

2840. Did you notice whether the drains were open for inspection?—They were not.

2841. How does that compare with the system in Christchurch?—In Christchurch every few feet of the drains are open for inspection.

2842. Do you think that that is necessary?—I think it is absolutely necessary in a hospital.

2843. In case of anything going wrong with the drains?—So that they may be seen to at once and inspected.

2844. If they are not taken in hand they may become a source of danger?—Undoubtedly.

2845. Did you notice the back tower ward, and the position of the closet there?—Yes.

2846. Where is it?—It is situate in the ward.

2847. Not at the end of the ward?—No.

2848. *The Chairman.*] You mean the east tower?—Yes.

2849. *Mr. Solomon.*] That is the lock ward?—The closet is in one corner of the ward, and actually within the ward.

2850. *The Chairman.*] And the putting of it there is, you say, quite improper?—It is quite improper to have either a watercloset or a bathroom in a ward.

2851. Do you agree with the authorities who say that the presence in the atmosphere of pathogenic germs makes them a source of danger by infection?—Yes.

2852. We have heard that the more these germs are concentrated the greater is the danger, and the more diffused they are the less becomes the danger of infection. Do you agree that in any severe operation of abdominal section or gynecological operation there is always more danger of septic poisoning?—In every surgical operation there is danger; not only in abdominal and gynecological, but in all other operations.

2853. That is the danger which Lister's processes are used to obviate?—Yes, and they have done so to a great extent.

2854. Do you think that, in the present condition of the Dunedin Hospital—assuming the state of the wards to be what you saw, of general surgical cases being congregated there, of fourteen or fifteen patients being in the room—the risks which the patients there run of septic poisoning are materially increased by the surroundings in which they are placed?—I do.

2855. Would you be surprised to hear that from time to time various surgeons who have operated in the Hospital have found even simple wounds suppurating without apparent cause?—I can quite believe it from the nature of the atmosphere.

2856. Would you be surprised to hear that careful and experienced operators, though they have taken every precaution, have occasionally found after operation that septic trouble has arisen for which they could not account in any reasonable way?—I would not be surprised.

2857. Do you think that a surgeon could perform severe operations in our Hospital under present circumstances with anything like confidence as to results?—I do not. I would not like to have a surgical case there myself.

2858. May we take it from you that there is danger from the general surroundings—that there is serious danger?—Yes.

2859. The liability at any moment to produce septic poisoning?—Yes, certainly.

2860. Suppose you heard that although, in many of the cases I have told you of, some practitioners had found septic trouble, yet, notwithstanding this, that a great many cases had gone on all right; would that in any way alter your opinion that the surroundings were unhealthy?—It would not.

2861. Is that feasible?—Of course it is. I would not expect every case to be affected.

2862. One medical gentleman has told us that you might go on for months all right, and then get a run of cases with such results?—You might. But it is unlikely that you could go on in the present state of the Hospital without meeting with bad cases, particularly in operations of any magnitude.

2863. You could not go on for long without meeting with some bad results?—Yes.

2864. We have been told that there are two different sorts of operations—those of necessity and those of expediency, and that in the latter class of cases it may often happen that the doctor may think it is desirable, though not absolutely necessary, to operate; that he is called on to decide whether or not he should operate. Do you think that in the present circumstances of the Hospital he can come to a fair conclusion?—I should come to a conclusion not to operate in the present state of the Hospital, unless in cases of emergency.

2865. You say that you would not operate under present conditions, except in cases of emergency?—I would not.

2866. That being the case, do you think that a patient has got a fair chance while the doctor's hands are tied in that manner?—They cannot.

2867. Dr. Batchelor has also stated that there are some methods of treatment which in his opinion are highly desirable, but which he cannot avail himself of in the present condition of the Hospital, because they can only be used in good sanitary arrangements; and he illustrated his argument by mentioning the treatment by electrolysis. Do you recognise that treatment?—Certainly.

2868. He says it is a very valuable treatment, but that he cannot use it here because the surroundings of our Hospital would make it dangerous to use it, as to do so the patient would run considerable risk. Do you agree with him in that respect?—I do, in the present state of the Hospital.

2869. There is another view of the case which I shall present to you. I do not know whether you are aware of it, but there is attached to the Dunedin Hospital a medical school in connection with the Otago University. Do you think, under its present conditions, that this is a proper Hospital in which the practice of medicine can be taught?—No, I do not; certainly not.