$\mathbf{A} \cdot \mathbf{A} \cdot \mathbf{A}$ 

and best-equipped in the South Pacific, being fitted with "Silverlite" gas for heating purposes, the plant being also used for the sterilizers in the operating-theatre. There are four out-stations—dispensaries—in charge of trained Native nurses in this area—at Lufilufi (the Methodist Mission), Malua (the London Missionary Society's headquarters), Fasito'otai, and Mulifanua. Of these, Malua has been temporarily closed, but is being carried on for the time being by a trained nurse who has married and settled there.

- (b) Aleipata Hospital Area is still under the charge of a European Medical Officer, who has an interpreter-cadet and two trained Native nurses to assist him. He also makes periodical trips round his district.
- (c) Lefaga-Safata Area has now three dispensaries in charge of trained Native nurses—at Fusi, Sataua (Lotofaga), and Matautu.

(d) Fagaloa Bay, which is very inaccessible, is still in charge of a trained Native nurse.

- (e) Tuasivi Hospital Area is staffed as Aleipata Hospital, and serves about 45 per cent. of the population of Savai'i, a large amount of work being done from this hospital as a base. A trained Native nurse is in charge of the dispensary at the Methodist Mission at Satupaitea.
- (f) Safotu Hospital, on the north coast of Savai'i, is still doing good work under the charge of a Native medical practitioner assisted by a Native nurse.
- (g) The part of Savai'i from Salailua to Asau is a difficult one to cater for, owing to coastal conditions. At present we have still three dispensaries in the district, each with a trained Native nurse—at Gagaemalae, Samataitai, and Asau. In the near future it is hoped to place a Native medical practitioner at Falelima, which will command the whole of the western end of the island.

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Last year a trained Child Welfare nurse was placed at Fagamalo, and so far has done good work. Early in this year another trained Native nurse was sent there to learn from the nurse in charge, and when thought to have sufficient knowledge she will be given another district, so that in time we hope to have Child Welfare nurses on both islands. Unfortunately, through illness, marriage, &c., we have lost five trained Native nurses during 1927, which is a grave handicap, and has necessitated closing three stations for the time being, as it means waiting for some months until present trainees qualify before we can hope to replace those we have lost. No new stations have been opened during the year, due partly to this cause and partly to the political situation.

## INFECTIOUS DISEASES.

These returns do not include all cases of infectious diseases occurring in the Territory, but only those notified from Apia Hospital: Dysentery (bacillary), 25; dysentery (amœbic), 1; pneumonia (lobar), 46; pneumonia (bronchial), 8; enteric-fever group, 23; leprosy, 3; pulmonary tuberculosis, 9; tubercular peritonitis, 2; meningitis (T.B. and pneumococcus), 6; gonorrhœa, 1; beriberi, 8; tetanus, 6; puerperal septicæmia, 3.

(1) Bacillary Dysentery is endemic in Western Samoa, the cases reported occurring from February to July. There was a small outbreak on the east coast of Savai'i in January and February, 1928, but

it soon petered out.

(2) Influenza.—Very few cases have been met with during the year.

(3) Hookworm.—Only 606 treatments have been given during the year, and no bad cases were

met with. It has not been possible to undertake malagas for this purpose.

(4) Yaws.—The total number of injections given throughout the Territory for the past year is 7,450, regular treatment having been carried out in the Apia Hospital and district, in the Aleipata Hospital area, and along the north coast of Upolu from Mulifanua to Falefa. Tuasivi Hospital district has also had regular treatment, and the rest of Savai'i was attended to on a malaga commenced at the end of December, 1927. Very few primary sores are now met with, and the disease is well under control, though naturally it will take some years to stamp it out.

(5) Leprosy.—In May, 1927, seven lepers were transferred to Makogai, the Leper Asylum in Fiji, and there are now two cases in hospital awaiting transfer. We have twenty-eight lepers in Fiji at present: Samoans, nine males, six females; Chinese, three males; half-caste Europeans, three males,

three females; Solomon-Islanders, three males: Cook-Islander, one male.

## QUARANTINE.

During the year eighty-five vessels arrived from overseas, and pratique was granted in every case.

Quarantine Intelligence Service.—As last year, this consists of weekly radios from New Zealand, giving information as to existent epidemic diseases present in that country, and also any valuable information in respect to other parts of the Pacific. In addition, fortnightly messages from London to New Zealand are posted on here, all matters of importance being sent by radio. The Eastern Bureau of the League of Nations Health Organization in Singapore broadcasts returns of epidemic diseases weekly, and these are picked up by the Apia Wireless Station, and they also post the weekly fasciculus regularly. In accordance with the resolutions passed at the International Health Conference held in Melbourne in December, 1926 (at which Western Samoa was represented by Dr. Ritchie), and agreed to by the New Zealand Government, epidemic diseases occurring in this Territory are promptly wirelessed to External Affairs in Wellington, and from there, through the New Zealand Health Department, to the Director of Public Health in Melbourne, thus keeping up a constant chain of communication. In addition, a wireless message is despatched to Wellington on the first of every month, and a quarterly and yearly report of the health of the islands are forwarded and sent on by them as before to Melbourne.