FOOD AND DRUGS

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Milk.—Under present arrangements the Department of Health is responsible only for the sampling of milk at the point where the vendor delivers the milk to the consumer. The control of the production on the farms and the operation or control of treatment houses is exercised by other Government Departments.

In the past, when the retailing of milk was mainly in the hands of producer-vendors or of vendors who obtained milk from one or at most two or three producers, it was generally possible to sheet home responsibility for watered or dirty milk to the actual offender. Under the present arrangements the milk from a number of producers is either bulked at a depot and redistributed to vendors, or is delivered by producers to a treatment house. Any shortcomings in the milk of individual producers is thereby masked, and if dirty milk or watered milk is detected the vendor from whom the sample is obtained is able to prove that he obtained the milk from a depot or from a milk association. Thus, the Health Department is powerless to effect any improvement in the country's milk-supplies, but it nevertheless receives most of the blame, because the public believes that the Health Department is responsible for the quality of all food sold. Furthermore, the quality of the milk-supplies has such a close and obvious bearing on the public health that the Department cannot be indifferent.

The remedy is a simple one, and one course of action only is likely to be effective. At every collecting depot and at every treatment house arrangements should be made for the taking of a sample from each producers' milk every day. For purposes of determining butterfat, &c., and detecting added water, each supplier's daily samples could be bulked in a composite sample and tested weekly or fortnightly; reductase tests could be made daily. Payment of the producer should be raised in accordance with the quality of the milk as tested. Such an arrangement would greatly reduce the necessity for sampling at the retailer's end, which now serves no purpose other than the collection of information.

An arrangement such as this has been in force in Dunedin for a year and has resulted in a very great improvement in the quality of the milk. The greatest deterrent against adulteration is the certainty that daily samples are being taken.

The superiority of pasteurized milk over raw milk is now generally acknowledged, but the prejudice against pasteurization still flourishes. A raw milk is unsatisfactory even when obtained from one supplier, but bulked raw milk is exceedingly dangerous, as one diseased cow may infect a large quantity of bulked milk. The principle of free choice, generally speaking, is a sound one, but children, who are the chief consumers of milk, have no free choice in the matter when their parents give them raw milk to their detriment. In New York City it is unlawful to sell raw milk except on a doctor's prescription, and if we allow raw milk to be sold it should not be bulked raw milk. To allow treatment houses that are not producing pasteurized milk up to their full capacity to sell bulked raw milk is clearly quite contrary to the interests of public health and is an unnecessary concession to ignorant prejudice.

The following tables show the results of sampling of milk and other foods: -

Samples Not Percentage of Samples Year. Samples Taken. Complying. Not Complying. 1945 17,811 1,563 $8 \cdot 7$ 1946 17,368 1,392 8.0 . . 1947 16.1061,342 8.0 1948 18,244 1,502 8.2 . .

Table 14—Results of Milk Sampling