

A report on the trial and acquittal of Mary Hunter, for the alleged murder of her husband by arsenic : with arguments in proof of her innocence, and strictures upon some parts of the medical jurisprudence of this country / by P. H. Holland, surgeon.

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from the Author.* (9)
A REPORT

OF

THE TRIAL AND ACQUITTAL

OF

MARY HUNTER,

FOR THE ALLEGED MURDER OF HER HUSBAND BY ARSENIC,

WITH ARGUMENTS IN

PROOF OF HER INNOCENCE,

AND STRICTURES

UPON SOME PARTS OF THE MEDICAL JURISPRUDENCE OF
THIS COUNTRY.

BY P. H. HOLLAND, SURGEON.

"There is perhaps more misery inflicted by unconscious than by conscious cruelty, but it is misery, it is cruelty, nevertheless."

MANCHESTER:

JOSEPH GILLETT, NORTH OF ENGLAND MAGAZINE OFFICE,
AND ALL BOOKSELLERS.

1843.

Counsel for the Prosecution.

MR. WILKINS.

MR. MONK.

Attorney.

MR. EDWARD HERFORD.

Counsel for the Defence.

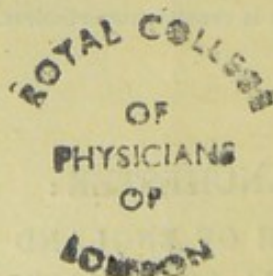
MR. JOSEPH POLLOCK.

Attorney.

MR. EDWARD BENT.

ERRATA.

Page 25, at lines 21 and 24, for "the contents of stomach," *lege* "the stomach and intestines and their contents."



INTRODUCTION.

The question may reasonably be asked me, why should I interfere in the case of Mary Hunter? what claim have I to be heard in her defence? And the answer is easily given, though by giving it, I lay myself open to the charge of egotism.

Some weeks before the trial, my friend, Professor Phillips, happened to mention a case of supposed poisoning by arsenic, in which, after careful analysis, none of the poison had been found; I expressed a very strong opinion that, unless the other presumptions were very strong indeed, the fact of poisoning ought not to be inferred in the absence of this, the best of all evidence. This expression was repeated to Mr. Bent, attorney to Mary Hunter, with whom Mr. Phillips was acquainted, and he, in consequence, expressed a wish to speak of her case to me. At his request I examined his notes of the evidence upon which the coroner's jury found their verdict, and convinced myself that it was quite insufficient for conviction, as it appeared quite as probable, that the man had died from natural disease as from arsenic, that indeed, was rather the more probable supposition. The case was, however, so suspicious-looking, that it was evident, unless a good and careful *medical* defence were prepared, the woman would be convicted *by mistake*. To satisfy myself about the nature of the case, and to guide the defence, I wrote out a number of questions to be put to the prisoner as to the symptoms she had observed during her husband's fatal illness. These questions were purposely so arranged that neither she nor the person who read them to her could know what would be indicated by the answers, and therefore, she could not have deceived us had she tried to do so, from the natural wish of persuading us that she was innocent. The answers were all conformable with the supposition of the case having been natural disease, and I, of course, placed great dependance upon this *unconscious* testimony in her favour. I had no information whereby to judge of the case, except this obtained from her own statement, and that brought against

her at the inquest, but from that I all but convinced myself that she was not guilty, while it was very evident that, unless some one interfered in her behalf, she would, in all probability, be convicted. Up to this moment nothing had been done towards preparing an effective defence; her attorney could do little, not having the necessary knowledge himself, nor the pecuniary resources whereby to procure professional assistance. I knew that by some sacrifice of time and labour, and by the exertion of influence, I could make up a good defence, and of course I could not *innocently* refuse; for, had I done so, and the woman been subsequently hanged, I should have felt myself to have been accessory to a legal murder.

I now undertook an elaborate examination of the whole of the evidence, particularly that part bearing upon the nature of the fatal disease. Having got out all the facts, and arranged them in the order in which they occurred, and also the opinions given, together with the circumstances on which they were founded, I made a careful comparison of them with the descriptions of cases of poisoning by arsenic and of natural disease, as given by writers of the highest authority, and was thus enabled to show that though the case did, in some degree, resemble one of poisoning by arsenic, it resembled as closely, I think more closely, a not very unfrequent disease, acute *gastro-enteritis*; for all the symptoms which were present, and all the morbid appearances discovered after death, as described by the medical witnesses *at the inquest*, might have been produced by this disease, while, though they might also have been produced by arsenic, it was remarkable that of those most characteristic of the poison, no mention whatever was made. I believed, therefore, that an error had been committed, easy and natural, but still an error; that the medical witnesses being strongly impressed with the idea that arsenic had been given, and finding many of the appearances which arsenic generally produces, not unnaturally arrived at the conclusion that in this case arsenic had produced them. I believe the conclusion to be erroneous, but those who best know the doubts and difficulties with which questions of this sort are surrounded, and *the little opportunity which those who have not paid special attention to such subjects, have of learning the minutiae of such inquiries*, will be the last to condemn, as flagrant errors, mistakes so easily committed, and so difficult to be guarded against.

Having made this comparison between the points of this case and the published opinions of the highest authorities in Medical Jurispru-

dence, I had now another possible error to guard myself against. I might have misunderstood those opinions. I therefore applied for advice to the highest accessible authority, and was favoured with replies from Dr. Christison, Dr. Apjohn, and, through a friend, from Dr. Guy, of King's College, and Mr. Taylor, of Guy's Hospital, these letters were confidential for my private guidance only, of course I may not publish them without the special permission of the writers, or I should be proud to do so. I further made personal application to Dr. Duncan, Professor of Medical Jurisprudence in Liverpool, Dr. Brett, Professor at the Liverpool Royal Institution, Mr. Higginson, surgeon, of that town, and several other professional gentlemen; and though we all took modified views of the case, yet, I believe, we all agreed in this, that upon the evidence the woman ought not to be convicted; several I know agreed with me that of the two it was more likely that the man did not die from the effects of arsenic than that he did.

I do not feel that I should be justified in repeating the opinions of others given to me in friendly intercourse, except in this general manner; my principal reason for introducing their names is, that it gives me an opportunity of publicly thanking them for the ready aid and cordial sympathy which I met with from them all, and from many others whom I have not mentioned. Many of these gentlemen, without a chance of remuneration, sacrificed valuable time, and cheerfully gave for charity, services which no money could purchase or can repay; and among the many friends and strangers to whom I applied for aid, to the credit of human nature be it spoken, not one refused, or even hesitated, to do everything in his power so soon as it was understood to be a case of mercy and of justice. Some backwardness to appear in court was indeed expressed so long as it was supposed to be an ordinary case for which fees would be paid, most medical men being very naturally unwilling to expose themselves to the insults which some barristers think themselves justified in offering to those who may not retaliate. As soon, however, as I said "the woman was in extreme danger, utterly destitute, your help is needed to save her," all difficulty vanished.

I may here be permitted to tender my acknowledgments to the learned counsel who conducted the defence: he performed his arduous task, beset as it was with difficulties, which those only who knew them can fully appreciate, in such a manner as to more than justify the confidence reposed in him. The speech for the defence was unfortunately

not called for; had it been, the necessity for this publication would not have arisen, and the poor woman's character would have been effectually cleared from this charge at least.

It would be unjust were I to neglect to mention the persevering industry and untiring zeal which Mr. Bent, the attorney in this case, displayed in the cause of a client, who never could be able adequately to remunerate him, and by whom, perhaps, he might even lose money, as well as time and labour.

I have spoken of arguments in proof of the innocence of Mary Hunter from the crime of murder; of course, strictly speaking, it is impossible to prove the innocence of any one who may, *by possibility* have been guilty; I shall, however, be allowed to have fulfilled all reasonable expectation, if I give good reasons for believing that the probability of innocence is as great, or greater than that of guilt. More than this cannot be expected. In a case like this of circumstantial evidence, neither guilt nor innocence can be proved, and though we are only justified in assuming guilt, when the circumstances proved can be explained on no other reasonable supposition, we are justified in assuming innocence when the circumstances are as easily explained upon that supposition, as upon that of guilt; the inference becomes all but irresistible when they are upon that supposition more easily explained, as I believe they may be in this case.

I will, however, postpone the consideration of this question until I have laid the evidence given at the trial before my readers. I shall not attempt to give a verbatim report of the whole, I believe, however, the following may be relied upon for the substantial accuracy of all the facts tending to show the nature of the disease that caused Hunter's death, and of all the important facts relating to the conduct and presumed motives of the prisoner. To save repetition, I have accompanied the report by a running commentary, which, being printed, in another type, need not prevent any one reading the report without interruption from my remarks.

The report of what occurred at the trial is followed by what I believe would have been proved if the defence had been given, and that by a short summary embracing the general argument. The whole concludes with some remarks upon the glaring defects in English medical police, which the case suggests and painfully illustrates.

THE TRIAL,

BEFORE MR. BARON PARKE, THURSDAY, APRIL 6TH, 1843.

Mary Hunter, 29, was indicted for the wilful murder of her husband, John Hunter, at Manchester, by administering to him a quantity of arsenic, which caused a disease of which he languished from the 25th to the 28th of November, and then died. She was also arraigned on the coroner's inquest. The prisoner, who was a good-looking young woman, with nothing in her appearance to betoken a cruel or revengeful disposition, pleaded, in a firm voice, not guilty. She was accommodated with a chair. A great number of ladies were in the court which was much crowded.

Mr. WILKINS, after dwelling upon the arduous and unpleasant nature of the duty which the Jury had to perform, and on which the life of a fellow-creature depended, the solemn responsibility that attached to their decision, and the fortitude, moderation and justice required from them, narrated, with great perspicuity, the facts of the case as subsequently detailed by the witnesses, and concluded by reading an extract from Roscoe's Law of Evidence, showing the nature of the proof necessary in a case of this description, and the exact fitness of the testimony which he should adduce to the legal requirements. He said the deceased was a man of peculiarly thrifty, moral and steady habits, of *robust* health, always anxious to lay something by for a rainy day, and had amassed a considerable sum of money. The latter fact was known to the prisoner, who, he was afraid, he should be obliged to show, was of a very opposite character. Her improvident habits had involved her in debt and difficulty, and she had been heard to express the greatest alarm lest her husband should detect her, especially as she had said that if he found out her extravagance and dissipation, **HE WOULD LEAVE HER, AND NEVER SEE HER AGAIN.** On this account she had once played off an artifice on him by robbing her own house, and making him believe that it was done by other parties. On the 12th of November she asked an entire stranger, whom she accidentally met some distance from her own house, to go with her to a Mr. Howard's, as her house was overrun with twitchlocks and mice, as he would not let her have arsenic to poison them with unless she brought a witness to testify to the correctness of her intentions. Just as she was going to the shop, she told the person to mind and say she lodged with her, and she did so; but the young man thought the witness too young, and refused to sell them the arsenic. On the Monday afterwards she went to Mr. Davies's, a druggist, **RESIDING NEAR HER OWN HOUSE,** and told the same story, adding that her husband was constantly upbraiding her about the vermin. It would be proved that there were none in the house; the neighbours never saw any; and a police officer who searched the house, could find no holes. The druggist asked her why she did not get a cat? She replied that she had such an aversion to cats, that the sight of one threw her into a fit. It would be proved that she had kept a cat, and *never manifested any antipathy to it.* The druggist refused her the arsenic, and

she left saying that in the evening she would bring her husband. At half-past four the same day she went to a Mrs. Dunn, *who was little known to her*, and asked her to go to the pawnshop with her; but on the road, *as if by mere accident* took her into Mr. Davies's, and *cunningly asked if he would now let her have that stuff, without mentioning the name of arsenic*. He said, "Oh yes; if that woman knows you;" and she replied, "Yes, all right." As she was leaving the shop, she asked him if there was enough to poison a person, and he replied "Yes." She said she would take care of it, mix it up in oatmeal balls and put it in the cupboards. No balls were, however, made. Some time previously she had told her neighbours that she had a presentiment her husband would die suddenly, as she had had a dream to that effect. On the 25th November he came home in *good health*? A little girl was nursing for her; and an hour before he came, *contrary to her custom*, she told the girl to take the children out. *When the girl left, the water was in the pan boiling for his porridge, of which he was very fond*. It had been his practice to take the children on his knee and give them some of it. He had scarcely tasted it on this occasion when he said it was not like the gruel he had before, and seemed as if some one had been putting snuff or CAYENNE into it. He ate some but not all and become very ill with violent retching and vomiting. *She said she took some of it, but it did not affect her if such was the case*. She went into the house of a neighbour and said, "I told you my poor man would die suddenly; he's death struck now." He was purged as well as sick, but she threw the contents of his stomach and bowels away and *washed the vessel*. He told the neighbours who came in, over and over again that it was the porridge made him ill, and described a burning in his throat that was a symptom of arsenic. One asked what he had done with the porridge, and he said he wanted to give it to the dog but his wife had thrown it away. The meal was then asked for, and she said she had taken care of that and thrown it into the fire. *She manifested the utmost indifference during his illness*, and gave various accounts of how it came on. To one she said he was an ailing man and had long been done up, but it would be proved that *he was a very healthy man*, and that his death was occasioned only by his taking arsenic or something that had caused violent inflammation. The deceased, he (the learned counsel) had told the jury before, was a frugal man. He was a member of two sick clubs and a building society, and besides this he had a considerable sum of money, which he had deposited in a savings' bank; and it would be shown that on the very morning after his decease she took with her the savings' bank book to *the surgeon* who would be called; she stated, what was not true, that his relations were most anxious to get possession of the money, and to prevent that, she wanted him to sign a certificate, in order that she might get possession of the money. The deceased had a brother-in-law and sister named Jackson, who resided in Manchester, and it might have been thought, when her husband was ill, they would have been the first persons whom she would send for. She was asked why she did not send for them, and she replied, "Oh Mrs. Jackson is a bad one, and I don't like her." When they came on the following Monday, having learnt of his illness from a person who was an entire stranger, they asked her why she had not sent for them, and she said, assuming terms of fondness, "Why, my love, I could not send, because there was no one I could send who knew where you lived." It would be proved that some of the neighbours offered to go for them, and that she re-

fused the offer. Afterwards she told Jackson that Mr. Willis, the surgeon, had said that he (Hunter) would never get better—that he had a liver complaint, and that he had no more liver than the size of a nutmeg. Mr. Willis would disprove that he had said *anything of the kind*. Another circumstance was well worthy of attention, that half an hour before that poor man died, whilst he was yet living, she sent to a neighbouring person's house, to borrow some sheets to lay him out. That showed, at any rate, what her impressions were, and what her opinion was as to the result of the catastrophe. The prisoner was apprehended by Beswick, the constable, and he said to her, "I presume you know on what charge I am taking you?" She answered, "I do not." He then told her that he was apprehending her on a charge of poisoning her husband, and cautioned her as to saying anything to him. She denied the charge. "Well, but I am credibly informed that you went to Davies's the druggist, and purchased a quantity of arsenic." She solemnly declared that she had never purchased any arsenic, either from him or any one else. When she had been identified by Mr. Davies as the person who did purchase arsenic at his shop, she said, "I did buy some arsenic, but it was to poison twitchlocks." All the medical men concurred in the opinion that the symptoms which manifested themselves were the secondary symptoms of taking arsenic. Some of them would tell the jury that, beyond all doubt, the death of the deceased was caused by taking arsenic. His learned friend and himself had deliberated long on this question, and at their suggestion the person who instructed them had subpoenaed two other medical men of eminence to assist the jury in coming to a conclusion. MR. DAVIES, AN EMINENT CHEMIST, HAD ANALYSED THE STOMACH, AND NOT A VESTIGE OF ARSENIC COULD HE FIND. Medical men would tell the jury that that was no criterion whatever. They would state that the stomach was quite empty, except one small piece of potato—that there were spots on the stomach resulting from the taking of arsenic. They would explain what were the remedies administered by the parties who attended him, to assist in removing the arsenic; and when the jury took into account that *for three days and three nights that man was in a constant state of purging and sickness*—when they took into account the nature of the vehicle in which the poison was administered, milk, which was frequently administered as an antidote to arsenic; and when they heard medical men, Mr. Willis, Mr. Dyson, Mr. Harrison, Mr. Blackburn, and Dr. Carson, all concurring and telling them that it was quite consistent that there should be a total absence of arsenic, then he thought that they would come to the conclusion that arsenic was administered. The prisoner did everything to prevent the body of the deceased being opened. Mr. Wilkins concluded with a few general observations.

Upon this speech I shall not at present make any further observations than to point out, that several important statements tending to throw suspicion upon the intentions of the accused, were not sustained by evidence, these I have put in italics. In several instances the witnesses said just the reverse. There is one case of suppression of evidence in favour of the accused, which was peculiarly striking. The prisoner had explained to the druggist, that she wished for the arsenic to destroy twitchlocks and mice, and when he asked "Have you not a cat?" She replied, "No, she was frightened of cats." "It would be proved," said Mr. Wilkins, "that she had kept a cat, and had never

manifested any antipathy to it." Now it ought to have been in Mr. Wilkins' instructions, for it was in the depositions taken at the inquest, that one of the witnesses, Caroline Bedford, recollected the prisoner telling her that on seeing the cat kill a rat in her presence, "it frightened her very bad,—she fainted away through it." If a false statement made to persuade the druggist to sell her the poison was a presumption of guilt, so this true statement, thus curiously confirmed, was certainly a presumption of her innocence of intention. The other deviations from a correct statement of the evidence will be remarked upon as I proceed. The passages in small capitals are presumptions of innocence rather than of guilt,—for instance, the "fear that her husband would leave and never see her again," was not the feeling of one contemplating his murder. Nor would one who had been so guilty go to the surgeon of all men in the world, to excite his suspicion by asking him so immediately after her husband's death, for a certificate to enable her to get possession of his property; to whom she stated, what was probable if not true, that her husband's relatives intended to prevent her getting possession of his property, a design which she was naturally desirous of preventing.

I do not see that any good purpose would be attained by troubling my readers with a *verbatim* detail of the evidence, the imperfect report in the papers occupies nearly six closely printed columns, yet much of what was most important is omitted. I think I shall accomplish my object best by confining my attention almost entirely to those points which tend to illustrate the nature of the fatal illness of the deceased, giving merely a sketch of the other evidence.

ALICE BELSHAW: I accidentally met the prisoner in Ancoats-street, on the 12th of November, about four o'clock, in broad day-light. It was raining, and prisoner gave me shelter under her umbrella. She asked me to go with her to Dr. Howard's, the druggist, where she wanted to buy some arsenic to poison twitch-clocks, (black beetles), as she was almost *snied* away with them. We went to the shop, when she told me to say I lived with her, which was false. The druggist's boy would not sell her any. There was no attempt at concealment.

[This witness said that she looked at the prisoner whom she had never seen before, so that she would know her again, that she thought then that she had some bad design: but Mr. Pollock, by his cross-examination made it quite evident that this suspicion of the witness had entered her mind afterwards, not at the time.]

THOMAS WOOLFENDEN, apprentice to Mr. Howard, druggist, merely proved that the prisoner and the last witness had asked him for arsenic to kill twitch-clocks, which he refused to sell. "There was no attempt at concealment, it was done quite openly."

RICHARD DAVIES.—I am a druggist in Travis-street. I remember where the deceased John Hunter lived. His house is about a hundred yards from mine. I have known the prisoner two or three years by her coming occasionally to my shop. I remember the inquest on the deceased. The prisoner came to my shop twelve or fourteen days before, and asked for some arsenic. She did not at that time mention any particular quantity. I asked what she wanted with it. She said it was for the purpose of destroying mice. I asked her if she did not keep a cat. She said, no; she was frightened of cats. I refused to sell her the arsenic. I said I

did not sell it unless the person wanting it brought a witness. She went away, but did not mention her husband. I told her she had better bring him with her. I knew her to be married. I should think this was between eleven and twelve o'clock. She came again that day, between four and five, and brought another person with her, whose name is Dunn. The person present is the same. She said she had brought Mrs. Dunn as a witness. I asked if Mrs. Dunn knew what was wanted, and she said yes; it was all right: it was for the arsenic.

[Mr. Wilkins, had created prejudice by saying, that she did not mention arsenic in Mrs. Dunn's presence.]

The prisoner asked how I sold it, and I told her. She said "let me have two ounces." I sold her that quantity. It was wrapped in two papers, in one parcel. At her request, I wrote on the outside "Poison." When I was making it up, she said, "I suppose there is as much there as would poison a person?" I replied, "Yes, a dozen persons." I cautioned her to take care of it and to keep it from children. She said she would. It was in powder. She said she would soon make use of it. She would mix it in meal balls and put it in the cupboard. I have sometimes administered medicines to her children when they have been poorly. I think I was at home from six to nine o'clock on the evening that Hunter was taken ill. No one came to me from him.

Cross-examined: I never gave a different account from this to my knowledge. She did not express any intention of bringing her husband. The prisoner said "I suppose there is as much there as would poison a person." People in her rank of life are in the habit of buying arsenic from me to poison vermin. There was no concealment, and she said she would take proper care of it. On the 27th November, from seven to nine in the evening, she came again and asked for some mustard. She seemed in great trouble, and I asked her what was the matter. She said her husband was very ill. I inquired what was the matter with him. She said she did not know; but the doctor had ordered a mustard plaster for him. I am not positive she did not mention the doctor's name. I never stated that she mentioned Dr. Harrison's name to my knowledge.

[At the inquest Mr. Davies stated, that she said Mr. Harrison was attending her husband. This is important, as it is a strong presumption against guilty knowledge of the cause of her husband's illness, that she should have gone to the very same druggist from whom she purchased the poison, and voluntarily tell him that her husband was very ill, and that Mr. Harrison was attending him; such conduct was sure to excite suspicion, as in fact it did, and is not consistent with the consciousness of guilt.]

ELIZABETH DUNN deposed that, she had gone with prisoner to buy arsenic from Mr. Davies, and that she was quite aware, (contrary to Mr. Wilkin's statement), that it was poison that she was purchasing. Mrs. Dunn also said, that Mary Hunter had told her on the Monday preceding her husband's death, that she had lost the arsenic on her way home.

[This account corresponds with that given by Mary Hunter herself, unknown to Mrs. Dunn, and it was not contrived between them, for when first charged with the crime, Mary Hunter said, either from fright or forgetfulness, that she had never purchased arsenic at all.]

ELIZABETH BEDFORD, a little girl about eight years old, was called to prove that the prisoner had on that particular evening sent her out with the children, contrary to her usual custom, lest, as was insinuated, her husband should give some of the poisoned porridge to them. She proved, however, that Mrs Hunter very often sent her out with the children when she was cleaning the house, as she was doing all that Friday afternoon.

Not very likely, by the way, that a woman contemplating her husband's murder should be very anxious about the cleanliness of her house.

An attempt was made to make this witness prove that Mary Hunter had made the porridge herself, but it failed. It is probable that she did so, but it was not proved.

SARAH STREET: I am the wife of Jonathan Street, a warehouseman. We lived next door to Mr. Hunter. I had known him and his wife, before his decease, for about three months. I was occasionally in the habit of going into the house. I heard some one vomiting in the house about a quarter past six in the evening of the 25th of November. The prisoner came to me about twenty minutes after six and said, "Will you come in? John is very sick." I went in, and found the deceased vomiting at the slop stone in the kitchen. I asked him if he had a bowel complaint? The prisoner was out. Mr. Hunter seemed to be very ill. He complained of pain in his bowels; that his throat was very hot, as if he had swallowed *cayenne pepper* or snuff. I held his head. The prisoner then came in, and said she thought it was his porridge that made him ill.

[Very unlikely that she would herself attribute his illness to the porridge had she guilty knowledge of its contents.]

He said, "Give the porridge to the dog." The prisoner said she thought if it was not fit for him it was not fit for the dog, and that she had thrown it away, and the basin which contained it into the midden.

[How natural was this conduct! Who that loves a dog would not have done just the same, and this evidence of the kindliness of her disposition, was urged as a proof that she knew the porridge was poisoned, and would not give it to the dog lest his subsequent death should expose her guilt.]

She said she had tasted the porridge, that it had made her sick, and that she had swallowed two spoonfuls.

[Mrs. Hunter says she did taste the porridge herself, and felt a momentary sickness; this may have been the effect of imagination from seeing her husband sick. Had she poisoned it, she would perhaps have *said* she had taken some, and it had not made her sick, and, therefore it could not have been that which made him ill.]

The deceased vomited into a small tub. There was a good deal in the tub, and Mrs. Hunter threw it away into the midden. She emptied the contents twice. Mr. Hunter said that he would require help, and his wife went out as if to fetch it. She was absent about half an hour and then came back, saying that neither Mr. Lonsdale, nor Mr. Cook, the druggist, was in. Mr. Cook's house was further off

than Mr. Davies's. When she came back the deceased was in the petty; he was very sick, but could not throw up anything. I and a neighbour assisted him. He was unable to walk, and complained of his stomach. The prisoner did not offer to go for any other doctor. I fancied that she had had liquor at the time, she cried so and made such a noise. Later in the evening Mr. Willis, a surgeon, came. Mr. Tongue, a neighbour, fetched him. He came about nine o'clock. The last evacuation of the deceased was then in the back room. Mrs. Hunter had previously emptied the chamber vessel. Mr. Willis saw the last motion. I stayed till about three o'clock in the morning. Mr. Lonsdale, *Mr. Hunter's doctor*, came the next morning.

[A proof that Mrs. Hunter had really gone to him as she said she had, and had, quite naturally, selected their own doctor.]

Mr. Hunter mentioned the porridge as the cause of his illness to Mr. Lonsdale, in the prisoner's presence. She told him that she had tasted the porridge, and it made her sick. Mr. Lonsdale said he did not wish to attend Mr. Hunter, as Mr. Harrison had been called in, and he did not attend any further. *A number of carrots were in the vomit in round pieces.* On the Thursday fortnight before Mr. Hunter died the prisoner came into my house. She sighed very heavily. I asked her what was the reason of it; whether she had any trouble or not. She said, "No, Mrs. Street; it is a dream that I dreamt. I thought they had brought John home dead; he is not well himself, and he fancies he will not live long." I never heard him complain of ill health. As far as I know and saw he was a healthy man. I never heard her or her husband complain of twitchlocks or mice. We had none in our house, which is next door, and of the same standing and age. She had no cat. I knew they had money in the savings' bank. Mrs. Hunter had told me so some time previously. She showed me the book. The balance due is £66 13s. 5½d.

Cross-examined: Mr. and Mrs. Hunter lived very comfortably together. We could hear in our house what passed in theirs. I never heard any noise of strife or quarrelling. I always thought that Mrs. Hunter was a very good mother, and that she was even more attentive to her children and her husband's comforts than many women of her rank in life. She tried to make him comfortable, and kept her house neat and tidy, taking a good deal of time and pains with it on a cleaning day. She seemed very much distressed when she came to me. She showed great anxiety about her husband's condition, and seemed much distressed at his pain. It was seeing her in this state that made me think she was intoxicated. I had no other reason for thinking so. I saw no reason for doubting the sincerity of her distress. Before I went in she told me distinctly that she wished me to go to see him. I think he had not been purging before I went in. He did not say whether he had or not. I do not know that he was in the habit of taking cayenne pepper, nor did I ever hear him complain of the wind in the stomach. I never saw anything prepared for him, Mrs. Hunter might, for anything I know, have been in the habit of preparing cayenne for him.

[Hunter was, I believe, in the habit of taking cayenne pepper, and though Mrs. Street was not, one of his fellow-workmen, who would have been called for the defence, was well aware of the practice.]

The vomit might have had a bad smell. I did not see it. I paid no attention to it, and did not notice it. The tub into which it fell was a small one, and such as Mrs. Hunter would frequently empty. *I should have done so myself. It was nearly*

full when I went. There was no attempt at concealment. She did not prevent me examining it. Mrs. Hunter asked her husband would he have Mr. Lonsdale, and he said "Yes." He was the person, I believe, who usually attended him. He complained of his stomach with the vomiting. I saw Mrs. Hunter take the chamber-vessel down stairs to empty. There was a little slime in it. He went to it twice. She only emptied it once. The last motion was kept. The first would have been very offensive in a small room unless put away. The pieces of carrot vomited were small. He said he had had a herring for his dinner. *The carrots were not at all digested.* Her telling me the dream did not strike me as anything extraordinary. She seemed very uneasy about her former conduct to her husband. I cannot say that people in her rank of life often tell their dreams to other persons. Mr. Hunter was not a very strong looking man. *He was rather pale in the face, sallow, and dark under the eyes.* I never heard him talk of headache. *We have twitchcloths in our house in great numbers.*

SARAH TONGUE: I live in Walter-street, near the house of the deceased, two doors off. On Friday night the 25th of November, when he was taken ill, at twenty minutes past six, I heard the prisoner's voice in the street, and opened the door. I saw her running into Mrs. Hill's. She asked would Mrs. Hill lend her sixpence to get some brandy, as her husband was taken very ill. She asked me, for God's sake, to go in, as her husband was so ill. When she came back with the brandy, she said she knew he was a dead man. Three weeks before, she told me that she had a curious dream; she did not say what it was. On this night she said "Now, Mrs. Tongue, you laughed at me when I mentioned my dream." I again said it was only nonsense, and that dreaming was a sign of wedding.

[Much stress was put upon this mention of her dream; but very unjustly so, if, as would have been proved, her husband was a sickly man, and low-spirited, always ailing but never ill—what more likely than that she should have been uneasy about him—that her uneasiness of mind should make her dream, and that she should attach a superstitious importance to her frightful visions.]

I went into the house, and found him in the petty. He was in a very bad state, retching and purging. He said his throat smarted, and that it was the porridge. Mrs. Hunter was present and in hearing. I helped him into the house. He could not get there without assistance. I advised him to go to bed, and my husband coming in, carried him up stairs on his back. He said he was very sick and very sore. When my husband took him by the arm *he screamed from pain.*

[This scream is all important, as it is a distinct indication that at that time there was great tenderness of the belly, which pain afterwards subsided. Arsenic is not likely to have produced tenderness so soon, but if produced, it would not again subside—unless, indeed, the patient recovered. The fact of the matters *first* vomited being very offensive, is also important, as indicative of previous disorder of the digestive organs. The first action of arsenic upon the stomach is merely irritative, the matters rejected are not offensive until disease is produced.]

I went up stairs, and my husband went out to fetch a doctor. I remained attending him till three o'clock in the morning. I have known the prisoner long. She was not sober at this time. There was a little vomiting and purging after the

deceased came from the petty in the front room up stairs. He vomited twice, and Mrs. Hunter took it down stairs. *We asked her to take it down it smelled so bad. When she took it down, I did not hear her draw any water.* He retched several times, but nothing came from his stomach. The vomits looked very black, and seemed ropy or slimy. Mr. Willis came that night to see him, a little after nine. Before he came the tub had been emptied three times. It was the contents of the chamber vessel that was offensive. That was what we desired to be emptied. No one, in my hearing, had asked her to empty the tub, but she did so every time it was used. I remember Mrs. Horsfield being there the same night. The prisoner was down stairs smoking her pipe. Mrs. Horsfield said, "Mrs. Hunter, where the devil is this meal that has made John Hunter so ill?" She replied, "It is behind the fire; I've burned it. It has made him ill, it shall make no one else ill." She pointed to the back of the fire, and I saw the meal there perfectly burnt.

Cross-examined: I went into the house very little unless Mrs. Hunter sent for me. I did go in sometimes, but never found them quarrelling. They had the reputation of living comfortably together as far as I know. I don't know whether she gave her husband the brandy or not. She assisted to make him comfortable in bed. She did not help to make him comfortable in his illness. She helped to put the blankets round him, and was up and down. It was a common thing to say, "to dream of the dead is a sign of a wedding." She alarmed the street when she ran out. She called out aloud that her husband was taken ill, and that she was sure he would die. Had he been my husband, I should have been afraid, and might have said "I knew he was a dead man." *He said the moment he eat the porridge he began to vomit, and when he had eaten a few spoonful it began to smart his throat, and he began to retch and purge.* He complained of the soreness as arising from the vomiting. Mrs. Hunter made no opposition to my husband going for a doctor. He vomited both in the chamber-vessel and the tub. We asked her once to empty the former, it smelled so bad, both from the vomiting and the evacuation. He looked quite melancholy in the face as if fatigued. I did not look at his eyes. One part of the evacuation looked *very loose; one part ragged, and one part foul.* I saw him the next morning, when he said his stomach was sickly, and he was sore all over, but much easier than on the night before. I saw him on the Sunday night, and felt his feet—they were very cold. *He did not vomit then, nor after eleven o'clock on Friday night. He vomited twice a little after nine, but retched afterwards till eleven.* I was sent for to Mr. Herford's office, in Princess-street, about three weeks ago, when they were talking about the meal, and I then mentioned it *for the first time.*

[The depositions of this witness taken by the coroner were here put in, to show that this witness had not at the inquest said anything about the burning of the meal, probably because she did not think it a suspicious circumstance until it was suggested to her by others, subsequently to the inquest. There is little doubt, however, that the meal was really burnt; a guilty person would be very likely to burn it, but would certainly not have acknowledged that she had done so.]

SARAH HORSFIELD was called, but did not appear.

THOMAS WILLIS: I am an assistant-surgeon. At the request of Mr. Harrison, surgeon of Manchester, I attended to his patients in November last. On the evening of the 25th, about eight o'clock, I went to the house of the deceased and saw him in bed, up stairs. The prisoner came into the room two or three times. *He*

described himself to be sick to death and purged. I asked to see the evacuations and the porridge. The prisoner was present, and said she had thrown them out. I think she said the deceased said the porridge had made him sick, but that it was very good, and had been made with milk thickened with meal. The prisoner said he had some red herrings and fat meat for dinner that day. I looked at one of the stools; it had a dark clay-colour appearance with a greenish cast, indicating an absence of the proper quantity of bile. I took the complaint to be an attack of *English cholera*. He sat up in bed approaching to a state of collapse. His extremities were cold, and he was retching violently; his pulse was very weak indeed. Those would be the symptoms of violent cholera. They might be secondary symptoms of poisoning by arsenic, but I had no suspicion of that at the time. I prescribed a mixture containing a drachm of carbonate of potass, a drachm of laudanum, with eight ounces of water, to be administered—two table-spoonsful every two hours in lemon juice in a state of effervescence. I also sent two pills, each containing two grains of calomel and half a grain of opium. The tongue was whitish and moist, not arid. The countenance was very pallid, expressing great anxiety. The *faeces* were not *very* offensive. The prisoner said he had come home well on that day. I asked Mrs. Street and she asked the prisoner. He might have been in such a state as soon from cholera; I know nothing of the state of the internal viscera. I think he said the porridge tasted as if there were pepper in it. He did not complain of not passing urine.

Cross-examined: I have had considerable experience amongst the poor. I know something of cases of arsenic. It was my impression that deceased was labouring under a severe attack of common cholera, and I so recorded it in Mr. Harrison's book. I thought the liver was slightly disordered. I told Mrs. Street so. *I think I used the word "slightly," but I cannot swear to it.* I cannot say whether his breath was sweet. There was a sour smell in the room from the eructations. *I think I thought* on the following Monday there might have been arsenic from the symptoms I saw and other circumstances. Had the case rested as I first saw it, I should never have thought it other than common cholera. A bilious attack, producing vomiting with small intervals, for two or three hours, might produce a burning sensation in the throat. *That sensation had left him when I saw him.*

Re-examined: I have seen more severe cases of cholera. The absence of bile in the *faeces* is not a necessary symptom of arsenic. I considered it arsenic on the Monday, from the continuance of the symptoms. Had I found on the Friday difficulty of breathing, cramps in the legs, tenesmus, coldness in the extremities, and suppression of urine, I should have thought arsenic had been administered. In cases of cholera a reaction always takes place. If I found no reaction, and that the patient continued pulseless, I should consider that the strongest symptom of poison. I did not say that he had a liver no bigger than a walnut, and that he was sure to die. I anticipated his recovery when I first saw him. English cholera may arise from improper food, or eating an excess of fruit. It is attended with immense pain, arising from spasms in the stomach. The disordered state of the secretions would be the cause. I should apply alterative medicines, and, as soon as I had removed the cause, should expect reaction and restoration. I did say the liver was disordered.

[The burning pain in the throat had ceased when Mr. Willis saw Mr. Hunter, at eight o'clock. If this had been produced by the inflammation of arsenic, it would not have ceased while sensibility lasted,

nor would it probably have begun immediately ; if it were caused by cayenne pepper, it would begin immediately and quickly cease. The deceased was, it is said, in the habit of taking cayenne pepper ; his widow says that, she boiled for him some cayenne pods in the pan in which the porridge was made, and perhaps she forgot to clean it out. The deceased said, that the porridge "tasted as if it had cayenne or snuff in it." Arsenic has no perceptible taste. The inference is obvious.

Much stress was laid upon the alleged fact, that the accused had falsely stated that her husband was "quite done," and that the doctor had said, "that his liver was no bigger than a walnut." It requires but little experience among the ignorant to be aware how grossly, yet unintentionally, they exaggerate medical statements. Mr. Willis had said, "his liver was disordered ;" the deceased had long suffered from unaccountable pains in the belly, loss of appetite, had sallow complexion, offensive breath, and failing strength ; what more natural than that, his ignorant wife should imagine his liver gone, and think the doctor had told her that which she herself believed. Are we to call all such mis-statements lies, and take them for presumptions of intended murder ?]

Mr. JOHN GREGSON HARRISON : I am a surgeon at Manchester, and have been there about nine years, and in the profession twenty years. I saw Mr. Hunter on Saturday, the 26th day of November, after dinner. He was in bed, and in a state of collapse, almost pulseless, with great difficulty of breathing, but *no particular pain in any part of the body*. Understanding from my assistant that he had been suffering under cholera, I examined the abdominal region, but found *no pain on pressure*, which, after the violent retching, I expected he would have. He had continued tenesmus (straining), and had passed no urine from the night previous. I made inquiry of his wife as to his general health. She said he was a very sickly man, and quite done. I believed I had attended him once before at my house, but do not accurately remember. I asked him if he was better than on the previous night. He said he was very much better ; *the vomiting and purging had entirely ceased*. He was not in a state of stupor, but very much indisposed to answer questions. I did not tell his wife or any person that he had a liver complaint. I still thought it an aggravated case of English cholera, from his wife having represented to me that he had been a sickly man. Had I been told he had been a healthy man, I should have made a further examination. *Acute gastritis might have produced much the same symptoms*. They would have been consistent with the administering of any irritant poison. I prescribed for him. He complained of some degree of nausea, and I directed the mixture ordered by Mr. Willis to be repeated, without the laudanum, but with one drop of prussic acid in each dose. I saw him again on Sunday. There was no improvement. His breathing was still bad, there was coldness of the extremities and tightness about the chest. Had the disease been cholera, I should have expected a reaction by that time.

[This answer was in reply to a leading question ; of course, had it been common cholera he would have expected recovery, and if recovery, reaction.]

He told me that *he had passed no urine since I saw him before*. I considered him in danger. He was still averse to enter into conversation. I told his wife I thought him in danger. She did not seem to be much alarmed about it. She was always in the room when I was there, but I saw no particular attention or neglect to excite remark. I ordered a blister to the pit of the stomach, a bottle of hot water to his feet, and a mustard bath, which I found on my second visit had been done. His bowels had been constipated from the night of his attack, and I ordered him an aperient draught, and a mixture to be taken every three hours. I saw him again on Sunday night. There was no alteration. On Monday morning I found him sinking very fast; he could scarcely speak, and was dying. I ordered him half a drachm of carbonate of ammonia, eight ounces of water, and a little syrup, to be taken every three hours in a little lemon juice, in a state of effervescence. In the evening I heard that he had died with cramp.

[He appears to have had no cramp till just preceding death. At the inquest Mr. Harrison stated that deceased had cramp but no paralysis or convulsions.]

During my visits, his wife never pressed me to repeat them, and made no inquiry about his disease. On the Tuesday morning, about ten o'clock she came to my house with Mrs. Street. She was in a state of great excitement, and I smelt liquor. I smelt spirits on the first day of my visit. When she came to my house she said she wanted me to sign a certificate to get some money out of the Savings Bank immediately, as some relations—the Jacksons—in the house, had been quarrelling the night before, who should have it, and were determined to take the money and apply it according to their own wish. I refused to have anything to do with it, and she said she was going to Mr. Rutter.

[I have already remarked upon the unlikelihood of a guilty woman going to the surgeon to ask him, with such apparently indecorous haste, to give her a certificate; thus to excite or confirm any latent suspicion he might entertain.]

I made a *post mortem* examination of the deceased's body, assisted by Mr. Dyson, a surgeon, of Oldham-street, on the Tuesday evening. On view of the body externally, I found everything perfectly healthy. On making the usual incision into the abdomen, from the pit of the stomach to the pubes, on reflecting the integuments, I saw nothing particularly wrong. On taking out the stomach and intestines, as far as the rectum, and laying them open, very considerable inflammation presented itself, particularly in the stomach. There were patches of inflammation in the intestinal canal. There was considerable inflammation round the rectum. Great corrogation of the bladder. The mucous membrane of the stomach was considerably inflamed, more particularly at the cardiac extremity. Among the contents of the stomach, there was nothing but a grumous fluid, copper coloured, and a *small piece of potato*. I examined the stomach *very carefully*, and found the mucous coat highly inflamed, in distinct patches, and evident destruction of some of that membrane. The edges had a distinct abrasion at each termination of surface. The colour of the patches was dark red, highly inflamed. On the abrasion of the surface the membrane could be easily scraped off. The patches of inflammation proceeded from some foreign body—some irritating cause producing inflammation. The same existed in the duodenum in a less degree. I examined

very carefully but could not detect any irritating substance. I don't think any combination of disease could have produced the same result. The symptoms of poisoning are so exceedingly anomalous that I should not like to give a positive opinion as to whether or not this proceeded from natural causes. The inflammatory state of the stomach and bowels was quite sufficient to account for death. These were just such appearances as arsenic would produce. Cholera frequently comes on when a man has taken a heavy meal after a hard day's work. Milk porridge could not have produced such an effect on a healthy man. Supposing the poison to have been administered in solution, and taken into the system, the pain would be diminished, the same as after purging and vomiting if taken in the solid state. The liver was perfectly healthy. *All the viscera* were in a perfectly healthy state except such as I have described. In ordinary cases nature does not support two inflammatory actions at the same time; *so that if there is inflammation of the stomach, you rarely find it in the intestinal canal.*

[I do not agree in this opinion. Natural acute inflammation of the stomach alone is very rare—of the stomach and bowels together, much more frequent.]

Nausea before vomiting is generally attendant upon cholera, but when poison is taken, vomiting comes on almost immediately after, perhaps within twenty minutes. It depends upon the solvent power of the fluid in the stomach.

[Nausea before vomiting is usual in all cases, even when from emetics, and certainly not less so when from arsenic.]

There would be an immediate burning in the throat.

[The burning sensation comes on quickly, but not generally immediately after taking arsenic.]

The sensation of sickness would vary from a few minutes to twenty minutes or two hours. Vomiting would be more likely to come on earlier, if the stomach were empty at the time the poison was administered.

[In this case the stomach was full.]

Looking at the body, I should not say that the patient had died of cholera, unless I knew the previous symptoms. I should say that this patient had not died of cholera. The symptoms I saw previous to his death, in connexion with post mortem appearances, enabled me to decide with more certainty.

The JUDGE (to Mr. Wilkins): Why, you are making your witness contradict himself; he thought from the symptoms alone it was cholera.

I have seen a considerable number of cases of cholera—of Asiatic cholera. I was sent to Newcastle-upon-Tyne in 1832, when the cholera broke out there, to watch its progress. I had the medical management of the Manchester Workhouse, and was sent by the churchwardens. I had been connected with the workhouse four years, and have held an appointment under the inspector of factories during the last nine years. In cholera the venous vessels are distended. That was not the case in this instance. The inflammation in the patches is different in cholera—between the patches in cholera the spaces are quite pale, here they were all red. The destruction in the centre of the patch, noticed in this case, is not common in cases of cholera, but is usual when poison has been introduced. The effusion in cholera is chiefly mucous, but not tinged as this was.

In cases of inflammation resulting from cholera, there are generally premonitory

symptoms from reaction, but not when from irritant substances, it then comes on immediately. I have seen cholera come on with collapse as the first symptom, but then it has generally been preceded by diarrhœa during the day; never without diarrhœa. In cases of cholera, the ilium is more affected than the jejunum. Some authors state that arsenic is sweet, some that it is acrimonious. I cannot say whether it is so, or tasteless. I am disposed to think it is acrimonious. I have never tasted it. The first active symptom is heat on swallowing, which comes on in a few minutes. This is generally succeeded by retching, vomiting, tightness across the chest, difficulty of breathing, purging, tenesmus, cramps, (there was no paralysis in this case), great thirst and restlessness, convulsions and death. There was excessive thirst in this case. The pulse is always feeble after arsenic. There is prostration of strength; and suppression of urine.(?) On my first visit I had great difficulty in finding a pulse at all, and on the succeeding visits he was pulseless altogether. If the vomiting and purging had subsided by nine or ten o'clock on Friday night, I should have expected a reaction had it been cholera.

[Witness was asked should he expect the pain to cease with the vomiting, if the poison were ejected; he would say no more than "I should have expected if arsenic had been taken, that the pain would be *less urgent* after the vomiting and purging had ceased, if the arsenic had been previously removed." The counsel's persevering attempt to squeeze out a stronger opinion very properly failed.]

Cross-examined: Mrs. Hunter expressed her surprise that I had not come when I was sent for. Mr. Hunter said the vomiting had come on immediately after taking his supper. When I went to him the purging and vomiting had ceased. There was no violent vomiting after the first night. I understood that it had ceased on the first night. There is a marked difference between Asiatic and English Cholera. In the former the patient is almost always found of a blue or livid colour, and there is a hoarseness or loss of voice, which is not the case in the latter. The features are also sharpened, the eyes sunk, the breath cold, with great expression of anxiety. In this instance *the patient had no hoarseness or loss of voice*, he had an expression of anxiety on his features, but not more than might be produced by excessive vomiting from *any* cause. I did not treat this as peritonitis, as he had *no pain*, which I should have expected in that disease. This was not a case of hernia or *intus-susceptio*. I should think the deceased was about thirty-five. I have been frequently called to persons of his line of life for vomiting on Saturday nights, in consequence of their feasting on indigestible substances. Supposing that he had dined on carrots, fat beef, and herrings, a few spoonfuls of gruel might have caused him to vomit, but that does not correspond with the other symptoms. I believe what I ordered for him was administered. I perfectly agreed in Mr. Willis's view of the case. I believed it to be a case of common cholera until Sunday. It then became very mysterious, and I went to one of his neighbours to inquire into his general habits. *I had no suspicion of arsenic until I attended the child of Davies, the druggist, on Tuesday, after the deceased was dead, when Davies told me that he had sold the prisoner arsenic.* [The witness here underwent a long examination as to the nature and symptoms of the disease called *gastro-enteritis acutus*, and whether they did not resemble those developed in this instance, more than those produced by arsenic did.]

The deceased, he said, never had the symptoms of gastro-enteritis, though some of them might be distinguished. This case was not at all like acute gastro-enteritis.

[I suspect Mr. Harrison misunderstood this question. He could not mean to assert both that the patient died from the irritation of arsenic and not from gastro-enteritis; because, if arsenic was in this case the cause of death at all, it must have been by producing this disease: the only local difference between the natural and the artificial disease being, that the progress in the latter is more rapid, the symptoms more severe, the principal injury more confined to the stomach, duodenum and rectum, and the morbid appearances indicative of a more violent degree of irritation. Effects upon the nervous system, convulsions and paralysis, eruptions upon the skin, redness and soreness of the eyes are frequent though by no means invariable consequences of arsenic. It is quite true that a loaded state of the tongue is common in gastro-enteritis, but this is not invariable, and its absence may be accounted for by the stomach being completely cleared by free vomiting. The same fact would account for the breath not being offensive during the last illness, if it arose, as is probable, from habitual indigestion.]

[Mr. POLLOCK read the symptoms of *gastro-enteritis acutus* from Martinet's Manual of Pathology, and Mr. Harrison allowed that they were the same as in this case, except the loaded tongue. This little work is of deservedly high reputation for its accurate and concise descriptions of diseases and morbid appearances.]

Witness might have mistaken that disease for arsenic, unless he had the symptoms evinced in this case. Had he never heard of arsenic having been purchased, the symptoms before death were not such as would have led him to suppose that poison had been administered; but, though he found none in the body, after the appearances he saw on the *post-mortem* examination, he was of a different opinion. The centre surrounding the destruction of the mucous coat was dark red. The patches were *brick red*, rather than black or brown. *There were no livid spots*, There were no appearances as if the membrane had been seared with a hot iron.

[These are the appearances which would have been most characteristic of arsenic or other violent irritant.]

There was a small quantity of grumous fluid in the stomach. The lower part of the œsophagus [gullet] was inflamed, the upper part was not examined. He found nothing to detect the immediate presence of arsenic, but it might have been absorbed. The whole of the stomach and bowels were taken away and analyzed by Mr. Davies. When pain has been once excited, it generally returns again after short remissions with equal or increased violence. That is the opinion of the highest authorities.

[*Query.* Are there any exceptions to this statement? If any, they are extremely rare.]

The piece of potato found was at the pylorus; arsenic is more adhesive than potato. He would have expected that to remain rather than the potato. The small quantity of laudanum administered would not have taken away the pain of arsenic.

Re-examined by Mr. Wilkins: should not have taken this for either Asiatic cholera, gastro-enteritis, or hernia.

[Mr. Wilkins was evidently misled by the very skillful cross-examination. The object in asking about these diseases was not to attempt to show that the case was one of them, but to get an emphatic statement from the witness that there "was no pain or tenderness, or but little;" "no marked change of countenance or of voice;" "no very violent or continued vomiting;" "no vomiting of blood." These are the more peculiar symptoms of arsenic, and none of them were present, not only were they not mentioned, but their absence was positively deposed to. This was the object in asking the questions indirectly rather than directly, and it was accomplished most skillfully and completely.]

Gastro-enteritis would follow arsenic, without great care, if it did not destroy life. Is *gastro-enteritis acutus* an idiopathic disease? It is produced by errors of diet.

[The examiner was here confounding *gastritis*, acute inflammation of the stomach alone, with *gastro-enteritis*, inflammation of the stomach and bowels. The first is in this country extremely rare, except as a consequence of irritation, the latter is not unusual as a natural disease, while the extent of the inflammation throughout the whole of the alimentary canal, is an unusual consequence of poison. Supposing the stomach previously disordered, the large meal of fat meat, red herrings, and carrots which Hunter had for dinner, was not unlikely to excite the acute disorder, which Mr. Harrison attributes to errors of diet as a common cause.]

After attending the patient and making the *post-mortem* examination, he attributed the death to inflammation of the stomach and intestines, caused by the introduction of some foreign body, and from all the symptoms and circumstances, and after due reflection, he could come to no other conclusion than that the inflammation was caused by arsenic.

[Mr. HARRISON answered this last question with extreme reluctance. He evidently felt that upon his words the prisoner's life might be depending, and showed by his manner how painful was their utterance. As I differ from the conclusion to which Mr. Harrison has arrived, I feel that it is only just to say, that no one could witness the manner with which he gave his evidence without being very favourably impressed. It was both in matter and manner such as to do credit alike to his knowledge and his feelings; and in speaking thus, I know that I am expressing the opinion of several competent judges. The cross-examination upon medical subjects was extensive, strict, and searching; it lasted above two hours, and must have been unexpected, for it is very unusual for counsel to have such minute knowledge of medical science as was here displayed; but no important error was committed by Mr. Harrison, except, as I think it, the main conclusion, and that was a very natural one. Few, I believe, would have passed so well so severe an ordeal, and none could have manifested a more anxious desire to say no more against the prisoner than a conscientious regard for truth demanded. The last fatal answer was literally

dragged from him by the examiner, and was given with the extreme reluctance natural to a man of humane disposition, giving testimony affecting the life of a fellow-creature.]

THOMAS WILSON DYSON : I am a surgeon of Manchester ; have been in practice about eight years. I assisted the last witness in the *post mortem* examination of the body of Hunter, and can come to no other conclusion than he has done—namely, that inflammation of the stomach and bowels, produced by some foreign substance, which was most likely, from the symptoms and appearances, to be arsenic, was the cause of death. From the *post mortem* appearances alone, I came to this conclusion. Taking these appearances, in connexion with the previous symptoms, my opinion is still more strengthened, that arsenic was the cause of death. From the peculiar appearances, I feel convinced that arsenic was the cause. The appearances were intense inflammation of the stomach and bowels—very great degree of softening of the same membranes—spots of extravasated blood on various parts beneath it—a great number of points of ulceration throughout the intestines which were most present in those parts which in natural disease are free—and a quantity of red sanguineous effusion throughout the stomach and bowels. The rectum was inflamed, and the whole of the large intestines, which rarely, if ever, happens in any of the natural diseases of the stomach and small intestines.

[Perhaps so, but still more rarely does it happen after arsenic.]

The bladder was empty and firmly contracted, which is common after arsenic ;

[And after severe irritation of the lower bowels from *any* cause, ought to have been added.]

[I have inspected six cases of poisoning by arsenic, and the appearances in this were very distinct and marked, only more severe than I have before seen. The absence of the arsenic may be accounted for by its having been evacuated, by vomiting, or purging, or by its having been absorbed into the system. I think it might be thus got rid of in three days and nights. It might have required a week or two, or more, to carry off all traces from the flesh.—The JUDGE : If a piece of flesh were cut off, supposing arsenic to have been absorbed, could it not be discovered by submitting the flesh to chemical analysis.—WITNESS : The French chemists have discovered it in flesh ; but I was not aware of it when I made the examination.—By Mr. WILKINS : The arsenic might have been carried off by insensible perspiration and other means in progress for its elimination, in the course of two or three days.—The JUDGE : Would all traces of arsenic be likely to be carried away, if taken at six o'clock on Friday night if the person died on Monday evening ? WITNESS : All from the stomach and bowels.—The JUDGE : But from the flesh ? WITNESS : I cannot tell.—The JUDGE : Was the flesh examined ? WITNESS : No, my Lord.—The JUDGE : That was a pity !—By Mr. WILKINS : Had read Christison and Orfila, and my reading as well as my experience confirmed these opinions.]

Cross-examination by Mr. POLLOCK : When did you first mention the appearances of spots of extravasated blood, and of the quantity of red sanguineous effusion in the stomach and bowels.—WITNESS : Let me explain. I did not mention these appearances at the inquest because I was asked by the Jury not to give the particulars but only my general opinion.

[It is a pity that this request was complied with, for the effect is to throw a doubt upon the accuracy of the evidence.]

[Arsenic is soluble to the extent of 77 parts in 1000 of hot water. I account for its disappearance from its having been given in solution. In the six cases I have examined, arsenic was found, but in every case the arsenic was given in substance, the quantity varied from a quarter of an ounce to an ounce. Thirty grains would be enough to kill an adult.] Mr. POLLOCK: But how much of thirty grains would six or seven spoonful* of milk porridge dissolve? WITNESS: The whole of it!—Mr. POLLOCK: Dissolve not suspend? WITNESS: It will, if hot, dissolve as much or more. It will dissolve as much again in hot as in cold milk. I take the data of chemists. The medicines given would promote its removal by rendering the arsenic more soluble by forming arsenite of potash and ammonia. Mr. POLLOCK: But would they have that effect if given with lemon juice? WITNESS: It would depend upon the affinity of the acids for the alkalis. Mr. POLLOCK: And which has the stronger affinity? WITNESS: I do not know! There was destruction of the mucous coat of those parts which natural disease seldom affects. The jejunum is rarely affected in natural disease, in this case it was much affected; there was softening of the mucous membrane. Inflammatory patches might occur from natural disease in the stomach, but not in the jejunum. The extent of the diseased appearances depends upon the time of death from the time of taking the poison; when life is protracted arsenic produces more extensive local effects than natural disease. I noticed the spots of extravasated blood at the inspection, and would have mentioned them at the inquest, but was requested not to give the particulars; they are mentioned in the report written a week after the inspection. The JUDGE: Not written at the time? WITNESS: No my Lord, a week after. Arsenic boiled in milk does not perceptibly alter its taste. It has not an acrid taste in the mouth, but if swallowed, as soon as it passed the gullet a sense of heat would be felt.]

The learned JUDGE then stated, that as there appeared to be no probability of finishing the case that day, and as there was yet a mass of evidence to be brought forward on the part of the prosecution, it would be better to adjourn until the following morning; the Jury would have to remain together, and not communicate with any one. Three bailiffs were sworn to take them under their charge. One of the Jury wished to know if they might send for their clothes; and the JUDGE said, they would be allowed to communicate with their friends, but not concerning anything that had transpired that day in court. They would be provided with everything they required at Mr. Radley's, the Adelphi Hotel.

The court rose at half-past seven.

* This was the quantity of porridge Hunter is said to have taken, about three ounces or one fifth of a pint. A pint of boiling milk dissolves about thirty-five grains.

X (Insert in brackets) [This reply was probably made as a mere affirmation in answer to a question. Juice of much smaller quantity than thirty grains has destroyed life.]

SECOND DAY, FRIDAY.

The court, this morning, was again crowded to excess.

Mr. WILKINS applied to his Lordship to order all witnesses on both sides out of court, both medical and otherwise. The medical witnesses who examined the body had already given their evidence on behalf of the prosecution, and it had been heard by the medical gentlemen on the other side, and from this point it became merely speculative, and on that ground he made the application.

Mr. POLLOCK said, however strongly he might feel on the subject, he believed he could not in order oppose the application.

The learned Judge acceded to the order.

The examination of the witnesses was resumed.

SARAH HORSFIELD, a neighbour of the deceased, said, that the prisoner put the meal behind the fire, where it was burnt. The first motion she saw was very black, very nauseous, crudely and very offensive. Matter vomited much the same as the stools. At twelve o'clock he said he had no pain, not a bit.

After vomiting, round his mouth was sore like a breaking out there.

[Arsenic would not have produced any such effect so soon; it was probably only the cracked lip common in dyspepsia.]

Mr. JOHN DAVIES: I lecture on chemistry at the Royal Medical Society, and at the Pharmaceutical Society in Manchester. [Have studied chemistry a great many years. Received the contents of the stomach from Mr. Harrison (who was examined yesterday), and separated them. Carefully analyzed them, and also some porridge* given to me by Mr. Beswick. After the most accurate investigation, having subjected the contents of the stomach and intestines both separately and conjointly, not only to four or five different tests, but also applied those expedients for the reduction of the metal which would be decisive if the metal had been present, I found no poison whatever. There were no traces of arsenic whatever. I applied the sulphuretted hydrogen test, nitrate of silver, Marsh's test, and the reduction by the black flux. I did not find any powder at all. I did not find anything in the porridge. Alkalies and carbonated alkalies will dissolve arsenic in the stomach. I do not know of such a case from my own knowledge, but from the highest authority. I know some striking cases. I heard the evidence of Mr. Harrison yesterday, who told me on one occasion he administered a quantity of potash without acid.] *over*

[This was not given in evidence. It appears that one dose only of carbonated alkali, without acid, was given. I do not attach much importance to the fact. If it had been so given at first, before the vomiting ceased, it might perhaps have very slightly favoured the removal of the arsenic.]

* This porridge was, I believe, some which was found in a broken basin in the midden, and is supposed to be that which the prisoner threw away, believing it to be the cause of her husband's illness; but this is doubtful.

That would have a tendency to dissolve arsenic if anywhere in the stomach. Citric acid has a greater affinity to arsenic than potash. I think it possible that the prescriptions administered to the deceased would have a tendency to remove arsenic from the stomach and bowels, supposing it to be present. I have been in the habit of examining many stomachs where arsenic has been administered.

Cross-examined: I can hardly say what is the smallest portion of arsenic I could have discovered; but I could discover one part in one hundred thousand parts, and think it probable in several hundred thousand parts. Could have discovered a very small portion of a grain had it been present. I think if any had been present I could have discovered it. I have a high opinion of Marsh's test which I tried. Much smaller than the ten thousandth part of a grain would be visible by that test, and I know from the testimony of a distinguished chemist, that one millionth part of a grain has been rendered visible. Examined the whole contents of the intestines, and did not find any arsenic; also examined the porridge, and a small quantity of white powder, but found no arsenic. I know from my own knowledge, that carbonated alkalies will dissolve arsenic, and from the evidence I heard yesterday, I think the arsenic would be rendered soluble by the medicines, but think it not so very probable that the poison might have been removed in the time, but it might have been removed. I do not know of any case in which individuals have died within three days of arsenic and no arsenic found, of my own knowledge; but know of well authenticated cases in which persons have died from arsenic, and no arsenic had been found.—Re-examined: The questions put to me in cross-examination are much more fit for a pathologist than a chemist.]

MARY ANN JACKSON, wife of Thomas Jackson, and sister of the deceased. When I asked the prisoner why we had not been sent for, she replied, that she could not send. Mr. Harrison's young man told her that her husband had the liver complaint, and, if opened, his liver would be found no bigger than a nut; and that when it was proposed to open the body, she objected to it; We had no quarrel about the money; about six weeks before the death of her husband, she asked me to lend her £5, saying that her husband had drawn £10 out of the building society, £5 for herself and £5 for a widow lady; that he had given her the latter to take care of, and somebody had picked her pocket of four sovereigns in the market. I lent her two pounds.

Cross-examined: The deceased and his wife had been married ten years, and had always lived comfortably together for anything I know. The prisoner was a little given to drink. Her husband was of rather a hasty temper.

By the JUDGE: I had a quarrel with the prisoner about seven years ago, but we were on speaking terms.

THOMAS JACKSON gave somewhat similar evidence. We had never laid claim to the money of the deceased, but I and another person offered to advance money for the mourning.

[It is clear that the prisoner had no occasion to fear that Mr. Jackson would interfere to prevent her getting possession of her late husband's property, but it is not clear that she did not fear that he would.]

Cross-examined: it was a common thing for persons in her line of life to object to have a body opened.

Re-examined: Had my wife died so suddenly, I should not have objected to her being opened.

ANN WHITTAKER, of Walter-street, Manchester, next door neighbour to the deceased, and whose husband worked with him, proved that the prisoner had told her that her husband was struck with death when he began to be ill, and that he would be black when he was first struck, and those who laid him out would see it. She had said they were troubled with twitchlocks *some months previous to this*.

MARTHA ANKERS, a silk-winder, neighbour to the deceased, spoke to his regular habits. The prisoner, who was not a sober woman, told her *that her husband allowed her £1 a week to keep house*. She was in the habit of pawning a good deal, and said if he found it out he would almost kill her. Some time previously she had kept a cat.

Cross-examined: She was a good wife, and very fond of her husband, and had often expressed to witness her intention to act better. It was three years since they kept a cat.

MARTHA ANKERS, sen., said the prisoner had told her, twelve months ago, that her husband was going to draw some money from a building club; that she owed money, and as she was much involved unknown to him, she thought she would take it, as the only chance of redeeming herself, and would never do anything unknown to him again; and that it would be a greater shock to him to find she had deceived him than to lose the money. If he found out how badly she had behaved he would never live with her again.

[Evidence as to this alleged robbery was excluded, the Judge deciding that it was irrelevant.]

CAROLINE BEDFORD, living near to the prisoner, had charred for her, but heard nothing of her having twitchlocks. The prisoner had sent her to borrow sheets to lay her husband out shortly before he died, at half-past nine, he died five minutes before ten.

HUGH M'GILLON, who formerly lodged with the deceased, spoke to his being a healthy man; he did not complain more than usual.

WILLIAM COOK, a mechanic who worked with the deceased, spoke to his general robust health and steady habits, and the intemperate habits of the prisoner.

Mr. BESWICK, the chief superintendent of police at Manchester, proved that he apprehended the prisoner, and cautioned her not to say anything to criminate herself, when she denied that she had bought arsenic from Mr. Davies or any other person; and that she then said she had bought it to kill twitchlocks with, but had lost it, and observed, "you think I gave it to my husband, but you are mistaken." He afterwards, with police-officer Green, searched the house, but found no oatmeal balls. Mrs. Whittaker gave him a basin with some very old water porridge, which he handed to Mr. Davies, together with some papers containing a white powder that had been found in the prisoners's house.

Cross-examined: He never saw a woman more calm than she was at the time the charge was made.

Mrs. WHITTAKER proved that the basin was handed to her by a nightman (who was employed by the police,) who took it out of the prisoner's midden, the Friday night after she was apprehended.

Mr. DAVIES said he examined the contents of the basin and there was no arsenic.

ISAAC PHILLIPSON, the coroner's officer at Manchester, deposed that the prisoner told him that her husband had been ill a long time; that he had been a dying man from his toes and his fingers ends; that the doctor had told her that he died of the

liver complaint ; that Dr. Harrison had promised her a certificate, and that if the body were opened, what she said about the liver would be found correct.

[This expression "dying from his feet upwards" is very commonly used by the poor to express loss of sensibility in the extremities, which appears to have been the case in this instance.]

By a Juryman : He had not told her the body was to be opened.

Mr. HARRISON, re-called, said *all the medicines given to the deceased had an acid in them* except the ether. Never told the prisoner that the deceased had died a natural death, and that he would give a certificate.

Inspector GREEN corroborated Mr. Beswick's evidence in part.

HENRY BAXTER, secretary to the Steam-engineers' Benefit Society, spoke to the general good health of the deceased.

JAMES BOARDMAN, secretary to the Apollo Lodge of Odd-fellows gave similar evidence.

Mr. BESWICK, in answer to his Lordship, said he left Jackson, his wife, and the prisoner's mother in the house after the house was searched.

Mr. JACKSON was then re-called, and said that he and the prisoner's mother were in the house until the Saturday after the inquest. Did not know of any one who could have thrown the porridge.

The learned JUDGE asked whether Mr. Davies had examined the porridge.

Mr. DAVIES replied that he had, and he thought it was milk porridge.

His LORDSHIP observed, that he thought the evidence as to the deceased having taken milk porridge was very scanty.

Mr. WILKINS hoped, if his lordship had any doubt about the matter, he would recall Mrs. Street and ask her the question.

His lordship referred to his notes of the evidence of several of the former witnesses, and said the only legal evidence of its being milk porridge was in that of the witness Willis.

Mr. WILLIS was re-called, and asked what the prisoner said beside the observation that she had given porridge to the deceased ; and he said she added it was very nice, for it was milk thickened with oatmeal.

The girl Elizabeth Bedford, was then re-called by the JUDGE, and said on the night the deceased was taken ill, she saw some water in a pan on the fire, but saw no milk. She added that the prisoner was in the habit of giving the children milk during the day. She saw the deceased's supper made on the Thursday evening, and it was composed of a little water in about a pint of milk. The meal was put in when the water boiled. She also saw it on the Wednesday night ; it was made in the same way. The oatmeal was put in before the milk, and then both were boiled together. The deceased had sometimes oatmeal porridge, and sometimes milk porridge, and she had seen him sometimes take oatmeal porridge and pour milk over it when eating it.

THOMAS JACKSON was re-called, and said he had not thrown any porridge into the midden.

Mrs. JACKSON then, in answer to Mr. Monk, stated that the night the prisoner was taken up she heard the nightmen empty the midden, but she did not know whether it was entirely empty.

By the Court : Saw the nightmen find the basin in the midden. It had been

previously emptied. The porridge was lying loose, and it was put in a basin by the nightmen.

M'GILTON said he was at the deceased's house on the Tuesday and Wednesday after the death of the deceased, but put no porridge in the midden.

Mr. BESWICK said *he employed a man to empty the midden*, and before he got there it had been emptied. He had made enquiries and search after the nightman, but could not find him.

Mr. JOHN CARSON, B. M., of Trinity College, Dublin, and now practising in Liverpool, was then called, and he said he was in court yesterday and heard the evidence of Messrs. Willis, Harrison, and Dyson. Paid attention to the symptoms of the deceased, and the signs they found in the stomach, &c., on the *post mortem* examination. From the statement then made I formed the opinion that those symptoms could not be produced by any disease I know of coming on suddenly in a person of perfect health. From those appearances I should say the deceased had died of acute inflammation of the stomach, part of the duodenum, the rectum, the jejunum, and ileum. I draw an inference from the fact of the stomach, duodenum, and rectum being more inflamed than the ileum, that acute inflammation had probably been produced by a foreign irritating body.

In natural cases it is more common to find more inflammation in the ileum than the duodenum, and the other small intestines.

By the JUDGE: I could not explain the appearances in any other way.

By Mr. MONK: Common white arsenic would produce these appearances.

By the COURT: It would also produce the symptoms described. [I think it possible that arsenic would disappear from the body in three days; but I know of no case on record where death has resulted from arsenic that arsenic has not been found. I have known after the lapse of seven or eight days arsenic to disappear from the body, and my general impression is, that that is the shortest time. I think it probable that the causes which were in operation would remove as much arsenic as would cause death.]

The JUDGE: Those causes would cease with death? Yes.

The JUDGE: Would it so completely remove the arsenic so that it would be impossible to discover the one-millionth part of a grain? I think the arsenic might be completely removed.

Cross-examined by Mr. POLLOCK: I think the greater portion would pass away by vomiting and evacuation, and that which was absorbed would pass off in other ways. The greater the diminution of vomiting or other causes, the less of course would be the chance of the arsenic being carried away. I am of opinion that idiopathic gastritis was never seen in this country.]

[Idiopathic gastritis is very rarely, if ever, seen in this country, but acute death from gastro-enteritis, though not frequent, is less unfrequent than death from arsenic.]

[I am told by one who heard Dr. Carson's evidence, that it was given in a manner by no means positive. It is probable that it would have been considerably, modified had the cross-examination which was postponed by direction of the Judge, been completed.]

Mr. THOMAS BLACKBURN was then called: I have been in practice as a surgeon in Liverpool for upwards of thirty years. Heard the evidence of the medical men yesterday as to the death of the deceased and his illness, and the appearances of the

body, and I think it within the range of possibility that arsenic could be detected. I, however, think the probability the other way.

The learned JUDGE then stopped the case, and asked the Jury whether they were of opinion that the case should go on.

The Jury said they had heard quite enough, and under the direction of his Lordship, a verdict of acquittal was taken, and the prisoner was discharged.

Though this was the inevitable termination of the case, it is much to be regretted that the defence for the prisoner was not heard. At present the almost universal belief must be that she is guilty; had her defence been heard, I have little doubt that the contrary would be the prevalent opinion; and though fully aware that I cannot do anything like justice to her cause, I will, nevertheless, endeavour to modify the unfavourable impression by stating some of the evidence which would have been, and some of the arguments which might have been employed on her behalf. In attempting this I have a double object, to clear the character of one who has been accused upon insufficient, if not erroneous evidence, and also to show what I believe to be the correct medico-legal doctrine in cases of this kind, according to the present state of the science.

On examining the argument by which it was attempted to convict Mary Hunter, it will be evident that the reasoning was in a circle. It was assumed that she had intended to murder her husband, because arsenic was the supposed cause of his death, and then assumed that arsenic was the cause of his death because she, as was supposed, had intended to murder him. Neither of the propositions were proved, and neither ought to have been assumed; as soon as the Judge discovered that one at least had been assumed, of course he stopped the case.

I think no one will deny, that if the deceased had really died from arsenic, the probability of the prisoner's guilt is very high indeed; but that not being proved, we have to consider, is the moral evidence by itself enough to prove the murderous intention of the wife, and her guilty knowledge of the cause of her husband's fatal illness?

This part of the subject I shall not examine at any length, but just direct the attention of my readers to the statements in the speech for the prosecution, which I have marked in italics as not established by evidence, and to the passing remarks which I have made upon the testimony of the witnesses.

As Dr. Christison has very properly remarked.* "The moral or general proof in charges of poisoning is almost always circumstantial only." From its nature the crime is secret, and direct evidence must not be expected. The circumstances of which such proof usually consists are,

1. *An unusual employment or knowledge of poison*; not shown here. 2. *Purchase of poison recently before the alleged crime, and under false pretences, or secretly.* It was in this case recently purchased, but not secretly, and it, very probably, was wanted for the purpose assigned. There is no proof or strong presumption to the contrary. There is strong presumption that it was never brought

* A Treatise on Poisons, &c. p. 70: from which excellent work the passages in italics are, with very slight alteration, quoted.

home, for a diligent search was made for it without success; and, as I have already remarked, the account given to Mrs. Dunn was probably the true one, as if the prisoner had contrived it for purposes of deception, she would have been prepared with an exactly corresponding account when first charged with the murder.

3. *Others, besides the deceased, having been injured by the poisoned food.* This did not occur.

4. *Suspicious conduct of the accused during the illness of the deceased; such as directly or indirectly preventing medical advice being procured.* Here, on the contrary, the accused was the first to go for the surgeon, and was "sorry that Mr. Harrison had not come before." "*Showing an over anxiety not to leave him alone with any other person.*" No such anxiety shown. *Attempting to remove or destroy articles of food or drink or vomited matter which may have contained the poison.* I have remarked upon this already. *Or expressing a foreknowledge of the probability of a speedy death.* There was no such expectation expressed greater than the evident severity of the disease would warrant.

5. *Suspicious conduct after the death, such as hastening the funeral, preventing or impeding the inspection of the body.* There is such a universal objection to inspection that that does not amount to any presumption of crime. *Giving a false account of the previous illness.* The account given by the prisoner was certainly incorrect, that it was intentionally false there is no evidence, there was not more exaggeration about it than is quite common. *Showing an acquaintance with the real or supposed effects of poison.* No such acquaintance with its effects was proved, and her answers to my questions showed that she did not possess any.

6. *The declaration of the deceased.* Both Hunter and the prisoner attributed his illness to the porridge, but it does not seem that he ever suspected that she had intentionally injured him; while, had she poisoned the porridge, she would certainly have attributed his illness to any other cause than that.

7. *The existence of motive, such as a quarrel, succeeding to property, or being relieved from a burden.* It was proved that Hunter and his wife had lived on good terms for ten years, that he was a kind father and indulgent husband, that he was in the receipt of good wages, and that upon his earnings her children's bread depended, while the fact of his being so provident as to lay by a provision for the future maintenance of his family was assumed to be a sufficient temptation to induce his wife to murder him!

It will, I think, be allowed that the general evidence does not amount to a *strong* presumption of guilt, and a very strong presumption is required to overbalance the great improbability that a woman would risk her life to commit a crime so revolting. Still the main point is, did Hunter die from arsenic? I expect to show that the conclusion that he did is erroneous; and I am sure it is unproved.

"The present doctrine of toxicologists and medical jurists," says Dr. Christison,* "seems universally to be, that symptoms alone can never supply decisive proof of the administration of arsenic. This

* A Treatise on Poisons.

opinion is certainly quite correct when applied to what may be called a common case of poisoning by arsenic, the symptoms of which are little else than *burning pain in the stomach and bowels*, vomiting and purging, feeble circulation, excessive debility, and speedy death." Dr. Christison afterwards goes on to say, that when in addition to these common symptoms, others become superadded more peculiar to arsenic, the presumption of that being their cause may become very strong indeed. Dr. Apjohn* states, that "It is now universally admitted that symptoms alone can seldom, if at all, enable us with certainty to declare whether poison has been administered or not." If this be correct doctrine, and that it is, no sound medical-jurist will deny, what must be our conclusion when we find that *all* the symptoms described occur in natural disease, while those which are most characteristic of arsenic were *all of them absent*? That the symptoms were not well marked is evident, for the case was throughout mistaken by an experienced surgeon for one of cholera, and the idea of arsenic never entered his head until after his patient's death; and it would have been curious if it had.

If this were a case of poisoning by arsenic at all, it must have been one of those which are the most common, where it produces irritation or inflammation along the course of the alimentary canal. Such cases generally last from one to three days. "In the ordinary progress of the symptoms, the first of a decisive character," says Dr. Christison, "are sickness and faintness. It is generally thought indeed, that the first symptom is an acrid taste, but this notion has been already shown to be erroneous." * * * "It has been already said that the records of medical jurisprudence do not contain a satisfactory instance of any person having felt in swallowing, that burning sensation in the throat or mouth, which is so generally supposed to be produced by this poison." In fact arsenic has no perceptible taste. I know of an instance in which a man stirred up a handful of white arsenic in water, and drank off the muddy fluid, and then found out that it was not, as he thought, cream of tartar, *because it had no taste*. Who will say after this that as soon as it passes the gullet the burning sensation is felt. It is felt as soon as irritation of the stomach is produced, sometimes, when the stomach is empty, in a few minutes.

"In some instances the sickness and faintness, particularly when the poison was taken in solution, have begun in a few minutes after it was swallowed." * * * "Nevertheless it must be allowed, that in general arsenic does not act for half an hour after it is swallowed. On the other hand its operation is seldom delayed beyond an hour," except in some rare cases where sleep has intervened.

"Soon after the sickness begins, or about the same time," continues Dr. Christison, "the region of the stomach feels painful, the pain being commonly of a burning kind and much aggravated by pressure. Violent fits of vomiting and retching then speedily ensue, especially when drink is taken. There is often, also, a sense of dryness, heat, and tightness in the throat, creating an incessant desire for drink; and this affection of the throat often precedes the vomiting. Occasionally it is altogether wanting, at other times it is so severe as to be

* Article, "Toxicology," *Medical Cyclopaedia*.

attended with fits of suffocation and convulsive vomiting at the sight of fluids. *Hoarseness and difficulty of speech* are commonly combined with it. The matter vomited, as in other cases of long continued vomiting, is greenish or yellowish, but sometimes it is streaked or mixed with blood, particularly when the case lasts longer than a day."

"In no long time after the first illness, diarrhoea generally makes its appearance, but not always." [In this case it came on *immediately*, with offensive stools, which is quite consistent with the idea of previously existing disease, but an almost impossible *immediate* effect of arsenic.] "In some cases, instead of purging, the patient is tormented by frequent and ineffectual calls. In other cases the large intestines are hardly affected at all. About this time *the pain in the pit of the stomach is excruciating, and is often likened by the sufferer to fire burning within him.* It likewise extends more or less throughout the rest of the abdomen, particularly when the diarrhoea or tenesmus is severe; and the belly itself is commonly tense and tender, sometimes also swollen, though not frequently,—sometimes even on the contrary, drawn in at the navel."

"Sometimes there are likewise present signs of irritation of the lungs and air passages,—almost always shortness of breath, [which however, is chiefly owing to the tenderness of the belly, and is common in many cases of acute disease of the abdomen]—often a sense of tightness across the bottom of the chest, and more rarely decided pain in the same quarter, darting also through the upper part of the chest. Sometimes peripneumony [inflammation of the lungs] has appeared a prominent affection during life, and been distinctly traced in the dead body.

"In many instances too, the urinary passages are affected, the patient being harassed with frequent, painful, and difficult micturition, swelling of the organs and pain in the region of the bladder. [Nothing of this sort is mentioned, the urine was scanty, as is common in *gastro enteritis.*] * * *

"When the symptoms of irritation of the alimentary canal have subsisted a few hours, *convulsive motions* often occur in a greater or less degree." [None were observed in this case.] "Cramp may be a concomitant of every kind of diarrhoea; but in that caused by arsenic it is *peculiarly severe and frequent.*" [No cramp whatever is mentioned before the evening of death.]

"The general system always sympathizes acutely with the local derangement. The pulse commonly becomes very small, feeble, and rapid soon after the vomiting sets in; and in no long time it is often imperceptible. This state of the pulse is naturally attended with great coldness, clammy sweats, and even lividity of the feet and hands." [These symptoms are by no means characteristic, as they occur in many cases of severe and continual vomiting, especially if accompanied with diarrhoea; even severe sea-sickness may produce them.]

"The countenance is commonly collapsed, from an early period, and almost always expressive of great torture and extreme anxiety." [Mr. Harrison says explicitly that "he had an expression of anxiety on his features, but not greater than might be produced by excessive vomiting from *any* cause,"] "the eyes are red and sparkling [in

natural gastro-enteritis, as in this case, they are [dull and heavy], the tongue and mouth parched [here natural, or not observed], and sometimes little white ulcers or aphthæ break out on the velum or palate" [no mention made of such appearances].

Delirium and stupor, which are not unfrequent, were not mentioned in this case; the man was merely "disinclined to answer questions."

"Various eruptions have at times been observed, especially in those who have survived several days," and the conjunctiva of the eye often becomes red. No mention is made of such appearances. The breaking out about the mouth, noticed the first evening, would not have been an effect of arsenic, it appeared too soon for that.

"In some cases of the kind now under consideration, a remission, or even a total intermission of all the distressing symptoms, has been witnessed, particularly when death is retarded till the close of the second or third day. This remission, which is accompanied with dozing stupor, is most generally observed about the beginning of the second day. *It is merely temporary, the symptoms speedily returning with equal or increased violence.*" [In this case the severe pain and extreme tenderness, so great as to cause the man to scream from pain on motion, which were at first excited, entirely subsided, and never again recurred. If it were indeed a case of arsenic, I believe it to be perfectly unique. Is there one such fatal case recorded?]

Though deviations from the ordinary course of symptoms do occur, "Upon the whole," says Dr. Christison, "they are rare; and the symptoms of poisoning by arsenic are in general very uniform." The description of symptoms given by Dr. Apjohn, by Orfila, by Beck, and by several other eminent writers, is substantially the same as that just quoted; it is not necessary, however, to repeat it.

I shall not here enter upon the consideration of cases of death from the effects of arsenic upon the nervous system, as that would not bear upon the present question; it is not an omission of forgetfulness.

No one will, I think, assert that this case bore any close resemblance to one of arsenic; there were several symptoms which it is scarcely possible that it could have produced—such as immediate, but only temporary, heat and smarting of the throat—immediate, but only temporary, vomiting and *purgings*, with very offensive evacuations, of both kinds, and in large quantity. These effects might be excited by anything, however innocent, if there were previously existing disorder of the digestive organs; if there were cayenne in the porridge, as the prisoner asserts, the hot taste and temporary smarting of the throat are at once accounted for. I have no satisfactory proof that it was so, but this supposition explains the cause of those symptoms, which the supposition of arsenic does not.

Though I feel justified in believing that the case was not one of poison, because the most characteristic symptoms of poisoning were not present; I do not undertake to say decidedly what it was. I see no sufficient reason for supposing that it was any other poison than arsenic; any others likely to have been given have such strong and unpleasant tastes, that they could not be swallowed without immediate detection, and all, if taken, would have produced much more decided symptoms, and morbid appearances, than any here described. Antimony is the only one not exceedingly improbable, and whenever that

destroys life, which is very rarely, it produces inflammation of the lungs, which was not here observed. A large quantity of cayenne might produce fatal gastritis, but it is not likely that a sufficient quantity would be taken, and it is certainly not such an article as would be given for intentional murder.

I suspect the case to have been one of natural acute *gastro-enteritis*—the imperfect account we have more closely resembling that than any other probable disease. It is true it is not usual for the natural disease to begin with such apparent suddenness, to prove fatal so rapidly, or to occur in November; but still such cases do happen, and there are few practitioners of much experience who have not witnessed several. I myself distinctly remember one case, which proved fatal within thirty hours of its *apparent* commencement; in that there were premonitory symptoms, but not so strongly marked but that they might easily have escaped notice, and the preceding illness was not so great as to have prevented work, had work been necessary. We have no other evidence in this case that the deceased was in good health except that he was at his work as usual; but that is quite compatible with a considerable degree of indisposition. But previous illness is not essential to the supposition of the case being one of *gastro-enteritis*, for as Martinet very correctly says—"It sometimes makes its attack suddenly without any precursory symptoms; first appearing by vomiting and frequent alvine evacuations, with tormina and tenesmus (gripping and straining). * * * The epigastrium becomes tender and particularly sensible to pressure; this symptom, however, is often altogether absent. Headache is generally constant. * * * In the course of the disease, the sensibility and activity of the senses and mental faculties are blunted. * * * Stupor and muscular prostration are more frequent than paralysis or spasms. * * * The eyes are dull and heavy; the complexion pale and sallow. * * * The pulse, during the progress of the disorder, is usually frequent; in the onset it is full, but soon becomes small, concentrated, irregular, and intermittent. * * * The urine is small in quantity and red. The mouth becomes hot and parched; the tongue, white or yellow in the commencement, becomes red at its tip and edges, and even over all its surface in the course of the disease. More frequently, however, the tongue is covered by a thick, adherent coat which becomes dry and rough as the inflammation becomes more intense. * * * The thirst is considerable, and increases as the disease extends from the stomach to the small intestines." The above is an enumeration of the principal symptoms of *gastro-enteritis acutus*, as given by Martinet, and is a very good summary of those which are usually observed. It will be acknowledged that they correspond much more closely with the description of Hunter's fatal illness than do those quoted from Dr. Christison, as the symptoms commonly produced by arsenic.

If this were the whole of the evidence there would be no doubt as to our conclusion, that there was no ground for supposing it to have been a case of poisoning. Let us now enquire whether this conclusion is weakened or confirmed by the results of the post mortem examination.

"It has," says Dr. Apjohn, "been already more than once observed, that the symptoms and morbid appearances, *though conjoined*, will seldom afford satisfactory proof of poison having been administered or taken in any particular case, much less enable us to infer the precise nature of that employed. Arsenic is unquestionably no exception to this statement."* It must, therefore, be evident that it ought not to be inferred from morbid appearances *alone, however strongly marked*, if the symptoms have been, as in this case, the reverse of characteristic; and still less should it be inferred when the morbid appearances are themselves ambiguous.

The following is Dr. Apjohn's description of the ordinary morbid appearances,—those which Mr. Harrison did not observe are printed in *Italics*.

"The throat and œsophagus are injected with blood, though this does not invariably occur. The villous coat of the stomach is red and *dappled with LIVID spots*, in consequence of the extravasation of blood into its texture." [Mr. Harrison said that there were no livid spots; Mr. Dyson, however, said that there were spots of extravasated blood under the membrane.] Neither of these gentlemen made any mention of such a remarkable appearance at the inquest, though Mr. Dyson says he would have done so had he not been asked to give his general conclusion *only*; are we not justified in disregarding an alleged appearance which cannot have been strongly marked?] "The same tunic is also frequently softened to such a degree as to admit of being readily scraped off with the nail, and not only it but the other tunics are studded with *ulcers* at several points." [Mr. Harrison is doubtful about there being any real ulcers, Mr. Dyson says there were ulcers, it is therefore doubtful.] "Nor are the ulcers confined to the stomach alone; they occur also in the duodenum, and inferior part of the intestinal tube, and are particularly abundant and constant in the rectum." [The ulcers or abrasions existed most in the jejunum; this portion of the intestines is not frequently ulcerated in either natural or poisoned *gastro-enteritis*, but less unfrequently in the former than in the latter; Mr. Dyson drew from this circumstance the inference of poisoning, but I think the contrary the more correct presumption.] "Coagulated lymph is also effused upon the inner membrane of the stomach, and the *interior* of this organ is *occupied by a dense and consistent mucus, blended with clots of extravasated blood*." [Nothing of this sort is mentioned by Mr. Harrison.] "The *trachea, pleura, and inner surface of the heart* exhibit frequently a reddened aspect indicative of *inflammation*, and genuine *peripneumony*, has also been observed." [The trachea and inner surface of the heart were not examined; this is a pity, had they been we might then have known whether the heart contained its usual coagulum of blood, which it would not have done if the blood had remained fluid; a point worth determining, as it often remains fluid after death by arsenic.] "Under the head of symptoms we have already alluded to the lesions of the urinary and genital organs, and to the swollen and erupted state of the surface. The *blood* according to Brodie and others *is of a dark colour and does not coagulate*;

* Article, "Toxicology," *Medical Cyclopædia*.

"but this statement, or rather the latter half, *though generally true, is liable to exceptions.*"

As with the symptoms, so with the morbid appearances of this case, we find that those which are most characteristic of poison, were either not mentioned at all, or at least were not strongly marked.

Mere redness of the mucous membrane is not distinctive, as it may arise from inflammation from any cause, or even without inflammation at all; indeed it is often impossible to determine by the appearance of the redness alone what has been its cause; it is only unpractised pathologists who speak very positively, those who really know have learnt better.

"Blackness of the villous coat of the stomach" says Dr. Christison, "from effusion of altered blood into its texture, is sometimes met with when the colour is brownish black or greyish black, not merely red-dish black [here it was brick-red;] when the inner membrane is elevated into firm knots or ridges by the effusion, and the black spots are surrounded by vascularity or other signs of reaction, the appearances strongly indicate violent irritation." [There were no such appearances here mentioned.]

"Softening of the membrane is not at all characteristic, it occurs in dead bodies so often that it cannot be assumed to be a consequence of irritation even where previous irritation is proved to have existed. So far from softening and brittleness being a necessary effect of the irritation produced by arsenic, it is a fact that a state precisely the reverse has often been noticed. In a case which I examined, the villous coat, except where it had been disintegrated by the effusion of blood and ulceration, was strong and firm, and the rugæ were thickened, raised, and corrugated as if seared with a hot iron." [No such appearances in this case.] There is often an appearance like sloughing, but it is not that, it is produced by a film of blood effused on the membrane: there was no such appearance here. Mr. Dyson laid much stress upon the fact of the extent of the disease throughout the whole course of the alimentary canal. Dr. Christison says expressly that "the signs of inflammation are seldom distinct in the small intestines much lower down than the extremity of the duodenum; and they do not often affect the colon. But it is a curious fact that the rectum is sometimes much inflamed, though the colon and more particularly the small intestines are not."

In this case the colon was distended. It is generally, in consequence of its being completely emptied, contracted after poisoning by arsenic.

When we separate the real from the supposed observations, or perhaps rather the facts from the opinions, we find that little is left but evidence of inflammation of the mucous membrane of the stomach and bowels in patches throughout their whole course, with softening and abrasion, and perhaps ulceration, and contraction of the bladder. Let us just observe how closely these appearances correspond with those described by Martinet as following natural *gastro-enteritis*. "The external membrane of the stomach" says he "is usually natural, sometimes this viscus is distended with air, but occasionally it is contracted. The mucous membrane of the stomach is sometimes studded with red dots, or covered by patches, arising from the effusion of blood

"into the substance of the membrane itself; at other times an uniform redness is diffused, &c. * *

"Gangrene is rarely met with—ulceration in the stomach is also unusual," [and was not here observed].

"The exterior of the small intestines usually appears healthy. * *
 "The redness of the internal coat is interrupted suddenly in various parts, and is less deeply marked in the duodenum than at the further extremity of the intestines. * * * Gangrene of the intestines is of very rare occurrence. * * * Ulceration, on the contrary, is very common." [This is generally, but not always, confined to the ileum.]

I have not copied the whole description of the symptoms and morbid appearances produced by *gastro-enteritis acutus*, as given by Martinet; the part omitted, however, does not bear upon the present case, and there is here enough to show that the case of Hunter, *so far as it is described*, bears a very close resemblance to this disease; a much closer resemblance, indeed, than it does to one of poisoning. It is quite true that such cases are not common, but they are more common, perhaps about ten times as common as those of arsenic; we hear of them less frequently for obvious reasons.

That which most persons will consider the strongest reason for believing this not to have been a case of poisoning by arsenic, remains still to be given. *The stomach and bowels and their contents were carefully analyzed by an experienced chemist, and no arsenic found!* What degree of importance should be attached to this negative evidence is a matter of considerable doubt. I was advised by one, whose opinion should command the highest respect, not to rely much upon it, and by another, scarcely less eminent, to rest the defence upon that point almost exclusively. I am myself of opinion that it is all but impossible that a sufficient quantity of arsenic could have been given and *remain a sufficient time to produce all this extensive mischief*, and yet be entirely removed by two or three hours vomiting and purging, especially when we find that the vomiting was not enough to dislodge a piece of potato, a substance far more easily got rid of than arsenic. The idea that it was discharged by urine, is contradicted by the fact that very little urine was secreted; that it was got rid of by cutaneous or pulmonary perspiration is simply ridiculous. It might *perhaps* be absorbed, but if so, the tissues of the alimentary canal are the parts in which we ought to expect most probably to find it, and there it was not. Mr. Phillips tells me that he offered to analyze the whole body, with the view of settling this question: it was, however, judged to be unnecessary, and though we may perhaps join Baron Parke in his regret that it was not done, I do not doubt that the result would have been negative.

There have been many cases of poisoning by arsenic, where the poison has been quickly removed by vomiting, but in almost all of them the patients have recovered. Fatal cases of this kind are very rare, so rare that many assert the impossibility of their occurrence, in which opinion, however, I do not agree. On the contrary, there are very many cases in which vomiting and purging have lasted for hours, and even days, and yet after death considerable quantities of arsenic have remained. Dr. Brett would have produced in court stains of arsenic, procured from

the evacuations of a patient six days after its administration. About twenty cases altogether had come under the notice of the various witnesses, where arsenic was known to have been the cause of death, and in none had attempts to detect it failed. There are few, if any, substances so easy to detect and identify in extremely small quantities as arsenic: what is the limit of its detectability I cannot tell. By a purposely rough process, Mr. Phillips and I detected and identified arsenic procured from porridge in which one thousandth of a grain only had been dissolved, and he would have exhibited to the court unequivocal stains, each not exceeding the ten thousandth of a grain in weight, in the form of opaque spots of half an inch diameter, on glass—so large, that one hundredth of the stain, or one millionth of a grain, would be quite easily visible by the naked eye. Such minuteness is far greater than is practically necessary; I mention it merely to show how certain it is that if any notable portion of arsenic had been present, Mr. Davies must inevitably have detected it. It may indeed be suspected that some error in the analysis prevented the detection of arsenic really present, and there might, perhaps, be a show of plausibility in this had the operation been entrusted to unpractised hands; few, however, will be rash enough to assert that an experienced chemist could commit so gross an error. To assert that arsenic might have escaped detection appears mere quibbling; and if so, must we not conclude that it is by far the most probable supposition that arsenic was not the cause of the extensive disease proved to have existed.

From the fact of this trial having been stopped for want of conclusive evidence by him who is accounted one of the best criminal judges on the bench, some persons have concluded that hereafter no one can be convicted for poisoning with arsenic when the poison has been sought for and not found. I do not think any such conclusion is warranted by the facts. I am strongly of opinion that the prisoner would have been acquitted had there been no chemical evidence whatever; the non-accordance of the symptoms with those usually produced by arsenic, and the absence of unequivocal *post-mortem* appearances, would have been sufficient to justify such a verdict. The reason for the acquittal evidently was, because it was clear that the two last medical witnesses who were called for the prosecution had their doubts whether arsenic had been the cause of death. The whole opinion of neither of these two witnesses was given, the case being stopped before their examination was completed. I have a suspicion that had the whole been told which they wished to say, their opinions would not have appeared very different from my own.

This conclusion, however, may, I think, fairly be arrived at, that hereafter no prisoner will be convicted for poisoning, as I am sure none ought to be, unless either the poison be found, or the symptoms and appearances bear a much closer resemblance to those produced by poison than they did in this case; even though it should be proved, as was not proved here, that the intention to murder had been entertained. The act, as well as the intention must be proved to substantiate such a charge. Neither was proved here; the intention is not made to appear probable, while the presumption is decidedly against the act having been committed.

REMARKS, &c.

Whatever difference of opinion there may be as to Mary Hunter's guilt or innocence, of this all will be convinced, that a great and mischievous error has been committed. If she were guilty, her acquittal is a public injury by encouraging impunity to crime; if innocent, she has suffered a grievous wrong: for four months needlessly imprisoned—for four months needlessly tortured by anxiety,—and at the end of so many hours of sadness, (how long in their dreary loneliness—how short in their rapid flight on to that day when life or death must be decided,) she is turned out upon the world, perchance to starve, with ruined fortune and with blasted name; while her escape from the extreme penalty of the law was the result of a happy accident. Ought such things to be? Are the public justified in thus trifling with the character—the liberty—the lives of all who happen to fall under suspicion? A complicated and expensive machinery is very properly provided by which to urge on presumptions of guilt to conviction; the examination of presumptions of innocence is left to the chance charity of any casual observer. Even the guilty should be fairly defended, for if not we can seldom be assured that they are guilty; but to condemn the innocent unheard is monstrous. Yet no effective defence would have been in this case prepared, if it had not chanced to have fallen under the notice of some person having the advantages of access to the means of information, and the power of procuring assistance from friends and strangers of every variety of talent which I enjoyed. I claim no credit, I deserve none for the willingness to exert the power, I am happy in believing that there are few, very few, who would not have rejoiced at the opportunity. It was very possible however, that no such person should have ever heard of it: three of the four months had elapsed, and no such chance had happened. It is not right to leave that to accident which ought to be done, and which might easily be provided for. It is not right that a private individual should be compelled either to abandon a fellow-creature to her fate, (which was not to be thought of,) or risk odium, pecuniary loss, and injury of professional character, and assume a load of responsibility, the burden of which those only who have borne it can duly estimate. It may be that more was done than was absolutely necessary, but when a life is at stake, the proper question is not how little is enough, but how much is possible. Yet, until our system is amended such things must be. It is not the individuals we should blame, it is the system that is in fault. The remedy evidently is to provide for the defence as well as the prosecution of the accused, by public officers at the public charge. We may not

be ready for this yet, but one thing we may do, and, as cases of suspected murder are of the most urgent importance, that we ought at once to do, provide means for the full and accurate examination of every case of death by suspected, or even possible criminality. One of the purposes of the coroner's inquest is to effect this; of how imperfectly it does so, this case is but an illustration. And how can it be otherwise? The discovery of the real cause of death is that which is at once both the most important and the most difficult part of the enquiry,—a question often of the greatest nicety in medical science; and yet by some strange anomaly, the appointed judge is generally one who does not even profess acquaintance with the subject upon which he has to decide. There may be good reasons for having an attorney for coroner, though I have not yet met with any; but there can be no good reason for not appointing some efficient person to conduct the all-important medical examinations; one who will know how to get out all the facts, and separate them from mere opinions; who will direct further enquiry where the first observations have been imperfect; who can judge what degree of dependance may be placed upon the skill, knowledge, and accuracy of the witnesses; and, generally, who can supply any deficiencies, and correct any errors, at the very first, at the only time, in the vast majority of instances, when the original observations can be verified should any discrepancy appear. It is not necessary to prove that a man who knows what he is looking for is more likely to find it, or *to be sure when it is not to be found*, than he who knows nothing about it. The present case offers an apt illustration. The two medical witnesses differ in their statement as to two of the most suspicious appearances, almost the only really suspicious appearances spoken of; for all the rest are frequent in natural disease, and these, though they are certainly rare, are not *very* uncommon. Mr. Dyson says there were "spots of extravasated blood beneath the mucous membrane," and a "quantity of red sanguineous fluid in the stomach and bowels." Mr. Harrison says, "there were no livid spots," and a "small quantity of reddish brown fluid;" he must mean a very small quantity, for he said at the inquest that the stomach and bowels were empty. Which is right, who shall say? They cannot both be correct. Now such a discrepancy would be sure to be noticed by a medical examiner, awake to the extreme importance of the inference to be drawn, and he would have set the matter at rest by asking the witnesses to look again. A non-medical coroner very naturally neglected this; what reason had he to suppose a few spots of blood, more or less, of any great consequence, and yet upon some such point the woman's life might have depended!

Though in this case the absence of proper investigation has been oppressive in its operation to the accused, in the majority of instances, the tendency is, I believe, the other way; for it is more common for the evidence to be, in consequence, deficient than exaggerated; and many real criminals no doubt escape justice, because the first investigation is imperfect, and the omissions then left can never afterwards be supplied. A woman lately convicted for murder at Bolton, has, there is no doubt, committed several, perhaps seven murders: now it is very unlikely but that some suspicious circumstance would have been noticed had the attention of a competent person been awakened, and if so, the

career of crime cut short before so many victims had been numbered. But whether so in this instance or not, it is certain that by proper investigation a larger proportion of the crime committed would be detected, and what is of far greater importance, that the fear of detection would prevent much crime among those tempted to its perpetration.

To some minds, I should hope not to many, the expense of such protective investigation will be considered a fatal objection. I think it might be shown that the saving would go far to balance the expense; suppose for instance, the necessity of two or three such trials as this of Mary Hunter (which probably cost about £200) were superseded. But that is of little consequence, for when the protection of innocence, the punishment of guilt, the prevention of crime, and the due administration of criminal law require it, the economy is miserably false indeed that would grudge the necessary expenditure.

Even if all, or the great majority of medical men were intimately conversant with the subject of medical jurisprudence, it would be of great advantage to have their evidence taken by one who himself understood the nature of the inquiry; but as it is notorious, to all who know anything about it, that the great majority are not conversant with the subject, it is indispensable that their inevitable deficiencies should be supplied by extra proficiency in the examiner. That the deficiencies are all but inevitable must be apparent to all who consider that these cases generally occur among the poor, who generally employ the less highly educated practitioners, while the knowledge required being varied, extensive, minute, and unusual, is such as only those whose attention has been specially directed to such inquiries ever do or can acquire. Of necessity then very few practitioners can undertake such inquiries *unassisted*, with credit to themselves or advantage to the public. This is well known, and generally acknowledged by the superior members of the profession; it is denied by those only who cannot afford to confess ignorance of anything, or by those who have not learnt enough to know that there are things which they do not know. The position of the medical witness in these cases is at present a most painful one. His evidence being taken by one who cannot understand its bearing or bring out its full meaning, is liable to be distorted and exaggerated, because imperfectly expressed; and often he is made to appear to say the reverse of what he means; and the consequence of such mistakes of his meaning may be most disastrous to others and most injurious to himself.

The remedy is easy; it remains to be seen whether it will be applied. Perchance it may require the discovered perpetration of a legal murder by mistake, to produce conviction of the necessity for protection against that public calamity, *which in this case had all but happened*. Should it so happen, after such a warning of the danger as this case ought to be, and without any attempt being made to prevent the occurrence of such a disaster, many will be inclined to call it rather a public crime than a mere calamity.

APPENDIX.

Many erroneous statements as to the solubility of arsenic under different circumstances have been given, which, as the subject is of considerable importance in medical jurisprudence, it is well worth while to correct. It was stated that 1000 parts of boiling water dissolve $77\frac{3}{4}$ parts of white arsenic,—“that 30 grains and more” will dissolve in one-fifth of a pint of milk, and that the medicines administered to Hunter (either bi-carbonate or carbonate of potass with lemon juice in effervescence) would render arsenic more soluble, and so promote its removal.

Though some of these statements appear merely to have been guessed at, many of them were given upon high authority, but all of them were wrong; at least Professor Phillips, of the Manchester New College, and I, have put them to the test of varied and repeated experiment, and find the results very different indeed. The authorities quoted for the solubility of arsenic in boiling water, Klaproth, Guibourt, Hahneman, Navier, &c., are so high, that we can hardly suppose the mistake to be one of experiment; it must, I think, have arisen from some error of translation: I have not at present easy access to the originals, so cannot say whether or not this is the proper explanation. Most of the English writers appear to have copied from the foreign.

TABLE SHOWING THE SOLUBILITY OF WHITE ARSENIC :

	As commonly stated. <i>grains.</i>	As ascertained by our experiments. <i>grains.</i>
A pint of boiling water dissolves about.....	680	84
1000 grains (2oz. m. 40) of boiling water dissolve	77.75	9.57
When cooled to 60°, retain in solution.....	30	8.1
1000 grains of strong solution of citric acid dissolve		4.29
1000 grains of solution of citrate of potass, with the acid in excess, in twenty-four hours, dissolve.....		2.5
1000 grains of strong solution of bi-carbonate of potass, in seventeen hours dissolve		1.68
1000 grains of boiling milk, in half an hour, dissolve about		4.
1000 grains of water at 60°, with frequent agitation, dis- solve, in twenty-four hours..... either 12.5 or 9.6		$\frac{3.5}{100}$

I have not time at present to describe minutely the process by which these results were obtained, but I hope Professor Phillips, to whom the merit of these useful

experiments is almost exclusively due, will, himself publish the details. We varied the process, so as, I think, to avoid every source of fallacy, and repeated the experiments, so that by taking the mean of several results, we might neutralize errors of weighing or of measuring.

We purchased the white arsenic from Mr. Davies, (some of the same from which he supplied Mary Hunter.) tested it and ascertained its purity. We then boiled 100 grains wrapped up in a piece of linen in a pint of pure water for half an hour, filling up as it evaporated; it lost 83.6 grains in weight, or 9.57 dissolved in 1000 of water. We next boiled some for various periods, and filtered off the solutions while hot, into a 1000 grain bottle, which when cooled down to 60°, weighed (the mean of three experiments) 1009.54 grains; 1.44 grains was deposited on cooling, and 8.1 remained in solution. To satisfy ourselves that this in solution was, all of it, white arsenic, we precipitated it with sulphuretted hydrogen, and procured 9.3 grains of sulphuret, the equivalent of 8.1 grains of arsenious acid. Lest this particular specimen of white arsenic might happen to be unusually insoluble, we boiled a quantity in water with caustic potass, added acetic acid in excess, cooled down to 60°, and filtered the solution. We obtained from 1000 grains of this by measure, 9.4 grains of sulphuret.

A hundred grains of white arsenic, wrapped up in a piece of linen, were boiled in half a pint of milk for half an hour, one third of a pint was left and twelve grains of arsenic dissolved. Most of it, however, appeared to have united with the curd of the milk, and fixed itself firmly to the bottom of the pan; I believe a very small part was, properly speaking, in solution, but we have not yet ascertained the precise quantity.

[Perhaps I may be permitted to mention, as creditable to my native town, that all the legal gentlemen connected with this case, so ably conducted on both sides, were lately, and, with the exception of Mr. Wilkins, are still residents in Manchester.]