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Colony of Fiji

ANNUAL REPORT

OF THE

MEDICAL DEPARTMENT

FOR THE YEAR

1960

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Colony of Fiji

ANNUAL REPORT

OF THE

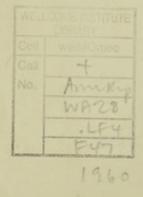
MEDICAL DEPARTMENT

FOR THE YEAR

1960

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CONTENTS	Pag
I-General Review	1
II—Administration—	
Establishment and Staff—Appointments, Transfer	0
Legislation	4
Colonial Development and Welfare Projects	4
III—Public Health—	
Organization	5
Communicable Diseases	5
VI—HYGIENE AND SANITATION	6
VI—HYGIENE AND SANITATION	7
VI Harris Diagram	-
VII Devery Durgray	-
VII—DENIAL DIVISION	0
	100
IX—NUTRITION	8
X—Training	8
IX—FAMILY PLANNING	8
XII—DEPARTMENTAL VESSELS	8
XIII—PHILANTHROPIC ORGANIZATIONS	9
XIV—METEOROLOGY	9
Appendices—	
I—Departmental Establishment	10
II—(a) Hospitals and Dispensaries	11
(b) In-patients and Out-patients	12
III—Tuberculosis	13
IV—Colonial War Memorial Hospital, Suva	16
V—Mental Hospital, Suva	23
VI—Central Leprosy Hospital, Makogai	25
VII—St. Elizabeth Home, Korovou, Suva	-
VIII—Dental Division	
IX—Pathological Division	
X—Central Medical School	
XI—Nursing Division	
XII—Notification of Infectious Diseases	
XIII—Vital Statistics	
XIV—Return of Diseases and Deaths	
XV—Local Authorities	
XVI—Suva Gaol	
XVII—Meteorology	50





MEDICAL DEPARTMENT

(Annual Report for 1960)

I-GENERAL REVIEW

There was no major outbreak of infectious disease during the year and the health of the community as a whole remained reasonably good. The number of cases of dysentery (all forms) and of infantile diarrhoea notified showed some increase, but this was probably due to improved reporting rather than to a higher incidence of disease. The occurrence of these intestinal diseases does, however, give a clear indication of the poor environmental sanitation, particularly in rural areas, where most cases were reported, and calls for marked improvement in this respect. In many villages latrines, if they exist at all, are badly maintained or unused, refuse disposal is ill-organized and water supplies are open to gross contamination. This state of affairs cannot be excused by lack of funds as adequate sanitation could be achieved with material and labour already to hand, but is due to ignorance or indolence.

- 2. The incidence of other diseases was in the main much the same as in 1959. The number of cases of cerebro-spinal meningitis declined, as did those of infective hepatitis. There was some increase in the cases of measles and German measles notified but there was no epidemic in either case.
- 3. In November a case suspected to be suffering from smallpox was notified from Niue island. Owing to the isolated situation of Niue it was not possible to arrange for consultation, but as, by telegraphic description, the case was clinically one of variola minor the diagnosis was accepted. Vaccination was offered to all persons in Suva, Lautoka and Nadi, the ports of sea and air entry into Fiji and over 40,000 persons were vaccinated in 14 days. In addition 5,000 units of vaccine were made available from Fiji and, with the kind co-operation of the Royal New Zealand Air Force dropped on Niue, this being sufficient to vaccinate the entire population of the island.
- 4. The B.C.G. vaccination campaign continued, the main areas covered being Vanua Levu and the Lau group of islands. Thirty-one thousand four hundred and ninety-six children and young adults were tested and inoculated when necessary during the year, bringing the total since the campaign opened to 81,869. A Senior Medical Officer was appointed during the year to conduct the tuberculosis control programme and is responsible for the inoculation campaign, domiciliary treatment, the organization of follow-up of cases and control measures in general. He works in close liaison with the Medical Superintendent of the Tamavua Tuberculosis Hospital. It is, as yet, too early to say what results the campaign has had, but the number of new cases of the disease registered during the year approximated closely to the number in 1959, i.e. 648 as against 644.
- 5. As forecast the number of leprosy patients discharged from Makogai as cured was considerably less than in the two previous years. This is because the total number of patients has now been reduced to 305 and of these a high proportion are persons with long-standing disease and mutilation or of lepromatous type requiring longer treatment. Unhappily there was an atmosphere of tension and discontent created amongst some of the patients, particularly the young adults, by ill-considered and ill-informed criticism of the isolation policy from a letter-writer to the local and overseas press, which upset the even flow of progress which was being made.
- 6. The closer integration of curative and public health services is becoming more apparent and the greater emphasis placed on preventive medicine in the training of A.M.Os. and Nurses is beginning to manifest itself. This emphasis is made not only during the periods in the training when public health is taught specifically, but stressed during clinical teaching in the lecture-room and at the bed-side. To this steady awakening to the importance of prevention has been added the realization of the need for health education of the public.
- 7. With a view to establishing systematic health education, a Senior A.M.O. was given study leave to take the course in Health Education in London in which he was successful and obtained the diploma. Since his return, he has made essential contacts with officers in the Education and other departments and carried out a series of surveys preparatory to initiating a wider programme. In addition, close liaison has been maintained with the Women's Interests Officer with the object of spreading health education through the medium of women's committees, clubs and institutes in both urban and rural areas.

- 8. There was no major hospital construction undertaken during the year, but plans for the new out-patients' department and operating theatre block at the Colonial War Memorial Hospital have been completed and a Colonial Development and Welfare grant of £180,000 has been made. Building should start early in the new year. With savings from the Nuffield Foundation grant for the Department of Preventive and Social Medicine at the Medical School an additional building has been constructed to house the Hygiene Section for training of Health Inspectors.
- 9. During the year there was increased public demand for a new hospital at Lautoka. Unfortunately funds are not available at present for a major construction of this nature, but a considerable amount of maintenance work and general improvements have been carried out and the hospital can be compared favourably with many in countries with a more stable economy. The criticisms levelled at the structural aspects of this institution have tended to obscure the high level of service which has been rendered from it to the public. It would not be out of place to express the hope that the public realizes that despite the structural faults and lack of some facilities which may exist at the hospital, a high degree of surgical, medical and nursing skill has been displayed by all sections of the staff.
- 10. The number of both in-patients and out-patients treated at all major hospitals in the Colony increased during the year and staff are to be congratulated on the way in which they have met the extra demands put upon them. The general standard of medical service in these institutions is in fact extremely high although, by many, not appreciated.
- 11. Owing to the shortages of staff it was not possible to expand dental services during the year and, in fact, deficiencies of transport hampered the work still further particularly in northwestern Viti Levu. However, a great deal of work was achieved, particularly amongst school children and the policy continues that priority is given to conservative dentistry and dental health education in the schools.
- 12. Training of A.M.Os., A.D.Os., Nurses and auxiliary medical staff continued throughout the year. The first post-graduate course in public health leading to a certificate in public health was successfully completed and this is now to become an annual event. The course is of six months' duration and was attended by eight A.M.Os. drawn from various territories, three being from Fiji. The entry of dental students for the course in dentistry was disappointing and efforts will be made in future to advertise the course more widely. The training is a comprehensive one and the prospects of graduates are reasonably good. Three locally trained Nurses obtained the New Zealand qualifications and sixty graduated at Colony level. Two girls who had graduated at the New Zealand level in 1958 were promoted to the rank of Nursing Sister. A new feature of the training introduced during the year is that students work for two weeks with a Health Sister in the districts to familiarize them with public health nursing.
- 13. Training of Assistant Health Inspectors continued, trainees being drawn from the group of Mosquito Inspectors which are being integrated into the general hygiene service. Plans have been made to train at a higher level in 1961 and recognition of this higher training has been given by the Royal Society for the Promotion of Health and the Society's certificate will be granted to successful candidates.
- 14. Assistant pharmacists, radiographers, laboratory technicians and housekeeper/dietitians were also trained and a course for assistant physiotherapists was initiated at the beginning of the year.
- 15. One A.M.O. underwent post-graduate training at Melbourne University in medicine and paediatrics on a grant provided by the Colonial Sugar Refining Company and another took a course in obstetrics and gynaecology at Otago University at his own expense. Two local Nurses who had graduated on the New Zealand curriculum were sent to New Zealand for midwifery training.
- 16. The World Health Organization continued to give valuable assistance to the School in the form of two lecturers, one in biology and the other in physiology, and a generous cash grant for the purchase of equipment. In addition, the Organization continued the fellowship for the student taking the degree course in Biology at Otago University while fellowships were given to a lady A.M.O. to study maternal and child welfare in Singapore; the Chief Health Inspector to study statistical methods and to the Health Instructor to study teaching methods.
- 17. The Physician Specialist took a course, while on vacation leave in England, on the medical uses of atomic energy and later studied in the U.S.A. recent advances in cardiology, with the assistance of a travelling fellowship generously provided by the Rockefeller Foundation.
- 18. For the third successive year a seminar was organized by the Council of the A.M.Os' Association. The subject this year was Maternal and Child Welfare and all aspects were considered and included a session on family planning. That the seminar was a success can be judged not only from the lively discussions which took place, but also from the excellent report which was prepared following its conclusion.
- 19. The seven family planning clinics established between 1957 and 1959 continued to function and in addition, small clinics have now been opened at Levuka and Tailevu, the necessary contraceptive material having been supplied to the A.M.Os. at these centres.
- 20. Finally I would like to express my sincere thanks to all members of the staff of the department for their loyal and devoted service during the year.

II—ADMINISTRATION

- 21. The departmental establishment is shown as Appendix I of this report.
- 22. Senior Staff Changes, Appointments, Transfers, etc.—The Director of Medical Services was absent on vacation leave from January 29th to July 11th. Dr. W. H. McDonald, Deputy Director of Medical Services, acted as Director of Medical Services during this time. Dr. C. H. Gurd, Physician Specialist, acted as Deputy Director of Medical Services from 7th January to 10th April. He proceeded on vacation leave on 23rd April. Dr. D. W. Bookless acted as Deputy Director of Medical Services from 11th April to 10th July.
- 23. Dr. C. H. Gurd proceeded on vacation and study leave during which time he attended a course in the United Kingdom on the medical uses of atomic energy and, with the assistance of a grant from the Rockefeller Foundation, studied advances in cardiology in the United States of America.
 - 24. Dr. P. W. E. Downes acted as Physician Specialist during the absence of Dr. Gurd.
- 25. Dr. M. Gosden, O.B.E., Pathologist, proceeded on leave on completion of her agreement on 17th February and Dr. W. G. MacIntosh was appointed Acting Pathologist.
- 26. Dr. G. D. Murphy proceeded on vacation and study leave and took the course in Cardiff leading to the Diploma in Tuberculous Diseases in which he was successful.
- Dr. A. J. Hibell was promoted to the rank of Senior Medical Officer and was appointed Tuberculosis Control Officer.
- 28. Dr. F. A. S. Emberson was awarded a Commonwealth Scholarship and proceeded to the United Kingdom to take a course leading to the M.R.C.P.
- 29. Dr. W. F. Whimster was appointed a medical officer by the Secretary of State and Dr. D. Clark appointed locally in a temporary capacity.
- 30. Dr. H. Bor retired from the Service and Mr. J. L. Gödfrey, Dental Officer, left the Colony on completion of his contract. Mr. R. B. Fyfe, Chief Health Inspector retired from the Service.
 - 31. Mr. G. E. Martin, Health Inspector, was promoted to Chief Health Inspector.
- 32. Dr. W. P. Fisher was seconded to Western Samoa and Dr. B. Pitt-Payne to the Cook Islands.
- 33. Dr. H. Rushton was appointed consulting psychiatrist at the Mental Hospital on a part-time basis in December.

LEGISLATION

- 34. Legislation of medical interest was as follows:-
 - 1960—Ordinance No. 20 amended the Pharmacy and Poisons Ordinance.
 - 1960—Legal Notice No. 8 amended the Schedule to the Public Hospitals and Dispensaries Regulations.
 - 1960—Legal Notice No. 22 prescribed medical fees under the Air Nagivation (Medical Fees) Regulations, 1960.
 - 1960-Legal Notice No. 25 concerns the destruction of stray dogs by means of poisoning.
 - 1960—Legal Notices Nos. 37, 54, 156, 157, 158, 159, 160, 161, 162, 166, 167, 171 and 174 concern the Burial and Cremation Ordinance.
 - 1960—Legal Notices Nos. 53, 86, 104, 122, 128, 186, provide for the free entry of certain drugs under the Customs Ordinance.
 - 1960—Legal Notice No. 26 amended the Public Health (Building) Regulations.
 - 1960—Legal Notice No. 29 amended the Quarantine (Maritime and Aerial) Regulations.
 - 1960—Legal Notice No. 74 prescribes diet and dietary scales for prisoners.
 - 1960—Legal Notice No. 82 defines the areas to which the Public Health (Sanitary Services) Regulations shall apply.
 - 1960—Legal Notices No. 89 provides Regulations for the temporary conditional discharge of lepers.
 - 1960—Legal Notice No. 115 amended Regulation 188 of the Public Health (Building) Regulations, 1959.
 - 1960—Legal Notice No. 117 amended Regulation 194 of the Public Health Regulations.
 - 1960—Legal Notice No. 125 made regulations under the Public Health Ordinance controlling hotels, restaurants and refreshment bars.
 - 1960—Legal Notice No. 172 amended the Dogs Ordinance.

FINANCE

35. Expenditure for the year 1960—General, District, Special and Rural Hospitals and Dispensaries:—

Salaries of Medical Officers					-	£60,996
Salaries of Assistant Medical	Officers					81,897
Salaries of Laboratory Staff						6,860
Salaries of Nursing Staff						133,786
Salaries of X-ray Staff						2,640
Salaries of Clerical Staff						25,654
Salaries of Dental Staff						10,900
Wages of Subordinate Staff	f, Ration	s, Po	wer, H	leat, L	ight,	
Water, Refrigeration, X-1	ay Serv	ices, I	aundr	y, Hos	pital	
Paupers' Burial, General M	aintenan	ce, Sto	res and	Incide	ntals	204,916
						£527,649

36. Medical Stores and Equipment—Value of issues to nearest £:—

		Drugs and Instruments	Clothing and Bedding	Totals
		£	£	£
Cash Sales	 	 20		20
Private Accounts	 	 190		190
*Special Hospitals	 	 6,207	4,410	10,617
*General Hospitals	 	 39,563	14,117	53,680
Rural Hospitals	 	 5,552	1,308	6,860
Dispensaries	 	 6,750	147	6,897
Health Sisters .	 	 1,653	154	1,807
Nurses	 	 3,094	212	3,306
Missions	 	 54	4	58
Other Medical . *	 	 1,755	492	2,247
Other Departments	 	 589	134	723
		£65.427	£20.978	£86,405

 Values for Special and General Hospitals also include £1,844 and £7,534 for X-ray films.

37. Revenue and Expenditure of the Department:-

				1958	1959	1960
				£	£	€
Gross Expenditure				888,047	901,285	951,432
Revenue				78,169	86,867	108,274
Nett Expenditure				809,878	814,418	843,158
Percentage of Colon	y's E	xpendit	ure	10.0%	10-0%	13.4%
Expenditure per he	ad of	populat	ion	44s. 0d.	42s. 2d.	42s. 0d.

These figures include revenue and expenditure of the South Pacific Health Service.

Year			Total Population	Expenditure per head
1951	 	 	 301,959	32s. 10d.
1952	 	 	 312,678	36s. 7d.
1953	 	 	 320,801	38s. 8d.
1954	 	 	 333,389	36s. 9d.
1955	 	 	 345,164	36s. 3d.
1956	 	 	 357,881	40s. 2d.
1957	 	 	 361,038	42s. 7d.
1958	 	 	 374,284	44s. 0d.
1959	 	 	 387,646	42s. 2d.
1960	 	 	 401,018	42s. 0d.

38. The above table shows the expenditure on Medical and Health Services per head of the population over the past ten years.

COLONIAL DEVELOPMENT AND WELFARE PROJECTS AND RESEARCH BY OTHER ORGANIZATIONS

- 39. There were no Colonial Development and Welfare schemes in progress during the year, but the report of Mr. G. F. Burnett of Her Majesty's Overseas Research Service on his researches into the control of filariasis was published and distributed.
- 40. Drs. Gurd and Downes carried out clinical research into the use of Griseofulvin in the treatment of ringworm.
- 41. Professor J. A. R. Miles and Mr. R. G. Ordish of the New Zealand Research Council undertook investigations into the carriage of viruses by arthropods.
- 42. Preliminary arrangements were made for investigation into the efficacy of a new drug TH1314 on behalf of May and Baker Limited in the treatment of tuberculosis.

INTERNATIONAL AGENCIES

- 43. World Health Organization—The World Health Organization continued to assist in the training at the Central Medical School by the loan of two lecturers, one in Biology and the other in Physiology. The Physiology lectureship appointment will be terminated in 1961 when a local appointment is likely to be made, but that in Biology is to continue until 1962. A grant of \$750 was made for the purchase of equipment.
- 44. Fellowships—Jimione Samisoni, the Fijian student who was granted a fellowship to study physiology at Otago University, obtained his degree and returned to Fiji to take up appointment as assistant lecturer at the Medical School.
- 45. China Medical Board—Maneklal Vithal who was granted a fellowship by the China Medical Board to study physics obtained his degree at Otago University and remained in New Zealand for a further year to take a teaching course.
- 46. South Pacific Commission—Meeting—The Director of Medical Services attended the meeting of the Research Council (Health Section) in Noumea, New Caledonia, from July 12th–19th.
- 47. Examiner—Dr. W. Norman-Taylor, Public Health Officer, South Pacific Commission, visited Fiji in December and acted as external examiner in public health in the final examinations at the Medical School.
- 48. Nutrition—Miss M. Maramba, the Commission's Nutrition and Home Economics Officer, carried out an investigation into the available food for consumption in the Colony and did a market survey from July to August.
- 49. Epidemiological Service—The epidemiological service for the island territories is the responsibility of the Inspector-General, South Pacific Health Service and is centred in Suva. The South Pacific Commission subsidized the service by an annual grant of £400.

III-PUBLIC HEALTH

ORGANIZATION

50. The organization of the public health services remained much the same as in former years, there being close integration of public health and curative services. The medical services are administered by the Director of Medical Services as head of the Medical Department. He is assisted at headquarters by a Deputy Director of Medical Services, Administrative Secretary, Nursing Superintendent, Chief Health Inspector, Accountant and clerical staff. For administrative purposes, the Colony is divided into four divisions corresponding with the general administrative divisions and each is in the charge of a Divisional Medical Officer, who is responsible for the organization of the curative and preventive arrangements of his area. He controls the work of junior Medical Officers and Assistant Medical Officers, Health Inspectors, Assistant Health Inspectors, Health Sisters, District Nurses and other medical personnel in his division. The two exceptions to this pattern are in the Central Division in which the Colonial War Memorial Hospital, as specialist centre, and the Tamavua Tuberculosis Hospital, as central sanatorium, are administered by Medical Superintendents and not by the Divisional Medical Officer and in the Western Division where, during the year, the hospital was placed in the charge of the Surgical Specialist acting also in the capacity of Medical Superintendent while the Divisional Medical Officer was responsible for the public health and all other curative centres in his division. A conference of Divisional Medical Officers was held during the year under the Chairmanship of the Director of Medical Services, to decide upon policy and co-ordinate activities. During one day of the conference, specialist staff attended to advise on matters in their particular field.

COMMUNICABLE DISEASES

51. The trend in certain notifiable diseases in the last six years is shown in the following table:—

	1955	1956	1957	1958	1959	1960
Dengue	36	38	12	8	28	5
Dysentery (all forms)	250	231	233	163	113	203
Enteric Group	26	14	25	29	29	5
Infantile Diarrhoea .	1,452	2,369	2,117	1,991	2,092	3,295
Pertussis	627	471	261	1,000	1,154	509
Influenza	5,437	5,710	12,190	11,626	20,041	13,030
Measles	9	12	7,066	15	13	712
Poliomyelitis	14		6	328	6	
Infective Hepatitis .	53	63	123	279	396	206
Tuberculosis*	745	654	654	721	644	648
Leprosy*	36	40	44	39	42	39
Gonorrhoea	322	299	375	335	281	380
Syphilis	48	15	26	10	8	2
Yaws		519	159	135	82	26
Tetanus	37	38	38	56	47	41

* These figures are obtained from the Central Registry and not from notification records as those from the Registry are considered to be more accurate. A full table of all notifiable diseases is given at Appendix XII. Certain of the diseases listed deserve special mention:—

- 52. Intestinal Diseases—The number of cases of dysentery and infantile diarrhoea notified during the year showed an increase, but this is probably not indicative of a true rise in incidence, but only of improved reporting. It is not suggested that the situation is satisfactory as conditions of envoronmental sanitation, particularly in rural areas, are far from that and the figures give a clear call for greater activity in providing more latrines; organizing better disposal of refuse and purifying water supplies. The incidence of typhoid fever was less than in the previous year, but this also is not really significant as there was no major flooding in the Rewa area during the year whence most cases have been notified formerly after heavy rain.
- 53. Cerebro-spinal Meningitis—The number of cases notified was less than in 1959 and there is reason to believe that the disquieting increase shown in that year was a false alarm.
- 54. Infective Hepatitis—The number of cases notified showed a decrease for the first time in almost seven years. Over that period the number of cases reported has been from 29 in 1955 to 396 in 1959. In the year under review, the number fell to 206, but it is too early to say whether this is significant.
- 55. Yaws—Only 26 cases of yaws were notified and most of these were non-infective. All cases reported were immediately followed-up and treated. Contacts were also given treatment.
- 56. Tuberculosis—The number of cases notified was almost exactly the same as that notified in the preceding year, 648 as against 644. It is not possible to be dogmatic regarding the incidence of the disease, but there is some evidence to support the view that a peak has been reached and that although it is not yet on the decline, it is no longer on the increase.
- 57. Leprosy—The number of cases reported and admitted to the leprosarium remained fairly steady as has been so for the last five or six years. More cases now seen are, however, in the earlier age groups which seems to indicate improved case-finding and thus better chances of cure.
- 58. Venereal Disease—The number of cases of gonorrhoea showed some increase, but this was probably not of any great significance. Most of these cases were reported from the port areas of Suva and Lautoka. Only two cases of syphilis were reported.

VITAL STATISTICS

- 59. Fuller details regarding vital statistics are given in an appendix to this report and are also available in the report of the Registrar-General, but certain statistics are worthy of record in this section.
- 60. The crude birth rate per thousand of population was 39, that for Fijians being 37 and Indians 43.
 - 61. The crude death rate was 6-5, that for Fijians being 7-1 and for Indians 6-4.
- 62. The infant mortality rate continued to fall and was recorded at 36.06 per thousand live births for all races or 31.64 for Fijians and 40.40 for Indians.
- 63. It is of some interest to compare these figures with those of ten years age. In 1950, the crude birth rate was calculated to be 37·11 for Fijians and 42·49 for Indians. The death rate was 12·31 for Fijians and 9·99 for Indians. The infant mortality rate was shown as 60·36 for Fijians and 57·80 for Indians.
- 64. Another set of figures of some interest are those showing deaths in the second year of life, i.e. the 1-2 years age group. These in 1950 were 153 Fijian infants and 35 Indian. In 1960 they were recorded as 75 Fijian and 39 Indian.

IV-HYGIENE AND SANITATION

- 65. The Director of Medical Services is ex officio Chairman of the Central Board of Health. This Board advises on all health matters and holds executive powers in areas where there are no local authorities. It also can exercise such powers should a local authority default in its duty. There are 26 local authorities of which 18 are concerned with rural areas and the remainder responsible for the administration of Suva City, Lautoka Town, Nadi International Airport and the townships of Nausori, Ba, Nadi, Levuka and Labasa.
- 66. The minutes of meetings of the local authorities are sent to the Secretary of the Central Board of Health and advice is given by the Board on all matters referred to it. All requests for legal aid are passed through the Board to the Law Officers of the Crown.
- 67. A great deal of work has been carried out during the year in revising health regulations, particularly those dealing with hotels and eating houses and those concerned with pure food.
- 68. The health staff of all local authorities, except the City of Suva, are employed by the Medical Department and seconded to the various authorities as is found necessary for carrying out the duties laid down under the public health legislation.

V-SEAPORT AND AIRPORT HEALTH AND QUARANTINE

- 69. The only ports of entry for shipping from malarious countries are Suva and Lautoka and for aircraft, are at Nadi and Laucala Bay although special arrangements can be made for aircraft landing at Nausori. Levuka is a port of entry for shipping from non-malarious areas.
- 70. Medical Officers of Health are available at each of these ports together with a complement of Health Inspectors and Assistant Health Inspectors. In addition to normal port health duties this staff is also engaged in anti-mosquito measures as the territory being free from anopheline mosquitoes it is essential to maintain this freedom. Special measures are also necessary to control Aedes Egypti which are indigenous in the islands.
- 71. The need for special vigilance to ensure the exclusion of anopheles mosquito is frequently not understood by a number of persons, but there is no doubt that if the vector of malaria were to establish itself the disease would be rife as the reservoir of parasites is present following service of Fiji military forces in malarious countries.

VI-HOSPITALS AND DISPENSARIES

72. The centres available for the treatment of the sick remained at—(a) 45 dispensaries, in the charge of Assistant Medical Officers, located at centres of populations, both rural and urban, throughout the Colony. (b) 14 rural hospitals, all except one, being administered by Assistant Medical Officers, situated at points convenient for the collection of patients who require treatment from the immediate environs or from out-lying dispensaries. (c) 4 divisional hospitals, including the specialist hospital at Suva, situated at the divisional centres and drawing their patients either from the immediate surroundings or from rural hospitals if greater facilities for diagnosis and treatment were required than were available at the latter. (d) Specialised hospitals for tuberculosis, leprosy and mental cases. The actual locations of hospitals and dispensaries is shown at Appendix II (a)

73. The size of the rural hospitals varies from 52 to 9 beds. They provide accommodation for patients the diagnosis of whose condition can be made clinically and who require only short-term treatment. They are also useful in providing accommodation for convalescent cases from the larger divisional hospitals. It is hoped to provide a simple form of X-ray apparatus and small laboratory at some of these hospitals situated at foci of larger population in order to limit the amount of travelling required of patients to major centres and also relieve the pressure on these larger units.

Savusavu, Taveuni and Rotuma are those most likely to be so equipped initially.

74. Of the 4 divisional hospitals, the Colonial War Memorial Hospital, Suva, is the specialist centre for the Colony. The specialist staff consists of a physician, surgeon, obstetrician/gynaecologist, anaesthetist, ophthalmologist, radiologist and laboratory facilities are available from the Central Laboratory which is within the precincts of the hospital and under the control of a pathologist. The hospital also functions as a training centre for medical and nursing students and as a divisional hospital for the central division. A very high standard of work was maintained and a number of improvements to the hospital facilities were made during the year. Plans for a new, much needed, out-patients department and operating theatre block are now complete and it is hoped to start building in 1961 from funds made available from a Colonial Development and Welfare

75. The next largest hospital is that at Lautoka. This is an old-fashioned wooden building with limited facilities. There is considerable local feeling that it should be replaced by a more modern structure, particularly as it caters for a fairly large concentration of population in the Western Division. Unfortunately funds are not at present available for such a major undertaking, although there are hopes of money being found in connexion with the next development plan. However, a considerable amount of maintenance work was undertaken on the building during the year and there has been a most marked improvement in appearance. The two most deficient sections in the hospital at present, are the out-patients' department and the children's ward. A surgeon, who also acts as medical specialist, is stationed at the hospital and he is supported by a staff of Medical Officers and Assistant Medical Officers. The hospital is also a training centre for nurses. Despite the difficulties of running this hospital, excellent work was achieved by all members of staff.

- 76. The Labasa and Levuka hospitals functioned satisfactorily during the year. These hospitals are also of old design, but can be adapted to cover requirements for some little time yet. New Sisters' quarters are being erected at the Labasa hospital which will lead to greater contentment amongst the senior nursing staff whose present accommodation is far from adequate, but improved quarters for Assistant Medical Officers is urgently required.
- 77. Specialized institutions are: The Tuberculosis hospital at Tamavua, the Leprosy hospital at Makogai and St. Elizabeth Home, Suva, the Mental Hospital, Suva. Details are given at Appendices III, VI, VII and V.

VII-DENTAL DIVISION

- 78. The Dental Division of the Department has its headquarters at Suva and is under the control of a Senior Dental Officer. The department fulfils three main functions:—
 - (1) Training of dental personnel
 - (2) Provision of dental treatment, particularly to children of school age
- (3) Dental Health education and preventive dentistry. Details of the work can be found at Appendix VIII.

VIII-LABORATORY DIVISION

79. The Central Laboratory is under the control of the Pathologist and specimens are sent to it from all medical units in the Colony as well as from some outside territories. A wide range of investigations can be carried out and apart from virology, there are few occasions when help from larger laboratory centres is necessary. The Pathologist is also responsible for a large proportion of the medico-legal work of the Colony, a task which is most time consuming. A blood bank is now firmly established as part of the laboratory service. Fuller details of the laboratory work undertaken is given at Appendix IX.

IX-NUTRITION

- 80. The nutritional research and much of the education on the subject of students and the public is carried out by the staff of the Nutrition Section of the South Pacific Health Service, Unfortunately, personnel has been difficult to obtain and the staff depleted by marriage, thus the continuity of the work has suffered to some extent. However, training of assistant dietitians has continued without interruption and the Home Science Extension teacher has travelled widely both inside and outside the territory.
- 81. The rationing of medical institutions is supervised by a Supervising Dietitian on the staff of the Medical Department. She advises on ration scales, purchases, special diets, etc., and is responsible for the work of the housekeeper/dietitians at each of the major hospitals. She also advises on rationing of rural hospitals.
- 82. There was useful collaboration during the year between the Nutritionists and the Women's Interests Officer.

X-TRAINING

- 83. The training of Assistant Medical Officers and Assistant Dental Officers continued at the Central Medical School. Details regarding the number of students in training and their countries of origin are given in an appendix to this report, together with other relevant information concerning the School. The first post-graduate course in public health at the Nuffield Department of Preventive and Social Medicine was successfully completed during the year. The course was of six months duration and candidates, all of those attending being successful, obtained the Certificate of Public Health.
- 84. The annual clinical and social survey of an island population, carried out by the final year students with attendant staff, was this year in Matuku, Lau. Weekly broadcasts to Assistant Medical Officers on special medical subjects over the Posts and Telegraphs Department's network continued and the Council of the Assistant Medical Officers' Association organized, for the third year in succession, an excellent seminar, the subject this year being Maternal and Child Health.
- 85. At the Central Nursing School at Tamavua there were 159 student nurses in training out of which 133 were taking the course under the local curriculum and 26 under the New Zealand curriculum. At the school at Lautoka, 78 were in training on the local curriculum and 20 were in training at the Ba Mission Hospital. Of the total number of final year students 60 graduated on the local curriculum and 3 obtained the New Zealand registrable qualifications.
- 86. Other courses of study for Assistant Health Inspectors, Pharmacists, Radiographers, Laboratory Technicians, Dietitians, continued and a course for Assistant Physiotherapists started at the beginning of the year. A new building as a training centre for Assistant Health Inspectors was completed during the year in association with the Nuffield Department of Preventive and Social Medicine. Arrangements were completed for starting a course for Health Inspectors at a higher level in 1961 and recognition of this training has been given by the Royal Society for the Promotion of Health.

XI-FAMILY PLANNING

87. Family planning clinics established at Suva, Lautoka, Labasa, Nailaga, Nadi, Savusavu and Sigatoka, continued to function and advice was also available at Wainibokasi, Taveuni, Wainikoro and Levuka. Two thousand six hundred and forty people attended the clinics during the year. At Suva, the clinic advice was also available regarding sub-fertility and at the other clinics those seeking such advice were referred to appropriate specialist staff.

XII-DEPARTMENTAL VESSELS

88. A number of vessels are maintained and controlled by the Medical Department, amongst which are the following:—

The 42-ton a.k. Vuniwai used chiefly for carriage of staff on inspection and transfer, the transport of patients, particularly those suffering from tuberculosis and leprosy, and for the distribution of medical supplies. The vessel was also used in times of emergency to carry foodstuffs and, on occasions, for the transport of special teams on survey or other research work.

The a.k. Makogai, as her name indicates, is the vessel used as transport for the Leprosy Settlement on the island of Makogai and was used to convey stores, staff, visitors and discharged patients between Makogai, Viti Levu and Levuka.

The launch *Eileen*, also based on Makogai, was used mainly for the collection of copra from various points on the island, in fishing expeditions for patients and staff and provides communication between Makogai and Levuka.

The launch Vuniwai-ni-Toba was used for purposes of giving pratique to vessels arriving in Suva harbour, for fumigation and deratisation duties and for short journeys to neighbouring islands including weekly visits to the quarantine islands of Makuluva and Nukulau.

The Adi Makereta, which was based formerly at Wainibokasi, was transferred to Labasa for relatively short journeys within the reef. The Rewa river in which she formerly navigated has now become so silted that she was unable to fulfil her proper function.

89. Various motorized punts are either in use or on order for river and close coastal work. The annual grant given to the Department by the Colonial Sugar Refining Company for child welfare work is being used, with the Company's permission, for the purchase of more of these vessels for transport of Health Sisters and Assistant Medical Officers.

XIII—PHILANTHROPIC ORGANIZATIONS

- 90. New Zealand and Fiji Lepers Trust Board—The Fiji Board, under the Chairmanship of Sir Hugh Ragg, continued to disburse funds allocated to Fiji by the parent body in New Zealand. A generous allocation—this year amounting to fNZ.9,500 was made available, and very sincere thanks are due to Mr. P. J. Twomey, M.B.E., J.P., the Secretary of the New Zealand Board for his tireless efforts; to the other members of the Board for their support and the people of New Zealand for their generosity.
- 91. The money is used to provide grants for those ex-leprosy patients who may need assistance and also for a variety of capital works on Makogai and at St. Elizabeth Home.
- 92. War Memorial Anti-Tuberculosis Fund—This Fund, which accumulated as a result of voluntary contributions, is administered by a Board of Trustees of which Sir Hugh Ragg is the Chairman and Mr. W. E. Donovan, I.S.O., K.S.G., is Secretary. Funds have been made available for buildings and equipment used in the campaign against tuberculosis. The general expenses for the B.C.G. vaccination campaign are also being borne by the Fund.
- 93. British Red Cross Society—The Fiji Branch, under the Presidency of Lady Maddocks and the Directorship of Mr. L. R. Martin, continued its activities during the year and gave great assistance to the Department. The services rendered covered a wide range and included divisional therapy and mobile libraries for hospital patients, a group for care of handicapped children and gifts of children's clothing, toys and special equipment.
- 94. St. John Ambulance Brigade and Association—First Aid and Home Nursing classes continued throughout the year and the enthusiasm of members was maintained. Personnel from the Brigade continued to give valuable service in manning ambulances at the Colonial War Memorial Hospital during the night hours.
- 95. Home of Compassion—The Home of Compassion staffed by Marist Sisters accepts aged ladies who, for some reason or another, require some degree of nursing care. The institution is excellently run and fulfils a very real need.
- 96. The Cottage Home—This home for aged people is supported by public subscription and also is well organized and of great importance to the welfare of the elderly.
- 97. Crippled Children's Association—A Crippled Children's Association under the Presidency of Dr. Sahu Khan was formed during 1959 with branches in Lautoka and Suva. The aim of the Association is to arrange for treatment of crippled children, when this is possible, assist in rehabilitation and provide various aids and appliances where these are necessary.
- 98. Royal New Zealand Air Force—Mercy Flights—Again tribute must be paid to the officers and men of the Royal New Zealand Air Force, who, from the flying-boat base at Laucala Bay, have continued to give invaluable service in times of emergency. Calls upon the Air Force to pick up seriously ill patients from the remoter islands or to drop supplies have met with immediate response and the mercy flights have been carried out with characteristic efficiency and cheerfulness.

XIV-METEOROLOGY

99. Summaries of the meteorological observations for 1960 are given at Appendix XVII. For these, I am indebted to the Meteorological Officer at Laucala Bay, Suva.

P. W. DILL-RUSSELL, Director of Medical Services.

APPENDIX I

APPENDIX I		
DEPARTMENTAL ESTABLISHMENT		
		1960
1. Medical and Administrative Section—		
Director of Medical Services		1
Deputy Director of Medical Services		1
Secretary		1
Dissision Consistint		4
Surgeon Specialist		1
Surgeon		i
Medical Officers		15
Ophthalmologist		1
Radiologist (1) Pathologist (1)		2
Anaesthetist		1
Gynaecologist/Obstetrician		1
Senior Dental Officer (1) Dental Officer (1)		2
Assistant Medical Officers		131
Dhreigthoropiete		12
	**	-
2. Nursing Section—		
Nursing Superintendent		1 5
Cistons in Change	**	5 4
Numering Cictors (52) Haalth Cictors (10)		65
Principal (1) Tutors (6) Nursing School		7
Nurses		400
3. Technical Section—		
T. L C Consist and set		1
Chief I abandans Assistant		1
Laboratory Assistants		13
Chief Health Inspector		1
Health Inspectors (10) Assistant Inspectors (Health		
Mosquito (66))		76
Chief Pharmacist and Medical Storekeeper		1
Pharmacists (2) Assistants (8)		10
Radiographers (3) Assistant Radiographers (5)		8
Supervising Dietitian		1
Dental Hygienist (1) Assistant Dental Hygienists (7)		8
Assistant Dental Mechanics	**	3
4. Clerical Section—		
Departmental Accountant		1
Clerical Staff		56
5. Supervisory Section—		
Head Attendant, Mental Hospital		1
Assistant Head Attendant (1) Orderlies, Mental Hospital		23
Caretaker, Quarantine Island		1
Storekeepers and Storemen		6
Assistant Dietitians and Housekeepers (8), Laundry Su	per-	11
visors (2) Head Seamstress (1)		628
outorunate out it it it it it	100	020
6. CENTRAL MEDICAL SCHOOL—		1 24
Principal		1
Medical Officer		1
Anatomy and Surgery Lecturer		2
Assistant Lecturer		1
Medical Officer (Lecturer in Public Health)		î
Dental Officers		2
Dental Officers		1
Senior Mistress		1
Senior Mistress		26
7. FIJI LEPROSY HOSPITAL—		
Senior Medical Officer		1
*Clerical Staff		2
Overseer (1) School teachers (2) Constables (5)		8
Subordinate Staff		40
Nursing Sisters		23
Assistant Nursing Sisters		11
8. Central Medical Research Library—		
Assistant Librarian		1
Clerical Staff		1

APPENDIX II (a)

APPENDIX II (a	1)			
HOSPITALS AND DISPE	NSARI	ES		
				Beds
MAIN AND SPECIALIST HOSPITALS—				
Colonial War Memorial Hospital, Suva				335
Tamavua Tuberculosis Hospital, Suva				362
Mental Hospital, Suva	::		11	156 622
Tiji zeprosy Trospitat, stanogar			10	
DISTRICT HOSPITALS—				
Lautoka				168
Labasa				104 42
Levuka				42
SUBSIDIZED HOSPITALS—				
Methodist Mission Hospital, Ba				41
RURAL HOSPITALS—				
N-11 D-				20
Wainibokasi				52
Waiyevo, Taveuni				56
Vunidawa				20
Koromumu, Sigatoka				33
Vaileka, Rakiraki, Ra			**	18 36
Savusavu		::		33
Vunisea, Kadavu				26
Lomaloma, Lau				16
Lakeba, Lau				16 19
Matuku	- 11			9
Nabouwalu, Bua				30
See Appendix II (b) for details of out-patien	te			
See Appendix II (b) for details of in-patients	5.			
DISPOSITION OF URBAN AND RUR	AL DISI	PENSARI	ES	
In Suva—				
Suva Goal		Police St	ation	
Samabula Nuffield Clinic	1	Vabua		
Central Division (under Divisional Medical O	fficer)—			
Beqa Island		lausori (Clinic	
Korovou, Tailevu North Lodoni		lavua		
Lomanikoro		layavu Korovisil	011	
Mokani		iria		
Namosi	L	aselevu		
Eastern Division (under Divisional Medical C)fficer)			
Gau		Coro		
Kabara		Ioala		
Ono-i-lau		aro, Ka	davu	
Western Division (under Divisional Medical (Officer I	autoba	322	
Korolevuiwai	-	latuatua		
Nadariyatu		aviti, Y		
Nadi Airport (administered from Suva)		au		
Namarai		anukulo	a	
Tavua Vatukoula	V	lasau		
ratusoua				
Northern Division (under Divisional Medical	Officer,	Labasa)		
Dreketi		isoqo		
Lekutu		Vainunu	nd C	m moral to
Naduri Kioa Island		tabe Isla aqani	ind Co	mmunity
Natewa		Corotasei	re	
Tukavesi	-			
Total Rural Dispensaries—45. See Appendix II (b) for details of out-patien				

APPENDIX II (b)

The following tables show the analyses of in-patients and out-patients for the year 1960 :-

1. CENTRAL AND DISTRICT HOSPITALS ADMISSIONS—RACIAL DISTRIBUTION

Race	C.W.M. Hospital	Tamavua	Lautoka	Labasa	Levuka	Totals
Fijians	5,271 912 961	474 76 17 87	1,311 4,147 194 255	577 1,506 91 25	335 51 47 46	5,956 11,051 1,261 1,274
Totals	10,303	654	5,907	2,199	479	19,542

2. OUT-PATIENTS THROUGHOUT THE COLONY

		R	ace			C.W.M. Hospital	3 District Hospitals	14 Rural Hospitals	Rural Dispensaries	Totals
Fijians Indians . Europeans Others	::	::		::	 	50,329 78,110 2,409 10,004	29,238 67,524 2,575 4,863	64,029 71,392 9,606	183,761 103,881 23,017	327,357 320,907 52,474
				Totals	 -	140,852	104,200	145,027	310,659	700,738

3. GENERAL AND RURAL HOSPITALS-ADMISSIONS

Hospitals	No. of Beds	Daily average In-patients	Admissions
Colonial War Memorial Hospital Tamavua Tuberculosis Hospital Three District Hospitals Fourteen Rural Hospitals	335 362 314 391	269 336 286 218	10,303 654 8,585 8,817
Totals	1,402	1,106	28,359

APPENDIX III

TUBERCULOSIS DIVISION-1960

Tamavua Hospital continued as the main tuberculosis hospital. Domiciliary treatment has been extended wherever possible.

- The B.C.G. campaign continued with also a follow-up by the Mobile X-ray Unit to investigate the Heaf positive reactors.
 - 3. Tamavua Hospital-Comparative figures for the years 1951 to 1960 are set out below:-

		1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Deaths (all causes)	 	118 86 73	241 257 137 46 33 1,285	270 360 248 53 21 1,756	304 487 373 42 11 2,048	304 513 465 27 6 2,227	320 482 392 29 7 2,790	325 705 412 26 6 3,620	350 568 464 13 3 3,302	341 534 517 15 2·9 3,784	333 654 630 24 3-8 4,885

Admissions and discharges by age groups were:-

			ADMISSION	La Troit	Discharge				
Age		Male	Female	Total	Male	Female	Total		
0-9		46	62	108	50	33	83		
10-19		51	56	107	41	39	80		
20-29		72	95	167	70	92	162		
30-39	2.1	49	37	86	57	44	101		
10-49		52	26	78	59	30	89		
50-59		36	22	58	38	21	89 59		
30-69		26	13	39	31	13	44		
70-+		9	2	11	11	1	12		
Totals		341	313	654	357	273	630		

Admissions and discharges by race were:-

Race		Admission	Discharge		
Fijians		474	489		
Indians		76	61		
Europeans		4	* 6		
Part-Europeans		13	8		
Rotumans		20	16		
Chinese		13 20 7	16 7		
Others		60	43		
Total		654	630		

- 4. There were 24 deaths in hospital—3 died from non-tuberculous causes. Of the remaining 21, 11 were females, 10 males and by race, 14 were Fijians, 6 Indians and 1 Gilbertese. Most of the Fijian females were middle-aged who died within a few days of admission in an advanced stage. Two young Fijian males died of cor pulmonale from long-standing pulmonary tuberculosis. There were 4 deaths from miliary and meningeal tuberculosis in children aged 5 months, 2 years and 3 years, the fourth case being a Fijian youth aged 17 years.
- At the close of the year there were 29 cases still awaiting admission—most of them were already in other hospitals and had commenced treatment.
- 6. Of the 654 admissions, 30 were "relapse" cases for readmission and 63 were admitted for such reasons as surgery or following surgical treatment or for continuation of treatment which had become impossible on a domiciliary basis.
 - 7. The average number of beds occupied daily was 336.
- 8. At the out-patients department, 4,885 patients attended for full assessment and 359 patients on domiciliary treatment were supervised. Some 372 cases received medical attention for non-tuberculous causes. Two hundred and seventy-eight patients were transferred to the Health Office, Suva and 36 to Nabua Dispensary where they received their domiciliary treatment and supervision.
- 9. Despite this transfer of work, the amount done in the out-patients department increases yearly.
- 10. Eight thousand one hundred and forty-six X-rays were taken at the hospital and 3,760 films were received from other centres, most for review. As the Radiologist was on leave for a portion of the year, most of the films were read at Tamavua. On his return, 661 films were referred to him for an opinion. Of these 661, he found 41 consistent with the appearance of tuberculosis. The X-ray Registry, at the end of the year, had 22,231 film envelopes filed for reference.

- Ten thousand one hundred and twenty-nine Tamavua Hospital reports were sent to general practitioners and Government medical stations.
- 12. Minor operative measures were carried out at Tamavua Hospital while major surgical procedures were performed at the Colonial War Memorial Hospital. These included:—

Lobectomy			 	 . 7
Pneumonectomy			 	 6
Thoracoplasty			 	 1
Apicolysis with I	lomb	age	 	 2
Decortication			 	 2

- 13. The Dental Clinic was attended by 281 patients on whom 465 procedures (fillings, extractions and miscellaneous treatments) were carried out.
- 14. The occupational therapy department was fully used by patients: weekly film shows and concerts were given in the recreation hall.
- 15. The hospital plantation produced crops to the value of £774; pork worth £472, eggs and poultry to the value of £260 were delivered from the farm.
- 16. Western Division—Lautoka Hospital is the centre for tuberculosis in the Western Division. Domiciliary treatment has been extended further. At the end of 1960, 336 patients were receiving such treatment, as compared with 232 in 1959 and 80 in 1958.

CASES TREATED AS IN-PATIENTS AT LAUTOKA HOSPITAL

	Fij	Fijians India		ians Europeans		Others		Total			
	М	F	M	F	M	F	М	F	M	F	M/F
Admissions	17	37 23	23 18	13 10	1	**	4 2		70 38	50 33	120 71
Deaths	. 3	1	2	i	1	::	1		6	1 2	5 8 7
Transfer to Rural Hospital Remaining in Lautoka Hospital	15	11	2	1	**		ï		5 17	12	7 29

- 17. During the year, there were 1,886 reviews and/or full assessments of patients, the 1,886 cases included 901 Fijians, 855 Indians, 81 Europeans and 49 other races.
 - 18. Five hundred and ninety-three newly born babies were vaccinated with B.C.G.

PATIENTS ON DOMICILIARY TREATMENT AT VARIOUS STATIONS UP TO 31st DECEMBER, 1960

					Fijians	Indians	Europeans	Others	Total
					58 .	25	6	6	95
.autoka			**	**	00 .		0	0	
Koromumu			1.0		27	9	******	*****	36
Vailaga					16	18			34
Vatukoula					25			3	28
Nadi					22	7		******	29
Penang					2 5 25	9 8	1		12
Ba Dispensary		-			5	8		1	14
Yasawa					25				25
Natuatuacoko	**	- 12	**		7		10000000		7
	* *	**	**		2		******		0
Nadarivatu			**	**	10		******	******	2 18
Nanukuloa					18	111111	*****		18
Favua					4	3		1	8 5
Namarai					5			******	
Nasau					2				2
Tau					4	4			8
Nadi Airport	22				6	1	1		8
Korolevu					6 5				2 8 8 5
MOTORCE W.			100	_					
		Total			233	84	8	11	336

- 19. Northern Division—In the Northern Division, Labasa Hospital is the main centre for treatment. Domiciliary treatment is also offered where possible, but the difficulties of supervision are greater than in the Western Division. The smaller rural hospitals at Waiyevo, Savusavu and Nabouwalu also took their share of patients. Fifty-three patients were treated at Labasa Hospital during the year.
- 20. Eastern Division—In the Eastern Division, 37 cases were notified in 1960—30 of these were notified in Levuka, the remaining 7 from five different areas. In addition, there were 5 old cases which "flared up" and required further treatment.

- 21. Tuberculosis Campaign—The campaign continued on much the same lines as in the previous year. A Senior Medical Officer was appointed as whole-time Tuberculosis Control Officer to be responsible for the preventive and public health aspects of the campaign working in close liaison with the Medical Superintendent, Tamavua Hospital. This officer acted as Medical Superintendent, Tamavua Hospital during part of the year during the absence on leave of the substantive officer.
- 22. Senior Assistant Medical Officer Macu Salato, who has been associated with the campaign for years was awarded a medal by the Chest and Heart Association for outstanding work in the field of tuberculosis.
- 23. The B.C.G. vaccination teams completed their work in Vanua Levu and Lau groups (commenced in 1959) and returned to Viti Levu to continue there.
- During 1960, 31,496 children and young adults were tested and 20,277 received B.C.G.
- The totals for the years 1958, 1959 and 1960, were 81,869 tested and 59,151 given B.C.G. vaccine.
- 26. The Mobile X-ray Unit operated throughout the year in Viti Levu—13,217 pictures being taken.
 - 27. Analysis by age groups was :-

Age Group	Total X-Rayed	Recalls ? PTB	Percentages of Recalls
0-4	188	19	10-1
5-9	438	14	3.2
10-14	1,130	28	2-48
15-19	2,670	34	1.27
20-24	2,343	30	1.28
25-29	1,819	18	-99
30-34	1,258	29	2-3
35-39	1,194	23	1-93
40-44	737	34	4-61
45-49	666	21	3-15
50-54	293	18	6-14
55-59	257	14	5-45
60-64	145	2	1.38
65-+	79	6	7-59
Total	13,217	290	2-19

28. Analysis by race and sex was :-

Race		Illi	
	Male	Female	Total
Fijians	4,855	2,288	7,143
	3,357	471	3,828
Others	1,631	615	2,246
All Races	9,843		13,217

29. Included in these figures are 915 Heaf Positive cases, recommended for X-ray during the B.C.G. campaign. Of the 915, 80 (8.74%) were recalled for full investigation.

APPENDIX IV

COLONIAL WAR MEMORIAL HOSPITAL, SUVA

The Colonial War Memorial Hospital is the main hospital of the Colony. It provides the specialist treatment and is the teaching hospital for medical students from the Central Medical School and student nurses from the Central Nursing School.

- Development of the Colonial War Memorial Hospital continues. A second air-conditioned theatre was installed in one of the out-patient rooms and an office converted to an anaesthetic room.
- 3. The Hospital Week Board of Trustees continued to help with developments which directly benefit the patients. Further track screening was installed and orders have been placed for screening for the beds in the Free Maternity Annexe.
- Out-Patient Departments—These departments see more and more patients each year and the staff have been working in very difficult circumstances.

TABLE I
SUMMARY OF OUT-PATIENTS ATTENDANCES—C.W.M. HOSPITAL

	Clin	ic				Fijians	Indians	Europeans	Others	Total
General Medical				N.		662	1,430	89	169	2,350
Diabetic			1303	0	- 4	153	820	9	31	1,013
Acute Rheumatic						100	1,143	1	83	1,327
General Surgical						974	1,171	182	283	2,610
Orthopaedic		100				751	933	116	163	1,963
Gyanaecology						365	817	59	105	1,346
Ophthalmology					- 1	2,343	4,560	6	733	7,742
Physiotherapy			100		0.1	81	204	313	76	674
Family Planning					0.0	146	1,314		35	1,495
Ante-natal : C.W.M.			1000		0.1	5,036	9,590		892	15,518
Wainib				-		1,908	1,524		29	3,361
Civil Servants and P.		Out-P				2,852	3,715	1,013	813	8,393
Free Out-Patients						34,958	50,889	621	6,592	93,060
						50,329	78,110	2,409	10,004	140,852

- The ante-natal clinic continues to do its work in very inadequate converted buildings in Brown Street. Another building there has been converted to a Special Clinic where family planning consultations are held.
- 6. In-Patients—The figures in Table II show an increase in all departments. In spite of the larger number of admissions the bed occupancy was less than 1959. This in a large measure was due to families being urged to take the responsibility for their chronic sick at home thus relieving hospital beds for the more acutely ill.

TABLE II

A	Gastro-Intestinal					Total	
	Partial Gastrectomy			-			
	Gastro-enterostomy			933			
	Trans-thoracic partial						
	Gastro-jejunostomy				77.		
				**			
	Oesophago-jejunostomy		**		**		
	Jejuno-jejunostomy						
	lleal resection		• •				
	Abdomino-perineal rese	ection					
1	Rectosigmoidectomy	2.2.					
1	Hemicolectomy						
(Colostomy						
(Closure of colostomy						
	Repair perforated pepti					ALC: NO.	
	Appendicectomy			100		S. Calarin	
	Strangulated Hernia	**	**	**	**		
	Herniorrhaphy	**					
	aparotomy						
1	Vagotomy						
I	Bowel resection						
I	Excision Mesenteric cys	st				DESCRIPTION OF THE PARTY OF THE	
	Ramstedts Operation						
	ntussusception						
	Freeing of Volvulus			100	1 538	A STATE OF THE PARTY OF THE PAR	

	nsertion Souttars tube				0.00	Control of	
-	Recto-caecal repair					**	
	Removal anal papillom	a	200	2.0	0.000		
I	ncision pilonidal sinus						
S	sigmoidoscopy						
	Manual removal faeces						
	Anal dilatation						
	lightening anal sphinct						
	istula in ano		**			**	
	laemorrhoidectomy						
1	njection Haemorrhoids					**	
B.—7	horacic Surgery					Total	
					100	LOCAL	
	rans-thoracic Diaphra		lernia				
E	Eventration Diaphragm						
C	Desophageal Transection	n				District Name	
F	Exploration Mitral Valv	re				all Manager	
	igation Patent Ductus					110	
				**		in termina	
_	Peri-cardinal Aspiration					attomm-	
	obectomy	**		**	12.2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	neumonectomy					100	
T	horacoplasty	***	19.0	2200	100	1 Western	
	Birdcage				19		
	horacotomy					man blob	
T	Decortication Lung		1998	1938 11			
	CONTRACTOR ANDRESS II		-				
I		Chest					
R	Removal Neuro-fibroma						
E R	Removal Neuro-fibroma Removal Dermoid Cyst	Chest		11.0			
R R R	Removal Neuro-fibroma Removal Dermoid Cyst Lib Resection	Chest		::			
R R R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax	Chest	::	::			
R R R D	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema	Chest					
R R R D	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax	Chest			::	:	
R R R D D	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema	Chest			::		
R R D D D R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costa	Chest oscess I tubes			::		
R R D D R R R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu	Chest oscess l tubes bes	::		::		
R R D D D R R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu Excision Gangrene Ches	Chest conscess I tubes bes t Wall			::		
E R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu Excision Gangrene Ches Removal Bronchial Poly	Chest conscess I tubes bes t Wall	::		::		
R R R D D D R R R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu Excision Gangrene Ches	Chest conscess I tubes bes t Wall	::		::		
E R	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu Excision Gangrene Ches Removal Bronchial Poly	Chest conscess I tubes bes t Wall	::		::		
R R D D D R R R R R B	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Prainage Pneumothorax Prainage Empyema Prainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu Excision Gangrene Ches Removal Bronchial Polytronchoscopy	Chest conscess I tubes bes t Wall	::				
R R D D D R R R R R B	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection Orainage Pneumothorax Orainage Empyema Orainage Pulmonary Ab Re-insertion Inter-costal Removal Inter-costal tu Excision Gangrene Ches Removal Bronchial Poly	Chest conscess I tubes bes t Wall	::				
R R D D D R R R B B	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection	Chest oscess l tubes bes t Wall PP					
R R B B	demoval Neuro-fibroma demoval Dermoid Cyst dib Resection	Chest oscess l tubes bes t Wall /P aneurysi					
R R D D D R R R B B F F F F F F F F F F F F F F F	Removal Neuro-fibroma Removal Dermoid Cyst Rib Resection	Chest oscess l tubes bes t Wall PP					
R R B B C.—V	demoval Neuro-fibroma demoval Dermoid Cyst dib Resection	Chest oscess l tubes bes t Wall /P aneurysi					

D	-Gynaecological Surgery					Total	921
	Lower Segment Caesarean Sect	tion .				1111	60
	Classical Caesarean Section						1
	Wertheims Hysterectomy						2
	Abdominal Hysterectomy				**		59
	Vaginal Hysterectomy			• •	**		5 4
	Ruptured Ectopic Gestation						8
	Repair Ruptured Uterus						2
	Removal Abdominal Pregnancy	v .					1
	Oophorectomy						37
	Salpingectomy						34
	Ovarian Cystectomy						18
	Colpo-perineorrhaphy						5
	Repair Cervix						2
	Secondary Suture to Perineum						4
	Vulvectomy						2 2
	Removal Ovarian Mass			• •		I to the land	1
	Democral Labial Tomora			••		and the same of	i
	Removal Vulval Cyst				•		î
	Removal Vaginal Cyst					E extraore	3
	Incision Bartholins Abscess						5
	Tubal Ligation						145
	Myomectomy	1					5
	Ventro-suspension	9 .				100	2
	Shortening Round Ligament						2
	Insufflation Tubes		2				1
	Ant. Colporrhaphy						5
	Amputation Cervix						2
	Artificial Rupture of membran	ies .			**		1
	Dilation and Curettage						264
	Insertion of Grafenberg ring			•	•	and the same	3
	Removal of Grafenberg ring						10
	Salpingogram					III I I I I	30
	Examination under anaesthesia	a .					10
	Biopsy						9
E	-Ear, Nose and Throat Surgery			. 90 1 1 1		Total	188
	Laryngoscopy						10
	Oesophagoscopy						1
	Tracheotomy					11000	6
	Tonsillectomy					200	77
	Adenoidectomy						3
	Antral Puncture and Lavage					Titte To	20
	Diathermy Papilloma Larynx					M. Adams	2
	Antral Polypectomy					market male	1 3
	Diathermy Aural Polyp Sub-mucous Resection						1
	Massl Dalumastamus				* *	The state of the s	25
	Diathermy Turbinates						14
	Reduction Fractured Nose					10.10	6
	Removal Foreign Body Nose						4
	Mastoidectomy						3
	Drainage Haematoma Ear						2
	Incision Growth Ear		45			1	1
	Removal Foreign Body Ear					1 22	5
	Aural Lavage						1
	Diathermy Papilloma					Total and	1
	Removal Tracheotomy Tube		3			100	1
T	Biopsy			100		Total	100
F	-Genito-Urinary Surgery		15 08			Total	192
	Prostatectomy		-	100	**	100	9
	Suprapubic cystostomy Nephrolithotomy		33-17	11000	100	100	4
	Dyrololithotomy		0	VALUE B		1 35 1140	2
	Ureterolithotomy						6
	Transurethral Resection						4
	Repair Ruptured Urethra						1
	Orchidectomy						1
	Cystoscopy	nne.	Carrie a	· Vanore			50
	Retrograde Pyelogram					The Land	13
	Hydrocele					100000	43
	Urethral Dilatation	-				1000	30
	Circumcision	1			* *	**	8 2
	Excision Filarial Tissue Scrotu						4
	Excision Filarial Tissue Penis						4
	Exploration Scrotal wound						1

G-	-Plastic Surgery				11129	Total	4	2
100	Chin Conth.						2	
	Cleft Palate				- 11			8
	Hare Lip	::	- ::	11	11 190	Bill Box	1	
1					and the		Planted !	
H	-Thyroid Surgery					Total	19	9
	Partial Thyroidectomy						13	3
	Excision Thyroid Tumour						ALLESS .	6
THE	Neuro Surgery					Total	1997	5
1								
	Lumbar Sympathectomy		**					1
	Ventriculogram	**	:://			1100		2
	Consistance					-		1
	Cramotomy							
J	Breast Surgery					Total	10	6
	Radical Mastectomy						Toolsen!	5
	Partial Mastectomy		11.				1	1
K -	-Radium Therapy					Total	The state of the s	9
А		**	***			Total		2
	Radium to Breast	**						1
	Radium to Cervix	**	**		1 15			1
	D	**		*				5
	Removal of Radium	* *			.,		The state of the s	,
L	-Minor Surgery					Total	33	0
	Excision Parotid Gland					**	atmostrat.	4
	Incision and Drainage Paro	tid	Gland				Subject :	2
	Excision Glands				100		bitmet .	4
	Excision Dermoid Cyst						TO THE REAL PROPERTY.	3
	Excision Cysts						2	
	Excision Sebaceous Cyst					10010493		7
	Excision Epithelioma					**		1
	Excision Lipoma				- 13	111111111111		8
	Incision Abscess		**				9.	
	Incision Cellulitis							1
	Incision Gas Gangrene Excision Ulcer			**	- 17	**		7
	Excision Ganglion							4
	Excision Warts							1
	Drainage Haematoma				an ji			2
	Removal Nail							5
	Implantation Doca							1
	Removal Foreign Body						The same of	8
	Suture						3-	4
	Remove Suture							1
	Exploration wound							3
	Wound Toilet							8
	Re-dressing to wound	**					2	
	Biopsy	+ 31	1 188				3	
	Others			**			4:	0
M	-Ophthalmic Surgery					Total	21	7
	Lens Extraction			1			110	
	Needling to Cataract		20000		3	- ::	1	
	Iridectomy				3.		î	8.
	Evisceration							3
	Enucleation							7
	Dacrocystectomy			4.				1
	Glaucoma Drainage						profed land	2
	Irrigation Anterior Chambe	r						2
	Repair Ptosis							2
	Pterygium			**			1-	
	Plastic to Eyelids	**	12				1:	-
	Entropion							4
	Carbolising Corneal Ulcer		THE PARTY	111				1
	Sclerectomy		**	200	**	**	1	2
	Correct Strabismus		1000	30	**			1
	Probing Lachrymal Duct			100	- 30			2
	Removal Cyst Eyelid				10.00			2
	Suture Traumatic Wounds						1	
	Removal of Suture							1
	Removal foreign body of ey							2
	Others						11	1
N	Dental Surgery					Total	14	1
N	-Dental Surgery					Lotar	1.	

0).—	Major Miscellaneous			 	Total	37
		Cholecystectomy			 		29
		Cholecysto-jejunostomy			 		1
		Euplanation Dillows treat			 		2
		Partial Pancreatectomy			 		1
		Splenectomy			 		2
		Biopsy pancreas and liver			 		1
		Incision Liver abscess			 		1
ī	_	Orthopaedic Surgery				Total	120
•	•	Contatuamerromanatamer					4
		Excision Paravertebral absor-					2
		Onen Deduction Uie		33			3
		Other Open Paduation					8
		Leg Amputations			 		10
		Arm Amputations		10		THE PERSON	2
		Forefoot Amputations					4
		Finger Amputations			 	and the same	10
		Toe Amputations			 		6
		Removal Tibia			 	Design Fred to	1
		Removal Tarsal Bones			 	and the second of	3
		Menisectomy			 	The second of	3
		Sequestrectomy			 	TALL IN IT	10
		Drainage Osteomyelitis			 		3
		Tenotomy			 		16
		Manipulation			 		6
		Arthrodesis			 		3
		Arthroplasty			 		1
		Insertion Steinmans Pin			 		3
		Biopsy Bone			 		2
		Smith Petersen Pin and Pla	te		 		6
		Joint Aspiration			 		4
		Screwing of bones			 		3
		Stump Trimming			 		4
		Elevation Depressed Fractu	re Sku	11	 	10	2
		Elevation Depressed Fractu	re Zyg	oma	 		1

- 9. Non-Paying Maternity Department—In the last two months of the year, patients were admitted to the newly constructed 14 bed addition to the Maternity Annexe. There were fewer deliveries during 1960 than in 1959 because only certain types of patients are admitted, the remainder being cared for as part of the domiciliary service.
- 10. Domiciliary Service—This year activity increased and 224 patients were booked for home confinement. The service has been extended to post-natal care and 141 patients were thus attended.
- 11. The Clinic at Wainibokasi is being used to a greater extent, two Obstetric Assistant Medical Officers visiting this hospital twice weekly.

TABLE III DELIVERIES

			Fijians	Indians	Others	Total
Total Number of W	omen de	livered	671	1,098	128	1,897
			734	1,354	145	2,233
Desales			742	1,340	146	2,228
AT TALL		200	281	290	50	621
Abnormal Labour		0.000	390	808	78	1,276

TABLE IV BIRTHS AND DEATHS

			_	Fijians	Indians	Others	Total
Total Number of	Infants	born		683	1,118	129	1,930
Live Births				672	1,069	126	1,867
Premature Births				33	70	7	110
Multiple Births				12	20	1	33
Stillbirths				11	49	3	63
Neonatal Deaths				16	32	2	50

TABLE V

ABNORMALITIES

	Fijians	Indians	Others	Total
Anaemia (9G and under)	189	628	30	847
Pre-Eclamptic Toxaemia	17	56	3	76
E alamanda		3		3
A	13	26	8	47
Dost-partum Harmarchage	50	29	5	84
Forceps	35	68	5	108
Consessor Castion	11	68 25	7	43
Branch Delinery	20	24	3	47
or in irni	10	6		16

- 12. The following comments are made concerning the 1960 figures :-
 - (a) Maternal Deaths—Causes were acute liver necrosis (2), renal failure and post-partum haemorrhage.
 - (b) Still Births and Neo-natal Deaths—The still birth rate was 32 per thousand, the same as 1959. The neo-natal death rate was almost double at 26 per thousand. Sixty per cent of these occurred in premature infants, facilities for which are not up to the standard of the hospital in general.
 - (c) Anaemia—All patients with a haemoglobin of 10 gms or under were recorded and amounted to 45 per cent of all patients confined.
- 13. Paying Maternity Annexe—The Paying Maternity Annexe continued to give good service during the year. The numbers show a very small increase over 1959. Details are given in Table VI below:—

TABLE VI

					-	Fijians	Indians	Europeans	Others	Total
Admissions						40	206	153	165	564
Discharges						40	208	145	162	555
Normal Labours						27	134	81	141	383
Abnormal Labours	100					8	57	42	23	130
Still Births							- 6		3	9
Neonatal Deaths		**		**	**		3	1111		4
Maternal Death		**	**		**	00000	1	1000000		7
	**		**		**	2	7	7	2	10
aesarean Sections	-	**	**		**		1	,	-	18
Ante-partum Heam			**	**	1.5	****	-	****	****	
Post-partum Haemo			** 1		**	4	0	8	9	23
Manual Removal of	Placen	ta	**	**	2.0	****	****	****	1	1
Placenta Praevia			**		1.1	1	1	****	****	2
Anaemia					- 11		2	2		4
Toxaemia						2	3	2	1	8
Hyperemesis						2		****		2 43
Instrumental Delive	rv						23	19	1	43
Persistent occipito-p		F				1	7	8	1	17
Breech Presentation						1	8	2	3	14
Prolapsed Cords		100			- 11		2		1	3
Hydramnios			::				1		2	3

^{14.} X-Ray Department—This year again saw a steady increase in the work of the department. Special investigations have increased proportionately.

TABLE VII

X-RAY PATIENTS

7					Fijians	Indians	Europeans	Others	Total
In-patients Out-patients	::	::	 	::	2,420 4,080	2,669 3,398	543 1,156	478 847	6,110 9,481
					6,500	6,067	1,699	1,325	15,591

^{15.} Details of patients are shown in Table VII below :-

16. Special Examinations-

Aortogram			14.0				1
Barium Enema							54
Barium Swallow							70
Barium Meal		100	MARCH TO	440			347
Bronchogram							22
Cholecystogram							87
Cystogram							3
Essenhalasses	**		100		**		3
Encephalogram		**	**	* *		**	
Pelvimetry							50
Myelogram							4
Salpingogram							29
Screen Examinati	ion						133
Intravenous Pyel	ogram						148
Retrograde Pyelo	gram		11				14
Splenogram							3
Tomogram							52
Ventriculogram							3
Angiogram					200		2

- 17. Ambulances—A twenty-four hour ambulance service is maintained at the Colonial War Memorial Hospital using three modern ambulances. There has been a liaison with the St. John's Ambulance Brigade who provide volunteer drivers and first-aiders in addition to the six drivers paid by Government.
- 18. Laundry—In 1960 the total number of articles laundered was 1,838,903 an increase of 98,756 articles. Plans have been passed for the enlargement of the laundry and for streamlining the flow of articles during processing. This will enable the laundry to keep up with the increased amount of work. It is hoped to start work on this in 1961.
- 19. During 1960 waste hospital food was used to feed chickens from day old to maturity. Five hundred and forty-four pounds of chicken were used by the patients and 350 dozen eggs at no cost to Government.

APPENDIX V

MENTAL HOSPITAL

The number of patients again increased during the year.

- The patients' comfort fund had a credit of £67 10s. 3d. after purchasing a Bell and Howell sound projector. Pictures are shown on an average of twice weekly in each ward. The patients enjoy the films.
 - 3. Details of staff are as follows :-

Medical Superintendent (part-time) Psychiatrist—part-time as from 1/12/60 Assistant Medical Officer (part-time) Head Attendant Assistant Attendant 12 Female Fijian Orderlies 2 Female Samoan Orderlies 10 Male Fijian Orderlies 5 Male Samoan Orderlies

1 Male Fijian Cook 2 Male Indian Cooks

1 Male Fijian Kitchen Hand 2 Female Fijian Laundresses

4. The following table shows admissions and discharges :-

Remaining in hospital at the e Admitted during 1960			::	212 107	210
Discharged during 1960 Absent on trial during 1960	 ::		::	10 70	319
Died in Institution during 1960 Remaining in Institution at the	f 1960	::		235	319

5. The following table shows the length of residence of patients remaining in the Mental Hospital at the end of 1960 :-

No. of years			Males	Females	Total
0-1 year .		 	 32	31	63
1-2 years .		 	 12	20	32
2-3 years .		 	 13	5	18
3 years and	over	 	 68	54	122

6. The classification of the 319 patients under treatment is as follows:

Classific	cation					Number	Deaths
Manic depre	ssive p	sychosi	s		2.0	99	
Schizophren						146	1
Mental defea	ctive					13	
Delusions						1	
Epilepsy				200		15	
Senility						22	1
Spastic						2	
General Par	alysis o	of the I	nsane			4	
Idiocy	-22					11	2
Involutional			2.2	2.5		2	
Psychosis w	ith Art	erioscle	rosis			1	
Alcoholism						3	
						319	4

7. The racial distribution and sex of patients was as follows :-

			Males	Females	Total
Europeans	 		 13	16	29
Indians	 		 97	101	198
Fijians	 		 45	24	69
Others	 	**	 16	7	23
			171	148	319

8. The deaths which occurred at the institution were from the following causes in the following classes :-

General	Con	dition	Cause of Death					
Schizophren	ia		 Cardiac failure					
Senility			 Cardiac failure; hypertension					
Idiocy			 Epilepsy; aspiration pneumonia					
Idiocy			 Toxaemia, Cachexia					

9. The following table shows the nationality and sex of various patients :-

		Europeans		Fij	ians	Ind	ians	Others		Total		Total	
		М	F	М	F	M	F	М	F	М	F	M & F	
		7 6	6 10	29 16	10 14	72 25	72 29	11 5	5 2	119 52	93 55	212 107 319	
Discharged in 1960		4 9	2 2 :: 12	10 1 1 32	6	19 6 3 70	25 1 75	2 14	2 5	35 7 4 125	35 3 110	70 10 4 235	
Fotal number absent on tri- including those absent on tri- during 1960	al	11	9	38	38	76	97	14	4	139	148	287	

- 10. Fifty-two patients received electro-convulsive therapy.
- 11. The Board of Visitors visited the hospital during the year.
- 12. Soft drinks, sweets, biscuits, peanuts, etc., to the value of £10 were given by the Rotary Club through Dr. E. Williams
- 13. A group from St. Andrews Church donated soft drinks, sweets, biscuits, etc. to all patients.

APPENDIX VI

CENTRAL LEPROSY HOSPITAL, MAKOGAI, FIJI

The reef-encircled island of Makogai is about three miles in length from North to South and about two miles across from East to West. Volcanic in origin, it largely consists of a number of peaks rising to a maximum height of 876 feet, and leading down to sea level by a series of rocky ridges. The latter divide the more useful land into a number of flat areas stretching inland for various distances. Since 1911 these level areas have been used for the establishment and maintenance of a hospital devoted to the treatment of leprosy.

- 2. The main hospital is situated in Dalice Bay, protected by the small islands of Makodroga and Tabaka. The male patients' villages lie along the shore of the bay to the North and around the adjacent bay of Yaroi to the South. The island is divided roughly in half by a line running from the Southern point of Yaroi bay inland to the summit and thence Northwards to "Black Head", the Northernmost tip of the island. All the land to the North and West of this line is devoted to the hospital and it includes a large "flat" at Takewa, North of the hospital, where the patients practice intensive vegetable gardening.
- 3. The land to the South and East of the dividing line is used for the staff village, for the dairy farm and for the cultivation of copra. The staff quarters are situated in Nasau village on the Southern tip of the island. Here also are the Post and Wireless Telegraphy office, the Sub-Accountancy, the Power House, Bakery, Dairy and Copra Drying Shed. Nasau is connected to the hospital at Dalice by a three mile motor road. The road also extends beyond the hospital for a further two miles, through Takewa to another level area thickly covered with coconut trees called Vagabia.
- 4. The medical and nursing staff consist of the Medical Superintendent, Missionary Sisters of the Society of Mary and Fijian Sisters of the Little Sisters of Nazareth. In addition to the general nursing in the hospital wards, Sisters visit the villages daily for general inspection and for dressings of individual cases; patients appearing to require further attention or special treatment are referred to the Medical Superintendent for advice or admission to hospital. The Sisters train a number of patients as dressers in the village dressing rooms and in the hospital proper. They also carry out dispensing and laboratory work, give anaesthetics and assist at operations; they run the X-ray and Physiotherapy Departments and supervise Occupational Therapy; they help with the medical records and the more medical aspects of the clerical work; they control the issue of rations, the hospital kitchen and the hospital laundry; they run the patients' co-operative store and operate the hospital cinema. Their duties are, in fact, all-embracing and a very large proportion of any success attained at Makogai is undoubtedly due to their efficiency, versatility and selfless devotion.
- 5. The main hospital area is divided into a large women's section and a smaller one for men. The only men in the hospital area, apart from the ward orderlies and dressers, are those too sick or crippled to be able to look after themselves, those with acute reactions or other medical conditions and those admitted for special surgical or other treatment.
- 6. The able-bodied male patients live in villages outside the central hospital, each race having its own village. The various villages each have a headman of their own race who receives a small stipend for acting as "liaison officer" between patients and staff and for being generally responsible for the cleanliness of his village and the co-operation of his people.
- 7. During the 49 years of its existence 3,854 patients have been registered in the Fiji Leprosy Hospital. One thousand eight hundred and thirty-nine patients have been discharged, all but one of them with their disease apparently cured: the exception being one patient who is being permitted to continue his treatment on a domiciliary basis. Five hundred and sixteen patients have been repatriated to their homelands and there have been 1,194 deaths. At the end of the year there were 305 patients still in hospital. During the year under review, there were 39 admissions which is slightly below average; 45 patients were discharged and there were 4 deaths. The small number of patients discharged was foreseen in the Annual Report for 1959 in which it was prognosticated that the number of in-patients would not markedly change for several years.
- 8. The patients under treatment in Makogai on 31st December, 1960, were divided racially as follows:—

Fijians			 114
Indians			 115
Europeans and Part-Euro	peans		 13
Chinese and others			 63
		Total	 305

9. Establishment-The staff of the hospital consists of the following :-

Senior Medical Officer (Medical Superintendent)
Local Superior and 17 Sisters of the Missionary Sisters of the Society of Mary
5 Sisters of the Little Sisters of Nazareth
Higher Executive Officer
Class III Clerk
Supervisor (Mechanical)
Overseer (Stock, Farm and Labour)
Sergeant, Corporal and 3 Police Constables
Master of A.K. Makogai and 4 members of crew
41 Labourers.

- 10. The Medical Superintendent also acts as Sub-Accountant, Postmaster and Magistrate. He maintains a daily surgery for members of the staff and their families. During 1960, 2,055 patients were seen and a further 684 were seen by the Sisters during the Medical Superintendent's absences on duty from the island. There were 7 confinements among wives of staff during the year.
- During the first half of the year, Doctor D. W. Beckett acted as both Medical Superintendent, Makogai and Divisional Medical Officer, Eastern. He departed on United Kingdom leave on 24th May, 1960, and from then until his return from leave on 27th December, 1960, both posts were filled by Ratu Doctor J. A. R. Dovi, M.B.E. This double responsibility involved a good deal of travelling between Makogai and Levuka and, during October and December, the Medical Superintendent carried out tours in Lau and Kadavu respectively.
 - 12. The following changes took place among the Sisters :—

.. Sister Mary Felicitas, Local Superior, departed on leave and February was replaced by Sister Mary Valentine.

Sister Mary Constance left on overseas leave and returned to March Makogai on 31st December.

Sister Mary Angelica left for New Zealand for medical April attention and was later transferred to the U.S.A.

Sister Mary Lucia was posted to Makogai from New Zealand. Sister Mary Valentina departed on overseas leave.

September

- 13. Although the motto of the Missionary Sisters of the Society of Mary is "Hidden and Unknown", mention must be made of Sister Mary Felicitas. She was local superior in Makogai for six years, having previously served as one of the Sisters in the hospital. During her time in Makogai she became known throughout Fiji for her great efficiency and devotion to duty. Her tremendous sense of humour and constant cheerfulness endeared her to all who had the privilege of meeting her, let alone working with her. The patients one and all loved and revered her. During the last year of her service in Makogai she suffered considerable ill-health which was borne with her customary cheerfulness. Her departure from the island was a great loss to all on Makogai.
- 14. Teaching-Six Assistant Medical Officers from various administrations who were attending the course for the Certificate in Public Health (Fiji) in the Central Medical School spent about a fortnight in Makogai in April. They were given a refresher course of lectures in leprosy and shown cases of various types of the disease. They also underwent instruction in the laboratory techniques involved in the diagnosis of the disease and assessment of progress under treatment.
- 15. Undergraduate teaching was carried out by officers of the Department in Suva during the year. New and untreated cases at St. Elizabeth Home were shown to the students.
- Statistics—The classification used in Makogai is a simplification of the Madrid classifi-Cases are divided as follows :-

Cases with a few macules and minor disturbances of sensation Tuberculoid 1 ... only (i.e. maculo-anaesthetic leprosy)

Cases with infiltrated leprides and/or thickened or painful Tuberculoid 2 nerves (i.e. infiltrated tuberculoid leprosy)

Cases of tuberculoid leprosy with deformities or trophic lesions Tuberculoid 3 Lepromatous 1 Cases with macules or with no skin lesions but with positive smears (i.e. macular lepromatous leprosy)

Cases with lepromata and/or nodules (i.e. infiltrated lepromatous Lepromatous 2 leprosy'

Cases of lepromatous leprosy with advanced skin lesions, lesions Lepromatous 3

of mucous membranes or eyes and with or without neuritic signs Dimorphous cases indicative of tuberculoid rather than lepro-Dimorphous T/L matous leprosy

Dimorphous cases indicative of lepromatous rather than tuber-Dimorphous L/T culoid leprosy

17. The total number of admissions over the last five years, divided into the classes described above were as follows:

		1960	1959	1958	1957	1956
Total No. of Admissions	***	39	41	38	49	60
Adults		32	33	29	42	43
Children (under 14)		7	8	9	7	17
Tuberculoid 1		13	11)	6)	16)	13)
2		7 >20	5 > 20	8 > 16	11 >29	14 >28
3	- ***)	4)	2)	2)	1)
Lepromatous 1		3	3	5	4)	16)
2 /		11 >17	9 > 12	9 > 17	10 >14	11 >32
3		3)		3))	5)
Dimorphous L/T			4	2	3	
T/L		1	5	3	3	

18. The discrepancy in the figures for 1960 is due to the fact that one of the 39 admissions was a burnt-out discharged case who was re-admitted for treatment of a trophic ulcer and was, therefore, not classified. The figures show very little variation from year to year. Leprosy, it appears, continues to smoulder in Fiji. However, the slight preponderance of tuberculoid cases seen and the slowly decreasing number of child patients are encouraging signs of a developing resistance to leprosy among the population.

19. The progress of the various patients, divided by classification, is shown below :-

o. The progr	COD OI	FIRE	ARTEO DE	PARTE AN	cannot see	ATTRICT D	A contract	uncueston,	TO OF	DAVE DE	10.11
Control of the last				T1	T2	T3	L1	L2	L3	DT/L	DL/T
Improved				25	19	10	60	49	5	5	2
Stationary				12	12		53	5	10	3	3
Worse					1		4	8	10.00		

20. As in former years, this table includes all those cases discharged during the year who are shown as having improved and also those admitted during the year, all except the very earliest of whom are shown as stationary. The proportion of lepromatous cases to tuberculoid ones, although still very high, has dropped from 2.55 to 1 to 2.46 to 1. It is, however, too early to say whether this is a new tendency or merely an isolated phenomenon. Only one tuberculoid case did not improve as compared with 12 lepromatous cases and of the total number of tuberculoid cases 68.35 per cent improved during the year in comparison with 58.76 per cent of the lepromatous cases.

 The racial division of discharges and deaths during 1960 was as follows:— Discharges—All patients notified as suffering from leprosy—

-	Total		0	(-) D	Action Assessed	0.1	
				Total		45	
4.	Chinese and others	 			**	13	,
	Europeans and Part-					3	
	Indians			2.2		19	
1.	Fijians	 				10	
0	-All patients notified					222	

Deaths-

Fijians 2—(a) Protein deficiency; chyluria due to filariasis

(b) Aplastic anaemia and agranulocytosis (? re-action to D.D.S.)

22. Treatment—Diamino-diphenyl-sulphone (DDS) remained the standard treatment during the year under review. In spite of trials of more modern drugs it remains, in our opinion, by far the most efficacious drug in the treatment of leprosy. The customary maximum dosage remained at 400 mg. twice weekly. In most cases the drug was given by mouth but in a certain proportion of cases it was administered parenterally owing to frequent lepra reaction or to continuous gastro-intestinal discomfort resulting from oral administration.

23. Research—A trial was carried on through 1960 of Diphenylthiourea in combination with Diamino-diphenyl-sulphone. Diphenylthiourea, hereafter referred to as DPT, is also known as CIBA-1906. It is put up in tablets of 0-5 G.

24. One hundred and fourteen patients took part in the trial which lasted for a year. All were cases whose disease was clinically inactive but whose skin scrapings were persistently positive for M. leprae. They were divided by random selection into two groups of 57. One group was given DPT 2-0 G. daily and DDS 300 mg. twice weekly and the other group acted as controls by continuing on their old regime of DDS 400 mg. twice weekly. In the first fortnight two patients in the first group complained of stomach upsets and asked to be taken off their DPT. They were put into the control group and two from this group were given DPT instead. Thereafter there were no further complaints and no evidence of any toxic effects was seen at any time during the year.

25. At the end of thirteen months the progress of both groups was assessed and compared. Owing to their disease being inactive, progress had to be assessed on bacteriological evidence alone. The scale of bacterial indices used in Makogai is that advocated by Ridley and is as follows:—

1 + = From 1 to 10 bacilli in 100 1/12 inch objective fields

2 + = From 1 to 10 bacilli in 10 1/12 inch objective fields or from 10 to 100 bacilli in 100 such fields

3 + = From 1 to 10 bacilli in each average 1/12 inch objective field

4 + = From 10 to 100 bacilli in each average 1/12 inch objective field

5 + = Many bacilli (estimated at over 100) in each average 1/12 inch objective field

6 + = Many clumps of bacilli (estimated at over 1,000 bacilli) in each average 1/12 inch objective field.

26. It will be seen that each additional + represents approximately ten times as many bacilli as the previous grading. At least three sites were usually examined, often four and never less than two. Patients were examined thus every three months until they became bacteriologically negative, after which they were examined every month.

27. Results were as follows :-

	D	Trial Group PT 2.0 G. daily DDS 300 mg. wice weekly	CONTROL GROUP DDS 400 mg. twice weekly
Improved		19	28
Stationary		36	26
Worse		2	3

DPT is now used as standard treatment for those who, because of frequent lepra reaction or because of anaemia, are unable to tolerate DDS in any form. It seems that it can definitely be accepted that DPT in the dosage given has no activity in enhancing the effect exercised on leprosy by DDS.

- 28. An interesting phenomenon was observed during the year. A smallpox scare in a territory near Fiji was the occasion of many of the patients being vaccinated. In all 276 patients were vaccinated, the multiple puncture technique being used. Of these, 73 cases (or 26-45 per cent of the total) developed, about a week or ten days later, an extremely severe lepra reaction. In many cases acute nerve pain accompanied the reaction. In one case the reaction was so severe that the patient's lesions ulcerated. Of these 73 patients, ten had never before suffered from a lepra reaction. The action of vaccination against smallpox in precipitating lepra reaction when administered to patients suffering from leprosy seems worthy of further study.
- 29. Tuberculosis—All patients undergo routine chest X-ray on admission and again at intervals of three years. During 1960 one case of pulmonary tuberculosis was diagnosed and put under treatment. No cases were transferred from the Tuberculosis Hospital at Tamavua.
- 30. At the end of the year there were 6 patients undergoing treatment for pulmonary tuberculosis and there were 31 who were having more frequent chest X-rays than normal—usually every six months—either because they were patients who had been discharged from the tuberculosis ward or because their skiagrams appeared somewhat abnormal.
- 31. X-Ray and Physiotherapy Departments—The decreasing number of patients continues to be reflected in the decreasing amount of work done in these departments which are under the control of the same Sister. During 1960, 238 X-rays were taken, 2,933 patients underwent various forms of electrotherapy and physiotherapy and 2,956 sessions of exercises were supervised. This last figure is slightly in excess of that for 1959. The Sister in charge of these departments also took, developed and printed 500 photographs for record purposes.
- 32. Surgery—Owing to the fact that all surgery must be performed single-handed, local or spinal anaesthesia is used whenever possible. If general anaesthesia cannot be avoided the simplest type of open ether inhalation is administered by a Sister under the supervision of the surgeon. Fifty-eight operations were performed during the year and they fell into the following groups:—

Appendicectomy						4
Herniorrhaphy						2
0 1 1.						1
Suprapubic cystotomy						1
Decapsulation of ulnar ne	erve					2
Reduction of fracture						1
Plastic operation on eye	(for cur	e of P	tosis)			3
Plastic operation on ears						4
Circumcision						5
Amputation of digit						3
Removal of sequestra		**		**		5
Excision of cysts, lipoma	ta, etc.					7
Incision of abscess						7
Excision and scraping of						9
Suturing of accidental we						1
Removal of foreign body		hand)	(sewing	needl	es)	2
(from buttock)				***		1
				Total		58

33. Dentistry—Makogai was not visited by a Dental Officer during the year. The Sister in charge of the Dental Department was withdrawn from Makogai in April on medical grounds and was replaced by another Sister who is untrained. The following work was carried out:—

Extraction	ns		 	124
Fillings			 	92
Scalings		1.2	 	36
Treatmen	t of gu	ms		32

34. Laboratory—The laboratory was again kept busy during the year with ordinary day-to-day work of the "clinical sideroom" variety. The following special work was also done:—

Skin smears for M. leprae		 	 3,280
Hb. estimations and blood of	counts	 	 2,146
Vaccinations for smallpox		 	 609
Lepromin tests		 	 316

35. Occupational Therapy—Occupational therapy is carried on in Makogai with two primary objects. In the first place it is used to keep the patients occupied, make them exercise their bodies and limbs and, particularly, their hands, and to enable them to earn a little pocket money. With this object in view, all the wards were scraped and re-painted inside during the year, the operating theatre was extensively repaired and refashioned as was the men's dispensary; a new bath-house was built and several other smaller buildings repaired. This work and all other running repairs were carried out entirely by the patients.

- 36. In the second place it is our endeavour to ensure that every patient leaves Makogai better fitted in some way to earn a living than he had been when he entered hospital. With this purpose our school, technical school (Ernest Wolfgram Technical Institute) and the Alice Austin Arts and Crafts Centre are all kept busy. The standard of joinery attained by the patients always attracts interest and high praise. Apart from these, the following subjects are taught to those interested: building techniques of all kinds from concrete block making via brick laying, plastering and carpentery, to roof laying; plumbing, electrical engineering, mechanical engineering, metal working, boat building, lorry driving and market gardening are also taught to the men. The women learnt mat-making, basket-making, native dancing and singing, cookery, laundering, sewing and knitting. In addition to these pursuits, Sisters run classes in painting, pottery making, sculpture, drawing and shorthand and typing.
- 37. Lepers' Trust Board—The Lepers' Trust Board continued with their customary generosity during 1960. A greater proportion of the Board funds has now to be used in rehabilitating discharged patients but this did not prevent the Board from giving many examples of its kindness to Makogai. A new verandah was provided for the staff ward and a donation of £1,000 was made to the Comforts Fund. Many other smaller gifts and donations too numerous to detail individually were also made. The usual supply of gift cases and films continued to arrive from New Zealand. The Fiji Branch of the Lepers' Trust Board met in Makogai during November.
- 38. Visitors—The usual large number of visitors both official and casual, came to Makogai during the year. In all 80 persons signed our visitor's book but that is by no means all that came. The following list gives an idea of the variety of visitors we meet in a year's work. As usual it is printed in chronological order of visits:—

The Director of Medical Services

The Deputy Director of Medical Services

The Officer Commanding R.N.Z.A.F. Station, Laucala Bay, Group Captain Breckon

The Editor of the Fiji Times, Mr. L. G. Usher

The Physician Specialist, Colonial War Memorial Hospital, Suva

The Director of Medical Services, R.N.Z.A.F., Group Captain Marsh

The Suva City Council Engineer, Mr. T. Gemmell

The Director of Public Works

Members of the Lepers' Trust Board (Fiji) Inc.

Most Rev. Bishop Foley, Vicar Apostolic of Fiji and Rotuma

Most Rev. Archbishop de Furstenberg, Apostolic Delegate to Australasia and Pacific Members of the Sergeants' Mess, R.N.Z.A.F. Station, Laucala Bay.

- 39. For the second year in succession the members of the Sergeants' Mess, Laucala Bay, presented the Comforts Fund with £125. This is a very large sum to be collected by so small a number of men and all in Makogai are touched by their very great generosity and kindness. This year, in addition to many other gifts, they brought two large containers of ice-cream—a most thoughtful gift and one deeply appreciated by the patients who so seldom have an opportunity to enjoy the delicacy.
- 40. General—The new electricity installation was completed by the end of the year except for some minor fittings.
- 41. The wharf was repaired and extended by the Public Works Department in the second half of the year. It can now be used by the A.K. Makogai at all states of the tide.
 - 42. Climatically the year was equable. There were no hurricanes, droughts or floods,
- 43. During 1960 two advances occurred in the official and public attitude towards leprosy. For the first time a patient who was finding it quite impossible to look after his business interests while isolated in Makogai was permitted to have domiciliary treatment, subject to his agreement to undertake certain safeguards to prevent spread of the disease. For the first time, too, patients were permitted to visit their homes for periods of up to one month in order to attend to their urgent private affairs and many patients were enabled to avail themselves of this concession.
- 44. In conclusion, once again the co-operation and assistance of the Sisters, lay-staff and patients is recorded.

APPENDIX VII

ST. ELIZABETH HOME-KOROVOU, SUVA

Discharged cases from Makogai housed until transport was arranged to their various destinations in and outside the Colony :—

		and the same				Male	Female	Total
Fijians						7	3	10
Indians						11	8	19
Solomon Islande	ers					2	1	3
Tongans						2		2
Rotumans						1		1
Chinese						1		1
Samoan						2	1	3
Cook Islanders						1	1	2
Euronesians						1		1
						28	14	42
2. Patients housed pen	ding	remova	l to M	lakogai	:		T.	m . 1
						Male	Female	Total
Fijians						16	3	19
Indians						3	4	7
Solomon Islande	ers					2		2
Euronesians						1		1
						22	7	29

3. Patients on survey, treatment, leave or other matters, housed during the year :-

				Male	Female	Total
Fijians		 	 	50	47	97
Indians		 	 	38	11	49
Solomon Islan	ders	 	 	4		4
Tongans		 	 	1		1
Rotumans		 dee.	 		2	2
Chinese		 	 	4		4
Euronesians		 	 	7		7
Europeans		 	 	2		2
				106	60	166

4. Total number of discharged patients from Suva, Rural and Urban, during 1960 :-

			Maie		
Suva Urban	 	 			3
Rural	 	 	 3	1	4
			-	-	-
			6	1	7

5. The Divisional Medical Officer, Central, who is responsible for St. Elizabeth Home also reported that at his clinic at the Health Office, Suva :—

162 discharged cases were examined at their regular review

34 suspected cases were seen—5 of these were positive and admitted to Makogai Leprosy Hospital

722 contacts were examined

87 inactive cases reported for treatment of various sequelae.

APPENDIX VIII

DENTAL DIVISION—MEDICAL DEPARTMENT

The work of this division continued to follow the pattern of previous years with activity concentrated on provision of dental treatment, dental health education and preventive dentistry in schools and training of personnel.

A-DENTAL TREATMENT

Attendance by adults was restricted as much as possible in favour of children and treatment given to adults was restricted to palliative treatment except in the case of adults referred for specialized treatment.

	g	Suva I	Dental	Clinic	(Head	(quarters	ı
At .							

	(-) -			in fracin	4
3. Staff—					
-	D. M. Ellerton, I	3.D.S.			Senior Dental Officer
	I. L. Vosailagi, I				Dental Officer
	Mrs. N. H. Palm				Dental Hygienist (part-time)
	I. Nadakuitavuk	i			Assistant Dental Officer
	M. Ligani				Assistant Dental Officer
	D. Singh				Assistant Dental Officer
	V. Pal				Assistant Dental Officer
	M. Masi				Assistant Dental Officer
	Sister Beddows				Nursing Sister
	M. Vidovi				Senior Nurse
	Madan Pal				Assistant Dental Mechanic
	L. Permal	II INTE	100	1900	Assistant Dental Mechanic
	T. Narayan	11. 11			Assistant Dental Mechanic
	Susan Herman	1.0			Assistant Dental Hygienist
	Caroline Evans				Assistant Dental Hygienist
	Pushpanjali Mad				Assistant Dental Hygienist
1 Officer A			of come	arratina	dentistry and conducted an o

Dental Officer A. H. Thomson was in charge of conservative dentistry and conducted an orthodontic clinic for school children. Assistant Dental Officer Devi Singh was in charge of the construction of dentures. Assistant Dental Officer Isoa Nadakuitavuki took over Minor Oral Surgery from the Senior Dental Officer who remained in charge of periodontia.

- 4. The total treatments given showed a considerable increase despite the absence this year of any senior students in the clinic.
- Dentures were provided, at a cost according to means, for adults with an income of less than £800 per annum.

							Treatments provided
0.000							Operative-
3,363	**	**			**		
2,629					5	y fillings	Temporary
353					2.2		Scalings
							Surgery—
6,238					nanent	is-perr	Extractions
3,386					uous	decid	
141					1	peration	Surgical ope
37							General and
41				ions	le fixa	Mandib	Fractured 1
							Radiography-
664							Films taker
100	555						Dentures-
174					e	denture	Complete d
10	**		•				Full upper
47		**		**			Partial den
63	**						Repairs and
48			**				Orthodonti
40						ic cases	
							. Attendances :-
137 10203							Adults—
609					**		Europeans
511						peans	Part-Europ
3,626							Fijians
3,785							Indians
573							Others
9,104		Total					
The same of the sa							Children-
1,450							Europeans
1,080							Part-Europ
1,868							Fijians
5,839							
570							
	**	100		100			Others
10,807		Total					
19,911				ld att	and Ch	Adult -	Total
The second secon	***************************************	ccs	manc	nd atte	and Ch		
£2,088 7s. 6d	**	***				enue	Total Reve
		Total ces		ild atte	and Ch	Adult a	Indians Others Total A Total Reve

(ii) Lautoka Dental Clinic

8. This clinic was located in the Health Office building until November 1st when it was moved to Lautoka Hospital. The new clinic has a small operating room with a large waiting room. The clinic was conducted by Assistant Dental Officer Pillai and Assistant Dental Hygienist Pushpa Prasad. Tours were made to schools in the Nadi and Lautoka districts and also to the Yasawas, Malolo and Vatulele.

9. Treatments provided :-						
Operative-						
Fillings						1,658
Temporary filling	s					733
Extractions						7,229
Surgical operation	ns					9
General Anaesthe	etic				1.0	7
Fractured mandi						15
Scalings				100		217
Radiography						45
10. Attendances :-	1	2.2	2.7	2.5	10.00	
						0.004
Adults		* *				3,294
Children						5,954
Total Revenue						£938.

(iii) Labasa Dental Clinic

11. This clinic, housed in an out-building of Labasa Hospital, was operated by Assistant Dental Officer L. Narayan, assisted up until August by Assistant Dental Hygienist Ana Kasami. Tours were made to 29 schools throughout the division.

12. Treatments provided :-				
Operative—				
Fillings			 	 1,188
Temporary fillin	gs		 	 236
Extractions			 	 3,097
Scalings			 	 54
Surgical operation			 	 4
General Anaesth	etic		 	 17
Fractured mand	ible fix	ations	 	 27
Radiography			 	 14
13. Attendances :-				
Adults			 	 1,279
Children			 	 1,899
Total Revenue			 	 £372.

(iv) Levuka Dental Clinic

14. This clinic was located in the Divisional Medical Office. It was operated during the year by Assistant Dental Officer J. Savou. Tours were made to 7 schools in Ovalau. In December it became necessary to close this clinic due to shortage of staff.

15.	Treatments provided :-				
	Operative-				
	Fillings		 	 	543
	Temporary fillings		 	 	78
	Extractions		 	 	562
	Scalings		 	 	13
	General Anaestheti	ics	 	 	3
	Radiography		 	 	3
16.	Attendances :-				
	Adults		 	 	180
	Children		 	 	704
	Total Revenue		 	 	£49 5s. 0d.

(v) Ba Dental Clinic

17. This clinic, located in the dispensary at Nailaga Hospital, was operated until August by Assistant Dental Officer Koroiwale and from October by Assistant Dental Officer Ligani and Assistant Dental Hygienist Pushpa Madhavan.

18. Treatments provided	:			
Operative-				
Fillings .		 	 	 511
Temporary fi	illings	 	 	 280
Extractions		 	 	 3,217
Scalings .		 	 	 139
19. Attendances :-				
Adults		 	 	 1,465
Children		 	 	 1,703
Total Reven	ue	 	 	 £414 15s. 0d.

(vi) Mobile Dental Clinic

20. This vehicle was engaged throughout the year visiting schools in Viti Levu. Conservative dental treatment was given only at schools where daily tooth brushing was being carried out. Other schools received only palliative treatment.

21. Treatments provided :-

	COLUMN TO STATE OF THE PARTY OF					
	Operative	_				
	Fillin		 	 	 	2,996
		porary		 	 	257
		actions		 	 **	3,289
	Scali	ngs	 	 	 	236
22.	Attendances	:				
	Adults		 	 	 	245
	Children		 	 	 	3,379

(vii) Field Tours from Headquarters

- 23. Tours were made to Matuku with the Central Medical School survey team and to Rotuma.
- 24. Treatments provided :-

Ope

erative—				
Fillings Extractions	 	 	 	320
Extractions		 	 	1,045

(viii) Tamavua Dental Clinic

- 25. An Assistant Dental Officer attended this clinic on Saturday mornings.
- 26. Treatments provided :-

Operative-				
Fillings	 	 	 	130
Temporary		 	 	
Extractions		 	 	300
Scalings	 	 	 	25
27. Attendances	 	 	 	281

(ix) Rural Dispensaries

28. Each dispensary throughout the Colony is equipped with a standard set of dental forceps. A survey of the present state of serviceability of all forceps was made by circular during the year and unserviceable items were replaced.

B-Dental Health Education and Preventive Dentistry in Schools

- 29. Many more schools purchased low cost brushes for the first time in 1960 but a disappointing feature was the large number of headmasters who did not order replacement brushes. A total of 14,600 brushes were purchased by 95 schools and a total of 41 cabinets were purchased by 20 schools.
 - 30. Dental health talks were given in those schools visited by the Mobile Dental Clinic.
 - 31. Existing posters and the booklet "Good Teeth" were supplied to schools upon request.

C-TRAINING OF PERSONNEL

- 32. For training of Assistant Dental Officers see under Central Medical School.
- 33. Two new girls commenced training as Assistant Dental Hygienists and one girl completed her training and entered the Service.

APPENDIX IX

PATHOLOGICAL DIVISION

Staff—The Pathologist relinquished duties at the Central Laboratory on completion of contract on the 17th February, 1960. The Acting Pathologist and the Laboratory Superintendent were present throughout the remainder of the year. Appreciation is recorded of the valuable assistance and advice given by the Pathologist before departure.

- 2. The trained local staff consisted of three Senior Laboratory Assistants, one stationed at Lautoka Branch Laboratory, and five Assistants. One Assistant returned from a post-graduate course in Biochemistry at the beginning of the year and has added to greater efficiency in this section of the Laboratory. The staff at the Branch Laboratory, Lautoka, was increased by the transfer of one Assistant from the Central Laboratory and this has been of benefit to the work carried out at this Laboratory.
- 3. Students—Three students gained their Certificates during the year, one from Fiji and two from Papua and New Guinea. Three students from Fiji are expected to qualify at the end of this year. One student from Fiji and two from Papua and New Guinea continue their training. it is regretted that no further trainees from Fiji were appointed during the year and it is difficult to see how further expansion of Laboratory services to other centres can be accomplished from the present staff if the present standard of work is to be maintained at the Central Laboratory.
- 4. Assistant Medical Officers have been posted to the Laboratory for periods of three months during the year, as part of their initial hospital training. This scheme broke down because of staff commitments in the hospital. The appointment of an Assistant Medical Officer to act as Assistant to the Pathologist was not possible.
- 5. The Laboratory supplies a 24 hour service. An Assistant is always on call for emergencies outside normal working hours. The number of hours worked during the year by the Assistants was 976 hours or an average of 18 hours a week.
- Blood Transfusion—The blood transfusion room proved a useful acquisition and has considerably facilitated this part of the Laboratory work.
- The number of pints of blood collected during the year was 1,136 as compared with 964 last year. However, continual appeals for donors were necessary to ensure adequate supplies.
- 8. Routine Diagnostic Examinations—These examinations comprised the main work of the division. The total examinations carried out was 57,146.
- 9. Teaching—The teaching of general pathology, bacteriology, clinical pathology and forensic medicine at the Central Medical School was continued. Post-graduate lectures and instruction on public health bacteriology were given to candidates for the Certificate of Public Health.
- The teaching of Laboratory students continued with lectures to supplement their practical instruction.
- 11. Facilities for microscopic examination in pathology are still far short of that desirable although material is being gradually accumulated for this purpose.
- Post Mortem Examinations—One hundred and ninety-three post mortem examinations were carried out during the year.
- 13. Special Examinations—Investigation into the electro-phoretic patterns of plasma proteins was commenced during the year, as was hoped in last year's report. Sensitivity patterns to anti-tuberculosis drugs were commenced during the latter part of the year and is continuing and will eventually become a routine procedure in the Laboratory.
- 14. Branch Laboratory—Lautoka—A total of 21,473 examinations were carried out at this Laboratory. As mentioned, an Assistant from the Central Laboratory was transferred to assist with the increased work.
 - 15. Details of examinations carried out are shown in Table II.

TABLE I

Details of specimens, etc., examined during 1960

1.	Histology	2,289	2,289	6. Serology— Kahn Re-actions	. 2,154	
2.	Haematology—			7. Vaccine Prepared—		2,289
	Routine Blood counts	6,524		TAP FO-Links	. 948	948
	Donors bled for transfusion	1,136		8. Biochemistry—		
	Marrow smears	174	30,720		4,118	4,118
3.	Seminal Fluids—			9. Animal Inoculations—		
	Examination for fertility	88	88	Toads for pregnancy tests	. 112	112
4.	Parasitology—			10. Rats— For Plague	. 26	
	Faeces—			The state of the s	_	26
	Microscopie	5,919		11. Forensic Medicine— Clothing, weapons, etc.	. 151	
	Blood-					151
	Malaria and Microfilariae	178	Table 1	12. Post Mortem Examinations—	40	
			6,097		. 46	
5.	Bacteriology-				15	
	Routine microscopic and culture	9,903		The second of the second of the second	. 3	
	Drinking water supplies			Manual Hamital	. 1	
	Milk			CONTRACTOR OF THE PARTY OF THE	_	193
	Other foodstuffs	-6	10,459	Total		57,490

TABLE II

BRANCH LABORATORY-LAUTOKA

Details of Specimens examined during 1960

1. Haematology—			4. Serology—			
Routine Blood counts Blood Grouping	10,634		Agglutination tests	 	50	70
Donors bled for transfusion	1,018		5. Biochemistry—			50
2. Parasitology—	-	15,699	Routine examinations	 	564	
Faeces, microscopic	 1,030		6. Animal Inoculations—		-	564
3. Bacteriology—	-	1,030	Toads for pregnancy tests	 	171	
Routine microscopic and culture	 3,959				-	171
		3,959	Total	 		21,473

APPENDIX X

CENTRAL MEDICAL SCHOOL

The following table shows the number of students for each course during the past ten years :-

TABLE I

Cour	se .		1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Medical			124	129	123	100	88	86	92	90	89	85
Dental			23	30	23	31	28	16	14	6	6	16
Pharmacy			5	9	6	6	6	4	2	4	3	
Sanitation			10	20	13	12	7	14	11	16	26	16
Laboratory			6	12	8	8	10	6	4	6	7	8
	losqu	ito										
Control			14	21	9	8	24					
X-ray			1	1	3	5	5	1	1		2	3
Dietetics								2	3	1	2	3
Physiotherapy												3
Total			183	222	185	170	168	129	127	123	135	141

- 2. The number of students from each territory at the beginning of the academic year is shown in Table II.
- 3. Of the 14 students who commenced the final year in medicine, two qualified in April, one qualified in June and seven qualified in December. One was rusticated, one was required to repeat six months of the final year and two were required to repeat a full year.
 - 4. There were no dental qualifications in 1960.
 - 5. During the course of the year, the following reductions in other classes took place :-

A.M.O. IV-One was rusticated

A.D.O. I-Two resigned, one was discharged

Sanitation—All qualified Laboratory—Two qualified.

6. Post-Graduate Courses—One student from the Cook Islands, having completed his undergraduate course, remained for six months doing prosthetics. One from Nauru remained for a year. One Assistant Dental Officer from the Cook Islands had a general refresher course. One Assistant Medical Officer from Western Samoa arrived late in the year to commence an anaesthetics course and an Assistant Pharmacist from Tonga did a refresher course in pharmaceutical stores control.

Total		1960	01 02 01 02 01 02 02 03 04 04 04 04 04 04 04 04 04 04 04 04 04	141
To		1959	*********************************	135
duate		1960	:01 ; :- : : :000	12
Postgraduate	Ont.	1959	::::::::::::::	:
.6	64	1960	:::::::::::::::::::::::::::::::::::::::	60
Physio-	The same	1959		:
ics		1960	:::::::::::::::::::::::::::::::::::::::	60
Dietetics		1959	:::::::::::::::::::::::::::::::::::::::	2
ay		1960	:::::::::::::::::::::::::::::::::::::::	8
X-ray		1959	:::::::::::::::::::::::::::::::::::::::	04
itory		1960	:::-*::::::::::::::::::::::::::::::::	80
Laboratory		1959	:::-*::::::	7
tion		1960	::::04:-:::::::::::::::::::::::::::::::	91
Sanitation	1	6961	:::%:-:::::::::::::::::::::::::::::::::	36
nacy		1960	-::-:::::::::::::::::::::::::::::::::::	5
Pharmacy		1959	-::-:-::::::::	3
[a]	All Years	1960	:::::==::::0=	10
Dental	All 3	1959	:::=::=::::::::::::::::::::::::::::::::	6
		0961	-:::::+:::::o::	14
	Λ	1959	:::::::::::::::::::::::::::::::::::::::	13
	IV	1959 1960	e ::::::::::::::::::::::::::::::::::::	12
		1959	- : : : : : + : : : - : * :	=
Medical	Ш	1959 1960	::-:::-:-:	=
Me			w : : : : : : : : : : : : : : : : : : :	13
	11	1959 1960	0400 ; [04 [04 ; ; ;]—00 ;	13
		1956	164-11-11-16-61	12
	I	9 1960	[0] [0] [[0] [[+ [+	15
		1959	0404 [[04 [04] -] [-05]	13
Pre- Medical High	Course	1960	:::-4:-:-4:0	16
Mee Hi	33	1959	:u :4 :-504 : :-4 : :	27
	Administration		Gilbert & Ellice Islands Colony B.S.I.P. Nue Island Cook Islands Tokelau Islands American Samoa Papaa-New Guinea Dutch New Guinea Nauru Island Nauru Island U.S.T.P. Fiji Western Samoa	Total

- 7. There were eight students in the newly established Certificate of Public Health Course which lasted six months and finished in September. All of the students were successful. There was one from the Gilbert and Ellice Islands, two from Western Samoa, one from the British Solomon Islands Protectorate, one from Papua and New Guinea and three from Fiji. This course is to be repeated in 1961.
- 8. Staff—Mr. Jimione Samisoni, B.Sc. Otago, successfully completed his course in physiology and joined the staff at the commencement of the first term in 1960. Mr. and Mrs. Jain, physics and chemistry lecturers respectively, were away on leave and their places were temporarily filled by one lecturer from New Zealand and one locally recruited.
- 9. Mr. R. L. Miller, the Health Instructor, was awarded a World Health Organization Travelling Scholarship and left in September to tour various sanitation teaching centres in the Western Pacific region.
 - 10. The two World Health Organization lectureships (in biology and physiology) continued.
- 11. General—The Nuffield Department of Social and Preventive Medicine was in its second year and still continued to be supported by the funds provided by the Nuffield Foundation. It will be remembered that this department was established in 1959, both capital expenditure and running expenses for three years being obtained from a generous grant by the Nuffield Foundation.
- 12. Visitors—The School received a number of visitors during the year. The interest shown by scientific and administrative guests is appreciated. The visits of both Administrators and Medical Department officers from the territories served by the School were particularly appreciated.
- 13. Acknowledgments—This School could not function without the co-operation of the Medical Department, both administrative and those numerous doctors and other professional people employed by the Department and, increasingly, by other Departments in Government.

APPENDIX XI

NURSING DIVISION

The recruitment of nursing sisters continued from New Zealand and Australia with some local appointments.

- 2. The main hospitals and some Health Centres worked below the establishment of fully qualified nurses during the year and appreciation is extended to those who have uncomplainingly continued to give a high standard of service to the community.
- 3. The staffing of the hospitals and districts by Colony certificated nurses continued to be satisfactory.
- 4. Two local nurses trained at the Central Nursing School under the New Zealand curriculum returned from New Zealand having completed one year post-graduate training in midwifery. Both girls were successful in the examination. Two other nurses left for New Zealand early in December to undertake midwifery training.
- Accommodation for nurses attached to district work in some areas remained far from satisfactory.
- 6. Arrangements were made during the year for student nurses from the Suva and Lautoka training schools to have some practical training in public health field work under the Health Sisters at Wainibokasi and Sigatoka.
 - 7. Nurses' and Midwives' Board-The Nurses' and Midwives' Board met in January.
- 8. Health Sisters' Conference—The annual Health Sisters' Conference took place during October.

9. Nursing Establishment-

0	Post	Filled	1	acan
Nursing Superintendent	1	1		
Matrons	4	4		
Assistant Matron	1	1		
Sister-in-Charge	4	4		
Health Sisters	12	7		5
Sisters, Ward and Departmental	53	34		19
Principal, Nursing School	1	1		
Tutor Sisters	6	6		
Charge Nurses	16	11		5
Staff Nurses	70	67		3
Nurses—Male and Female	314	294		20
Appointment of Sisters on local contrac	t			2
Appointment of Sisters on New Zealand	contract			4
Appointment of Sisters on Australian co				6
Appointment of local Sisters-permaner	it			4
Appointment of local Sisters-temporar				7
Promoted to Sister				3
Promoted to Charge Nurse				4
Promoted to Staff Nurse				10
Total number accepted on 2 year contra				12
Total number accepted on temporary ap				7
Total number accepted on permanent a				4
-	ppomeme			7
Total number of resignations, including				
ments				26
Total number extending contracts (3 me				3
Total number of Sisters resigned of				-
				1
appointed temporary		***		

 Fiji qualified Nurses—The total number of Nurses including Male and Female Tuberculosis trained Nurses employed as at 31st December, 1960, was 361.

Total number employed	in hos	spitals				 252
Fijians and others						 234
Indians						 18
Total number employed	in dis	tricts				 109
Fijians and others						 100
Indians						 9
Total number of Nurses	qualif	ied duri	ing the	year		 52
First appointments						 63
Re-appointed						 31
Resumed duties following	g leav	e of ab	sence			 6
Resigned						 89
Duties terminated						 6
Promoted to Charge Nu	rse					 4
Promoted to Staff Nurse						 10
Retired						 1
						 1
Resigned on marriage ar				porary	officer	 21
0		The second second				

NURSING SCHOOLS

5

					Posts	Filled	Vacant
Principal					1	1	
Tutors					4	4	
Nurses					2	1	1
12. Number of st	udents	s in tra	ining a	s at 31s	t December	. 1960	159
Colony Cur					133	***************************************	110000
New Zeala	nd Cu	rriculu	m		26		
13. Colony Curric	ulum-	-					
Number gr	aduat	ed duri	ing Ma	v. 1960		34	
Number er						56	
Number tr	ansfer	red fro	m Lau	toka Ho	ospital	1	
Number tr	ansfer	red to	New Z	ealand o	curriculum	5	
Number se	lected	for Ne	w Zeal	and cur	riculum	14	
Number di	ities t	ermina	ted for	health	reasons	2	
Number ac	lmitte	d to Cl	nest Ho	ospital		1	
Number to	ansfer	red to	Tama	vua Ho	ospital for		

11. Central Nursing School, Tamavua-Trained Establishment-

Fijians		 	 	 119
Rotumans		 	 	 9
Papuan		 	 	 1
Part-Europe	an	 	 	 1
Indian		 	 	 1
Part-Chinese	,	 	 	 1
Banaban		 	 	 1
				-133

- 17. Graduation—The Graduation Ceremony took place on 3rd May when the Nurses were addressed by Lady Maddocks and the Acting Director of Medical Services. Special prizes were presented by Lady Maddocks. The Nursing Superintendent pinned the medals on the graduating Nurses and presented the certificates.
- 18. At a small function during October, three Nurses who were successful in the New Zealand State Final Examination were addressed by the Director of Medical Services and were presented with their medals and certificates by the Nursing Superintendent.
- Sport—Continued interest has been taken in sport and athletics. Appreciation is extended to Mrs. Dill-Russell and Mr. L. Simpson who have been most helpful in the field of athletics.

LAUTOKA NURSING SCHOOL

20.	Trained Es	tablishm	ent—			Posi	ts	Filled	Vacant
	Tutors					2		2	
	Nurse	/				1		1	
21.	Number of Number Number Number Number	graduat entered left the	ed dur the Sc School	ing Ma hool in for va	y Janua rious re	ry easons		1960 19 24 7 1	78
22.	School Roll	Includes							
	Fijians							64	
	Indians							14 —78	

- 23. Graduation—The School Graduation and Prize Giving Ceremony was held during May. The Acting Director of Medical Services addressed the Nurses. Medals were presented by the Nursing Superintendent and Certificates and Special Prizes by Mrs. M. McAlpine (wife of the District Commissioner, Western).
- 24. Student Nurses from the Ba Mission Hospital continued to spend the required nine months training at the Lautoka Hospital.
- 25. Sport—A high standard of basketball was played during the year which is a game enjoyed by most student Nurses.

26. Grand Total (not including New Zealand Curriculum)-

Total number			urses i	n train	ing at	the end		
December	r, 1960)						211
Fijians						183		
Rotumans						9		
Indians						15		
Part-Europea	ns					1		
Part-Chinese						1		
Banaban						1		
Papuan						1		
						211		
Total number	accep	ted to	the So	chool				80
Total number								53
Total number	leavir	ng the	Schoo	1				36
Total number	admit	tted to	Chest	Hospi	ital			2
Total number	select	ed for	New 2	Zealand	d Curr	iculum		14
Total number	r trans	ferred	to Co	olony (Curric	ulum fi	rom	
New Zeal	land C	urricu	lum					5
		THE	ATTI	CTAE	T			

HEALTH STAFF

27. Establishment-Nursing-

Health S	Sisters	 	 	 25	12
Nurses		 	 	 	109

28. The programme of work carried out during 1960 by the Health Sisters and Nurses, was similar to that of 1959.

29. Health Sisters' Headquarters and Areas-

act remm cross						
Name			Headqua	arters		Areas
Miss L. Ram Sam	uj		Suva Health	Office		Suva City, Suva Rural to Kaloko- levu via Queens Road, Colo-i- Suva via Princes Road to Laqari Kalabo and Naliva village to
Miss E. Gregory			Suva Health	Office		King's Road, Wailoku Hospital. Suva City, Suva Rural Schools to Davuilevu via King's Road to Sawani via Princes Road.
Miss C. A. Bell			Sigatoka			Nadroga, Navosa, Namosi.
			Lautoka			
Mrs. J. Cleary	**	1111	Lautoka		**	Lautoka to beyond Korolevu on Queen's Road and beyond Raki- raki via King's Road.
Mrs. O. M. Caine			Ва			Ba Province.
Miss L. Hunter-S			Labasa			Macuata, Bua.
no Th						Macdata, Dua.

30. There are six Health Sister posts vacant.

SUVA HEALTH OFFICE

Health Sisters two (one Child Welfare, one School Health Sister)

A-CHILD WELFARE DEPARTMENT

Children under 2 years seen at Heal	th O	ffice			7,001
Children between 2 years and 5 year	rs see	en at He	ealth O	ffice	3,686
Children under 2 years seen on Mob	ile C	linic			6,957
Children between 2 years and 5 year			obile Cl	inic	1,541
Stools sent to Laboratory					50
Children treated for worms					285
Smallpox vaccinations					13,829
Vaccination inspections					470
Triple antigen inoculations given					796
T.A.B. inoculations given					145
Cholera inoculations given					138
Inoculations against Poliomyelitis g	iven				1,571
Umbilical cords dressed or treated					179
Number of homes visited					1,407
Number of children seen in homes					2,670
Number of cases referred to Hospita	al or	private	Doctor		712

B-School Health Division

Number of children inspected, inoculated and treated at schools and in l	Health Clinic during 19	60.
Number of children medically inspected at schools .	. 13,139	
Number of children given T.A.B. inoculations at schools .	. 16,728	
Number of children treated for minor ailments at schools	284	
Number of children treated for minor ailments at Health		
Clinics	. 6,604	
Clinics Number of children given T.A.B. inoculations at Health	the Land of the Land of the land	
Clinics	. 126	
Number of children given Anti-tetanus inoculations at		
Health Clinic	. 24	
Number of children given tetanus Toxoid inoculations at	14	
Health Clinic	. 6	
Number of children given tetanus Toxoid inoculations at		
schools	. 711	
Number of children given Pencillin injections at Health		
Clinic	. 3	
Vaccinations against smallpox given at Health Clinic .		
Vaccinations against smallpox given at schools	6.771	
Number of children treated for worms at Health Clinic .	. 58	
Number of stool specimens sent to Laboratory	. 10	
Number of children given triple-Antigen at Health Clinic .	7 22	
Number of children given Anti-poliomyelitis inoculation .		
Number of children treated for loss of weight at Health Clinic		
Number of children found with chickenpox at schools .	1	
Number of children found with chickenpox at schools Number of children found with chickenpox at Health Clini		
Number of children found with number at schools	c 5	
Number of children found to have measles at Health Clinic		
	. 230	
Number of children sent to Out-patient department Number of children sent to Dental Clinic		
Number of children sent to eye clinic	. 24	
C—Dispensaries		
Number of patients seen at Wailoku Hospital, Waiqanake	THE RESERVE TO SERVE	
and Villages		
and vinages	. 0,000	

ACTIVITIES OF HEALTH SISTERS AND RURAL HEALTH NURSES BASED ON CENTRES OUTSIDE SUVA

			100	Lautoka	Ba	Labasa	Nadroga	Rewa	Total
Attendances at Health Cli	nic	 		2,573	1,271	9,709	1,643		15,196
Schools visited		 		44	7	95	62	101	309
Children examined in scho	ols	 		8,544	1,264	4,280	7,246	18,056	39,390
hildren seen in villages		 		1,622	693	5,194	7,095	78,483	93,087
Inte-natal examinations		 		1,693	855		1,516	4,774	8,838
mallpox vaccinations		 		7.937	381				8,318
Triple Antigen		 		697	932	2,362	3,608	11	7,610
C.A.B. inoculations		 		13,205	1,810	4,138	5,092	217	24,462
Family Planning Clinic		 				151	141		292
				36,315	7,213	25,929	26,403	101,642	197,502

APPENDIX XII

NOTIFICATION OF INFECTIOUS DISEASES BY RACE FOR THE YEAR 1960

Disease	Europeans	Part-Europ.	Fijians	Indians	Others	Totals
. Ankylostomiasis	. 1	5	130	201	3	34
Anthon						
Davibari						
0 -1 - 0 - 136 - 131	. 1	1	6	3		1
to how Dan (Marialla)	. 10	13	213	55	29	32
D D	. 1		13	3	3	2
Die besie		0.000		9		
Dysentery—	1		2010			
for America			4	9	1	1
All Devillens			25	53	2	8
(A Unalassified	. 2		23	84		10
Enganhalisis Lasharaisa				1		
Panalastas		1	3	3	1	
Intentile Dismbose	. 13	33	1,732	1,354	163	3.29
Total Control Property	e e	2	72	114	12	20
7-0	0	82	6,597	5,265	1.087	13.00
		3	21	11	3	15,0
		,	1000		3	
W-land		****		****	****	
	20	15	105	85	22	
		5	276			2
	. 36			102	46	46
	. 2	3	24	161	3	19
		****	****	****	****	83.53
		4	30	58	3	5
		****	****	****	2	
Tetanus		2	25	13	1	
		3	132	26	11	17
	. 6	15	432	96	42	59
	. 1	****	47	6	3	
. Typhoid Fever—	1 3337					
	. 1	1	2			
		****	1		****	
		****	****			****
Venereal Diseases—	1000		10000			
(a) Climatic Bubo						
(b) Gonorrhoea	. 9	18	223	116	14	38
(c) Gon. Ophthalmia includ	-	The second second				
ing Neonatorum		****	4	9		1
10 0 1 01						
7.5 C 1.712.		1		1		
(f) Venereal Granuloma				****		
(A) Out and						
**** ** ** *** ***		7	272	222	8	50
Yaws			21	3	2	2
Total	. 118	214	10,421	8.053	1.450	20,26
lotal .	. 118	214	10,421	8,053	1,459	20,20

APPENDIX XIII

VITAL STATISTICS

(1) ESTIMATED POPULATION AT 31st DECEMBER, 1960

1	Race	Male	Female	Total	(1959)	Difference	Per cent increase	Population per sq. mile
Fijians . Indians European Part-Euro Other Isla Rotumans Chinese Others	peans	 85,090 102,072 5,846 4,413 3,257 2,533 2,992 40	82,383 95,880 4,821 4,283 2,918 2,476 1,951 63	167,473 197,952 10,667 8,696 6,175 5,009 4,943 103	162,483 191,328 9,874 8,464 5,841 4,862 4,809 75	4,990 6,624 883 232 334 147 134 28	3-0 3-5 9-0 2-7 5-7 3-0 2-7 3-7	23·79 28·12 1·52 1·24 -88 *·71 *·7 *-01
	Totals	 206,243	194,775	401,018	387,646	13,372	3-45	56-96

^{*} Density of less than I per square mile

44

(2) BIRTHS RECORDED DURING YEARS 1957-1960

Race	1957	1958	1959	1960	1960 Population	Crude Birth- rate per mille of population 1960
Fijians	5,933 7,928 181 240 225 171 164 3	5,587 8,196 193 278 217 159 171 4	5,909 8,890 293 229 234 182 178 4	6,164 8,515 209 266 227 171 201	167,473 197,952 10,667 8,696 6,175 5,009 4,943 103	37 43 20 31 37 34 41
Totals	14,845	14,805	15,919	15,753	401,018	39

(3) DEATHS RECORDED DURING YEARS 1957-1960

Race		1957	1958	1959	1960	1960 Population	Crude death-rate per mille of population 1960
Fijians Indians Europeans Part-Europeans Other Islanders Rotumans Chinese Others		 1,309 1,114 45 39 69 46 27 2	1,193 1,204 44 43 45 37 18	1,235 1,474 41 38 40 28 26 1	1,182 1,270 35 34 46 24 31	167,473 197,952 10,667 8,696 6,175 5,009 4,943 103	7·1 6·4 3·3 4 7·5 4·8 6·3
Т	otals	 2,651	2,584	2,883	2,622	401,018	6.5

(4) MARRIAGES, BIRTHS, DEATHS AND NATURAL INCREASE—1960

Race	Marriages	Births	Deaths	Net Increase	1959 Population	Increase per mille
ijians	1,059	6,164	1,182	4,982	162,483	31
ndians	1,823	8,515	1,270	7,245	191,328	38
uropeans	71 63	209 266	35 34	174 232	9,784 8,464	18 27 31 30 35
art-Europeans	67	227	46	181	5,841	31
otumans	34	171	24	147	4,862	30
hinese	29	201	31	170	4,809 75	35
Totals	3,146	15,753	2,622	13,131	387,646	34

(5) INFANT AND CHILD MORTALITY

	Births	-0.00		Infant Mortality				
	5 033	Under 1	1-2	2-3	3-4	4-5	Total	Rate per mille
1957—Fijians	5,933	251	134	40	23	28	476	42
Indians	7,928	282	35	13	16	7	353	36
1958—Fijians	5,587	211	82	34	19	17	363	38
Indians	8,196	345	19	14	6	9	393	42
1959—Fijians	5,909	226	81	29	16	16	368	38
Indians	8,890	415	39	18	14	11	497	47
1960—Fijians	6,164	195	75	30	23	16	339	32
	8,515	344	39	8	17	13	321	40

APPENDIX XIV

Return of Diseases and Deaths for the year 1960, at the Colonial War Memorial Hospital, Tamavua, Lautoka, Labasa and Levuka Hospitals.

Note.—This classification is based on the International Classification of Diseases, WHO 1955.

rmediate Number	Detailed List Numbers		Cause	Groups					Euro.	Fijian	Indian	Others	Totals	Dea
81 19										-				
HIS .		I—INFECTIVE	AND I	PARAS	ITIC	DISEA	SES				1		1 6	
1	001-008	Tuberculosis of respirat	ory sy	stem	-23		-		21	634	117	70	842	
2	010	Tuberculosis of mening	es and	central	l nerv	ous sys			3	17	2	2	24	
3 4	011 012,013	Tuberculosis of intestin Tuberculosis of bones a			n and	mesent	eric gl	1,500		21	1 2		5 24	
5	014-019	Tuberculosis, all other	orms						14	12	4	3	33	
6	020 021	Congenital syphilis									**	**		
8	024	Early syphilis Tabes dorsalis	**		::		::		::	1		11	1	
9	025	General paralysis of ins	ane											
10	022, 023 026-029	All other syphilis		**						**	2		2	
11	030-035	Gonococcal infections							2	10	10		22	
12 13	040 041,042	Typhoid fever Paratyphoid fever and				fection			1	3 2	1		5	1
14	043	Cholera				nection		::					3	
15	044	Brucellosis (undulant fe	ever)								1		1	
16 (a) (b)	045 046	Bacillary dysentery Amoebiasis	**	::					3	7 6	18		25 24	
(c)	047,048	Other unspecified forms	of dy	sentery						2		1	3	
17 18	050 051	Scarlet fever Streptococcal sore thro	at			**				**	1	**	1	
19	052	Erysipelas								**		::		
20 21	053 055	Erysipelas Septicaemia and pyaem Diphtheria	iia						1	1			2	
22	056	Whooping cough .	::				**		::	"1	8 2	**	8 3	
23	057	Meningococcal infection	15 .							4	1	1	6	
24 25	058 060	Plague Leprosy	::	::	::					2	8		10	13
26	061	Tetanus							22	12	19	2	33	
27 28	062 080	Anthrax									**			
29	082	Acute infectious enceph	alitis	*:					1	3	3	**	7	1
30	081,083	Late effects of acute									-			
31	084	encephalitis Smallpox	**	::	::	::	::		**	5	7	11	12	
32	085	Measles							1.	1	4		5	
33 34	091 092	Yellow fever Infectious hepatitis	**	**	::				2	20	28	1	51	
35	094	Rabies												
36 (a) (b)	100 101	Louse-borne epidemic t Flea-borne endemic typ	yphus	murine)										
(e) (d)	104	Tick-borne epidemic ty									**			
(4)	105	Mite-borne typhus												
(e)	102, 103 106–108	Other and unspecified t	ypnus					**	**		**	**		
37 (a)	110	Vivax malaria (benign,				**								1 4
(b) (c)	111 112	Malariae malaria (quar Falciparum malaria (m	aliona	nt tertis	ine	**								1
(d)	115	Blackwater fever .										**	::	1
(e)	113, 114	Other and unspecified f	orms (of mala	ria									
38 (a)	116, 117 123-0	Schistosomiasis vesical	(S. ha	ematobis	um)									
(b)	123-1	Schistosomiasis intestin	al (S.	Manson	11)									1
(c) (d)	123-2 123-3	Schistosomiasis pulmon Other and unspecified s				**		- ::		**		**		
39	125	Hydatid disease						- 0			1	- 11	1	1
40 (a) (b)	127	Onchocerciasis		**		::		::						
(c)	1 100	Filariasis (bancrofti)		**					2	14	1	3	20	1
41 (d)	129	Other filariasis Ankylostomiasis .												
42 (a)	126	Tapeworm (infestation)	and o	ther ce	stode	infesta	tions		3	7	23	1	34	
(b)	130-0	Ascariasis								1	6		7	
(c) (d)	130-3 124, 128	Other diseases due to h		hs										
	130-1, 130-2											***		
43 (a)	037 038	Lymphogranuloma ven Granuloma inguinale, v									2		2	
(6)	039	Other and unspecified v	enere	al diseas					::	1	**		1	1
43 (a) (b) (c) (d) (e)	049	Food poisoning infectio	n and	intoxic	ation				2	8	8	1	19	-
(0)	071	Relapsing fever						**			**	100		- 4

							20000	Dea
	070			1000		1000	WHEN THE PARTY OF	
(f) (g) (h) (i) (j) (k) (i) (m)	072 073	Leptospirosis icterohaemorrhagica (Weil's disease)		3	**	1	4	
(h)	087	Chickenpox	1	4	1		6	
(2)	090 095	Dengue	1	12	1	3	17	
(k)	096-7	Sandfly fever		::				:
(1)	120	Leishmaniasis						13
(m)	121 (a) (b)	Trypanosomiasis gambiensis		**	**			
1 00	(6)	Other and unspecified Trypanosomiasis					1.	
(n)	131 135	Dermatophytosis		2				
(n) (o) (p)	036, 054, 059,	Scables	**	2	3		5	
	063, 064, 070,	and the second s		100	100	Year !		
	074, 086, 088, 089, 093,						-	
1	096-1-096-6, 096-8,096-9, 122,132-134, 136-138	All other diseases classified as infective and parasitic	1	2	3	1	7	
44	140-148	II—NEOPLASMS Malignant neoplasm of buccal cavity and pharynx		1	5		6	
45	150	Malignant neoplasms of oesophagus			1		1	
46 47	151 152, 153	Malignant neoplasm of stomach	1 2	12 5	11	1	25	6.
48	154	Malignant neoplasm of rectum	1	2	5		8	
49 50	161 162, 163	Malignant neoplasm of trachea, and of bronchus and lung		1	2		3	
30	102, 103	not specified as secondary	2	2	6		10	
51	170	Malignant neoplasm of breast	2	14	5		21	
52 53	171 172–174	Malignant neoplasm of cervix uteri	1	11 6	16	11	28	
54	177	Malignant neoplasm of prostate		1	2 2		3	
55 56	190, 191 196, 197	Malignant neoplasm of skin	5 3	5	1 6		11 18	
57	155, 160, 164,	Malignant neoplasm of bone and connective tissue	3	9	0	**	10	
	165, 175, 176,	Other and unspecified sites		30	7	13	50	
	178–181, 192– 195, 198, 199	Contract of the contract of th		00	1			
58	204	Leukaemia and aleukaemia	1	6	3		10	
59	200-203, 205	Lymphosarcoma and other neoplasms of lymphatic and					10	
60	210-239	haematopoietic system Benign neoplasms and neoplasms of unspecified nature	2 25	34	5 69	12	140	
		III—ALLERGIC, ENDOCRINE SYSTEM, METABOLIC AND NUTRITIONAL DISEASES					20	
		and IV—DISEASES OF THE BLOOD AND BLOOD-					8	
	100/15/19	FORMING ORGANS	Nath	1	- 4		150	
61 62	250, 251 252	Nontoxic goitre	3	3	24		30 13	
63	260	Diabetes mellitus	7	28	10 203	4	242	1
64 (a)	280	Beriberi						
(b) (c)	281 282	Pellagra			2		2	
(d)	283-286	Other deficiency states	1	10	6		17	
65 (a) (b)	290 291	Pernicious and other hyperchromic anaemias	1	3	22 123		26 140	
(6)	292, 293	Other specified and unspecified anaemias		15	21	2	26	
66 (a)	241 240, 242–245,	Asthma	4	18	80	1	103	
(b)	253, 254, 270-	All other allergic disorders endocrine, metabolic and	-					
	277, 287-289,	blood diseases	4	39	37	3	53	
	294-299				191		10	
1010	1	V—MENTAL, PSYCHONEUROTIC AND PERSONALITY DISORDERS	11111	-33	200	Ton	00	
67	300-309	Psychoses		12	6		18	
68	310-324, 326	Psychoneuroses and disorders of personality	8	8	22	1 2	19	

mediate Number	Detailed List Numbers	Cause Groups	Euro.	Fijian	Indian	Other	Totals	Deat
		VI—DISEASES OF THE NERVOUS SYSTEM	Stemp	14				
TEV	2 15 1	AND SENSE ORGANS						
70 71	330-334 340	Vascular lesions affecting central nervous system		12 11	29 18	2 6	53 38	1.
72	345	Multiple sclerosis		1	1		2	
73 74	353 370–379	Epilepsy	1 4	15 32	20 70	21	57 107	
75 76	385 387	Inflammatory diseases of eye	12	27	77	3	119	
77 (a)	390	Otitis externa	3	4 7 8	8 5		23 15	
(b) (c)	391-393 394	Otitis media and mastoiditis Other inflammatory diseases of ear	2		20	1	31	
78 (a)	380-384, 386, 388, 389	All other diseases and conditions of eye		28	30	1	63	
(b)	341,344	1		1	22.00			-
	350-352, 360-369	All other diseases of the nervous system and sense organs	6	12	23		41	
100	395-398	A STATE OF THE PARTY OF THE PAR		TX				
		MANAGEMENT OF THE STREET, STRE	73.0				1000	
1000	18	and the party of the station of the same	4 7 1	100		LEAD.	4	
Full-	Branch .	Control of the last of the las				1,00		ŧ
No.	W 1998	VII—DISEASES OF THE CIRCULATORY SYSTEM	idian	-11	100		-	1
79	400-402	Rheumatic fever	1	11	101	2	115	1
80	410-416 420-422	Chronic rheumatic heart disease	3	48	77	1	129	
81 82	430-434	Arteriosclerotic and degenerative heart disease Other diseases of heart	9	11 20	106 68	5 7	127 104	1
83 84	440-443 444-447	Hypertension with heart disease	14	13 16	41 62	2	70 87	
85	450-456	Disease of arteries	3	3	14		20	
86	460-468	Other diseases of circulatory system	13	25	59	2	99	
87	470-475	VIII—DISEASES OF THE RESPIRATORY SYSTEM Acute upper respiratory infections	12	19	32	3	66	
88 89	480-483 490	Influenza	12	30 127	41 86	4 6	76 231	1
90	491	Bronchopneumonia Primary atypical, other and unspecified pneumonia	23	243	216	18	500	5
91 92	492, 493 500	Acute bronchitis	2 4	12 31	7 27	2	22 64	
93 94	501,502 510	Bronchitis, chronic and unqualified	3	14	17		34	
95	518, 521	Empyema and abscess of lung	20	7 7	134	4	165	
96 97 (a)	519 523	Pleurisy	1	6	13 5	::	20 9	
(6)	511-517, 520-522,	All other respiratory diseases	5	34	60	6	105	
	524-527							
		RECOMMENDATION ASSESSMENT						
	2 12 1	IX—DISEASES OF THE DIGESTIVE SYSTEM	1	E.C.	125	NEW YORK		
98 (a) (b)	530 531–535	Dental Caries	2 5	1 13	5 16	"1	8 35	
99	540	Ulcer of stomach	4 3	23 28	38 51	3 5	68 87	
100 101	541 543	Ulcer of duodenum	8	22	74	12	116	
102 103	550-553 560, 561, 570	Appendicitis	40 26	54 87	185 122	6	285 248	
104 (a)	571-0	Gastro-enteritis and colitis between 4 weeks and 2 years	7	57	90	1	155	2
(b) (c)	571·1 572	Gastro-enteritis and colitis, ages 2 years and over	9	37 5	50	2	98	
105	581	Cirrhosis of liver	2 9	17 8	22 45	1 1	42 63	1
106 107	584, 585 536-539	Cholelithiasis and cholecystitis	9	0	45	1	~	**
44	542, 544, 545, 573-580, 582,	Other diseases of digestive system	30	34	106	9	179	1

Intermediate List Number	Detailed List Numbers	Cause Groups	Euro.	Fijian	Indian	Other	Totals	Deaths
A 108 A 109 A 110 A 111 A 112 A 113 A 114 (a) (b)	590 591-594 600 602,604 610 620,621 613 634 601,603 605-609 611,612 614-617 622-633 635-637	X—DISEASES OF THE GENITO-URINARY SYSTEM Acute nephritis	1 4 9 13 5 10 5 27	5 24 12 3 7 2 39 33	27 25 39 43 20 6 33 97	3 1 2 5 2 4 3	36 54 62 64 32 20 81 160	4 1 1
A 115 A 116 A 117 A 118 A 119 A 120 (a)	640-641, 681, 682, 684 642, 652, 685, 686 643, 644 670-672 650 651 645-649 673-680 683, 687-689 660	XI—DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM Sepsis of pregnancy, childbirth and the puerperium Toxaemias of pregnancy and the puerperium Haemorrhage of pregnancy and childbirth Abortion without mention of sepsis or toxaemia Abortion with sepsis Other complications of pregnancy, childbirth and the puerperium Delivery without complications	4 10 45 1 63 175	33 27 87 121 10 484 632	65 117 126 255 21 1,510 1,432	7 4 19 12 4 106 218	105 152 242 433 36 2,163 2,457	2 7 1
A 121 A 122 A 123 A 124 A 125 A 126 (a) (b)	690-698 720-725 726, 727 730 737, 745-749 715 700-714, 716 731-736, 738-744	XII—DISEASES OF THE SKIN AND CELLULAR TISSUE and XIII—DISEASES OF THE BONES AND ORGANS OF MOVEMENT Infections of skin and subcutaneous tissue Arthritis and spondylitis Muscular rheumatism and rheumatism unspecified Osteomyelitis and periostitis Ankylosis and acquired musculo-skeletal deformities Chronic Ulcer of Skin (including tropical ulcer) All other diseases of skin All other diseases of musculo-skeletal system	2 4	214 36 1 35 4 4 7 5 33	231 38 13 27 6 6 10 5	14 2 2 1 2 3	503 86 14 66 10 20 16 76	4 1 1 3
A 127 A 128 A 129	751 754 750, 752, 753, 755–759	XIV—CONGENITAL MALFORMATIONS Spina bifida and meningocele		1	5 9 43	2	9 10 76	1 2 4
A 130 A 131 A 132 (a) (b) (c) A 133 A 134 A 135	760, 761 762 764 765 763, 766-768 770 769, 771, 772 773, 776	XV—CERTAIN DISEASES OF EARLY INFANCY Birth injuries Postnatal asphyxia and atelectasis Diarrhoea of newborn (under 4 weeks) Ophthalmia neonatorum Other infections of newborn Haemolytic disease of newborn All other defined diseases of early infancy Ill-defined diseases peculiar to early infancy, and immaturity unqualified	1 1	2	1		8 5 8 2 6 2 6	2 3 5 2

nediate lumber	Detailed List Numbers	Cause Groups	Euro.	Fijian	Indian	Other	Total	Death
36 37 (a) (b) (c)	794 788-8 793 780-787 788-1-788-7 788-9, 789-792, 795	XVI—SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS Senility without mention of psychosis	13	1 22 473	8 17 1,309 56	1 38 2	9 43 1,998 77	1 21

"E" CODE—ALTERNATIVE CLASSIFICATION OF ACCIDENTS, POISONINGS AND VIOLENCE (EXTERNAL CAUSE)

1	Nun	ber	Detailed List Numbers	Cause Groups	Euro.	Fijian	Indian	Other	Totals	Death
E 1	138		E810-E835	Motor vehicle accidents	11	35	82	3	131	9
E I			E800-E802 E840-E866	Other transport accidents	2	5	11		18	
E 1	140		E870-E895	Accidental poisoning	4	10	53	3	70	
E			E900-E904	Accidental falls	37	97	186	14	334	7
E I			E912	Accident caused by machinery	1	20	43	2	66	
E I			E916	Accident caused by fire and explosion of combustible material		18	10	2	32	
E I			E917, E918	Accident caused by hot substance, corrosive liquid, steam		10	10	-	02	
			2017, 2010	and radiation	2	8	29	2	41	3
E I	145		E919	Accident caused by firearm		3	5			
E I			E929	Accidental drowning and submersion		3	2		9 5	100
E I		(a)	E920	Foreign body entering eye and adnexa	1	8	27		36	
-		(6)	E923	Foreign body entering other orifice		2	6		8	1
		(6)	E927	Accidents caused by bites and stings of venomous animals		10000				
		4-1		and insects		1	2		3	
		(d)	E928	Other accidents caused by animals		2	12		14	1
		(e)	E910, E911 E913-E915				100		AL PROPERTY.	
			E921-E922 E924-E926 E930-E965	All other accidental causes	9	81	48	**	138	1
AE I	148		E970-E979	Suicide and self-inflicted injury	5	33	40	1	79	3
AE I			E980-E985	Homicide and injury purposely inflicted by other persons		-				
			2000	(not in war)	9	40	63	1	113	2
AE I	150		E990-E999	Injury resulting from operations of war				1	1	
						110000	10000			

"N" CODE-ALTERNATIVE CLASSIFICATION OF ACCIDENTS, POISONINGS AND VIOLENCE (NATURE OF INJURY)

Intermediate List Number	Detailed List Numbers	Cause Groups	Euro.	Fijian	Indian	Other	Totals	Death
AN 138 AN 139 AN 140 AN 141 AN 142 AN 143 AN 144 AN 145 AN 146 AN 147 AN 148 AN 149 AN 150	N800-N804 N805-N809 N810-N829 N830-N839 N840-N848 N850-N856 N860-N869 N870-N908 N910-N929 N930-N936 N940-N949 N960-N979 N950-N959	Fracture of skull	2 12 2 1 5	37 155 98 11 8 34 2 2 86 19 6 23 11 16	34 14 203 13 16 42 14 122 17 18 48 54 24	3 4 1 2 6 4 1 3 4 1	82 36 335 26 27 91 18 224 39 25 79 72 44	4 22 55 3 22 22 4 3 3 3

APPENDIX XV

URBAN/TOWNSHIP/RURAL SANITARY DISTRICTS OF FIJI REPORT OF HEALTH INSPECTORS FOR THE YEAR 1960

1-SUMMARY OF INSPECTIONS

Type of Premise	es, etc.					Inspections	Re-Inspections	Total
House-to-house Inspection of	Dist	rict			**	48,289	21,690	69,979
Investigation of Complaints,	Nuisa	nces, e	etc.			846	472	1,318
New Buildings Sites-before	appro	val				1,235	133	1,368
New Buildings Works in Pro	gress					3,477	1,431	4,908
Investigation of Infectious D	isease	and I	Disinfect	tion		3,140	54	3,194
Shipping Inspections						118		118
Aircraft Inspections						1,041		1,041
Houses-let-as-Lodgings and I	Lodgir	ng Hou	ises			631	522	1,153
Factories and Workshops						645	414	1,059
Cemeteries						95	35	130
Schools						483	235	718
Checking Sanitary Services (A/Cs,	etc.)				1,889	189	2,078
						534	279	813
Hairdressers, Chiropodists, et	tc.					1,337	720	2,057
Foodshops, Foodstores, Mark	cets, e	tc				5,206	2,665	7,871
Eating Houses and Ice Crear	n Prei	mises				1,836	1,315	3,151
Aerated Water and Ice Fact	ories					193	138	331
Kava Saloons						302	220	522
Bakehouses						738	532	1,270
Slaughterhouses						62	37	99
Butchers Shops						322	230	552
Food Vehicles						501	408	909
Public Conveniences						122	18	140
Hotels and Liquor Premises						32	14	46
Miscellaneous						584	90	674
			То	tal		73,658	31,841	105,499

2-Written Notices, Etc., Issued

Type of Notice etc.				Number
Intimation notices served				6,247
Statutory notices served				243
Buildings Surveyed for Closure	or De	emolitic	n	138
Closing Orders served				44
Intention to Demolish served				2
Demolition Orders served				7
Buildings Demolished after ser	vice o	f Order	s	
(a) By Owners		**		49
(b) By Local Authority				

3—BUILDING APPLICATIONS DEALT WITH

Type of Application	Number	Value
New Buildings	 3,126 366 95	£1,894,259 151,015 11,393
Tota Buildings completed during the year Applications outstanding in register (work not completed) at end of	 3,587 1,159	£2,056,667
(a) New Buildings	 5,684	
(b) Alterations and Repairs (c) Septic Tanks Applications withdrawn, rejected or l	 1,926 804 121	

4—Summary of Sanitary Improvement	S, ETC. (ALL TYPES C	F PREMISES)
Items	Ord	ered Completed
Repairing of Buildings	51	
Improvements to Lighting and Vent	tilation of	
Buildings	30	
Removal of Unauthorized Erections	44	
Abatement of Overcrowding		
Repairing, Cleansing or Flyproofing of Pr	ivies 4,71	
Filling in of Insanitary Privies	4 40	
New Bathrooms or Washing Places	28	2 161
Repairing or Cleansing of Bathrooms o	me.	1 200
Places New Kitchens	75	
Repairing or Cleansing of Kitchens	83	
Provision of New Drains	97	
Repairing or Cleansing of existing Drains		
New Wells	16	
Repairing or Improvement of Wells New Water Tanks	76	30 BCD
Repairing, Screening or Cleansing of Wat		
Removal of Accumulations of Refuse, etc	6,75	
Clearing of Overgrowth or Long Grass		
Provision of Garbage Tins	1,68	A STATE OF THE STA
Abatement of Nuisances from Animals or	-	
Abatement of Mosquito Breeding		
Structural Improvements to Food Premis		
Cleansing of Food Vehicles		4 260
Improvements to Food Vehicles	13	
Cleansing or Improvement of Hairdresser	4.0	
Cleansing or Improvement of Laundries Cleansing or Improvement of Schools	16	
Cleansing or Improvement of Shipping		4
Impounding of Straying Cattle	11	
Miscellaneous	1,37	
Septic Tanks Emptied		. 135
****** *** *** ***		
Wells Chlorinated		70
****** *** *** ***		. 72
Wells Chlorinated Total	44,63	. 72
Wells Chlorinated Total 5—Mosquito C	44,63	2 28,833
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L		. 72 2 28,833 67,605
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for	44,63 CONTROL arvae	. 72 2 28,833 67,605 3,487
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index		72 2 28,833 37,605 3,487 5·16 per cent
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index 6—Disinfection, Disinfesta	CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index		72 2 28,833 37,605 3,487 5·16 per cent
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index 6—Disinfection, Disinfesta	CONTROL arvae	72 2 28,833 67,605 3,487 5-16 per cent
Wells Chlorinated Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index 6—Disinfection, Disinfesta Type of Premises or Vessel Overseas Vessels—Anti-malarial Inspections	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent Number 120
Wells Chlorinated	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent N Number 120 44
Wells Chlorinated	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent Number
Wells Chlorinated	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent N Number 120 44
Wells Chlorinated	CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent N Number
Wells Chlorinated	CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent N Number
Wells Chlorinated	CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent N Number
Wells Chlorinated	Ad,63 CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent N Number
Wells Chlorinated	Ad,63 CONTROL arvae	72 2 28,833 37,605 3,487 5.16 per cent N Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent N Number
Wells Chlorinated	Ad,63 CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent N Number 120 44 3 46
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index 6—Disinfection, Disinfesta Type of Premises or Vessel Overseas Vessels—Anti-malarial Inspections Overseas Vessels	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent N Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	Ad,63 CONTROL arvae	72 28,833 28,833 37,605 3,487 5.16 per cent Number 120 44 3 46 27 308 122 bags D.T. 314 3 46 11,271 375
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	CONTROL arvae	72 2 28,833 37,605 3,487 5·16 per cent Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	Ad,63 CONTROL arvae	72 28,833 28,833 37,605 3,487 5.16 per cent Number 120 44 3 46 27 308 122 bags D.T. 314 3 46 11,271 375
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	Ad,63 CONTROL arvae	72 28,833 28,833 37,605 3,487 5.16 per cent N Number 120 44 3 46 27 308 122 bags D.T. 314 3 46 3 16 50s Total 5,034 11,271 375 656
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	CONTROL arvae	72 2 28,833 67,605 3,487 5·16 per cent N Number
Total 5—Mosquito C Premises Inspected for Mosquito L Premises at which Larvae were for Larval Index	Ad,63 CONTROL arvae	72 28,833 28,833 37,605 3,487 5.16 per cent N Number 120 44 3 46 27 308 122 bags D.T. 314 3 46 127 16 Sus Total 5,034 11,271 375 656

8-SUPERS	VISION OF	LABOUR G	ANGS	ETC.
O DULBER	FISTOR OF	DIEDOUE C	Charles Co.	Act A. Law

N	har of man							S, ETC.	de of De		d ata
Num		CONTRACTOR TO STATE OF THE PARTY OF THE PART								fuse remove	ed, etc.—
		of men en and cleare		1	::					212 100 area	e
		f drains c									s 10 chs.
		refuse an								23,874	
		9	-Foot	INSP	ECTION	AND	SAMP	LING			
Unsc	ound foodst										
	Food and										
(14)	2 0011 117111	ri mer our	npres		Ty	pe				Number	
	Fresh wa	ter			Bacter	iologi	ical			444	
		er Baths			Bacter	iolog	ical			52	
		n			Bacter					4	
	Milk—ge	nuine on-genuin			Chemi			***		86 15	
	Miscellan				Chemi					42	
(b)	Meat Insp	ection-									
(6)	men insp			,						N	
	Com	Carcases 1								Number	•
	Cattle				**					124 25	
	Pigs Goats	111		::		11			11	2	
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			10-	-LEG	AL PRO	CEED	INGS				
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APPENDIX XVI

SUVA GAOL

- During 1960, Dr. T. A. U. Clunie was visiting Medical Officer to the Suva Gaol.

 2. Regular visits were made by the Medical Officer when he saw cases referred by the Assistant Medical Officer and patients in the Infirmary ward.
 - 3. The prison buildings, bakery and warders' compound were inspected regularly.
- 4. All new admissions to the Gaol were examined. The resident Assistant Medical Officer gave routine daily medical attention to staff and prisoners and there was a total of 6,971 attendances at the dispensary.
- 5. Twenty-four cases of pulmonary tuberculosis were seen—these included old cases. Two were admitted to Tamavua Hospital. No active cases were found in the contacts.
- 6. In addition to 119 cases referred for dental treatment, 17 cases were sent to the Colonial War Memorial Hospital for further advice and treatment.
 - 7. There were 6 psychoses.
 - 8. During the year there were 2 judicial hangings and 9 corporal punishments.

APPENDIX XVII

METEOROLOGICAL REPORTS

The following Meteorological Reports for the year 1960 have been supplied by the Meteorological Office :-

Laucala Bay		Suva	
Rainfall—		Rainfall—	
Total	123·19" 118·23" +4·96" 220 5·60"	Total	125·69" 124·35" +1·34" 206 7·55"
Temperatures-		Temperatures—	
Mean Maximum	82·9°F.	Mean Maximum	83·2°F.
2nd	90.6°F.	several days	90·4°F.
Mean Minimum Lowest Minimum on Aug.	71·8°F.	Mean Minimum Lowest Minimum on June	72·1°F.
5th Mean Temperature ½ (Max	61·8°F.	17th	62·2°F.
+Min)	77·3°F.	+Min)	77.6°F.
Departure from Normal	+0.2°F.	Departure from Normal	+0.4°F.
Mean Temperature at 9 a.m.	78-9°F.	Mean Temperature at 9 a.m.	79·0°F.
Humidity-		Humidity—	
Mean Humidity at 9 a.m	80%	Mean Humidity at 9 a.m.	77%
Bright Sunshine— Total Hours Mean Daily	1786-8 hrs. 4-88 hrs.		

NOTES

General-Cloudy with near average rainfall and temperatures.

Temperatures—The mean was $0.2^{\circ}F$, above the average and extremes ranged from $90.6^{\circ}F$, on February 16th to $61.8^{\circ}F$, on August 5th. All months except July and December were above or just on the average. December 4th with a minimum temperature of 66.0°F. was the lowest December minimum at Laucala Bay since records began.

Rainfall-Totals were close to the averages. November was the wettest month and August the driest. Although June and July had totals considerably above the average, there were prolonged dry spells as the bulk of the rain fell in a few days.

Winds—The prevailing wind direction was S.E. with 36 per cent frequency and together with Easterlies, accounted for 74 per cent of all directions. The mean speed was 7.7 knots and the maximum gust 44 knots on June 15th and July 29th.

FIJIAN SPELLING

Two systems of spelling Fijian names and words are in use in the Colony. The "Fijian" system was devised during the period 1835-37 by the Missionaries who first reduced the Fijian language to writing. They aimed at representing the various Fijian sounds by single letters and the system that resulted has been used ever since by the Fijian people and is in general use within the Colony. The letters concerned are "b", "c", "d", "g", and "q" and the following examples indicate the manner in which they are pronounced.

- (i) B is pronounced "MB" as in number, e.g. LABASA = LAMBASA.
- (ii) C is pronounced "TH" as in that, e.g. CAUTATA = THAUTATA.
- (iii) D is pronounced "ND" as in end, e.g. NADI = NANDI.
- (iv) G is pronounced "NG" as in sing, e.g. NASIGATOKA = NASINGATOKA.
- (v) Q is pronounced "NGG" as in finger, e.g. YAQARA = YANGGARA.

In practically all words in Fijian, the accent is on the penultimate syllable.

The "phonetic" system is a more recent attempt to render Fijian words in English spelling. It is
used in maps and in documents designed primarily for overseas reading, e.g. MBAU (BAU), THAKOMBAU
'CAKOBAU), NANDI (NADI), NANDRONGA (NADROGA), MBENGGA (BEQA).



