

of apoplexy than of nervous shock. All those who saw her some hours before death, agree in saying that she was speechless, and froth was issuing from her mouth. That she should have shewn some signs of consciousness, is nothing remarkable for it is not uncommon to find a degree of consciousness present where extensive extravasation has taken place in the brain; that she was quite sensible however, as Dr. Hingston would have us believe, while she was speechless and "red froth" issuing from her mouth, is, to say the least, very remarkable.

It will be remembered also that in describing the post mortem appearances at the Coroner's inquest, Dr. Hingston stated that there was "congestion of the two bronchi, and of the lower end of the trachea," which is much more indicative of death from coma than from syncope.

The fact that deceased had taken a dose of opium, (though not entering into our calculations at the time, yet as Dr. Hingston himself has given it such prominence in his article,) must not be lost sight of, for where a strong predisposition to apoplexy already existed, as in the case of the deceased, and particularly where she was already semi-narcotized by alcohol, the administration of opium could not fail to be highly deleterious.

To sum up the arguments in favour of apoplexy, we have, then, habits of intemperance with disease of the liver; drunkenness on the day previous to, if not on the day of her death; a dose of opium within twenty-four hours of her decease; more or less complete insensibility for some hours before death, as evidenced by speechlessness and foaming at the mouth; and in connection with these, two extravasations of blood upon the hemispheres of the brain, in the arachnoidean cavity; and lastly, congestion of the trachea and bronchial tubes.

It is not pretended that a clear case of apoplexy is made out; on the contrary, it was and is admitted, that the case was one involving very great doubt as to the real cause of death, but it will, I think, scarcely be denied by any candid person, that the probabilities are stronger in favour of apoplexy than nervous shock. It was this grave doubt in the minds of the medical witnesses for the defence, which induced them to come forward in opposition to the prejudices of the public, and of all, or nearly all those concerned in the prosecution; and while they are conscious of having vindicated an established axiom of British law, which gives the unfortunate prisoner the benefit of a doubt, they care little for the sneers of disappointed counsel, or the harmless bleatings of Dr. Hingston.

As all of the medical witnesses for the defence, were more or less misrepresented in Dr. Hingston's report of their evidence, I addressed to each of them a note requesting them to hand me for insertion such corrections and remarks as they might deem necessary. The following notes were received in reply.

(From Dr. Hall.)

MONTREAL, April 3rd, 1860.

My DEAR CRAIK,—

In reply to your letter requesting me to detail my evidence in Court at the late trial of James Connell for the murder of his wife, I scarcely think it worth while to do so; as although the reported evidence as given by Dr. Hingston is very much curtailed, contains some obvious typographical errors, and has been, in as