A favourite argument against the Department was that the delegates at the April meeting were not told the purpose of the hospital—that they thought it was a small affair for plague, &c., and that in any case the sub-committee were not authorised to proceed with the work till the matter had been further referred to the local bodies. The first contention, if true, surely argues a sad lack of method in the way business affairs are transacted by the representatives of the public, for we must conclude that they officially signed a document without troubling to inquire what it was about. We know, however, that the original invitation to the meeting and the matter discussed at the meeting itself left no doubt as to the object of the scheme. That the sub-committee were justified in going on with the work is proved by the announcement of the Chairman of the original meeting that immediate action would be taken. Further, the concluding words of the document to which the local bodies signed their consent are: "The sub-committee are now taking steps to secure a site and prepare plans in order that this building be started as early as possible."

Many of the criticisms do not call for reply—such as the assertion of several who made themselves prominent that the Health officials had trumped up the need for an infectious-diseases hospital in order to justify the existence of the Department, that they had invented the plague cases for the purpose of scaring the public into adopting the scheme, and so forth.

The year 1903-4 opens, then, with things as unsatisfactory as ever as regards infectious disease, and unless the recent proposal of a section of the Hospital Board to acquire a part of the Domain for a site is followed out it will be necessary for the Department to push the Point Chevalier scheme against the present wishes of the local bodies, who possibly may change their minds once more.

Provision for Infectious Disease in the Country.

In most districts the cases are treated in their own homes, the local bodies exercising a more or less perfunctory care as regards isolation and disinfection.

At Thames and Waikato the Hospital Boards, acting on behalf of the local bodies, have provided a certain limited amount of accommodation for cases sufficient at ordinary times for the needs of their districts.

At Rotorua great difficulty was found in sending the cases to Hamilton Hospital, since the cost of the special infectious-diseases railway-wagon is prohibitive to many. Further, the Hamilton authorities object to cases being sent from a district not contributing to the funds. It has been arranged, therefore, that the temporary accommodation ward prepared last year be now converted into a hospital where cases may be treated. Probably this will prove quite satisfactory.

Sanatorium for Consumptives.

The necessity for an institution for the open-air treatment of consumption has been so long apparent that it is with great satisfaction that I am able to report on the work done at Mangakawa, near Cambridge. The site chosen by Dr. Mason last July is an admirable one as regards position, and there was the additional advantage of a good house and well-laid-out grounds as a basis for the Sanatorium, so that in spite of necessary alterations we have been able to start in a small way, treating cases since December, 1902. The climate at Cambridge is much drier than in most parts of the North Island, and in consequence the district has for long had a reputation for the treatment of consumption. A complete set of meteorological instruments has now been set up at the Sanatorium, and we shall have the advantage of accurate data as to climate. The distance from Cambridge is about five miles, the road rising steeply for the last two miles, ascending the hill through native bush and scrub till the house is reached at an elevation of some 1,100 ft. above sealevel. Situated on a ridge between deep gullies, a most extensive view of the Waikato and Thames Valleys is obtained—indeed, it is hard to imagine more magnificent scenery—a factor not without its influence in the treatment. One of the first things attended to was to connect the building by telephone with the Cambridge Post-office, and with the house of Dr. Roberts, Medical Officer. The necessary additions are in the hands of the Public Works Department, and were commenced in November; they are now approaching completion. Although the original house was large, a