## TUBERCULOSIS CONTACTS.

The supervision of tuberculosis contacts continues to be carried out in all districts. The following summary shows the position in Wellington:-

Summary of Tuberculosis Contacts in the Wellington District for Year ending December, 1938.

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Number of children—							413
On list		• •		• •			354
Examined during year		• • •		• •	• •	• •	001
Reporting—							4
Six-monthly			• •	• •		• •	$\overline{4}$
Three-monthly				• •		• •	1
Two-monthly				• •	• •	• •	1
Referred to—							10
Nose and Throat Department, or specialist						• •	$\overset{\circ}{2}$
Eye Department					• •	• •	$\tilde{1}$
Skin Department							5
Dental Department				• •	• •	• •	17
X-ray Department	• • .		• •	. • •	• •	• •	1
Illtro-violet ray Departn	$_{ m ient}$	• • -	: •	• •		• •	$\overset{1}{2}$
Out-patient Department, diet, remedial exercises						٠.	10
Mantoux test				• •	• •	• • •	1
Hospital				• •	• •	• •	4
Sanatorium				• •	• •		18
Number of children recommended for health camp					• •	• •	10
Number of children Deceased	ł					• •	- T
Trumbor or outletton				ann barne	dred cont	tacts ar	e ken

Dr. E. Irwin reports that in Invercargill approximately four hundred contacts are kept under observation.

From Hawke's Bay, Dr. Anderson writes :-

"In Napier the children come regularly to be weighed and measured each month, and if the parents have any comment to make on the children's health during the month they usually send a note with them or else accompany them. Some of the parents make a practice of coming with the children. With regard to Hastings and outlying districts, we rely on the headmaster to keep the weight charts unless the children or the mother find that it is unpleasant for the children to be singled out, and then we allow the children to weigh themselves or their parents to have them weighed at the chemist and the record sent to us. We have found this has given us good results and have found that the parent concerned is usually keen. Where possible the parents are urged to take the contacts to Dr. Short's clinic, and he advises them whether they need to pay periodical visits or not."

Dr. Davis (Gisborne) states:-

"The tuberculosis clinics conducted quarterly by Dr. Hugh Short, of Wellington, continue to perform great service throughout the district. It is very comforting to be able to have his opinion as to the correct line of treatment. These clinics have performed a very great service throughout the year, and many early cases are detected and disposed of for treatment. I am in hopes that this service will be extended to the Waiapu Hospital Board's area where it is sadly needed.'

Dr. Stevenson (Dunedin) reports as follows:—

"Supervision was carried out upon a total of 261 children—130 boys and 131 girls. these children, 188 had a complete medical examination during the year and 214 children were upon a regular weighing schedule. It was found that the children were carrying on in an apparently satisfactory way with regard to health with the exception of three children, who necessitated further care and were placed under sanatorium treatment. Considering the weights of the children, 51·3 per cent. were average or overweight, 16 per cent. were definitely underweight, and of these, 8.4 per cent. were in a condition of subnormal nutrition, which percentage is higher, as is usual, than in the case of an average group of children. facts illustrate the need for the special supervision of these children and justify the special care expended upon them.'

## MILK-IN-SCHOOLS SCHEME.

The issue of the daily half-pint of milk to children at school is now available to some 190,000 children. Where owing to isolation a supply of pasteurized milk is found impracticable, arrangements are being made to introduce malted-powdered milk, which has been used with success wherever it has been

School Medical Officers and teachers are unanimous in their opinion that the children are taking the milk with marked benefit to their physical well-being and are showing an activity and alertness beyond that formerly met with in school.

The following extracts from reports are of interest:—

Dr. Mulholland.—" In most schools it is customary for the children to have their milk just before morning interval, at 10.30 a.m. Several parents have complained to me about their children being unable to eat their dinner. They say that it is only since the children have been having milk at school that this has occurred, and in some cases they have forbidden them to take milk on this account. In