

In Dunedin during the year 1927 fifty-two cases of pulmonary tuberculosis were admitted, and the collective stay of these patients was 2,634 days. Some six or eight beds are permanently occupied by tuberculous patients.

In Christchurch thirty-nine cases of pulmonary tuberculosis were admitted to the general hospital during the year 1927–28. During the same period some eight beds were permanently occupied by a succession of cases.

In Wellington 123 cases of pulmonary tuberculosis were admitted during the year 1927–28. On an average thirty beds were permanently occupied during the same period. At present there are twenty-nine cases in hospital, and there are several awaiting admission.

In Auckland during the year 1927–28 ninety-eight cases of pulmonary tuberculosis were admitted to the General Hospital. On an average thirteen beds are permanently occupied by tuberculous cases.

There are thus some fifty-eight beds in the general hospitals of the four chief cities that are not included in the lists in Table VII. When these are included the total number of beds available is 1,161; roughly one bed to every five cases of the disease.

Only a few of the hospitals tabulated in these lists were inspected. These are taken as representative of the accommodation provided generally for tuberculous patients.

Otago Hospital District.

Wakari Chronic Hospital.—This hospital serves a district with a population of one hundred thousand. Accommodation is provided for forty-three patients. At present there are forty-one patients in the hospital—twenty-six male and fifteen female. The Medical Superintendent states that he is short of beds for female patients. He estimates that an additional twelve beds would be sufficient. These would be available were the twelve beds at present reserved for convalescent scarlet-fever patients placed at his disposal. There are seven advanced female cases in the Dunedin Hospital awaiting admission to Wakari. There are several advanced cases in the Pleasant Valley Sanatorium that would be better placed at Wakari. The evidence given justifies the assumption that there are many advanced cases lying in their homes in Dunedin who probably could be induced to enter Wakari Hospital. The Committee are of opinion that the accommodation at this hospital is inadequate.

Pleasant Valley Sanatorium.—There is accommodation for fifty-four patients, male and female. The Superintendent states that the accommodation is insufficient, and that there are several patients awaiting admission. Pressure could be relieved by transferring some advanced cases to Wakari were accommodation available there, and by discharging two cases of surgical tuberculosis. There is no need for further extension of this institution.

Associated Boards' District.

The associated Boards have no chronic hospital for advanced cases. These cases, together with moderately advanced and early cases that are awaiting admission to the Waipiata Sanatorium, are accommodated in annexes and shelters attached to the smaller hospitals throughout the district.

Waipiata Sanatorium.—This sanatorium at present accommodates eighty-four cases, male and female. Forty-two additional beds are almost ready for occupation. The Superintendent states that when these are available accommodation will be adequate. There is no need for further extension of this institution.

Oamaru Hospital.—Accommodation is provided for twelve cases, and would be adequate if those cases awaiting admission to Waipiata Sanatorium were admitted, or discharged to their own homes, according as their condition warranted.

Waimate Hospital.—Accommodation is adequate. There is provision for twelve cases, and only two cases were present on the date of inspection.

Timaru Hospital.—There is accommodation for twenty-five patients, male and female. Eleven of these are on the balcony of a ward in the isolation block, and fourteen in the ward. The rate of admission is one or two cases a month. The average number of beds occupied is nineteen. Some of the cases are advanced and chronic, others are cases awaiting admission to Waipiata Sanatorium. There are thirty-one cases in Timaru awaiting admission to Waipiata. Some of them are waiting in their own homes. The Medical Superintendent complains that the working of the hospital is hampered by the presence of so many tuberculous patients. Suitable accommodation is at present inadequate, but pressure could be relieved by expediting the admission of cases to Waipiata.

NORTH CANTERBURY AND WEST COAST HOSPITAL DISTRICTS.

Coronation Hospital.—This hospital accommodates sixty-eight chronic cases—fifty female and eighteen male. Some moderately advanced cases are included. All the beds were occupied at the date of inspection, and the Superintendent states that he is sorely pressed for accommodation for female cases. There are twenty patients awaiting admission. If the eighteen male cases were removed Coronation Hospital would afford adequate accommodation for chronic female cases.

Upper Sanatorium, Cashmere.—There is accommodation for 104 male patients. There were ninety-nine patients in the institution. Of these, twenty-four are advanced cases and are unsuitably placed. The accommodation for sanatorium purposes is adequate.