did not time her pulse. I did not look upon her case as so dangerous as the other. She was vomiting at the time I examined her."

Q. By the Coroner.—Was she passive, while vomiting?

A. She lay on her side, and parties gathered about her so, I cannot say whether she was passive during the vom ting or not.

Her pulse had more force than Sarah's, not so irregular—she was as pale as the young woman was. On inquiring as to Sarah's case, I was told by Mr. Wood, that he found her leaning with her arms on the fence, that she put her hand on her stomach, and told him, she was very sick; that she fell and was carried in. After the action of the emetic, and after, I supposed, the stomach had been thoroughly cleansed, I administerel "Aromatic Spirits of Ammonia" and had warmth applied to the extremities. Under the treatment there was a decided improvement, although not enough to warrant me in supposing she was going to recover. Her pulse became less frequent and firmer; warmth somewhat restored, and from being unable to sustain her head herself, she could do so. All this time occupied from somewhere between 9 and 10 in the evening, and I got home about two in the morning. I said that decidedly it was not apoplexy; although there were some symptoms of it present. yet there were others that certainly were not. My reasons for pronouncing the cases poison, and not apoplexy, I have put down in writing, and will read them with the permission of the court. (The witness then read from a written paper as follows.)

1st. It is remarkable that the pain complained of was referred to the stomach, not to the head; the reverse of which would be expected in apoplexy.

2nd. The character of the pulse was remarkable; it was 160 and irregular—the latter being unusual and the former, as far as my experience goes, and as far as I can ascertain from experienced physicians, is never so frequent—its almost invariable character is slow.

3rd. The only cases of apoplexy where the pulse is ever accelerated, are those peculiar and rare cases of serous apoplexy, which set in with violent pain in the head; the patient, however, remains in full possession of his intellect, which symptoms usually are followed by coma.

4th. In apoplexy, from disease, coma is usually at once induced; in neither was this the case.

5th. It is remarkable that both cases should be attended with vomiting. It is rare in apoplexy, unless produced by some irritation of the stomach, such as a narcotic poison.

6th. The matter vomited was identical in character in consistence and odor, in both cases. The odor was that of pungent narcotic.