In 1927, when statistics were first available for deaths from septic abortion, the maternal-mortality rate exclusive of such deaths was 4·41. In 1943 it was 1·71.

In 1927 the death-rate from puerperal sepsis (excluding septic abortion) was 2 per 1,000 live births. By 1943 it had fallen to 0·30.

The work of Dr. Paget and of his former associate, Dr. Henry Jellett, contributed largely to the favourable turn of affairs shown by these figures. The measures planned by these officers and subsequently adopted by the Department under the direction of Dr. Paget included the introduction of a thorough antiseptic and aseptic technique, a revision of the standard of training of obstetrical nurses, and closer supervision of maternity hospitals.

Dental Hygiene.—The activities of the Dental Division have continued on a steadily increasing scale during the year under review. The School Dental Service in particular has been further expanded. It now operates at 413 centres, as compared with 387 at the end of the previous year. The staff has increased to 618 (including 150 student dental nurses). The number of children under regular treatment is 168,588, an increase of 22,092 during the year. Additional schools to the number of 83 have been brought within the scope of the service, making the total number of schools now receiving treatment 2,203.

There has been a further substantial increase in the number of pre-school children enrolled for regular dental supervision. The number now stands at 18,122, as against 12,993 at the end of the previous year, an increase of 38 per cent. during the year.

The total number of operations for the year was 1,462,404. This number included 779,534 reparative fillings in both permanent and deciduous teeth, 201,232 prophylactic fillings, and 81,524 extractions.

Evidence of improvement in the dental condition of new school entrants over a period of nine years is afforded by statistics that are now available. While it would not be justifiable on such limited evidence (it refers to seven centres in various parts of New Zealand) to assume that there has been any significant improvement over the whole Dominion, the figures nevertheless reveal a satisfactory trend. The statistics in question relate only to children who had not been under dental treatment prior to entering school. Stated briefly, they reveal that whereas the average caries index for the 1934 group of new school entrants at the seven centres was 11·4, the 1943 group of new entrants at the same centres showed an average caries index of 7·3.

Dental health education received added emphasis during the year through the appointment, in a temporary capacity in the meantime, of a senior dental officer to work in close collaboration with the Departmental Committee for Health Education and to direct this work within the Dental Division. A school dental nurse experienced in this work is already attached to Head Office staff, and the appointment of a second nurse has been approved. The field staff of the School Dental Service has been active during the year in the endeavour to implant the idea of positive dental health in the minds of parents and children. This work culminated in a Dominion-wide Dental Week in February, 1944, when a week's intensive campaign was conducted by the whole staff. The dental health educational activities recorded for the year numbered 7,246.

The further development of State dental services has received close attention during the year.

Additional University bursaries for dental students were granted at the beginning of 1944 to the number of 36.

Owing to the increased responsibilities arising from new emergency regulations, the Dental Sub-committee of the National Medical Committee was reconstituted in November, 1943, as the National Dental Committee. Its functions are to ensure the orderly recruitment of dental personnel for the Armed Forces, and to advise the Controller of Man-power on dental man-power problems, more especially those concerned with the control of practising locations of dentists and the direction of dental graduates to employment.

A representative Dental Advisory Committee was established during the year to collaborate with the Education Committee of the Rehabilitation Board in connection with problems arising from the rehabilitation of dental personnel serving with the Forces, and of other ex-service personnel who may wish to pursue dental studies.

The organization established and administered by the Department as part of the military medical boarding system for the dental examination and treatment of all Army personnel on return to New Zealand has continued to operate satisfactorily during the year. Both the boarding and the treatment are carried out by private dental practitioners under arrangement with the Department.

The routine administration of the affairs of the Dental Council of New Zealand has been continued throughout the year, and matters arising from the administration of dental legislation have received attention.

Maori Hygiene.—The mean Maori population was estimated to be 96,984, as against 94,473 in 1942. The following table enables a comparison between Maori and European vital statistics:—

	Maori.	European.
Birth-rate per 1,000 of population	45·78	19·70
Crude death-rate per 1,000 of population	17·27	10·04
Infant-mortality rate per 1,000 live births	90·09	31·37
Maternal-mortality rate per 1,000 live births	2·25	2·21
Death-rate, tuberculosis (all forms), per 10,000	36·91	3·72