds affected were those at Mangere, in close proximity to the bridge. So definite was the evidence that persons eating these oysters were being attacked that the Marine Department consented to place notice-boards at the affected parts warning persons against the dangers. The beds were not officially open for use, so that those taking the oysters were committing an illegal act, and the knowledge of this made them very reticent when asked as to whether they had taken oysters at this place. However,