

2274. You have a special knowledge of pathogenic germs, and the means adopted for their destruction?—Yes.

2275. And with your knowledge of the subject, do you think in those steps sufficient means are taken to thoroughly cleanse the wards in a surgical sense?—Not in a surgical sense. I do not think whitewash is a disinfectant on large quantities of germs. I would not rely on its efficacy, although, generally speaking, it answers a useful purpose, and periodically it still might be resorted to, because it minimises the evils to an enormous extent.

SATURDAY, 30TH AUGUST, 1890.

Dr. DELAULTOUR sworn and examined.

2276. *Mr. Solomon.*] What is your name?—Harry Archibald DeLautour.

2277. What is your title?—I am a member of the Royal College of Surgeons, England.

2278. You are a duly registered practitioner for this colony?—Yes; and I am also an associate of King's College, London.

2279. How long have you been practising in Dunedin?—Since the beginning of 1875.

2280. You have been in practice in Oamaru?—Yes.

2281. And I suppose you are a member of the staff up there?—I am a member of the honorary staff, and had sole charge of the Hospital for two years.

2282. Have you given this question of hospitals much special consideration?—I have gone into it perhaps more than I should have done—more than most people go into it.

2283. Have you had occasion to visit the Dunedin Hospital during your stay in New Zealand? Yes.

2284. Frequently or seldom?—My first visit to it was when I came here in April or May, 1875, and since that time I have often been over it thoroughly when my old friend Dr. Roberts was house surgeon. I have been over it occasionally since then, my last visit being yesterday.

2285. Yesterday you went over for the purpose of inspecting it?—Yes; I did not go over the whole of it, but only through three or four wards.

2286. But was yesterday's visit a casual visit or a visit of inquiry?—One of inquiry, as far as it could be without disturbing the patients.

2287. Now, from what has been your experience in the past, and from what you saw yesterday, will you tell us, please, whether the sanitary condition of the Hospital is satisfactory or otherwise?—It is very unsatisfactory.

2288. Have you seen many hospitals in your time?—Yes, a good many.

2289. Hospitals of the same size?—Yes, and also some larger. I was house surgeon of King's College for six months, then assistant for another six months, and afterwards resident surgeon for diseases of women in King's College, so that I had eighteen months constant indoor work there.

2290. And in your experience you say you have seen other hospitals of about the same size?—I have seen some smaller and some larger, and I have gone over them paying visits.

2291. Will you tell us how, in your opinion, the Dunedin Hospital compares with other hospitals of about the same size that you have seen?—Well, unfavourably.

2292. You have seen better hospitals of the same size?—Yes.

2293. Have you seen worse?—I would not like to say that exactly. It is this way: that when going over other hospitals I did not know quite so much about sanitation as I know now, and there may have been defects, such as are in the Dunedin Hospital now, that I did not see.

2294. We have heard in this inquiry a deal about perfect hospitals. I do not ask you whether Dunedin Hospital is perfect or not; it follows from what you say that it is not; but, in your opinion, is its condition fairly satisfactory?—I think it is in a very bad sanitary condition.

2295. Do you approve of the construction of the Hospital?—No, it was never meant to be a hospital, and it is on the sort of "block" system which is a bad system.

2296. That is, the wards lead into a central hall?—Just so; and one side of the wards is blank wall.

2297. Is that desirable?—No, not at all.

2298. In the present construction of the wards of the Hospital is it possible to obtain cross-ventilation?—No; it would be a very difficult matter.

2299. Is that essential to a sanitary condition or otherwise?—I mean to say this: that in the present Dunedin Hospital, as at present constructed, if you put big holes in these walls and put gratings and ventilators to bring in the air, you would bring it in from the central hall, and the air there might be contaminated by anything inside. You should bring in air as pure as you can, and not from the inside of a building if you can help it.

2300. Yes, we will come to that by-and-by. What about the lighting of the wards?—Of course, there is light from only one side.

2301. Is that sufficient, do you think?—I think there is sufficient light as far as it goes. Of course, there should be light on both sides.

2302. But I am not speaking of that. Under the circumstances, do you think the lighting is satisfactory, seeing there is one blank wall?—I would not like to say about that; but there should be more light. There should be light on both sides.

2303. And what about the sun-light?—Of course, it can only get in at a particular time of the day. Sometimes you will hardly get any sun at all. Some wards only get it in the morning, or a portion of it, and some get only the afternoon sun.

2304. Is that proper?—No, the sun should be got all day, if possible.

2305. And what system of hospital structure will secure that?—The pavilion, or corridor system, which is much the same.