

give rise to poisonous effects, while it produces much more pain and a very inferior degree of cicatrization.—(*Revue Médicale*, 1848, tom. iii. pp. 45-70.)

## MATERIA MEDICA AND CHEMISTRY.

**Poisoning by Oil of Cedar, (*Juniperus Virginiana*).—Report of Four Cases.**—By S. C. Wait, M. D.—(*Bost. Med. and Surg. Jour.*)—The rarity of poisoning by this substance, and the absence of any notice being taken of the same in Toxicological works, etc., has led Dr. Wait to report the particulars of four cases which have within a few years come under his own personal observation. The subjects were all females, and in three of the instances it was taken for the purpose of producing abortion. The symptoms manifested in all may be looked upon as somewhat characteristic. Convulsions of a "tonic" character affecting the whole body; eyes very glaring and still; jaws set; hands clenched; breathing, struggling, choking and strangling; countenance bloated and livid; pulse from 45 to 60 per minute; vomiting of a fluid having a strong odor of the oil. As soon as the convulsions ceased the patients passed into a profound coma. Stertorous breathing, however, continued but for a short time, being soon followed by a peculiar kind of breathing, the chief character of which was "an unsuccessful heaving of the chest in inspiration, and a limpsy dropping together of the chest in expiration." The countenance assumed a venous aspect; pulse sank and soon became intermittent; pupils dilated; soft parts about the neck sunk down at every inspiration, the whole indicating that venous congestions were taking place in the large venous trunks behind the heart, and that the balance between the circulation and respiration was lost.

Two of the four cases proved fatal. The quantity taken in each was from half an ounce to an ounce. The post-mortem appearances were the odor of cedar oil given forth on opening the stomach presented several small red patches as large as the fingernail upon its upper and anterior surface; for some distance around these patches the mucous membrane had lost its usual polished appearance; the duodenum showed marked signs of inflammation. The uterus in each instance was in a healthy gravid state. The usual treatment in cases of poisoning from narcotic irritants was pursued. In one instance marked benefit followed free bleeding.

**Lupulin as an Anaphrodisiac.**—(*Amer. Jour. Med. Sci.*)—Dr. Page called the attention of the Philadelphia College of Physicians to the lupulin as a means of controlling the painful erections occurring in venereal cases. He has employed it now for two years, and has found it a better and more effectual remedy than any other he has tried. He gives it in the dose of from five to ten grains, and has never known an instance in which the second dose did not succeed in subduing the painful erections, so troublesome in cases of gonorrhœa. It does not cause the headache, constipation, and other unpleasant effects consequent upon the use of camphor and opium. He has found the remedy useful also in cases of involuntary seminal emissions. It will not cure the disease, but prevents the discharges, so long as the patient remains under its influence.

Dr. Edward Hartshorne has employed it successfully in one case to destroy venereal appetite in a man addicted to onanism.

**New Preparation of Morphine.**—At a meeting of the "Suffolk District Medical Society," Dr. Fisher called attention to a new preparation of morphine, with which he is at present experimenting. He dissolves morph-cuph. 2 grs. 1 1/3 of chloroform; ten drops, inhaled by the mouth, in cases of phthisis, will give immediate relief to the harassing cough, and sleep follows, which lasts from an hour to an hour and three-quarters. More largely administered, it checks diarrhœa in phthisis, and in doses of from ten to twenty drops restrains the action of the bowels in dysentery.—*Boston Med. and Surg. Jour.*

## MEDICAL JURISPRUDENCE.

REPORT OF A TRIAL FOR RAPE AND MURDER, WITH MEDICO-LEGAL REMARKS ON THE CAUSE OF DEATH. BY F. OGSTON, M. D., ABERDEEN.

(Continued from page 301.)

The medical evidence which completes the history of this trial I shall adduce at length from notes obligingly furnished me by the counsel and agent for the prisoner, as taken by them at the time. It is to the following purport.

John Abercrombie Gordon, surgeon, Fyvie, examined—I know Mary Smith's house. I had occasion to pass it on the morning of the 10th of April. I heard of her death, and went into the house. This was about half-past nine in the morning. I understood I was the first medical man who was there. I found the woman lying on her back, with her head to the back corner of the head of the bed. Her limbs were apart. I cannot say that her position was such as a woman would be in when having connection with a man. There was a frothy bubble about her mouth. I left the situation of the body unaltered. I merely put my hands upon the woman. The bedclothes were in a wrinkled condition. I returned to meet Dr. Davidson, and I left the body still undisturbed. I signed a report along with Mr. Davidson. (Here read his report, which was short, and only embraced the points brought out on his examination, with the addition of the following particulars—viz., right knee bent; ecchymosis on right side of neck, in a position precluding the possibility of hypostasis; tongue protruded; external parts of generation exposed, and blood issuing from the vagina.) From the appearance of the bed I should suppose there had been a struggle upon it.

James Shand, surgeon in Turiff, examined—I am surgeon to the poor in Auchterless. The inspector of the poor directed me to go to Mary Smith's on the 10th of April last. I arrived at her house about eight o'clock at night. I observed that two of the tenors keeping the back corners at the head of the bed together were drawn out. I reported on the superficial appearances. I left the body undisturbed. (Here Mr. Shand read his report, which enumerated the facts and observations already detailed in the notes of the inspection, with the following additions—viz., the lower lip covered with froth; bluish discoloration of the right side of the neck; and two bluish spots on the back of the right hand, which might have been produced by the pressure of the thumb, if shifted from its first position, or by the points of two fingers.) The report concluded with the following statement of opinion:—"Considering the above appearances, it appears to me highly probable that rape has been committed, and death occasioned either by strangulation or suffocation." I still adhere to that report, judging from external appearances. It is possible that the appearances might have been produced if she had consented.

Francis Ogston, physician in Aberdeen, examined—I inspected the body of Mary Smith along with Drs. Jamieson and Davidson, on the 11th of April. The body was lying in bed when we found it. I drew up a report of the state of the body (report read, see ante.) I cannot speak with certainty as to the cause of death.—I found a clot of blood under the integuments on the left side of the forehead. This was on the side next the back of the bed.—I cannot speak as to how it was produced. It might have been produced by a blow, or by the woman knocking her head against the bed. The appearances about the genitals were such as might have been produced by a forced connection. These appearances might have taken place independently of a sexual connection.—A foreign body of equal size with a man's private part might have produced the appearances. I cannot say if the woman had died during the act of connection, assuming the connection to have taken place. Asphyxia means a stoppage of the breathing. Stoppage of the breathing may be produced either directly or indirectly. Direct asphyxia may occur naturally or by violence. Indirect asphyxia may be caused by disease in the brain. There were two states of the heart in Smith's case which might have favored such indirect asphyxia. Indirect asphyxia may be caused by violence. In every case of apoplexy there is indirect asphyxia. Apoplexy may be caused by violence. Smith's death must have been caused by suffocation or by disease of the brain. The brain in this case was loaded with blood. I saw no other means than