

1259. You had growing suspicions beforehand, but yet you operated. Had you such suspicions in Sophia M——'s case?—Yes; I did not like the Hospital then any more than I do now.

1260. Will you give us the date?—I have told you I had suspicions from the first day I went to the Hospital, and they have been growing ever since.

1261. Can you point to any minute or to any complaint confirming these suspicions?—I can point to a lot of complaints.

1262. Can you point to any note or communication to the Trustees. Did you even hint it to them?—We thought it to be of the utmost importance. You do not seem to grasp the point, Mr. Chapman.

1263. Was the nursing more important then than subsequently, more important than the condition of the Hospital?—You do not understand it: it is even a difficult point for medical men to decide on.

1264. I ask you again, can you point to any complaint to the Trustees on this subject?—No.

1265. Of course you know what are the precautions recommended by Lawson Tait in these cases (I refer you to page 128)?—Yes.

1266. Now, in all these cases, did you suspect beforehand that you were going to have trouble?—What cases are you speaking of.

1267. Your own cases: the operations you had in the Hospital during the last four years, we will say?—I go to every operation with fear and trembling, because I do not know what the result will be.

1268. You assert you went to every operation with fear and trembling, not knowing what the results might be?—Yes.

1269. Did you communicate these fears to your patients?—We do not, as a rule; we are very careful what we say to our patients in the Hospital.

1270. You give them some idea of the dangers they have to undergo?—We do.

1271. Take the case of an emergency operation. Would you give the patient a pretty good idea of what risks he or she had to run?—Of course, we do not try to frighten our patients.

1272. You let their relatives and friends know of these risks, and let them have some voice in the matter?—We do.

1273. Did you ever communicate the fact to any of your patients that there was danger of blood-poisoning occurring in the Hospital?—I have told my patients so. And I have told some of them that they should not go into the Hospital, because they were better in their own homes. But, as a rule, they have not the conveniences in their homes, and are unable to pay for nurses. A great many factors come in.

1274. Do you say distinctly that you have told patients in the Hospital that they run a risk there from blood-poisoning?—I did not say that they would absolutely get blood-poisoning, but I told them that it would be better to have the operations done in their own homes. I have said that several times.

1275. We may expect to find presently, I suppose, that in surgical cases the results in the Dunedin Hospital will compare very badly with those of other hospitals in the colony?—I do not know I am sure. You may have very good and some bad surgeons on a staff.

1276. But I mean apart altogether from the abilities of the surgeons. I suppose that there are able surgeons in other parts of the colony?—I believe so.

1277. May we expect to find that generally the results of surgical cases in the Dunedin Hospital will compare unfavourably with those of the other large hospitals in the colony?—I should certainly expect so.

1278. *The Chairman.*] Then you would expect them to be less favourable here?—Yes.

1279. *Mr. Chapman.*] The Wellington Hospital is the model hospital of the colony, is it not?—Yes, I should say so.

1280. We may expect to find, I suppose, that in the Wellington Hospital the surgical cases have very much better results than can be obtained in Dunedin Hospital?—I should certainly think so.

1281. Are they not very much better?—I will not go too far, but I should certainly expect them to be better.

1282. The Dunedin Hospital has been a subject of condemnation for years, has it not?—And rightly so.

1283. In your own mind you say it has been, but you have not so expressed it?—I have expressed myself very strongly on the subject before now.

1284. Have you investigated the subject with reference to other hospitals?—No, I have not.

1285. The question is one of degree—whether results are good or bad?—No. I have investigated it by my own results. When I know that people have died who ought not to have died, and taking that in connection with the known bad hygienic condition of the Hospital, I say that they stand in the relation of cause and effect.

1286. Now, as to the matter of statistics: Do you admit that these you have produced have no real value?—No. A certain number go in, a certain number come out, and a certain number go out dead. These are facts. But when you come to take statistics to pieces you can make them prove almost anything you like.

1287. There may be some reason for that. Of itself the mere fact that a large proportion go out of a hospital dead is of no value, without an examination of the cases?—No. I say that the condition of the Auckland Hospital should be inquired into. It has a death rate which ought not to exist. The attention of the Inspector-General should have been drawn to it before.

1288. The death-rate in Wellington would be increased if the Wellington Hospital were allowed to be used as a poorhouse?—I do not know anything about that.

1289. Do you not know about its death-rate?—I never knew any reason why it should be used as a poorhouse. If you tell me that it is used as a poorhouse I will accept your statement, but that