the absorbent system, it acts beneficially as an antiseptic, preserving the frame from the rapidly fatal effects of this horrible disease by evolving carbonic acid from the lungs.

I have seen the petroleum used extensively both locally and generally, and have never observed the slightest deleterious effects arise from its exhibition, even in comparatively large doses. I am induced to believe, from actual observation, that it is a most valuable diffusible stimulant, and that, were it freely employed in the Asiatic cholera, it would produce marked beneficial effects.

To you, then, Sir, I would address those observations, which would more properly be addressed to the medical officers under your command; hoping that, by your kind recommendation, they may be induced to give this medicine a fair trial.

The petroleum used in England is the petroleum (Barbadian), which contains, according to Dr. Ure and Professor Farraday’s analyses, in 100 parts, 85.5 of carbon, and 14.5 of hydrogen, and by the latter it is called hydro-carbon.

It is important to guard against the employment of petroleum or natural naphtha, containing any other elementary body than the two before mentioned. To prevent any error in this respect, perhaps it is necessary to state that the petroleum (Barbadian), employed by practitioners in England, is a pure hydro-carbon; it will, therefore, be necessary carefully to analyse the native East India naphtha before it can be safely administered.

The form of exhibition I would recommend is the following:—Take the yolk of one egg, and amalgamate with it a tablespoonful of the petroleum, and to it add forty drops of the aromatic spirits of ammonia, filling a wine-glass with equal quantities of brandy and water; and this dose may be repeated according to the emergency of the case.

My only object in thus addressing you is a public one, hoping that the above suggestions may meet with your approbation, and that this powerful remedial agent may be fairly investigated by the medical officers under your Excellency’s command.

I have the honour to subscribe myself, Sir,

Your Excellency’s obedient servant,

James Tunstall, M.D.,

September 22, 1846. Bath General Hospital.

ON DR. CASTLE’S CASE OF SUPPOSED POISONING BY FOWLER’S SOLUTION.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

Sir,

In the case reported in the last number of the Journal, by Dr. Castle, of Leeds, it is assumed, (rather too hastily, I think, though certainly not without a degree of hesitation,) that half an ounce of Fowler’s Solution of arsenic taken in unknown doses during the period of three or four days, proved fatal. I do not deny the possibility of a poisonous effect in a given case, of such a dose, because we can put no limit to the varieties of idiosyncrasy; but in forming an opinion as to the cause of death, we should indeed find ourselves on dangerous ground, if we only inclined to the admission of what is in itself extremely improbable. I shall first attempt to prove, that in the case in question, it is highly improbable that the arsenic was the cause of death; and secondly, suggest a few hints applicable to medical testimony regarding the cause of death in other cases.

1. The smallest fatal dose of arsenious acid on record, is six grains for an adult and four grains and a half for a child. (Christian.) In the case in question not more than two grains was taken, and that in divided doses, for three or four days, the acid being rendered possibly less inert by its union with potass. Therefore if the arsenic was fatal, it was fatal in a dose of one-third of the lowest poisonous dose on record, divided by the number of times in which it was administered; and supposing it administered (as is probable,) in four doses, each dose was only half a grain, or one-twelfth of the smallest dose ever known to have proved fatal!

2. Two cases have come to my knowledge from which it appears that the draughts of the solution, (or one grain of arsenious acid,) taken by mistake within twenty-four hours, was not only not fatal, but almost or quite innocuous. One of these occurred in the practice of Mr. Gird wood, in which the medicine had “no detrimental effect.” The other case occurred in a patient of my own, who took forty minims of Fowler’s solution three times a day, for about a week, (a grain per diem,) with but slight inconvenience. Hence it is on two grounds highly improbable that half a grain per diem for four days should prove fatal.

And further, the fact that even this dose was taken in the case before us is founded upon “imperfect evidence.” And surely we are not warranted in believing on such evidence, that a dose twice times less than any fatal dose on record, and twice less than doses which have proved harmless, was really the cause of death.

But lastly, it must not be forgotten, that the post-mortem appearances in this case are exceedingly common even when no suspicion of poison exists. Thousands of patients die of inflammation of the stomach and bowels, from various other causes. Nor is it certain that the patient in this case died in consequence of the condition of the abdominal viscera. How often does the post-mortem examination fail to detect any cause of death, proving that there are causes of death beyond the scrutiny of the scalpel, and independent of its discoveries. Are we not too often hasty in deciding that certain ambiguous appearances after death, reveal the cause of it, merely because there is no other evident cause?—a most fallacious conclusion surely!

The facts of this case are highly interesting, and Dr. Castle deserves our thanks for having placed them on record; yet, with all deference to his suspicions, it must be admitted that they prove nothing.

I hope shortly to be able to place before your readers a host of facts on the medicinal action of arsenic, which will present a cumulative argument towards establishing the safety of small doses of the mineral, which no one fact can in the slightest degree nullify.

I am Sir, your obedient servant,

Thomas Hunt.

Herne Bay, July 1, 1848.