cess of making this examination, although doubtless the

majority of you know it already.

With a small platinum wire, sterilized in a spirit lamp's flame, a small amount of the secretion is removed from the conjunctival sac and smeared over a glass slide. The great point in the smearing is to tease the secretion well out on the slide; a drop or two of gentian violet solution is dropped on the smear; after twenty-five seconds this is washed away with water; a few drops of Gram's iodine solution is dropped on and left for about fifteen seconds; it is washed off with alcohol until no more colored matter is observed to come away; the specimen is then washed with water and a five per cent. solution of safranin is dropped on the specimen and left for five seconds, when it is washed off with water. This is a routine method for the ocular secretions.

As you all know, conjunctivitis has been classified according to the nature of its secretion or conjunctival changes, e.g., catarrhal, muco purulent, granular, and membranous types, but since bacteriological investigations have been carried out there is a strong likelihood that this will be changed. Similar clinical symptoms are caused by very different forms of bacteria, the treatment of which varies greatly according to the bacterial finding.

In the catarrhal type of conjunctivitis we recognize two main varieties, the acute and the chronic, the symptoms of which are too well-known to you to need repetition. The vast majority of cases of the acute type has been found to be due to the presence of the Koch-Weeks bacillus, and in only a few cases have other germs been discovered. This form of bacillus as a rule attacks children, and has even been found in the newborn. As a rule these bacilli can only be discovered during the first few days of the disease.

The bacilli-lie between the leucocytes and also within the protoplasm. Sometimes they even extend into chains of two or three links side by side; they are decolorized by Gram's icdine; they have an incubation period of two or three days; and the second eye is generally infected two or three days after the first; they seem to penetrate into the superficial layers of the epithelium and not into the deeper tissues; they do not give rise to chronic conjunctivitis. The bacilli appear as very short, fine rods, staining less deeply than the nuclei of the cells; the ends are rounded and also show a deeper polar stain. I have a specimen under the microscope for your observation.

The treatment of this form of conjunctivitis consists in the