Geo. de Schweinitz states that the amount has varied from 15 grs. to 1 oz. in twenty-four hours. The duration of the blindness varies considerably, in some cases lasting but a few hours, in others for weeks and even months, while in two cases, those of Calhoun and Claiborne, the blindness was permanent. In my case, complete blindness lasted for over three weeks; in Voorhies' case for ten weeks, while in that of Michel the blindness was total for seven months. In typical cases. and the majority of recorded cases are typical, there should be no difficulty in making a diagnosis. The sudden onset of complete binocular blindness, coming on simultaneously in the two eyes, associated with the fundus changes described above, and accompanied by tinnitus aurium and deafness in a patient who has been taking quinine in large quantities, makes a clinical picture which is quite pathognomonic. Complete embolism or thrombosis of the central artery of the retina produces changes in the fundus much like those seen in quinine amaurosis, but simultaneous occlusion of the central retinal artery in the two eyes must be extremely rare; if indeed it ever Lucien Howe says, "Simultaneous embolic plugging of occurs at all. "the central artery in each eye has been described, but it is an ex-"ceedingly rare condition," but gives no authority for his statement. I have not been able to find the record of any such case, but A. von Graefe and Nettleship both report cases where both eyes were affected by embolism of the retinal artery, but they were not attacked simultaneously. In Von Graefe's case the second eye was not affected until two years after the other had been lost, while in Nettleship's case twelve days had elapsed before the second eve was attacked.

The patients who have embolism nearly always have arterial disease, and besides this they do not present the other symptoms so characteristic of cinchonism. Further, the blindness in embolism or thrombosis is almost, without exception, permanent. Occasionally acute retrobulbar neuritis may cause sudden blindness, and a certain amount of retinal ischemia, but in such cases there is orbital pain, headache, pain on moving the eyeball, and if they recover, the peripheral field is restored before the central, while the reverse order is seen in quinine amaurosis. More than one hundred cases of this peculiar condition have been placed on record, seventy-one of which I have been able to study, and I have compiled the following table showing the final state of vision:—

1.—No. of cases where vision became normal or nearly so	38
-No. of cases where vision was permanently impaired to	
moderate degree	21
3No. of cases where vision was permanently impaired to a	
high dagree	4

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