

MEDICAL EXPERTS THE WITNESS STAND

Doctors Say Joseph Sifton's Wounds Were Incompatible With the Accident Theory.

Two Doctors Who Think Herbert's Story of the Alleged Murder Quite Probable—
All the Blows Described Might Have Been Struck Without Caving in the Skull—Report of the Post-Mortem Examination.

With the important developments of each day's session of the Sifton murder trial, the interest of the public continues to grow. The attendance has increased until now only a small portion of those desiring admittance can get in. For some time before the doors open, a dense crowd has packed itself against the front entrance. When the doors are thrown back, the crowd surges in until a sufficient number have been admitted to fill the court room. Those on the outskirts of the crowd have no chance whatever to enter. So strenuous is the struggle for admittance that many people are painfully squeezed, and yesterday a number of women in the crush were so roughly jostled that they were heard to express an opinion that they would have been better at home; an opinion, it may be said on the side, freely shared by the court officials, from the sheriff down.

Yesterday's developments were hardly as sensational as those of the previous day. The opinions of the Toronto experts were, in the main, damaging to the defense, but that is what the experts are there for. When the experts for the defense take the stand their opinions will be so diametrically opposed that the public faith in the infallibility of the disciples of Aesculapius and Hippocrates will suffer a severe jolt.

The value of the episode of the visit of High Constable McLoud, Edgar Morden, Mary McFarlane and her sister to the Burns Hotel, which was secured by Mr. Johnston from the high constable, on the stand, was, to an extent, offset by the witness' straightforward account to Mr. Riddell of his reasons for going, and what transpired there.

Friday Afternoon.

Mr. Johnston having finished his cross-examination of High Constable McLoud, Mr. Riddell took the witness stand and cleared up some points about the visit to the Burns House on the Pipe Line road.

To him witness said that he went with Morden and the women to the Burns House because Morden said that he had something to reveal and wished McLoud as a witness. Morden did not do so, because the women said it was no place for them and they wanted to go home. The women each had one drink of wine. Morden struck witness because witness was saying to let the women go. Morden did not strike Morden back. When Morden struck witness the women ran away and walked home by themselves.

Richard Hobbs, a farmer, living on the north side of con. 6, London township, knew Joseph Sifton and remembered the day of his death. Witness saw Joseph Sifton that morning driving east on con. 6 between 5 and 6 o'clock. There was a lady with him. Witness heard the same day that Joseph Sifton was dead.

THE POST-MORTEM.

Mr. Riddell asked leave to put in the report of the post-mortem on the body of Joseph Sifton by Dr. Herbert Williams, assisted by Drs. Eccles and Waugh, of London. It was admitted on his undertaking to later put in the report of the doctors making the examination. The report was as follows:

Results of a post-mortem held on the exhumed body of Joseph Sifton, in the cemetery of the village of Arva (commonly called St. John's), Middlesex, Ont., on the 25th day of July, 1900, at 3 p.m., being 25 days after death: apparent age, 35 years; apparent height, 5 feet; dressed for burial, with black shoes and stockings; large amount of dark fluid (apparently blood) beneath head and body in the cloth upon which the body is lying; post-mortem rigidity absent; body in an advanced state of decomposition; black fluid running from mouth and rectum; both eyes protruding; mouth wide open, but cavity empty; face has a deep yellow tint; skin (epidermis) peels off easily over whole body; external genitalia marked by emphysematous hair on scalp comes off easily; undertaker's puncture in the right first intercostal space, two inches from sternum; clotted dark bloody fluid in right external ear; dark fluid in left external ear.

Wound "A"—Wound on right side of head, commencing at bi-auricular line and running backwards midway between the center of skull above and the orifice of the right ear, two inches in length; three silk stitches close the anterior portion of this wound, the posterior fourth being open. The edges are ragged. Remnants of blood clot immediately around this wound beneath the scalp, but superficial to periosteum.

Wound "B"—Anterior-posterior wound, one inch in length, lying near the median line of head, an inch in front of posterior fontanelle. Emphysema of scalp just behind the left ear and right ear and in left temporal region. Upper portion of scalp separated on vertex, commencing 4½ inches from the base of the nose, 3½ inches in anterior posterior diameter, and 4½ in the transverse diameter.

Wound "A"—Periosteum (periosteum) beneath large wound is separated from skull, but not torn.

Fracture "B"—A small fracture in the center of large wound is fractured, showing multiple fissures and passes in three primary directions. First, passes downward and backwards to right posterior inferior parietal angle; second, passes upwards and forwards, extending to the median line of skull, 1½ inch in front of bi-auricular line. This is bisected by a fissure running straight forward in the parietal bone two inches in length, extending from the primary point downwards and forwards through the parietal bone, the squamous portion of temporal bone to the base of skull and the root of zygoma. Two inches along this third fracture was another fracture or fissure, extending downwards and backwards to the posterior-inferior parietal angle.

Fracture "C"—A small fracture in the right parietal bone connected with the fracture breaking off as the chisel forces up the skull cap. Dura mater not attached to inner surface of skull cap; gas underneath the dura mater. The superior long sinus empty; the dura mater complete and intact. The fracture of the skull cap is complete, the dura mater complete and intact. The covering of the brain removed—The brain completely softened, decomposed and destroyed.

Fracture "A"—Running across the median fossa of the base of skull on right side convex towards the front and extending quite close to margin of foramen ovale, being a continuation of the anterior downwards fissure of the fracture of the vault.

Fracture "B"—A small fracture in posterior fossa, being continuation of posterior downwards fissure of fracture of vault, runs into right jugular foramen on the right side of the skull. No signs of hemorrhage at the base of skull; spinal cord softened and destroyed at upper part; no signs of hemorrhage; no fracture or dislocation can be seen in any part of body except the head; incision is made from the chin to the top of sternum and pharynx is open; nothing abnormal about the throat; the carotid vessels are normal; the larynx, trachea and gullet are opened, all normal; the pharynx turned and base of both lungs examined; no signs of fracture or injury.

Abdomen opened down the center and by cross section, omentum still yellow. Dissection posterior between the 4th and 5th ribs on right side and the 4th and 5th ribs on the left side. Stomach reddish on outside and apparently empty. Stomach and part of duodenum cut at both ends, removed and placed in bottle. No rupture or malposition of any abdominal organ. Left kidney normal, right kidney normal. Intestines normal and contain apparently fecal material. Pancreas normal. No signs of injury to be found. Pericardium empty. Pleural cavity normal. Lungs fill the chest, and are inflated. The heart walls are thin, but the heart otherwise normal. Hypostatic congestion marked at back and base of both lungs; chest otherwise quite normal. Specimens of stomach, portion of duodenum, part of liver and gall bladder removed and placed in bottle. Bladder apparently healthy and contains a pint of dark fluid. Intestines normal and contain apparently fecal material. Pancreas normal. No signs of injury to be found. Pericardium empty. Pleural cavity normal. Lungs fill the chest, and are inflated. The heart walls are thin, but the heart otherwise normal. Hypostatic congestion marked at back and base of both lungs; chest otherwise quite normal. Specimens of stomach, portion of duodenum, part of liver and gall bladder, and part of kidney removed in bottles, stamped and directed.

MARTIN LOOKED VICIOUS.

Ephraim Bathurst, recalled, said he met Martin Morden while the preliminary examination was going on last year. In talking with him about the Sunday Bathurst saw Edgar and Martin Morden in the barn and heard them talking. Witness asked him what made them look so vicious at him. Martin said "Nothing, only I was afraid you overheard Edgar and me talking down underneath."

Dr. Harvey E. Anderson, a practicing physician of Toronto, and professor of pathology at Trinity Medical College, Toronto, was the first medical expert to take the stand. For the information of the jury, he said that pathology was the study of diseases of the organs and tissues, post-mortem examinations, and conditions found in post-mortems. Witness engaged in about one hundred post-mortems in a year.

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been produced by a fall, but I am at a loss entirely to explain the injuries to the soft tissues by a single fall. In the first place, these injuries to the soft tissues were separated. We have THREE SEPARATE INJURIES to the soft tissues, separated from each other by considerable space. We have one described as the right side of the scalp, one being nearer the base line. Then we have the injuries to the scalp described by Dr. McNeil, then two small wounds behind each ear.

The nature of the injuries produced by a strong man striking blows with considerable force, would depend upon the thickness of the skull, second, upon the location of the skull; third, upon the nature of the weapon; fourth, upon the degree of violence used, and lastly upon the shape of the skull.

The injuries in the present case could all be produced by a fall, and the conditions found were consistent with it.

When the arteries in the scalp are injured, the blood is spurting free, rapid. With a contused wound, the bleeding would be of an oozing, dripping nature, possibly of a profuse character.

With the body in the positions described by Herbert, a fall would not get in the hair unless there was a large quantity of hair on the floor. Hay might or might not get in the wounds and hair.

I think, in your judgment, that the injuries were not caused by a fall? asked counsel.

"One wants to be extremely careful about a statement of that kind. The cause there is so many things, fractures," was the reply. A man may fall from a tremendous height, and have skin, from the inner layers, which could not see how a celluloid collar could produce the abrasions.

The doctor admitted that given the skin, the abrasions behind the ear were not caused by a fall, the evidence would be easier to form an opinion of the cause of the injuries. It had been difficult, he admitted, to form an opinion of the cause of the injuries. The theory of the crown and the theory of the defense were both possible.

With ten or twelve such blows as described by Herbert, witness would expect to find more wounds in the soft tissues.

Witness admitted that, taking the force of blows described by Herbert, and comparing with the post-mortem and the condition of the skull, HERBERT'S STORY COULD NOT BE TRUE.

Blows from an axe, and the conditions found were consistent with it.

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With the body in the positions described by Herbert, a fall would not get in the hair unless there was a large quantity of hair on the floor. Hay might or might not get in the wounds and hair.

I think, in your judgment, that the injuries were not caused by a fall? asked counsel.

"One wants to be extremely careful about a statement of that kind. The cause there is so many things, fractures," was the reply. A man may fall from a tremendous height, and have skin, from the inner layers, which could not see how a celluloid collar could produce the abrasions.

The doctor admitted that given the skin, the abrasions behind the ear were not caused by a fall, the evidence would be easier to form an opinion of the cause of the injuries. It had been difficult, he admitted, to form an opinion of the cause of the injuries. The theory of the crown and the theory of the defense were both possible.

With ten or twelve such blows as described by Herbert, witness would expect to find more wounds in the soft tissues.

Witness admitted that, taking the force of blows described by Herbert, and comparing with the post-mortem and the condition of the skull, HERBERT'S STORY COULD NOT BE TRUE.

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WOODS FAIR

Special Sale of Chatelaine Bags, Monday.

New line in black leather, covered frame, Monday 50c
Other lines as high as \$2.50

INDEED.

Regular 25c edition of this most popular song, Monday's price 10c

Men's Fleece-Lined Undershirts and Drawers, Monday, each 50c

3,000 of our regular 10c Writing Tablets, in ruled or plain, fine paper; MONDAY, 2 for 15c

24 DOZEN BOYS' HEAVY SCHOOL HOSE, Monday, per pair 25c

TURKISH BATH TOWELS, Monday, each 5c

MILITARY SHOULDER BRACE, Monday 50c

Wall Paper Sale.

500 rolls Glimmer Wall Papers; regular 10 roll, Monday clearance 7c
200 rolls latest designs in American Papers; regular 10 roll, 5c
150 rolls of our regular 15c Gilt Wall Coverings, Monday, per roll 10c

A Big Reduction Sale in Trunks and Valises commences today.

House Paints, in all colors, new stock, per quart 30c

Oak and Mahogany Curtain Poles, complete 20c

FIGURED COTTON TOWELS, 26x 40 and fringe end, Monday, each, 10c

64 Graniteware Chambers, No. 24, the largest size; there are a few white ones in the lot; regular 40c and 50c. Monday Basement Sale, 23c.

81 Graniteware Lipped Preserving Kettles, No. 30, a good medium size, holds 6 imperial quarts; regular 55c. Monday Basement Sale, 32c.

214 Graniteware Wash Bowls, 12½-inch size, with ring to hang up by; regular 25c and 35c. Monday Basement Sale, 13c.

72 Graniteware Tea Steepers, seamless pattern; regular 25c. Monday Basement Sale, 13c.

38 only Graniteware Stove Pots, to fit No. 8 or 9 stove, pit bottom, ring to drain by, blue outside and white lined; regular 85c and 9