

maternity annexes or, if they have not that facility, have at least obstetrical specialists on their staffs, or have provided maternity services by subsidizing private practitioners or private hospitals to attend indigent patients. An extension of this method of providing services in country districts is desirable.

OTHER MATERNITY SERVICES.

Accessory to the maternity hospitals in which approximately 86·38 per cent. of European mothers were delivered there are a number of midwives and maternity nurses in private practice, 39 district nurses in the employ of Hospital Boards, and 49 district nurses to Natives employed by the Department. These nurses and midwives give attention to the remaining 3,607 patients who are attended in their own homes or in the homes of the nurses, who are permitted to take in one patient at a time without being licensed. From these cases the majority of patients sent into the general wards of public hospitals are drawn, as conditions under which they are confined are unsuitable for giving attendance to patients suffering from any but minor complications.

PROVISION FOR ANTE-NATAL CLINICS.

The majority of expectant mothers are attended ante-natally by their own doctors, who are assisted by the forty ante-natal clinics established in New Zealand. Of these, 5 are in connection with St. Helens Hospitals, 24 in connection with other hospitals, and 11 are conducted by nurses employed by the Plunket Society. The hospital clinics chiefly attend their own patients. The nurses conducting the Plunket clinics work in co-operation with the patient's private medical attendant.

Table III gives the tabulated returns from the 38 clinics which sent in returns.

An attempt is being made to get, through those clinics, an accurate estimate of the number of cases of puerperal toxæmia occurring among pregnant women in New Zealand. With a view to this the Obstetrical Society and the Department have come to an agreement on the method to be adopted to define this condition. When obtained this information should be of considerable value, and it is hoped will lead to a reduction in the cases of eclampsia and other manifestations of puerperal toxæmia. Scientific research into the etiology of toxæmia is also required.

Table III.

Year.	Number of Clinics supplying Returns.	New Cases.	Return Visits.	Total Attendances.	Average Number of Attendances per Patient.
1925	16	2,289	7,816	10,105	4·41
1926	20	3,238	12,554	15,792	4·88
1927	20	3,919	15,406	19,325	4·93
1928	21	5,050	20,740	25,790	5·11
1929	24	5,177	17,555	22,732	4·39
1930	25	6,027	22,078	28,105	4·66
1931	28	6,306	22,869	29,175	4·63
1932	31	5,882	22,594	28,476	4·84
1933	33	5,978	25,794	29,772	4·98
1934	34	6,191	24,929	31,120	5·03
1935	37	6,725	26,662	33,389	4·96
1936	39	7,069	29,103	36,272	5·13
1937	38	6,746	28,769	35,515	5·28

HOSPITALS ACTING AS TRAINING-SCHOOLS FOR MATERNITY NURSES AND MIDWIVES.

Four St. Helens Hospitals are training-schools for midwives and twenty-six public maternity hospitals for maternity nurses. These hospitals play such an important part in advancing obstetrical practice that they require special mention. They are not only hospitals in which women are attended by a highly trained medical and nursing staff at a low fee, or free, ante-natally, during labour and the puerperium, and post-natally, but are the only training-schools for midwives and maternity nurses.

Twenty-six of the public maternity hospitals have been approved by the Nurses and Midwives Registration Board as training-schools for maternity nurses, and in these, theoretical and practical training was given to 251 women, of whom 201 were already registered nurses and 36 untrained. Of this number, 223 passed their examinations and were placed on the register.

The four St. Helens Hospitals are the only schools for midwives, and 73 were trained last year, 71 of whom passed. In addition, 31 women, not registered nurses, were trained and placed on the register as maternity nurses.

Due to the fact that a very large majority of women in New Zealand are attended in their confinements by doctors, the question has been raised as to the necessity of training the number of midwives who are being trained each year. Of this there can be no doubt. These highly trained women with