surgical ward. I think it was No. 1. He got erysipelas there. He was then removed to the erysipelas ward—No. 9: that is the ward for infectious diseases. It is at the back of the operating-room. The erysipelas was cured, and he was again removed into No. 4.

4226. *The Chairman.*] Were there other cases in No. 4?—Yes; he was cured of his erysipelas then; but he gradually sank and died.

4227. How long had he been in the Hospital before operation?—A week.

4228. What did he die from? What was the cause of death?—He died of exhaustion.

4229. From what?—From the phthisical or tubercular condition he was in; he had a complication of diseases.

4230. But you say the erysipelas was quite cured?—Yes; it was a factor in reducing his strength.

4231. *Mr. Chapman.*] When he was taken in No. 4, was there erysipelas in it then?—No. I see the case is entered in the consultation-book in Dr. Copland's handwriting: "He developed erysipelas after an operation."

4232. In what condition was he when admitted?—He was almost in a hopeless state.

4233. How long was he in altogether?—He might have been in about six weeks.

4234. An operation was performed on the 15th July, according to the consultation-book?—Another death I had before that was an old man seventy-one years of age. He was usually called Mackie M——.

4235. Was there an operation there?—No. I had him last year in May, when he was suffering from chronic heart-disease.

4236. *The Chairman.*] Was that early in the year?—No; it was in the winter time. He also had chronic bronchitis, and seemed to be in a very weak condition, but he recovered, and we sent him out pretty brisk.

4237. *Mr. Chapman.*] How long was he in?—Two months last year, if not longer. He came back either in August or at the end of July.

4238. After a short time out?—He was out very nearly a year. On this occasion he ought to have come back at the beginning of the winter instead of at the end of it. We found his heart-disease had advanced, but he was in the same condition of chronic bronchitis, and he died in a few days.

4239. Of what?—Heart-disease and bronchitis combined.

4240. Which was the principal?—I would not distinguish between the two factors; either was sufficient to account for death in the case of a man seventy-one years of age. In mentioning these cases I want to show you the class of cases which die in our Hospital. You cannot expect anything else, because they are hopeless cases when they come in; out of five cases there were two bad chronic cases which came to us from the Benevolent Institution to die.

4241. Chronic cases of what?—One was of heart-disease and the other was exhaustion. There might have been some internal disease, like cancer, but we did not make an examination. They were old patients of mine, and I knew their condition.

4242. Have you previously had moribund cases sent from the Benevolent Institution in the same way?—I aways attended them out there, and never sent them into the Hospital unless there was some surgical operation to be done; but at one time we had lots of cases of that kind, before they removed incurables from the Hospital to the Benevolent Asylum. These are cases—every one of them, with the exception of that young man—which would not be admitted into the hospitals at Home. Hospitals are places for curing people, not places where people are sent to die in: therefore, I say, if allowance is made for the number of deaths of that kind, the mortality in the Dunedin Hospital, according to my idea, is a very low one.

4243. And that, notwithstanding the defects in ventilation, floors, and other things?—Yes.

4244. But there are defects?—Yes; but I have not seen any reasonable proof that these defects have produced disease. Judging by the results in my own cases, I say that it is impossible that such a thing could have occurred. Had it been the case, I should not have had such good results.

4245. Have you heard of the case of the Norwich Infirmary?—Yes; that is an institution that was supposed to be in such a bad hygienic condition that it was proposed to pull it down for the purpose of building a new hospital.

4246. It was supposed to be insanitary?—Yes. The surgeon of that hospital is one of the best known and ablest men in all England—W. Cadge—a man of most distinguished ability. They had some reason for saying the hospital was in an insanitary condition, nearly every surgical operation having developed septicæmia, pyæmia, or something similar; and it was admitted that there were grave structural defects in the building, as there are in all old hospitals.

4247. Were you there during the time of the trouble?—No. I merely bring that forward as an illustration to show that there may be grave structural defects in a hospital, but that is no reason for pulling it down. A change was made in the management at Norwich, and a new master and matron were appointed, and strict attention was paid to the details of cleanliness, with the result that the disease disappeared entirely. Norwich Hospital to-day stands where it was, and is doing good work, showing that we should not ascribe this kind of mischief so much to structural defects in the building as to the want of cleanliness.

4248. Can you give the Commissioners a reference to where this is refuted?—You will find it discussed in the *Lancet* and the *British Medical Journal.*

4249. Did you derive your information from any original source?—No; from my reading of medical journals. At all events, it is the fact that Norwich Hospital stands where it was, and is doing excellent work.

4250. *The Chairman.*] Do you know what had to do with that?—The change of managemen only.

4251. Did they change Dr. Cadge too?—No.