

The increased vascularity of the adnata and cornea, seemed at first view to be the principal affection; but, upon a more minute inspection of the eye and its appendages, the chief site of the complaint was discovered on the inner surface of the lids; and upon this the state of the eyeballs just alluded to was found to depend, as it disappeared in most of the cases in proportion as the lining membrane became smooth. The degree of inflammation varied very considerably; for in some, only a red vessel was observed here and there extending on the surface of the conjunctiva, or immediately under it; whilst in others they were so numerous and massed together, as to give the whole of the globe an uniform dark red appearance. In four of the number, however, in whom the lids were granulated, there was not the slightest affection of the eyeballs perceptible on admission, although it was afterwards found that inflammation was readily excited, by even the most trivial causes.

The corneæ in most, indeed I may say in all the cases, at least of any considerable standing, had suffered much from disease; they were not only very vascular, but frequently ulcerated more or less extensively, and almost invariably presented an abraded and opaque surface, according to the extent and density of which, vision was in a greater or less degree impaired; in fact, it may be said that many of the patients were admitted blind, as any rays of light which reached the retina were not more than merely sufficient, to enable them to distinguish day from night, and often not that with absolute certainty. The surface of the eyeballs in the majority of instances, presented a dull watery appearance, in some verging to a yellowish hue, which appeared to be occasioned by an effusion of a serous fluid, into the cellular texture connecting the conjunctiva and sclerotica.

Upon everting the lids and examining their inner surfaces, the upper always, and not unfrequently the lower, were found more or less thickly covered with small round bodies resembling granulations or warts, which, in part of the cases, were of a fleshy appearance and consistence; in others, of a hard pale cartilaginous description; and in a third class they were of a soft texture and dark colour, like clots of coagulated blood, and discharged that fluid copiously upon being slightly touched; even in some instances the motion of the lids alone caused considerable hemorrhage.

In a part of the patients, the granulations were dispersed generally over the whole of the inner surface of the lids, whilst in others they appeared confined principally to particular parts of them, such as the *extremities*, inner edges of the *tarsi*, &c. situations where, under any circumstances, they were always most

luxuriant, and from which they were invariably most difficult to remove. The first variety, or those which had the appearances of granulations seen on the surface of healthy sores, most readily yielded to treatment; that is to say, they were soonest entirely removed, and a cure effected. The second, or those of the cartilaginous description, were with much difficulty acted upon; indeed they seldom underwent any considerable decrease, till after numerous sharp applications of some one or other of the escharotics, to be afterwards mentioned; and the third class, or those which resembled coagulated blood, though readily destroyed, would often, in spite of every application, attain their original size in the course of *twenty-four* hours; which disposition to sudden regeneration rendered them occasionally the most difficult of the three species to treat successfully.

The motions of the lids, especially when the granular bodies were large, were often very much impeded; and in many instances the patients were unable to raise the upper sufficiently to expose the eyeballs, without the assistance of the fingers. This incapacity appeared to arise, partly from the impediment to motion offered by the rough granulated surface, and partly from a degree of *Ptosis*—the frequent sequel of an attack of acute ophthalmia, particularly where the motion of the lids happens, on account of the violence of the symptoms, to be for any considerable time much restrained. This defect generally disappeared as the cure advanced, although, now and then, it was found necessary to employ remedies, with a view of directly removing it, which will come to be noticed by and by. A greater or less oedematous swelling of the palpebræ was also another not unfrequent attendant on this disease, and no doubt had its share in producing the state just mentioned, as it frequently occurred in individuals affected with the complaint under consideration. Lachrymation and slight puriform discharge, which glued the edges of the lids together during the night, were symptoms for the most part present; though, in a few instances, the latter was not observed till after escharotics had been employed, a practice which was found invariably to increase it when it had previously existed, or to bring it on, when it had not appeared before.

The lower lids, though, as has been already remarked, much less frequently affected than the upper, were nevertheless occasionally found exhibiting the same diseased appearances, but producing much less irritation, in consequence of their more limited motions.

This state of the lining of the lids seemed, in the majority of instances, to have been the result of previous puriform or puru-

lent ophthalmia, although, in several cases, it succeeded to the common simple form of inflammation; and, in a few examples, neither of those varieties, or any other, could be traced to have pre-existed. The latter fact demonstrates to us, that the degree of that morbid action, which is absolutely necessary for the formation of such preternatural growths, is far from being considerable; and that it may sometimes exist in the lining of the lids, without the individual being aware of it, till, from some other cause, an aggravation of the symptoms be produced. From this circumstance, it appeared always advisable to evert the lids and examine their inner surface, when a patient, on admission, was found to have laboured for a considerable time under any of the forms of ophthalmia, or where the disease, though even of short standing, and mild, was attended by a sensation of something rough, like sand or gravel under the upper lids, particularly towards either of the extremities, and with slight mucous discharge; or where, though the last symptoms did not exist, the inflammation had come on very gradually, and without any evident cause.

The lower lid is in general easily everted, simply by applying the extremity of the fore or middle finger close to the edge of the *tarsus*, and gently depressing it, whilst the patient directs his eye to some object immediately over his head; but the eversion of the upper is usually with more difficulty effected. To accomplish it with most facility, the patient must be directed to look at his feet, and then the surgeon, with the thumb and fore finger of his right hand, should it be the right eye that is affected, must lay hold of the ciliae of the upper lid, whilst, with his left hand, he applies a common silver probe a little above the upper edge of the *tarsus*, and by means of it makes a gentle pressure downwards and backwards; at the same time, through the medium of the ciliae, carrying the border of the lid forwards and upwards, by which motion the desired effect will generally be produced. There are, however, cases frequently occurring, in which eversion cannot be thus readily accomplished, particularly in patients who have not perfect command over the *orbicularis and levator palpebrarum* muscles, or when the conjunctival lining is very much thickened. In such states it is often absolutely necessary to employ considerable force; in consequence of which, it will generally be advisable to lay hold of the edge of the *tarsus* in preference to the ciliae, as the latter might be pulled out before the object in view could be completed. Force, however, it may be remarked, is always a bad expedient, and was never employed, till the more gentle means had proved ineffectual.

The practice of everting the lids ought always to be tried, for a considerable time, in slight cases, previous to attempting it in the more severe forms of the disease, as a peculiar facility is acquired by habit, which does not admit of explanation, yet must be sufficiently evident to every individual who is in the way of seeing with what expedition and apparent ease a person accustomed to perform it will effect his purpose, after others, less conversant in the practice, had been either foiled, or found it necessary to employ no small degree of violence.

Treatment.—The treatment at first was directed, with a view of effecting the removal of every symptom of active disease, which being accomplished, the destruction of the granulations became the principal object of our attention. The former of these indications was effected by the employment of general and local blood-letting, purgatives, washes and drops; the latter, by the application of various escharotics, &c.

When the symptoms of inflammation were found to run high, or the constitution to sympathise much with the local disease, blood was abstracted from the arm; but where neither of those states existed, local blood-letting was, for the most part, preferred. Six or eight leeches were applied to the temples or eyelids on admission, and the bleeding was encouraged by warm fomentations; which means, should the symptoms not be found to give way sufficiently at first, were repeated next day; and during the intermediate period, as well as afterwards, the eyes were washed with a weak alum lotion, and the vinum opii dropt between the lids night and morning. By a steady continuance of this treatment, the disease was in general brought, in the course of a few days, to such a state as would admit of the most essential part of the practice being adopted; viz. the application of remedies suitable for destroying the granulations.

The method employed to effect this, as has been already mentioned, was the frequent application of escharotics to the inner surface of the lids; the chief of which were, the *nitras argenti*, *sulphas cupri*, and *acidum nitricum dilutum*. They were all applied to the same part, and with the same intention; namely, that of producing a more or less considerable slough, according to the nature and severity of the complaint. Sometimes one of them was employed in preference to the others, and sometimes all alternately, as no certain and fixed rules could be observed with respect to their use, for one of them was found to agree with one individual, which had just the reverse effect on another, where, upon the most minute examination, nothing but the strictest similarity of morbid appearances and

constitution appeared to exist. As illustrative of this, I may merely mention, that I have several times seen the application of sulphate of copper even mildly to the lids of a patient whose constitution was scrophulous, produce violent active disease, whilst the same individual bore a sharp touch of the nitrate of silver, not only without injury but with material advantage, and, *vice versa*, apparently under similar circumstances. It must however be added, that the sulphate of copper commonly produced less irritation than the nitrate of silver: But, to have done with such remarks, I shall proceed to describe the particular advantages and disadvantages of each, as far as could be learned from their use, in *one hundred and forty-two cases*.

Nitras Argenti.—This caustic was found to be most useful in cases where the granulations were either partial, or thinly scattered over the whole surface of the lid, as, to them, it could be applied with more ease and certainty, than either the blue stone or the diluted acid. In cases, also, in which there was a profuse lachrymation, and much tendency to active disease, the remedy under consideration was found to be a more safe and effectual application than either of the others; more particularly, however, than the sulphate of copper, as it did not require the same degree of friction and force that the latter did, in order to produce the same effect; neither was it found so apt to become detached and dissolved in the lachrymal fluid, and thereby act as a violent irritant to the eyeballs. It was also that of the three which was applied with most effect to those cartilaginous granulations which resembled the teeth of a file, as it produced an immediate effect; whilst the sulphate of copper could scarcely be made to act, on account of the dryness of the parts, and the acid produced but slight effect, from their hardness and insensibility.

Sulphas Cupri.—This remedy was found best adapted for the destruction of those red fleshy granulations, upon which there was just sufficient moisture to effect the solution necessary to ensure the full extent of its escharotic qualities. Those, frequently, by two or three sharp applications, were entirely destroyed; and where the parts could bear it, a pretty hard friction no doubt tended to accelerate that process. As both of the above remedies are easily soluble in water, and as there is considerable chance of particles being detached by the rubbing, particularly of the last, it was found highly necessary to omit no precaution by which the eye could be freed from all possibility of suffering from any such unnecessary and severe stimulants. For this purpose, it was found of advantage to wash the

eyeball, and parts to which the remedy had been directly applied, with some simple or medicated fluid, immediately after the operation had been finished. Simple tepid water was, upon the whole, most generally employed, and, where due caution and attention were observed, certainly was found sufficient of itself, without any addition, to remove all the causes of irritation, so particularly to be dreaded. Lime-water was another fluid occasionally employed, and no doubt was at first suggested, on account of the chemical decomposition, and insoluble compound which is formed, by mixing solutions of the sulphate of copper and that earth together, thereby doing away with every thing like a chemical stimulant. As far, however, as my experience goes, I can safely affirm, that inflammation was equally frequent after the ablation with water containing lime, as after that with the same fluid in its simple state, when the same care and accuracy was bestowed on the process with each. Almond oil was also at times besmeared over the lid after the washing, as a still farther precaution; but it seldom if ever appeared, in my opinion, to be absolutely necessary, or productive of any benefit.

The mode in which the escharotics were applied, and the way in which one or other of the washes was used, I shall now proceed to describe to you. The patient was placed on a chair opposite a window, and the lid everted in the manner already directed; after which, if there was any mucous discharge lying on the granulated surface, it was cleared away, or if overrun by tears, they were dried up by a small piece of lint or sponge, and then the application of either of the caustics was made, according to circumstances. If the state of the disease called for the use of the *argentum nitratum*, a small portion of that substance, smooth, and gently rounded at the extremity, was fixed in a quill, or *porte crayon*, and applied to the granulated bodies; the effects of which were immediately evinced, by the formation of a dense white slough, and a sensation of burning in the parts to which its action extended, followed by a violent action of the orbicularis muscle, and a profuse discharge of tears. Where the granulations happened to be pretty close together, it was generally drawn gently along their surface; but where they were thinly scattered over the whole of the lining membrane, it was applied by touching those particular points, in consequence of which, many small sloughs, instead of an extensive one, were formed.

When the sulphate of copper, again, was the remedy made choice of, it was applied by rubbing the surface of the lids backwards and forwards, from one extremity to the other, with a

polished piece of that substance, fixed in the same way as the nitrate of silver. The friction was continued till a more or less opaque slough was formed, which required in some a much longer period than in others. When there occurred during the operation considerable hæmorrhage, or a profuse discharge of tears, it was found necessary to sponge the surface of the lid occasionally, for the purpose of drying it, as either the one or the other of those fluids was found to carry off the sulphate so rapidly, as to lessen very considerably its action on the diseased parts. After the desired slough was thus obtained, the lid was still kept everted, and its surface well washed with one or other of the fluids already mentioned. To accomplish the last intention, the lower lid, provided the treatment just described had been directed to the upper, was gently depressed by the finger of an assistant, so as to uncover as much of the eyeball as possible, and then the operator, with the hand not employed in keeping the lid everted, took his sponge well filled with one of the washes, and pressed it in such a situation as to make the fluid fall directly on the everted lid, from which part it became afterwards generally diffused over the surface of the globe of the eye, and latterly on the lower lid. By managing the washing in this way, so as to keep up for a short time a continued descending stream, all portions of nitrate of silver or sulphate of copper, which might have accidentally become detached, were now removed. The patient was then sent to his ward, with directions to bathe the eye for a longer or shorter period with tepid water, according to the severity of the pain or smarting induced by the action of the escharotic employed. The pain was found to vary in degree and duration, according to the remedy made use of, or the degree of severity with which it was applied, but it seldom lasted longer than a few minutes; and frequently, more especially when the nitrate of silver was used, it was merely momentary. In several cases, however, it returned again, after the lapse of an hour or two; but then, instead of being the immediate effect of the caustic substance applied, it was only one of the attendants of an active inflammation which now and then was found to supervene, upon the treatment just described, but which was, in every case, easily overcome by local blood-letting and warm fomentations, either with simple water, or some medicinal lotion.

In cases in which ulcerations or abrasions of the corneæ existed, the sulphas cupri seemed often to be prejudicial, not only increasing both of those states, but also frequently inducing active inflammation, which probably arose from the action of a

portion of that substance suffering solution during its application to the diseased linings. In no case, however, did any thing serious occur, though, at the same time, I think sufficient injury was done in some, to warrant the rejection of that application under such circumstances, and to have recourse to either the *nitras argenti* or the diluted nitric acid; the mode of applying the last of which, and its peculiar advantages, I shall now proceed to describe.

The *nitric acid* was generally applied diluted with four parts of water, by means of a camel hair-pencil, and was found particularly well adapted for the destruction of the soft spongy granulations, as it possessed not only an escharotic, but also an astringent effect; and, by being applied in a state of perfect fluidity, it got better into contact with them than either of the others. When thus diluted, it possessed likewise the additional advantage of producing but a slight slough, which was seldom found to prevent its daily application; a quality essentially necessary for the remedy to be used in the treatment of this form of disease, in order to suppress the growth of such spongy formations.

It was also found very useful in the other varieties of granulations, after one of the more energetic applications had destroyed the principal part of the disease; and indeed, from what I have seen, I think it ought to be preferred in all cases where the granulations have either not attained any considerable size, or where they have been nearly removed by the lunar caustic or the blue vitriol, in consequence of the slight eschars which it produces being less apt to hurt the conjunctiva, than the more extensive ones occasioned by either of the two last mentioned escharotics. The facility and certainty with which it is applied, and the little, if any, mechanical irritation which is required, in order to insure its effects, are other conveniencies which it has to recommend it.

The same process of ablution was also practised after the employment of this acid, as after the other caustic substances, and conducted according to the plan already detailed.

An œdematous swelling of the lids was a frequent consequence of the use of all of the escharotics, yet more particularly of the *sulphas cupri* and *nitras argenti*; but it was found, in the majority of instances, to subside spontaneously in the course of a few days. A slight soreness of the inner surface of the lids, particularly on motion, was experienced for a few days after each application; and also for nearly the same period, a slight increased redness of the surface of the eyeball was remarked, both of which, in almost every case, gradually abated without the use of any remedies.

The length of time required for the detachment of the slough, varied according to its extent and depth; but, for the most part, it happened between the second and fifth day, and was accompanied, as well as followed, by a considerable increase of puriform discharge. During that period, various drops were occasionally instilled on the surface of the lid previously everted, such as the solution of nitrate of silver, vinum opii, and liquor plumbi acetatis, with a view partly of acting on the disease, and partly of expediting the separation of the dead matter.

After the last object was effected, the solution of nitrate of silver was still continued, and the eye and lids were occasionally washed with a weak alum or sulphate of zinc lotion, which means usually, in the course of a few days, removed any soreness and increase of inflammation which might have been produced, and brought the parts into such a state as would safely admit of a repetition of the same remedy, or one of the others, according as it might be judged requisite. This mode of proceeding was steadily and firmly persevered in till all marks of the granulations were completely removed; and then, whatever other symptoms remained became the objects of treatment.

When the lid was everted and examined after the first eschar was thrown off, its surface was found to be very red, villous, and slightly ulcerated, with here and there small quantities of a puriform fluid, collected in any little depression which might have accidentally been formed, either during the progress of the disease, or by the action of the remedies employed for its cure. The same appearance was observed after each successive application, but always in a less degree, diminishing pretty nearly in the same ratio as the diseased substance, and only disappearing when it was entirely removed. The accomplishment of that object was marked by a great change, both in the feel and appearance of the inner surface of the lid, it being by that time quite smooth, firm, and generally of a pale colour, with here and there small red vessels distinctly ramifying and anastomosing in the substance of the lining membrane, or immediately under it; whilst the different motions of the palpebræ were performed with an ease and facility not for some time experienced.

Before the cure had thus far advanced, the vascularity of the eyeball and the nebulosity of the cornea, were both found, in the greater proportion of instances, to have decreased considerably, and the degree of vision to have increased; indeed, in many cases, the two first symptoms entirely vanished with the affection of the lids, without any particular treatment, although, in others again they continued, and demanded a distinct treatment,

In some the increased vascularity of the conjunctivæ and corneæ remained, whilst in others the nebulous state of the latter alone existed, but in both states the plan of treatment pursued was nearly the same, and consisted in the constant use of astringent and stimulating applications, such as the solut. argent. nitrat., vinum opii, liquor plumbi acet., tinct. aloes et myrrhæ, tinct. benz. comp., aut pulv. e aloë hyd. submur. et sacch. alb. composit., varied in strength according to circumstances.

The solution of nitrate of silver was one of the remedies which was most frequently employed, and was used sometimes at first in the proportion of two grains to an ounce of water; but, for the most part, it was soon increased to six grains, or even more, and dropt between the lids night and morning. It was found to answer best where there was a slight puriform discharge, or where excoriations or ulcerations of the lining membrane of the lids, or of the surface of the cornea, existed, or in cases where that tunic was affected with a slight general nebulosity, as in such forms of disease it often removed all the morbid appearances in a very short time.

The vinum opii was not found so generally useful in the chronic vascularity remaining after the removal of granulations, as in the passive stages of the simple ophthalmia, its action not appearing to be sufficiently active for the cure of the general run of cases. It was however found, in a few instances, after most of the other remedies had failed, to remove a troublesome relaxation of the tunica conjunctiva covering the eyeballs, which was now and then found to stand out, after the more considerable symptoms of disease had given way.

The liquor plumbi acetatis, either pure or diluted with water, was found to be a very useful remedy in the same form of disease as the vinum opii, and also where the relaxation extended to the lining of the lids, and was coexistent with a considerable degree of chronic inflammation and puriform discharge. It was found to prove very hurtful in all cases where either abrasions or slight ulcerations of the corneæ existed, as in them it produced a scale on their slough, * of the same extent as the loss of substance, which was never without very great difficulty removed; and in two or three cases that could not be effected.

Tinct. aloes et myrrhæ et tinct. benz. comp. were employed occasionally, more for the purpose of changing the action pro-

* My attention was first particularly directed to this occurrence by Staff-Surgeon Lindsey, whose acuteness of observation, zeal, and sound judgment, so well qualify him for the practice of that branch of the profession which he follows, with honour to himself, and great advantage to the British army.

duced by the liquor plumbi acet., than on account of any specific effects they were found to produce.

The compound of aloes, calomel and sugar, * was used in a great number of instances, and with very marked advantage, for many cases which had withstood one or all of the other remedies, yielded readily to its continued use. It was found of greatest utility in removing nebulosity of the cornea, although often it produced also much diminution of the vascularity of the eyeball; though, where the latter existed to any considerable degree, it was latterly but seldom employed, as it was found at times to increase it, and even give rise to an acute attack of inflammation. A general dimness, or even a circumscribed dense opacity of the cornea, remaining after the increased vascularity had been in a great measure removed, were the symptoms found to be most under its control, as they often suffered a very considerable diminution in the course of twenty-four hours after it was first used; and the patients expressed great astonishment at the sudden improvement of their vision.

Under such circumstances, when it was cautiously and regularly persevered in, it seldom failed to answer our utmost expectations. It was used by making a portion of it fall on the anterior part of the eyeball (the lids having been previously well opened), from a small piece of wood hollowed out like a spoon, or a cut quill, every morning, and allowing it to remain there under the palpebræ till washed away by the tears. When it did not occasion much pain, or after using it for some time, the patient was desired to shut the lids the moment it was applied, and keep them so for fifteen or twenty minutes, by which method its effects on the cornea were more certainly obtained. When this application was found to occasion too much action, it was weakened by adding an additional quantity of sugar, or, when too mild, it was rendered more energetic by increasing the proportion of calomel.

When a degree of *Ptosis*, or inability to raise the upper lid, was a sequel of the disease we have been describing, it was, in all the instances, readily removed by rubbing the integuments of the eyebrow and lid with a liniment composed of common oil and tincture of Spanish flies, in the proportion of an ounce of the former to half an ounce of the latter, two or three times a day, or by applying the common sulphuric æther to the same

* ℞ Hydrarg. submur. ℥v.
Aloes socot. ℥viiij.
Sacch. albi. ℥ij. M. ft. pulv.

parts night and morning. In conjunction with the foregoing treatment, blisters were occasionally applied either to the temples, nape of the neck, back of the ears or arms, and were found to be often of considerable advantage when they were kept discharging for some time.

The general remedies employed were similar to those already detailed under the head of Chronic Ophthalmia.

During the latter part of the treatment, the patients were allowed to walk freely about in the open air: indeed, the benefit which resulted from such exposure, when the weather was moderate, was often found to be so considerable, that it was laid down as a rule at the Establishment to send those patients out of hospital in whom the inflammatory part of the disease was nearly removed, but the nebulosity of the cornea continued, without suffering much change from treatment. This proceeding we seldom had occasion to regret, especially where steadiness and sobriety marked the conduct of individuals; but even under reverse circumstances, where the characters were of the most dissipated and debauched description, the corneæ were often found to clear rapidly, and the remains of chronic inflammation, which existed when they were discharged, to suffer a speedy removal.

In stating the latter circumstance, I by no means intend to say that such a mode of proceeding was not highly reprehensible, and frequently followed by severe and even fatal relapses; but I mention it merely to show, that the system pursued, and which was adopted from our experience of its utility, was, even under the most unfavourable circumstances, frequently followed by the most salutary effects. Dry weather, with a moderate degree of heat, and a slight breeze of wind, proved most beneficial; in fact, the coexistence of those three qualities appeared necessary, in order to ensure success, and consequently regulated in a great measure the periods of discharging; as, if they happened to be sent out in dull, rainy, or cloudy weather, they were nearly certain of returning with relapses; indeed, such occurrences could scarcely be guarded against, even in hospital, under similar circumstances.

This subject, viz. the influence which the weather has in producing, modifying, retarding or promoting the cure of diseases of the eye, has been hitherto too much neglected; and I am confident, from what I have seen myself, that such a train of inquiry could not fail to be of material consequence to the practical oculist; and might discover to him methods for diminishing the frequency of such complaints, the greater part of which, no doubt, derive their origin from particular states of the atmosphere.

Lippitudo.—Fourteen patients labouring under this disease were admitted into hospital. In four of them, it was complicated with a good deal of pain, and active inflammation of the eyeballs; but in the other ten, it was mild, and confined entirely to the tarsi, and lining of the lids. In nine of the number, the attack was of but recent occurrence; whilst, in the remaining five, it was of considerable standing, having existed, as far as could be ascertained in one of them, for fourteen months; in two, for three years; in one for four, and in the last, for nineteen years; and was said to have been the sequel of a previous attack of acute ophthalmia.

The general symptoms were, more or less extensive excoriations of the edges of the tarsi; increased redness and thickening of the palpebral lining, with mucous discharge, which glued the edges of the lids together during the night; slight soreness towards the commissures of the palpebræ, particularly experienced on motion; itching, and an occasional hot, burning sensation towards both canthi, when the eyes were, for any considerable time, without being washed; whilst the general appearance of the organs of vision themselves, indicated an unpleasant degree of weakness and uneasiness, more easily conceived than described.

The cures were simple, expeditious, and very effectual. In the four instances alluded to, which were accompanied by slight ophthalmia, and in one or two others where the redness of the lining of the lids was very considerably increased, a few leeches were applied to the upper part of the cheek or temple, and the eyes fomented for a day or two with a tepid Goulard lotion; after which, the solution of nitrate of silver, six grains to an ounce of water, was dropt between the lids twice a day, and the edges of the tarsi besmeared an hour afterwards with dilute citrine ointment, or one compounded of red precipitate, prussiate of iron, &c.,* by means of a common camel hair-pencil.

If the latter was employed, which was generally done when the disease was either very indolent or found to be of long standing, as its effects were more stimulating than those of the other, it was allowed to remain half an hour, or even longer, in contact with the diseased parts, and then washed away by tepid water. By this time the inflammation of the parts to which it had been applied was generally pretty considerable; but that appearance, in all the cases, now vanished, where the remedy was not actually

* The exact strength has, at present, escaped my recollection; and as I have not the means of ascertaining it at this moment, I must refer you to my letter, which will soon follow this communication.

too strong. When the increased redness thus occasioned did not suffer a spontaneous renewal, it was judged a sufficient reason for weakening it considerably, if not for discontinuing it altogether.

When the dilute citrine ointment was preferred, it was generally allowed to remain in contact with the edges of the lids, till washed away by the lachrymal fluid. Whichever of the two was employed, it was found absolutely necessary to increase its strength after being used for some time, in order to ensure a progressive amendment.

In the cases where no marks of increased vascular action were exhibited on admission, the employment of the drops and ointments just described was commenced directly upon the patient being taken under treatment; and, by continuing them regularly, with proper attention to the bowels and personal cleanliness, the removal of the disease, in all the cases, was effected in a few days.

Psorophthalmia.—Of this disease four examples occurred, all of which were of a chronic description; in three both lids were affected, whilst, in the fourth, it was confined to the lower. In the first number, the edges of the tarsi, particularly the lower ones, were thickly studded with small ulcerated points of considerable depth, discharging a thick yellow unctuous matter, which, if not regularly washed away, soon concreted into small little scabs on their surface; and in the fourth, the disease, as has been already observed, was confined to the lower lid, but affected its whole internal surface, and was attended by such a degree of thickening, as to cause nearly a complete *ectropion*. The vascularity of the conjunctival lining was, in all the cases, much increased; and the patients complained of soreness and stiffness on moving the lids, which, in consequence of the dryness of the discharge, were found in general adhering together in the morning. In none of them were the eyeballs at all affected.

In the treatment of this complaint, various washes and ointments were tried on admission, but without any material advantage; for the only way in which it appeared possible to cure it, was by destroying effectually the diseased surface, by the application of some caustic. The nitrate of silver in substance was the one usually employed, and was applied by carrying its extremity along the whole ulcerated surface. After the slough thus formed was thrown off, a strong watery solution of the same substance was instilled night and morning between the lids, which, with the use of the ointment of prussiate of iron, as described under the head of *Lippitudo*, effectually removed all diseased appearances.

(*To be continued.*)