vered in with moderate stimulation and effervescing draughts and soda-water freely.

October 29th, 6.30 A.M. He was much the same, but the vomiting and purging abated somewhat. The heat of the skin was improved. The treatment was continued as before.

1 P.M. There was distinct blueness of fingers and toes, especially of the nails; and the features were pinched; the tongue cold. There had been no vomiting or purging for several hours.

6 P.M. So far as could be known, no urine had passed for the last twelve hours. The skin was more livid; the features more sunken; no pulse. From time to time he tried, but scarcely partook of, different articles of nourishment; he sought for beef, eggs, milk, etc., but took only a little wine.

In the course of the night there was little change; but next morning, about 8.40, a sudden collapse took place, and he died without a struggle after less than forty-eight hours' illness.

The following precautionary orders were issued after the first case; viz., that the bed and bedclothes of the deceased be burned; that the body be interred with the least possible delay; that the room in which the patient took ill and died be disinfected by chlorine water and chloride of lime as soon as the body is removed; that all officers watch the prisoners carefully, and report immediately to the surgeon any case of diarrhoea or disturbance of the stomach and bowels; and that all sewers, sinks, and water-closets be flushed daily with fresh water, chloride of lime being freely used.

These orders continue to be carefully carried out, and no diarrhoea of any consequence has taken place since the death of W. McD. on the 30th October last. About the time when this case occurred, the city of Perth was suffering from a visitation of epidemic cholera, which has for several weeks been abated entirely. Neither of the two cases in the General Prison could possibly have been introduced by personal communication with the disease; and no explanation can be offered to explain their appearance within the walls of the prison.

REMARKS ON A LEGAL TEST OF RESPONSIBILITY.

By R. THORNE THORNE, M.B.LOND.

THE announcement just made to the public, that Mrs. Vyse has received Her Majesty's free pardon, and has returned to her family in a state of perfect health, so forcibly reminds me of the present inefficient state of our law in reference to criminals who are pronounced by medical evidence to be irresponsible agents on the ground of insanity, that I venture to offer a few remarks on the subject.

It will be remembered that, in July 1862, the accused having, evidently for the purpose of murder, bought some Battle's Vermin Killer, returned to her home, administered it to two of her children, who both died within an hour of having taken it, and then made an attempt on her own life by cutting her throat. In the course of the trial, it transpired that the prisoner had recently been suckling, and had been mentally overworked; that she had exhibited signs of morbid mental excitement; and that insanity had manifested itself in several members of her family.

Dr. Forbes Winslow and Dr. Hood both gave evidence which clearly proved that, at the time when she committed the murders, the prisoner was in an unsound

state of mind, and consequently not responsible for her actions; the former stating it as his opinion that she was labouring under a form of disease termed paroxysmal insanity, which was liable to lie dormant and to break out suddenly under the influence of any exciting cause. The judge then summed up, and informed the jury that if they believed "that at the time the prisoner poisoned the children she was in such a state of mind as not to be able to distinguish between right and wrong, they ought to acquit her."

Now, it is against this test of responsibility, which is founded upon the consciousness of the individual, that I wish to protest; maintaining, as I do, that it is both unjust and ineffectual, and therefore open to most serious objections.

It is unjust for several reasons. Thus, in the first place, it is quite absurd to expect any twelve men, whether jurymen or not, to possess a sufficient amount of metaphysical knowledge, and to be so thoroughly conversant with the human mind in its unsound state, as to enable them accurately to judge from evidence laid before them, whether the alleged lunatic was or was not capable of distinguishing between right and wrong at the time when the deed was committed. And the result of expecting this extraordinary amount of skill, is clearly seen in the directly opposite results obtained under circumstances of almost absolute similarity; thus, in the case of Mrs. Vyse, the jury acquitted the prisoner, but, in the case of George Clark, who was tried in October 1862 at Leeds, for the murder of Mark Fraser, and on which occasion Mr. Justice Willes laid down the same rule of law, the jury, after attentively listening for some hours to the incoherent and inconsecutive ravings of a man whose every idea seemed to be connected with one or more delusions, pronounced a verdict of guilty.

Again, this rule of law is unjust, because the theory on which it is founded is directly opposed by experience: and in making this assertion I am not actuated by mere caprice and prejudice, for I have carefully examined a considerable number of lunatics, under confinement as such in Dr. Forbes Winslow's asylums, in order to ascertain whether this test was of the slightest value.

In making this examination I carefully ascertained from each patient:—

1. Whether they understood the effect which would be produced if they fatally assaulted any of their fellow creatures?
2. If they knew whether murder was wrong in the sight of God and man?
3. If they knew how the law would deal with them as murderers?

I purposely chose those patients about whose condition, as irresponsible agents, the merest tyro in lunacy could have no doubt, and they all gave me answers which proved that they thoroughly understood the difference between right and wrong, and in every other particular were able to appreciate the condition in which they would be placed if murderers.

In order not to occupy much space, I will only quote one of these conversations from my note-book. The patient with whom I held it had been under certificate as a lunatic for fourteen years, and was the subject of paroxysms of great violence, during which he used the foulest and most blasphemous language, and broke everything he came in contact with. He stated that he was possessed by a spirit, and his neck exhibited scars, which remained after two attempts at suicide, to effect which, he stated, his spirit had prompted him. He believed that he was Christ, and refused to use the pronoun *I*, because he believed its use to be contrary to the Word of God.

Our dialogue was as follows.

Q. If you were to fire a loaded revolver at, or were to stab a person, what would be the result? A. It would kill if *me* did it with forethought and malice.

Q. Do you consider that the commission of such an act would be right or wrong in the sight of God and man? A. *Me* consider it wrong. Certainly!

Q. What would be done to you if you committed such an offence? A. The law says, *me* should be hanged by the neck until dead.

Q. Do you under all circumstances obey the dictates of the spirit within you? A. *Me* do.

This last answer is, of course, an admission that, had he been prompted to commit murder instead of suicide, he would have done so; and I think I may fairly conclude that such a recital of facts requires no comment.

The rule of law relating to the knowledge of right and wrong is also ineffectual; for, even when the verdict of guilty is passed, we find that the learned judge generally feels bound to acquaint the Home Secretary with the *peculiar circumstances of the case*, and the result is the same as that which occurred in the case of George Clark; namely, that the prisoner exchanges his cell for the ward of a lunatic asylum.

This rule of law also becomes ineffectual, because it is entirely ignored by the jury; they do not acquit a prisoner because he cannot distinguish between right and wrong, but, as we invariably see, "*on the ground of insanity.*"

As the result of inquiries which I have made in reference to this matter, I feel myself justified in drawing the following conclusions.

1. That, given a number of homicides, all suffering from mental aberration to an equal degree, the verdicts of the juries summoned to try their cases would, if they acted on this rule of law, exhibit a lamentable want of uniformity.

2. That many persons of unsound mind suffer from a form of mental disease, in which, irrespectively of delusion, they are so forcibly prompted to perform that which they know to be evil, that they lose all power of control over their actions.

3. That by far the majority of persons confined as lunatics, who are not absolutely idiotic, imbecile, or demented, know right from wrong.

4. That, if all the lunatics now confined in asylums were to commit murder, at least 90 out of every 100 would, if judged by this rule of law, be found guilty and condemned to death.

CASE OF HERNIA.

OPERATION: INTESTINE ADHERENT TO SAC: DEATH:
POST MORTEM EXAMINATION.*

By WILLIAM NEWMAN, M.D.Lond.,

Surgeon to the Stamford Infirmary, St. Martin's, Stamford.

J. W., aged 71, was admitted into the Stamford Infirmary on July 10th, 1866, under my care. He was a thin, withered old man, looked anxious, and complained much of pain about and across the abdomen. He stated that he had been ruptured on both sides for some years, and had worn a double truss, but not constantly. The ruptures came down on July 5th; and since that time his bowels had not acted properly. He had, too, been sick on the day of admission and the previous day. Just before I saw him, a little blood-stained mucous stool was passed *per anum*.

The conditions when I saw him were: Two lax and large inguinal rings, through which movement

or coughing sufficed to drive some portion of intestine. The so-formed hernia were readily replaced. There was a small nodulated femoral hernia on the left side, which could not entirely be returned. Pressure and manipulation of this did not give pain. A large swelling at the right femoral aperture, of the size of two walnuts, was unaffected by the taxis, was in some measure the seat of pain, unaffected by coughing, and to the touch firm and smooth.

It was agreed, after a consultation of the surgeons, that I should cut down at once on the swelling at the right femoral ring, and make out its real character. The constipation and sickness pointed to strangulation of some part of the intestine; and the symptoms had been present more or less for five days.

The operation was commenced at once. The ordinary incision was made under chloroform; and, after dividing several layers on a director, a thickened and laminated sac was reached. Some serous fluid (blood-stained) escaped when this was opened. A very firm stricture, made by Gimbernat's ligament, was divided upwards and inwards; but the contained intestine, which was dark coloured, much congested, but yet had not lost its polish, could not with any reasonable pressure be returned into the abdomen. The external incision was enlarged, to allow a more close inspection; and then it was found that the knuckle of intestine was firmly adherent, and to some extent, to the sac on the outside and posteriorly; so much so, in the opinion of all present, as to render it inadvisable to make any further attempt at reduction. The operation was of necessity tedious.

July 11th, 12 A.M. The patient had one grain of opium at 1 A.M., and another grain at 7 A.M. He was fairly comfortable, and did not complain of pain. Pulse 100; tongue rather dry. He had not passed urine; had no sickness since taking the opium. He was ordered to have milk, beef-tea, and a quarter of a grain of powdered opium every four hours. A catheter was passed.

7 P.M. Pulse 103. He had had a little sleep, and was not in pain.

July 12th. There was little apparent change. The bowels had not acted. Pulse 110; tongue dry. The catheter was passed regularly. The abdomen was tympanitic. The wound was dressed with lotion of Condyl's fluid. He was ordered four ounces of brandy.

July 13th. He was much the same, not in pain, nor sick. He had slept fairly well. Pulse 103. He was ordered six ounces of brandy.

7 P.M. His bowels had acted. An abundant dark, loose, faecal motion, with some dysenteric mucus, passed afterwards.

July 14th. He had had a good night; no sickness since the operation. The bowels acted two or three times in the day, and very frequently in the evening, despite the free use of acetate of lead and opium.

July 15th. He was much worse; was half unconscious. There was no sickness. The bowels had acted very frequently, and the motions now ran away without his knowledge. He was sinking fast.

July 16th. He died at 6 P.M. A few hours before death, faecal matter was found to escape at the wound.

POST MORTEM EXAMINATION, July 17th, 2.30 P.M. The abdominal cavity was opened by a central incision from the umbilicus to the pubes, and a transverse one just below the umbilicus, crossing the first one at right angles; and the flaps were thrown back. The external wound was unhealthy in appearance; part of the sac threatening to slough. The intestine

* Read before the Shropshire Scientific Branch, Oct. 25th, 1866.