

to a piece of dead bone, in the structure above-mentioned, apparently about the centre of the orbital plate. In consequence of the contraction of the areolar tissue, the upper lid was drawn upwards, so that it would not descend sufficiently to cover the globe, which was consequently liable to continual irritation, while the lid was also partially everted which caused some disfigurement. In this case I advised to endeavour the separation of the piece of diseased bone, being careful to watch its progress, and particular to guard against the supervention of disease of the brain, for I considered this untoward result not unlikely to happen—after reflecting on the location and great tenuity of the orbital plate; and was fearful that inflammatory action here, might be attended with as fatal consequences, as often results from caries of the petrious portion of the temporal bone in diseases of the ear. After the disease of the bone had been cured, I suggested that by freely dividing the adhesions within the orbit, and keeping the upper lid forcibly depressed by means of sutures affixed to the cheek with sticking plaster, until the granulations had filled up the deficiency, which would effectually cure the eversion and contraction of the lids.

The other case presented a far greater degree of deformity, a complete eversion of the upper lid, which had been produced by a tumour of the orbit. This tumour, from the woman's description had been of an encysted character, in all probability an hydatid, as she described the discharge as fluid and like water; it had been injudiciously opened by a medical man, and not completely removed as should have been the case. The cyst continued to discharge for some time, but gradually contracting produced great puckering and derangement of the neighbouring parts, that ended in complete eversion of the lid. I proposed to perform an operation for the removal of the deformity, but the old lady has not yet consented.

Diseases of the Lachrymal Apparatus.

I have thought it better to include all the varieties of the diseases that influence these organs under one head, especially as I had hoped ere this to have brought the report to a close. Through the whole I have endeavoured to be as concise as the subject matter would permit, and I had thought that perspicuity was consonant with the comprehension of the subject; but from the unavoidable extent, I shall endeavour to conclude as hastily and as briefly as possible.

The diseases of the lachrymal apparatus admitted for treatment, upon the whole were not very numerous, and although each case presented interesting matter for the consideration of the ophthalmic surgeon, still there is nothing that demanded very special consideration. I might mention that one case of stricture of the lachrymal sac, appeared to be cured by the employment of anal probe, which was passed daily for a considerable time. In ano-