

and safety be carried to the required spot, when it is opened by pressure on a trigger in the handle, used, then allowed to close by remission of the pressure, and withdrawn.

The second chapter is devoted to the consideration of ophthalmic instruments, and gives a full account of those in more common use. Speaking generally, Mr. W. prefers wooden to ivory handles, as they can be held with more ease and freedom, and those which are smooth to those which are crosscut. Recommends the points to be tested on a drum of kid skin, stretched over a cylinder; by its mere weight the instrument should insensibly penetrate the tissue. Scissors are best tested by closing the blades on wet bibulous paper gently, and without lateral pressure, if sharp they will readily divide it.

A new instrument has been invented for operating in capsular cataract, which was brought out in the great Exhibition: it is very simple and ingenious. The blades are brought into play by a canula, which encloses them; shutting when the canula is pushed forwards, and opening when it is withdrawn. They are made either with tenaculum or sharp capsule points. At the shoulder is a screw to adjust the length of blades for the canula to work over.

We had prepared a digest of each of the chapters of this important work, which want of space alone prevents us laying before our readers. In lieu, we shall make a very few notes of their contents or most prominent features. The 3rd chapter treats of injuries from mechanical and chemical causes, and embodies a complete account of the various pathological states by which they may be followed. The various consequences of injuries, as rupture of eye coats, laceration and detachment of iris, displacement of lens, &c., are spoken of. Wounds of the various parts are then investigated; and, lastly, chemical injuries from combustion, gunpowder, lime, &c. In the 4th chapter he speaks of foreign bodies; and we find that Dr. Jeannett's recent proposition to dissolve particles of iron from the cornea by sol. sulph. cupr. gr. j-iiij. to ʒj water mentioned as useful in the absence of the surgeon, but not a substitute for mechanical removal.

Chap. V.—Affection of eyelids. Not unfavorable to transplantation of eyelashes; for if the follicles are perfect, why should not the hairs be nourished by the living tissue in which they are imbedded? There is a complete description of en and ektropion, from which we have already seen. He details Dieffenbach's plan of operating on the lids by lateral sliding, but says he has no practical acquaintance with it and knows of no surgeon who has.

Chap. VI.—Affections of puncta, canaliculi and lachrymal tube. A delicate fusiform probe is depicted and described as superior to the thin flexible wire for exploration. Obstruction of lachrymal tube is regarded as