

found every one of them to be malignant fabrications. The man who made them was a depraved, disreputable villain, an habitual liar, without a trace of shame, and was well known to be so. He had been dismissed from the institution many times for being drunk and abusive, and making gross charges against the officers, yet so afraid were the Board and the secretary of the man's plausibility and the proneness of the public to fits of raving on this subject that he was constantly readmitted in spite of the officers. At last he practically took charge. I happened to be inside the building, with the window lifted a little way, and I heard him insult everybody, especially the officers, in the most outrageous way. He threatened what he could do to them, and defied them with insult. They were afraid, the Board were afraid, and the secretary. The position was a scandal. I wrote to the Board describing the state of affairs. The Board, as soon as I became responsible, acted at once, and now there is peace. They wrote to thank me for my letter, which relieved them of such a difficulty. Such are the experiences that have convinced me that in the existing mood of public sentiment no popularly elected body can govern these institutions, and much less can any public officer, until these incorrigibles and degenerates are restrained.

Our hospital system is also greatly abused. The trustees, everywhere except in Auckland, are lax in enforcing payment from persons who are able to pay their maintenance. In Auckland last year £3,140 was collected, in Dunedin £1,393, in Wellington £1,617, in Christchurch £524. The column of figures in the reports on this subject ought to be seriously pondered, for it is very significant. The outdoor department in some of our hospitals, and especially in Wellington, is attaining alarming proportions. I have drawn attention to it year after year, and I have personally remonstrated with members of the Board. They, too, are naturally afraid of resisting the popular demand for cheap medical treatment, and are apt to forget that they are administrators of a public charity. They say they do their best, and perhaps it would be unreasonable to expect them to resist the current of vicarious humanitarianism that runs so high in this town. Here, whenever any movement of a philanthropic kind is started, the first thing as a matter of course is to get up a deputation to wait on the Minister for a subsidy. Medical fees are so high and the hospital doctor so popular that it is difficult to refuse a permit to the hospital. I am glad to find that this year the doctors are beginning to try to check this evil. It never seems to occur to people that medical fees must be high wherever a doctor has sufficient standing to enable him to exact them. For the rest, what with friendly societies on the one hand and the hospital on the other, the pressure on the profession is very great. In all our centres of any size this pressure creates a demand for hospitals, in order that an existing doctor may be subsidised or a new one induced to settle. The usual procedure is: The doctor suggests to some of his influential friends that the district is entitled to a hospital quite as much as such-and-such a place. The local editor is enlisted, letters appear in the paper, some active and ambitious member of the local body sees possibilities in the movement. He heads a deputation to the Minister. Nobody counts the cost. I have resisted to the utmost in such cases, but always in vain. At this moment claims on claims are being urged, and all the obstruction naturally falls to me, and everybody who is interested knows the fact. If things go on as they have been doing, I see nothing for it but that the practice of medicine be taken bodily over by the Government. Certainly this is the point at which the tide of socialism can most easily break through, for the gap in the bank is a big one already.

The question is very serious, and is daily becoming more so. Ever since Lister taught the world the part that is played by the microbe and sepsis in disease, it is clear that to operate successfully in serious cases the doctor must have the fullest control of the conditions of treatment. It cannot be denied that hospitals properly constructed, drained, lighted, and ventilated, with skilled nurses and suitable appliances, offer, both to the patient and the doctor, such advantages as no private house can afford. The plea for the extension of the State's functions in this direction is therefore becoming steadily more irresistible. This is what the argument comes to. Why not in every place where a doctor can settle found at least a cottage-hospital, that we may get his services cheap; and, where one cannot yet make a living, also found a hospital to enable him to do so? What does it matter if there be no longer any prizes in the profession worth struggling for? That, they think, is no concern of theirs. There are always plenty more doctors. Little do they know that there is no such dangerous enemy of society as an unscrupulous doctor, nor one that the State ought to look after more sharply. This would be going a long way towards taking over the whole practice of medicine by the State. We are half-way there already. Has not the State control of the medical register, and can it not regulate fees far more easily than it can fix the living-wage? It can be done by a Bill, just as you can regulate the weather by fixing the barometer at "Set fair."

Still another phase of this complex question may justify a few words. Our hospitals have practically ceased to be charitable institutions. We have done our best to teach people that it is now a matter of justice, and trident justice at that. All modern hospitals must have private wards for those who can pay for them. Very good; why not? How many persons from a distance have to come to our large towns for medical treatment? How many lodgers in private houses and hotels who cannot be properly cared for except in a hospital? Are we not to make any provision for these? Admit them to the hospital, then. Are you prepared to allow the doctor to charge for operations done in the hospital a fair fee over and above all hospital charges? Are you prepared to face the consequences of this and allow hospital rooms, hospital nurses, hospital medicines, and other public appliances to be used for the doctor's private patients. If you are not, do you expect men of any standing in the then conditions of practice to give their services for nothing, or for a mere paltry salary, to persons who would, in ordinary circumstances, be their private patients outside? One of the inevitable consequences of this tendency will be to throw all our hospitals into the hands of inferior men. And then, how are you to prevent a doctor in practice and who is also attached to a hospital from foisting on it any patient from whom he has taken all he can get in fees, in the well-assured confidence that he will not be asked to pay there; or, if by chance he should be, all he need say is that he cannot pay? If it be replied