

1323. That is very nearly the same as in Dunedin?—The mortality is given at 5·2 per cent., and the district rate at 23.

1324. What is the average number of patients?—The average number of in-patients is 301. It gives the average duration as thirty-six days. It must be remembered that these statistics are drawn for five years.

1325. Colchester turns about three hundred patients a year against our 1,000?—Yes. I simply mentioned that hospital because I knew it.

1326. Another county hospital that you mentioned was Ipswich?—It has ninety beds. That is the only information I can find about it. I lived within six miles of these two towns, and that is how I happened to mention them.

1327. Do you give any London statistics?—I do not.

1328. Have you looked into them?—I have looked into the matter very carefully, and probably know more about it than you are aware of.

1329. Take St. Thomas's, London, for instance. Have you noticed the mortality there?—Yes. It has a very high mortality, and its condition has been brought forward very prominently. In one respect the hospital is conducted on similar lines to Dunedin Hospital. One or more wards are left "fallow," the result being that the other wards are always full, and consequently overcrowded. And this is one of the reasons to which their heavy mortality is attributed.

1330. Yet, of all the great cities, London we are told is almost the healthiest in the world, with the exception of Stockholm?—Stockholm I know nothing about: about London you are probably correct.

1331. The mortality of St. Thomas's is over 12 per cent.?—It is very bad indeed, and attention has been drawn to the fact.

1332. It is a modern hospital?—So far as the building is concerned it is a very fine one indeed.

1333. Let us take another London hospital—the Middlesex. I find that its death-rate is 12·92 per cent.?—You will find an explanation of that. The whole thing is referred to in Tait's book. One explanation of the heavy mortality in London—and it is a very reasonable one—is that they pick out the worst cases for these hospitals for the instruction of medical students.

1334. Is not that applicable to Dunedin to some extent?—I am afraid not.

1335. Are no bad cases sent here?—I do not know that it would affect our mortality in the slightest degree.

1336. Do not cases come from various parts of the colony here?—Very few do; and I am afraid very few will, until we get a better hospital.

1337. I find that in the London Hospital the percentage in one year was 11·8. Is there anything special about that?—Probably there was some reason for it. Holmes gives reasons, which I have already referred to.

1338. Speaking of cancer cases: do they tend to increase or decrease the mortality?—I suppose there is a heavy mortality in cancer; at least, I should think so.

1339. I will ask you to look at the figures for Dunedin last year. There were twenty-seven cancer cases, of which eleven died?—You are picking things to pieces, and I will do so too.

1340. But you have relied on these statistics?—I have relied on facts.

1341. May we take it then that the statistics which have been quoted are of no value?—No; their value depends on facts, and facts alone. It is only facts that I am going to deal with—facts as to the number who go into the Hospital, the number who go out, and the number who die.

1342. Are these the only facts?—These are the only ones that I am going to deal with.

1343. Then it is not worth while considering Tait's special explanation of London's mortality?—I do not think that that will help it much.

1344. Do you say that it is not worth while to look into Tait's explanation?—I have looked into it, and cannot find much help from it.

1345. Have you ever, in a case in which you felt you were proceeding to an operation in fear and trembling for the result, asked for a special ward to treat your patient in?—We always do in bad cases; and we get them, in fact.

1346. *The Chairman.*] Do you always get them?—Yes.

1347. *Mr. Chapman.*] Then you have never found any difficulty in getting a special ward?—I will not say never.

1348. You have made a special comparison between your cases in the Hospital and those outside?—I have.

1349. Have you had any deaths in your gynecological cases outside the Hospital?—I have.

1350. Many deaths?—No.

1351. Will you give us an idea of how many deaths you have had?—I will not give you the number of operations, but will give you them in detail.

1352. I do not want that?—You cannot have it in any other way.

1353. Can you not give us the number of your cases?—I will not do so. I will give you each individual case if you like, and everything about it; otherwise, a wrong impression would be created. All I wish to have is the truth.

1354. I ask you again: will you give the number of cases in which you have had deaths in your operations outside the Hospital?—No; because it will simply mislead you.

1355. *The Chairman.*] Why do you decline?—Because, to go into the results, without also giving the details of my cases, would not, I think, be fair to myself.

1356. Do you mean that the cases cannot be classified?—Not unless I give them individually. That is the only way you can get the true results. I have not the slightest objection to give full details of individual cases, but otherwise I shall not touch them.

1357. *Mr. Carew.*] You are destroying the value of your evidence if you refuse to answer