

PART IX.—HEALTH DISTRICTS.—EXTRACTS FROM ANNUAL REPORTS  
OF MEDICAL OFFICERS OF HEALTH.

SECTION I.—CENTRAL AUCKLAND HEALTH DISTRICT.

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INFECTIOUS DISEASES.

The most outstanding feature was the occurrence of a sharp epidemic of bacillary dysentery of a virulent nature, the cases being of both the Shiga and Flexner types, the former predominating. The first cases were detected in the Auckland Hospital early in January, occurring in Maoris from the Orakei Settlement; but owing to the roaming nature of the Maoris and their habit of concealing cases it was not possible to confine it to this locality, and it shortly spread to the city and suburbs and southward to the Waikato. Fortunately the incidence in the metropolitan area was not unduly high. The greater number—approximately 75 per cent.—of the cases occurred amongst the Maori population. Special nursing assistance was obtained, and cases found were moved to hospital or placed under isolation and treatment, and the epidemic subsided early in May almost as quickly as it arose. Information in regard to the diagnosis and treatment of dysentery was disseminated during the epidemic, and arrangements made with Dr. Gilmour, Director of the Pathological Department, Auckland Hospital, to deliver a lecture on this subject to a meeting of the British Medical Association (Auckland Branch). The Medical Officer of Health also addressed this gathering.

Of the other diseases, scarlet fever and diphtheria ran a fairly high incidence—higher than for some years past, in fact—but the cases were mostly of a mild type, some of the patients suffering little inconvenience; and probably this accounted for the large number of cases, as the diseases were promulgated by carriers and undetected mild cases. Outbreaks of diphtheria occurred at Papatoetoe and Manurewa during the year, but the cases were controlled by the precautionary measures adopted.

There was little pneumonic influenza reported, although the organization for dealing with a possible epidemic was reviewed and kept in order.

Enteric-fever notifications were very low, as also were those of infantile paralysis and cerebro-spinal fever, the district being practically free of these dangerous diseases.

A fair number of cases of puerperal fever occurred, some in public and private maternity hospitals. A careful investigation of every case was made, and strict precautionary measures to prevent the possible spread of infection were insisted upon in all cases.

GENERAL ADMINISTRATION.

Much improvement has been made in such matters as general sanitation, sewerage, and drainage, refuse and nightsoil disposal, as well as in the many other branches of departmental activity.

*Drainage.*—During the year the Engineer to the Auckland Drainage Board left for a world tour with a view of obtaining information concerning the methods of drainage purification and sewage disposal in various countries, and with the view of improving the system at present in Auckland, and also with a view of drawing up a comprehensive scheme for the whole metropolitan area.

Complaints have on various occasions been received concerning nuisances from disposal of sewage of various local-body districts into the harbour, and especially at Orakei. Improvements were made during the year at Orakei by the provision of extra-fine screens for further screening sewage before its discharge. Nuisance from discharging storm-water overflows has occurred on several occasions, chiefly due to blockage of sewers. There is no doubt that the creeks which receive storm-water overflows in the city are too many, and require to be piped or concreted in the future, and it is hoped that the Auckland Drainage Board will deal with these at the earliest opportunity. A special report was made by the Medical Officer of Health to the Auckland Drainage Board concerning the drainage problems in the city and the metropolitan area.

Throughout the city and suburbs drainage reticulations have been extended. Great progress has been made in Mount Eden and Mount Albert districts, and polls were successfully taken in Onehunga, Mount Roskill, and Ellerslie for extension of sewage reticulation. Difficulty still faces the Ellerslie Town Board, which still awaits the drawing-out of a comprehensive scheme by the Engineer to the Auckland Drainage Board.

*Swimming-baths.*—Considerable improvements have been carried out by the City Council in the care and construction of various city baths during the year. Numbers of samples of water from the baths were taken for bacteriological examination. Nevertheless, constant care is required in the filling operations of those baths using sea-water, owing to the amount of suspended matter in the harbour water at certain states of wind and tide. The inlet for the tepid baths has not been extended, as recommended last year, and the results given by the filtration plant are not such as one would expect to be obtained from an up-to-date recirculation plant.

*Occupational Diseases.*—The question of danger from dust given off from the granite-surfacing machines used in the construction of the new Auckland Railway-station was dealt with, and respirators and fans for extracting the dust were provided by the contractors.

Inspections of all factories using duco and lacquer paints were made during the year, and booths and exhaust fans of satisfactory size were installed. Similarly the use of lacquers for hats was dealt with.