

centage of deaths after operations in Dunedin ; but it would be necessary to go into the matter very carefully before one could form an opinion of any value without analysing the figures. I would not venture to give a definite answer. It would be absurd to attempt to do so.

3194. Did you go into the cases referred to in this list [handed to witness] ?—I read over some of the cases.

3195. There are four cases : did you compare them with the entries in Dr. Batchelor's book?—I compared these that are marked in pencil, but did not compare the others. I may have misunderstood the book, for there were many cases in the *précis* that I could not find in it. Some cases in the book were pointed out to me, and I compared those with the ones marked with crosses in the *précis*.

3196. Did you read them in that book [Dr. Batchelor's private case-book] ?—I did.

3197. You compared these cases in the book with these in the *précis* ?—I did.

3198. Do the statements in the *précis* compare fairly with what is written in that book ?—I do not think so.

3199. In how many cases does that occur ?—In three or four cases.

3200. It is very short in the *précis*, is it not, and given in great detail in the book ?—Yes.

3201. Do you say that that *précis* does not fairly represent what is in that case-book ?—Yes. The first case is that of William M——. It is stated in the *précis* that "suppuration followed"—that is, suppuration after operation ; but it does not state suppuration already existed before the operation. In the case of G—— there is a statement that "matter formed," but there is no statement that suppuration existed before the operation. In P——'s case the statement is "leg amputated ;" "chronic blood-poisoning ensued." This appears to have been a case of strumous periostitis. There is no evidence in the case-book that chronic blood-poisoning ensued. It may be there, but I could not discover it, and I read the case from the book. I say that there is no evidence, as far as the case-book goes, of chronic blood-poisoning.

3202. Have you compared any of the other cases in the *précis* with the case-book ?—I also read S—— M——'s case, but did not make any notes concerning it. If you wish to ask me any questions about that case I shall require the book. [Case-book handed to witness.] I have evidently only read part of this case. I was shown a description of S—— M——'s case in another number of the *New Zealand Medical Journal* ; not in this one. I will read the paragraph which Mr. Chapman has marked : "To me there seem several points of unusual interest in this case : after a simple and straightforward operation, septic matter finds its way into the system by an unusual and unexpected channel. There was an entire absence of any peritoneal symptom for the first forty-eight hours, and the acute tenderness of the cervix and uterus, the pains down the front of the thighs, the pain in the back (*sacral*), and the fetid discharge from the uterus, together with the *post-mortem* appearances, leave little room for doubt but that septic metritis or endometritis was the starting-point of the disease. From the rapid onset of the symptoms, the rigour occurring within three hours of operating, would almost seem as if the removal of the ovarian tumour by its mechanical relief to the circulation allowed of the more ready absorption of septic material.

3203. *The Chairman.* Where is what you have been reading taken from ? It is from something Dr. Batchelor has written ?

3204. *Mr. Chapman.* It is from an article in the *New Zealand Medical Journal*, and is written by Dr. Batchelor. [To the witness :] Do you recognise from that extract that that case was one of blood-poisoning owing to the condition of the Hospital ?—Certainly not ; but that is a very awkward question to answer.

3205. You do not recognise it, from what I gave you to read, as a case of blood-poisoning on account of the condition of the Hospital.

*The Chairman :* You say that it is a case of blood-poisoning in the ward.

*Mr. Chapman :* So I understand ; that is Dr. Batchelor's account of it, I believe.

*Mr. Solomon :* I strongly deny that we have said that this was a case of blood-poisoning caused by the ward. I say that it might be caused by the ward.

*Mr. Chapman :* I will read a little further : [Mr. Chapman here quoted from the *New Zealand Medical Journal* for September, page 34.]—I am of opinion that a case of such rapid septicæmia would not have been directly caused by the condition of the ward, though the Hospital might be an indirect cause, being responsible to some extent at least for the presence and frequency of septic disease in the building.

3207. *Mr. Solomon :* That is all we say. That is the most that we have ever contended for. I may possibly have conveyed a wrong impression ?—I am of course going mainly upon the reports made by Dr. Batchelor which have been submitted to me. I will read this sentence : "The question necessarily arises, was the operation undertaken too soon after the confinement. The patient was delivered on 22nd June, and was operated on on 29th July, or thirty-seven days afterwards," *et seq.* (*New Zealand Medical Journal* for September, 1887, page 34.)

3208. *The Chairman.* I understand you to say there are two inconsistent accounts given of the same case ?—The statement in the *précis* is too bald ; it states that septicæmia took place, but it does not convey the fact that the woman was also in a specially receptive condition.

3209. *Mr. Chapman.* The summary does not convey that ?—No ; however, in order for septicæmia to occur something must be introduced into the system which should not gain access, and which should not be in the surgical ward of a hospital.

3210. Did that indicate that the operation was performed too soon, or that it was performed at a time when it should not have been ?—That is acknowledged in the book. It comes to be a question sometimes between two dangers—whether, for instance, a patient ought to be allowed to remain with a tumour, or whether, and if so when, an operation should be performed. This appears from the book to have been the case here ; it is a matter of time and judgment ; a case of two evils and choosing the lesser.