

4800. *Mr. White.*] Have you studied pathology?—Yes; particularly at Edinburgh, at Rostock, at Montpellier, and at Strasburg.

4801. Kindly read the paragraph about Mrs. P——'s case. [Witness read from case-book, p. 62.] Is it surprising that bad results should have followed?—I do not see anything from that paragraph to lead me to think that bad results should follow.

4802. *The Chairman.*] Do you say it is surprising that bad results should follow?—I see no reason why bad results should follow Emmet's operation.

4803. *Mr. White.*] She was in the ward after Mrs. S——, and was placed between two septic cases—Mrs. P—— and Agnes B———cases with septic charts, as we may call them?—That is not correct. Mrs. P—— always had a septic chart. She was in the ward on the 26th, and her temperature ran up to 102°.

4804. You say that Mrs. P—— was in the ward on the 26th, and that her temperature ran up to 102°. Now, Mrs. S——'s death occurred on the 22nd from septicæmia, and this woman (Mrs. P——) was in the ward at the same time.

*Mr. Solomon:* But she did not develop septic symptoms until the 29th.

4805. *Mr. White.*] Was the fact of Mrs. S—— being in there, admittedly septic, sufficient to account for Mrs. P——'s trouble?—I do not know what the condition of Mrs. P—— was, and I cannot give an opinion on incomplete *précis*.

4806. Dr. Stenhouse was asked a question about the last meeting of the medical staff, when a suggestion was made to remove certain patients, and it was suggested that that showed there was a division of opinion on the staff into a University and an anti-University party.

*Mr. Solomon:* I object to the question.

*Mr. White:* Very well, I will ask the Commissioners to put it to the witness. This is the minute: "Dr. Maunsell moved, and Dr. Ferguson seconded, that Dr. Batchelor's patients be transferred to a separate ward. Dr. Jeffcoat proposed and Dr. Gordon Macdonald seconded, that all cases be removed from No. 7 ward, septic or suspicious cases being separated from those to which no suspicion attaches, and that the ward be thoroughly cleansed. Carried—Jeffcoat, Coughtrey, Macdonald, and Stenhouse voting in favour of the amendment." It was suggested that that showed that the staff was divided, and that this was refused because it was advanced by Dr. Batchelor, as a member of the University party, as it was called.

4807. *The Chairman.*] Dr. Batchelor proposed that the gynecological cases should be removed?—Yes.

4808. *Mr. White.*] Then, as an amendment, it was proposed by yourself that the whole ward should be emptied, and the septic cases separated from the others?—Yes.

4809. In doing so, what actuated you?—I simply thought my suggestion was by far the best, in that it directed that all the septic cases—some of which were under the care of other surgeons besides Dr. Batchelor—should be separated from the others that were comparatively well. It would have been manifestly unfair to have left some of the cases when others were taken away. I do not recognise that septicæmia in a gynecological case is a whit more important than septicæmia in an ordinary surgical case. All lives are of equal value.

4810. It has been suggested that your motion was actuated by a desire to thwart the movement to get a separate ward for gynecological cases. Is that so?—No; it never entered my head in the slightest degree, and to say I am on the side of the anti-University party, is a piece of gratuitous impudence.

4811. Do you know of the existence of such a party on the staff?—No.

4812. It has been suggested that there is such, and that a question does not receive fair attention and is not treated on its merits by the staff on that account?—I believe there is a considerable amount of party feeling, but I should certainly be saying very wide of what I think if I said it was due to a University or anti-University feeling. For myself, I have never supported either one or the other.

4813. You received a letter from the Hospital Trustees?—Yes.

4814. And this is the position you take up?—Yes; I came to give evidence before the Commission because I thought there were possibly some points which I might elucidate.

4815. *The Chairman.*] Do you think it desirable, especially in the treatment of surgical cases, that there should be means of providing an ample volume of air at an equable temperature?—Yes.

4816. There is no such provision in the Dunedin Hospital?—No.

4817. Would it be possible so to modify the existing building as to make that possible?—I think the cost would be very considerable.

4818. You think it very necessary?—Yes.

4819. When you hear of the Christchurch Hospital being able to maintain its wards at a stated temperature of 64° day and night throughout the whole of the winter, do you not think that it is a very advisable thing?—Are they able to do that?

4820. Yes, all through the winter they do it.—Well, of course. I do not know what means they take.

4821. You think it is advisable?—Yes.

4822. Would you attribute the success there to such a temperature?—Well, if the ventilation and all other conditions—*e.g.*, supervision—were so perfect that that could be maintained, there is little reason to wonder why they have such good results.

4823. Do you think it is possible to modify the Dunedin Hospital to bring about a state of things like that? That is, to so arrange with traps that the temperature should not be allowed to rise or fall unduly. But perhaps you have not considered the matter?—No, I have not to any extent. It can either be done by heating the ventilating air, or by having a very widely distributed system of heating apparatus throughout the building.