

LATE CORPORAL HIND.

LETTER TO HIS FATHER.

Mr F. E. Hind, of Maltby Avenue, has received the following letter from Lance-Corporal J. W. Robinson (who will be remembered as a popular official in the Timaru Post Office): -

It is with very great regret and deep sympathy that I write these few lines in reference to your late son Walter. It will interest you to know that I was with Wattie when he was gassed. We had just taken over the Cambrai trench in the Ypres sector from a Staffordshire regiment. Wattie (as we all called him) was in charge of the gas guard, and it was without doubt his keen devotion to duty and his thought for his mates that caused him to lose his life. A great number of gas shells were coming over, and Wattie was untiring in seeing that all his platoon were safe. To my own knowledge he had taken his mask off several times to test the air by smelling, thus running the risk of being gassed, solely to let his mates know if it was safe to remove theirs. During a lull in the shelling he had just taken his mask off, and had sounded "all safe," and was holding his mask in his hand, leaning against the trench, when Fritz started shelling again. A gas shell came over and burst on the parapet, within a few feet of him. Before putting on his own mask he gave the alarm, and although he was gassed himself went on with his duties, seeing that everyone was safe and had received the alarm. He carried on after for fully half an hour, and did not seem to have a thought for himself so long as the boys were safe, and although it was easy to see he was suffering, would have continued to do so had he not been almost forced to go to the dressing station. There is no doubt that giving the alarm before putting on his mask cost him his life, although it was the means of saving his mates.

Wattie and I had exchanged addresses before going into the line, and I would have written to you before, but could not find the hospital he had been taken to, and being wounded myself shortly afterwards had no way of finding out.

It came as a very great shock to me when I found he had died. We had been mates while in the Company together, and those of us that are left will miss him very much. He was always very popular with the boys in his platoon. As Corporal of No. 8 platoon he had a great deal to do with our rationing, mail, etc., and if any of the boys wanted anything, it was always "Go to Wattie, and - he will fix things up." He would always go to any trouble to set things right.

Several of his old platoon mates are over here wounded, and have asked me to express to you their deepest sympathy, and to state that they consider your son's action was the means of saving a good many lives that night. In conclusion I can

only say that Wattie was a man in the best sense of the word, and I hope these few lines from one of his mates will help a little in your sorrow.

Evening Post. 20 June 1922 (page 4) [09/01/2016]

DEATH UNDER ANAESTHETIC

(BY TELEGRAPH.—PRESS ASSOCIATION.)

TIMARU, 19th June.

An inquest was held this evening into the death in hospital, under an anaesthetic in preparation for an operation, of James William Robinson, 40 years of age, a single man, and a returned soldier. Deceased had not been in good health, and was attended for pneumonia for some weeks, and after consultation was sent to the hospital.

Empyema was suspected, and afterwards was verified. The patient's condition became so toxic that an operation was considered a matter of necessity. While Dr. Stringer was administering the usual anaesthetic, the patient collapsed, and artificial respiration, stimulants, and, as a last resort, heart massage through the abdomen, failed to restore life. The doctors recognised that it was a dangerous case for an anaesthetic, but operation was the only hope of preventing death from internal poisoning.

The Coroner found that death was due to the administering of an anaesthetic to deceased, who was suffering from an extremely toxic condition.. The operation was undertaken of necessity, and every possible precaution was taken in administering the anaesthetic.

Press. 20 June 1922 (page 9) [09/01/2016]

TIMARU, June 19.

An inquest was held this evening into the death in hospital, under an anaesthetic in preparation for an operation of a patient named James Wm. Robinson, aged 40, single, a returned soldier, who was wounded in the left arm. He was a cooper by trade, and returned to it after the war. He had not been in good health, and was attended by a doctor for pneumonia for some weeks, and after a consultation he was sent to the hospital. On the 12th inst. empyemia was suspected, and verified on the 16th. The patient's condition was so toxic that an operation was considered a matter of necessity, not choice. He was quite willing to undergo the operation. While Dr. Stringer was administering the usual anaesthetic and Dr. Gibson was preparing his hands to operate, the patient collapsed, and artificial respiration, stimulants, and, as a last resort, heart

massage through the abdomen, failed to restore life. The doctors recognised that it was a dangerous case for an anaesthetic, but the operation was the only hope of preventing death from internal poisoning. The Coroner found that death was due to the administering of an anaesthetic to the deceased, who was suffering from an extremely toxic condition. The operation was undertaken of necessity, and every possible precaution was taken in administering the anaesthetic.

Timaru Herald. 20 June 1922 (Timaru District Library) [16/02/2014]

INQUEST.

SUDDEN DEATH.

UNDER ANAESTHETIC.

An inquest was held in the Courthouse last evening by Mr E. D. Mosley, coroner, into the death of James William Robinson, at Timaru Hospital, on Sunday morning.

Senior-Sergeant Fahey called the following witnesses: —

John Henry Robinson, stated that deceased was his brother, a single man, aged 40. He returned from the war, where he was wounded in the left arm, in 1919 since when he had had fairly good health till early this year. He became seriously ill about a month ago and was attended by Dr. Dryden. Then Dr. Gabites was called in consultation and his brother was sent to the hospital. He saw him there last Saturday morning and his brother said he was to be operated on, and he did not think he would come out of it —he might recover or might not. He called again on Sunday morning and found that his brother was dead. He could not say whether his brother was gassed or not in the war.

Dr. L. B. Stringer, Resident Medical Officer at the Hospital, stated that deceased was admitted on June 12, suffering from chest trouble. He had been attended by Dr. Dryden for three weeks. Empyema in the right side of the chest was suspected, and this was confirmed by aspiration (drawing off liquid) on June 16, and arrangements were made for an operation to remove the septic fluid from the pleural cavity on Sunday. Tubercle was also suspected. Deceased's condition was very serious from the time he entered the hospital. He was quite willing to have the operation, which was a matter of necessity in the circumstances, not a matter of choice. He had been well examined by several doctors. Witness thought deceased might take the anaesthetic satisfactorily, but decided to administer it himself, and let Dr. Gibson operate. (Dr. Stringer, in

reply to the Coroner, described minutely the anaesthetic mixture used. The components were of recognised brands and had been successfully used before.) Dr. Gibson, nurses, and his assistant were present. The patient was fairly well under the influence of the anaesthetic when he collapsed and died. Artificial respiration was resorted to, and appropriate stimulants were administered, both without avail, and massage of the heart through the abdomen was tried as a last resource, without result. The patient died from heart failure due to his toxic condition. His death was no doubt hastened by the anaesthetic, but he could not have lived much longer without an operation. The anaesthetic was administered with every precaution. It was a case for operation regardless of consequences. Dr. Gibson gave evidence to a like effect. He had seen a statement by Drs. Dryden and Gabites, who had seen the patient before he was sent to the hospital. He had been tested for pus in the chest cavity, without result, but Dr. Stringer found it on June 16, and an operation was arranged for Sunday morning. Dr. Stringer was of opinion that there was a great risk in giving the anaesthetic and therefore administered it himself, while witness and the assistant were to operate. Dr. Gibson described the efforts to resuscitate the patient, he performing the heart massage. The immediate cause of death was the administration of an anaesthetic to a patient in an extremely toxic condition. There was not only a toxic interference with the heart, but also a mechanical interference by pressure of fluid in the chest cavity, following on pneumonia. The Coroner recorded a verdict in accordance with the evidence that death was due to the administration of an anaesthetic to a patient in an extremely toxic condition; that the operation was one of necessity, not choice, and that every possible precaution was taken in administering the anaesthetic.