CASE OF POISONING BY SAVIN.

By GEORGE MAY, Jun.

SARAH Marcham, aged 18, usually enjoyed good health, but the catamenia had not appeared for some time. On the evening of Jan. 6th, 1854, she complained of slight pain in the abdomen, for which her mistress gave her some ginger in hot beer. About half-past three the next morning, she awoke her sister, with whom she slept, and complained of a pain in the stomach.

At 7 A.M., she refused to rise and dress, but said she was very well. During the morning, there was a slight sanguineous vaginal discharge; the clothes were saturated with fluid, and she seemed to suffer considerable pain in the abdomen. She permitted her sister to dress her, but got into bed again directly. She cried when her mistress threatened to send her home, but did not speak after 7 A.M.

I saw her at 2 P.M., she was in bed, and did not appear to notice my presence, nor could I induce her to speak or to attend to my inquiries. The respiration was natural; the pupils of the eyes slightly dilated, but contracted readily on a candle being placed near them. The pulse was feeble, but not sufficiently so to attract particular notice.

Her mistress suggested that the pain might be caused by an approaching miscarriage, and that the fear of detection had induced her to remain in bed, and this supposition might also account for the saturation of the bed clothes. She resisted my attempt to examine the mammae by covering them with her arms.

I then placed my hand on the abdomen; but she seemed to suspect my purpose, and contraried the abdominal muscles. This strengthened my suspicions of pregnancy, and induced me to examine the uterus per vaginam. The finger was passed readily, but she thrust down her legs, and I could not reach the uterus. On my persisting in the attempt, she began to cry. I was now satisfied that she was conscious; and believing that her silence was intentional, and presuming pregnancy, and that a miscarriage might be expected, I advised her mistress to send her to her home in the country in company with her sister.

After my visit, at about 3 P.M. on the 7th, vomiting commenced and continued during the night. The vomited matter was of a yellowish green colour, and, when examined with the microscope, showed the presence of a vegetable tissue, with rectilineal fibers and turpentine cells, it appeared to be identical with some powdered savin, which was compared with it. There was no evidence to show how she obtained the poison. She died quietly at 3 A.M. January 8th, not having spoken for twenty hours.

The body was examined fifty-six hours after death. It was well developed and there were no marks of violence. The lungs were slightly congested in the dependent parts, but otherwise healthy, the right cavities of the heart were full of black blood. The cardiac extremity of the osophagus was tinged of a yellowish brown colour. The spicile end of the stomach was perforated by two or three large apertures with softened edges, evidently from post mortem changes. The mucous membrane was reddened in patches, and a quantity of a dark coloured substance adhered to its surface. The intestines were healthy, and there was no congestion of the rectum. The kidneys were slightly congested; and the bladder was distended with urine. The uterus and ovaries were slightly congested and of normal size; she was not pregnant. The liver was healthy, and the gall bladder not distended. The stomach contained a large quantity of dark green palaeaceous matter, with a peculiar sour smell, with similar fluid extraneous in the abdominal cavity. A portion of this fluid was distilled, and on the addition of other, a yellow oil, resembling oil of savin, was obtained.

She probably took the poison on the evening of Jan. 6th, for she complained of pain in the abdomen during the evening and again during the night. If this be correct, vomiting did not commence till about sixteen hours after taking the poison, and not till some time after the occurrence of excessive diuresis.

Was her silence intentional? I was led to this conclusion because she attempted to prevent me examining the breasts and uterus, and began to cry on my persisting. She did not seem to make any attempt to speak.

Was the perforation of the stomach caused by the savin? In the cases of poisoning by savin mentioned by Dr. A. Taylor, there is one in which the stomach was perforated. Dr. Lethoby has recorded an interesting case in which savin acted as a narcotic poison.

In my patient there was no stertorous breathing or foaming at the mouth, the limbs were not convulsed, nor the pupils contracted. This case rather resembled some of those rare cases of poisoning by arsenic in which death arises from collapse. Dr. Lethoby suggests, that savin affects the uterus by causing congestion of the lower bowel. The intestines in this case were perfectly healthy.

Reading, Feb. 24th, 1854.

CASE OF POISONING BY GENANTHE CROCATA.

By D. NICOL, M.D.

M. E., aged 24, a healthy young woman, residing on the hill above Swansea, returned home about 10 P.M., and, having taken tea, just before returning to bed, drank a strong decoction she had prepared in the course of the day, under the name of "herb-tea," for the relief of erythema, locally denominated blast. She had scarcely got into bed, when she was seized with faintness, purging, and vomiting. While on the chamber utensil, she fell into severe convulsions, which continued, with little intermission, until she died—one hour from the ingestion of the decoction.

She was not seen during her illness by any medical man; and the account given above is that of her mother, who was present.

On the following day, I was shown the vomited fluid, of a pale dirty yellowish green colour, with a few morsels of a brown floating in it; a basin with the remaining decoction, and the herbs from which it had been prepared; also the roots of two plants, corresponding to those in the decoction, which were identified as those of genanthe crocata (hemlock water dropwort), and the wild celery (opium gravoletens).

Swansea, March 1st, 1854.

REPORTS OF SOCIETIES.

MEDICAL SOCIETY OF LONDON.

SANDAY, FEB. 11TH, 1854.

W. TYLER SMITH, M.D., Vice-President, in the Chair.

LACERATION OF THE PERINEUM. BY I. B. BROWN, ESQ.

Mr. BROWN had operated on the patient two or three years since with success. The patient had suffered for years. The injury involved half the sphincter and half the vaginal septum. This lady had become pregnant, and was lately delivered safely of a large child. The labour was somewhat protracted, and it was thought at one time that it might be necessary to divide the perineum laterally. This, however, was not required; and there was only a laceration of the new perineum to the extent of an inch. The child's head was fourteen inches and a half in circumference; the shouldern seventeen inches and a