Act was first passed in 1904 it was, owing to the shortage of midwives, inadvisable to shut out any women from the register who could show even fairly satisfactory training, but with the ever-increasing number of pupils being turned out year by year from the State maternity and other training-schools this is no longer necessary.

State Maternity Hospitals.

In the St. Helens Hospitals, Auckland, Wellington, Christchurch, Dunedin, and Gisborne 1,072 cases were confined during the year. 1,046 children were born alive, and forty-four still-births. There were eight maternal deaths, and twenty-eight deaths of infants.

There were also attended 519 outdoor cases: no deaths of mothers and no deaths of infants.

Sixty-five pupils have been trained during the year, and sixty-one registered; forty-eight are now in training.

A property was recently purchased in Invercargill for the purpose of establishing a St. Helens Hospital for that district, and as soon as some necessary additions are made it will be opened.

A property adjoining the St. Helens Hospital, Auckland, has been purchased, and this addition to the site will allow of the erection of a new hospital and the conversion of the present hospital into a nurses' home.

The building of the new hospital at Christchurch, which was deferred on account of the war, is again under consideration. The present building is quite inadequate for the increasing work, and the lack of suitable accommodation for the nursing staff renders administration exceedingly difficult.

The accommodation of the St. Helens Hospital in Dunedin, owing to the existence of the Medical School Maternity Hospital in the same town, has not been seriously overtaxed, but the institution is still greatly in need of improvement, especially in regard to convenient and suitable sanitary arrangements. A new hospital should be erected and the present building used as a nurses' home.

In connection with the work of the St. Helens Hospitals, which is of so much value in the saving of maternal and infant life, an attempt has been made to extend the benefits of the hospitals to more than those who actually enter for treatment or are attended in their homes by St. Helens nurses. Arrangements were made during the year, and widely and continuously advertised, that advice would be given to expectant mothers at certain hours at the hospitals by the Medical Officers and trained staff. Circulars were sent to the members of the medical profession in all centres inviting them to send their patients to have those observations made regarding their state and fitness for the trial before them, which by timely treatment would save so many lives. It was recognized that frequently symptoms were overlooked by private practitioners owing to lack of time (especially during the war) and opportunity to observe their patients during pregnancy. Patients sent by doctors for such examination and advice were not to be treated as hospital patients, but to continue the patients of their private medical attendants. While these ante-natal clinics have been attended by a fair number of women, and undoubtedly some good has been accomplished, it is to be regretted that the medical profession has not taken advantage of this offer of help.

It is intended during the forthcoming year to take other steps to spread the benefits of these State Maternity Hospitals throughout the Dominion, and Hospital Boards which have not already done so are also being encouraged to establish maternity wards in connection with the General Hospitals. The Wairau Board has already done so, and the Hawke's Bay Board is proceeding in this direction.

Private Hospitals.

There is not much to report concerning the private hospitals of the Dominion since last year. No new ones of any importance have been established.

Some interesting returns have been obtained from those nurses, trained in St. Helens Hospitals, who have established private maternity hospitals. There are now thirty-five of these hospitals in centres and in country districts, conducted by nurses trained in the State Maternity Hospitals. Their average has been fifty-eight confinements per annum, and these range from 178 in one hospital to three and four in small ones which are not entirely for midwifery cases, and in the year 1915–16 there were 1,737 births in these hospitals.

General inquiries as to the work of infant-life saving, apart from actual midwifery, elicited some interesting replies. Most of the nurses seem to have the opportunity of giving useful ante-natal advice and securing medical treatment if necessary for their intending patients. This undoubtedly is one reason of the few serious cases and very few deaths in private maternity hospitals conducted by well-trained nurses, who quickly recognize the signs that, without treatment or early assistance in labour, would lead to trouble.

The after-work of the nurses in connection with the babies born in their establishments is of great value in the saving of infant life, as the majority encourage the mothers to bring the babies periodically for advice regarding feeding and general treatment, or recommend them to get the Plunket nurses to give them the same advice.

The chief bar to the success of these private maternity hospitals owned by nurses is the lack of capital to enable them to make a good start in building or renting suitable houses, in which the cost of adding necessary sanitary appliances is very high. The cost of living having gone up, the usual fee, three or four guineas, does not give much profit for the arduous work, often without sufficient help.