Typhoid Fever.—A sharp outbreak of typhoid fever occurred in the Borough of Otahuhu, near Auckland, in February, 1942. The total number of cases up to 9th April was 26, of which 7, although connected with the Otahuhu outbreak, lived outside the borough. Some of the cases were very severe, and 4 deaths occurred. After careful investigation the source of infection was traced to a dairy-farm supplying a depot at Otahuhu from which untreated milk was distributed to customers. A member of the family occupying this farm proved to be a carrier of B. typhosus. Except for two cases apparently unrelated to the remainder, all the patients obtained milk from this depot. Prompt steps were taken to prevent any member of the household concerned from having anything to do with the production or handling of milk, and the milk from the farm was pasteurized before distribution.

The introduction of the Milk-in-schools Scheme has brought about the installation of pasteurizing plants in a number of secondary towns in the Dominion, with the result that pasteurized milk is now more readily available. The increasing use by the public of pasteurized milk should reduce the risks of such outbreaks as the one mentioned above. Scientific pasteurization of clean milk is the only foundation on which to build a safe milk-supply.

The death-rate for typhoid fever in 1941 was 0.05 per 10,000.

Influenza. The death-rate from influenza (all forms) was 0.49 per 10,000 mean population. In 1910 the rate was 0.77.

Poliomyelitis. Four cases of this disease were notified in 1941.

Lethargic Encephalitis. Five cases of this disease were notified in the year under review.

Cerebro-spinal Fever. - As in the World War, 1914-18, cerebro-spinal fever has again shown signs of epidemic prevalence. The outbreak began in the North Auckland Health District, but in due course the infection spread from that area, and sporadic cases have since occurred throughout the Dominion.

The following is a summary of a report submitted by Dr. Dempster, Medical Officer of Health, Whangarei, in regard to this outbreak:

"A sharp outbreak of cerebro-spinal fever took place in the Bay of Islands County during the months of April and May, 1940, centred in the townships of Kawakawa and Moerewa. The total number of cases was 23. The population for the Kawakawa Riding, which was the area mainly affected, is 1,763. The morbidity rate was therefore approximately 13 per 1,000 of the total population.

"The incidence amongst Europeans was 3 per 1,000 (4 cases) and amongst Maoris 40 per 1,000 (19 cases). Six deaths occurred, a mortality of approximately 1 in 4. Of the patients who died, 2 received no treatment, 2 were fulminating, and 2 were in young children. Of the 4 European cases, 3 were fatal (2 fulminating), while of the 19 Maori cases, only 3 were

fatal.

"Fifteen males and 8 females developed the disease.

"The table below shows the age incidence of the disease-

$\Lambda \mathrm{ge}.$			Cases.
" Under 5 years	 	 	 6
" 5 10 years	 	 	 6
" 10-15 years	 	 	 1
" 15–20 years	 	 	 3
" 20-25 years	 	 	 1
" 25–30 years	 	 	 4
" 30–35 years	 	 	 $\dots 2$

"It will be seen that the main incidence was in children under ten years."

There was no indication as to how the disease was introduced into the district, but it was soon clear that the infection had become established in workers in the Auckland Farmers' Freezing Co. works at Moerewa. Dr. Dempster's investigations showed that the meningococcus was widespread throughout the employees at these works. An interesting point is that, of the six employees who developed the disease, four were working in the cool chamber. This suggests that the effect of intense cold on the nasal nuccous membrane lowers the local resistance sufficiently to allow penetration by the meningococcus.

The incubation period was established in the following three cases which occurred outside the recognized infected area: --

Case No. 1: Male, nineteen years, was discharged from the Whangarei Military Camp on the afternoon of 30th April. Passed through the infected area at approximately 4.30 p.m. that afternoon. Became ill on the 2nd May in the morning. Incubation period, approximately thirty-six hours.

Case No. 2: Male, nine years, living at Ngawha. Was visited by freezing-works employee, who cut hair on 4th May. Became ill on 7th May. Incubation period three days.

who cut hair on 4th May. Became ill on 7th May. Incubation period three days.

Case No. 3: Male, four years, living at Kerikeri Inlet. Visited Moerewa with parents on 24th May, off colour on 30th May. Incubation period six days as a maximum. One of the parents may have become a carrier on 24th May and infected child at a later period.

During the year 163 European cases and 47 Maori cases were notified from the whole of New Zealand. There were twenty-five European and eight Maori deaths from this cause.

Whooping-cough and Measles.—Whooping-cough was more prevalent than usual. There were 67 deaths from this disease, and 4 deaths from measles.

Puerperal Sepsis. Sepsis following childbirth was responsible for 17 deaths (13 in 1940). The deaths due to sepsis following abortion were 24, a substantial increase on the figure of 14 recorded as due to this cause in 1940.