A wretch driven mad by poverty, or disappointment acting on a distempered brain, has no other friends in this world.

The same courage which causes the physician to brave the dangers of pestilence should support him in this duty, beneath the assault of pestilent tongues and pens. Not the voice of the people, calling for executions, nor the severities of the bench, frowning down psychological truth, should shake his purpose as an inquirer and a witness. His business is to declare the truth. Society must deal with the truth as it pleases.

Doubtless, in some cases, the difficulty of discovering the truth is extreme, or even of determining how far punishment may be justifiable or salutary, when a criminal is to a certain extent insane. But in the numerous gradations of intellect and feeling in different human beings, there must be a point, as we descend from the highest intellects towards the perfect idiot, at which responsibility ceases, and impunity begins. No one but God can determine this point in every case. The defect or imperfection may be in the whole character and intellect, or limited to parts of the intellect, and parts of the character only; and none can weigh and estimate this accurately but God, who made all men, and knoweth whereof they are made. Man presumes in vain to fix this point in every case. The natural and acquired defects of any individual, his temptations, his resistance, his strength and his weakness, and, therefore, his actual sinfulness and responsibility, can only be known to Him to whom all hearts are open, and from whom no secrets are hid. But, in our obscurity and doubt, we should carefully and seriously weigh each case; and, although anxious to protect society, never be induced to despise the evidence of truth, and the dictates of mercy.

CASE OF POISONING BY LAUDANUM TREATED BY BLEEDING.

BY JAMES S. HUGHES, M.D., F.R.C.S.I., SURGEON TO JERVIS-ST. HOSPITAL.

I WAS summoned to see (in conjunction with the late Dr. Kerin, and Messrs. Daly and Gorman of Henry street) a gentleman in the Londonderry Hotel, who was supposed to be dying of apoplexy. We found him lying in bed, on his back, in a state of insensibility, with stertorous breathing; pulse extremely rapid, scarcely to be felt; face leaden-colored; lips purple; pupils minutely contracted and fixed; extremities cold, and covered with a clammy perspiration. On throwing down the bed-clothes to examine him more minutely, a half-ounce empty bottle, labelled "laudanum," fell on the floor, and the only information we could obtain was, that the patient had spoken to one of the waiters on that morning, between 9 and 10 o'clock, at his bed-room door, dressed in his night-shirt, and that, suspicion being excited, at 5 o'clock the door was forced open, and he was found in bed in a state of insensibility. The stomach pump was immediately resorted to; the tube being introduced, an attempt was made to withdraw any fluid contained in the stomach, but it having been ascertained that there was no fluid in that viscus, water was injected into it, and withdrawn, in order to remove any solid material, if present; the fauces were irritated, and a twenty-grain solution of sulphate

of zinc was injected through the tube, and repeated after a short interval, without producing emesis. Sinapisms were applied to the calves of the legs, together with heaters and turpentine frictions to the extremities, by which means the temperature was slightly elevated, and the pulse became fuller. Cold affusion to the head was next resorted to, with a view of taking off the pressure from the brain by unloading the vessels, which were turgid, but without effect. The patient appeared to be sinking, the coma becoming more profound, and the breathing more and more stertorous. On considering the history of the case, and the probability that the laudanum had been swallowed immediately after the patient had returned to his bed-room in the morning, and that, if so, full time for the absorption of the poison had elapsed, and viewing the patient as sinking under cerebral congestion, as evinced by the great turgescence of the vessels of the head and neck, together with the stertorous breathing, we determined to try the effects of bloodletting, and for this purpose the left temporal artery was opened, the blood from which at first merely trickled down, being very dark-colored and thick, but after a few seconds a jet of arterial-colored blood sprang forth, *immediately* on which the patient gave a deep sigh. Vomiting, with the expulsion of a small quantity of fluid containing a little indigested matter, devoid of taste and smell, and mixed up with mucus, ensued; his pulse became fuller, and less frequent; sensibility returned, and his countenance rapidly improved. We had him then walked up and down, between two stout porters, through the long corridors, the men being relieved from time to time, for we found it of vital importance to keep him in forcible and active motion, for if he was left to himself for a moment, stertorous breathing and a state of somnolency ensued. Brandy punch and hot coffee were given to him at short intervals. The drowsiness continued for over twenty-four hours after he came under our observation, during which period he was kept in a roused state, and the stimulants were continued.

This gentleman perfectly recovered, and when convalescent made the following statement. He said that, some time before the attempt to poison himself, he had determined to commit suicide, provided he did not receive a favorable answer to a letter which he had addressed to a high official officer in this city; and that, with a view of carrying out that intention, he went to a house in Sackville street, where he asked for one ounce of laudanum, but that, as he admitted that he was not in the habit of using it, the gentleman he addressed very properly refused to give it to him. He passed on to a shop in an adjoining street, and, being then on his guard, said he wanted half an ounce of laudanum, and told the shop-man that, as he was in the habit of taking it, he wished to have the strongest in the house: the man, not suspecting anything wrong, gave it to him. He then returned to his hotel, went to bed, and having gone out on the following morning, in his night-dress, to the landing at his bed-room door, to inquire after the expected letter, and having been informed by the waiter that no such letter had been left at the hotel, he went back to his room, and, having locked the door, returned to his bed and swallowed the half ounce of laudanum, after

which he soon became insensible. Thus upwards of seven hours must have elapsed, from the time of taking the poison till the alarm was given. In a physiological point of view, the result of the abstraction of blood was highly interesting, for the instant the congested brain was relieved, and thereby enabled to receive impressions, and not till then, vomiting ensued, the result of reflex action, the stertorous breathing ceased, and the patient was restored to his senses. From the details of this case there can be no doubt that, by the timely use of the lancet, the patient was snatched from the most appalling of deaths, viz., that by suicide.

That the propriety of having recourse to bleeding in the advanced stage of poisoning by opium, when accompanied by symptoms of cerebral congestion, is based on scientific principles, and has the sanction of the highest authority, it is only necessary to refer to the works of Orfila, Christison and Taylor; but as I know, from the treatment of more cases than one of poisoning by opium in the advanced stage, which have come to my knowledge, and in which there was evidence of congestion of the brain, that the value of this measure has been occasionally overlooked, principally from the fear of still further promoting absorption, I have been induced to record the foregoing case, which occurred some time since, as it illustrates the marked success which may follow the adoption of bloodletting in *suitable* cases of poisoning by opium or its preparations. That depletion does favor the process of absorption in the early stages of poisoning, is now generally admitted; but we must hold in mind, that a time may come when absorption has been carried to its full extent, and when the patient is sinking from congestion of the brain; and it is in this particular stage, when after emptying the stomach of its contents, that bloodletting is not only justifiable, but imperatively demanded. Dr. Christison, when alluding to the treatment of poisoning by opium, says that, "venesection has been recommended, and successfully used by some physicians. If the stomach be emptied, and the patient kept roused, as may almost always be done when means are resorted to in time, venesection will be unnecessary; however, when the pulse is full and strong, it may be prudent to withdraw blood, and it certainly appears that, in most cases where this remedy has been employed, the sensibility began to appear almost immediately after." And Mr. Taylor, in his recent work on poisons, when referring to bloodletting in poisoning by opium, states that, "bleeding should not be resorted to until *after* the poison has been completely removed from the stomach, as the abstraction of blood acts injuriously by tending to promote absorption; it is indeed only justifiable when, during the second stage, there is a strong, full pulse, with symptoms indicative of cerebral congestion. If the pulse should become feeble and sink after the abstraction of a small quantity of blood, the operation should be carried no farther." The following case of poisoning by laudanum, in which bleeding was followed by immediate relief, is so full of interest, that I think it worthy of a place here. It is published by Dr. Richardson, in the *Edinburgh Medical and Surgical Journal*, Vol. XVII., page 226:—

"An unfortunate female, when in a carriage with a friend, swallowed

laudanum; the action was observed, and she was conveyed by her terrified companion, in about half an hour afterwards, to the house of the practitioner under whose care the author studied; she was taken out in a state nearly insensible. Ten grains of vitriolated zinc were instantly administered without relief; ten more were added in a few minutes afterwards, and other means were in vain resorted to, to excite the action of vomiting, as the comatose symptoms continued evidently to increase; a vein was opened, and nearly twenty ounces of blood taken away; sense and motion *immediately* began to return, the emetic action of the zinc was produced, and the patient was left in a short time afterwards with no other remaining symptom of the danger she had escaped from, than a little languor.”—*Dublin Quarterly Jour. of Med. Science.*

CASE OF SPONTANEOUS HYDROPHOBIA.

DR. CONDIE presented to the College of Physicians of Philadelphia the outlines of a case of spontaneous hydrophobia. The person in whom it occurred, was a man of the name of Willels, an overseer in the shipyard of Simpson & Neill, Southwark, about 35 years of age, and of robust and active, temperate habits. He had enjoyed, previously, uninterrupted health, being unable to recollect an attack of any severe sickness, excepting a short convulsive paroxysm with which he had been seized several years ago. On Tuesday evening, August 27th, he went home in his usual health. The ensuing morning, on awaking from sleep, he experienced a stiffness along the left side of the neck, and a sense of numbness in the arm of that side; this he attributed to exposure on the preceding night, during a sudden change in the temperature of the air. Dr. T. S. Reed was applied to, who directed an appropriate treatment, which, however, did not abate the symptoms under which the patient labored. He soon began to complain of pain extending from the occiput along the left side of the neck and body to the epigastrium. Feeling thirsty, he took a tumbler of water in his hand, but on attempting to swallow some, was seized with a most painful sense of suffocation, followed instantly by a general spasm; which, however, continued only a few minutes. A sinapism was applied to the nape of the neck, and a large teaspoonful of laudanum was given, and repeated after an interval of two hours. The patient slept none. During the whole of Wednesday night he was tormented with an urgent thirst, which induced him to attempt to swallow water, but every time the attempt was made, the sense of suffocation and the spasms recurred. Dr. C. saw the patient, with Dr. Reed, at noon on the 29th of August. He found him in a constant state of jactitation; his eyes had a peculiar wild, suspicious look; his tongue was moist, and slightly coated along its centre, with a yellowish mucus; it was somewhat pointed and red at its edges; his skin was cool and moist. He complained of a pain commencing on the left side of his neck and extending down the side of his body, with a sense of weight or constriction at the epigastrium. He answered the questions put to him correctly, but in a quick, sharp tone of voice. He complained of intense thirst, but every time he at-