

exact nature of the infecting organism, or to trace the relationship of this case to others, with any degree of accuracy; but in this connection Mrs. Dacre's case, described in paragraph (d) below, must be seriously considered. Septic thrombosis of the pelvic veins is a form of puerperal fever (supræmia), and, although not usually regarded by medical practitioners as notifiable, is expressly included in the First Schedule to the Health Act, 1920, as a notifiable infectious disease.

(c.) **The circumstances surrounding the illness of Mrs. Doris Elsie Jones.**

The patient was admitted to the hospital on the 14th September, and was confined on the same day. The medical practitioner in charge of the case was Dr. William Norman Abbott, of Epsom, Auckland.

There was a previous history of influenza in this case, and the diagnosis throughout was pneumonia. On the 21st September the patient was removed to the General Hospital, and the case notified to the District Health Office as pneumonia. She was treated at the General Hospital for pneumonia. On the 25th September death took place. A *post-mortem* examination revealed a septic uterus, and septicæmia was returned as the cause of death. The whole history of the case and the *post-mortem* report irresistibly point to this being a case of puerperal fever (septicæmia) of the common type. It has been found impossible to ascertain definitely the exact source of infection in this case, but it is noteworthy that concurrently with Mrs. Jones's illness there were several other patients in Kelvin Hospital showing abnormal temperatures.

(d.) **The circumstances surrounding the illness of Mrs. Evelyn Maude Dacre.**

The patient was admitted to Kelvin Hospital on the 19th September, 1923, and was confined on the same day. The medical practitioner in charge of the case was Dr. Ernest Williams.

Progress after confinement was fairly satisfactory, but when ready and expecting to leave hospital on the 3rd October she showed high temperature and was ill. The consultant who was called in on the 5th strongly suspected staphylococcal septicæmia. Blood test was made, and the result, which reached Dr. Williams on the 6th, confirming the suspicion of the consultant, the patient was removed to the Mater Misericordia Hospital, where she died on the 10th October, the cause being certified as puerperal septicæmia.

The organism (staphylococcus) found in this case was different from the organism (streptococcus) in Mrs. Jones's case, which conclusively proves that Mrs. Dacre was not infected from Mrs. Jones; but in view of the fact that Mrs. Dacre was confined in the same room Mrs. Morison had occupied, and in which she had died about six days previously, the possibility that Mrs. Dacre may have been infected from Mrs. Morison cannot be altogether excluded.

(e.) **The circumstances surrounding the illness of Mrs. Emma Caroline Ada Delamore.**

This patient was admitted to the hospital on the 4th November, and was confined on that day.

Dr. Ernest Williams had been engaged several months previously to attend her confinement, and had seen her more than once. He, however, left the Dominion before she entered the hospital, after he had made arrangements with Dr. W. M. McCormick, of Remuera, an experienced obstetrician of many years' standing, to take over his cases, including this one. No communication as to the change in her medical attendant was communicated to the patient or her mother, Mrs. Rhodes, and both were surprised to find Dr. McCormick in charge of the case after the confinement had taken place.

On the 6th November the patient became ill, with sudden rise of temperature, and this condition continued. Dr. Bull was called in consultation on the 8th. Dr. Tracy Inglis was called in consultation on the 9th, and diagnosed puerperal septicæmia. From this date special trained nurses were procured, and the Matron and the Kelvin staff relinquished direct charge of the case. Bacteriological examination subsequently revealed streptococcus hæmolyticus, an organism of the type found in Mrs. Jones's case. Mrs. Delamore died on the 19th November of puerperal fever (septicæmia).