

Anything pointing to a criminal homicide, after which the body might have been thrown into the water, has to be borne in mind. This was not indicated in any of my cases.

The absence of any marks of violence or evidence of other modes of death affords, to a certain extent, grounds for supposing that death must have been due to drowning, even when the signs of drowning have disappeared, but statements on this head have to be made with extreme caution, as the possibility of poisoning must be borne in mind.

The question of whether wounds have been made before or after death must also be dealt with in a guarded manner, as on the one hand the blood pigments tend to diffuse themselves in a remarkable degree in immersed bodies, and on the other hand an actual blood-clot may be washed away, or decolorized, or even dissolved. Definite ecchymosis of clotted blood about an injury, however, indicates a lesion produced before death.

I venture to offer the present small material for consideration, more from a desire to offer proof of having been "faithful over a few things" than in the hope that the cases quoted are specially interesting to others. The following are the details of the cases:

CASE 47.—*Blow on Head and Drowning.—Autopsy.*—J. B. C., aged 45, labourer, while working upon a dredge, was struck upon the head by the iron scoop and knocked into the water. The body was recovered two weeks later, and an autopsy ordered.

Autopsy performed June 3, 1893, 24 hours after removal from water. Clothing not torn or disarranged. Head and neck greatly swollen, and features nearly obliterated. Genitals emphysematous. *Hair of scalp and moustaches readily scraped off.* Skin of palms and soles white and wrinkled. Over trunk numerous large blebs beneath epidermis filled with greenish fluid. On lower limbs similar vesicles containing clear fluid. Rigor mortis present. Strong odour of putrefaction.

A scalp wound, with ragged, lacerated edges, extends from two inches above the left external angle of the orbit nearly to the vertex. The pericranium is torn, and the bone exposed.

A linear fracture, three inches in length, extends upwards from the left frontal eminence.

On reflecting the scalp, the occipital region is seen to be infiltrated with a bloody, serous fluid extending downwards into the cellular tissue of the upper part of the neck., and *clotted blood is found free in*