Tuberculosis.— Deaths from tuberculosis (all forms) were 597, as compared with 600 in 1940. The death-rate per 10,000 mean population for respiratory, non-respiratory, and all forms of tuberculosis, is set out in the following table:—

Year.						Respiratory Tuberculosis.	Non-respiratory Tuberculosis.	Tuberculosis (all Forms).	
1940 1941						$3 \cdot 24$ $3 \cdot 19$	0·64 0·69	3-88 3-88	
							!		

During the past two years there has been a marked increase in the number of notifications of males suffering from pulmonary tuberculosis. This is mainly in the age groups from which our military forces are drawn, and is due to the special methods of examination which were adopted to climinate recruits suffering from tuberculosis.

Some two thousand persons employed in various industries in Wellington were investigated by miniature radiography (35 mm, film). The suspects were referred to the Wellington Hospital for further examination. The work is not yet complete, but the information obtained to date has shown the value of group examinations by this cheap and effective method.

Veneral Diseases. The increased incidence of venereal disease, particularly syphilis, constitutes a grave public-health menace. Syphilis, which until recently was comparatively rare in New Zealand, at any rate in its infective stages, first showed signs of increase in Wellington about the time of the Centennial Exhibition. Since then the increase has been maintained, and in addition the same tendency to increase has been manifested in Auckland and Christchurch. So far little change in the situation has been seen in the smaller towns and in country districts. The extent of the increase of syphilis in the main centres is shown in the following figures:

Number of Persons dealt with for the First Time at the Venereal Disease Clinics and found to be suffering from Syphilis.

			Auckland.		Wellington.		Christehurch.		Dunedin.		Total.	
		М.	F.	М.	F.	M.	F.	М.	F.	М.	F.	Total.
		j				1				: 	i i	
1938		54	34	15	15	18	10	10		97	59	156
1939		59	43	18	25	19	11	12	5	108	84	192
940		63	37	77	58	12	8	22	8	174	111	285
1941		102	57	96	63	29	17	33	6	260	143	403

Figures for gonorrhoa indicate no such increase, but do not disclose the full facts. Many patients who would formerly have attended the public clinics are now treated by their own doctors with drugs of the sulphonamide group.

The steps taken by the Department during the last two years to cope with this public-health menace are:—

- (1) Medical officers in charge of the V.D. clinics in the four main centres were appointed. Assistant Inspectors of Hospitals and were asked to undertake periodical tours of inspection of the smaller hospitals in New Zealand with a view to ascertaining whether treatment facilities in institutions were adequate and generally to advise Medical Superintendents:
- (2) The matter was discussed at a conference of medical practitioners which was convened by the Department for the purpose of considering public-health problems arising out of the war:
- (3) Publicity has been given and will continue to be given through articles in the New Zealand Medical Journal:
- (4) An amendment of the Health Act, 1920, was passed which enables more adequate control of persons suffering from syphilis. In brief, the Medical Officer of Health now has power to order any person suffering or suspected to be suffering from syphilis to be detained in any public hospital where necessary diagnostic and treatment procedures can be carried out. The Medical Superintendent of such hospital is under an obligation to accept the patient and to hold him until the Medical Officer of Health agrees to release:
- (5) New regulations have been gazetted. Powers which formerly were vested solely in the Director-General of Health are now vested in the Medical Officer of Health. The regulations thus make for decentralization, with a consequent saving of time in bringing patients under treatment. More stringent conditions have been laid down with regard to the nature of the examination which must be carried out in the case of suspects reporting for investigation and the standards which must be met before the patient can be regarded as having been cured:
- (6) Every endeavour is being made to trace contacts in order that they may be brought under treatment.