during the last illness; B. the nearest relative resident in the sub-district; C. any person present at the death : D. the occupier of the house in which the death occurred; E. the person causing the body to be buried; or F. the coroner by order when an inquest has been held. Notice of death must be given within 5 days next following the death, the informant signing the register. The informant generally takes a certificate of the cause of death. signed by a registered practitioner, which the registrar retains, giving a certificate of registry to the informant, who, finally, or through the undertaker, delivers it to the person who buries the body or performs any funeral service over the body.

From the above it appears the law is more concerned in having the fact of death registered than the cause. Thus, according to the 53rd Annual Report of the Registrar General, 562,248 deaths were registered, but of this total the cause of death was certified by registered practitioners in 514,720 cases ; 31,587 were certified by coroners after holding inquests ; while 15,947 were not certified. 25.883 deaths were entered under the ambiguous heading "ill defined and unspecified causes." These figures show that the cause of death is not certified medically in a large proportion of cases. For instance, take the cases certified after a coroner's inquest. Here the fact is not mentioned whether a post-mortem has been made or if medical evidence was called. And remembering some of the findings of coroner's juriessuch as " found dead," " death from natural causes," or "death from visitation of God," we can form an idea of the value of a coroner's certificate of the cause of death. Again, take the cases over which the coroner is given power, by Section 3 (1) of the Coroners Act 1887, to order the registrar to register a death when no inquest has been held. This includes all "reported to the coroner independently

of the registrar." To explain-a child is found dead, and the fact is reported to the police. No medical certificate of the cause of death is obtained because previous to death the child was not under medical treatment. Here the police constable steps in, asks a few questions, sends off his report to the coroner, and the latter, on receipt of this report, sends a certificate to the registrar, stating that he " does not ' consider it necessary to hold an inquest respecting such death." A special form of certificate is provided by the Registrar General (see form). Again, notice those deaths referred to the registrar and where no medical certificate of the cause of death is obtained. Here the registrar asks some questions of the informant, and if satisfied registers the death, adding, it is "not medically certified." If the registrar is not willing to accept the risk, he refers the case to the coroner, who orders his official to make inquiries. If this officer is satisfied, so generally is the coroner, and no inquest is held. Such systems are open to the greatest abuse. The abuse springs partly from the facts that the coroner does not wish to increase the costs of his office, and because the police do not care to interfere unless they are certain of obtaining a conviction if a prosecution is instituted. They are aided by some coroners who seem to think their whole duty" is to detect crime and not to find the cause of death.

These defects would be removed if: A. The office of registrar of births and deaths were held by medical practitioners, as is the case in Ireland; B. if the medical certificate of the cause of death were sent by practitioners *direct to the registrar*, and not to the relatives, and that it would be illegal for any practitioner to use any Form of certificate of the cause of death other than that provided by the Registrar General; C. if no body could be buried until the death had been registered; D. if the