such cases. Its effect is diminished or increased in proportion as it is washed off after application. The crystal should be rubbed smooth on a grindstone before using. The pam of the reaction after its use can be diminished by instilling a few drops of cocaine before use and free bathing with cold water after. The mitigated stick (nitrate of silver 1 part, nitrate of potash 2 parts,) is also applicable to this same class of cases. Scarification by electrolytic knives, after the methol of Johnson, is coming into fashion; but it must be said that the method is still *sub judice* and its results doubtful.

Of the sequelæ, or more properly the concurrent affections, pannus is by far the most serious. treatment in most cases is simply the treatment of the granulations. Best cases are fairly plentiful, in which the cornea opacity is most obstinate, and in which permanent impairment of vision is threatened. The remedy par excellence for this condition is Jequirity. This drug was first brought to notice of De Wecker, of Paris, by a Brazilian student, in 1882. De Wecker experimented largely with it, and as a consequence of his experiences, Jequirity has taken its place among the classic remedies in ocular therapeutics. One bean macerated in half an ounce of water was the standard strength, but later experiment has shown that powdered bean is the most efficacious. If properly kept in a glass-stoppered bottle, it will keep for a long time. I have some that I have had for five years; it is still quite as good and active as when first obtained. In suitable cases a little is dusted on the conjunctiva. Great caution should be used to apply very little at first. Within six hours the eye begins to pain, the conjunctiva and lids to swell, and in twenty hours a thin pelucid or greyish pseudo-membrane is formed. The discharge from the eye is increased. There is heat and the heightened sensibility to light. If it is desired to stir up the eye still further, a little more jiquirity powder is insuffiated next day. Usually two doses accomplish all that is required.

It is best to allow the inflammatory reaction to have its own way for two or three days; after that, it can be checked by warm boric acid lotions. After a week, nitrate of silver solutions may be used. In some cases this process of cooling down may have to be repeated two or three times. I

have never yet met with a case in which very material benefit did not result, even in old and apparently hopeless cases.

A word of caution: Don't use Jequirity except in very old and obstinate cases, in which the cornea is a good deal affected. I saw a case in New York some years ago in which, from its use, both cornea sloughed in a young man. It was admitted that there was little vascularity of the corneæ in this case. It was being tried for a not very severe attack of granular conjunctivitis. In conclusion let me say, granular ophthalmia is easily cured at the outset, but it too often happens that patients underestimate its importance, and neglect or deliberately disregard warnings until the disease becomes fixed. I have under my care at the present time a case in which the granular process is quite active, eighteen years after the first neglected attack; therefore, we cannot be too careful to forewarn patients of the future which awaits the negligent.

## DR. JOHN L. BRAYS ADDRESS TO MEDICAL GRADUATES OF QUEEN'S UNIVERSITY.

After such a long absence it affords me a great deal of pleasure to stand in Queen's halls and be permitted to address a few words to you, and I thank the principal for his kind and cordial invitation to be with you to-day and take part in these interesting ceremonies But while I feel pleasure on this occasion, it is not unmixed with pain, when I recall the time that I waited, as you do, to receive my degree, to know that so many of my teachers and fellow-graduates have gone on that journey whence no traveller ever returns. Of the professors in this university who occupied chairs at that time, there remain but two, viz., the venerable and learned Dr. Williamson, in Divinity and Arts, and the honourable Dean of the Medical Faculty, my esteemed preceptor and warm friend, Dr. Fowler. Of the twenty-four gentlemen who comprised the graduating class of my year, only eight remain. When I recall their smiling faces and warm greetings, and know that I shall never again meet them on earth, I cannot but feel sad, and it makes me realize the uncertainty of human life. I hope and believe they have received from the