In view of the hysteria on the part of a certain section of the public, the Chairman did not think there would be much advantage in growing vegetables at the farm colonies for selling purposes, but they could grow enough to supply their own institutions.

Mr. Reakes did not consider poultry-keeping a suitable occupation for consumptive patients, as, though avian tuberculosis was not transmissible to humans, he was strongly of opinion that human tuberculosis was transmissible to birds.

After much discussion Dr. Makgill moved, That it be a recommendation to the Government to establish tree-planting colonies or other forms of suitable employment for ex-consumptives who are not able to establish themselves in farms, orchards, and gardens. Seconded by Dr. Blackmore and carried.

The Conference adjourned at 5.45 p.m.

WEDNESDAY, 23RD OCTOBER, 1912.

The Conference reassembled at 10.15 a.m.

The Chairman informed the Conference that the following matters had been entered on the agenda paper for discussion: Open-air schools; night shelters for patients; restriction of immigration; sterilization of consumptive patients. And, under "Professional and Technical," Medical Superintendents of sanatoria had been added.

Protection of Food-supplies.

In introducing the subject for discussion the Chairman stated that the Conference had the advantage of having the Chief Veterinarian present, who, he had no doubt, would give all the assistance he could with regard to the many matters they had in common.

Mr. Reakes addressed the Conference as follows:—

In dealing with the question of tuberculosis in man the existence of the disease among the lower animals constitutes an important factor, seeing that meat and milk enter so largely into the everyday diet of mankind. Among domesticated animals those principally affected are cattle, pigs, and poultry. The bovine race has been the subject of tubercular disease for many centuries. Pigs, I believe, have not; but these animals become readily affected when exposed to direct sources of infection. Outbreaks of avian tuberculosis are common, but as the evidence available all goes to show that avian tuberculosis is not communicable to the human race I will not now take up time by speaking further upon it. In the case of tuberculosis of cattle and pigs, the flesh of animals of both these races is used largely for human food, and consequently it is necessary that steps be taken to prevent the possibility of human beings becoming infected through eating the flesh of badly affected animals. Seeing that in New Zealand this flesh is always cooked more or less before being consumed, I do not believe that the risk is at all serious. It is, however, necessary to ensure as absolute safety as possible, and thoroughly adequate steps are taken by the Department of Agriculture to safeguard the health of meat-consumers in the matter of tubercular disease.

The inspection of meat is dealt with on comprehensive lines so far as the principal centres of population are concerned, every city and borough with a population of over 2,000 being compelled by law to establish and maintain a public abattoir, where all animals killed are subjected to examination, on slaughter, by a Government Inspector. No meat except pigs killed by *bona fide* farmers can be sold in any such city or borough unless from stock killed and passed at the abattoir or a meat-export slaughterhouse, where Government inspection is also compulsory. Farmers' pigs coming in are inspected before being cut up and sold; also at all bacon-factories the pigs are inspected.

No meat is allowed to be exported unless it be from stock slaughtered under Government inspection at a meat-export slaughterhouse or an abattoir, thus ensuring that the consumers of New Zealand meat exported to other countries are protected as well as the consumers here. The system under which the carcases and viscera of slaughtered stock are inspected for tuberculosis is up to the highest standard of strictness and thoroughness considered by the best authorities throughout the world as being necessary for the safeguarding of the public health.

Then, as regards milk, it is obvious that thorough measures are necessary, seeing that it is largely consumed in the raw state, and moreover is relatively taken in the greatest quantity by infants or invalided adults, who naturally are less able to resist the attack of the specific organism. Our system of inspection of milk-supplies at the farm is, I venture to assert, a good one. In all centres of population, from small townships upwards, all dairy farms from which milk is sold for direct human consumption have to be registered. All registered dairies are under inspection. In the smaller centres the inspection is certainly not so complete as in the larger, but in these it is distinctly good, and I hope to see it improve year by year. In the larger cities I am satisfied that the work is carried out well, and it will compare more than favourably with any similar work carried out anywhere in the world. In this country we have a legislative measure—the Stock Act—which is very comprehensive and very far-reaching in its provisions, and it is utilized to its fullest extent in dealing with tubercular dairy cows. I have lately initiated the practice of placing city dairy-inspection directly under the control of properly qualified veterinarians. One is already at work in Wellington, another is about to take up duty at Auckland, and at Christchurch and Dunedin for some time past a veterinary officer, though also performing other duties, has given a good portion of his time to the direct supervision of dairy cows. These qualified officers are aided by a staff of efficient lay Inspectors, who devote the whole of their time to the work.