

## HEALTH DEPARTMENT.

## PUBLIC HEALTH.

Early in June dengue was introduced, apparently from Fiji and possibly by way of Pago Pago, and spread slowly over both islands. There were 199 admissions to the Apia Hospital, but this represents only a small portion of the actual cases. Only one death is known to have occurred, and in this instance no post-mortem could be held.

Towards the end of 1930 bacillary dysentery was also reported from Savai'i, and later became general, but has since subsided.

Yaws *malagas* have been made in both islands, and every district has been catered for, though the number of attendances for injections was not so large as had been hoped. The Administrator, accompanied by the Chief Medical Officer, made his annual *malagas* round both islands in May and June, beginning in Savai'i, where eleven days were spent, whilst Upolu was visited from the 30th June to the 21st July, Manono being also included. The general health of the people seen *en route* was good.

In April Safotu Hospital was put in charge of a Native medical practitioner, who also has paid periodical visits to Falelima.

In January, 1931, three Native medical practitioners returned from the Central Medical School, Suva, having passed their final examination very creditably. Ten candidates in all presented themselves for the examination, of whom eight passed, and the three Samoans occupied first, fourth, and fifth places. Jelu Kuresa, who was taking a refresher course of one year, headed the list, and was also first in medicine, surgery, and public health, whilst he was second in materia medica. He was awarded Sir Maynard Hedstrom's gold medal in public health. The fourth Samoan student, Okesene, was successful in passing the first-year examination, and gained Sir Henry Scott's gold medal in anatomy. The results of the scheme speak very well for the future, and are a striking testimony to the efficiency of the teaching staff of the school. Three students were sent to Suva in January to make up the quota of four. The course of study at the school was increased during the year from three to four years.

The Chief Medical Officer paid a short visit to the Medical School in Suva at the end of August, and again had the privilege of seeing Makogai Leper Asylum by courtesy of the medical authorities in Fiji.

The attendance at the Apia Hospital is about the same as last year, but Tuasivi and Aleipata show a marked decrease. The map which accompanies this report shows the various centres at which Natives can obtain medical treatment.

The figures below show that Upolu carries nearly twice the population of Savai'i, and that the Apia Hospital District contains two-thirds of the whole population of Upolu. The numbers given below refer to the corresponding districts on the map.

Area.	Native Population.	Districts included.
UPOLU—		
(a) Apia Hospital area .. .. .	18,053	12, 13, 15, 15A, 16, 17, and 22.
(b) Aleipata Hospital area .. .. .	5,424	20, 20A, and 21.
(c) Lefaga-Safata area .. .. .	3,047	14, 15B, and 18.
(d) Fagaloa Bay area .. .. .	912	19.
SAVAI'I—		
(e) Tuasivi Hospital area .. .. .	6,356	1, 2, and 4.
(f) Safotu Hospital area .. .. .	3,950	3, and part of 7.
(g) Salailua-Asau area .. .. .	3,926	5, 6, part of 7, 8, 9, 10, and 11.

(a) *Apia Hospital Area*.—This district, comprising as it does 66 per cent. of the total population of Upolu, is the easiest district to work. It extends from Mulifanua and Manono, twenty-two miles to the west, to Falefa, a few miles nearer on the east coast, and has some very fair motor-roads, with frequent motor-bus services in both directions. Early in February of 1931 a dispensary was opened at Mulifanua, with a Native medical practitioner in charge, who has the western and south-western ends of the island under his care. The main hospital in Apia has a staff of four European medical officers, including the Chief Medical Officer, a European nursing staff consisting of a Matron and eight nursing sisters, and twenty-five Native nurses and probationers. In addition to the four Native students in Suva, four Native cadets are attached to the hospital staff for preparatory training. The hospital, in addition to a well-equipped operating-theatre, has a large laboratory, X-ray plant, and electric-light installation. The senior Native medical practitioner acts as a travelling unit, with headquarters at the Apia Hospital.

(b) *Aleipata Hospital Area* still has a Native medical practitioner in charge, with a Samoan cadet and two Native nurses to assist him. He makes *malagas* at frequent intervals in his district for yaws and hookworm treatment, and visits patients in his district as required.

(c) *Lefaga-Safata Area* has now again three dispensaries, in charge of trained Native nurses—at Matautu, Lotofaga, and Satalo.

(d) *Fagaloa Bay*, which is very difficult of access, still has a Native nurse in charge.

(e) *Tuasivi Hospital Area* has a Native medical practitioner in charge, with one cadet and two trained nurses to assist him.