Did those include the pneumonic cases ?—Two of them were pneumonic. I have a distinct recollection of those two chest cases.

Were there only two out of that 154 that showed pneumonic symptoms ?—No ; all of those in hospital showed pneumonic symptoms.

What was the general nature of the complaint they suffered from ?—I should like to differentiate between the general cases and the severer cases.

How many do you class as ordinary cases out of those 230 ?—Roughly, 200.

Then, there were thirty which might be classed as severe cases ?—Well, yes, if you are going to divide them into two classes only. Some of those cases were severe, and some dangerous.

How many would you class as dangerous ?—The two I have referred to, and, if my memory serves me, three others. But all those thirty undoubtedly showed early pneumonic symptoms, which seemed to develop no further, and cleared up.

Will you describe what were the symptoms in the severe cases ?—High temperature ; hard, harsh, dry skin ; breath-sounds varied ; dirty tongue ; and symptoms of general malaise and out of sorts ; shortness of breath ; increased respiration and increased pulse.

Pains in the head ?—Well, the pains were general. I think every patient who developed the trouble suffered general pain. I was very particular to observe the patients carefully, especially in reference to pain in the neck, the reason being that I had not lost sight of the fact that there might possibly be some cerebro-spinal meningitis ; but of all the cases I examined I did not see a case even approaching mild symptoms of that disease. It was pure influenza, which in the severer cases developed into pneumonia.

Were there any cases of bleeding there ?—I do not remember one in that epidemic. There may have been, but I may say I had no assistance of any kind.

Would you regard the disease as you witnessed it as infectious ?—I would say, highly infectious.

Were the severe cases—the twenty or thirty of them—isolated ?—Yes ; every case was isolated—every case showing a temperature of over 100.

He described the isolation, and says,—

The Maoris were very good, and never attempted to break the isolation. . . They were only allowed to leave the huts to obey the necessary calls of nature, and I think they carried out their instructions. All these cases seemed to indicate a comparatively mild stage of influenza, the ordinary type, with some pneumonic complications, but to fall short of the "epidemic influenza."

The witness then speaks of a second and severer attack which began about the 29th October, as to which he says in answer to a question :—

So that the second attack was more general, and the cases were more virulent ?—Absolutely ; and the second attack was more acute and more severe at the onset. The early symptoms were about the same, but they rapidly became more severe until we had that large number. All the soldiers in camp were Maoris, Rarotongans, and Gilbert-Islanders. They were kept together and strictly isolated.

We do not think that it has been shown that the early attack was more than the ordinary influenza with pneumonic complications, which perhaps may be accounted for by the susceptibility of this class of people to suffer from pulmonary complaints. The date of the second and virulent attack makes it inapplicable to the incidents attendant on the question of the "Niagara."

There must be considered the possibility of the conveyance of infection by soldiers and others conveyed by vessels known to have arrived at Auckland about the same period as the "Niagara." This, of course, is entirely conjectural.

Findings on Clauses (1) and (3).

On the evidence before us we find, in answer to paragraph (1) in the order of reference,—

(*a.*) That the cause of the introduction of the recent epidemic of influenza in New Zealand was the conveyance by sea of the infective element of the "epidemic influenza" lately prevalent in Europe, Great Britain, South Africa, and America.

(*b.*) That the extension of the epidemic from its first appearance in Auckland was largely the result of a general disregard of precautionary measures in the initial stages, due to want of knowledge regarding the nature of the disease. The infection was largely spread by the congregation of large crowds of people in the various centres in connection with the Armistice celebrations, race meetings, the "Carnival Week" in Christchurch, (which large numbers of visitors from all parts of the Dominion attended), and the fact that no restriction was placed upon the movements of the people in travelling, even when they had individually been in contact with infected persons.