

The worst cases I have seen were in young ladies from 17 to 21. They had all lived in this country for several years. One of them was born here. Another case was a body of fifty who had lived in this province for 20 years. I have seen a number of cases in males ranging in age from 20 to 55.

During the last last four months I have examined about ten cases in which these specks were present. They varied in number from one to a dozen and usually the severity of the symptoms was in direct proportion to the number of specks present.

I have not yet seen this condition in a recent arrival in this country. Though I have never seen a case outside of this province I am not prepared to say positively that Saskatchewan has a monopoly.

The diseases and conditions of the lids in which we find white, yellowish, or greyish spots or patches are the following:

1. Trachoma.
2. Follicular conjunctivitis.
3. Henle's glands.
4. Infarcts and calcareous deposits in the meibomian glands.

1. Trachoma. There is no more resemblance between the white dots of Prairie Conjunctivitis and the yellowish spots characteristic of beginning Trachoma than there is between a snowflake and an omelet. The diagnosis is made by the color, size, depth and location. The dots of Prairie Conjunctives are quite white, very small, superficial and generally seen on the red patches towards the inner and outer canthi. The spots of Trachoma are yellowish in color, larger in size, more deeply seated and situated along the attached border of the tarsus.

No experienced eye could mistake Follicular conjunctivitis for the prairie variety. They have little in common. The follicles of Follicular conjunctivitis are of a greyish or pearly translucency, and are arranged in rows like beads on a string. They