

Analysis of Deaths of Infants under One Month of Age, 1926.

The following table gives the causes of these deaths during the year :—

Cause of Death.					Under One Day.	One Day and under One Week.	One Week and under Two Weeks.	Two Weeks and under Three Weeks.	Three Weeks and under One Month.	Total.
Influenza	..	..	..	..	..	..	..	..	1	1
Syphilis	..	..	..	..	..	1	..	..	1	2
Meningitis	..	..	..	..	..	..	..	..	..	..
Convulsions	..	..	..	..	1	15	2	..	..	18
Bronchitis	..	..	..	..	..	..	1	2	..	3
Broncho-pneumonia	..	..	..	..	..	3	4	4	3	14
Pneumonia	..	..	..	..	..	2	..	2	1	5
Diarrhœa and enteritis	..	..	..	..	..	..	3	1	2	6
Congenital malformations	..	..	..	..	21	42	7	5	7	82
Congenital debility, icterus, sclerema	..	..	..	..	25	41	11	7	5	89
Injury at birth	..	..	..	..	13	27	3	..	..	43
Premature birth	..	..	..	..	154	129	22	20	10	335
Other causes peculiar to early infancy	..	..	..	..	28	54	3	1	..	86
Accidental mechanical suffocation (overlain, &c.)	..	..	..	..	..	2	..	..	..	2
Other causes	..	..	..	..	2	23	4	5	5	39
Total, both sexes					244	339	60	47	35	725

Maternal Mortality.—The following table shows the number of deaths from puerperal causes, and the rate of such deaths per 1,000 births, for the five-yearly period 1922–26 :—

Table A.—Deaths from all Puerperal Causes, 1922–26.

Year.	Number of Deaths from			Death-rate per 1,000 Live Births from		
	Puerperal Septicæmia.	Other Puerperal Causes.	All Puerperal Causes.	Puerperal Septicæmia.	Other Puerperal Causes.	All Puerperal Causes.
1922	52	97	149	1·79	3·35	5·14
1923	52	91	143	1·86	3·25	5·11
1924	52	88	140	1·86	3·14	5·00
1925	42	89	131	1·49	3·16	4·65
1926	39	81	120	1·37	2·88	4·25

There has been a gratifying reduction in this death-rate during 1926. It has dropped from 6·48 per 1,000 live births in 1920 to 4·25 last year. During the period 1880 to 1885 this death-rate rose from 3·93 to 7·31, and then dropped to 4·23 in 1889. In 1894 it was 5·29; in 1898, 3·84; in 1903, 5·86; in 1907, 3·88; in 1909, 5·09; in 1913, 3·58; in 1920, 6·48; in 1926, 4·25. Since 1916 there has been more careful inquiry and greater statistical accuracy in the New Zealand returns, and probably last year's rate of 4·25 corresponds with the lower rates of certain earlier years.

Distribution of Maternal Deaths.—It is now possible to obtain separate statistics for the fourteen principal urban areas of the Dominion, which include roughly half the total population, and for the rest of the Dominion. Correction has been made by the Census and Statistics Office for women from other parts of the Dominion who died in urban areas.

The following table (B) shows that, after making allowance for the fact that the birth-rate in the urban areas is slightly lower than in the rest of the Dominion, the maternal death-rate in the latter from the principal maternal causes is considerably greater than in the urban areas. This is noticeable particularly with puerperal albuminuria and convulsions, puerperal hæmorrhage, and other accidents of labour. It holds good even with puerperal septicæmia, but to lesser degree. It is not true of "accidents of pregnancy"; but these include miscarriages and abortions, which are believed to be more frequent in the cities. It would seem, therefore, that in order to reduce maternal deaths most attention must be given to non urban areas.