

REVENUE AND EXPENDITURE OF THE DEPARTMENT OF HEALTH FOR THE FIVE YEARS ENDED
31st MARCH, 1928.

Financial Year (1st April to 31st March).	Total Expendi- ture of Depart- ment of Health.*	Percentage of Total Revenue of Territory.	Expendi- ture per Head of Popula- tion.†	Gross Revenue (Cost of Collection not deducted).					
				Subsidy from New Zealand Government.	Native Medical Levy.	European Fees.	Chinese Fees.	Total Revenue of De- partment of Health.	
	£		s. d.	£	£	£	£	£	
1923-24	23,995	17.9	12 10.4	12,500	7,327	2,814	2,023	24,664	
1924-25	24,425	18.7	13 0.2	14,000	7,705	1,461	1,140	24,306	
1925-26	25,761	17.2	12 11.1	14,000	9,186	1,705	1,603	26,494	
1926-27	25,912	19.4	12 5.3	14,000	7,292	1,275	2,167	24,732	
1927-28	25,500	..	12 0.0	..	..	..	..	..	

* Expenditure shown does not include interest and sinking fund on capital expenditure, cost of repairs to buildings, and miscellaneous expenditure under head XV of general estimates, such as travelling-expenses of officers on leave, &c. Expenditure under these heads does not come under the control of the Department of Health.

† Average population taken as the population as at 30th September each year.

Figures for 1927-28 only approximate, as final Treasury returns not yet received.

APIA HOSPITAL REPORT.

This year the new maternity wing for European patients was opened. The building is of wood on concrete piles, being 60 ft. long by 37 ft. wide, and is connected with the European hospital by two separate entrances, one being a covered extension of the veranda outside the kitchen, and the other a private entrance from the Matron's quarters. The entrance for patients and visitors is by a flight of steps from the road between the Matron's quarters and the Samoan nurses' *fales*. There are three rooms (one labour and two convalescing), with sink-room, sterilizing-room, bathroom, and separate lavatory. The labour, sink-room, sterilizing-room, and bathroom have "Magnus" stone flooring, which gives a very smooth, washable surface. The veranda, which is 10 ft. wide, extends along the whole of the northern side of the building, the western side being boarded in to form a duty-room outside the labour-room for the nursing staff. This veranda is cool and private, being well raised from the road, and commands a direct view of the sea. The new wing was very necessary. It is well away from the patients in the main building, thus making for privacy, besides which it releases the two rooms in the main building hitherto used for this purpose for surgical and medical cases, thus making two more private rooms available. This fact is very much appreciated by the staff. The extra rooms have proved very handy of late, there being now five private rooms available in the main European building.

Plans have been drawn up for an addition to the office building in the form of a library for the medical staff, and also a waiting-room for patients. This when completed will ensure privacy for the Chief Medical Officer, whose small office is at present used during the mornings by all the members of the staff.

It is also hoped that a new mortuary will shortly be erected in concrete, which will allow of the making of post-mortems. It is felt that there is much to learn pathologically from post-mortems—in fact, no true scientific advance can be made without such study.

The Samoan maternity *fale* is still being well patronized, seventy-seven patients having come from all parts of the islands since its opening in July, 1926. A large proportion are normal births, and comparatively few instrumental cases have been admitted. Our Samoan nurses have benefited greatly, as they can treat all normal cases themselves under the supervision of the Medical Officer in charge. They are on duty for about three months at a time, and all those who are trained will take their share of the duties in rotation, being brought in from out-stations for this purpose.

STATISTICS.

The analysis of hospital statistics follows the plan of last year, and is for the calendar year, 1927.

TREATMENT: MEDICAL.

As submitted earlier in the report, there has been no epidemic this year, consequently the admissions to hospital show a decided decline as compared with last year. This in itself is conclusive evidence that the general health of the Natives has been consistently good during the past year. Samoans are peculiarly liable to lung affections, such as pneumonia, broncho-pneumonia, and bronchitis, and every change of season tells its tale. Pneumonia (lobar) accounts for forty-six admissions, with seven deaths, nearly all of which occurred in children who were practically moribund on admission. Bronchitis figures largely with thirty-six cases, as against only eight broncho-pneumonias; but, as most of them were children, it is probable that in many instances at least the former developed into the latter. Twenty-three cases of the enteric-fever group were admitted during the year, most of them agglutinating *B. typhosus*, and there were no deaths from this disease.