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Original Communications.

REPORT OF A FATAL CASE OF "GUNSHOT" WOUND OF THE HEAD.

By Dr. CASSELS, Three Rivers, P.Q.

The interest of the following case lies principally in the terrible effect produced by a comparatively small force when applied to a peculiarly fatal spot by accident or otherwise, and in the length of time required to destroy vital action, the injury being of such an exceptionally severe nature.

At about 8 o'clock on the evening of December 26th, 1879, I was called to Mr. B., who had shot himself about an hour and a half previously.

Upon arrival at the house I found the patient lying on the floor of his dining room, on the spot where he had fallen after firing the shot, his symptoms as follows: Pulse 45, full and intermitting, one beat in four; respiration 17, stertorous; pupils equally and much dilated, quite insensible to light, muscles relaxed, skin warm, complete loss of consciousness and sensibility, and in fact all the symptoms of compression of the brain.

The wound was situated in the right temporal fossa, less than a quarter of an inch behind the posterior branch of the temporal artery and close above its junction with its anterior branch, and was a perfectly circular hole of about one eighth of an inch in diameter (as if punched out), the hair was singed, and the orifice of the wound was ingrained with powder; very little blood had been lost.

The pistol used by the unfortunate man, was the smallest size Smith & Wesson, seven chamber revolver, and one cartridge only had been fired. On subsequent examination of a cartridge similar to the one which had been used, I found that it weighed exactly forty (40) grains, distributed as follows: bullet, twenty-five (25) grains; copper case, ten (10) grains; powder (including the fulminate), five (5) grains.

I was told by his wife that some ten or fifteen minutes after receiving the wound, the patient, in answer to her question, "if he thought he was going to die," had replied, "No, I am going to get well." These were his last words, unconsciousness rapidly supervening.

His regular medical attendant, who saw him within a few minutes after it happened, had applied cold to the head, a mustard sinapism to the heart, hot bottles, etc., to the extremities, but could not rouse him to swallow any stimulant.

I was unable with a probe to trace the wound more than half an inch into the muscles, and failed, after minute and careful examination, to detect any fracture or depression of the skull.

I had made up my mind to cut down, enlarge the wound, and try and ascertain the amount of injury, but, while waiting the arrival of some of my confrères, I observed that the symptoms of compression were lessening, the breathing became regular and calm, the pulse softer and more frequent, about 64, but still intermitting, the pupils more contracted and slightly sensible