

diet, with the addition of a pint of porter daily; and when I last saw her, on the 15th of June, she said she felt quite well.

I think that, in this case, there can be little doubt that the hydatids took their origin from degeneration of the chorionic villi, according to the now pretty general opinion. The fact of her last child having been born twenty months before is against the supposition that they could have arisen from a portion of placenta retained after a previous labour. Another interesting point was the occurrence of efficient uterine contractions without pain, as I ascertained to have been the case by questioning her as to her sensations while I felt the uterus contracting under my hand.

Berwick-on-Tweed, Aug. 1867.

## S U I C I D E O R M U R D E R.

NOTE IN MEDICAL JURISPRUDENCE.

BY ROBERT BIGGS, Esq., M.R.C.S.E.,  
DEPUTY CORONER FOR NORTH SOMERSET.

AN inquest which I have recently held appears to me to possess so much medico-legal interest as to justify my placing it upon record in your columns.

On the 19th instant, as a boy who had been bathing in the river, about three miles from Bath, was dressing himself, he observed a young man about twenty years of age walking along the river bank towards him, with his eyes fixed on the ground, his chin resting on his hand, and his whole manner denoting deep thought. He passed the boy without even appearing to have seen him, and walked on through one of the land arches of a bridge about forty or fifty yards off, and was then lost to view. About two minutes afterwards the boy heard the report of firearms—of a gun, as he thought, from its loudness,—and thinking that some one was shooting birds, he hastily finished dressing, and ran through the arch to see what was going on. He there found a man lying on the river bank, close to the bridge, apparently asleep, with his feet nearly touching the water; and on going closer, he recognised it to be the body of the man who had passed him, quite dead, with, as the witness expressed it, “his head blown to pieces.” He gave an alarm, and the police were soon on the spot, and took charge of the body. It was shortly identified as that of a young man, an apprentice to a tradesman, who, after attending divine service on the previous evening, did not return home as usual to his master’s house. There could be no doubt in the case that deceased had committed suicide. From the condition of the face and skull, it would appear that he must have placed the muzzle of a pistol at the root of the nose, and discharged it, as the nasal bones were torn from their articulations, and much comminuted, and the frontal and parietal blown off and broken into small fragments, which, together with the greater portion of the brain, were scattered about on and around the body. The left hand was blackened, as if from the discharge of a pistol. In the right-hand pocket of deceased’s trousers was found a pistol, loaded to the muzzle and capped. It contained a double charge of powder and two slugs. The weapon with which the act had been committed was afterwards found in the river about a yard from the bank, and would appear to have been as heavily loaded as the one found in the pocket of deceased, as the nipple was blown out.

Evidence satisfactory to the jury was given that deceased had laboured under religious monomania, and they returned a verdict of “Suicide while in a state of temporary insanity.”

The feature in the case to which I wish specially to draw the attention of the profession is one which I have not seen noticed in works on Medical Jurisprudence. The evidence of the police sergeant clearly showed by the position of the body that deceased had placed himself in such a situation close to the river that the effect of the discharge of the pistol would, in all probability, be to cause him to fall into the water (most likely with the view of shortening his sufferings by drowning in case of the shooting not proving immediately fatal), and it was only by the chance of his falling to the right side, instead of forward or to the left, that this did not happen.

Now supposing this to have occurred, and the body to have been discovered a few days later, and some distance down the stream, with injury to the head such as I have described,

would it not have been a fair presumption that deceased had been murdered, and his body thrown into the river, the more so as no coin or other article of value was found upon his person? And further, is it not probable that a surgeon examining the body would conscientiously have given an opinion that the injury could not have been self-inflicted, unless deceased had afterwards been thrown into the water?—a contingency of a very unlikely nature.

The case is a singular one, as showing what great caution is necessary in appreciating the value of circumstantial evidence, as also to medical men in forming an opinion as to the origin of injuries found on the bodies of persons apparently drowned.

Bath, August, 1867.

## A Mirror

### OF THE PRACTICE OF MEDICINE AND SURGERY

IN THE  
HOSPITALS OF LONDON.

Nulla autem est alia pro certo noscendi via, nisi quamplurimas et morborum et dissectionum historias, tum aliorum, tum proprias collectas habere, et inter se comparare.—MORGAGNI *De Sed. et Caus. Morb.*, lib. iv. Proœmium.

#### GUY'S HOSPITAL.

CASE OF ANGINA PECTORIS, IN WHICH THE NITRITE OF AMYL WAS USED, WITHOUT BENEFIT.

(Under the care of Dr. HILTON FAGGE.)

THE chief interest attaching to the following case lies in the employment and failure of nitrite of amyl as a remedy for what is perhaps the most distressing of all affections. We are indebted to Mr. A. R. Ticehurst for a report of the case.

G. R.—, aged fifty, admitted into the clinical ward on the 6th of August, 1867. He is a temperate man, and does not smoke. A medical man who had formerly attended him states that “some years ago he had an attack of genuine hysteria, and a year and a half since a severe attack of epilepsy, after which he suffered from slight paralysis;” from this he recovered, and has since been in good health. The first time he experienced symptoms resembling those under which he now laboured was on Aug. 1st, when he woke up about half-past three A.M. almost suffocated, and with great pain at the heart. This passed off in a short time, but he has not felt well since. He attributes the present attack (Aug. 6th) to running up the Deptford station steps this morning. When he got to the top, his heart seemed to stop, and he could not get his breath. He then thought he was going to die. He was not, however, seized with any paroxysm till eleven A.M.; at that time he was writing at his office desk, when his heart seemed to flutter, he felt sick and faint, with great pain at the heart, his breath seemed to stop, and he fell back in his chair almost unconscious. Brandy was administered, which relieved him for a few minutes; but he soon had another attack, and kept on having them at intervals of a few minutes up to his admission, about three P.M. They were accompanied with great pain down the left arm, extending to the fingers’ ends, seeming to go right through the bone, and numbing the whole arm.

*Condition on admission.*—The patient is a tall, well-formed man. The heart-sounds are normal. On being brought into the ward, he had several attacks of severe pain and distress in rapid succession. In these attacks the face flushed somewhat. He writhed about in agony, pressing one hand over the heart, or seizing his breast in his fingers. He sometimes cried out, “Give me air!” “I must breathe!” “Oh, my God!”—at the same time trying to sweep away with his arms those who were standing by him. He more often remained quite silent. The eyes were half closed; the eyebrows contracted, so as to give the idea of great distress. The pulse (100 in the intervals) became quicker, but remained quite regular. He often drew himself up into a position of almost opisthotonos, or twisted himself round so as to bury his face in the pillow. As the attack passed off, the breathing became deep and frequent; he hiccoughed two or three times, or retching came on, and he fell back exhausted on the pillow.

During the first attack, after he was put to bed, ten drops