4722. *Mr. Solomon.*] In the first place, supposing we cannot get a new Hospital, do you not think it would be far better to take up the floors, and make walls and ceilings correspond with what they ought to be; to put in a proper system of ventilation, and instead of having about fifteen beds in a ward have about eleven, and use the other two wards?—No. I do not think anything I know of would be the equivalent of using all the wards in the Hospital.

4723. Point out another feature you look on, not with pride but with satisfaction, in connection with its sanitary condition?—No others strike me.

4724. Point out any other thing in connection with the sanitary condition of the Hospital of which you must not say "That is wrong"?—Well, the drainage, so far as I am capable of examining it, is all right.

4725. Dr. King, whom you acknowledge as the most competent authority, tells us it is all wrong?—I do not think so. I went over it with him, and said he was satisfied with it.

4726. Well, that is different to what he said here?—There is one particular point with which fault is to be found, and that is that all the traps and drains are not visible in all their extent.

4727. And not ventilated?—Some of them are.

4728. Dr. King said that as regarded the drainage he was not satisfied with it?—That is not saying it was bad. If he can only say as much, that statement about it is good, because he is a particularly captious man.

4729. This is what Dr. King says: "The freshwater gutters of the roof opened into the soil-pipes. The bath-wastes, the basin-wastes, and sinks opened directly into the soil-pipes. None of these things should exist. The special danger was that in the case of heavy rain the 4in. pipe would become full of water, and this would exercise an aspirating power on all the traps leading into the soil-pipes, and would infallibly unseal the weakest trap, if not others, giving a direct access of foul air, not into the closet necessarily, but actually into the ward itself"?—We made experiments to see whether these traps would be unsealed, and they would not; therefore his infallibility is theory.

4730. *The Chairman.*] He says it is impossible to test the thing unless we had a heavy shower of rain?—Just so.

4731. *Mr. Solomon.*] Dr. King says about the floors: "They were exceedingly unsatisfactory. He had never seen such bad floors in any hospital, so far as he was aware." Do you agree with that?—I suppose the same thing applies to all wards.

4732. Do you agree?—I do not see what is the point in it. I want to know by what reason he has arrived at his conclusion, and by what mental process he has arrived at that opinion.

4733. I cannot tell you?—But I must know it.

4734. He says it is specially favourable to the reception of germs?—I do not think there is any necessity for taking that matter up. Several things might be done about it.

4735. Now, let us see what he says about ventilation. He says that No. 7 ward would not hold more than eight patients under present circumstances. He says: "With regard to inlet of air, there is not sufficient inlet in the whole ward for one person. He considered the pavilion system was certainly preferable to the block system, if it were intended to build a hospital. He thought that No. 7 ward would not hold more than eight patients under present circumstances; even by making use of the windows, and that was very objectionable. If sixteen persons were in the ward, the risk they would run would certainly be material." Do you agree with that?—Yes.

4736. So that the risks a patient runs under present circumstances are material?—Yes; if the wards contain sixteen patients the risks would be material.

4737. On the very day Mrs. S—— was operated on there were sixteen patients in the ward. Would the patients under those circumstances run a material risk?—What of?

4738. Septic poisoning?—No.

4739. What of, then?—If cases of erysipelas or septic poisoning arose in the ward the whole of the rest of the patients would suffer.

4740. In No. 7 there was a case of septic disease, was there not?—I should say of pyæmia.

4741. Well, with such a case in No. 7 ward, from which septic germs were being given off—with sixteen patients in the ward when there should have been only eight, and with the present system of ventilation would patients with open wounds run any danger of septic poisoning?—What do you mean by septic poisoning?

4742. Well, call it pyæmia, if you like. Would you be surprised to find that a patient who had been operated on for Emmet had got on very well, but that sixteen days after the operation she had developed symptoms of septicæmia?—Yes.

4743. Supposing in your private practice a patient was operated on for Emmet, and after getting better for sixteen days developed a high temperature, what would you say?—I understand this particular patient had a high temperature before operation.

4744. I am speaking of Mrs. P—— now. Here is a woman who had almost wholly recovered, and about sixteen days after the operation—just when she was about to be removed—she developed septic symptoms, and even now she is in a bad state. If that happened to you in your private practice, would you not be suspicious of unhygienic conditions?—Yes, undoubtedly so; but I do not imagine, as the patient is still living, that she was suffering from septicæmia.

4745. Why?—Because she would be dead.

4746. Do they all die?—They seem to all die.

4747. Do they never recover?—I do not know of one recovering.

4748. Can you give me an authority for that statement?—The books are full of such statements.

4749. Will you show me a book that makes that statement?—I could show you plenty.

4750. Very well. By-the-way, do you draw a distinction between pyæmia and septicæmia?—Yes.