

will be sufficient for my purpose to state that the numbers who actually suffered from the epidemic, were as follows:

Cholera Spasmod. Mitior, 61

“ “ Gravior, 85

Of this number, 36 died, they were all severe and well marked cases—24 were men, 11 women, and 1 child.

There were only two officers of the Garrison attacked—one of the 32d Regiment in the citadel, and the other an officer of the Royal Engineers, who resided in the town, and in a bad locality—it was thought, to his advantage, to admit him; they both recovered.

I shall now proceed to show the strength of the Garrison at Quebec, on the second visitation of this disease, in 1834, but as it was then no longer considered necessary to isolate the cases from diminished or altogether removed fear of its contagious nature. The men, women, and children were all treated in their own Regimental Hospitals, and I can give no detailed history of their treatment.

June, 1834.		Serjeants, Drummers, Rank & File.
Strength of the 32d Regiment at Quebec,		452
“ 79th “		469
Of which were treated:—		
Men,	153	
Women,	31	
Children,	9	
Total,	193	
Of which number died:—		
Men,	31	
Women,	10	
Children,	4	
Total,	45	

N.B.—The women and children are not included in the strength of either Regiment.

The first fatal case of cholera in 1834, in the command, was at Montreal, on the 13th July,—the first in Quebec, on the 18th of the same month; five days later. The last case in the command was at Quebec, a corporal of the 32d Regiment, and under somewhat marked and peculiar circumstances, which may excuse its introduction. A serjeant of the Regiment and his wife died of cholera in a house in the St. John's Suburb, the house was shut up and unoccupied for many weeks. After the disease had subsided some three or more weeks, the corporal was placed in charge of the furniture, with a view to its sale on the following day; he slept there only one night; he was admitted into hospital soon after daylight on the following morning, on the 19th September, and was the most severe and rapid case I had witnessed either in 1832 or 1834; he died in about five hours; several persons were said to have died in the house in both years: it was pulled down. I shall mention another case, which seems to bear upon the question of contagion, either of locality or person. When the disease appeared at Montreal in 1832, the 15th Regiment was quartered there, 45 cases occurred in one day; the Regiment having been promptly removed, with the Detachment of Artillery, to St. Helens, the disease ceased, I fancy from the day of their re-

moval; however that may be, there was a good deal of alarm in consequence of a corporal of Artillery being suddenly seized at St. Helens; however, to the relief of every one, it was discovered that this man had obtained possession of a canoe, and in it, after night-fall, crossed to Montreal, to visit his wife, remaining there all night; on his return the following morning, he was attacked, as I have stated; there was no other case at St. Helens.

So much, as it proved, unnecessary panic prevailed in 1832, that the dead were hurried to their graves as soon as possible; but in 1834, the alarm having subsided, and many considering the disease as not at all contagious, or only so under some peculiar circumstances of predisposition or locality, this extraordinary disease was viewed more closely than heretofore, many of its symptoms observed upon, and also inspection of the body after death practised without scruple. As connected with some of the more remarkable phenomena in many of the cases, general warmth, and over-heat of the surface returned, after a state of perfect collapse and its attendant symptoms, accompanied with profuse warm perspiration, a flushed face, quickened breathing, and every appearance of re-action *except* the pulse, which often could not be detected either in the carotid, femoral, or inguinal arteries, and these appearances took place in fatal cases, and were the immediate forerunners of death.

The vascular appearance of the adnata was observed generally in the more serious cases, after assuming a defined figure of an oblong shape below the cornea, and seemed formed by a congeries of minute vessels, as far as my observation went; but one of these cases, so distinguished, recovered. I see amongst the cases one noticed more particularly in reference to this—“towards the close of life a dark bluish red effusion or tint appeared in each eye, below the cornea, running transversely from canthus to canthus.”

Referring to an observation made earlier in this report, and to which my attention was drawn by the hospital servant—more or less muscular action returned after death. The lower jaw was seen to open and shut; the legs drawn up; while all the muscles, from the upper part of the thighs to the very toes, were in motion, contracting and relaxing; the arms, if laid straight, bent and folded across the chest; and this disposition remained as long as the body retained its heat, and, in very many instances, till the body cooled, it was useless to straiten the limbs as usual.

As an encouragement to perseverance, even in apparently the most hopeless cases, I shall give in detail two cases from my memoranda, but I should wish to be understood as advocating no particular mode of treatment; my sole object is to lay before the readers of your journal the result of practice and observation that are not in the power of all to command. I do not wish to provoke criticism, and hope I shall not experience any; but I relate what I saw in perfect good faith, and submit my observations with all their errors.

Patrick Mullany, 32d Regt., aged 21—July 17.—Admitted off the Provision Store Guard in the Lower Town, which is closely surrounded by houses where the disease