IN the Reports of the Government Commission appointed to investigate the causes of the unhealthiness of Towns various important facts have been brought forward, to illustrate the connexion of continued fever with emanations proceeding from organic matter in a state of decay. The witnesses may have assigned too wide and too exclusive an influence to such emanations in engendering and propagating fever. But they appear to have established, more clearly than was ever done before, the tendency of putrid effluvia to favour its spread and aggravate its malignity. And they have also gone far to prove, that in particular circumstances, not yet, however, ascertained with any accuracy, the same cause is capable singly of actually generating fever, even in the most malignant form.

Admitting the possibility that continued fever may originate simply in exposure to the effluvia of organic decay—and it appears difficult now to deny this doctrine—a number of deductions will result, which present important bearings on medical practice. One of the most obvious of these is, that continued fever may show itself with the characters of an endemic or epidemic in localities extremely circumscribed.

It is well known, that circumscribed epidemics do occasionally make their appearance;—that continued fever, in the typhoid form, and at times most malignant in type, has been observed to
occur in very limited localities. On such occasions the impossibility of tracing the introduction of the disease to infection, the extreme narrowness of its range, and its virulence within the circle of its influence, have been peculiarities which distinguished it, in the eyes of all observers, from continued fever in the usual epidemic forms,—exciting at the same time much speculation as to its nature, giving rise to plausible, though unfounded, suspicions of poisoning, and leading in the end to no very satisfactory explanation of its origin. There can be no doubt, however, from recent experience, that events of this kind might have frequently admitted of an easy interpretation, had the observers of them been sufficiently aware of the liability of fever to arise from the insidious emanations of concealed organic matter in a state of decay.

These reflections have been suggested by a remarkable incident which lately excited a strong sensation in the neighbourhood where it happened, and which at the time went the round of the newspapers as a mysterious occurrence. Having been consulted on the occasion in two capacities, first, as physician simply, and afterwards medico-legally by the public authorities, I was led to inquire with some care into the details; which have since appeared to me so interesting, that, with the consent of the medical practitioner principally concerned, I have ventured to lay a statement of the leading facts before this Society. The statement which follows is derived partly from my own observation and inquiries, when consulted respecting two of the cases, partly from a Precognition by the officers of the Crown, which was subsequently put before me for my opinion, but chiefly from answers to queries since submitted by me, with a view to publication, to Mr Macnab, surgeon at Peebles, who originally attended all the cases, and who has investigated the particulars on the spot with great care and fidelity.

In a thinly-peopled rural district of Peebleshire,—the locality will be particularly described hereafter,—Mrs W. the wife of an extensive farmer there, was attacked on the 22d of January last with rigors, general prostration of strength, and great disinclination for food; to which occasional vomiting was added five or six days afterwards. She was visited for the first time professionally on Friday, the 30th January, by Mr Macnab; who found her in the following state, as I shall give it in his own words. "She complained of rigors, pains in the back and limbs, headache, a little intolerance of light, slight sore throat and dryness of the mouth, a painful sense of palpitation along the course of the descending aorta, nausea and desire to vomit, with occasional fits of vomiting, thirst, want of sleep, total loss of appetite, and great exhaustion. The pulse was 92 and feeble, the tongue covered with a very thick brownish-yellow fur, the back of the throat somewhat red; the vomited matter partly mucous, partly bilious, the bowels constipated, the evacuations dark and offensive, and the urine unusually yellow, as if bilious. The countenance had an anxious expression,
and the eyes were suffused; but there was no appearance of petechial eruption either at this time or subsequently. The temperature of the body, and of the extremities more especially, was lower than natural. There was no pain in the epigastrium or in either hypochondriac region.—Under the use of frequent laxatives and diaphoretics she gradually recovered. On the 9th of February she was able to take food with relish, and for some days had been without any tendency to vomiting, so that she was left as convalescent, but with instructions that assistance should immediately be procured if any unfavourable change presented itself." Having heard nothing farther of the case for four days Mr Macnab went on the 13th to inquire for her; and, to his surprise, found her labouring under all the former symptoms in an aggravated degree. "The thirst was intense, the nausea and vomiting very troublesome, the pulse 100, small, feeble, and intermitting, the tongue covered with a very thick, dry, yellowish-brown coating, the bowels very constipated, the evacuations dark, bilious, and fetid, and the vessels of the conjunctivæ much injected. But there was still no pain in the abdomen, and no appearance of petechiae anywhere; neither was there any wandering of the mind. The remedies which were formerly of service had now no effect; the more urgent symptoms went on steadily increasing; on the 16th towards evening articulation became indistinct, and her words for the first time incoherent; and at six o'clock of the same evening she expired. An inspection of the body was not allowed. It presented after death an emaciated appearance, and a peculiar yellowish colour, but no tumefaction." Mrs W. was seventy years of age, but had long enjoyed excellent health.

The next case was that of her husband, Mr W., also a hale old person of seventy. He was taken ill on the 25th January, within three days after his wife. His illness commenced in the same way. On the 30th Mr Macnab found him labouring under symptoms precisely similar to those described above, and nearly the same in degree, except that he had not so much prostration of strength, being able to sit up at the fireside. The pulse was 92, and of moderate strength. Like his wife also, he improved under the administration of laxatives and diaphoretics down to the 9th February, when the vomiting had ceased, the appetite was tolerable, and he felt himself able to leave his bed. After this, however, the same symptoms recurred; on the 13th Mr Macnab found him greatly worse; remedies were no longer of any avail; and he died on the 18th, two days after Mrs W.; his mental faculties continuing, as in her case, unimpaired till a few hours before dissolution. The body, after death, had a yellowish sallow appearance, and speedily began to decay.

The third case in point of order was that of Mr G. W., the son of Mr and Mrs W., who was taken ill on the same day with his father. But it may be as well to take notice in the first instance
of the fourth, because it was the only other that proved fatal. This was the case of a servant girl in the family.

The disease under which Mr and Mrs W. died presented the characters of ordinary typhoid fever, but with certain peculiarities; and it proved fatal, like many cases of ordinary fever, about the close of the third week. The servant, Isabella M., aged twenty, was seized on the 26th January with rigors, vomiting, loss of appetite, and prostration of strength, exactly as her master and mistress before her. On the 30th Mr Macnab found her affected, like them, with "pains in the extremities, slight sore throat, nausea, and frequent vomiting; palpitation of the heart, and a troublesome pulsation in the descending aorta, urgent thirst, total loss of appetite, complete want of sleep, and great debility. The pulse was 112, and small, the tongue covered with a very thick yellowish-brown fur, the temperature below the natural standard, with occasional rigors, the bowels constipated, and the evacuations dark and offensive." The symptoms therefore were precisely the same as in the previous cases. But their progress was very different. For no abatement was accomplished by treatment; her strength was quickly exhausted; and she died in the afternoon of the 1st February, within six days and a half after being first taken ill. In her instance death was preceded for twenty-four hours by some delirium and considerable stupor; but in no other case were these symptoms so well marked as to attract notice. The body after death presented the same yellowish sallow hue of the integuments, as in the cases of Mr and Mrs W.

These were all the fatal cases. In addition twelve other individuals were more or less severely attacked with similar symptoms to those detailed above; and three or four other persons were more slightly affected, whom however Mr Macnab did not attend professionally, and concerning whom consequently he derived his information at second hand, and in a way not quite satisfactory to his mind. It is unnecessary to describe all these cases, as they presented a singular uniformity of characters. Two only may be added, the one as an example of the disease in its severe form when not fatal, the other to exemplify the mildest form.

Mr G. W., son of Mr and Mrs W., aged about 27, "after being absent from home for about three weeks, returned with his sister from the Island of Skye on the 19th January, three days before his mother took ill. On the 25th, six days after his return, he was seized with nausea, tendency to vomit, thirst, disinclination for food, considerable prostration of strength, and slight headache. He continued in this state, sometimes confined to bed, sometimes going about a little, until the 28th, when urgent business compelled him to proceed to Edinburgh, a distance of twenty-two miles. He went thither on horseback, feeling sick and uncomfortable on the way, and vomiting a little; but he was able to remain in town till the 30th, and afterwards to ride back to the farm, where Mr Macnab
saw him next day. He then felt better, but still complained of sickness, tendency to vomit, slight headache, some sore throat, and little appetite for food. The pulse was 86, and of moderate strength; and the tongue was covered on every part but the mere edge with a very thick, yellowish-brown fur. Subsequently he became worse. The vomiting gradually increased in frequency, and the vomited matter acquired a bilious appearance. The bowels were obstinately costive, and the evacuations dark and bilious. The urine seemed as if loaded with bile. The lining membrane of the throat was slightly red, and the vessels of the conjunctivae were full of blood; but there was no appearance of petechial eruption on the skin. He continued much in the same condition till the 9th February, when he became considerably better, so that he could even take a little food with relish. But on the 13th he was much worse again. The vomiting had become urgent, the thirst extreme, and the desire for food altogether gone. The pulse was about 90, rather feeble; and the tongue loaded with a yellowish fur as before. He now also complained of severe pains in the limbs, especially below the knee joints, down the front of the tibiae, and also to a less degree in the arms and hands. He described this sensation as a painful uneasy numbness, causing incessant restlessness and change of posture; it was attended with coldness of the integuments to the sense of another person; and he derived no relief from the warm bath or hot fomentations. No change for the better having occurred in five days more, he was removed on the 18th to Edinburgh. He bore the journey well, and under the care of Dr Begbie, began speedily to improve.” On the 20th, I saw him in consultation with Dr Begbie and Mr Macnab, who came to town on purpose. The vomiting had ceased: but the pulse continued about 90 and rather weak, the tongue much loaded, though less so, the bowels difficult to move, and the desire for food still altogether wanting. The pains in the limbs were also distressing, and occasioned much restlessness and want of sleep. There was a good deal of languor; but he conversed without difficulty. The countenance and skin generally were pale, the eyes clear and not injected, the expression not oppressed; and altogether the general physiognomy of the disease struck me at once as different from that which has long been familiar to me as characterising the several forms of the infectious typhus of this city. Under the use of laxatives, calomel, diaphoretics, morphia at night, and tonics, the patient gradually threw off the more urgent symptoms, and was restored to a state of good general health. But the painful un easiness of the limbs continued without material abatement. Even so lately as the 4th of May, more than three months after he was taken ill, Mr Macnab wrote to me, that “the legs are somewhat swelled from the knees downwards; he complains of a sense of uneasy soreness in them, together with a numbness and want of the feeling of pain when the skin is pinched; he walks with very
great difficulty; and altogether the affection seems to be of the nature of partial and incomplete palsy.” [He continued in the same state on the 8th June.]

A short example of the slightest form of the disease will now conclude the narrative of cases. “Marion H., daughter of one of Mr W.’s ploughmen, residing within two hundred yards of the farm-house, had been frequently in the house milking the cows and taking occasional charge of the two domestic servants while sick. On the 1st February she was seized with nausea and desire to vomit, thirst, and the other early symptoms mentioned above. The pulse was 96, the tongue furred, the bowels constipated; but the thirst was not urgent, and the sore throat inconsiderable. Under the use of laxatives and diaphoretics she gradually recovered, and in ten days she was able to be out of doors. On the 4th of May she was in excellent health, and engaged in her usual occupation as a farm servant.” Neither this patient, nor any other but Mr G. W., and another girl, a house servant, suffered from pains of the extremities or incomplete paralysis.

The foregoing cases will serve to illustrate the characters of this little epidemic, so far as the symptoms are concerned. I regret that no opportunity occurred for illustrating its pathology by ascertaining the morbid appearances. Some important circumstances remain to be stated in regard to its appearance and propagation.

At the time it broke out in the farm-house, no disease of the kind was known in the neighbourhood. Mr Macnab thinks he saw in his country rounds a few scattered cases somewhat similar to those of the W.’s and their servants; but none happened in the vicinity. There were fifteen people either residing in the house, or much in it during the day; and every one of these was taken so seriously ill as to be obliged to give up work, and to require medical assistance. Three or four others, who had been occasionally in the house, were also said to have sustained slight attacks; and two or three visitors, who were in the house after Mrs W. took ill, remarked that they were sick and uneasy at stomach, and disinclined to take food. Of the fifteen frequenters of the house who were attacked, all were seized in rapid succession within fourteen days after the first case occurred. The first person taken ill was Mrs W., on the 22d January; Mr W. and his son were both seized on the 25th; one of the domestic servants on the 26th; another domestic servant on the 28th; Miss W., the farmer’s daughter, on the same day; and all the farm-servants in the course of the ensuing se’nights. On the 30th, nine days after Mrs W. was attacked, Mr Macnab found eleven persons ill. The case of Miss W. was somewhat remarkable in its circumstances. She had been for at least three months from home, residing on the island of Skye; returned with her brother on the 19th January, three days before the first case of disease occurred; and in nine days was attacked with the same symptoms as the others, and suffered severely. I saw her as well
as her brother, along with Dr Begbie and Mr Macnab, on the 20th February, when she was almost convalescent; and, as in the case of her brother, I was struck with the physiognomy of the disease as presenting something very different from that of ordinary infectious typhus at the same stage,—the countenance being pale, the eye lively, the expression natural and by no means oppressed, the mind clear and alert, and the strength far from so prostrate as it is usually observed in early convalescence from our late epidemic typhus.

It appears that in the whole fifteen cases the symptoms in their nature and succession were generically the same, and with but few specific peculiarities in each; the only important specialties indeed being early death, with precursory coma, in the servant girl, Isabella M., and consecutive neuralgia with incomplete paraplegia in the instance of the younger Mr W. and the servant girl alluded to. The leading symptoms were those of great gastro-intestinal derangement, nausea, vomiting, loathing of food, an excessively loaded tongue, and obstinate constipation; the accompanying fever was slight, and in its type adynamic; exhaustion of the nervous system, without any particular cerebral oppression, except in the single case of the servant girl, was the principal consecutive danger incurred; and in no instance was there detected any trace of the petechial eruption, which has been so general for some years past in the infectious typhus of this country.

The disease attacked most severely without exception those who resided night and day in the farm-house. Three out of six of this denomination of cases proved fatal; and the least severe case was that of the daughter of the family, who, until nine days before she took ill, had been from home for three months. On the other hand, the slightest forms of the disease, without exception, occurred among the farm servants; who, though much in the farm-house through the day, slept in their cottages, a few hundred yards off, and lay there after being taken ill.

Another remarkable fact is that the malady, which spared not a single individual who came fairly within its grasp in the farm-house, was nevertheless not communicated to any one else by those who were there attacked by it. If it spread simply by infection, the infection must have been virulent almost beyond example for typhoid fever; since every person directly exposed was attacked. And yet no fewer than eight of the sick lay while ill in cottages inhabited by other members of their families, without a single case of propagation of the disease having been observed in these localities.

It is no wonder, then, that the pestilence appeared to the neighbourhood unaccountable. The general character of the symptoms, the great mortality, the narrow, well-defined bounds of its ravages, its unsparing sweep within this circle, the swiftness with which it embraced all within its grasp, its non-communication by the sick to those who had not been in the original locality, showed habitudes
very different from those of our ordinary epidemic fevers. Add to all these things the nature of the locality; and the mystery of the case appears at first even greater than before.

The farm-house is situated near the confluence of the Line and Tarth. Both streams flow through rather open valleys, here and there under the plough, and bounded by beautiful pastoral hills rising about a thousand feet above the cultivated fields. There is but little wood within a circle of a mile from the house. The country is in general drained and dry; but to the westward the fields on the north bank of the Tarth are extensively irrigated with fine river water. The house is placed on the north bank of the Line, near the junction of its tributary the Tarth; the elevation above the bank of the stream is considerable; the farm-steading is placed on rising ground behind the house; and behind that again there is about a third of a mile in breadth of waving cultivated land, bounded by one of the green grassy hills that cover a great part of the surface of Peeblesshire. Nowhere around is there a cooped-up population, among which infection may lurk unseen, to invade from time to time the neighbourhood. The population of the district is purely rural, and very thinly scattered; there is scarce even a hamlet nearer than the small straggling village of Newlands on the Line, two miles to the northward; and the only town within easy reach is that of Peebles, about seven miles distant. A healthier locality could not well be chosen. Some may object to the vicinity of the irrigated meadows. But it is scarcely necessary to observe, that frequent experience has shown the harmless-ness in Scotland of meadows irrigated with pure water; and besides, the nearest point of these meadows in the present instance is about half a mile from the farm-house.

The disease then appeared unaccountable in its rise. In the neighbourhood it was consequently regarded as mysterious; and naturally enough it was ere long ascribed to poison. No particular poison however was suspected; and fortunately no particular individual. But in such a conjuncture rumour must impute blame in some quarter. On this occasion it fell upon the medical attendant of the family, who was charged with misunderstanding the nature of the cases under his charge, with having been too slow to suspect their true cause, and having thus failed to detect the poison. In such circumstances medical men have sometimes allowed themselves to be carried away by the general voice, and grievous consequences have resulted. But Mr Macnab had observed the whole circumstances with care, and weighed them with discernment; and he refused to countenance the public clamour.

Matters had been but a short time in this state, when I was consulted along with Dr Begbie in the cases of Mr G. W. and his sister, and was made acquainted with the particulars of the occurrence, though not in such detail, or so precisely, as they have been now stated to the Society. The first idea that suggested itself was
the probability of the malady being produced by the use of meat from diseased animals. But this view was at once set aside; for, besides that persons who suffer from diseased meat are generally affected with diarrhea, not with obstinate constipation, it was carefully ascertained that not a single case of natural death had occurred among the domestic animals of the farm for a long period before; and the farm supplied what meat was consumed by the inhabitants. In the next place poisoning with ordinary poisons seemed to be out of the question. None of the ordinary poisons had been used or seen about the farm for a long period; three of the parties who suffered had never taken any food or drink in the farm-house, although frequently within it in pursuit of their occupation; and besides, what poison is there, which is known to be capable of causing such effects? Thirdly, a general endemic influence, or malaria, appeared equally inadmissible. Neither the irrigated meadows, nor any other general cause could produce a malaria, which should fall with such virulence on a single house, but entirely spare all others in the valley. Fourthly, the want of resemblance to the habits of ordinary epidemic or infectious typhus, already adverted to, struck the attention as something very remarkable. The disease was a typhoid fever, but yet not the typhus with which all are familiar. The invariable violence of the gastric symptoms, by no means a usual circumstance in the typhus of Scotland,—the nervous exhaustion, not incapacitating however from prolonged exertion and fatigue, without injury,—the absence of cerebral oppression except in a single instance,—the extreme swiftness of death in that instance,—the non-appearance of petechial eruption in any case,—the physiognomy of the disease, at least as seen by me in its middle and convalescent stage,—and lastly the seizure of every habitual frequenter of the house, with the non-communication of so virulent a disorder to any of their families living elsewhere,—these circumstances formed a crowd of distinctions which severed the epidemic from ordinary typhus as now and lately prevalent in Scotland. A local malaria was the only conceivable cause left for consideration. No source however of local malaria was known. But, having in my recollection the Reports of the Health of Towns' Commission, happening to be well acquainted with the locality, which I have described above from personal observation some years ago, and remembering that the farm-yard is placed on a rising slope behind the house, I suggested that the drains might be defective, and that inquiry should be made, whether the soil around, and possibly even under the house, had not become in consequence impregnated with decaying animal matter.

Meanwhile the rumour of poisoning gained ground, and at length reached the authorities of the county in a shape which rendered a legal investigation indispensable. The subject was then brought before me a second time on the 10th of March for my opinion on the
Precognition taken by the Procurator Fiscal,—with the facts somewhat more precisely stated, though not so as to affect the opinion previously formed,—and with the not unimportant addition, communicated to me by Mr Naenab, that during the occupancy of a previous tenant the farm-steading drains had been repeatedly choked up, so as to require being thoroughly cleared. It is unnecessary to reproduce here the report returned to the law officers of the county. Its substance may be anticipated in a great measure from what has been stated above. Feeling however the necessity of caution in circumstances so peculiar, I did not represent poisoning as altogether impossible. All slow and insidious poisons, with whose effects toxicologists are now acquainted, seemed entirely out of the question, except arsenic; and all that is accurately known of the effects of arsenic as a slow poison presents nothing precisely similar to the phenomena observed on this occasion. But the truth is, that the knowledge hitherto possessed of the action of arsenic on the human body, when insidiously introduced in continuous small doses, is either scanty or vague. I therefore limited myself to the opinion that the particulars of the incident did not correspond with any thing yet known of the operation of slow poisons; that I could not altogether exclude the possibility of arsenic being concerned; but that this question might be at once settled by an examination of the body of the servant girl, in whom, by reason of the rapidity of the fatal event, arsenic, if really the cause, would be detected by analysing the liver.

This report had scarcely left my possession, when all farther inquiry was rendered unnecessary by information received the same day by Dr Begbie in a letter from Mr Macnab, stating, that he "had made a searching investigation into the state of the drains and sewers at the farm-house, and found them all closed up and obstructed with the accumulated filth proceeding from the necessaries and farm-yard. The effluvium," added he, "proceeding from these sources when I was there, though much of their contents had been removed, was very offensive, and was diffused in the atmosphere to a considerable distance around." I have been since favoured with a more precise account of the structure and condition of the drains. The farm-yard extends backward immediately from the house, without any interval. On each flank of the farm-yard, and outside the walls, there is a covered drain, which ends close to each side of the house. One of these side drains receives, besides the ordinary drainage of the farm-yard, the contents of three privies situated about fifteen yards from the house. A drain also extends transversely just behind the house; and various small drains join those already described. There is a small run of water through the flank drains, but always insufficient, and in the summer often dried up. The drains had never been cleared out or examined during Mr W.'s occupancy of the farm, extending to a period of nearly three years. On the present occa-
sion they were found all choked up with "an immense accumulation of animal matter," which infected the surrounding air to a considerable distance in the neighbourhood when the drains were cleared. It is scarcely possible but that the adjacent soil was impregnated with the pent-up pollution; but no inquiry was made as to this point; nor indeed would it have been easy to accomplish this satisfactorily. Enough perhaps has been already stated to bear out the opinion at which Dr Begbie, Mr Macnab, and I arrived on considering the whole circumstances of the case at an earlier period; but it is not unworthy of being added, that the farm-yard stuff had been allowed to accumulate to an unusual extent during a winter of unprecedented mild weather; and that a part of the accumulation had been heaped up very near the back wall of the house.

I apprehend, then, that the nature of this at first incomprehensible disease has in the end been satisfactorily explained. No one at least can entertain doubts on this head, who has perused with attention and impartiality the Reports of the Health of Towns' Commission.

A variety of questions, important alike in a scientific and practical point of view, might be suggested by reflecting on the narrative just submitted to the Society. Among these the most fundamental are the two following: First, was the disease, notwithstanding certain peculiarities in the symptoms, essentially the same with the ordinary epidemic typhus of the larger towns in Scotland?—and secondly, granting it arose from local miasma, as I believe it to have done, is the fever so engendered capable of propagating itself by communication from the sick to the healthy? But the present occasion is not a fit one for entering on the discussion of either of these questions; for the facts are not adequate to bear out a confident conclusion. Let me merely observe that on the one hand, any person conversant with the common typhus of towns must have seen something peculiar in this little epidemic; and on the other, that no instance did occur of its spreading in cottages at a distance, among those who did not frequent the farm-house, but who attended the sick at their own homes.

In conclusion, let it be observed, that, although this incident has been described with care, on account of its apparent rarity, it may be strongly suspected to be not so uncommon as a hasty consideration of the subject would indicate. Other farm-yards besides that of Mr W. are placed disgustingly near the dwelling-house; and other farmers are reckless of the consequence of accumulation and bad drainage. Country practitioners are well aware that such localities present instances, apparently unaccountable, of erratic or even sometimes epidemic malignant fever. I have lately been informed of an instance, which happened in Stirlingshire not long before this one in Peebleshire, of a farmer's family, four in number, having been entirely swept away in a very short time by a malignant
typhus. An occurrence so startling and unusual might deserve an attentive investigation. But it happened at too distant a date to admit of being now inquired into with success. Meanwhile, if on similar occasions medical men in rural districts will keep in mind what has lately happened in Peeblesshire, they will probably be able to show that the incident there is by no means unexampled.

ARTICLE II.—Case of Suicide by Prussic Acid, with Observations by J. G. Flemming, M.D., Surgeon to the Royal Infirmary, Glasgow, &c.

(Read to the Medico-Chirurgical Society of Glasgow, 12th May 1846.)

The great facility with which suicide or murder can be accomplished by prussic acid, has naturally led to its frequent employment for the perpetration of these crimes. Of late years, its use has become alarmingly common,—twenty-seven cases of suicide or poisoning by this liquid having taken place during 1837-38. Under these circumstances, every case which can throw any light on the symptoms or pathological appearances which follow its exhibition, deserves to be accurately examined and recorded; particularly as, from its fearfully rapid action, without leaving any external mark on the body, death from its use is more likely to be considered as the consequence of natural causes, than when produced by any other poison with which we are acquainted; besides, it is only by a careful examination of its effects on the human body that we can ever hope to arrive at a knowledge of any means for arresting its activity, or of discriminating whether it has been taken spontaneously, or administered by the hands of another.

A gentleman, aged about forty-five, of stout muscular make, called at a tavern which he was in the habit of frequenting, on the 23d of April 1846, at five o'clock p.m. He is stated to have complained of being faint, asked to be allowed to rest in another room, and to have a glass of water; he appeared agitated and breathed somewhat laboriously, but perhaps he was slightly intoxicated. He was shown into a room, and took his place in a reclining position on the end of a sofa; a tumbler, about three-fourths filled with water was placed on a table at his right side; he cannot be said to have been left alone for an hour after this, as a party were for some time drinking in the same room, and the attendants were also occasionally in it. About six o'clock, all the glasses were removed, with the exception of the tumbler of water which had been given to him, the door of the apartment was shut, and he was left alone, occupying a similar position on the sofa to that already mentioned, and breathing heavily as if asleep. About three quarters of an hour now elapsed before any one entered the