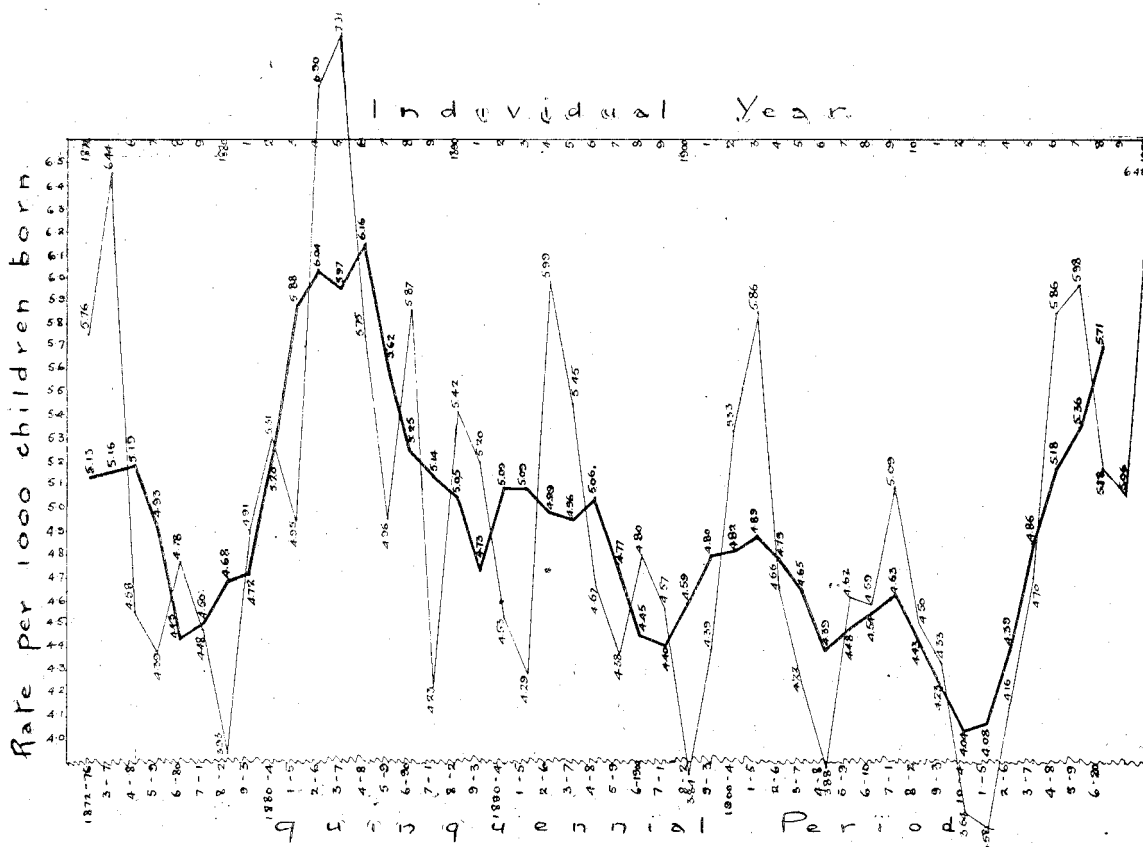


5.42 in 1890 to 3.58 per 1,000 in 1913. The last and current period, beginning, say, from 1913 to 1920, shows another abnormal increase rising to the high figure 6.48 in the latter year. It has to be noted that, probably owing to greater statistical accuracy and more careful inquiry since about 1916, more cases have been included under puerperal mortality than before 1916. It has been suggested that an investigation of the mortality figures of other diseases, such as scarlet fever, rheumatic fever, phthisis, pneumonia, and diphtheria, would probably disclose similar fluctuations, and the committee has requested the Department to gather data and prepare graphs for comparison.

With reference to the published figures, it is fair to note that the mortality of the year 1917 was the highest since 1894. The one plain deduction from our investigation of these figures is that there has been a remarkable increase since 1914 in the New Zealand maternal death-rate. Our own figures establish this fact, notwithstanding any doubt as to their exact comparability with the statistics of other countries. We enclose a copy of the graph for the information of the Board.



GRAPH SHOWING DEATH-RATES OF WOMEN FROM PUERPERAL CAUSES (PER 1,000 CHILDREN BORN) FOR INDIVIDUAL YEARS, AND MOVING AVERAGE FOR QUINQUENNIAL PERIOD 1872-1920.

(Individual years shown by light line ; quinquennial moving average by heavy line.)

We have endeavoured to investigate, so far as we were able, the causes of such high mortality. The principal causes of death are as follows : (1) Puerperal septicaemia ; (2) puerperal albuminuria, and convulsions ; (3) puerperal hæmorrhage ; (4) accidents of pregnancy and other accidents of labour.

During the last quinquennial period the average annual maternal mortality has been 157 deaths, and of this number fifty-seven are due to sepsis. The recommendations hereinafter contained, though having a special application to sepsis as a cause of death, are to a great extent of general application, and, it is hoped, will, if adopted, materially reduce the mortality due to other causes associated with pregnancy.

It should be noted that deaths from sepsis are largely preventible, and for this reason your committee has devoted special attention to this dominant cause. The factors which lead to the occurrence of sepsis in this country must be put down under three main heads.

(1.) Abnormal virulence of organisms and diminished resistance of individuals, due possibly to conditions during and subsequent to the war period. Dr. Jellett stated that from his own experience at Home sepsis seemed to be harder to deal with, and in a more virulent form than during the "nineties."

The committee feels that the lack of domestic help and the fact of housing difficulties may well be factors contributing to the diminished resistance which apparently affects women nowadays. There is another disturbing cause to which we must draw attention. Evidence was forthcoming clearly indicating that in this country there is an abnormally high death-rate due to septic conditions following on attempts to procure abortion, which deaths are included in our figures of general maternal mortality.