418. I wish to call your attention to his article in Heath's "Dictionary of Practical Surgery," at page 417 of volume ii. Do you agree with this paragraph?—Yes.

419. In your opinion, has the present system of antiseptic treatment practically obviated that

danger?—Not simply with antiseptics.
420. Assuming, of course, that the other conditions are good?—Then, yes, certainly. 421. Assuming good hygienic conditions, are there known dangers to cope with?—Yes.

422. And assuming that there is nothing in the air to trouble you, have you known dangers

and difficulties to contend with?—We have known dangers and difficulties.

423. But modern surgery teaches you—does it not?—a way to deal with these dangers and difficulties?—Yes, certainly. With regard to this, I may say that at Home the schools who practise antiseptics differ considerably. Lawson Tait depends on pure air and good hygienic surroundings; he does not believe much in antiseptics, but gets splendid results simply from the extreme hygienic precautions which he takes. Another school obtains almost equally good results by rigid antiseptic treatment, Lister being the chief exponent of this division.

424. The Chairman.] Has not the use of antiseptics been of late abandoned in some hospitals?

In the strict sense of the word, it has.

425. Mr. Solomon.] I understand you to say that you know the dangers of the operations themselves, but the conditions enable you to cope with them?—In the case of abdominal operations you do not know the dangers, because there are so many unusual dangers.

426. But I am speaking only of septic poisoning. Modern surgery enables you to deal with

these cases?—Yes.

427. Can you, with the most modern and improved system of antiseptics, deal or cope with the dangers of blood-poisoning that arise from a defective condition of hygiene?—Certainly not. I think that is admitted by every authority. But I do not, nor would any one, like to say that even with the most perfect antiseptic precautions you can prevent mischief-indeed, it is absolutely impossible to do so-in private practice. It is even most difficult in a chemical laboratory to obtain absolute results.

428. With the utmost skill, do you agree that it is impossible to cope with the dangers that may arise from an impure atmosphere?—Undoubtedly it is.

429. With the Dunedin Hospital in its present condition, with all the skill that you can give to your patients, with all the care that you can bestow on them, can you prevent the dangers to which they are exposed there?—No, I cannot.

430. You have told us that in your own experience you know of appreciable dangers owing to

the unhygienic conditions of the Hospital?—Yes.

431. I assume, then, that there is, in your opinion, very appreciable danger to patients in the Dunedin Hospital?—I think there is, indeed.

432. And you have told us that in your private practice you know of no case of death from septic blood-poisoning after operation?—No. I had a death from peritonitis.

433. I now come to the Hospital, and ask you to tell us what has been your experience there, or, rather, what has been the net result of your experience there?---In my own experience I have had four cases of death from septicæmia.

434. The Chairman.] Out of how many cases?—I cannot give you that. If I may refer to my cases I shall be perfectly willing to give the whole of them, but I must refuse to give the bare number of deaths. The only way by which to give a correct record is by giving you a detailed

account of each death.

435. Mr. Solomon.] You have already told us that you know of no case in your private practice of death due to septic poisoning. I want you to tell us how many abdominal sections you have operated on, both inside and outside the Hospital, and the number of these that are traceable to septic poisoning inside the Hospital?—That would be a very difficult thing indeed. I would rather give you my deaths right off.

436. Then give us your deaths outside first?—I have had no deaths outside from septic In my oöphorectomy and other abdominal cases I have had no deaths from septic poisoning.

symptoms.

437. Now, I want to know this: In your opinion, as the result of all that you have told us, is the net result this: that you had a number of cases, ovariotomies and abdominal sections, outside, yet never has one death from septic poisoning arisen; but in your cases inside the Hospital you have had several deaths from septic poisoning?—Yes.

438. Is the latter result consistent with the conditions you found in the Hospital—consistent with the defective state of hygiene which you found existent there?—Yes, it is.

439. Is it possible that it might be caused directly by the bad air?—Yes, certainly it might. 440. On the other hand, do you undertake, or can any medical man undertake to swear positively, to say how septicæmia, in any particular case, was actually produced?—No, I do not think it is possible to do so.

441. Do you say that it is perfectly consistent with the bad state of the atmosphere?—

Undoubtedly.

442. In your opinion, are the results which you have found in the Dunedin Hospital consistent with any other reasonable theory than that they are due to the unsatisfactory condition of the Hospital?—No. Take especially a serious case that I have recently had. To my mind it is perfectly conclusive that the result has been due to bad hygienic conditions.

443. Do I understand you to say that you have founded your conclusions, which were first of

all suspicions, but have since grown into convictions, on any individual case?—I have not.

444. But that all of them make up the net result of your experience?—Yes. I may say this, further: that had the experience which occurred to me in July happened to me at any other time, irrespective altogether of the suspicions that I had previously entertained, these cases of themselves