would probably be the last year in which that condition of things existed in the Dunedin Hospital. I know that there was a large number of chronic cases.

5097. *Mr. White.*] I may tell you that the Trustees immediately got rid of twelve or thirteen chronics?—Yes. I knew there was a large number of them.

5098. *The Chairman.*] Are you aware whether similar action was taken in the other hospitals?—Yes, I believe so.

5099. Do you know in what year it was done?—I do not. There is another point which I might call attention to, and that is in regard to our lower death-rate. Although Otago has a lower death-rate than many other parts of New Zealand, and although the colony has a lower death-rate than England, you must remember that the higher death-rate at Home tells mainly on children under twelve months—in other words, that the high death-rate in the Old Country expresses itself mainly in a high infant mortality.

5100. You are speaking now of the difference of infant life here and at Home?—Yes; there is a large difference. But the difference between our adult population's death-rate and that of the adult population at Home is not so great as would appear by looking at the general statistics. Therefore, taking all things into consideration, I consider that our Dunedin and our New Zealand statistics are distinctly good.

5101. *Mr. White.*] We have been told to take the number of persons who enter a hospital, the number who die, and the number who go out cured. Is that the correct way of ascertaining a death-rate?—No; there are many things, as I have just indicated, that must be taken into consideration. I have merely dipped into the subject, but it has shown me what a very complicated business it is to arrive at the truth about statistics. You can only arrive at the truth about statistics by subjecting them to the most careful analysis.

5102. Then you are hardly prepared to go the length of Mr. Solomon, who, in his opening address, said: "These figures do not seem very terrible, but when we consider that the hospitals at Wellington and Christchurch are new, while ours is admittedly old and defective, and, further, that an average of about one thousand patients per annum are treated, an unpleasant conviction must be forced on the minds of everyone that there is, to say the least, a possibility that fifty or sixty precious lives have been lost in our Hospital during the past two years which, under more favourable conditions, might have been saved"?—I do not agree with that.

5103. May that be said to be an exaggeration?—According to my judgment it is a misreading of the statistics.

5104. There is one matter which I should like to draw your attention to, and it is in regard to the Medical School. Dr. DeRenzi said, in answer to a question by Mr. Solomon, that the students of our Medical School were not likely to prove a credit to themselves or to our Hospital, which was not a proper place for the teaching of medicine. I do not know that he said it in these words, but it was to that effect: at all events he had formed a very sweeping opinion on the subject; in fact, according to him, there is not a redeeming feature in the institution. I should like you to have an opportunity of answering that. Do you think that that is fair comment to make on the Hospital?

Mr. Solomon: I do not think it is fair to ask the witness a question like that, without giving something like what Dr. DeRenzi stated. What he did say was: "Under the circumstances he did not think that the Medical School, with its present surroundings, was a proper place in which to teach the practice of medicine. He did not think that students turned out here would be likely to prove a credit to themselves or to their school. He thought that special care should be taken in the details of a hospital, when it had attached to it a medical school."

Witness: I should like to express an opinion on that. In the first place I should like to say that I understand that a medical school requires that the hospital to which it is attached shall be well appointed; and I do not know of anything being required here that would not be in existence in any well-appointed hospital. I am perfectly prepared to state that as a very definite opinion. In the next place, I wish to state equally emphatically that the Dunedin Hospital is better appointed and better fitted up, hygienically and in every way, for the teaching of medicine than any hospital in England or Scotland was thirty years ago, where some of the best surgical and medical work in the world has been done. In justice to our graduates I should like to say this: that the men who have gone from our Medical School to the degree of M.D. in the New Zealand University are, in my opinion, better prepared for the practice of their profession than the average student who leaves the London or Scotch school.

5105. What is your reason for saying that?—The reason, in my opinion, is that they have more culture and education than the average London student gets, and they have more practical experience than the average Edinburgh student gets.

5106. *The Chairman.*] You mean that, though the clinical teaching is less, the student gains more from the culture?—The course of lectures is very much the same, but he gains more from the culture; in fact, he gets a wider education, because, in my opinion, the largest part of a man's education now-a-days comes from books. There is less clinical teaching here, but the students in large cities at Home have nothing like the dressing and handling they get here. It is impossible for them to get it in the large centres at Home.

5107. During what proportion of their time in England do the students act as dressers?—Three months as clerks and dressers.

5108. What is it here?—I should say about twelve months.

5109. Do all the students at Home, before they complete their education, perform the duties of clinical clerks?—Not as a rule. Formerly a man could go through a course without clinical dressing, but the rule now is three months in some hospitals and six months in others before he can get his certificate. They make it compulsory at Home. While I say this, I should be glad to see all our students go Home, because there they would obtain a larger area of practice. But I think