

CREMATION COMMITTEE.

NOTES OF EVIDENCE.

The following are condensed notes of the evidence taken by the Committee. They have in each case been revised by the witness. At Dr. Stevenson's request certain portions of his evidence relating to cases now sub judice, and other confidential matters, have been omitted.

FIRST DAY.

24th October 1902.

PRESENT :

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER (Secretary).

Sir HENRY THOMPSON, Bart., F.R.C.S., called and Examined.

Sir H.
Thompson,
Bart., F.R.C.S.

24 Oct. 1902.

1. (Chairman.) Sir Henry Thompson, you are President of the Cremation Society of England?—Yes.

1*. And, without going into details, we may say that for the last 28 years you have had more to do with the introduction of cremation into England than anyone else?—Yes.

2. You have written much on the subject. The Committee has before it your book on "Modern Cremation," and an article in the new "Encyclopædia Britannica." You also gave evidence before the Select Committee of the House of Commons on Death Certification, whose report we have?—Yes.

3. You know that the Cremation Act recently received the Royal Assent?—Yes.

3*. Do you know the Act pretty well?—I have had it before me.

4. You know that Section 7 of that Act provides for regulations on certain points being made by the Secretary of State? The reference to this Committee is to draft regulations for the consideration of the Secretary of State in exercising his powers under that section; the main point is the question of the conditions precedent to cremation, such as the certificates to be required?—The great point is the certification. I drew up a series of questions with great care, to be answered and signed by two medical men. If the answers are not logical, we send for an explanation, and if that is not satisfactory decline to cremate.

5. You require the two medical certificates in every case?—Yes.

6. The first certificate is given by the actual attendant?—Yes.

7. And if there was no medical attendance—a case of sudden death—you would insist on a post-mortem?—We have no objection to a skilled pathologist, but we prefer a coroner's inquest in such cases.

8. Generally speaking, unless you can get the certificate from the attendant of the deceased, you press for an inquest?—Yes; first of all we cross-examine the attendant. We say, "Your report is not clear." It is also very important to know if the man died at his own house, a friend's house, an hotel, or lodginghouse.

9. What sort of inquiry do you expect the second medical man to make?—He certifies that he has carefully and separately investigated the circumstances connected with the death.

10. Does that mean that he has examined the dead body?—No; examined the circumstances.

11. How?—In nine cases out of ten the case is perfectly clear.

12. How far is the second man independent of the first?—He says, "I don't see anything there that is not perfectly clear."

13. It might mean little more than saying, "I think you may entirely trust the certificate given by so-and-so"?—Yes, it might mean little more than that.

14. These certificates are sent direct to you by the medical man?—Yes, by the first medical man.

15. After he has filled it in, he does not show it to the nearest relative?—I do not know that he does.

16. If he had anything unfavourable to say, it would not be seen by the relatives?—Probably not.

17. So that a medical man can speak quite freely to you in giving this certificate?—Quite so.

18. If satisfied with these two certificates, do you give the order for the cremation?—Yes, I used to do so. I wrote "Approved" on the certificate—that was the authority for carrying out the process. All this is now done by Mr. Herring, of 50, Harley Street.

19. You handed the certificates to the secretary?—Yes.

20. He gives instructions to the man at Woking?—He is always on the spot.

21. You have got to do the work very quickly?—Yes.

22. Do you think your practice ought to be generally adopted?—I do.

23. You think it ought to be the basis of the arrangement at all the crematoria?—It has been adopted by all the crematoria in England and Scotland.

24. They each have an officer holding the post which you held?—Yes.

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25. He receives these certificates, examines them, and if he is satisfied, permits the cremation?—Yes.
26. In framing regulations, do you think we can give instructions to the medical officers in charge as to the points which would have to be raised on these certificates? If cremation became general, could it be left to the discretion of the medical officer who has been appointed to act for the crematorium?—I think so.
27. You cannot suggest any rules which should be laid down for his guidance?—I cannot suggest anything further than what we have here.
28. Could you lay down any rules which would help medical officers who have not your experience?—I think not. At the same time I think no man who has not studied the subject is qualified to certify as to the cause of death. He should at least be acquainted with the facts and the reasoning which are to be found in Chapter VI. of my work on "Modern Cremation," pp. 130-155 inclusive.
29. You think it must be left entirely to their discretion?—Yes.
30. You always insist on an inquest if you have not got a certificate from the person's own medical attendant?—If we are not satisfied with the evidence respecting the death we sometimes write to the coroner.
31. This certificate is drawn up for the purpose of being signed by the medical man who attended the deceased. If he will not give it, will you take anyone else's certificate?—We do not say we will not do it.
32. (Dr. Parsons.) In the case of a person killed by accident, and an inquest held, would this certificate still be required?—No; the coroner's inquest takes it off our shoulders.
33. (Chairman.) Are you always satisfied with the coroner's certificate?—Yes.
34. (Dr. Parsons.) Can you tell us in what number of cases suspicious circumstances have arisen?—Not a great many.
35. Are the certificates retained for future reference?—I do not know, but I think so.
36. Could Mr. Herring give us information as to the proportion of cases in which certificates have been approved?—I doubt it.
37. Has your society ever refused to cremate anyone?—Certainly.
38. In how many cases?—Very rarely indeed.
39. If the case failed to comply with these conditions, would the representatives of the deceased, nevertheless, under the Act have any legal right to demand cremation?—I think not.

SECOND DAY.

29th October 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER (Secretary).

Mr. J. C. SWINBURNE HANHAM, Barrister-at-law, called; and Examined.

Mr. J. C. S.
Hanham.
29 Oct. 1902.

53. (Chairman.) You are Honorary Secretary to the Cremation Society?—Yes.
54. You know its practice well?—Yes.
55. You know the Cremation Act of the present Session?—Yes.
56. And you know the Reference to this Committee is to draft the regulations under that Act?—Yes.
- 56*. The chief point we have to consider in drafting these regulations is what should be the conditions precedent to cremation?—Yes.

40. What would happen if the second of these certificates failed to conform to the first?—We should demur to doing it, or demand an expert.
41. Has that ever happened?—I do not remember any case where the second medical man has not done it.
42. (Chairman.) I presume if the second man would not certify, the case would never come to you?—Every doctor has got a friend who trusts him.
43. But does that not detract from the second certificate as an additional safeguard?—No; if the first man cannot give a clear account of it we must have an expert.
44. What would you think of the plan of using a public man—for instance, the Medical Officer of Health?—Precisely what I have suggested; it would be a better safeguard.
45. If the first certificate was supervised by a public man?—Certainly.
46. If all these formalities took a long time as compared with the ordinary certificate, that would be a distinct disadvantage?—Of course, it depends upon the distance from the crematorium; 24 hours ought to suffice for obtaining all the information.
47. (Mr. Byrne.) The certificate of an authority who was indifferent, and examined the first certificate as a matter of business would be much better?—Yes.
48. Would you confine it to Medical Officers of Health or some doctor employed by the local authority?—I think some doctor known to be good and sufficient for the purpose.
49. You do not lay stress on his necessarily being a Medical Officer of Health?—No.
50. If we were to tie them down by regulations it would be possible that there should be a regulation that no cremation should take place unless the certificates clearly showed that death was not due to foul play?—This plan has worked so well that I do not like to commit myself.
51. But there might be a great lack of uniformity in the way in which doctors exercised their discretion—in one district loose certificates might be received, in another they might be over scrupulous?—We refuse to cremate under suspicious circumstances. But *vide* the proceeding which we have occasionally adopted, described at page 145 in Chapter VI. already referred to.
52. Do you think we ought to say that cremation shall not take place unless the possibility of crime is positively excluded?—That is what I have tried to accomplish by these certificates.

57. In the practice of the Cremation Society you begin with the application?—Yes; the application is made to the Society on this form (App. III.) by the executor or person taking charge of the funeral, and then we at once ask for the name of the medical man who has attended the deceased, and also the name of the second medical man to whom we can refer.
58. These two names are both given by the person making the application?—Yes. We also ask for the production of the ordinary certificate of registration of death, commonly known as the certificate for burial.

Having got the name of the first medical man, we forward him Form C (App. III.), which is accompanied by this letter of Sir Henry Thompson's (App. III.). This calls his attention to the fact that it is proposed to cremate the body.

59. What sort of inquiry does the second medical man make?—

"I certify that I have, in relation to the expressed desire that the deceased should be cremated, carefully and separately investigated the circumstances connected with the death. I declare that there are no circumstances connected with it which could, in my opinion, make exhumation of the body hereafter necessary.

"Signed

"Professional Title

"Address

Date

"That is the certificate he signs. I should take it it varies according to the circumstances. No doubt if he had absolute confidence in the medical man who gives the first certificate he would make little or no inquiry. I do not suppose he makes the investigation this certificate would suggest. The best way to put it is that the certificate is a sort of guarantee—we look to the names of the signatories as well as to the substance of the certificate. The certificates when forwarded to us are referred to Mr. Herring, our medical referee; he approves or rejects them. Then, in the case of approval, we issue a warrant for cremation. That is made out in duplicate (App. III.); one is handed to the undertaker or relatives, the other is sent to our superintendent at Woking, and he has strict orders not to cremate anyone without the production of the duplicate warrant.

60. You preserve the certificates?—Yes.
61. (Mr. Byrne.) What do you do with the registrar's certificate of the registration of death?—Return it after we have seen it. We enter the details in our register of cremations.
62. You leave the decision on the application entirely to Mr. Herring?—Yes.
63. If he writes "approved" across it you would not interfere in any way?—No.
64. (Chairman.) If he has any doubt about a case?—Then we make further inquiries. In extreme cases an autopsy is demanded.
65. What sort of certificate do you have when there is an autopsy?—Mr. Herring has made the autopsy himself, and thus no further certificate was necessary.
66. In that case there is no certificate?—No.
67. Do you ever insist on an inquest being held?—We have frequently said we will not cremate until an inquest has been held.
68. Then you consider the coroner's certificate is satisfactory?—Yes, as superseding everything else. If his attention is called to the facts he would then satisfy himself that cremation might take place; upon that we should act.
69. (Chairman.) Part of the application is that the deceased expressed no objection to cremation; do you insist upon that?—No; I think that was merely put in to satisfy people; the executor is omnipotent.
70. Have you ever had an application with those words struck out?—No.
71. (Mr. Byrne.) Have you ever had a protest from a wife against the decision of the executor?—Not that I remember.
72. If there were a protest you would hear of it?—Yes.

73. Distant relatives sometimes apply for leave to exhume a body—would you cremate a person on such an application?—I think so.

74. If the medical certificates were all right?—Yes.

75. (Chairman.) Do you make any condition as to the medical man not being a relative of the deceased?—No; interest is not always confined to relatives.

76. In drawing up regulations, you would suggest that we should take your practice—these certificates—as a sort of basis?—I think it would be necessary to have something of the kind.

77. At any rate, the certificates ought to be a good deal stronger than in the case of burial?—Yes.

78. Do you think that it would be better that the second medical man should be some independent person, named either by the cremation authorities or possibly by a Government Department?—I think it would be better to have a recognised official. It would save much trouble, as one would get to know his signature.

79. Every cremation authority ought to have a medical referee holding the same position which Mr. Herring does, to examine the certificates?—It needs an expert to examine the certificates to make them useful.

80. You would say that these certificates ought to be examined by a medical expert?—I think they ought, to make them effective.

81. (Mr. Byrne.) Do you go so far as to say we could not do less than that?—Yes, in view of anything like a large practice of cremation.

82. (Chairman.) It would only be extending your practice?—Yes; it would add a little to the expense.

83. There is no doubt the first certificate ought to come from the regular medical attendant of the deceased?—Yes, I think he is the only man.

84. If there were no medical attendant would it be necessary to have a post-mortem?—I don't quite know what Mr. Herring would say; I think he would be largely guided by the nature of the disease, and the special circumstances; if there were a doubt we should insist either on an autopsy or an inquest.

85. Would it be desirable that the first certificate should state whether he is a relative of the deceased or interested in his death?—It would be just as well.

86. Do you think the second certificate ought to be more in detail?—I do not see how you could get it.

87. Might it, at any rate, state on what the medical man who signs it bases his opinion—whether he has made any independent inquiries?—That would be more drastic.

88. Nothing could be more drastic than the present wording?—No, perhaps not.

89. Would it cause any difficulty to ask for more details?—This second certificate is generally a difficulty; people do not like it.

90. You do not know what fees are paid for those certificates?—No.

91. (Dr. Parsons.) Do you think the second certificate is really any safeguard?—I do not think it is much.

92. Seeing the thing comes before a medical referee, might it not be reserved for cases in which, owing to relationship, it is desirable to have corroboration?—Yes, in the event of foul play it could be filled up in a regular way.

93. (Chairman.) Do most of your cases come from London?—Yes.

94. If you named the second man, would there be much difficulty about getting a man?—I think there would in London, because these things are done very quickly; in small country towns it is easily arranged.

95. (Dr. Parsons.) What class do your cases come from?—Not the very poor; it varies a good deal.

96. (Chairman.) Is there a prospect of cremation being so carried out as to make it available for working people?—I do not think so, except by parochial authorities.

97. (Dr. Parsons.) The cost of fuel is considerable?—No; at Woking about 12s. on the average.

98. Do the formalities between death and cremation take more time than in the case of burial?—Not if they are prompt with the certificates. I do not think there would be much delay in London, especially if the undertaker knows his work.

99. Does the obtaining of the second certificate add to the length of time?—Yes; it has always been some little trouble.

100. (Chairman.) If you named the second man and paid him, you would have to raise your fees?—Yes.

101. (Mr. Byrne.) Of course, you notice that the second certificate is, from the point of view of the prevention of crime, immeasurably stronger than the first?—Yes; it should be borne in mind that when Sir

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Mr. J. C. S. Henry Thompson started this cremation movement he made these regulations as stringent as possible to save the society from the chance of anything going wrong.

102. In fact, you would not recommend us to aim at getting such a certificate; you would prefer to have some responsible public man?—Yes, that would be the ideal thing.

103. You do not think it necessary to aim at anything so strict as that?—No.

104. The first certificate, improved or not in its terms, with the endorsement of a responsible public authority is all we ought to aim at?—Yes; that would give it the imprint of responsibility.

105. (Chairman.) If you had a public officer for the purpose, would it not be desirable that he should make some investigation?—Could he make any investigation worth having? It would only be by hearsay.

106. (Mr. Byrne.) Do you think it would be advisable for him to say, either "I have carefully and separately investigated the circumstances," or, in the alternative, "I have not considered that any separate investigation was necessary"? Of course it would be absurd to carefully investigate some deaths?—Yes.

107. If a public officer simply said: "I declare that the circumstances of this case justify cremation," it would be a certificate that an honest man could give and it would probably be as effective?—Yes, I think so; if too much is asked it will not be done.

108. You have not got a place at the crematorium where you could make a post-mortem?—Yes.

108*. Could arrangements be made in case of delay in granting certificates?—Yes.

109. Have you had any proposal to cremate the remains of a person already buried?—We have had one or two cases.

110. In that case you could not insist on the certificates?—No, if the death had taken place some time previously.

111. (Dr. Parsons.) In cases of bodies taken out of vaults under London churches, it would not be necessary to have certificates?—No.

112. If there were a statutory register of burnings it would be something like yours?—Yes. Hitherto the Registration Acts have not applied to cremations, so we voluntarily framed a register.

113. (Chairman.) Now the register will have a statutory effect?—Yes.

114. Do you take any responsibility for the disposal of the remains after cremation?—Yes; we mean to make this a feature at Golder's Green.

115. I suppose you hand over the ashes to the relatives if they wish it?—Yes.

116. (Mr. Byrne.) Do you think that the regulations we have to suggest should aim at prohibiting cremation in every case unless it was proved positively that foul play could not have taken place, or merely take the very considerable precautions that these certificates imply?—I think that the former would negative the advantages of the Act.

117. Do you think we should go so far as to exclude cases, say, of gastritis, where the cause might be doubtful?—I should hardly think so; in a case like that it would be going too far to say that it must be positively proved that the cause of death was not due to crime.

118. Still less would you recommend a refusal to cremate a person dying of such illness?—I think so.

119. (Chairman.) You sometimes keep portions of the remains?—I have not known of any in practice.

120. That is not part of the practice?—No.

121. You think it would be better to insist on the examination at once?—I think so.

122. (Mr. Byrne.) You have no definite recommendation as to cremations of bodies already buried?—We have had very small experience of this; two or three cases perhaps.

THIRD DAY.

30th October 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

DR. PARSONS.

MR. WHEELER (Secretary).

Mr. HERBERT THOMAS HERRING, M.B., B.S., called; and Examined.

Mr. H. T. Herring,
M.B., B.S.
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123. (Chairman.) Mr. Herring, you are Medical Referee to the Cremation Society of England?—Yes.

124. You know this Committee has to prepare draft regulations under Section 7 of the Cremation Act of this Session?—Yes.

125. We should like you to tell us what your practice is. We understand you require the certificates of two medical men in support of an application for cremation?—Yes, the secretary sends notice of the requirements of the Society to each of the medical men.

126. And the first thing is the two medical certificates?—Three certificates. First, the Registrar's burial certificate, which is required as evidence that the proper authorities have sanctioned the burial of the body. Next, I have a request from the next-of-kin or executor that the cremation may take place. That requirement is made in order to protect the Society from an action hereafter, and to prevent any unauthorised person from endeavouring to dispose of the body. Then I have the medical certificate of the Society signed by two registered practitioners, the first paragraph of which gives me a general statement of the case. I examine this to see that it agrees with the Registrar's certificate. I

look to the age of the patient, the sex, the premises in which death took place, and the condition as to marriage. I read the medical certificate carefully, to see if it explains satisfactorily the cause of death. The first point is to see if the initial cause is accidental; if it is, the case must be reported to the coroner. Again, if the deceased was a young unmarried female, who had been in good health up to the time of her fatal illness, I should look very closely at the symptoms, and the relationship of the applicant for cremation to the deceased, as an illegal operation might possibly have been performed.

127. Would that be likely to appear in the certificate if it had been so?—Well, very possibly not, especially if the giver of the certificate were also the operator. A man who has committed such a crime would hardly make a written statement, but even then some inconsistency in the facts given would probably suggest further inquiry. I look up the medical practitioners who signed the certificate in the Medical Register or Medical Directory, and ascertain their qualifications and position in the profession. If a man has been struck off the Register I do not accept his certificate at all. I would not allow any cremation upon a certificate of an uncertified prac-

itioner; such cases are referred to the coroner, who makes inquiries.

128. (Mr. Byrne.) Or does not?—I have nothing to do with that.

128*. Reference to a coroner does not mean that an inquest takes place?—He makes inquiries, and says whether an inquest is required or not. I accept a coroner's warrant at once, provided the applicant is the next-of-kin or an executor.

129. (Chairman.) Do you ask whether he is next-of-kin?—I always ask.

130. (Mr. Byrne.) Why is that not in the certificate?—It says: "State here whether executor or how related." I make the inquiry, and if the result is satisfactory, and all the certificates are in order, I countersign the application, and the warrant for cremation is issued. Out of 2,300 cases of cremation performed at Woking I have examined 1,300 certificates, and of this number I have had to make further inquiries in about 6 per cent., after receipt of the certificates.

131. (Chairman.) Does that mean further inquiry of the relatives?—Yes, and of the medical man. In 2 per cent. I have to report to the coroner, or make a post-mortem. If the certificates are not satisfactory I ask the applicant if he will consent to a post-mortem examination, or have the case reported to the coroner.

132. (Mr. Byrne.) Some drop the matter?—Very few. The inquiries of our society have never led to the discovery of any crime, but we have had two cases in which we communicated with the coroner, and he considered an inquest necessary. We have had a good many requiring further investigation, in which the burial certificate had been issued, but the cause of death, in my opinion, required further inquiry before cremation could be sanctioned.

133. (Mr. Byrne.) As a matter of fact, you are in the position to check both the registrar and the certifying doctor?—Yes, and if the nearest relative or executor did not sign I should inquire why.

134. What do you do when the irregularity disclosed is want of relationship?—I have never refused anyone. I have told the secretary to make inquiries. If the wife does not sign she must be too ill; if the solicitor signs it I accept it. In the case of persons dying abroad, and the bodies brought here to be cremated, I get the certificate of the medical man in attendance *visé* by the British Consul, or say: "You can report the case to the Coroner."

135. In a case of foul play, do you think that under your system the chances of inquiry being started before the cremation are greater than the ordinary chances of being found out afterwards, and evidence being available?—I think so. There are certain poisons which are very soon destroyed, even if put in the ground—in ptomaine poisoning the traces are destroyed in a few hours.

136. (Dr. Parsons.) You cannot make the net so close as to catch a clever villain who knows the ropes, without putting a great deal of inconvenience upon a much larger number of innocent people?—Of course, you cannot make it absolutely certain, unless you make a post-mortem examination in every case. I used, when making such examinations, to take out the stomach, together with other portions of the viscera, and put it into pure alcohol; this was afterwards perfectly good for investigation.

137. (Mr. Byrne.) In what cases did you do that?—Where we did not get good evidence.

138. Did the relatives know about that?—Certainly.

139. (Chairman.) Is that done now?—We have a pathological expert now.

140. When you have a post-mortem examination you require it to be conducted by your own authority?—Yes.

141. Sometimes the post-mortem examination is made before the application comes to you?—That is so.

142. (Mr. Byrne.) Do you cremate many children?—Some.

143. Comparatively few?—Yes.

144. (Chairman.) Do you make any inquiry whether the medical man is a relative of the deceased?—Yes; I object to the father signing a certificate.

145. Would it be a good thing to make that plain on the face of the certificate?—Yes; of course, the certi-

cate may be perfectly satisfactory, but relatives should not sign.

146. (Dr. Parsons.) Might there not be cases in a country village where the only medical man was a relative—where it would be difficult to get someone else?—It would be difficult to overcome it unless you have a medical referee. I should much prefer to have an independent witness.

147. (Chairman.) What is the value of the second certificate (App. III. (1) (c))?—Of course, it strengthens my hand in this way: it says that the giver of the first certificate is more or less a man of repute; he can only take what the first man says—he cannot go personally and investigate the case. If No. 1 were a black sheep he would be rather shy of bringing his certificate to No. 2, and even if No. 2 were an easy-going man, and he knew that No. 1 was not very sound, he would think twice about signing it. On the other hand, if you have a good medical officer, the certificate might be dispensed with, because it adds a good deal to the expense, and is also a hindrance to the acceptance of cremation. I do not think there should be any undue hurry about cremating a body.

148. (Dr. Parsons.) If the corpse had to be kept longer it would discount the advantages of cremation, especially in cases of infectious disease?—I do not think the necessary inquiries need take any longer.

149. (Mr. Byrne.) Is the second certificate ever signed by the partner of the first?—Yes.

150. Do you take that?—Yes.

151. Subject to the usual conditions?—Yes.

152. (Chairman.) Do you think, in drawing up regulations, we should require every cremation authority to have a medical referee holding much the same position as you do in regard to your Society?—If the law as to death certification is not going to be altered, I think it would be necessary to have a medical man who knows the medical practitioners in his district to supervise the matter.

153. (Mr. Byrne.) He should be a good man in his neighbourhood?—Yes, and the decision should be left to his discretion.

153*. And is it your opinion that the supervision on the part of such an officer would remove the necessity for the second certificate?—It is a difficult question.

154. The difficulty we feel is prescribing a second certificate which on the face of it is never carried out?—Yes.

155. Would a second certificate worded as strictly as that be necessary if you had a medical referee?—No.

156. (Chairman.) If you dispense with the second medical certificate, will not it be necessary for the medical referee to carry his inquiries rather further than you do?—I do not see what more he could do.

157. In that case the decision would turn on the medical certificate of one man, however incorrect, so long as it was satisfactory on the face of it?—Yes.

158. (Dr. Parsons.) Would it be possible to require a second certificate in certain classes of cases?—Yes, if the answers were unsatisfactory I should say, "You must report to the coroner," and the coroner, after his inquiry, should give a statement in writing that the body may be cremated.

159. (Mr. Byrne.) Do you think the local knowledge of the police surgeon or medical officer of health would be of service in judging those certificates?—It might be.

160. You would not lay much stress on it?—No.

161. But the medical referee's knowledge of the medical practitioners of his district would be of use, would it not?—That is important.

162. The medical referee in a provincial town would be in a better position to know their antecedents than you would?—Yes. I think it is important that wherever your crematorium is there should be a medical referee. Of course, if you give the coroner the power, the necessity for the pathologist would go.

163. (Chairman.) Do you think the sort of inquiries the coroners would make would be as good for this purpose as a reference to a pathologist?—No, though I should say that some of the coroners make stringent inquiries.

164. (Mr. Byrne.) Do you think we ought to aim at the positive prohibition of cremation, except in cases where foul play is absolutely excluded by the evidence,

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or only where it is highly improbable? Would you discriminate between diseases? Would you, for instance, be exceptionally strict in cases of gastritis?—I should not refuse the case, but I should make careful inquiries.

165. Suppose a certificate came up—gastritis or ptomaine poisoning—how far would you go?—To the official analyst if necessary. If he is satisfied I should be satisfied. You can only go to the highest authorities.

166. Would you go to the best authority?—Yes, I would not cremate where there was doubt.

167. You think that the question of analysis, etc., should be left to the discretion of the medical referee, and should not be the subject of any of the proposed regulations?—Yes, he can apply to the coroner, who, of course, can take steps as he may think necessary.

168. Would you give a cremation authority power to refuse cremation?—If the referee had signed the certificate, and the company wished to reject it?

168*. Yes?—They could scarcely ignore the opinion of their own representative. They want to perform as many cremations as possible.

169. But the medical referee?—Of course he can refuse.

170. You think that by the regulations he should be able to refuse without stating reasons?—He should refer it to someone else. He should report it to the coroner.

171. But in view of the fact that all coroners are not

equally competent and painstaking, do you not think that you ought to allow the medical referee absolute power to refuse a cremation? Certainly, and I should like to say that I think the Registrar of Burials should be a little more literate than he frequently is. At the present time he is the only man who has any power to question certificates of death in cases that are not reported to the coroner. Another point is that the questions: "What was the duration of his last illness?" "Did you attend him throughout?" etc., require some slight modification to bring out more clearly how long the medical man was in attendance on the deceased.

172. (Dr. Parsons.) What causes would come respectively under Questions 4 and 5 in the first medical certificate?—You would say: "What was the nature of the disease? If it is scarlet fever, you would say scarlet fever."

173. It would be the predisposing cause?—It is the primary cause of death.

174. I feel a little difficulty as to, say, which comes under 4 and 5?—It is always a little difficult. The ultimate cause of death might be either coma, asphyxia, or syncope.

175. (Chairman.) How would you deal with a certificate where the cause of death was given as "diarrhoea, vomiting, and exhaustion?—I should have a post-mortem unless the certificate was signed by a well-known medical man with good qualifications.

FOURTH DAY.

3rd November 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER, Secretary.

Dr. THOMAS STEVENSON, called; and Examined.

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176. (Chairman.) Dr. Stevenson, what is the exact title of the office you hold under this Department?—I am a Scientific Analyst to the Home Office.

177. And you have had a very extensive experience in cases of poisoning?—Yes, it extends over the last 30 years.

178. I suppose it has been explained to you what the reference to this Committee is; that we have to prepare a draft of the regulations to be made under the 7th section of the Act?—Yes.

179. And the point on which we wish to consult you is the question of the conditions precedent to cremation?—Yes.

180. Have you seen the form of medical certificates required by the Cremation Society?—Yes, I have seen their regulations and certificates.

181. Can you give us your opinion as to how far they can be considered as sufficient for the purpose for which they are required?—I think in some cases they would be sufficient; but in the class of cases which come before me—manslaughter or murder—I do not think these certificates would be of any great value, where there was on the part of interested persons an intention to deceive the medical and burial authorities.

182. And still less if the medical attendant in the case was himself the culprit?—Certainly. Some years ago I went through all the criminal cases of arsenical poisoning of which I had personal knowledge, and in 50 per cent. of those cases no suspicion, no sufficient suspicion, had arisen in the mind of the medical attendant that the case was one of poisoning until after death.

183. But, I suppose, in a certain number of that

50 per cent. the suspicion occurred between death and burial?—In some cases, yes.

184. Could you say in what proportion of cases it arose after burial?—No, I cannot say that. In the very first case in which I was employed by the Home Office the body had been buried—no suspicion arising. Suspicion arose six weeks after the death in consequence of a woman marrying the husband of the deceased, and her being observed to be pregnant. The body was exhumed, and there was ample evidence that the death was due to arsenic.

185. Was there a medical certificate in that case?—Yes, by a medical man of good standing.

185*. (Mr. Byrne.) Did he take any prominent part in raising the inquiry?—No.

186. Who brought the suspicious circumstances to the knowledge of the police?—The neighbours generally.

186*. The doctor simply confirmed the suspicions by his account of the symptoms?—The woman was certified to have died of so-called English cholera—no suspicion of arsenic.

187. (Chairman.) Supposing this certificate had been filled up by the medical man, and he had entered it as English cholera, I presume the medical referee of the Cremation Society would have made further inquiries?—The Cremation Society, I think, would—the prominent persons in it are men of such undoubted standing that one could not but suppose that they would act in the best possible way; but in cases of cholera and so on, the body would be rather quickly buried, and there would be a good deal of time lost in applying to the medical man. It is now so common to have a body

buried with only two or at any rate three intervening days between death and burial—formerly it was not thought decent in the country to have anyone buried under a week.

187*. The point is this: would the additional security which is afforded by these two certificates be effective in raising the suspicion?—Undoubtedly it would have some effect, but it would be most effective in cases where there had been no manslaughter.

188. We understand that the Cremation Society thinks that the second certificate is not of great value?—I do not see how they can get an investigation made by a really competent man unless someone pays him a fee of at least a guinea.

189. As a matter of fact, they rely on the first certificate. They have a qualified medical adviser, and unless he is perfectly clear that the cause of death is stated there in a way which excludes the probability, if not the possibility of poisoning, he will not pass the case. Now we have got to discover some system which will serve the same end and would be of general application?—Of course, the submission of certificates of death in all cases to the medical officer of health of the district might be of advantage.

190. The first suggestion is that there should be a medical referee independent of the people interested; do you think that would afford sufficient security?—Every precaution of that kind would be an advantage; but I would point out that the medical certificate required by the Cremation Society does not set out the symptoms except inferentially. In a case of cholera, infantile diarrhoea, and so on, where there are a great number of children dying of these diarrhoeal disorders at certain seasons of the year, simply looking at the certificates would only lead to this—the conclusion that these diseases were very prevalent at the time.

191. What suggestion would you make?—The only complete thing is to have a post-mortem, and if necessary, some of the viscera reserved; but that, of course, is impracticable if cremation is to be carried out on a considerable scale; that is as much precaution as you can take.

192. (Mr. Byrne.) Postmortem without analysis would not be sufficient?—It would in the case of most mineral poisons, but in the case of strychnine it would not be of any use whatever.

193. There are natural ailments, the symptoms of which are similar to those of arsenical poisoning?—With arsenic it is sufficiently defined—in a vast majority of cases the symptoms are distinctive. A medical man who is called in finds the husband and wife on apparently good terms—it does not occur to him to suspect that there is anything wrong—his business is to cure the patient. [The witness here gave details of a certain case.]

194-6. And in that case the medical attendant would have been able to give a certificate that would have passed the Cremation Society?—I think so.

197. But he might have felt some doubt in the matter?—He might.

198. If he had indicated that there was any doubt as to the cause of death, the society would have insisted on a post-mortem or refused the cremation, so that it might have led to further inquiry?—Yes.

199. (Dr. Parsons.) Does it not rather come to this: that there ought to be a post-mortem in every case of gastritis, peritonitis, or cases of that kind?—I think so. It is not only cases of poisoning against which you have to guard. So many cases of exhumation have shown that there has been some abortion attempted or procured.

200. (Chairman.) Do you think it would be possible to lay down a rule stating in what class of cases there must be a post-mortem?—I think so, where the symptoms are those of some known poison, excessive diarrhoea, vomiting, more especially where there is peritonitis—women who die of peritonitis.

201. Do you think we could have a rule that no cremation can take place where there have been certain symptoms?—Yes; but you would have to leave discretion to the medical referee.

202. Could you draft a rule which we could make a general one to bind the medical man?—Bind the cremation authority, too.

203. (Dr. Parsons.) Or should that be put in the instructions to the medical referee?—A schedule of

instructions might be drawn up for his guidance, among them this, as to exercising special precautions in particular classes of cases?—I think that would be very much better than the other. If you form any rule for medical men it would give rise to great difficulties.

204. (Chairman.) You think you would leave a certain discretion?—I take it that there would be a medical referee appointed in each district?

205. Yes, assuming that to be so, do you think that all that is required could be done by a general instruction to him that in certain classes of cases he is to exercise particular care?—I think that would be a very valuable precaution, and very effective in many cases.

206. Do you think you could draw up such an instruction?—I would try to do that; it would have to be in very general terms.

207. (Mr. Byrne.) You know the recommendation of the Death Certification Committee was that no one should be allowed to be buried without either a coroner's order or a post-mortem, or a definite medical certificate by a qualified man present at the last illness, and that this recommendation was strongly supported by many medical authorities.

(Dr. Parsons.) Provision was also made for a certified medical man, not necessarily one who had attended deceased.

(Mr. Byrne.) Yes; he was to make a post-mortem if he could not give a certificate without.

(Witness.) It would be a very good thing if you could create a large body of pathologists to conduct these post-mortem examinations.

208. (Mr. Byrne.) You must have come across a good many doctors. What class of doctors would be the most useful for giving these certificates allowing cremation to take place?—I think the medical officer of health might examine the certificates because he studies the classes of death, and would be able to judge as to how far the wording of the certificate bore any significance as regards crime. If the case were one of peritonitis he would have his attention drawn to the various causes that lead to peritonitis. He would not be the proper person to make a post-mortem examination.

209. Each local authority would have to do the best it could?—There ought to be some precaution taken to see that those who make the post-mortem are competent persons.

209*. What do coroners usually do in the matter of post-mortem examinations?—In London the County Council employs a pathologist, but, as a rule, a coroner calls in a surgeon. Until the last Coroners Act was passed the coroner was bound to call in the nearest medical man.

210. (Chairman.) That was probably of no use?—Yes, it was often very ineffective. Now the jury have the power to require the coroner to summon expert evidence.

210*. Does the County Council pathologist make all the post-mortem examinations?—He makes a certain number.

211. With regard to this question of allowing cremation to take place on a coroner's certificate, have you found that many of the cases of exhumation in which you have been engaged have been cases where an inquest had been held without the suspicion of poisoning having arisen?—No, not where coroners' inquests have been held.

212. There have been some cases where the body has been exhumed, and a second inquest held?—Yes; I had a case of that where a child was buried after a coroner's inquest, and I had to exhume the body. Two people were tried for the murder of this child. I found no poison, but I must add that there was great doubt whether it was the proper body that was exhumed.

213. There have been cases where you have had exhumation after an inquest had been held?—No, I don't think so, beyond the case I have mentioned. In the Horsford case* I am not sure whether an inquest had not been held before I exhumed the body. I think an inquest had been held. There was special reason for that, because strychnine had been found. The medical

* Walter Horsford, convicted at the Hunts Assize, 6th June, 1898.

Dr. T. Stevenson.
3 Nov. 1902.

Dr. T. Stevenson.
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man diagnosed strychnine poisoning, an analysis was made, and then I exhumed the body, because grave questions arose as to the amount of strychnine. Certainly before the inquest was concluded the strychnine had been found.

214. (Mr. Byrnc.) Have you had cases in which there has been an exhumation, and suspicious circumstances disclosed, not after an inquest, but after the matter had been referred to a coroner, and he had said: "This is not a case where an inquest is necessary." Have you had any cases in which suspicion has arisen after orders for burial have been given by coroners?—That was so in the Bravo case, I think.†

215. Have you come across cases of poisoning where the coroner issued an order for burial without holding an inquest at all?—I cannot call one to mind.

216. (Chairman.) Of course, one knows that coroners' inquests are sometimes done casually, but do you think that the coroner's decision may be generally taken as satisfactory?—In the last few years, with regard to poison, it is often very unsatisfactory, in consequence of the great difficulty they met with in getting analyses made. You will remember I drew your attention to the great drop in the number of analyses made. Certainly the rule was 16 or 17 years ago, if the coroner made a reasonable application for an analysis, you gave the order to make it; but they find great difficulties in getting analyses.

217. When coroners have put the salient features of the case before the Home Office I have sometimes gone so far as to say that this is a case in which analysis ought to be made. The great difficulty is to get the analysis made by competent persons, in consequence of the coroner not being able to pay a proper fee for such work.

218. (Mr. Byrnc.) You know that under the Coroners Act the local authority have power to fix even a generous scale of fees?—If certain coroners sent me anything to do I should be quite sure to get my fees on the same scale as the Home Office fees, but those cases are very few. The amount of money spent on these analyses is trifling.

219-22. (Chairman.) You think there ought to be more cases of analysis made?—I do not suppose that there is £500 a year spent in England on analyses of viscera.

223. How long after death can you find the traces of the different poisons in the body?—In the case of arsenic, they have been found 14 years after death. There appears to be no limit in the cases of arsenic, antimony, or mercury. [Others] would not be traceable after a long time, and when you come to [others] they would not be found.

225. (Dr. Parsons.) Not after a few days?—Not after exhumation.

226. (Chairman.) With regard to certain poisons, it does not much matter whether the body is cremated or buried five days after death?—No. A case occurred a few days ago in which a woman was given, by mistake, a dose of a very powerful drug—[]—ten times the proper dose. The woman recovered; but if she had died I do not suppose anyone would have been able to find any traces of the drug in the body.

227. One may say, then, if a medical man wants to poison a patient, and goes about it the right way, it is practically impossible to detect the crime?—Yes, but criminals generally do something that leads to detection of their crimes. It is astonishing the little laches which they make. If a medical man, however, was bent on crime, he could dispose of a person without being found out.

228. (Mr. Byrnc.) As the law now is, you can bury a man without a certificate; but you must give notice to the registrar within seven days?—I did not know that.

229. (Chairman.) There should be for each crematorium a qualified medical adviser?—Yes.

230. And he should examine the medical certificates, and in any case of doubt there should be a post-mortem by a qualified pathologist?—Yes.

231. You suggest that this medical officer should have general instructions as to the cases in which he should order a post-mortem examination?—Yes.

† Bravo case. See "Times" of July and August, 1876.

232. Cases which he is to treat with special caution?—With regard to this class of cases, I think you should get some surgeon to give you assistance with regard to the class of cases to be recommended for non-cremation.

233. You could suggest the cases from the point of view of poisons?—Yes, I can do that.

234. What alterations would you suggest in this certificate which should be required of the medical attendant of the deceased?—It should be fairly full.

235. Would the certificate required by the Cremation Society be sufficient as it stands, or would you supplement it with particular questions as to the symptoms of illness?—It might be amplified, I think. I think it rather hangs on what the instructions to the medical man should be.

236. (Dr. Parsons.) It would be a good thing to have the principal symptoms of the illness stated?—Well, I am doubtful. It would be better to put it in this way—were there any symptoms which would point to the possibility of peritonitis, enteritis, performance of abortion, poisoning, and so on? I think that would be better than simply symptoms.

237. (Chairman.) Could you enumerate half a dozen symptoms, and make him say whether any of those symptoms were or were not present?—Of course, each one of these by itself is of little value, it is the grouping of these symptoms which gives a definite note of warning; many people vomit or may have diarrhoea, purgatives may be given by the medical man; each one of these symptoms is, *per se*, of little significance.

238. (Mr. Byrnc.) If we put ourselves in the position of the referee who is criticising a medical certificate, the question is whether it is worth his while to be told that there was vomiting, sickness, and so on?—I don't think it is of much value; if it was enteritis he would know that there had been vomiting and sickness; a competent man would know what the symptoms of enteritis and peritonitis were. If you ask him a lot of things you do not get the general aspect of the disease; you get specific questions, the answers to which would not afford a very large amount of information. I think if the Registrar-General sees in a certificate that there is peritonitis, or things of that kind, he at once addresses an inquiry through the registrar as to what was the cause of the peritonitis.

(Dr. Parsons.) I think that is only in case of a woman of child-bearing age; it is more for statistical purposes, I think.

(Witness.) That is a kind of inquiry that ought to be made by the referee.

239. (Mr. Byrnc.) You think we should suggest these inquiries in our instructions to the referee?—Yes, I think so.

240. And having done that, leave the certificate to be filled in in a brief way?—Yes; if you had a referee you would not want this second certificate.

241. (Dr. Parsons.) Having the first certificate from the medical man in attendance and the medical referee, would that second certificate really be any safeguard?—I don't think this second certificate of the Cremation Society is of much value.

242. (Chairman.) Might it not be of value in a case where the first certificate was a bogus certificate altogether?—What is a "separate investigation"? If he did not think the first man was a competent person, how would he make a separate investigation?

243. He would refuse to give the certificate. I think they look upon this as a sort of certificate which would not be given to the black sheep in the profession?—Of course, it is not of much value except as to character.

244. (Dr. Parsons.) The medical referee appointed for the district would probably have more knowledge of the medical men in his district?—Yes; a referee would be very much better. Second certificates in other countries have not been found to be of supreme value; in France they have a certificate of the investigating doctor, and yet in France we get more of these accounts of people buried alive, or supposed to be buried alive, than anywhere else. A person going to make an investigation, without he relies on the first doctor, does not know whose body he examines. There have been cases where a body has been that of someone else; if he doesn't rely on the first doctor, he falls back

on the friends, who, of course, can entirely deceive him in the matter of identity.

245. (Mr. Byrnc.) In fact, that second certificate either means nothing, or it means too much?—Yes, it gives a false colour of safety. When you get this Cremation Act adopted, and crematoria built all over the country, there will be great competition for business, as there is now with cemeteries, and you will find that this will tend to relaxation of precautions.

(Dr. Parsons.) The cemeteries are rather private speculations, are they not? Whereas those provided under the Act would be provided by municipal authorities.

(Chairman.) There is nothing in the Act to prevent private companies from providing them, but they would have to conform to the same regulations.

246. (Mr. Byrnc.) You notice the regulations of the Cremation Society do not allow cremating where there is no certificate from a doctor who had attended the deceased or a coroner's order; would you recommend that?—Yes.

247. Even supposing there happened to be no medical attendant, and a man died, say, at the age of 94 of senile decay?—There ought to be an inquest.

248. (Chairman.) Would you admit, as a third alternative, a post-mortem by a competent pathologist?—That is a most valuable precaution. I do not know how that would be brought in; it is difficult to define who is a competent pathologist.

249. I should think it would be a person appointed by

NOTE.—The witness, in a letter dated 4th November, 1902, suggested that the following questions should be put in every case of proposed cremation:—Were there any bruises or other signs of violence on the body? Were there during life symptoms of peritonitis or other abdominal acute inflammatory disease, or of irritant or other poison having been taken?

FIFTH DAY.

5th November 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER (Secretary).

Mr. NOEL HUMPHREYS, I.S.O., called; and Examined

254. (Chairman.) Mr. Humphreys, you are Chief Clerk to the Registrar-General of England and Wales?—Yes.

255. And you have come to represent his views?—Yes.

256. You know this Committee has been appointed to draft regulations under Section 7 of the Cremation Act?—Yes.

257. And our inquiry includes the conditions precedent to cremation; perhaps you would first tell us what are such conditions with regard to burial?—If a registered medical practitioner has been in attendance during the last illness he is bound to give a medical certificate to the best of his knowledge and belief, of the cause of death; if that certificate suggests any form of violence, or any suspicion of neglect, or other cause for special inquiry, it is the duty of the registrar to refer the case to the coroner.

258. But supposing that the certificate is accepted, the death is registered by the registrar, and the cause of death entered in column 6 of the Death Register?—Then it is the duty of the registrar to give a certificate of registry; a certificate to show that the death has been duly registered. That certificate must be produced at the burial. If no certificate is produced, the person performing the burial service is bound to give notice of the interment to the local registrar within seven days

6966.

the crematorium authority?—Of course, you must remember there are immense districts where there is no medical man in attendance; in some districts of Scotland only about one death in ten is certified.

250. Will you suggest instructions with regard to the cases in which the medical referee should look out for poisoning?—Yes. (See note below.)

251. (Dr. Parsons.) How far would it be safe to assume in a case where an inquest had been held, or the coroner had said that no inquest was necessary, that no question of exhumation could arise?—The coroner may be deceived.

252. (Mr. Byrnc.) Anyhow, the medical referee would use his own judgment as to taking the coroner's opinions?—Yes.

253. (Dr. Parsons.) Having regard to the circumstances, first, that it is undesirable to put obstacles in the way of cremation, and, second, that it is inadvisable to do anything which will involve keeping the body unburied, do you think the danger of such an occurrence as you mention is sufficient to be provided for in the regulations, or that we should be safe in accepting regulations to the effect that an inquest having been held or deemed unnecessary by the coroner is sufficient?—If he has held a public inquiry I do not see how you can go behind that, or that you would be likely to get any evidence.

(Mr. Byrnc.) If an inquest resulted in a scandalous verdict, the certifying doctor of the burial authority would know of it. He could say, "I am not going to allow this man to be cremated."

Dr. T. Steenson.
3 Nov. 1902.

Mr. N. Humphreys.
5 Nov. 1902.

Mr. N. Humphreys.
5 Nov. 1902.

263. Can you prosecute the person who ought to have registered?—Yes, the registration of deaths is compulsory.

264. (Mr. Byrne.) Have you ever done so successfully?—Not often with deaths; the cases are very rare, in consequence of this provision, where death is not duly registered.

265. (Chairman.) That requirement is fairly effective?—We consider it effectual.

266. There are a certain number of deaths unregistered?—It is a kind of thing we could not prove; a case occurred the other day where application was made for authority to register; it was a case of inadvertent omission; if twelve months has elapsed since the birth or death it can only be registered under the written authority of the Registrar-General.

267. (Dr. Parsons.) Have you had any cases in which false names or false addresses have been given to the person who performed the burial?—No; I don't remember any case of distinctly false information; but, of course, incorrect information has been given in many cases to the registrar.

268. (Mr. Byrne.) Of course, that would be a possible source of escape; the parties could take the body to the cemetery, make some excuse to show why it should be buried without certificate, and the parson could give the notice required by law?—There would be the undertaker, or somebody.

269. (Chairman.) You know it is one of the regulations of the Cremation Society that a registration certificate must be produced before cremation?—No, I did not know it; the ordinary certificate for burial is the certificate of registry; that does not necessarily apply to our certificate; it might apply to a coroner's order for burial.

270. The regulation here is—the ordinary registration certificate of burial is also required?—That is what is called the certificate of registry; it would, in my opinion, be better if you had a certified copy of the death entry; that would give a great deal more information; it would show the precise facts the relative had given to the registrar.

271. (Mr. Byrne.) What would the charge be for that?—The ordinary charge for a death certificate is 2s. 7d.

272. You always give the name of the certifying practitioner under the heading "cause of death"?—Quite so. When the cause of death is uncertified no name is inserted.

273. Where does the registrar stop—if he has a form brought to him, a medical certificate of suspicious character, and he thinks there ought to be an inquest; he does not make the entry at all?—No; if the certificate suggests any form of violence he cannot act upon it. He must refer it to the coroner, and if the coroner in the exercise of his discretion says he is not going to hold an inquest he is bound to get the best information he can from the informant of the death.

274. The coroner sends him the pink form, returning the medical certificate?—We never part with the medical certificate.

275. The coroner's officer often has them, we know?—That is true; if however, it is once in the hands of the registrar, he must not part with it. It is a legal document under the Act.

276. Will you tell us the working of the pink form?—The coroner having decided in the exercise of his discretion that an inquest is not necessary, he fills up a pink form, which is taken back to the registrar, who cannot register any such death until he has received a decision; and it is only recently that we have got the decision in writing; most coroners now do fill up these pink forms.

277. Do you think we should insist on its being filled up by the coroner before cremation?—If it comes before the coroner it would be very desirable that he should give a certificate to the effect that he considers an inquest unnecessary.

278. (Chairman.) Then does the registrar simply wait?—That is it; no registrar can register a death in a lunatic asylum until the coroner has given his decision on the matter; when the registrar gets the pink form from the coroner he puts it on a file on his desk with the medical certificate. The relative is generally anxious to register in order to get the insurance money. The regi-

trar can, however, in certain cases issue a certificate for notification; that is only on production of the medical certificate of the cause of death. In country places this notification form is used very largely. The registrar lives four or five miles off; if the relative of the deceased gets a medical certificate, and sends it to the registrar by post, the registrar is bound to return by post a certificate of notification. The certificate of notification is just as much an authority for burial as a certificate of registry.

279. (Mr. Byrne.) It is not so by law?—Yes, it has the force of law.

280. (Dr. Parsons.) But I understood from what you said that a body could be buried without the production of any certificate at all; only that the person burying was obliged to take the name and address for subsequent inquiries?—That is quite true; there is nothing to prevent burial; the Act provides that if a body is buried without the production of the certificate of registration of death, notice must be given to the registrar within seven days.

281. (Mr. Byrne.) Does the chaplain of a big London cemetery ever bury anyone without a certificate?—Oh yes; we have a great deal of difficult correspondence on a point of that kind; the chaplain of a cemetery says the certificate ought to be given to him, but the clerk or superintendent say they want it, and they take it away before it is brought to the burial, and it is not produced to the chaplain; I think it right for the chaplain to insist on seeing it.

282. We have laid it down that the chaplain has a right to retain it; but that the superintendent has a right to the production of it at his office?—If I were asked I should say our view is best; the chaplain will destroy it; the superintendent will keep it; if you want to see those certificates of burial they would be in the office.

283. (Dr. Parsons.) Do you think that the same facility for disposing of the body prior to registration should be extended to bodies that are to be cremated?—No, certainly not; I think that it ought to be a condition precedent to cremation that the death should be registered. I would not give them the option that exists in the case of interment. I should say that evidence of registration of death should be required before cremation is allowed.

284. Did I understand you to say that a medical man is under an obligation to give a certificate of the cause of death under all circumstances, notwithstanding that he may suspect foul play to have occurred?—That is a point that gives rise to a good deal of correspondence. We hold that he is. If the medical practitioner has suspicions and refers a case to the coroner who refuses to hold an inquest, we hold that he is still responsible for giving a certificate. We require a certificate, and I think the Act supports us. I think this ruling is very generally accepted, though individual men object to it.

285. (Chairman.) The registrar judges, by the terms of the medical certificate, whether there ought to be further inquiry?—It is one of the duties thrown upon registrars. It is not very satisfactory, but we are obliged to lay down the best rules we can to guide registrars. We have been often pressed as to whether we can issue an order forbidding the registration of an uncertified death without it is referred to the coroner. In the present state of the law we cannot issue a general regulation to that effect. In a sparsely populated district the doctor may live 20 miles off, and the deceased may have had no medical attendance—the coroner declines to hold an inquest, thinks it unnecessary—then where are you? The death must be registered.

286. (Mr. Byrne.) But even the consideration of the circumstances of sparsely populated districts does not shake your opinion that no cremation should be allowed before registration?—No, certainly not.

287. (Chairman.) It is only in a rough-and-ready way that the registrar can judge whether there are suspicious circumstances?—Suspicious circumstances would be difficult to define, and would probably be suggested by hearsay.

288. So that if there were any case where there was a possibility of poisoning, he would not be able to judge by the certificate?—No.

289. If the certificate were gastritis or peritonitis, he would pass that?—Yes unless he had some outside information.

290. (Mr. Byrne.) Do you furnish any appeal for the

Registrar—does he write to you?—Yes; if he had a doubt in any case he would write to know if he should refer it to the coroner.

291. (Dr. Parsons.) In the meantime, would the body remain unburied?—Yes, if a case should be referred to the coroner, burial would mean risk of exhumation.

292. (Chairman.) If we got this copy of the registration it would not be any sort of guarantee that the case was not one of poisoning?—Not the slightest.

293. Assuming that could be done by more detailed medical certificates, you don't think the registrar would be the proper person to judge?—Certainly not. I don't think we can give you any help through the registrars. If they get a satisfactory certificate of the cause of death they proceed to register the death.

294. You don't think the registrar can give any assistance?—No.

295. From your point of view, you want to make sure that in every case of cremation the death is registered?—Yes; that is the point in which we are directly interested.

296. You also say that this copy of the entry in the register is a better certificate than the mere burial certificate?—Yes, and I should have it directly incumbent on the applicant for a cremation to produce it—not the option of cremating first, and giving notice afterwards. It seems desirable to insist on having a copy of the death entry produced as a condition precedent to cremation.

297. Your reason for preferring the copy of the entry is, that it would give more information to the Cremation Society?—That is one thing; the second is that it makes it quite a separate thing from this Act. You are going to have an additional safeguard of a much more stringent character, and I think it would be better to have the certificate which includes the cause of death certified by the medical man in attendance, in addition to the other certificate.

298. (Dr. Parsons.) But they will be given by the same person?—No; I thought you were going to have two independent certificates.

(Dr. Parsons.) Assuming that the practice of the Cremation Society is carried out, the person who gives the first certificate would also probably fill up the certificate for the registrar.

299. (Mr. Byrne.) Even if you had ten certificates, the first would be the same as that given by the man who attended the death, and the others would follow it?—Yes.

300. (Chairman.) Does the certificate give all the information as to the cause of death?—Yes, including the duration of the disease—it is an exact copy.

301. (Mr. Byrne.) You would not recommend us to interfere with the charge of 2s. 7d.?—I did not make that suggestion in the interests of the registrar—it only struck me it would be more satisfactory to produce a complete copy of the entry than the ordinary certificate of registry.

302. (Chairman.) Is there any advantage in burials in having the copy of entry instead of the certificate?—I think not.

303. You have looked at these certificates which are used by the Cremation Society?—Yes.

304. Do you think that if we wanted to put it in the hands of an independent authority the registrars might take care of the certificates?—No, I think they ought to be kept at the crematorium—the important thing is that the cremation register should be equivalent to the burial

register. I hope that regulations will be made insisting upon a complete and accurate register of cremations, somewhat similar to the burial register. We have a difficulty with the burial register, because of uncertainty as to the state of the law as to whether a person is obliged to register the burial of an unbaptised person. Many prosecutions about stillbirths fail for this reason. If there were a proper and complete burial register kept of every burial ground, it would give us a most important check upon the burial of alleged still-born children.

305. How could you prove it?—It gives you an opportunity of inquiring—the registrar would make local inquiries, and he would perhaps find that that child lived four or five days. Some town clerks have promised to have the burial of still-born infants registered, but we have no power to insist upon it, and it is quite exceptional if it is done at all.

306-7. Have you any suggestions to make as to the particulars that should appear in the register of cremations?—I have not thought about the precise form.

308. (Mr. Byrne.) Speaking generally, you think it ought to be fairly complete?—I think it is very important.

309. (Chairman.) What do you think as to putting the decision as to cremation in the hands of the coroner, if there is any doubt?—In doubtful cases information should be made to the coroner.

310. But if the coroner says, "I don't think an inquest is necessary," how then? What do you think of that position?—I don't think we can question the discretion of the coroner.

311. Do you think the coroner refusing an inquest amounts to any guarantee that there has been no foul play?—Not at all; we have cases of bodies found dead—nobody knows anything of the cause of death—coroners often refuse to hold an inquest, and we have to register the deaths recording the cause as unknown.

312. (Mr. Byrne.) You think that is most improper?—Yes, certainly; it gives facilities to crime.

313. The doctor refuses to give a certificate, and refers the case to the coroner; the coroner sends in his pink form. Do you think we ought to go beyond the coroner, and say we must have a certificate if the coroner says he sees no cause for inquiry?—If the doctor hesitates to write a certificate, and the coroner refuses to hold an inquest, there should be no cremation.

314. (Chairman.) Do you know anything about the Scotch system of registration?—Not very accurately, but it is practically identical with our own as far as deaths are concerned.

315. Do you know whether the Procurator Fiscal system works better than the coroner system?—Mr. Macleod, late Registrar-General, thought that the Procurator Fiscal system, and the Scotch public prosecution system was infinitely superior to the corresponding system in England.

316. (Dr. Parsons.) You see no objection to more stringent regulations being required in the case of cremation than the Registrar-General thinks could reasonably be required in the case of ordinary burial?—Most certainly not.

317. You go further than that, and say there ought to be?—Yes, most distinctly. I thought you were going to insist upon having certificates relating to the cause of death from two independent medical men.

(Chairman.) That is just what we have to consider.

Mr. N. Humphreys.
5 Nov. 1902.

SIXTH DAY.

SITTING AT MANCHESTER.

8th November 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER (Secretary).

NOTES of Examination of Mr. J. HARVEY SIMPSON.

Mr. J. H.
Simpson.
8 Nov. 1902.

Mr. J. Harvey Simpson is a solicitor and secretary of the Manchester Crematorium, with which he has been connected since its establishment in 1892.

570 cremations have taken place*, 367 being of males, and 203 of females, their ages ranging as follow:—

Under seven years	-	-	-	45
Over seven and under twenty-five	-	-	-	39
Over twenty-five and under fifty	-	-	-	144
Over fifty and under seventy	-	-	-	211
Over seventy years	-	-	-	131

There were from

Manchester and neighbourhood	-	-	-	323
Lancashire, outside the above	-	-	-	52
Cheshire	-	-	-	75
Yorkshire	-	-	-	34
North of England	-	-	-	15
Derbyshire	-	-	-	10
Nottinghamshire	-	-	-	9
Staffordshire	-	-	-	6
Worcestershire	-	-	-	7
Wales	-	-	-	10
Leicestershire	-	-	-	13
Birmingham	-	-	-	14
Lincolnshire	-	-	-	2

There has been expended on the lands, including the laying out of the grounds, the sum of £977; on the buildings, including the furnaces, the columbaria, the public vault, and furniture, £6,729. This does not include £135 expended on the conservatory, or the price of the organ given by Mrs. Henry Simon and her family.

There has been received a sum of no less than £2,486 in cremation fees alone, and 82,220 persons have inspected the crematorium.

The requirements of the Crematorium Company are set out in a document which the witness handed in. (Appendix III). Briefly they are these: the medical attendant is required to fill in a certificate which is practically the same as that prescribed by the Cremation Society of England. This certificate must be supplemented by another similar to the second one required by the society. This second certificate may be given by a partner of the medical attendant, but otherwise it must be given by an independent practitioner, and, in any case, the giver of the certificate must view the body. The first medical certificate is required even if there is a Coroner's order for burial, and both if the Coroner merely intimates that he considers an inquest unnecessary. Of these two, the first may be given by a relative, but not the second. Sometimes the second is given by a medical man employed for the purpose by the company. In such a case a fee of 21s. is charged by the company. These certificates, together with the certificate of the registration of death and a request for cremation signed by the representative of the deceased, are sent to the secretary, and if he is satisfied with them, authority for the cremation is issued. If he is not satis-

fied, he refers the case to one of the medical directors, whose decision is final. The witness would pass a case in which the cause of death was described as "gastritis and exhaustion" without question if the certificates were signed by men of repute. In one case—not gastritis—he insisted on a post-mortem examination. It was made by a medical man nominated by the society. Cremation has been refused by him in about seven cases. In one instance the deceased was a third wife, and in the others there was something in the manner or procedure of the parties that raised a feeling of distrust. No post-cremation difficulties or troubles have ever been experienced. The cause of cremation would suffer greatly if any case should occur in which it was popularly believed that this mode of disposal of the dead had been the means of removing the only legal proof of the commission of murder. In none of the cases of refusal mentioned had he any real ground for supposing that a crime had been committed. There was something in them, or in the parties concerned, that left an unfavourable impression upon him, and in such cases he would always refuse, unless, of course, there were a post-mortem by a reliable and skilled pathologist. There is a good proportion of the artisan class among the persons cremated, but the very poor are, generally speaking, against cremation. For artisans the charge is two guineas; for other persons five guineas, and there are about 90 cremations a year. The financial condition of the company is satisfactory, but it is to be borne in mind that the original cost of the land and buildings was met by voluntary subscriptions. With 150 cremations, and, with the same charges, a crematorium would pay its way, including interest on the original expenditure. There are other sources of income beyond these fees, *vide* the document handed in. The second certificate is absolutely necessary, as some protection against unscrupulous doctors. It would not be safe to dispense with the second certificate even if there were a medical referee to examine the first in every case; but a certificate from a medical referee might possibly be a satisfactory alternative. He might be a salaried official of the Cremation Authority. The difficulty about either the second certificate or the medical referee is, of course, the question of expense. Whoever gives the second certificate should certainly be required to state that he has viewed the body. There are two registers of cremations. One, corresponding to the registers of burial, stating the name of the deceased, his place of abode, his age, the date of cremation, and the name of the person by whom the religious ceremony is performed. The other is more elaborate. The witness gives no signed order for the cremation, but is constantly in communication with the superintendent by telephone, so that his office is practically an annexe of the crematorium. He sends in writing to the officer of the crematorium the name, etc., for entry in the register. The registrar's certificate of the registration of death is handed back to the relatives after the cremation. Most cemetery and churchyard authorities require the production of that certificate before allowing the interment of cremated ashes.

The witness supplied the Committee with copies of his pamphlet, "Cremation in Manchester and elsewhere" (1902), published by Collins and Kingston, Manchester.

* These statistics are for the period ended 31st December, 1901.

SEVENTH DAY.

11th November 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER (Secretary).

Dr. DANFORD THOMAS, called; and Examined.

318. (Chairman.) Dr. Thomas, you are one of the coroners for the County of London?—Yes.

319. Which is your division?—Central.

320. And you know something about the working of cremation?—May I just ask, the subject that you are interested in is the regulations which the Home Secretary has to make under the Cremation Act?

(Chairman.) Yes. This Committee is appointed to prepare a draft of the regulations to be made under Section 7 of the Act.

(Witness.) So as to make it as safe as possible?

(Chairman.) Yes. Cremation is now sanctioned by statute. There is nothing to prevent private companies from still carrying it on; only the regulations, when made, will apply to them as well as to public authorities.

(Witness.) The great objection is the medico-legal question. What you wish to do is to hedge cremation round with all the securities you can. If all the papers are filled in, who is to be the person to give the final order for cremation?

(Chairman.) Yes. That is the point we have to consider, and on which we now ask your opinion. At the present moment at Woking it is the medical referee appointed by the Cremation Society who gives the final order.

(Witness.) They have someone, not necessarily their own man, but a medical man. He is someone appointed by a private society, whose interest, so far, is to carry on cremation; it is a company, I presume, also a remunerative company. That is the state of things, and they appoint their own officers to do all the work that is necessary. Do you propose to have such an officer appointed?

321. (Chairman.) That is one of the suggestions before us—that each authority should appoint a medical officer. What do you say on that point?—I don't suggest the coroner, because I happen to be a coroner. I am only saying there is in him an officer who has all the means at his disposal for making inquiries. He would have to consider the certificates; he would have to satisfy himself by interviews before he gave final sanction. The object would be to assure himself that there would be no possible chance of a question of crime arising afterwards. The coroners strike me as being a valuable body; they are situated in every district. As you know, the registrars are empowered by the Registrar-General to refer cases to the coroner—all sudden deaths; all deaths in which no certificate is forthcoming as to the cause of death; all deaths occurring under suspicious circumstances, of which they are the judges; all deaths the causes of which are said to be unknown, or respecting which no certificate is produced. Directly the registrar has one of these he has to send it on to the coroner (*handing in document*). That is a form constantly coming to my office (Appendix II.). The registrar is an unskilled person as regards medicine or law; they don't always know the significance of medical terms; if they are at all puzzled they send the certificate on to me. I send my officer to visit the house, and not only does he personally do this, and fill in his report paper, but if necessary he brings any relative to me, and then I judge whether I should hold an inquest or not. The Registrar gives me the bare facts, and until he gets my answer he refuses to register. Of course, in every case of uncertified death it is not the coroner's duty, as has been

lately stated by the Home Secretary, to hold an inquest; he must use his discretion. An old man in a village, 78 years of age, is one day found dead in his bed. Everybody is satisfied; there is no certificate. The doctor has never attended him. If the registrar refers it to the coroner, the coroner may decline to hold an inquest, and the death is registered as "uncertified," from natural causes. Perhaps if he had been found dead in some London slum an inquest might be held. Of course, if cremation went ahead, I don't know what it would be if a coroner had to inquire into every case. As it is at present, it makes very little difference. If there is to be someone who is to give a final opinion, it strikes me that the coroner would be a suitable officer. Again, the Medical Officer of Health is a man of experience. If you appoint a special officer, you will have one in every district, and I suppose you will have to pay him something.

(Mr. Byrne.) It would be part of the expenses of the cremation.

(Witness.) Of the funeral? Does the Act give the Home Secretary power to order expenses?

(Chairman.) It gives the Local Government Board power to fix fees. Do you think the coroners would be willing to undertake this duty?—I think, generally speaking, they would expect some remuneration if they had to do all this. My whole time is engaged in the work, but with hundreds of coroners in the country it occupies only a small portion of their time; perhaps they have one or two inquests a week.

322. At present, if a case is referred by the Cremation Society, you give a certificate saying that it is a proper case for cremation?—Whenever I hold an inquest, and the friends say this is a case for cremation, instead of putting "For burial" I put the word "Cremation." I issue the burial order directly after the inquest.

323. (Mr. Byrne.) Do you do anything of that sort when you don't think an inquest necessary?—In those cases where the friends wish to cremate, and I am satisfied that death has arisen from natural causes, I inform the registrar I have made inquiries, and that I consider an inquest unnecessary. If I say an inquest is not necessary, then he registers the death, and cremation follows.

324. (Chairman.) Is it not a difficulty as regards coroners that many of them have no special medical knowledge?—I think a great many of them have books of reference. Where they are not doctors, they are solicitors, accustomed to taking evidence, and they get to know a good deal about the causes of death.

325. As I understand it, the danger is that in some cases, where the evidence of the body would afterwards be required, it would be gone?—Yes; if every case were referred to the coroner it would act as a deterrent to crime; it does now. There must be someone of experience, who will look all the papers over, and certify that the person can be safely cremated, as far as human judgment can determine.

326. (Mr. Byrne.) What about coroners in the country in very large districts?—There they would be probably communicated with by post; then they have officers in the police.

327. Not as well provided with officers as you are?—No, probably not; we have great advantages in London, but in the country all the circumstances are known.

328. Take the case of a coroner who lived about 34

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miles off?—The reports would have to be sent by post, and he would have to send at once to his officer by wire.

329. Your officers, of course, are very quick gossip collectors?—Yes, we get all the information at once.

330. You would not expect much cremation to take place in remote country districts?—I don't think there would be; it will extend slowly. At present it is confined to the upper classes.

331. (Dr. Parsons.) It is in towns that the difficulties of getting ground for burial are most felt?—Yes, that is so.

332. (Mr. Byrne.) There is a crematorium at Hull. In that district there are many sparsely inhabited tracts of country. A person dies there; a certificate is presented, and sent by post to the Hull crematorium. You would suggest that this certificate should be signed by the coroner?—Or some official after inquiry.

333. But the coroner might live a long distance from the place of death. The certificate might be perfectly good on the face of it, yet what opportunity would he have of checking it?—He would have a local officer on the spot; there is a policeman there.

334. It would be at least as good as sending it to the medical referee employed by the Cremation Society?—I don't think he ought to be employed by the Cremation Society; he ought to be an independent officer. He should not be under any local authority. We are responsible to the Lord Chancellor, and can act absolutely impartially; that is the kind of officer you want.

335. (Chairman.) Supposing the Cremation Society's certificates were used, what would you look at?—I should treat it exactly the same as if it were a report of a sudden death. The officer would call, fill in that paper (App. II.), come to my office with it the next morning, and report the whole surroundings of the case. If there is any suspicion or local gossip, I cause inquiries to be made. If I am satisfied that the death arose from natural causes, I intimate that I do not intend to hold an inquest.

336. If you had a case of death certified as due to "gastritis," and your officer made inquiries and found nothing suspicious on the face of it, would you authorise cremation in that case?—I have no power to order cremation—all I have got to do is to say whether I should hold an inquest.

337. Supposing you were acting as a medical referee?—I should have the medical certificate. I should have an opportunity of seeing the relatives, and if I am satisfied not to hold an inquest that means that they can do what they like with the body.

338. I am supposing that you have the power to act as referee—you get a certificate that the cause of death is gastritis?—That would raise my suspicions; gastritis or peritonitis are very loose words without the primary cause.

339. If you had a certificate with the cause given as gastritis or peritonitis, you would insist on further inquiries?—Certainly.

340. What sort of inquiry?—First of all communicate with the medical attendant and ask him to give me a history of the case. If he said he had suspicions I should hold an inquest; if the certificate is unsatisfactory, an inquest should be held and evidence taken on oath.

341. Have you a form for the reports of the result of post-mortems?—Yes.

342. (Mr. Byrne.) Did you draft that form yourself?—Yes.

343. Do all the coroners use that form?—A great many do.

344. (Chairman.) Would you in every case accept the jury's verdict as sufficient justification for cremation?—Yes.

345. Even if you disagreed with it yourself?—I do not think I have had any case in which there has been any disagreement as to the cause of the death.

346. (Dr. Parsons.) The Cremation Society of London have two certificates. The first, which is somewhat detailed, is from the medical attendant. The second is couched in very strong terms, but does not go so far as one might suppose from its terms. These two certificates are referred to the medical referee; if he finds nothing unsatisfactory he approves them, if he considers further investigation necessary he refers the case to the

coroner. We should like your opinion as to whether there should be both the second certificate and the examination by the medical referee?—I think there should be an extended form of certificate given confidentially by the medical attendant stating more details. With regard to this second certificate, it seems to me that the medical man comes and the first medical attendant tells him everything. Suppose the medical attendant is himself the criminal, he would tell him just what he likes.

347. Is it your opinion that the second certificate is of no great value?—I do not think it is, except it is by someone who is experienced in making these inquiries and has full power to make them.

348. Would you consider that the supervision of the first certificate by a medical referee appointed by the Cremation Authority would be more of a safeguard than the second certificate?—Yes, he would be constantly doing the work.

349. And with power to refer to the coroner?—Yes.

350. (Mr. Byrne.) If the coroner were a medical man the local authority would probably appoint him?—Yes.

351. In your opinion the value of the supervision exercised by this official would depend on his ability to have an inquiry?—Yes.

352. You would think that even a first-class expert would not be much use as merely criticising?—I do not think so. The coroner can say he will hold an inquiry in open court, and if there is anything wrong in the case it is likely to come out. The coroner is the officer always on the spot, with power to act.

353. (Chairman.) Is there not a fear that if applications for cremation led in any considerable number of cases to the holding of an inquest it might stand in the way of cremation?—I would not suggest an inquest in every case—that would be unnecessary; what you want is to be satisfied that the person has died a natural death. The only thing you can do is to hedge cremation round with precautions as far as you possibly can.

354. Do I understand your suggestion is first a certificate by the medical attendant?—Yes, of an extended character.

355. Second, a medical certificate by an independent person appointed by the authority; and, thirdly, a reference to the coroner?—Yes; he has special means of making any inquiry that may be necessary.

356. Should he make inquiry in every case, or only where it is doubtful?—Who has to decide?

357. These certificates come to the coroner to decide whether there is to be an inquest; is he in every case first to send round his officer?—He must make inquiries.

358. You send him to the house in every case?—He must fill in his report paper.

359. (Dr. Parsons.) Is that to apply in every case in which it is desired to cremate?—If you want to hedge cremation round with every precaution.

360. (Chairman.) I am afraid people will say, "We will not go in for cremation, as we shall have a policeman round making inquiries of servants"?—In my district the policeman wears plain clothes, when considered advisable.

361. Is the person who makes the inquiries a constable, sergeant, or inspector?—Generally sergeants, or experienced constables.

362. Are they quite above suspicion?—They are men who are looking forward to their pensions, and no doubt are the best for coroners' officers.

363. You do not wish us to understand that the coroner should in every case that comes before him order an inquiry?—Yes, the usual inquiry in all cases referred to him.

364. Suppose you had a certificate from a well-known general practitioner, giving in full detail an absolutely definite cause of death, and the cause of death was of such a nature as not to allow any suspicion of foul play unless the certificate was absolutely false?—You would not want a special inquiry in every case—the coroner has power if he has the slightest suspicion to make further inquiry. I do not think there is any difficulty in that way; the public would be glad of the protection; it would remove the feeling that exists about cremation.

365. Do I understand you to recommend that a good system would be to have a full detailed medical certificate, which certificate should then be sent to the coroner, so that there should be that certificate, and then another

certificate?—No, I don't think this second medical certificate necessary at all unless there are two doctors in attendance; then make them both sign it. It ought to be a confidential certificate.

366. (Dr. Parsons.) Are we to understand that you don't see any good in having a medical referee?—I only suggest the coroner, because he is an established officer who has the power and the means of making inquiry.

367. The proposal we had was that there should be a medical referee, who should examine all the certificates and refer to the coroner?—That would relieve the coroner of responsibility, when he is not a medical man.

368. (Chairman.) Supposing a certificate is given by

the medical attendant, and sent by him to the coroner; do you, or do you not, think there should be a medical referee besides?—No. The coroner has power to make all necessary inquiries.

369. You only look on the medical referee as an alternative to the coroner?—Yes. I don't think you want any further medical examination unless it is from the coroner, who has full power to get it done. If the case is all perfectly straightforward, then the coroner could authorise cremation. If there is the slightest suspicion of foul play, he could make another inquiry. If he still doubts, he could hold an inquest in open court. You must give any medical referee power to make inquiries, and to take or collect evidence, if his decision is to be of any value.

Dr.
D. Thomas.
11 Nov. 1902.

EIGHTH DAY.

Friday, 21st November 1902.

PRESENT

Mr. C. E. TROUP, C.B. (Chairman).
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER (Secretary).

Dr. WILLIAM HOLDER, called; and Examined.

Dr. Holder.
21 Nov. 1902.

370. (Chairman.) You are a member of the Town Council of Hull, I think?—Yes.

371. And chairman of the Cremation Sub-Committee?—Yes.

372. I suppose you have had to do with the crematorium since the beginning?—Yes.

373. You started the movement in Hull?—It came about from a lecture given at the Hull Literary Club, and the Corporation pressed it forward so far that we got a special Bill through the House of Commons enabling us to provide and use a crematorium.

374. Is it you who decide whether a body may or may not be cremated in such case?—The working of the case is pretty clearly put forth in this pamphlet. (Handed in.)

375. You established that crematorium under your private Act?—Yes. We had a piece of land lying idle, and we used that part on which to erect the crematorium. We erected the crematorium, with furnace and furniture, for a total of £4,232, exclusive of land. The value of the land was about £650.

376. Roughly, your crematorium cost you £5,000?—Yes.

377. It was finished about two years ago?—Yes. We cremated the first year 17 bodies, six of which were plague cases from a ship. The others were people resident in Hull and in the immediate neighbourhood, except one from Leicester. This year up to date we have cremated 12 bodies, and there are none that have been imported.

378. Your fees are very low—one guinea and three guineas?—Yes. We lost on the working last year only £41. We can cremate a body for three-quarters of a ton of coke, worth about 8s. As to wages, we only have one man, who is also sexton of the cemetery adjoining. Fifteen shillings will cover the cost, including wages, and the remainder of the guinea is profit. We also sell urns of terra-cotta up to two guineas. We have not yet made any profit out of the columbarium. We have erected a kind of cement and stone valley, and have cut niches in the walls in which to place urns. These are to be sold for from 15s. to three guineas. We can put in these over a thousand urns.

379. How much are you going to charge for the niches?—From 15s. in the lower row to three guineas.

380. Are the niches left?—They are cut out. The engineer says it won't take above two or three hours to cut one out. There will be flowers, ferns, and moss to beautify the columbarium.

381. (Mr. Byrne.) Have you room to extend that?—

It occupies but a very small portion of the ground. The soil was dug out and put up to make the foundation for the rock work.

382. (Chairman.) The chief point which we wish to put to you is the conditions on which you allow cremation. Your certificates are set out here?—Yes, they are set out in the form. They have been universally accepted with satisfaction in every case.

383. Do you allow the relatives to watch the cremation?—Yes. There is nothing offensive in it. The body simply effloresces. For nine minutes you see nothing but the coffin. Then the wood seems to open outwards, and the foot is always towards you.

384. (Mr. Byrne.) Not in nine minutes, surely?—There is a temperature of 2,000 degrees.

385. (Chairman.) As to your certificates and regulations. You adopted the regulations mainly from the Cremation Society regulations?—That is so.

386. You first of all require an application from a relation of the deceased?—Yes. They get their certificate in the ordinary way from their medical man.

387. This first certificate is signed by the medical attendant?—Yes.

388. That follows pretty closely the form of certificate sent to the Registrar?—Yes.

389. It is not the same certificate the Cremation Society requires?—I think we did amend it a little.

390. You do not ask nearly so much as the Cremation Society ask in their first certificate?—We think to give the cause of death quite sufficient.

391. Who examines these certificates?—No one but the superintendent of the cemetery. He sees that they comply with the requirements of our regulations.

392. He would not be able to tell whether the cause of death was properly stated?—No. If the cause of death is filled up very loosely then the registrar would not register it without sending it to the coroner.

393. The registrar will send it on if it is a case of violence or anything suspicious, but not merely because the cause of death is loosely described?—I quite agree that there ought always to be a second opinion, but if you have got the first certificate, and then another certificate from a second medical man who has made separate inquiry into the symptoms and cause of death. I don't see how you can go further.

394. Should not you have some medical man to look at these certificates and see that they are in order?—There would be no objection to that. I don't want you

Dr. Holder. to complicate it. I have known many cases of burial without any certificate at all.

21 Nov. 1902. 395. Does not that become much more serious when you are disposing of the body in such a way that no question of violence can afterwards be investigated?—I think there has been a great deal of exaggeration over that. The symptoms of death from irritant poisoning are so evident. I think death from poison undetected is very remote.

396. Are you aware that a great many cases have occurred where persons who have been poisoned have been buried?—Not with two certificates.

397. What guarantee have you that this second certificate really implies any careful examination?—I have none.

398. Can you say that everybody who signs that certificate has carefully and separately investigated the case?—No, I could not. You never will get it until you approximate it to the terms in which a man witnesses a will.

399. Have you given these certificates?—Never one.

400. Do you know what a man does who signs the second certificate?—He goes into the house and examines into the circumstances of death.

401. Can you say that he does do that?—No. I think you may rely on the profession not giving that without due consideration.

402. At present it says "carefully and separately investigated." Are you prepared to say that no medical man would sign that who had not carefully and separately investigated the case?—No, I am not. My own opinion is that the second certificate should be given by the parish medical officer. There is one in every district in England and Scotland. He would be an official within the cognizance of your department, and you could give him special directions.

403. (*Dr. Parsons.*) The district medical officer under the Poor Law?—Yes, simply because there is one in every parish in the kingdom.

404. (*Chairman.*) The principle of what you say is that there should be some independent officer to certify in every case?—Yes, I think that would be far better.

405. And make an independent inquiry?—Yes, and who would not be the partner or assistant of the party interested. The parish medical officer has had much more general experience, and would not pass it over in a perfunctory manner if he is held down by regulations.

406. There should be clear regulations as to his duty in the matter?—Yes, and he should be paid by the municipality, as the extension of the practice of cremation will save them land and tend to improve the town from a sanitary point of view.

407. In other words, you think the cremation authority ought to bear the cost of the second certificate?—Yes.

408. For poorer people?—I don't mind for all.

409. I suppose if the case were doubtful you would not allow cremation without a post-mortem?—No. We claim the right to have an autopsy.

410. (*Mr. Byrne.*) How does that work in practice? Is your superintendent an educated man?—Yes. He has had years of registration. The second certificate is very difficult to get without the medical men were in collusion.

411. (*Chairman.*) We have evidence that it is given very lightly?—Yes, I agree it is possible.

412. (*Dr. Parsons.*) Suppose a principal had several assistants, each attending to people of the poorer class. In a case which ought to be investigated, and no suspicion arising in their minds, they give a certificate as to the cause of death, which is brought to their principal for the second certificate, and he, as a matter of course, signs it?—I quite agree with you. That is why there should be an independent person appointed by the municipality, and acting under special directions from this Department, who would do his duty without suspicion.

413. (*Mr. Byrne.*) It is only your own judgment that has brought you to that conclusion?—Yes. Of course, in the majority of the few poisoning cases that have taken place, nothing whatever has been traced—it is very easy to destroy the traces of vegetable poisons.

414. Poisoners often use arsenic?—Yes; that always

leaves its trace—the death is so pronounced. I have taken out the cases of death in Hull that are uncer- tified. These for 1901, according to the returns furnished by the registrars, were 78; and in the 33 larger towns of England, 2,429.

415. (*Chairman.*) These are cases where the registrar enters the cause of death given by a non-medical person?—They generally come from the coroner—he makes such investigation as he thinks sufficient.

416. Cases which have been reported to the coroner, and in which he refuses to hold an inquest?—I don't know—I should think so.

417. (*Mr. Byrne.*) And buried without a certificate given to the minister?—I don't think our superintendent would allow any burial without a proper certificate.

418. (*Chairman.*) Do you think a coroner's passing a case in that way, is much assurance that the case is straightforward?—None whatever—he does not often take the trouble to ask the medical man anything about it. In these cases, where people have a certificate for burial given by the coroner, he does not always take the trouble to inquire of the medical man who knew the family, or make any medical inquiry whatever into the truth or otherwise of the statements made by the friends of the deceased.

419. You don't think he makes what you would call satisfactory inquiries?—Not in all cases.

420. (*Mr. Byrne.*) Are you thinking of a case of personal neglect on the part of some particular coroner?—I think it is common—that is my experience generally.

421. You thought they were all slack in their inquiries?—Yes, if they are very busy.

422. Your coroner has a police-officer for conducting any necessary inquiries?—Yes. I should like to lay before you the necessity for cheapening and making easy the facilities for getting certificates for cremation on the part of poor people—their time is much occupied in getting a living, and if they have much running about, it may be the turning-point between cremation and burial—anything that will favour the expansion of cremation will be a great saving in waste land, and a sanitary advantage to themselves. If we can get that second certificate given by some authority belonging to the town, you would have a guarantee that they were given after careful examination, and it would meet the desires of the working-people. The registrar gets his first certificate, and should be empowered to make the inquiry if cremation is desired—he should then direct the medical man appointed to give the second certificate to go and make an independent inquiry, and send the certificate direct to the cemetery superintendent. I think that would make a machinery that would be to the advantage of working people, and also of proper regulations.

423. (*Dr. Parsons.*) How is the registrar to know if the body is to be cremated?—He should ask that question.

424. In each case?—I think so.

425. That is rather beyond the registrar's functions as at present defined?—That is so—it is only a question whether in preparing new machinery his functions should be extended.

426. Can you say whether cremation involves longer keeping of the body than burial?—No, immediately the death occurs they go and register it—they then take that register for burial to the secretary or superintendent—they give him 24 hours' notice. If he wants a second certificate they can get that within five or six hours—we have never had any trouble in that way.

427. (*Mr. Byrne.*) Have you had any cases sent in from places at considerable distances from Hull?—Our first one was from Leicester.

428. You think the medical officer of health would be quite familiar with the practitioners of his own neighbourhood?—Yes, he would have the "Medical Directory," and have visited a good deal amongst those towns.

429. (*Chairman.*) Have you cremated any working-class people?—The five plague cases and the late superintendent of our parks and burial grounds.

430. The interest among the working classes has not shown itself in people of that class being actually cremated?—No; but it will be only a question of fees.

431. Your fees do not stop it?—Yes, they do; because they can get a body buried for about 9s. 6d.

432. Surely a guinea is not a very heavy fee?—24s. a week and six children to keep does not leave much margin.

433. They are all in burial clubs?—Certainly not all.

434. I should have thought from what one knows of burial insurance that a working man would often be able to afford a guinea?—There are plenty of them able and willing; but there are other classes—the poorest and most depraved, who have not the chance to do it. Of course we have power to remit fees in certain circumstances, and if there were an epidemic in Hull we should remit every fee.

435. (*Mr. Byrne.*) You know that the Act of Parliament requires that the preliminary declarations shall be made under the Statutory Declarations Act—that means a slight fee?—I didn't know that. All I can say is that it is a great deterrent.

436. You think that will have a bad effect?—I do; I think it will deter the greater part of them.

437. I presume some magistrate, who is a member of your council, might be prepared to receive these declarations without fee?—I should be very glad to do that; but it would be an extra trouble. I am certain that it should be unnecessary, seeing you have the safeguard of the second certificate.

438. You would advise us not to compel professional men to make the certificates and declarations under the Declarations Act?—I do, most distinctly—because if the medical man had to do it he would dissuade many cases from doing it—I am certain it would be a very great detriment to the progress of cremation.

439. (*Chairman.*) Do you think it is really necessary to allow the relatives to look at the body during cremation?—No.

440. You don't think they would object to a regulation not to inspect during the actual process?—They would be suspicious if you don't allow it; but it must be with permission of the engineer.

441. (*Mr. Byrne.*) You have seen a good many?—Yes.

442. Have you ever seen any cases in which the flames allowed you to see the body?—No.

443. As a matter of fact, in your furnace you have never seen anything you could call indecent?—No; everyone has said it is most reverent.

444. (*Chairman.*) What do you think should be done with ashes left on the hands of the cremation authorities?—They can be put in the ground.

445. You would see no objection to a regulation that where the bodies are not disposed of in urns they should be buried a foot or two deep?—No.

446. Is there any need for them to be buried a foot or two deep?—Not the slightest.

447. (*Mr. Byrne.*) Does your furnace smoke?—Not at all after the first three or four minutes.

448. It never throws out thick smoke?—No; those in the grounds are often unaware that a cremation is in progress.

449. You were instrumental in making these Hull regulations?—I did a great deal of it.

450. Why did you choose that simple form of medical certificate?—We thought ours equally good.

451. You did consider them in detail?—Very carefully.

452. (*Chairman.*) Has any surgical operation been performed—do you see any objection to that?—None whatever.

453. Do you see any objection to asking the medical man to say definitely that there are no suspicious circumstances known to him?—No.

454. You aimed at making it as short and simple as possible?—No, we thought this was quite sufficient.

455. You don't see any great objection to any of these questions which the Cremation Society require to be answered by the medical attendant?—I don't quite remember now—one or two we debated a good deal—there are two medical men on the committee.

456. (*Mr. Byrne.*) It is obvious you aimed at simplicity?—Yes, we did in a way.

457. Still you would strongly recommend us to lay down instructions for the medical officer who passed these certificates?—I do, so long as you don't make the business expensive and troublesome.

458. (*Chairman.*) As regards cases in Hull, you would not see any objection to the man who gives the second certificate being nominated by the cremation authority?—No—my proposal concerning the parish doctor was made as a general one.

459. (*Dr. Parsons.*) Do you think it desirable that the fact of death should be certified in a case of proposed cremation—that one of the medical men should certify that he had seen the body, and that death had actually taken place?—The second man should—I think it would be feasible.

460. Is it desirable that the medical man should give a certificate that the body is that of the person named?—I don't think so—in very rare cases is that a requisite.

461. Is there anything that you wish to add to what you have said?—Yes; in regard to the cases of persons who die without medical attendance. In such cases the coroner's order for burial, supplemented by a certificate from the authorised medical officer to the effect that he had specially and separately investigated the cause of death, and was of opinion that death was due to natural causes, should be sufficient warrant for the cremation to be allowed.*

NINTH DAY.

Friday, 12th December 1902.

PRESENT:

Mr. C. E. TROUP, C.B. (*Chairman.*)
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER, *Secretary.*

Sir F. SEYMOUR HADEN, F.R.C.S., called; and Examined.

462. (*Chairman.*) Sir Francis Seymour-Haden, I wish on behalf of the Committee to thank you for the trouble you have taken in coming here to-day. We know the interest you have taken in the question of the disposal of the dead, and we should like to know whether you have any suggestions to offer on the particular matter referred to us by the Secretary of State?—Yes, but I should first like to be allowed to read Section 7 of the

Cremation Act: "The Secretary of State shall make regulations prescribing in what cases and under what conditions the burning of human remains may take place." This appears to me to put the Home Secretary into the position of entire responsibility in the matter. He has to say, "I can or I cannot make these regulations."

463. I think he is bound by the Statute to make regu-

* The witness handed to the Committee copies of a report of a lecture which he delivered at Hull on the subject of Cremation, and "A Quarter Century of Cremation in North America," by Mr. John Storer Cobb, published by Knight and Millet, Boston, 1901.

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lations?—Then to do that he must, from my point of view, really make regulations for the encouragement of crime. The duty of the Home Secretary in the matter is, surely, to make regulations for the safe burning of dead bodies.

464. To make it as safe as possible?—No, to make it safe. I cannot suppose that any responsible Minister would be satisfied to make such a proceeding as safe as possible. He would have to say, "I am satisfied, or not satisfied, that such a thing may be done without risk."

465. But is not absolute security impracticable?—Yes. What, however, I want to impress upon the Committee is this: the Act invests the Home Secretary with the power to say, "I cannot, or I can, conscientiously allow such and such certificates as sufficient warrant for cremation." The question before the Committee is entirely a matter of certificates. I know he cannot be satisfied with any such certificates as those which satisfy the Cremation Society; it is not possible for anyone to be satisfied with them. It is to be remembered that the burning of a dead body destroys all evidence as to how that body came by its death. How can it be safe to destroy such evidence? How many murders may, even now, have been committed under such conditions?—Murder is a much commoner crime than people suppose. A man who is, or may be, himself the murderer will give you such a certificate as will mislead even the Secretary of State.

466. Do you say that murder is very common?—Yes, commoner than is supposed.

466*. Then the possibility of exhumation has very little effect in checking murder?—Except as a deterrent, possibly but little; as a means of exposure, exhumation is, of course, of the utmost value. I should, however, like to be allowed to refer the Committee to the Article on cremation which appears in Vol. 192 of the "Quarterly Review" (1900), pages 45 to 67.

467. May we take this article in the "Quarterly Review" as expressing your views on the subject of cremation?—Every line of it.

468. I have read it with much interest. Have you anything to add to it?—If you have read it I shall only be troubling you with unnecessary detail. I am, however, perfectly convinced that the Home Secretary will never be able to devise a certificate which shall be even a proximate safeguard against crime in this business of cremation.

469. Is not the number of exhumations very small—not more than a dozen a year?—They ought, I think; to be more numerous.

470. If there is all this necessity for examining the body after death, would it not be better that where possible it should be done before the body is disposed of?—Certainly, if it were possible, but it is not possible. The Cremation Society have tried it, or pretended to try it.

471. Do you not think, then, that it is very desirable that more inquiries should be made into the causes of death?—Even then you will learn nothing from a mere inspection of the body, which is what the Cremationists are depending upon. The dead body never expresses anything. In the act of dying all the signs of ill-usage, however great, gradually disappear, and all that you see is perfect placidity; that being so, how can any stranger, or even an official, coming in to look at the body after death venture to back a certificate to the effect that the death was natural. I assure you it cannot be done.

472. (Mr. Byrne.) That relates to the mere inspection of a dead body, but not to further examination?—What further examination? As I have said, without a post-mortem it is impossible, and not then except it be performed by an expert—and where is the expert?

473. (Chairman.) You could find a good many practitioners competent to make a post-mortem?—Yes, in a case of physical injury; but not to make an analytical post-mortem, and without that you never can arrive at a satisfactory conclusion in cases of poisoning.

474. If there is any ground for suspicion or doubt as to the cause of death, do not you think it very desirable that an analytical post-mortem should be made before burial?—Possibly, but, first, what is to put it into your head that it is a suspicious case? And, secondly, an analytical examination may take a fortnight or more to

carry out. How could you keep a body unburied all that time?

475. (Dr. Parsons.) In what respect could information be more readily obtained from a body that had been exhumed than one that had not been buried at all? You are speaking of the difficulty of obtaining information as to the cause of death from inspection of the body—would not that apply equally to a body that had been exhumed?—No; you do not exhume a body simply to look at it, but to make a chemical or other examination of its organs.

476. That examination could be made better before burial than after?—Could it? I think not, for the reason I gave you.

477. Your remarks seem to point to the need for more care in regard to death certificates?—No, I have said that a certificate is, at best, but bad evidence, and one founded on a mere inspection of the body necessarily suspect.

478. In what way can you learn more from an exhumed body than one that has not been buried?—You can cut it to pieces and see what chemical, or other lethal matters it contains.

479. You can do that before it is buried?—Yes, but only if there is some cause for suspicion. In the Clover case, Dr. Stevenson, knowing how readily strychnine quit the stomach, looked for it also in the muscles. If an "ordinary practitioner" had seen the girl immediately after death he would not have had the faintest suspicion that she had even been poisoned, all signs of suffering ceasing *pari passu* with the passage of life.

480. (Chairman.) Your position is that you cannot make any suggestion on the subject?—I need make no other than has been made in that article on the "Quarterly Review."

481. We may take this article as your evidence?—Yes, as far as it goes.

482. (Mr. Byrne.) Do you consider the present system of death certification is so defective as to be an incentive to murder?—Yes; the present system of certification offers no more certainty than determines the payment of a sophisticated cheque.

483. Do you agree with the recommendations of the Death Certification Committee of 1892, or are they not sufficient for you?—No; that was a committee of cremationists, and the report it was able to make depended on its composition.

484. (Dr. Parsons.) What precautions could you suggest to prevent crime?—None, nor I should think could anyone else.

485. Leaving cremation out of the question, what precautions in the way of certification could you suggest to prevent the possibility of crime in the case of burial?—I could not suggest any, because the circumstances would not be immediately connected with the death. They would arise out of something that turned up afterwards. Once more, I do not believe in the certainty of any certificates.

486. You say the only safeguard of any value is the possibility of exhumation?—I do. It is the only safeguard of any value. All attempts to attenuate that value must necessarily fail.

487. (Chairman.) You would leave the certificates as they are now?—In so far as they were supposed to warrant the proceedings of the "Cremation Society of England," I would burn them; in so far as they are capable of being corrected by exhumation, I would leave them as they are now. A certificate is, as I have said, no better than a cheque—it may have value, or it may have none.

488. What ground have you for saying that undiscovered murders are so numerous?—Many grounds, but chiefly because one exhumation quite commonly brings out several undiscovered murders, all of them certified to have been natural deaths.

489. There are only about five or six exhumations made in each year in cases where crime is suspected, and in the majority even of these nothing comes of it?—Then I should say there is great mismanagement somewhere. To me this is surprising, and the statement that nothing comes of it even more so. Is it nothing that a man, say, who has cremated his wife, and is afterwards charged with having murdered her, is by exhumation relieved for ever of the horrible suspicion?

490. (Dr. Parsons.) If the plan of "earth to earth burial" were adopted, the chance of finding out any crime afterwards by exhumation would be less than now?—Well, it might diminish the value of exhumation, but it would not necessarily do so. Most of the mineral poisons tend to preserve the body, which facilitates and greatly enhances the value of exhumation.

[At the request of the witness the following extract from a paper, published by him in 1888, is appended to his evidence, as explaining his answers to Questions 475-6-8-9, and 485.

Extract.

I learn at the moment of going to press that the Cremation Society has withdrawn its promise of making a post-mortem examination of every body it burns, and that it is now satisfied with the usual certificate of the cause of death furnished by the practitioner in charge

of the case, supplemented, however, by a second, to be given by a practitioner who, being called in after the death, has nothing to go by but the appearance of the body and such an account of the case as the practitioner in charge may choose, or be able, to give him. So that if the practitioner in charge be mistaken or deceived (as has often happened), or, like Dr. Cross, of Dublin, or Mr. Palmer, of Rugeley, is himself interested in deceiving the second comer, where is the security of this second certificate? I submit that such a certificate offers none of the security claimed for it. The destruction, therefore, by cremation, of all demonstrable evidence of the cause of death—of all such evidence, that is to say, as is only to be obtained by the exhumation of the body—is a danger to society, and an arbitrary act on the part of an irresponsible body of persons, which ought to be at once made the subject of competent investigation, and, if its dangerous character is recognised, declared illegal.†

Sir
F. S. Haden,
F.R.C.S.
12 Dec. 1902.

TENTH DAY.

Thursday, 15th January 1903

PRESENT:

Mr. C. E. TROUP, C.B., Chairman.
Mr. W. P. BYRNE, C.B.

Dr. PARSONS.

Mr. WHEELER, Secretary.

Mr. WALTER SCHRÖDER called; and Examined.

491. (Chairman.) Mr. Schröder, you are Secretary to the Coroners' Society?—Yes; Honorary Secretary to the Coroners' Society and Deputy Coroner for Central London.

492. And are you able to express the views, more or less officially, of the Coroners' Society?—As a matter of fact, at the last meeting of the Council I informed them that the Cremation Act was passed, and then they requested me to communicate with the Home Office, and ask that they might be favoured with a copy of your proposed regulations, and beyond their asking my views on the matter, nothing further was done. When I received your letter on Saturday, I communicated with the President and Vice-Presidents to ask if they would come here to-day, and they replied suggesting that I had better attend.

493. We are anxious to have your views before we settle the draft which the Secretary of State has asked us to prepare. You know that we have already heard Dr. Thomas's views?—I mentioned at our Council meeting that he had been here, and I know some of his views, and, personally, I agree with everything he informed me he said.

494. Generally, his views amounted to this: that he thought the coroner was the best person to decide whether a case was a proper one for a lowing cremation?—I think that would be rather the view the Society would take for this reason—to avoid the possibility of any body being cremated that should come under the coroner's cognisance, with a view to preventing crime.

495. Do you think the coroners generally throughout the country would be willing to undertake the duty?—I think so, because the cases would be so few at present.

496. We rather understood from the Cremation Society that Dr. Thomas was always very willing to say in any case whether it was a proper case for cremation, but with that exception they did not get from any other coroner a statement whether he considered it a case for cremation?—Have cases been referred to the other coroners?

† The witness supplied the Committee with copies of the following Papers of which he is the author:—Earth to Earth: A plea for a more rational observance of the conditions proper to the disposal of the dead.—Edward Standford, 26 and 27, Cocksner Street, Charing Cross, S.W.; Bemrose and Sons, 23 Old Bailey and Derby. The Disposal of the Dead: A plea for legislation and a protest against Cremation; a paper read at the Church Congress at Manchester, 3rd October 1888.—Bemrose and Sons. A further protest against Cremation; a letter to the "Times," 19th October 1891.—The Rational Disposal of the Dead: A plea for legislation; a paper read at the 7th International Congress of Hygiene and Demography, the Society of Arts, 23rd November 1892.—London: Edward Standford. The Disposal of the Dead: A plea for legislation; a paper read at the Church Congress, Birmingham, 6th October 1893.—Bemrose and Sons, Ltd.

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Mr. W. Schröder. 504. At all events, even if the coroner was not referred to in perfectly straightforward cases, you think that he is the right person to decide in any case of doubt?—I think so, because he has the appliance; otherwise you will have to start a fresh set of officers. At the present time the coroner has no power legally to say a cremation shall take place.

504*. No, and I do not know whether we have got any power to say that the coroner must undertake the duty?—No, I see nothing in the Act of Parliament; of course there is no such power given in the Coroners' Act of 1887.

505. What would you say to the suggestion that the coroner might in some cases be appointed by the cremation authority as the referee to decide what cremations might take place?—Yes, I presume you mean a coroner in each district.

506. Suppose a crematorium established by the Birmingham Corporation, and they want to have somebody to decide in each case whether cremation is permissible, do you think there would be any difficulty about appointing the coroner?—No, I think he is the best man to be appointed.

507. Of course, that would only be done with his consent?—Yes.

508. It would be an additional appointment, and presumably carry a salary with it?—Yes; still, I quite see it would be difficult for the coroner to have a very wide area, because with cremation, as with burial, prompt action is necessary, and if the coroner, say, at Birmingham had a district extending some 40 or 50 miles out, it would be rather difficult. My own view is that something more is required than what exists at the present time as regards the certificates of the Cremation Society.

509. You do not think they are sufficient?—I do not. Many things occur of which the medical man knows nothing—in many cases the medical man is the last person to know of such matters; if the certificate was given upon what he knew, many cases of death which now form the subject of inquests would never come before the court at all, but it is from other information that we get that the coroner decides to hold an inquest.

510. You think the certificate of the medical man would not bring out the suspicious circumstances?—I think so; some other officer should make inquiries.

511. In every case of cremation?—Yes.

512. (Mr. Byrne.) In the sense that the certificate, although truthful, would be so ambiguous as to give no grounds for criticism?—However *bona fide* the certificate might be, the medical man would not know all the circumstances.

513. That refers to the certificate as used by the Cremation Society?—Yes.

514. Not to a certificate which might be made more particular and detailed?—No. I will mention one case. Many years ago a young lady was brought up, apparently by her husband, from Worcester, to a coffee house. A doctor called in finds she is suffering from disease of the liver. The husband is in great distress, and states that she insists upon having brandy. She dies two days after. The doctor certifies "Disease of the liver—chronic alcoholism." An anonymous letter came in, an inquest was held, and it was proved that he was not the husband, and that he had been dosing her with brandy for months to get rid of her. That man was sentenced to penal servitude for life. If the medical certificate had been accepted in that case and the body cremated, nothing further could have been done. We got the letter and stopped the funeral.

515. You would have stopped the cremation similarly?—Yes; the funeral had actually started. The letter only arrived just in time.

516. (Dr. Parsons.) I do not see what would have been gained by exhuming the body in that case; the exhumation would not have shown whether she took the alcohol of her own free will?—Yes, but no prosecution could follow without a post-mortem examination.

516*. It was admitted on all sides that she died from alcoholism; the question was what induced her to take the alcohol?—Before we sent that case for trial it was necessary to have a post-mortem examination to reveal

it; no man can be convicted of murder upon mere external symptoms.

(Chairman.) I suppose it amounts to this, that where you have got the body you must examine it as far as possible.

517. I suppose you would, at all events, hold that even when an inquest is held the coroner should agree with the verdict of the jury before a cremation should be allowed. Supposing the jury returned a verdict of death from natural causes, it is possible that the coroner might still think the case a suspicious one?—The only thing he could do is to adjourn the inquiry; he is bound to take the verdict of the jury.

518. It does not follow that he would allow the cremation?—He has no power to stop it.

519. But if he is to be made the person to decide, he would not go merely by the verdict of the jury?—Quite so.

520. (Dr. Parsons.) Is it not the case that in a large proportion of inquests no post-mortem is made?—No, just the reverse; in the majority of cases such examinations are made.

521. (Chairman.) In the case of a person found apparently drowned, would the coroner always order a post-mortem?—No, not always.

522. (Dr. Parsons.) Or sudden death from supposed heart disease?—Not if the deceased was known to be suffering from heart disease. Again, I say that, why I think the coroner is the best officer is because his inquiry officer is well known in the neighbourhood, and the chances are that when he is making inquiry, he would be readily informed of any suspicious circumstances.

523. (Mr. Byrne.) The coroner's officer being a constable, would make it painful for the relatives?—No; he would go in private clothes—they are in the habit of making these inquiries. In the coroner's districts of Central London and Central Middlesex we inquire into about 600 cases a year in which no inquests are held.

524. (Dr. Parsons.) In proportion to what number of inquests?—About 1,800.

525. (Chairman.) In London there is more tendency than there used to be to appoint medical men as coroners?—The tendency is to appoint doubly qualified men.

526. In the country the coroners, who are mostly solicitors, would not be particularly well qualified to judge of medical certificates?—No, but they would of the reports submitted to them by their officers.

527. (Dr. Parsons.) In the country a crematorium might serve not only for the immediate place, but for some distance round, and the borough coroner would not be in a very advantageous position to inquire into the circumstances of deaths in outside districts?—No, if the coroner is to do it, I think it must be the coroner for the district.

528. (Chairman.) Is there not a danger of delay in that case?—No, not more than in the ordinary inquiry. I think the coroners in the country and outlying districts telegraph, and so there is no delay.

529. In a borough, or a place like London, the coroner might perhaps do the work very well; but I do see a difficulty where you have got the death in one place, the coroner living in another, and the Cremation Society and its crematorium in a third?—I was only thinking of the best officer available for making the inquiries.

530. Your chief point is that there should not only be medical certificates, but further inquiry?—Yes; and that inquiry can be best made by the coroner and his officers.

531. (Mr. Byrne.) Looking through a number of death certificates, a large number of them, if true, absolutely preclude the idea of crime; what proportion would the ambiguous ones bear to the others?—Extremely small.

532. Where a death has been verified by two high-class doctors, why should any inquiry at all be made in that case?—Only as a special safeguard.

533. Would it be worth while to introduce that system of inquiry in every case?—Personally, I do not think many cases escape notice; the only question is whether for the sake of the possible one in fifty it is worth while to inquire into the fifty.

534. Do not you think everything could be met by having a very detailed and well thought out pair of certificates?—Yes; with submission to the coroner in certain cases.

534*. (Dr. Parsons.) It being understood that every case of suspicion should be referred to the coroner?—Yes.

(Mr. Byrne.) I take it that why the Cremation Society refer cases now, is because they are not satisfied with these certificates.

535. (Chairman.) I may say that the suggestion we have before us now is not to require the coroner to make the inquiry in every case, but to enable the cremation authority to employ the coroner as medical referee, in which event he would decide as to every case, but in any event, even if he is not employed as referee, that all doubtful cases should go to him. We have felt a difficulty in saying that the coroner is in every case the right person to decide?—Yes, I only suggested it because he has the appliances at hand; the officers

who make the inquiry are those engaged in similar work every day.

536. (Mr. Byrne.) In consideration of the great number of straightforward cases, if proper means could be made for getting before the coroner any case in which there was a possibility of suspicion, you would be satisfied?—I think so. Many cases are reported, and no inquest is held; probably in cremation cases it would be much less—not more than one in 20.

537. Is private information, combined with an innocent cause of death, frequently the cause of an inquest?—Yes, we receive an anonymous letter, and the doctor may have given a certificate; then we order a post-mortem if it is decided to hold an inquest.

538. Are there many cases like that?—No, not many—of course there are a good many cases of rumours.

539. (Dr. Parsons.) Is disease accelerated by neglect not a frequent case with old people and children?—Not a great number of old people, but it is with children.

540. Especially illegitimate children?—No.

Mr. W. Schröder. 15 Jan. 1903.