

It will be noted that there is a large increase in the number of notifiable diseases during 1907, as compared with previous years. Scarlet fever and diphtheria are mainly responsible for the rise, the former having 433 and the latter 156 cases in excess of 1906.

*Scarlet Fever.*—There has been a general increase in this disease in the boroughs, town districts, and counties, but notably in the former. In Wellington last year 135 cases were notified, while this year the number has risen to 525. An epidemic at Carterton has caused the number of cases notified to rise from 5 to 61. Slight increases in New Plymouth, Lower Hutt, Pahiatua, and Petone Boroughs account for most of the remaining increase.

The most notable diminution occurred in the Masterton Borough, where the number of cases dropped from 111 to 30. Palmerston North, Marton, Eltham, and Stratford also show a slight decrease on the previous year.

The outbreak in Wellington started just before the close of last year, and continued for the first few months in this year. Though searching investigations were made, the cause could not be traced to any particular school, street, or milk-supply.

At Carterton the outbreak was traced to some unnotified cases attending school and spreading the infection among the school-children, and by these again carried to their homes. Legal proceedings were instituted in two cases, and the offenders were convicted and fined. These examples, and the resulting educatory effect of publicity, seemed to have a deterrent effect, as the number of notifications gradually declined, there being no epidemic recrudescence. The school was closed during the epidemic and thoroughly fumigated.

During April an outbreak of scarlet fever occurred at Featherston, but no common cause could be discovered. The school was thoroughly disinfected. Here again suspicions, unsupported by sufficient evidence, seemed to point to unnotified or tardy notifications being the cause.

*Enteric Fever.*—This disease shows a slight increase over the notifications in 1906. This has occurred in the town districts and counties, the boroughs generally remaining in the same position as last year. Wellington's record shows a marked similarity to the number notified last year. The figures are 25 in 1907, 24 in 1906, and 33 in 1905. Amongst other boroughs the most marked variations are—New Plymouth, increase from 3 cases in 1906 to 9 in 1907; Wanganui, increase from 4 to 6 cases; and Feilding and Karori had 2 and 1 cases, where last year the record was nil. Diminutions occurred at Petone, where 1 case was notified, against 3 last year; Lower Hutt, nil as against 4 cases; Patea, nil as against 1 case; Stratford, 2 as against 7; and Greytown, nil as against 2.

It is satisfactory to be able to record that only one town district was stricken by enteric. This was at Martinborough, which had the misfortune to be credited with 5 cases. The pollution of shallow wells in close proximity to cesspools is presumably the cause of the outbreak, and in the absence of any other traceable or suspicious origin a full and systematic analysis of the town water is being undertaken.

Last year Bull's and Johnsonville each had 1 case, but this year they have a clean sheet.

Turning to counties, we find that the number of notifications has exactly doubled that of last year. Taranaki, Rangitikei, Oroua, Horowhenua, Hutt, and Waitotara are mainly responsible for the advance; while Patea, Manawatu, Stratford, Akitio, and Kairanga, though last year credited with 1 or more cases, this year have none.

*Diphtheria* was notified on 296 occasions this year. This shows a very large increase over the figures for 1906, which were 140. The rise has mainly occurred in the boroughs, while the counties have also contributed 36 more cases than were notified last year. The town districts show a slight decrease.

Wellington was responsible for a large proportion of the total, having an increase of 80 cases. Petone had 11 more cases, and Lower Hutt 9, than last year. Other contributors were Palmerston North with an increase of 3 cases, Wanganui with 3, New Plymouth with 3, Inglewood with 5, Miramar with 4, Greytown, Onslow, and Karori with 2 each, and Hawera, Patea, Eltham, and Waitara with 1 each.

The most notable diminutions were in the Boroughs of Masterton and Marton, both of which had a decrease of 3 cases.

In the town districts the only variations worthy of comment are at Martinborough, which had a decrease of 4 cases, and at Waverley, from whence 2 cases were notified this year, as against nil in 1906.

Generally throughout the counties there was a marked increase in the number of notifications. The worst sufferers were Kiwitea and Rangitikei with an increase of 12 each, Pahiatua and Mauriceville, with 3 each, and Horowhenua and Stratford, with 2 each. In the Clifton County 6 cases were notified, as against nil last year. This was the result of a small outbreak taking place at Ohura. To the Hutt County must be given the pride of place as showing the greatest diminution—viz., 8 cases. South Wairarapa, Masterton, and Kairanga were exempt from any visitation of the disease this year, although they were each credited with 1 case in 1906.

*Leprosy.*—Only one case of any dangerous infectious disease was recorded within the district during this year. To Dr. Ross's acquaintance with, and knowledge of, tropical diseases is due his early suspicion of the nature of the case, to which he at once drew my attention.

In January last a Chinese market-gardener, living outside Masterton, sought treatment at the Masterton Hospital for symptoms of intestinal obstruction. In company with Dr. Ross a visit was paid by Dr. Makgill and myself. The patient presented a well-defined group of reddish-purple raised blotches or maculæ—about the size of a threepenny-piece to that of a sixpence in