

2184. You knew that during those five years those operations have been going on?—Yes; certainly.

2185. And that they have become a feature of the Hospital, and were a very large feature in the Hospital during those five years?—Yes.

2186. And that there is an increasing number of such cases?—Yes.

2187. And you say improperly so?—I do not say improperly so.

2188. What do you say?—I say that the risks are greater than they should be.

2189. Would you say very much greater or just a little greater?—I should say they interfere with the cases a good deal.

2190. Do you confine that observation to the Dunedin Hospital, or is it so in other hospitals?—It applies more or less to any hospital.

2191. That is merely another way of expressing your opinion that there are pathogenic germs in the atmosphere?—Quite so.

2192. Do you say that with special reference to our Hospital?—My experience of New Zealand is entirely confined to this Hospital.

2193. Then for the last five years you have held the opinion that the Dunedin Hospital was in an unsatisfactory condition?—Yes.

2194. In what way have you expressed that opinion? You were House Surgeon, and subsequently a member of the staff. When and under what circumstances have you officially expressed that opinion?—At those meetings of the staff at which we discussed the sanitary condition of the Hospital I have expressed that opinion. I think it is in print.

2195. When were these meetings?—Last year there was one.

2196. But not earlier?—I do not think I had any occasion to express them in 1888. I have only been two years on the staff. I left the house-surgeonship in 1887.

2197. Then, if the Hospital is an unsafe place in which to perform these operations, would you have had to exercise a discretion as to operations performed there? Take operations of expediency, that you might postpone and perhaps avoid?—I have a great many surgical operations that are operations of expediency that I would have performed there.

2198. And operations that are dangerous to life?—I suppose I could perform them too, but I should be aware I was running a risk, and the precautions would have to be very great.

2199. Have you performed operations?—Yes; a few. I was surgeon for a short time. As house surgeon I have done operations.

2200. You spoke of draughts. Were complaints frequent?—Very frequent.

2201. Were complaints of stuffiness frequent?—No; they came from my side. The patients seemed to refer that state of the atmosphere to draughts. It is only fair to say that if you are in a room for some time you become accustomed to the stuffiness, and on my going into the ward I felt it very much.

2202. Have you been frequently in the ward to see?—Yes.

2203. Have you had experience of other hospitals?—Not much. I was House Surgeon at King's College, London.

2204. As a student, were you in any other hospitals?—I have visited some others; but I have been mostly in their operating-theatres.

2205. Have you had experience of special wards at any hospitals?—Yes, at King's College, in which I may say there was trouble with draughts. I do not know what system of ventilation they had. The complaints came from the patients, because I opened the windows, and the nurses used to insist on the windows being closed.

2206. And generally were the results bad in that college?—No, I do not think so.

2207. But is the rate of mortality high?—Well, you cannot compare the two, because we are speaking of days before antiseptic precautions came in, and every wound suppurated.

2208. In your position of House Surgeon, had you much cause to complain or form an opinion that mischief was arising from septic causes?—Not as regarding ordinary surgical wounds; and I may say that our general results in the Dunedin Hospital have been greatly improved, because the recognised methods of carrying out antiseptic principles are being better understood. When I first came here they were most imperfect, and wounds frequently suppurated; but as time went on wounds began to heal better.

2209. That was due to improvement in the education of the profession?—Exactly; and so, from having seen almost any wound suppurating in a college like King's College, I saw wounds healing remarkably and kindly; and I was much struck with that in the Dunedin Hospital.

2210. Then you have not found it such a bad place?—No, not in comparison with what I recollect.

2211. And you have expressed the opinion that gynecological cases should not be placed in general wards. When did you form that opinion?—As soon as the matter was brought up for an opinion by the staff.

2212. There were comparatively few of these cases in your time?—Well, in some kind of cases gynecology has advanced so much.

2213. And you have said that such cases do not get a fair chance. Ought not an operator to know that?—Decidedly.

2214. An operator ought to ascertain the conditions around him?—He ought to under present circumstances.

2215. How would you ascertain? When you were House Surgeon would any surgeon have any difficulty in obtaining from you information about the Hospital?—Certainly not. I have volunteered evidence in many cases where I thought it would affect the patient.

2216. A question has been put to you about erysipelas arising in the Hospital, and you say that such a thing ought not to arise under proper conditions?—I say so because I bow to authority.