33 A.—3.

4. Milk-supply.

Except in Avarua, Rarotonga, there are only rare milk-supplies. Otherwise, milk comes out of tins, or the expressed juice of the coconut is used. This lack of milk may have a bearing on the infant-mortality rate.

5. VITAL STATISTICS.

The records of vital statistics are simple in the extreme. The annual reports—such as are available—tell of births and deaths and marriages, sometimes giving sexes and races and sometimes not. Ages at death are not available. Death-rate and birth-rate are not available. Here follows the summation of the vital statistics that could be obtained:—

				1919.	1922.	1924.	1925.
Births		 	 	287	308	301	325
\mathbf{Deaths}		 	 	185	163	178	219
Marriages	3	 	 	47	88	73	97

In the birth-rate or in the death-rate I could find no predomination of either sex. Resident Agent E. J. Dyer, of many years' residence in the Group, gives me his opinion that the birth-rate increased and the death-rate decreased with the introduction of treatments for yaws. With little immigration and little emigration, these few figures above quoted would tend to show a steadily rising population.

On Mauke, Resident Agent E. J. Dyer worked up for me his statistics on births and deaths from 1919 to 1925:—

Island of Mauke.

		(1	opulation?	i 560 i	n 1921	l.)			
		•	_		Bir	<u> </u>	Deaths.		
					М.	F.	М.	F.	Infants (One Year or under).
1919	 		•		5	12	5	3	3 ′
1920	 				12	15	11	3	3
1921	 				11	5	8	8	7
1922	 				13	10	6	6	3
1923	 				12	6	9	9	6
1924	 				11	12	9	2	7
1925	 • •				10	5	6	6	3
							*		
					74	67	54	37	32

(The figures for 1925 are incomplete for December.)

This works out as a birth-rate of 32 from 1921 to 1925, and a death-rate of 24. The infant mortality for the time seems to be over one-third of the total deaths.

6. Transmissible Diseases.

The first medical survey of the Cook Islands of which I can get trace was made by Sir Maui Pomare in 1906. He was then Health Officer to the Maoris of New Zealand. This was a complete and comprehensive survey. I shall quote from it, largely for the historical interest it has in light of present-day conditions. He wrote (in part):—

"(1) Measles was quite common a little while back, it being introduced by some passing vessel, and it proved fatal to the islanders, as usual. There was one case in Rarotonga while I was there. I have no doubt that some of the other infectious diseases have been prevalent, but were unrecognized. No records have been kept at the hospital. (2) Typhoid: There have been no cases of typhoid amongst the Natives, but one or two cases have occurred in an English family, probably due to the coffee-refuse which was allowed to drain into the well. (3) Dysentery is more or less common in certain seasons of the year, due probably to the food. (4) Erysipelas has occurred in isolated cases. (5) Two or three have died from tetanus. (6) Rheumatism is quite common. (7) Worms of the Ascaris lumbricoides are to be met with, (8) but the Taenia solium I did not see. (9) Tuberculosis, the great white plague, though not alarming, is to be feared, for I saw many cases. It is more or less the product of civilization. When the Natives lived naturally, wearing little or no clothes, they were numerous, but when false modesty and clothes were introduced, consumption became rife. The souls were perhaps redeemed by the deaths of the bodies. The changing of a nation's habits is a grave responsibility. Sheltersheds on some mountain-peak will have to be erected some day, and segregation of the afflicted ones attempted, if we are going to do any good. Perhaps the reason why tuberculosis is not any worse than it is is because the Natives live a great deal out-of-doors. (10) I saw only one idiot, and heard of one case of (11) lunacy. (12) Neuralgia is as common as amongst white races. (13) Considering the number of syphilitics, I was astonished to find no cases of tabes dosalis, whereas fully 70 per cent. of locomotor-ataxic cases in Europeans are due to syphilis. (14) While at Rakahanga and Manihiki I came across five cases of myelitis, due to the after-effect of what was probably a severe attack of la grippe. (15) A case of partial paralysis, due to a gumma on the brain, was interesting owing to the fact that it was the only nerve case I saw that was directly due to syphilis. Eye: (16) I came across only two cases of cataracts; conjunctivitis was common, probably due to the extreme heat, and light from the white sand, and diving; (17) there were several esophorics and exophorics, several cases of stoppage of the lachrymal duct, and one case of iritis and corneaitis. (18) Heart-diseases are rare, though I saw two or three cases, and a number of varicose conditions. (19) Ear-diseases are also common: I saw several cases of otitis media. Pulmonary cases: (20) Bronchial asthma and (21) pleurisy are quite plentiful. (22) I saw two tubular pneumonias. (23) Dyspepsia is rare, and