

680. And that cause you think sufficient to account for the breaking-out of erysipelas in different parts of the Hospital?—Yes. There were two cases in the children's ward, which is excessively bad. There was one case in No. 1 ward, another in No. 3 ward, and a supposed case in No. 7 ward.

681. I will put it in this way, as you have scarcely answered my question: Was there anything in the general condition of affairs in the Dunedin Hospital to account for that breaking-out of erysipelas?—Yes, there was.

682. What was the state of the weather at this time?—It was exceedingly cold.

683. And that is why the windows would have been shut up?—Yes.

684. Then you would expect these cases to occur, would you, in a hospital having such sanitary defects as ours?—If you will look up the cases, you will find that a large proportion have occurred during the cold weather.

685. But was there anything in the air outside—any condition of unhealthiness in the air outside—which would account for the presence of the trouble inside the Hospital?—Nothing.

686. *The Chairman.*] Was there any epidemic about at that time?—There was no epidemic about at all.

687. *Mr. Solomon.*] That was just what I wanted to get out from you. Is it a proper thing for typhoid to arise in a hospital?—It is not a proper thing. I should say that it is a very improper thing.

688. But there are a large number of typhoid cases treated in that Hospital, are there not?—Whenever there is typhoid in London there is typhoid in Guy's.

689. If the sanitary conditions of a hospital are unsatisfactory would it then be surprising that a nurse should get typhoid?—No. If the sanitary conditions were bad it is quite possible for a nurse to take typhoid—that is, if there were some grave defects in the sanitary arrangements.

690. Then, may I say that the insanitary condition of a hospital affects the possibility or probability of infection?—Yes.

691. Do you know of any case within your own experience in which a nurse has contracted typhoid within the Dunedin Hospital?—Yes, I know of one case personally—from my own observation—and I have heard of other cases, but I want to talk only of what came under my own observation. There was a nurse in Dunedin Hospital whom I was asked to see in consultation with Dr. Barclay. She was suffering, in my opinion, from typhoid fever.

692. Was Dr. Barclay of the same opinion as yourself?—I do not know what his opinion was at the time, but after the case had run its course he was quite convinced that I was quite correct in the opinion I had formed. I think there was a little doubt in Dr. Barclay's mind at the time. One medical man who saw it was inclined to look on it as a case of tubercular peritonitis, but that view turned out to be incorrect.

693. Do you know of typhoid having occurred in any other hospital—in Guy's, London, for instance?—Dr. Wilks, the eminent physician of Guy's Hospital, speaking to Dr. Murchison, says that "he has never known a nurse in Guy's Hospital contract typhoid fever" (Quain's "Dictionary of Medicine," vol. i.). Murchison, the authority on fevers, says, "Hospital experience lends little support to the doctrine of contagion. It is universally admitted to be a very rare occurrence for nurses or medical attendants of hospitals to contract typhoid fever from the sick under their care."

694. Is typhoid treated at Guy's?—Yes; it used to be treated in an ordinary medical ward, without any special precautions.

695. Was this case contracted in the Hospital?—Yes. I cannot give you the nurse's name, but she was in No. 4 ward at the time. There was a little difference about the case at the time, and when this inquiry was about to commence I wrote to Dr. Barclay—within the last week or two—asking him what he had thought of the case. I did not say a word about the case, I merely asked his opinion, and he replied to me. I have the letter in my possession now. I see that the name of the nurse was Stewart. Dr. Barclay says that it was some time in March or April of last year. [Letter handed in.] I may say that Dr. Barclay knew more of the particulars of the case; I simply saw the case in consultation with him. I did not make any particular inquiries, but I knew that she had been nursing in that ward.

696. I suppose you do not pretend to say positively in this case, any more than in any other, that this woman got typhoid through the insanitary condition of the ward?—I would not say positively.

697. But the fact that the condition of the Hospital is insanitary renders it more probable that she did, does it not?—It confirms the suspicions that I had formed about the Hospital.

699. I understand you to say that the presence of this case does not prove positively that it was due to the insanitary state of the ward?—It does not.

700. But it is another illustration which goes to confirm your previously-entertained suspicions?—Quite so.

701. I now come to the question of suppuration of the wounds. We will first of all take the case of William M——, who was admitted into the Hospital on the 21st August, 1883.

*The Chairman:* Is this a case within the doctor's own experience.

*Mr. Solomon:* Yes. We have three cases, the first being that of William M——, who was admitted to the Hospital suffering from an injury to his knee-joint.

*Witness:* You must be careful how you speak of injury to the knee. In this case it was an injury arising from a strain.

702. *Mr. Solomon.*] I shall deal first of all with M——'s case, and come to the others by-and-by. I wish to ask you in such a case as this, is the hygienic condition of the Hospital of importance?—Yes; it has a very important bearing on this case, I should say.

703. Can you classify these cases, or is there anything particular about them which would impress them upon you?—They were all septic cases, all eventuating in septic mischief.

704. There is a liability to suppuration in these cases, is there not, if the conditions are