The ciliary body is tremendously infiltrated with blood corpuscles, mainly of the small mononuclear and polymorphonuclear variety; these with the pigment which is scattered throughout this structure practically prohibits a clear view of the ciliary muscle. The ciliary body, like the pars ciliaris retinæ, has thrown an enormous quantity of these lymphocytes into the vitreous cavity which, following the course of the suspensory ligament include the posterior capsule of the lens behind and the iris in front.

The lens is practically normal; some of its anterior fibres have been torn in cutting the sections.

The iris is practically a repetition of the condition noted in the ciliary body, but the degree noted here is even more intense. It is tremendously infiltrated throughout its whole structure, its fibres are swollen and contorted, and the spaces between these are occupied by a marked engorgement of leucocytes, and a number of erythrocytes. Inflammatory changes can be noted in the posterior pigmentary layer, several pigment cells having become detached from adhesion to the anterior lens capsule as posterior synechiæ. The anterior pigmentary layer can be seen to be broken at numbers of points where quantities of lymphocytes are pouring into the anterior chamber (Fig. 2). The condition of the vessel walls here is distinctly interesting, some of these capillaries are contorted and show a distinct swelling of their endothelial cells, numbers of which can be seen lying free in the lumen of the vessels. Again, one can make out occasionally a lymphocyte or polymorph in the blood stream, some adherent to the vessel walls and others evidently migrating through the wall of the capillary (Fig. 3). The capillaries of the iris are not engorged, although some of them contain a few blood corpuscles. Some pigment cells can also be seen scattered about the neighbourhood of the vessel walls and the connective tissue about these shows a decided degree of inflammation. In the anterior chamber the inferior filtration angle is completely occluded by a purulent exudate which consists practically of a mass of polymorphs, lymphocytes and large mononuclear leucocytes, the polymorphs being by far the most numerous. A second mass of purulent clot follows this in a wedge shape, apex down, extending upwards as a ribbon-like band and covering the pupillary area. Organized connective tissue formation bounds the anterior part of this band, a second band of exudate extending over the whole of the anterior surface of the iris on one side to which it is firmly adherent and over one-third of the iris on the opposite side (see Fig. 2). A quantity of this exudate has been deposited on the posterior surface of Descemet's membrane, a comparatively small