Chest-diseases, 849.

			C INC.				
Pneumonia							
Pneumonia s	secondary	to	influenza,	whooping	-cough,	and measles	
Broncho-pne	eumonia	٠.					
			.:				

There is reason to believe that many of these deaths could be prevented. In some countries the experiment has been tried of making every pneumonia case compulsorily notifiable, and attempting isolation. Apparently the results achieved have not justified the expense and trouble thereby involved, but the fact remains that probably a large proportion of these illnesses are infectious. All associated with epidemics of influenza, measles, whooping-cough, or diphtheria, certainly are. Again, when in the absence of a recognized outbreak of such common infectious diseases, groups of pneumonia or bronchopneumonia cases occur, in a community, affecting in considerable measures virile young adults, adolescents, and children, of which it can be said the infecting agent is virulent, then measures can be taken which give promise of considerably reducing the death-rate from these lung-ailments. Such measures are complete case-isolation to be practised by doctor and nurse, and convalescents to be restrained from close contact with other persons, attendance at indoor public gatherings. &c., until they have completely recovered.

Tuberculosis (all Forms), 617.

The following table indicates the course of this disease since 1926:—

Year		Number of Deaths from Tuberculosis.	Death-rate from Tuber culosis per 10,000 of Mean Population.	Year.	Number of Deaths from Tuberculosis.	Death-rate from Tuber- culosis per 10,000 of Mean Population.
1926	••	727	5·37	1929	642	4·56
1927		668	4·86	1930	649	4·55
1928		699	5·02	1931	617	4·27

New Zealand has the lowest death-rate from tuberculosis in the world. In common with many other countries, including Great Britain, it has steadily reduced in the last half-century. This year's rate is remarkably low. Tuberculosis, however, still takes sixth place as a cause of death in New Zealand, and disables temporarily or permanently many more than it kills.

Of 617 deaths from tuberculosis last year, 501 were assigned to pulmonary tuberculosis, and 116 to other forms of this disease, comprising tuberculosis meningitis and peritonitis, and tuberculosis of the bones, joints, glands, &c.

Pulmonary Tuberculosis.

The pulmonary cases are regarded by most authorities as conveyed from human sources. There were 1,109 notifications of fresh cases during the year.

Other Forms of Tuberculosis.

The 116 deaths last year from other	forms of	f tubercu	ılosis wer	e made ı	ıp as follo	ws:-	
Tuberculosis of meninges and	central	nervous	system		٠		52
Tuberculosis of intestines and	periton	eum					15
Tuberculosis of vertebral colu	.mn						13
Tuberculosis of bones and joi	$_{ m nts}$						4
Tuberculosis of skin and subcu	taneous	cellular t	tissue				
Tuberculosis of lymphatic sys			• •				
Tuberculosis of genito-urinary	system						13
Tuberculosis of other organs							1
Disseminated tuberculosis							18
							116

A small proportion only of these latter deaths, particularly those of children, are deemed by recognized authorities to be possibly due to infection from the cow, and bacteriological tests of milk-supplies in New Zealand have shown the milk-supply to be remarkably free from bovine tubercle.

KIDNEY OR BRIGHT'S DISEASE, 579.

Since 1900, unlike heart-disease, apoplexy, and diseases of the arteries, the death-rate from which have greatly increased, that from kidney or Bright's disease has shown little variation.

Diabetes, 227.

There has been little variation in the death-rate from diabetes in recent years.

MATERNAL MORTALITY.

The questions of maternal mortality and diseases and accidents of childbirth are dealt with fully in the report on maternal welfare by my colleague, Dr. Paget.