

Mrs. McCoslin, an attendant, beat a woman with keys, kneel on the breast of another and taunt a third with having murdered her husband, in order to get amusement out of the patients.

NEW YORK, Feb. 27.—Mary Hoyt, daughter of the late Jesse Hoyt, was committed to an Asylum for the Insane, near Philadelphia, in June last. Several physicians certified to her insanity, but the certificate was never filed, and now, several physicians, after examination, pronounce Miss Hoyt sane. She alleges that there was an object in keeping her from her father's death-bed; she will contest her father's will on the ground of undue influence having been exercised in relation to it.

STAUNTON, Va., Feb. 27.—Another victim of the asylum poisoning has died, making six. Among the patients are several "Guiteaus," who conceive that they are commissioned by God to kill men whenever they can. They are intelligent and apparently natural on every other subject.

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## APOPLEXY.

*From an Hydropathic Standpoint.*

This disease is one of the results of a constipated, obstructed, plethoric, and overburdened body. Excessive alimentation, with defective depuration (cleansing) and some internal visceral obstructions or compressions, are the obvious conditions on which the apoplectic fit depends; hence, we rarely witness the disease except among the fully-fed, the corpulent or obese, and the gross or high livers; and even then we almost invariably find inattention to the functions of the excreting organs or outlet of the body among the predisposing circumstances. In medical books we find a world of confusion on the whole subject. Everything relating to its causes, seat, nature, and proper treatment is there hypothetical, unsettled, contradictory, a mountain mass of scientific absurdity, and erudite inconsistency.

**SYMPTOMS.**—Sometimes apoplexy comes on suddenly without the least premonition; sometimes the attack is preceded by a sudden paralysis of one side of the body, and sometimes it commences with acute headache, nausea, faintness, noises in the ears, confused vision, incoherence of ideas, loss of memory, and numbness of the extremities, &c.

**TREATMENT.**—The first thing to be done is to remove the patient to a cool, spacious, well-ventilated apartment, to loosen the clothing about the chest, remove everything from the neck, and place him in an easy and nearly upright position. Pour cold water on the head, apply warm water, and warm cloths to the feet, and occasionally hot fomentations to the abdomen. If the fit continue, the cold stream may be applied to the head, for a quarter to half an hour, several times a day; the cold wet gillule to the abdomen should succeed the hot fomentation, which may be repeated every two or three hours, for ten or fifteen minutes at a time; friction of the lower extremities with a cold wet cloth, followed by a warm flannel or dry hand-rubbing, is a valuable auxiliary. No attempt should be made to give nourishment, until the breathing is materially relieved, and then only moderate draughts of cold water should be administered. Preventive medication consists in the use of a daily cold bath, simple diet, abstemiously taken, regular hours for meals, laboring, and resting; a careful avoidance of all violent exertion, mental excitement, &c.

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