

2929. I mean operations which had septic results after operation?—I have had none whatever.

2930. We have been told by Dr. Batchelor that his experience has been of this character: in his private practice during the last seven or eight years he never had any death, though he performed about forty operations?—I do not say that we had no deaths.

2931. You are misapprehending my question. I mean deaths from septic poisoning. Dr. Batchelor had no deaths from septic poisoning in his private practice during that time, though he performed about forty operations; but in his hospital experience here he had eleven deaths that arose after operation, ten of them being accompanied by septic poisoning. Do you think, with the knowledge that Dr. Batchelor is a tolerably skilful and careful surgeon, as we have been told that he is, that that is at all consistent with proper conditions in the Hospital?—I think that it certainly corresponds with the conditions of the Hospital as I found them. I think that the patients are very apt to develop septic conditions in such an atmosphere, and in the general condition of the Hospital.

2932. *The Chairman.*] Does that confirm your opinion as to the unhygienic condition of the Hospital?—It does.

2933. *Mr. Solomon.*] Then, it would not surprise you under the state of affairs in the Hospital which you saw?—Certainly not.

2934. Another specialist in Dunedin has told us, in his private practice in Dunedin, he has never had one case of iridectomy accompanied by septic trouble, but that in the Hospital in one week two comparatively simple operations of iridectomy went wrong from septic trouble, while at the same time a severe operation which he performed outside got quite well. Do you think that the condition of the Hospital would have anything to do with that?—I do.

2935. Do you think that the performance of operations such as these in the Hospital would be fraught with danger?—Certainly I do.

2936. What has been your experience with regard to iridectomy?—I have had no cases of poisoning after an operation for iridectomy. Simple iridectomy cases without cataract we never expect to go wrong with us.

2937. They do well with you?—Yes.

2938. You do not think that they ought to go wrong in healthy surroundings?—No.

2939. But there is a liability for them to go wrong in our Hospital?—They would be liable to go wrong, but I do not say in every case.

2940. What about the temperature charts? Do they indicate that the average cases run the same course here as in Christchurch?—In medical cases it is much the same, but I observed that in the surgical cases the temperature is higher here than the average temperature in Christchurch.

2941. *The Chairman.*] But in medical cases they range about the same?—Yes.

2942. *Mr. Solomon.*] Do you know whether there are any cases in your Hospital that have been sent from Dunedin?—There are. I have one in now.

2943. Is it a severe case?—It is a very severe case indeed.

2944. Do you know whether it is a case of loving Cæsar more or Brutus less?—I cannot answer that.

2945. Would you be surprised to learn that for the last two years the death-rate in the Dunedin Hospital has been highest in New Zealand of the four chief centres of population?—I would not be surprised to hear that.

2946. So far as you know of New Zealand, is there anything in the surroundings of the districts to make the death-rates of our hospitals vary very considerably, other things being equal?—I think that Auckland ought to have the best record. I think it has a healthier site than any other hospital.

2947. *The Chairman.*] That is, the situation of the Hospital?—Yes.

2948. *Mr. Solomon.*] But I said all things being equal. Is there any reason why the death-rate should be higher or lower?—I should think that it would be higher in Dunedin than anywhere.

2949. From what cause?—The average temperature of the climate.

2950. Is the average temperature lower?—Yes.

2951. Do you think that in the present circumstances of the Dunedin Hospital we can fairly expect to get good mortality rates?—I hardly think that you can expect to have as good results as other hospitals on that account. I think myself that you are working at a great disadvantage.

2952. *The Chairman.*] Did you examine the kitchen to-day?—I did.

2953. How do the kitchen-arrangements here compare with those of Christchurch?—Unfavourably, in my opinion.

2954. In what respect?—Here it is in the main building and is underneath one of the wards. Our kitchen is entirely separate from the Hospital, with a corridor adjoining.

2955. Then, you do not think that it should be in the main building?—I do not think so.

2956. Anything else?—It is very dark.

2957. *Mr. Solomon.*] Did you notice the general management of the Hospital—its nursing system, for instance?—I had not much opportunity of noticing it. I just observed the nurses in the ward as I went in.

2958. Have you devoted any attention to what should be a fair death-rate in a hospital like ours?—I have not; but it appears to be a good deal higher than that of the other hospitals.

2959. Now, I want to ask you two formal questions: Dr. Batchelor alleges that “there are defects in the sanitary condition of the Dunedin Hospital.” Do you agree with him?—I do.

2960. In the next place, he says, “that these defects are of so serious a nature as to be a source of grave danger to the inmates, and call for immediate remedy.” Do you agree with that?—I do.

2961. *Mr. Chapman.*] I suppose your conclusion is that Dunedin Hospital is a very deadly place?—I think it is very undesirable in its present condition to have patients in it.