spoonful of syrup of poppies, bought at a retail druggist's. The narcotic symptoms were fully developed in three-quarters of an hour. The syrup in this case probably consisted in great part of tincture of opium. Seven children lost their lives by this syrup in 1837-8. In one of these cases a teaspoonful and a half was given; stupor came on in half an hour, and the child died the following day. The following are cases of poisoning by the decoction. A woman boiled two poppy-heads in a quarter of a pint of milk, and gave two small spoonfuls of this decoction to her child. In an hour the child fell into a deep lethargic sleep, the respiration became stertorous, and in ten hours the child died. On inspection, the brain and its membranes were found congested. In a second case, a maid-servant, in order to quiet a child, gave it two teaspoonfuls of a decoction made by boiling one poppy in a small pot of water. The child was found dead in the morning. The brain and its membranes were much congested, and the ventricles contained bloody serum. The seeds of the poppy were found in the stomach."

"It may be observed," continues Mr. Taylor, "that the poisonous salt of morphia is generally considered to exist in the capsule of the poppy and not in the seeds; but Sobernheim mentions one or two cases of poisoning by the seeds of the plant."

There is much interesting information collected on several questions which occasionally come before us, as well as sound judgment displayed in commenting on it, to which we may from time to time feel ourselves called upon to refer; in the mean time we cannot do better than conclude this notice by quoting the very judicious reflections on the duties of the medical witness. "It is unnecessary for me to remark," says the author, "that great responsibility is attached to the duties of a medical witness, and that any member of the profession may find himself involved in this responsibility, from circumstances of a merely accidental nature. When a crime, requiring medical evidence for its elucidation, is perpetrated, the duty of the whole investigation commonly devolves on the practitioner who lives nearest to the spot; it is, therefore, virtually upon his knowledge and experience, that the clear proof of the crime and the legal punishment of the offender, must rest. He should remember that this duty lies strictly in developing the medical proofs of the crime; and he must endeavour to lay aside that feeling which often induces us to see a criminal in every one who happens to be accused—'*prius est de crimine quam de reo inquirendum.*'—GROTIUS. I trust that I may not be found to have departed from this maxim in treating the subjects contained in this manual. While I have endeavoured to bring forward every medical point which would seem to establish a crime, I have not concealed the very numerous objections to which all medical evidence is exposed. On one side, my object has been to establish guilt; on the other, to vindicate innocence. A man may be wrongly or rightly

accused, but it is for a jury to decide this point, and that medical jurist appears to me to lose sight of the true object of the science who devotes the energies of his mind, in a case otherwise doubtful, to only one side of the question. We ought not to hear, as we have done in recent times, of a medical prosecution and a medical defence. Under such circumstances, a medical jurist can be regarded no longer as the scientific witness of truth, but as the biassed advocate, who will spare no effort to extricate the party for whom he appears. He entirely forgets that his evidence should always be given with a view, not to the acquittal or conviction of a particular individual, but to the vindication of justice, and the due protection of society. He appears for the country, and neither for the crown nor the prisoner—at least, however defective the present mode of summoning medical witnesses may be, this is the character which, it seems to me, he should endeavour to maintain."

HALFPENNY MEDICINE AT MANCHESTER. REPLY TO DR EAGER.

TO THE EDITORS OF THE PROVINCIAL MEDICAL
JOURNAL.

GENTLEMEN,—I request that you will have the goodness to give insertion in your Journal to the following observations on a letter written by Dr. Eager, which appeared in your Journal of the 11th ult.

In that letter Dr. Eager, after giving his version of the history of the canting and puffing circular, states "that an individual called on the engraver, and gave him an order for 180 circulars, adding that he wanted his crest engraved, and that, as he was leaving town, he wished the circulars to be left at a surgeon's house, giving the address. The engraver's apprentice delivered the circulars at the house of which the address was given, in this town, and was paid for them at the same house." Had the matter rested there, I should not have felt myself called on to take any notice of it; but, when I find the Doctor and his friends have most industriously, both in public and private, circulated these falsehoods, with the addition that it was *at my house these circulars were left and paid for, and that they were forgeries invented for the purpose of injuring his fair fame*, I can no longer remain silent. In order to show that, in my present proceeding, I am not actuated by any vindictive feelings, and that I would very gladly have been spared the annoyance of bringing my name before the public in connection with such a subject, it is merely necessary for me to say that, when I was aware that the Doctor had seen the printer, and heard his denial of the truth of his statements, I requested a mutual friend to call upon him, and to point out to him the necessity of his retracting his assertions, and of making a proper apology, through your Journal, for having been guilty of such falsehoods. Having waited patiently for some time, and finding him still disobedient to the call of justice and of honor, it only remains for me to say that I neither had the copies of

his circular printed nor distributed, as he alleged. It is true I did send one of them to a friend as a *great curiosity*, but none anonymously; and as a proof of the utter falsehood of his most circumstantially detailed statement, I give you the following letter, written by Mr. Fleming, printer and engraver, St. Anne's-square, Manchester, who printed the documents in question:—

“Manchester, Nov. 16, 1843.

“Having seen a letter of Dr. Eager's in the Provincial Medical Journal, relative to some circulars I printed for the Burial Society, I beg leave to state that they were not left at any surgeon's house, but remained at my office until the individual called for them that gave me the order.

“E. L. FLEMING.”

This letter is quite sufficient to show the amount of faith to be placed in any statement coming from Dr. Eager. The only reason I can imagine why he should have fixed on me in order to carry out the bold stratagem mentioned in the beginning of this letter is, that I had a short time before resigned the appointment of surgeon to a charitable institution in this town, to which the Doctor was physician, and gave as my reason for so doing, that I could not any longer allow my name to be professionally associated with that of a person capable of using such unworthy means as his puffing circular to get into practice, enclosing at the same time a copy of the obnoxious document to the governors of the institution. It may be as well to remark that I did not take this decided step without having made a full and careful inquiry into the history of this hand-bill, which to my great astonishment I found had passed through no less than *three editions*. In the first edition, the puff is of a mild nature, in the second and third editions there is the following beautiful piece of modest self commendation:—“*The directors can most conscientiously recommend this part of the great institution to all the members of the society, on account of the unremitting attention and superior skill of its worthy superintendant, many lives having been saved in the course of the year through the divine blessing on his labors.*” I give this extract for the benefit of those who may not have seen the original. The hand-bill from which this is taken has the Doctor's name as secretary attached to it, and at the bottom is the following admonition:—“Please to keep this bill clean till called for.” The second and third editions are precisely similar, with the single exception that the last parades the name of one of the most respectable persons of this town in addition to the number of the patrons. Dr. Eager states in his letter that his connection with the society was only for about the last sixteen months. If such be the case, the first edition of the placard must have been short-lived indeed, for I find that the second edition corresponds with the printed book containing the rules, &c., of the society for the year 1842, while the third edition corresponds with that for the year 1843. I have been thus circumstantial in detailing these particulars, lest it might be supposed that I acted with injustice towards Dr. Eager in not fully investigating his conduct in connection with this puffing circular before I took the decided step I did in refusing to hold any connection with him professionally.

As to the Doctor's assertion that the charlatanerie additions were made without his consent or knowledge, I make no doubt it deserves just as much credit as his most circumstantially detailed account of the delivery and payment of the circulars at my house. *However, it can be clearly proved, if necessary*, that these circulars, containing the nauseating puff, were widely and extensively distributed by persons in the employment of the society, for the purpose of gaining subscribers to the *Halfpenny a Week Family Medical Board of Health*, nearly from the very origin of the society; and few persons will be hardy enough to believe that such could have been the case without the knowledge of Dr. Eager, who was secretary, and, *I believe, also, one of the most active directors of this most philanthropic and charitable institution.*

Dr. Eager also says in his letter, “I need not add, when I discovered the objectionable addition to the circular, I had my name removed from it by order of the directors.” Hoping that this might be true, and that such a foul disgrace to an honorable profession might be suppressed, I had the curiosity to inquire if such had really been done, for which purpose I directed a poor man to apply to one of the paid collectors and distributors of the society for some of these documents. He did so, and was immediately accommodated with one, having the puff in its original perfection, and the Doctor's name attached thereto as secretary. I forward you this document, with the other original papers, marked in such a way that the above fact can be attested, if necessary. It is really most painful to contemplate that such means are made use of by persons who ought, at least, to be alive to gentlemanly and honorable feelings. It is not my intention to make any remark upon the system of sick clubs in general; but I should be extremely desirous to learn how any medical practitioner can *honestly afford to give the necessary attention to his patients, and supply them with proper medicine* (all of which this Dr. Eager professes to do), for the paltry sum of one halfpenny a-week per head. Having shown that the statements contained in Dr. Eager's letter, referring to me, are totally devoid of truth, and that I had good reasons for my conduct towards him, inasmuch as, from a full inquiry into the subject, I felt convinced that *these circulars were distributed with his knowledge and consent*, and that this is not the first instance in which he has used the same means for the accomplishment of his ends, I have only to request you will do me the justice to give insertion in your valuable Journal to this vindication of myself from the charges brought against me by Dr. Eager; feeling that it is only through the pages of your Journal that the antidote can be successfully applied, to counteract the effects of his previous letter.

Your obedient servant,

JOS. E. BARRETT.

Member of the Royal College
of Surgeons, London.

P.S. I enclose you the original letter written by Mr. Fleming, the printer, as well as the three editions of the circulars, all printed by the printer to the society; and the books containing the printed rules

of the society for 1842 and 1843—all bearing the signature of Dr. Eager, as secretary.

. In giving insertion to this letter, we have only to remark that we have received the documents to which Mr. Barrett refers, and that these correspond with his statements.—Ebs.

BIRMINGHAM PATHOLOGICAL SOCIETY.

October 7, 1843.

THOMAS WILLIAMS, Esq., in the Chair.

Mr. Bunn brought before the notice of the society a case of sudden death, caused by aneurysm of the heart.

The subject of the disease was a woman of irregular habits, aged twenty-five; she had died before medical assistance could be brought. On inquiry, Mr. Simons had been able to learn that she had been subject to palpitations of the heart, frightful dreams, difficulty of breathing, faintings, &c., for about two years, or perhaps longer. On post-mortem examination of the heart, a double pouch was found occupying the anterior and left side of the left ventricle, just below the auriculo-ventricular opening. There was slight and partial adhesion of the pericardium to the parietes of the heart at the part affected, and a rupture had taken place in the pouch, so small that the best means of finding it was to pour water into the ventricle, when the fluid could be seen passing out through the orifice, through which the blood had been effused, so as to fill the pericardium.

The rest of the heart was otherwise healthy, though apparently of small size; the sides of the pouch were formed of the structure of the heart, unaltered in appearance, and there were no coagula in it.

There was extensive effusion of fluid (serum) in the cavities of the chest, and into the abdomen.

Mr. Hodgson brought forward a case of hydatids discharged by coughing, which had been sent to him by Mr. Arrowsmith, of Coventry.

Mr. Arrowsmith stated that he had not given, in the report of the case, the remedial treatment employed, because it was merely such as would occur to any practitioner who treated the symptoms as they arose. He need scarcely say that he was ignorant of the true nature of the case previous to the expectoration of the cysts, but he had a decided impression that it was one of *not* an usual nature; that it was not tubercular, for instance; he was led to judge so from the paroxysmal cough, and the absence of dyspnoea, excepting immediately after the cough. It seemed probable, too, that the initiatory symptoms were more actively inflammatory than is at all common in tubercular phthisis, to say nothing of the absence of any obvious or probable sign of strumous diathesis. The man's occupation was one of the healthiest, and he was not at all intemperate. Mr. A. presumed there was some, perhaps unusual, result of circumscribed pneumonia, but of what precise nature he had no accurate idea.

CASE.—George Moore, aged thirty, a butcher, residing at Bedworth, applied for advice April 11, 1842. He was a tall, large framed man, and previous to this illness he had enjoyed good health; now he was pallid, thin, and weak. He had been ill two months

with severe cough, and inflammation, as he was told, and had been bled freely, and blistered, at first with relief, but the cough continued, and was severe. It recurred at intervals in paroxysms, with but little expectoration, and that was watery and slightly opaque. He was free from dyspnoea, excepting immediately after the coughing fit; pulse 100; skin not hot; tongue clean; the upper part of the left side of the thorax gave a dull sound, particularly in front, on percussion; the respiratory murmur was obscure, and there were some whistling and cooing sounds.

In a fortnight afterwards he felt some pain through the left side of the thorax, and a few specks of blood appeared in the expectoration, and the breathing was quickened. He had chilliness and night perspiration; in ten days more he had much diarrhoea, and the perspiration continued, the sputa still being bloody at times; the respiratory murmur was still more obscure.

In the early part of May the diarrhoea and cough became better; the expectoration was more opaque and yellowish; it had a bad taste, and appeared to himself to be foetid, though his attendants were not sensible of the odor. Some pain continued to be felt on deep coughing about the left nipple. In the middle of the month the legs became oedematous, the sputa continuing at all times streaked with blood, and the cough hard. In the third week in May some membranous-looking substances were coughed up for the first time; they appeared somewhat tubular, of a slightly milky hue, and diaphanous. These substances continued to be expectorated occasionally with a little blood; and in the first week in June a small quantity of pus was brought up by coughing; there was then some pain, and decided tenderness on pressure in the left axillary region, and the respiratory murmur was obscure over that portion of the chest.

On the 9th of June the cough became very frequent, and he felt a "skin" in the windpipe; the cough continued very troublesome all night, but in the morning of the 10th it was better, the "skin appearing to go back," the suffocating feelings and the tickling sensation in the air-passages being relieved. The cough again recurred on the 10th, and, after being very troublesome, he brought up "a very large skin." This had so much impeded his breathing during its expulsion, that he fell on the floor nearly asphyxiated. With this cyst he brought up some greenish, foetid pus, and this kind of expectoration continued the following day. After that time the cough became rapidly better, and no more membranous expectoration appeared.

At the end of June he was convalescent, but the respiratory sound, though much increased, was not then so loud and clear on the left side as on the right. He gradually regained flesh and health, and resumed his employment. In the month of February, 1843, Mr. Phillips had examined the patient at Mr. Arrowsmith's desire, and believed him to be sound.

The case was accompanied with a bottle containing perhaps a dozen burst hydatids of different sizes.

Mr. Russell showed a drawing of an hydatid that had been expectorated by a young lady, who for six weeks had coughed up sometimes as many as a tea-cupful of hydatids of a yellow color; she recovered. She had never had hectic or purulent expectoration,