

It has been insisted that, were it to be compulsory for the doctor to notify the police on the strength of information obtained in his professional capacity, patients would refrain from obtaining the necessary medical help under these circumstances, thus accentuating the problem of deaths from abortion rather than limiting it.

It has been stated that already in one centre a disinclination to enter hospital has been expressed by patients because they feared that the police would be informed.

It is agreed, however, that the doctor should attempt to persuade the patient, especially if her condition is serious, to make a statement to the police.

The actual legal position in New Zealand was made quite clear by the law officer of the Crown when asked by the New Zealand Obstetrical Society in 1932 for an opinion.

This opinion, as published in the *New Zealand Medical Journal* (Obstetrical Section), 29th October, 1932, was as follows:—

“A doctor is under no legal obligation to inform the police as to the cause of the illness of a person which has been due to an illegal operation, either in a case where the patient recovers or in a case where the patient dies. He is, of course, under an obligation to insert in the certificate of death which he furnishes under the Births and Deaths Registration Act, 1924, the cause of death, both primary and secondary. In that certificate, where the death was the consequence of an illegal operation, he should insert the nature of the operation as the primary cause of death. He need not, of course, describe it as an illegal operation, but he would describe the type of operation and the reason why such operation was the primary cause of death—e.g., owing to incompetence or ignorance, if that be the case.

“In giving this ruling I am, of course, referring merely to the legal obligation—i.e., the duties imposed according to law. Speaking generally, there is a moral duty on every person having knowledge of a serious crime which is an offence against morality as well as against law, to assist the police as far as possible in its detection and suppression. The confidence of a patient may be a legitimate ground for excluding that duty in some, or even in most, of the cases of this kind. But no doubt there are certain cases where the duty is clear. Instances are the case of a young and inexperienced woman who has reluctantly submitted to the operation at the hands of a person who is known as a practised abortionist, or where the operation has been done by violence and against the will of the subject. These, however, are questions of morality upon which varying opinions may be held, and upon which I do not desire to be taken as expressing a final opinion.”

This legal opinion has not been challenged, though it has been criticised.

Although the Committee appreciates the difficulties under which the police are working, the evidence of other witnesses has led them to agree that any extension in the direction of compulsory notification to the police before death, and against the patient's wish, is open to serious objections and is therefore not advisable.

Regarding the second issue, there is general agreement that there is a duty on the doctor to assist the police, and that this should be done by withholding a certificate of death and informing the Coroner.

The position has been more clearly defined as a result of a recent amendment to section 41 of the Births and Deaths Registration Act, as contained in section 12 of the Statutes Amendment Act, 1936:—

“12. (1) On the death of any person who has been attended during his last illness by a registered medical practitioner, that practitioner shall forthwith sign and deliver to the Registrar of the district in which the death occurred a certificate, on the printed form to be supplied for that purpose by the Registrar-General, stating to the best of his knowledge and belief the causes of death, both primary and secondary, the duration of the last illness of the deceased, the date on which he last saw the deceased alive, and such other particulars as may be required by the Registrar-General, and the particulars stated therein shall be entered in the register together with the name of the certifying medical practitioner.

“(2) The medical practitioner shall at the same time sign and deliver to the undertaker or other person having charge of the burial a notice on the printed form to be supplied for that purpose by the Registrar-General to the effect that he has furnished a certificate under the last preceding subsection to the Registrar.

“(3) In any case where, in the opinion of the medical practitioner, the death has occurred under any circumstances of suspicion, the practitioner shall forthwith report the case to the Coroner.