3 H.—31.

notified in this country to make one feel satisfied. We seem to know no more of the causes of diphtheria than was known thirty years ago. This is most disappointing, especially as the same may be said of some other infectious diseases, such as influenza, measles, whooping-cough, &c. It seems that our only hope as regards diphtheria is action based on the Schick reaction and toxin anti-toxin immunization. The Department has this treatment in hand in connection with the epidemics of diphtheria in Canterbury, and the results apparently justify the high expectations reported.

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Enteric Fever.—The efforts of the Department are apparently having some effect as regards enteric fever. It will be seen by the report of the Director, Division of Public Hygiene, that there has been a considerable reduction in the number of notifications from this disease. Of the 389 cases notified, only sixty were notified from the South Island. This is undoubtedly due to the comparatively few Maoris living in our southern Island. Enteric is still endemic in the Maori districts in the north and east of the North Island, but even there the disease has been much diminished by means of nurses who work amongst the Maoris, and by anti-typhoid inoculation, which has been fairly extensively carried out amongst the Natives.

As regards the death-rate from *tuberculosis*—7·21 per 10,000, as against 6·30 in 1914—this increase is easily accounted for by the "adverse influences of the war and the disastrous effects of the epidemic of 1918."

Smallpox (Alastrim).—A mild epidemic of smallpox (alastrim) broke out, and was, fortunately, limited to the Otago Health District, ninety-five cases in all being notified of this mild form of the disease, known as alastrim. Its origin is unknown. Here again, as in the epidemic of 1913, the

efficiency of vaccination was shown in a most striking manner.

Non-notifiable Diseases.—Of these the increase in the death-rate from cancer is most noticeable, though the year 1920 showed a slight drop, there being 8.72 deaths per 10,000 persons living, as against 9.07 in the previous year. Despite the exhaustive researches of the Cancer Commission, which have extended over a considerable period of years, there is very little more known as to the cause or causes of this dreadful disease. It has been suggested, and not without reason, that, as the deaths from cancer are increasing in this as well as in other civilized countries, this Department should undertake researches into the causes of this disease. But let it be considered what such research work would mean. In the first place, the worth of the data to be obtained in a comparatively small community such as ours is not to be compared with that of larger countries. Moreover, a very considerable increase in our staff would be necessary to make the exhaustive inquiries involved. We cannot do better, therefore, than solicit the co-operation of the practising members of the profession in the gathering of data relative to patients, and await the reports of the researches which are being conducted under the auspices of the Cancer Commission in the United Kingdom, in collaboration with other authorities in Europe and America.

Frequent inquiries have been from time to time made with regard to the efficacy of radium in the treatment of this disease, and as to the extent to which the Department would subsidize any sums raised for the purpose of providing this useful element for our public hospitals. Though I understand the results of the treatment are not as yet convincing, there is no doubt that radium is most useful in alleviating the pain of the disease, and its purchase is justifiable if only on that account. I understand, however, from members of the profession who have had considerable experience in the use of radium that to procure a sufficient quantity for the purpose of treating cancer approximately £50,000 worth would be required. Some £5,000 worth of radium was procured for the Dunedin Hospital, and as matters now stand it would be better to concentrate on the Dunedin Hospital for the carrying-out of this treatment, at any rate for the present—especially as radium emanations can be sent to any part of the country—than to try and supply all our chief hospitals with this very expensive and mysterious element.

SECTION 2.—DEPARTMENTAL FINANCE,

With the consequent increase in the Department's activities resulting from the establishment of the Divisions of Child Welfare, School Hygiene, and Dental Hygiene, the taking-over of the Pukeora Military Sanatorium, and the increase, due to the high price of all commodities, in the cost of the institutions administered by the Department, it might be reasonably anticipated that there would be an increase in the departmental expenditure; but by careful framing of the estimates, and the cutting-down of all but absolutely essential expenditure, there is an actual decrease of some thousands of pounds in the estimated requirements of the Department, and this without in any way curtailing such necessary activities as nursing or maternity services.

In regard to the appropriation for subsidies for Hospital Boards, an increase of about £20,000 is estimated this year. The reason for the increase is the large amount of outstanding claims that were not received until after the close of the financial year, which consequently require to be provided for on this year's estimates. As a matter of fact, there is no increase in the amount of subsidies required for maintenance purposes this year, it being the same as that of last year. This may be regarded as very satisfactory in view of the alarming increase in the two previous years. Owing to the rigid cutting-down of all but essential works, and the policy of raising the necessary money by loans, the amount required for capital subsidies is less by £10,000 than in the previous years.

HOSPITALS.

Owing to the increased use which is being made of hospitals by the community, and to the way in which the increased cost of living has affected the maintenance charges of all hospitals, no reduction can be expected at present so far as hospital maintenance charges are concerned. Details of hospital expenditure, however, are now being subjected to a much closer scrutiny than formerly, owing to the