

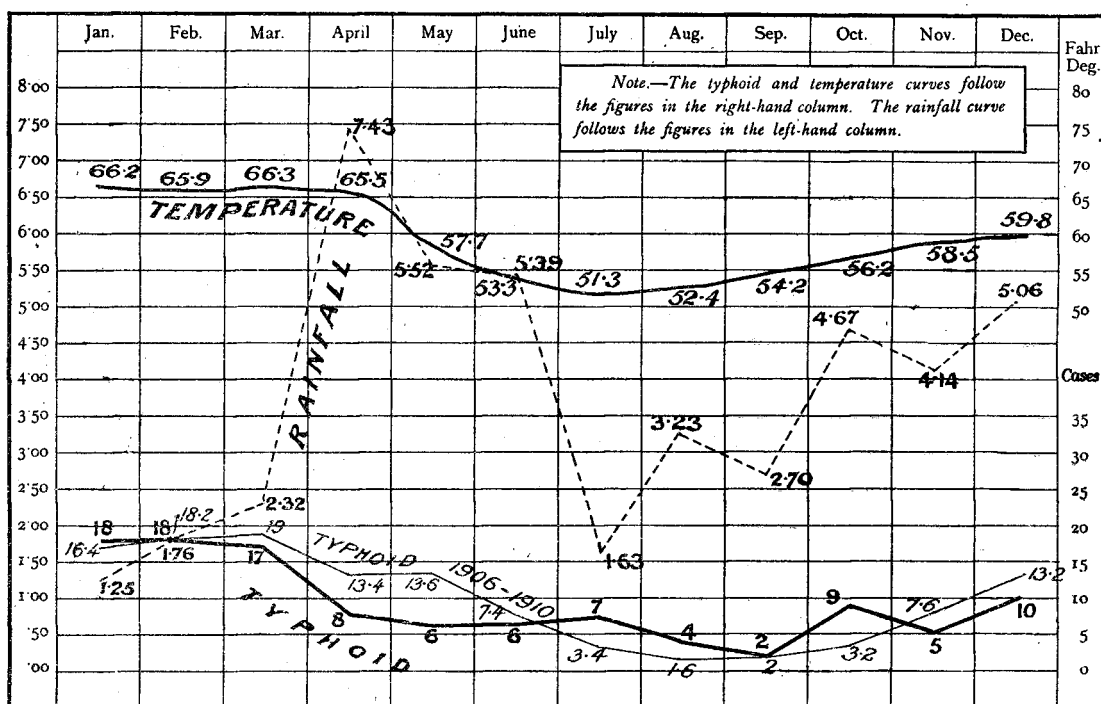
Waikato Hospital. It is probable that quite a third of the cases notified during the year were Maoris. Among the European population, therefore, there was no very alarming increase, and the high figures for the year can in part be attributed to the fact that the Health Department has taken over the administration of the Native medical service, and consequently there is now some systematic investigation into the sanitary condition of these people. A number of cases which were formerly ignored are therefore now being notified.

Apart from this, typhoid was prevalent in the district, especially during the first four months of the year. An examination of the meteorological table shows that the first three months were exceptionally dry, and doubtless this had the effect of increasing the typhoid rate. The heavy rainfall in April and May appeared to check the disease, but the very dry winter was followed in spring by a recrudescence of the disease. It is interesting to note that in spite of the generally high incidence Auckland City had only 58 cases, or one less than last year. In the suburban boroughs, however, there were 35 cases, compared with 14 the previous year, Mount Eden and Mount Albert suffering most severely. Onehunga had but 1 case, possibly a result of the thorough cleansing which was necessitated by the appearance of plague there early in the year. Rotorua and Thames Counties and Waihi Borough suffered severely largely owing to the Native element. In the Boroughs of Cambridge, Te Aroha, and Whangarei no cases were notified.

The accompanying chart shows the relation of temperature, rainfall, and typhoid so far as Auckland and the suburban boroughs and road districts are concerned.

Typhoid Fever.

Auckland and Suburban Boroughs and Road Districts, 1911.—Typhoid, Temperature, and Rainfall Curves.



The thin typhoid line exhibits the average monthly cases during five years, 1906-10.

Dr. Chesson (Wellington) reports :—

There have been more cases this year—viz., 357, as against 233 last year.

An epidemic of somewhat serious proportion occurred in the Waiapu and Cook Hospital Districts, the former having 100 and the latter 123 reported cases. This was chiefly confined to the Maori population, and was due to the habits and insanitary surroundings of the Maoris as regards their habitations and total disregard of ordinary care and cleanliness. In Waiapu, where, on the advice of the Department, active measures were taken by the Hospital Board—isolation camps being established and an Inspector appointed to carry out measures of isolation, disinfection, &c.—the disease was speedily reduced from 35 cases in April to 8 in the two following months, and gradually down to only 1 in October and 2 in November and December, and at the time of writing this report there are no cases in that district.

I regret having to point out that in the neighbouring district of Cook—where at no time did the total cases in one month equal those in Waiapu—the disease still kept up, and in December 19 cases were reported. Since then, however, an Inspector has been appointed, and active measures put into operation.

Another outbreak occurred in the Taranaki District, but did not assume such large proportions, and was speedily checked by active measures. Hawke's Bay, Wairoa, Wanganui, and Wellington