Original Communications.

CASE OF INFANTICIDE.

By JOHN BARCLAY, M.D., Banff, N.B.

CASES of infanticide are unfortunately of too frequent occurrence all over Great Britain; but their frequency, and the experience that ought to be derived therefrom, has not rendered the examination of the murdered infants very much easier, nor smoothed away the many difficulties attendant on the giving of evidence when the mothers are brought to trial. Few cases are recorded in the medical journals; and the reasons why this is the case are many, one of the chief being, that the great majority of practitioners have little or no interest in medico-legal work—not finding it, I suppose, to their interest to take any.

It were a good thing if the medical periodicals would devote part of their space to forensic medicine, for reports of instructive and interesting cases, and for the discussion of medico-legal subjects in general.

The following is a case curious from the mode in which death was brought about. Ten days after its birth, the child was discovered in a wooden box in the mother's bed-closet, and submitted for inspection. The following is a copy of the report sent to the Procurator-Fiscal.

"We hereby certify on soul and conscience that, between the hours of twelve o'clock noon and two o'clock afternoon, on Wednesday, the sixteenth day of March, 1864, we inspected the dead body of a female infant, daughter of B— T—, then lying within the Sheriff Court Buildings, Banff, parish and county of Banff, when the following appearances were observed by us; viz.:

"(Externally). The body, which was well formed and well nourished, was wrapped in a grey wincey petticoat, which contained also the after-birth, the sleeve of a white cotton shirt, and a piece of flannel; the whole being soiled with blood and the matter peculiar to the bowels of infants at birth, the so-called 'meconium'. The body measured nineteen and a half inches in length, and ten and a half inches from the crown of the head to the centre of the navel. Along with the after-birth it weighed nine, and without the after-birth eight, pounds imperial. Skin of the head and face of a bright red colour, except around the eyes, where it was of a bluish or greenish tinge. Transparent parts of the eyes dimmed and fallen in. In front of the neck, midway between the top of the breast-bone and the chin, and a little to the right of the middle line, a bluish discoloured spot, of an irregularly circular form, an inch in diameter either way. Three slight discolourations of the skin on the neck beneath the left ear, each half an inch in diameter. A bluish discoloured spot, an inch in diameter, over which the scarf-skin was partially detached, on the upper part of the right breast. The rest of the front of the breast reddish. Sides of the belly greenish. Twenty-two and a half inches of the navel-string remained attached to the body in a flaccid state, the extremity of which was regularly divided, but presented no appearance of having been tied. Six inches of the navel-string also remained attached to the after-birth, the extremity of it likewise presenting the same regularly divided appearance. Joints flaccid. Dependent parts of the body of a livid colour. The

fatty matter peculiar to the skin of infants at birth present in the armpits and groins. Finger-nails pale. Skin of the hands as far as the wrists blanched and wrinkled. Thumbs drawn into the palms of the hands, and the fingers bent upon them. Great toes bent slightly downwards. The body exhaled a very putrid odour. Nothing else unusual observable on the exterior of the body.

"(Internally). Scalp bloody; veins on the external and internal surfaces of the brain intensely loaded with dark fluid blood. A greater number of bloody points in the brain than usual. Tongue projected beyond the gums in front, which had left their impressions upon it. Nothing unusual in the mouth, throat, or gullet. Frothy glairy fluid in the windpipe. On dissecting the layers of the skin involved in the above-named discolouration in front of the neck and the fleshy parts underneath it, a very small quantity of dark effused blood was seen between the two fleshy bundles on the right side of the neck, termed the 'sterno-hyoid' and the 'sterno-thyroid' muscles, the effusion being about a quarter of an inch in its greatest breadth, but not of sufficient thickness to admit of being measured. The spots seen on the breast and on left side of the neck had no effused blood underneath them. Right side of the heart contained little, but the left side was full of dark fluid blood. The lungs, fully expanded and filling the cavity of the chest, weighed nine hundred and eighty grains; their margins were rounded; they crackled on being cut and handled, and gave out air-bubbles on being pressed under water. Together with the heart and part termed the 'thymus', they floated high in water, and alone they floated high above its surface, both whole and in fragments, and both before and after firm compression. The surfaces of the lungs were extensively mottled with bright rose patches on a chocolate coloured ground, and there was less blood in the lungs than usual. Bloodvessels peculiar to the infant at and before birth slightly contracted and filled with a pale yellow solid matter. Stomach filled with a reddish glairy fluid. Bladder empty. A bony point at the lower end of the thigh-bone. The green matter peculiar to the bowels of infants at birth in the large gut. Nothing else unusual observable within the cavities of the head, chest, or belly, or about the top of the spine.

"We further certify on soul and conscience, that, from the above examination of the body of this infant, we are of opinion that it had been born at or near the full period of its mother's pregnancy; that it had lived to respire; and that its death had been caused by apoplexy (congestive) of the brain, the probable result of pressure applied to the bloodvessels in front of the neck.

"(Signed), _____."

In the case of this child, which had arrived "at or near the full period of its mother's pregnancy", the intention of the parent had no doubt been to asphyxiate it by pressure on the throat; but ignorant of where the windpipe was to be found, or missing it in the excitement of the moment, she applied the pressure with her thumb firmly on the right side of the neck exactly over the large venous trunks, and with her fingers, though not so firmly, on the left side of the neck over the upper end of the sternomastoid muscle, thus pretty effectually arresting the flow of blood downwards from the brain. That such was the case, is, I think, amply borne out by the intensely congested state of the head and face, and of the brain and its membranes; by the fulness of the left side of the heart; by the state of the tongue, thumbs, and great toes, which indicated death by convulsions; and by the absence of any of the signs

of death from asphyxia, or of any other adequate cause of death. The process of respiration had been very fully established, as seen in the well-developed condition of the pulmonary air vesicles, ascertained by the application of the various tests, and by the contracted state of the fetal bloodvessels. No uric acid crystals were found in the kidneys. The bony point was very distinct in the lower end of the thigh-bone.

REMARKABLE CASE OF "MISSED LABOUR":

RETENTION OF A FÆTUS IN THE ABDOMEN
FORTY-THREE YEARS.

By R. W. WATKINS, F.R.C.S., Towcester.

ON January 10th, 1866, I visited, by request, Elizabeth Jones, aged 74, widow of William Jones, a small village shopkeeper at Stoke Bruerne, Northamptonshire. She gave me the following history, which I will narrate as nearly as possible in her own words.

About forty years ago, she was in labour with her second child. Her first, born two years previously, having had water in the head, had survived its birth only a few hours. The labour being very lingering, they had sent for my late father, who attended her, and remained with her during the night. On the following day, being very busy, and the labour having made no progress, he left her in charge of the midwife who was in attendance upon her. The pains were lingering, but not very severe. On the third day, she felt something "drop down suddenly inside her; and the child, the movements of which she had constantly felt up to that time, at once became cold as a stone." She was in great pain, and my father attended her for a considerable period. She refused to allow any other surgeon or physician to attend her, or to have any operation performed. She gradually improved in health, although she was very weak for a long time, and did not decrease in size for several years.

Upon examination, I found her much emaciated, with a hard bony tumour in the lower part of the abdomen, exactly resembling the fetal head. It could be easily moved from side to side; and, on careful manipulation, I believed that I felt the back part of the thorax in close approximation to it. She was evidently sinking from chronic renal disease; and, knowing that her end was approaching, had sent for me to request that I would make a *post mortem* examination. She had previously made a similar request to Mr. William Knott.

The story was corroborated by some of her neighbours, and by the rector of the parish, who had heard from my father a full report of the case. It was also stated, that at different times three little bones, "like finger-bones," had come away from her; but they had not been preserved.

On referring to old ledgers, I found the entry of the attendance on October 8th, 1822, in the handwriting of my grandfather, with the subsequent payment of the fee marked in my father's handwriting, and with his initials.

The woman died on January 13th, and the examination was made on the 15th by Mr. William Knott, in the presence of Mr. Knott, sen., Mr. Garlike, and myself. On making an incision through the abdominal parietes and opening the peritoneum, we immediately observed a hard white substance, which proved to be the vertex of a fetal skull; and, on enlarging the opening, a perfect fœtus was extracted without difficulty. It was covered with plastic lymph; the limbs were flexed anteriorly on

the body, and the head bent forwards to meet them, in the manner usually depicted in plates of the gravid uterus. It was attached by the umbilical cord to a vascular tumour of about the size of half an orange, which appeared to be the atrophied placenta, and which was connected by ligamentous attachment to the peritoneal covering of the broad ligament near the left ovary. One portion of this vascular tumour appeared to be a mass of unorganised lymph, containing fluid. Neither the fœtus nor the supposed placenta had any adhesions to the peritoneum, except the ligamentous attachment I have already mentioned. The uterus was perfectly normal. There was no cicatrix or other marks of injury on any portion of its surface. The ovaries were pale, but quite natural in size and form. There were no adhesions of the peritoneum in any portion of the abdominal cavity, and no appearance of previous inflammatory action in any part of the large or small intestines. The kidneys were extensively gorged with venous blood, and very friable; the left being more affected than the right. The spleen also was much congested and friable. The stomach and liver were healthy. The gall-bladder contained about twenty hard dark gall-stones. The pancreas was very much diminished in size. In front of the aorta, and immediately above the inferior mesenteric artery, to which it was connected by condensed cellular tissue, was a white encysted tumour, of about the size of a hen's egg, containing a milky fluid.

The above extraordinary case is, so far as I am aware, quite unique, and will be interesting, not only as an instance of recovery from tubular gestation and probably rupture, but also from the comparatively slight local and constitutional effects of a foreign body retained in the cavity of the peritoneum for more than forty-three years. The specimens have been forwarded to Dr. Barnes, for exhibition at the meeting of the Obstetrical Society.

PROPAGATION OF SYPHILIS BY VACCINATION.

By J. HYDE HOUGHTON, Surgeon to the Dispensary, Dudley.

IN the JOURNAL of January 6th is a paragraph of which the following is a copy: "Dr. Millard, of the Hôpital St. Antoine, has related in *L'Union Médicale* what he considers an undeniable case of syphilis produced by vaccination. The case has also been most carefully investigated and the conclusion accepted by MM. Depaul and Ricord."

Apròpos of the subject, I beg to send notes of a case (carefully taken at the time) which has lately come under my observation.

Louisa B., aged 9 years, was admitted a patient at the Dispensary, November 1st, 1865, under my care. She was a pale but tolerably well nourished child. The tongue was clean; the appetite good; the bowels regular. The child was considered by her mother to be in pretty good health, but had been brought to the dispensary for a "rash." She had a scaly eruption with a well marked coppery colour, most plentiful on the scapulae and nates, but also more slightly on the shoulders, chest, and abdomen; a little also on the upper part of the thighs. There was falling off of the hair on the head, eyebrows, and eyelids. She was subject to ulcerations about the angles of the mouth (still existing), and well marked mucous tubercles round the anus and vagina. The bridge of the nose was rather expanded, but the teeth were not notched or conical.

Her mother was a healthy, pretty-looking woman, aged 33. Her father was quite healthy, aged 40. I