38. There is nothing improbable in a man recovering from the effects of chloroform being in a dazed condition and making wild statements?—No. A patient may be dazed for days after chloroform.

39. *Mr. Robertson.*] In regard to epilepsy, there is a statement here to the effect that Johnston had been an epileptic subject since childhood?—I can find no evidence at all to support that statement.

40. If that had been the case would the signs of it not have been quite visible?—He could not have had minor epilepsy all that time. If he had minor epilepsy in childhood he must have had major epilepsy later on, and that would be apparent to any one.

41. Though the doctor who made out the certificate stated that he had epilepsy since childhood?—I think the statement is that he had epilepsy in childhood but not since.

42. If that had been true would you say the signs would be quite visible?—If he had had it since childhood the signs would be quite visible.

43. But the question is of his having it in childhood?—It would have been visible then, but it might show no evidence subsequently.

44. Now, in your opinion, was his condition such on the 14th December as to justify his being put under restraint or control?—Well, I am not supposed to know what his condition was on the 14th. He was committed to me on the 15th, but you do get cases of ephemeral mania where a man might be insane one day and sane the next.

45. Your observation dates from the 15th onwards: would it lead you to think that his condition on the 14th would be such as to lead you to believe that he should have been put under restraint?—No.

46. In addition to the shooting affair at Waihi, when he was shot through the knee, he met with an accident in the mine some little time previously and it was hushed up—there was an explosion of gelignite in which he was injured. Taking those two facts together, and the worry and a certain amount of anxiety on account of the strike and his position in connection with the strike, would that account for a depressed condition mentally?—Unquestionably. I attributed his condition to the worry he had gone through prior to his committal.

47. Was his physical condition low at the time?—Not unusually low, no.

48. Taking those facts together, if he on going to the police-station on an ordinary errand had been detained by the police, and discovered that it was intended if possible to commit him to a mental hospital, do you think that would account for the condition of emotionalism and his being easily given to tears as stated in the certificate?—Yes; I know as a matter of fact that that did occur in Johnston's case. Getting into the police's hands worried him considerably, because he thought he was going to be brought up on a charge of shooting his wife previously. He thought that once he got there he would be there for life.

49. Do you think the circumstances of his detention there brought about his condition?—His arrest brought about the condition.

50. I mean his arrest and detention in the police-station?—I would not say that; I think his arrest was the main thing.

51. On what evidence manifest during the examination could the doctor have said he was of suicidal tendency? From your observation of the case would there be any evidence observable by the doctor?—Well, there is nothing in the medical certificates to show he was suicidal, and afterwards I saw nothing to justify a suicidal diagnosis.

52. In regard to his making a statement while under chloroform, would it constitute a gross breach of professional etiquette to disclose any statements made by a patient under chloroform?—I should say so, yes.

53. In regard to making out a certificate, a medical man usually makes it out under three headings—first, his statement of the facts indicating insanity observed by examination; second, the facts observed by the medical man prior to that; and, third, the facts communicated to him by others. The first of those is regarded as the most important?—It is the only one of any consequence at all—the facts observed by the medical man himself. The rest is only hearsay and may amount to nothing.

54. Would you say that any medical man would be justified in giving a certificate of insanity based on the facts observed prior to the date of the examination and the facts communicated to him by others?—No. He is not justified in giving any certificate except on the facts observed by himself at the time of the examination.

55. Is it usual or would it be right for a police constable to arrest a man and then, without making application to a Magistrate, to call in a medical man himself for the purposes of examination?—No.

56. The usual and correct procedure would be to make the application first to the Magistrate?—Yes.

57. And then to call in the medical man?—Yes.

58. And if the police called in a medical man themselves without reference to a Magistrate they would be taking the wrong procedure?—That is my opinion.

59. You would consider under certain circumstances that if such a procedure became common it might be dangerous so far as the liberty of the public in general are concerned?—Yes. I think the police have no right at all to call in a medical man to examine a person as to his mental state. In the case of a man suffering from some physical disability they could do so.

60. If it was a question of committing a man to a mental hospital?—They have no right to call in a medical man in such a case. I am not sure whether it is different in the case of Justices of the Peace.

61. Section 130 of the Mental Defectives Act, 1911, provides for a reception order being issued by two J.P.s when there is a statement to the effect that to the best of their knowledge and belief there was no Magistrate within ten miles?—Yes, that statement was made.