11 H.—31.

TABLE B.—Showing the Monthly Incidence of Infectious Diseases during the Year 1920.

Month.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Tuberculosis.	C.S. Meningitis.	Poliomyelitis.	Puerperal Septicæmia.	Influenza.	Pneumonic, Fulminant, and Septicæmic Influenza.	Pneumonia.	Measles.	Variola.	Varicella.	Unclassified Septicamia.	Lethargic Encephalitis.	Ophthalmia Neonatorum.	Erysipelas.	Tetanus.	Hydatids.	Trachoma.	Beriberi.	Anthrax.	Actinomycosis.	Totals.
Jan. Feb. Mar. April May June July Aug. Sept. Oct. Nov. Dec.	115 84 93 135 152 151 131 107 88 55 68	186 186 249 289 283 277 283 159 151 145 118	28	104 77 146 84 101 96 120 121 122 97	5 6 5 6 10 5 9 11 7 6 8	2 1 17 14 7 5 2 5 10 4 9	10 9 10 13 14 10	5,621 10,013 2,684	•••	143 76 98 126 137 125 213 284 262 175 158	115 729 1,527 	19 22 22	88 103	1 2 11 4 4 2 2 1 1 2 1	3 7 3 5 2 8 4 1 5 2	4 7 3 9 3 4 2 4 4 4 4 4	9 6 11 24 20 19 16 8 16 10 9	1 2 2 4 2 	4 5 3 1 4 5	1 1 1 	1		1	2,292 6,607 4,621 6,376 10,994 3,660 1,841 2,458 875 671 588 561
Totals	1,248					76		29,928		1,933		95		30	42		156	-			1		1	41,544

The following additional comments may be made upon these tables:—

PUERPERAL SEPTICÆMIA.

Puerperal septicæmia shows an increase in comparison with recent years. The following table gives the numbers of notifications and deaths due to this condition, and their rates per 1,000 live births, for the period 1917–20:—

Puerperal Septicamia in New Zealand, 1917-20.

	-		Noti	fications.	Deaths.					
	Yea	r.	Number.	Rate per 1,000 Live Births.	Number.	Rate per 1,000 Live Births.				
1917		• •	 62	2.19	59	2.09				
1918			 76	2.94	48	1.86				
1919			 7 9	3.23	52	2.12				
1920			 124	4.14	67	$2 \cdot 24$				

An important feature of the year under review, and one exemplifying the increased virulence of the micro-organisms producing this disease, was the number of outbreaks in maternity hospitals. Amongst others, serious institutional epidemics in Napier, Blenheim, Palmerston North, and Christchurch were investigated by the Department, and appropriate action taken to limit the spread of the disease.

Erysipelas.—It is interesting to record that the notifications for erysipelas also show a marked increase for 1920, 156 cases of this disease being reported in the latter year, as against 73 in 1919. Various medical writers have pointed out that puerperal septicæmia, erysipelas, and rheumatic fever exhibit a similar periodicity. Certainly the New Zealand experience of 1920 confirms this statement, so far at least as puerperal septicæmia and erysipelas are concerned.

Influenza.

Influenza again came into prominence in 1920, but fortunately the disease did not exhibit any marked tendency towards malignancy. An attempt was made in the early stages of the outbreak to limit its spread by means of notification, isolation, &c., but this proved useless. As a result, notification of simple influenza was discontinued in June, and the only types of the disease over which administrative control was exercised were the pneumonic, septicæmic, and fulminant varieties. As the tables show, the prevalence of these forms of influenza rapidly diminished towards the end of the year.

MEASLES.

Measles first became epidemic in Dunedin about the middle of the year, and, despite earnest attempts to limit its spread by means of notification, isolation, &c., soon spread north. When it was apparent that the disease had broken bounds, notification, &c., was discontinued.