has been in this office since its commencement, has now, for private reasons, permanently severed her connection with the Department. After an interval a satisfactory substitute has been found in Miss E. L. Rowe.

To secure instruction for Sanitary Inspectors a class for Inspectors of Nuisances was at my request arranged for by the Technical College in Christchurch, and was attended by twenty-six students. The lectures and practical demonstrations were given by Inspector Kershaw and myself. An examination by the New Zealand Branch of the Royal Sanitary Institute was held in Christchurch in December. It is to be hoped that now facilities are given for the obtaining of this certificate local bodies will only appoint persons holding this certificate as Inspectors for full-time appointments.

Inspector Kershaw has given great assistance in training Inspectors who have been temporarily attached to this office before being permanently appointed to hospital districts: he has also assisted in the compilation of by-laws for local bodies.

Inspector Middleton has been attached to this office for special work since leaving the West Coast in July. He was at first fully occupied in seeing to the enforcement of the Plague Regulations and in carrying out special inspections. After Miss Symes left he assisted in the office in keeping going the office routine until Miss Rowe was appointed and became accustomed to the office routine.

I attach herewith appendices dealing with the following matters: Notifiable infectious diseases; dangerous infectious diseases; provision for infectious diseases; private hospitals and midwives; water-supplies, &c.; sanitary inspections, with Inspector's returns; special inspections; insanitary buildings; special reports; sanitary condition of Native race; instruction for Sanitary Inspectors; by-laws; Quarantine Immigration Restriction Act; Sale of Food and Drugs Act, with table of returns and legal proceedings; offensive trades.

I have, &c.,
H. E. Finch, M.B., B.S., D.P.H.,
District Health Officer.

Otago.

To the Chief Health Officer.

Since the Department issued complete sets of outfits in which to forward specimens to the laboratories for report considerable advantage has been taken by medical practitioners of the facilities afforded. Still, however, a number of practitioners will not take the trouble to forward specimens to confirm their diagnosis in diphtheria, typhoid-fever, and pulmonary tuberculosis, and on several occasions the Hospital Board has been put to the expense of sending Inspectors long journeys to investigate or disinfect in cases which have turned out to be incorrectly diagnosed. We have made it a practice now, however, to request material for laboratory diagnosis in all cases where these infectious diseases are notified without the diagnosis being confirmed.

The notification of hydatids has almost fallen into abeyance, and it would be well if the medical profession were circularized drawing their attention to the fact. The public-health aspects require attention in this district, but no scheme could be complete without a survey of its incidence on the whole Dominion.

As I have previously pointed out, School Committees and headmasters are far too prone to close their schools when an epidemic of infectious disease appears amongst the scholars. In some cases this school closure is quite unnecessary and can serve no useful purpose.

On two occasions during the year I consulted with the Christchurch Hospital Board concerning the appointment of a Clinical Pathologist and Bacteriologist. The Board has now very wisely made a full-time appointment, and in Dr. Pearson, who is shortly to take up his duties, the Canterbury District has secured the services of an energetic and capable officer.

Owing to the limited opportunities which the Inspectors in any one centre have of furthering their experience, it might be advisable to interchange Inspectors for a few weeks every two or three years, or even to send them in turn to Sydney or Melbourne.

Regarding the instruction of medical practitioners in the more recent methods of therepeutic immunization such as bacterial vaccines, tuberculins, sera, &c., owing to the difficulty which medical practitioners experience in getting away for post-graduate instruction, it might be well if the departmental bacteriologists organized some scheme of instruction in their districts at central places. Small outfits could be carried, and instruction given by arrangement in the more simple laboratory methods of diagnosis and treatment, and in the modern uses of bacterial vaccines, sera, tuberculins, &c. Such instruction would, I have no doubt, be welcome to the practitioners, and indirectly of great good to the community.

The scope of the work covered by the laboratory continues to enlarge, but all purely pathological material is examined in Professor Roberts's laboratory, and is not included in the attached report.

A growing feature of the work, and one which I think should be encouraged, is the correspondence passing between medical practitioners and the laboratory in the matter of diagnosis and treatment by tuberculins, bacterial vaccines, and sera. It is our aim to have available the most recent information on these subjects, and to advise those seeking our help.

I think the time has come when the Department should make arrangement for the manufacture and supply locally of the more commonly used bacterial vaccines and tuberculins. Numerous requests are received for freshly prepared material, and until the matter is put on a proper footing we cannot cope with them.

Owing to the want of space in the rooms available, new laboratories in the Dunedin Hospital buildings were equipped during July of this year. The new accommodation consists of a large general laboratory, culture media room, centrifuge room, work-room, and waiting-room for patients, and practical class-room to accommodate eighteen students.