assistance, but were unable to go to him. They were taken between eight and nine o'clock in the evening with sickness, followed by copious spontaneous vomiting, griping pains in the stomach and bowels, headache, with high febrile excitement, and full bounding pulse. I bled them both, with much relief, and gave castor oil, followed by saline medicine in the state of effervescence, and adopted a strictly antiphlogistic regimen. They recovered in about a fortnight, and have not suffered any serious ill effects. I could not ascertain how much of the pudding was eaten by deceased—none was forthcoming for my inspection. On my first visit Amy Marshall told me she had eaten some of it, and that she had been very sick and ill about eleven o'clock; but when I questioned her about it the next day, she said she only took a small quantity, as it made her so sick and ill, and affected her head so much, she could not eat more; she presented no appearance of indisposition. The deceased and his wife and daughter lived very unhappily together, and had very frequent and serious quarrels. Some of the pot liquor, in which the supper had been boiled, was sent to my house by my request; and a parcel of flour was also sent by Mrs. Johnson, unasked for by me, *said* to be part of what remained after deceased's pudding had been made. The flour was examined by the usual tests, and contained no arsenic; on the other hand the pot liquor afforded abundant indications of its presence, by passing a stream of sulphuretted hydrogen gas through it, and also by adding a small quantity of the ammoniacal sulphate of copper; the silver test was not applicable, on account of the presence of common salt.

I was requested by the coroner to make an examination of the body of the deceased, on Wednesday, November 10. Mr. George Stanger, of Nottingham, surgeon, and Mr. Parsons, surgeon, of this place, were present. The body externally presented nothing remarkable, except that the fingers were all permanently flexed, and the hands were somewhat livid. The heart and lungs were healthy, except some old pleuritic adhesions on the left side; the blood in the great vessels was in a fluid state. The stomach contained about a pint of bloody fluid; the mucous membrane generally was intensely red, and about the greater and lesser curvature presented a mottled appearance from the extravasation of blood beneath it; the mucous membrane of the duodenum was slightly injected, and this portion of the small intestine contained, mixed with the chyle and mucus, a white* gritty powder, a part of which was removed and placed in a gallipot tied over with bladder, and, with the stomach, conveyed to my residence. I gave the stomach, which I had put into a bladder, and the gallipot, into the hands of Henry Stewart, labourer, to convey to my residence, and I received them from him at my house. The matters removed from the duodenum were boiled in clean water for a considerable time, and the liquid was then filtered; through a portion of this filtered liquid, after the addition of a small quantity of acetic acid, was passed a stream of sulphuretted hydrogen gas for some minutes, a copious yellow precipitate was thrown down; this precipitate was subsequently dried and placed in a tube with a small quantity of black flux, and a distant coating of

metallic arsenic obtained from it. To another portion of the filtered liquid was added a few drops of the ammoniacal nitrate of silver; this occasioned a lemon yellow precipitate of arsenite of silver. To another portion was added a few drops of the ammoniacal sulphate of copper, which occasioned a green precipitate of arsenite of copper. Another portion of the filtered liquid was placed in Marsh's apparatus, and from this, numerous plates of metallic arsenic were obtained on pieces of common window glass; that these spots were metallic arsenic was demonstrated in the following manner: by holding the glass a few seconds in the flame of the jet, after the metal began to be deposited, a portion of the sublimed metal became converted into arsenious acid, and was seen as a distinct white coating or halo upon the glass; to this was applied a single drop of the ammoniacal nitrate of silver on the one side, and the same quantity of the ammoniacal sulphate of copper on the other side, each test producing the characteristic indications—the former a yellow, and the latter a green precipitate. I stated at the inquest, that, taken collectively, these tests afforded ample proof of the presence of arsenic in the alimentary canal, and that death had been occasioned by arsenic. The jury returned a verdict of "Wilful Murder" against Ann Johnson and Amy Marshall, and they were committed to Lincoln Castle; their trial took place at the recent assizes on the 8th instant. The learned judge asked me this question, "Is arsenic a mineral poison, soluble in water?" To which I replied, "To a certain extent it is; a pint of boiling water would take up a considerable number of grains."† The learned judge also asked, "Could the arsenic which you found in the deceased's small intestine have got there from the pot-liquor?" to which I replied, "Certainly not." I have preserved the sealed tubes and plates, but was not asked to produce them in court. The learned judge, in summing up, said, there was no evidence produced to implicate the elder prisoner, and left it to the jury to decide upon the guilt or innocence of the younger prisoner. After deliberating about half an hour, the jury returned a verdict of *Not Guilty*.

* From some very carefully conducted experiments, Mr. Taylor draws the following conclusions:—

1. "That hot water allowed to cool from 212 deg. on this poison, dissolves less than 1-400th of its weight, or about 1-4 grain to each ounce of water.
2. That water boiled for an hour on this substance, dissolves 1-24th of its weight, or rather more than 20 grains to each ounce.
3. That this water (2), on perfect cooling, does not retain more than about 1-40th of its weight, or 12 grains to the ounce.
4. That water boiled on arsenious acid, to the most perfect state of saturation, after having stood six months, holds dissolved about 1-38th of its weight, or 13 grains to the ounce.
5. That there is no observable difference in the solubility of the transparent and opaque varieties of arsenious acid.
6. That water at ordinary temperatures will dissolve from about 1-000th to 1-500th of its weight, or from half a grain to one grain to each ounce of solvent, according to circumstances.
7. That the presence of *organic matter* in a liquid is an obstacle to the solution of this poison. Thus, hot tea and cold porter will not take up more than about half a grain to the ounce; while hot coffee and cold brandy do not dissolve more than a grain to the ounce."—Vide "Guy's Hospital Reports," vol. 2, page 102.

* Dr. Christison states, in his work on Poisons, page 226, second edition, "As now sold in the shops the powder is as fine almost as flour, which it is important to remember, since the grittiness, described in the older works as felt in the mouth, and arising from its having been coarsely powdered, will no longer be remarked so distinctly." I called upon Mr. Anderson, a druggist in this town, and asked for a specimen of the white arsenic usually sold for agricultural purposes; although finely powdered, it felt gritty between the fingers and thumb. The gritty sensation imparted to the fingers by the arsenic, observed in the small intestine, was remarked by the other gentlemen present at the examination as well as by myself; the quantity observed was estimated, at the lowest computation, as not less than from 20 to 30 grains.

WEST COVE AND KILCROHANE DISPENSARY.

Report for the Year ending May 1, 1841.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—Should you deem the accompanying dispensary report, with the few observations attached thereunto, of any interest, you would oblige me by giving them a place in the next number of your useful and practical publication. The cases are given in the

order of their frequency, and as taken from the daily journal. The average number of patients very nearly corresponds with that of my late much lamented predecessors, Drs. O'Sullivan and O'Connor, as it also does with my own reports for the two preceding years. It may be necessary to state, that these districts are on the sea-coast, and extend along it for nearly fifteen miles. The population, by the former census, was nearly 8,000, and the numbers relieved on the dispensary books averaged in or about 3,000 yearly.

I am, Gentlemen,

Your obedient servant,

JAMES B. THOMPSON, A.B., M.D.,
Late Surgeon Accoucheur, &c., to the West Cove
and Kilcrohane Dispensaries.

London, March 16, 1842.

<i>Fevers.</i> —Intermittent, continued, typhus, hectic, and the eruptive, scarlatina, measles, swine and chicken-pock, &c.	254
<i>Diseases of the Chest.</i> —Pneumonia, pleuritis, bronchitis, influenza, asthma, phthisis, hæmoptysis, hydrothorax, empyema, &c.	422
<i>Diseases of the Digestive Organs.</i> —Dyspepsia, indigestion, various forms of dysentery, diarrhoea, colic, cholera	560
<i>Diseases of Children.</i> —Whooping-cough, worms, croup, dentition, convulsions, aphthous sores, &c.	221
<i>Diseases of the Eye.</i> —Purulent and scrofulous ophthalmia, iritis, cataract, amaurosis, inversion and eversion of lids, ptosis, &c.	123
<i>Accidents.</i> —Fractures, contusions, wounds, injuries, scalds, burns	130
<i>Diseases of Brain.</i> —Hydrocephalus, epilepsy, apoplexy, cephalalgia, &c.	72
<i>Rheumatism.</i> —Acute and chronic, sciatica, lumbago, &c.	112
<i>Operations.</i> —Amputations, reducing fractures and dislocations, various minor surgical operations	150
<i>Diseases of Skin.</i> —Pustular, scaly, papular, scabies, porrigo, &c.	142
<i>Abscess and Ulcers.</i> —Mammary, scrofulous, psoas, cancerous, indolent, varicose, boils, anthrax, &c.	124
Midwifery Cases	139
Diseases of Women	64
Hæmorrhoids	22
Vaccinated	240
Scrofula	50
Syphilis	80
Erysipelas and Erythema	38
Diseases of Throat	64
Diseases of Urinary Organs	20
Hernia	5
Gonorrhœa	12
Deaths and Incurables	24
Total	3,068

OBSERVATIONS.

I have found that fever has increased during the last spring and autumn by nearly thirty cases, as compared with the preceding reports of 1839-40; and this I attribute in a great measure to the prevalence of wet weather and the scarcity of fuel in these districts. One thing I observed, too, in the fevers latterly—that the lungs were more engaged than usual, particularly towards the end of the second week, and in old subjects this state required a good deal of attention, and demulcent expectorant medicine, with a light nutritious diet. Scarlatina and measles, though very prominent, were of an unusually favourable and mild form, only one death being occasioned by the former. Two deaths resulted from consumption, and three were suffering from hæmoptysis when this report was made out; they suffered under it for a long period.

one for two years and a half and the other two for a less period. Under the head digestive organs, it may perhaps appear strange to some of your readers to have such a large number; but when the inferior and flatulent diet, on which the Irish peasantry subsist, is taken into consideration, I have no doubt it will account in some respect for the great prevalence of indigestion amongst the poorer classes in Ireland. It is properly called the "Irish complaint," and nothing seems to afford those suffering from some forms of this complaint greater relief than the application of the plain tumbler, in the manner of a cupping-glass, to the epigastrium. In older subjects, and in females, where there is a tendency in the ensiform cartilage to become incurved, cupping in a similar manner gives very considerable relief, and is constantly resorted to by the old scientific ladies in the very wildest and remotest districts of the south and west of Ireland; in fact, some few of them go about the country on purpose, and make a living by their practice in this respect. They even go so far as to bleed and inoculate some of the poorer classes, who have still an objection to vaccination. The practice of indiscriminately ordering purgatives in these cases of indigestion is, I fear, too generally and frequently adhered to. What I found the most successful practice was that of directing a mild aperient and alterative pill at night, followed next morning by a bitter or tonic aperient draught, improving, if possible, the ordinary regimen, using steamed and crisped potatoes instead of boiled ones, for they must be allowed in some form, as the majority of the working classes cannot procure anything else. Diarrhoea and dysentery were more than usually prevalent during the months of June and July, owing to the great scarcity of food at these seasons, which form the period of interval between the old and new potatoes; besides, the latter are generally resorted to much too soon, when they are soft, soapy, and unfit for use, and are eaten without butter or animal food, or perhaps the plain adjuncts of milk or salt. There were only two deaths in very old subjects, one seventy and the other sixty-four years of age.

The diseases amongst children were also more numerous than in the former reports, owing probably to the great prevalence of cold and wet weather, with constant easterly winds during the spring months. Two deaths occurred in this class, one from convulsions, and one from croup.

The diseases of the eye were also more than usually frequent, owing to the last-named causes. The subject of accidents does not require any remark; they, of course, must vary. But diseases of the brain are rather on the decrease since the last reports, owing, as I am disposed to suppose, to the people now coming at once for advice, and submitting more to the directions of the medical man, and allowing the fever patients to have their heads shaved, against which, till very recently, the Irish peasantry generally object. One death occurred from hydrocephalus in a child, and one from apoplexy in an old man, aged sixty-six.

The next disease or affection is that of rheumatism, which is always very prevalent on the sea-coast, where the people are generally half farmers, half fishermen, out late and early in cold and wet, and not having very often a change of clothes when they return home; hence rheumatism, in its varied forms, is commonly met with in these localities. Diseases of the skin are also more commonly met with on the sea-coast than in the interior, owing to the salt fish, which is the constant and principal diet. The different forms of abscess and ulcers are, too, I think, attributable in a great degree to this latter cause.

In 139 cases of midwifery, there were only three unnatural presentations—one of the arm, one of the breech, and one of the funis. There were only two still-born children, and one case of twins. The dis-

cases peculiar to women are about the average number yearly on the books. The number of cases of hæmorrhoids is larger than usual, owing to the wet and cold season before alluded to. This is, however, an affection not much met with in country practice, where the people are generally healthy, and have good air and a great deal of vigorous exercise. The number vaccinated was 240; all were successful, except two doubtful cases, and two not afterwards seen. Scrofula is less prevalent than heretofore; but syphilis is more so than ever, owing to the introduction of the disease into the country by the men employed on the survey at present going on in Ireland. It has extended itself in the line of the travels of the sappers and miners in the mountains and vallies of the whole country.

NEW MODE OF ACCELERATING LABOUR.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—If the following practical hint merit a place in your Journal, I shall be glad if you will give it insertion, as it is calculated to shorten the sufferings of the tender sex during parturition, and save much time of medical men who are in extensive practice.

I am, Gentlemen,

Your obedient servant,

SAMUEL STANILAND.

Fareham, Hants, March 14, 1842.

Being a midwifery pupil of Dr. Blundell, I of course carried his valuable instructions with me into practice, and one (not the least—viz., that “meddlesome midwifery is bad”) had much influence on my conduct when called to attend the parturient female. At first the unnecessary calls which were made for my attendance, and the frequently slow progress of labour in others, where the true expulsive efforts had commenced, together with the circumstance of being urged, on various occasions, to assist labour if possible, made me reflect upon the nature of the physiological action of the uterus, and the expulsive action of the abdominal muscles. Much thought on the subject, connected with the latter action on the rectum, bladder, stomach, and lungs, when irritating substances need expulsion, led me to the consideration of the process of labour, which appeared to me to be an analogous action, and I at length found the principle of imitation of the natural stimulant power, which I have now ten years carried into very successful operation, not only with a saving of much suffering to the patient, but an immense saving of time to myself.

When I first practised it, I was not so conversant with the physiology of the animal economy (except by book and school knowledge) as at present; yet, having studied Nature's designs in her various sympathies, the principle of excitation and reflex influences came to my assistance, and taught me that, as the bladder, when distended with urine, and the rectum distended with fæces, call upon the abdominal muscles to expel their contents, so would an excitement, similar to that of the head of the child, or the unbroken membranes on the vagina in their passage, promote, under proper circumstances, the natural efforts, and lead to a more speedy and equally safe labour.

The principle being given, what is the practice, and under what circumstances, should the operation be performed?—for I desire never to forget Dr. Blundell's valuable maxim.

The practice consists simply in imitating the influence of the child's head or membranes on the natural passages, and thus producing a reflex and

wholesome contraction of the abdominal muscles (I say nothing of the independent action of the uterus), by introducing the forefinger, or fore and second fingers, as far as the point of the os coccygis, and passing them along the whole surface downwards of the vagina, so as to give the sensation of distension, not pain, just enough to excite the required action, and give new and more vigorous impulse, even after hot fluids, stimulants, ergot, &c., have been tried in vain.

What are the circumstances, then, which warrant its application?

1. In cases of first labour, where the os uteri is fairly dilated, the head of the child has been in the passage from eighteen to twenty-four hours, the patient much fatigued, and the pains, without assistance, comparatively ineffectual, the womb acting.

2. In cases after the first child, where the passages are rather confined, or the head of the child unyielding, although in the passage, and the natural efforts unavailing, especially when warm fluids and stimulants have been tried without benefit.

3. Where there is much rigidity of the perineum, on which the head rests, but the natural efforts either greatly exhausted or the perineum unyielding; the practice here serves two purposes—viz., dilatation and stimulation.

Lastly. Where the womb and abdominal muscles, after a severe labour, sink into a collapsed state, and are indisposed to do more work, and the placenta, though in the upper part of the passage, does not excite the abdominal muscles to action. With this principle at my command, I have never seen such a thing as the old retained placenta in any form, and much doubt whether, with it, I ever shall.

There are other minor circumstances which it will be necessary to apply, but the observant practitioner will readily find them out when conversant with the application of the principle, and the above will be sufficient to guide him in most cases. If, however, with these directions, there should be any doubt on his mind, I would say, rather wait the result of the old practice, than urge assistance when unnecessary or “meddlesome.”

I shall feel much pleasure in hearing from any gentleman, either personally or through your Journal, the results of their practice, and the more so if they will favour us with new aphorisms for its general application.

Dr. Marshall Hall will at once perceive in this principle a practical application or illustration of the excito-motory nervous sensation; but it was not in consequence of his suggestion that the principle was applied by me, but after a study of the great sympathetic nerve, for I had practised it nearly five years before I read his excellent work.

CASE OF TRACHEOTOMY.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—I send you the following case of tracheotomy for insertion in your Journal, if you deem it of sufficient interest to occupy a place in its columns.

I am, Gentlemen,

Your obedient servant,

HENRY ALFORD,

Surgeon to the Taunton and Somerset Hospital.
Taunton, March 23, 1842.

William Marsh, aged 24, a tall-chandler by trade, July 22, 1841, was admitted into the Taunton union workhouse as a vagrant. He stated that he had been suffering some months from an affection of the throat, which had been brought on by cold, and had been