system ending in death,—is altogether unsustained by the evidence, or by the authority which he quotes in support of it; and it is much to be regretted that Dr. Hingston in quoting from Dr. Taylor should have overlooked the very first sentences of the chapter from which his quotations are taken, and where that "highest authority on legal medicine," as Dr. Hingston himself styles him, thus expresses himself: "It is important for a medical witness to bear in mind that in all cases of wounds criminally inflicted, the cause of death must be *certain*. No man is ever convicted upon mere medical probability." The Italics are Dr. Taylor's. Nothing could be plainer or more emphatic than this, and if Dr. Hingston had been guided by it in the present instance, it would have been better for his own reputation, as well as for the cause of justice.

Let us now see whether the views entertained by the medical witnesses for the defence are as devoid of foundation as I have shewn Dr. Hingston's to be. That gentleman was evidently aware of the strength of their position and of the weakness of his own, when, instead of taking their evidence itself and commenting upon it, he substituted a series of absurd caricatures and based all his remarks upon them, well knowing that the majority of the readers of the Journal would mistake them for the real evidence. And here let me inform those of the readers who have fallen into this very natural error, that the questions and answers given in large type on pages 70, 71, and 72, are the pure coinage of Dr. Hingston's own brain, and bear about as much resemblance to the real evidence given in court, as the tales of the Arabian Nights do to actual occurrences.

The medical witnesses for the defence were agreed in the opinion that death was probably due to apoplexy instead of shocks to the nervous system, and this opinion was formed after a careful consideration of all the facts of the case as stated by the crown witnesses, and was based upon what they then considered, and still continue to consider, sufficient grounds.

The first and most obvious reason for this opinion was the finding of extravasated blood on both hemispheres of the brain—two patches of the size of an English shilling. Here was a strong positive fact in favor of apoplexy, nothing less than its principal anatomical character.

The habits of the deceased, also, were such as to dispose to apoplexy; for it was proved beyond a doubt that the woman's habits were intemperate in the extreme. One witness, Catharine Donovan, stated on cross-examination that "from the 17th March till witness left the house," (a few days before the woman's death), "deceased drank all the time with the exception of two weeks;" and further that she "had seen her take half a tumblerful at a time either of whiskey or gin." William Tobin the son of deceased testified to the same habits, and Dr. Hingston himself states that at his first visit he "perceived that she had taken liquor;" and yet he asserts on page 72 that her habits of intemperance were "not proven." Dr. Hingston's notions of temperance, like his ideas of Medical Jurisprudence, are somewhat unique. If more proof of her habits of intemperance were needed, the state of the liver might be cited, and from the "considerably congested" state of the stomach, it is even probable that the woman had drunk largely on the day of her death.

The symptoms exhibited by deceased on the day of her death were more those