

The DIRECTOR-GENERAL OF HEALTH to the Hon. the MINISTER OF HEALTH, Wellington.

I HAVE the honour to lay before you the annual report of the Department for the year 1925-26.

PART I.—GENERAL SURVEY.

SECTION I.—GENERAL.

PUBLIC HEALTH.

A steady and progressive development has been maintained in the cause of preventive medicine during the period under review, as fully indicated in the attached divisional reports. In fact, it can be claimed that rarely in the history of the Department has such impetus been given to reforms towards this end. In a similar degree the example set has resulted in many encouraging evidences of sanitary progress and enlightenment among those governing authorities and associations charged with the conservation of the public health. With the gradual lowering of the infantile and maternal mortality and infectious-disease rates, improved sanitation and housing, we should under normal conditions be able to retain in the future that unique standard of health which has in recent years distinguished the population of this country. Nevertheless, I feel sure that we shall lose greatly if the administration of our health services in any way lessens the sense of responsibility in regard to health matters either in the individual or in the community. It is better policy to teach people to live healthily and to prevent disease than it is to treat them as irresponsible units for whom care has to be provided.

Vital Statistics.—We have again experienced a satisfactory year as far as vital statistics are concerned. The crude (actual) death-rate, 8.29 per 1,000 of mean population was equal to that of the previous year, the lowest on record, while the International Standardized death-rate (8.67) shows a further fall. The infantile-mortality rate was 39.96 per 1,000 births, in comparison with 40.2 for 1924; the tuberculosis death-rate was 5.14 per 1,000 of mean population, against 5.67 for 1924.

Of the notifiable diseases, scarlet fever, diphtheria, pneumonic influenza, and puerperal fever all show a satisfactory decline, while there was experienced a lower incidence in enteric fever, a disease now practically confined to the Native population.

The birth-rate of 21.17 per 1,000 of mean population is the lowest on record, and the rate of still-births (30.6 per 1,000 live births) shows a slight increase. The position in regard to the low birth-rate is far from consolatory, and there is an indication for investigation as to its causes in this country.

The maternal-mortality rate (4.65 per 1,000 births) reveals a gratifying fall. On the other hand, the mortality of infants under one month, which show an extraordinary resistance to administrative methods in this and other countries, has not manifested any improvement. It is doubtful if very much can be effected in this respect. No satisfactory explanation has been found for this resistance, but no doubt everything that counteracts careless living on the part of expectant mothers and reduces social diseases will also reduce infantile mortality during this period. In this direction the educational work extensively carried out at the ante-natal clinics should in the near future make itself felt.

Tuberculosis.—Tuberculosis continues to be one of the formidable problems. However, the continuation of the downward trend in the incidence and death-rate for this disease is extremely gratifying. The New Zealand rate compares more than favourably with that of other countries of the world.

One cannot overstress the value of sane healthy athleticism and physical discipline in the campaign against this disease. The introduction of the open-air schools is a move in the right direction. The more prolonged treatment being carried out in our sanatoria will ensure a better guarantee of permanent arrest of the disease among those undergoing treatment.

Cancer.—The increasing prevalence of this disease is a cause for concern not only in this country but throughout the world. At the Department's suggestion Mr. J. W. Butcher, Chief Compiler, Census and Statistics Office, revised and brought up to date his valuable statistical study on "Cancer in New Zealand." In this report he points out, "While it is evident that much of the increase in cancer mortality is apparent only, it is obvious that the factors mentioned cannot account for anything like the whole of the great increase that has been recorded in the cancer death-rate, and that there must have been a definite and substantial increase. Paradoxical though it may seem to say so, even this real increase is in large part a reflection of the progress that has been made in the science of medicine and sanitation."

It is reasonable to expect that the medical research that is being carried on throughout the world in regard to this disease will in the near future throw further light on its prevention and treatment. The work of the Imperial Cancer Research Fund is being followed with great interest.

Particular inquiry was made as to the scope of use for radium by Dr. Watt and myself during our visits overseas under the auspices of the League of Nations. In the United States many important teaching hospitals affiliated with Medical Schools were without this agent. These hospitals, although not possessing radium, can, of course, draw easily upon other institutions in America for supply of radium emanations. This fact is quoted not to indicate that a prohibition should be put upon the purchase of radium by the New Zealand hospitals, but to emphasise the fact that the steps taken by Cabinet to restrict its purchase to the four main Hospital Boards was undoubtedly a wise one.

It is still undecided as to the value of radium in the treatment of cancer; but the reports of the Medical Research Council (Great Britain) indicate that in certain cases satisfactory results have been achieved by the use of this element. In the meantime the Department, by the circulation of suitable propaganda, is endeavouring to educate the public as to its recognition so as to afford the patient the chance of obtaining early medical treatment.

Maternal Mortality.—The fall in the maternal-mortality rate from 5.00 per 1,000 to 4.65 is most encouraging, and, I trust, foreshadows a steady decline in this rate. The year has been distinguished by a marked extension in the Department's maternity work, and particularly so as regards ante-natal supervision and inspection of maternity hospitals.