

on his way down to this city from Canada west; in him also there was considerable dilatation of the aorta at its origin, and along its course as the arch, there were also old and very firm adhesions of the pleural surfaces; the bronchial glands were very much hypertrophied, and if possible, blacker in colour than usual.

In all the cases, the heart was soft and flabby, resembling, in consistence, a mass of dough. Its size was natural, but wanting its nourishment, it impressed one with the idea of its volume being diminished. The pericardium contained in all a variable quantity of fluid, generally slightly reddish, without lymph or adhesions; the inner membrane was smooth, having a roseate colour; the same thing was observed as to the endocardium; in all the cavities, auricles as well as ventricles, there were masses of blood, very soft, of a sallow yellow colour, caught sometimes between the musculi pectinati, or the cordæ tendinæ, and the loose edges of the valves; in the miner there was hypertrophy of the left side of the heart with thinning or absorption of the aortic semilunar valve. The valves in the other cases examined, were normal. The lining membrane of the aorta and its branches was infiltrated; the blood contained in them was invariably fluid, dark coloured, giving off a peculiar odour. This last peculiarity was very striking in the cases of two men, one of whom with jaundice as his most striking exterior portion of the disease, having risen from his bed to sit on the night-table, suddenly expired. The other, aged 23 years, in whom, three days prior to his death, dry gangrene had shown itself and gradually spread half-way along the metatarsal bones of both feet. I hazard the idea, that the ammoniacal odour emanating from the living body, so strong on opening the large cavities, and so striking on receiving some of the blood out of the vessels, arteries as well as veins, into the hand, were all due to the same condition of this fluid; the actual presence of ammoniacal salts, one of the surest proofs of the putrescent condition of the vital fluid; in fact, to speak paradoxically, of the *existence of death during life*. On turning over the abdominal flaps, no appearance of recent inflammation or any of its results was visible as regarded the peritoneum, except in the case of the young woman already adverted to, and who aborted between the fourth and fifth month. The peritoneum in this case was, throughout, covered by a thick and highly organized plastic lymph, beautifully reticulated patches of recent inflammation, being every where observable under the coating; adjacent surfaces were not only attached, but the sulci between the various convolutions of the intestines were filled up with masses of thick, dirty, yellowish, butyraceous looking plasma. There was more or less fluid found in the depending part of the peritoneal sac in every case, and the investing portion of this over the intestines and other abdominal organs, communicated to the fingers an extraordinary saponaceous feel; the mesenteric glands were enlarged in several of the cases, presenting a darkish yellow-coloured matter, easily broken down; there was hypertrophy, with softening of the liver and spleen generally—the interior of the former presenting a more brown appearance than usual, while that of the latter was

almost purple; the consistence of both was diminished; the outer surface of the spleen gave the appearance of its being puckered or wrinkled from absence of matter within, and consequent contraction of its proper investment; the gall bladder was usually fully distended with thick darkish bile, like thin treacle; there did not appear to be a diminution in the calibre of the biliary ducts; there was nothing normal in the pancreas; the stomach and intestines all presented great congestion both externally and internally; they all contained a large quantity of fluid and pulaceous matter of a yellowish colour, acid and persistent odour. In only one case did I perceive a thickening of the coats of the former, and in this one only did I discover anything approaching to a softening or separability of the mucous coat, which from its loosening in pretty large flakes, I attributed to softening in the sub-mucous cellular tissue. Ecchymoses of the depending intestines were generally noticed, and in most of the cases, isolated patches of discoloration, of sizes from a quarter of an inch to three and four inches, and in one case to the extent of upwards of eight inches, which were visible on the corresponding mucous surfaces, were seen. I did not find a single case of ulceration of the glands of this tube; all the glands, both solitary and aggregate, were enlarged, sometimes irregular in their form, with a dark purple or blackish point or nucleus in their centre; sometimes merely elevated above the surface, thoroughly congested or hæmorrhagic. The kidneys in all appeared normal as to size—in two decidedly hypertrophied in volume, soft as to consistence; their inner structure presented nothing remarkable. In the case of the young man with dry gangrene, the pelvis of the kidney and the ureter were very much dilated, but no calculus in the lower portion of this canal, nor any other obstructing cause existed to explain it; in this case there was thickening of the mucous membrane, as well as of all the coats of the bladder, apparently from old chronic disease; in the uterus of the young woman, the lining membrane was in a state of gangrene, with collections of pus permeating the fleshy structure; the alæ were beautifully reticulated, the fimbriæ sealed together and to the ovaries with thick plastic lymph.

I regret extremely, that, notwithstanding the many opportunities afforded for making *post mortem* examinations at the hospital at Point St. Charles, during the last season, there existed obstacles to carrying out this desideratum, in the espionage which was so diligently and vigorously kept up over all the actions and operations of the medical staff there employed. It is altogether unnecessary now to refer, except in sorrow, to the origin of these obstacles; suffice it to say, that the commissioners, to whom was entrusted the carrying out of the views of the Provincial Government with reference to the emigrants in their transit through this city, had to bear not only the odium of many of their esteemed medical friends and clients, who had taken a different view of the whole matter to that which they had done, although it must be granted that they felt the same influences as their opponents, with regard to the safety or danger of themselves, their