

of flaxseed or bread and milk continuously applied for some time has been said to be followed by good effects. Ayers reports a case in which poultices were used almost continuously for four months and with marked improvement in the condition of the eye. In inflammation of the circumocular fibrous and cellular tissue, cold continuously applied for hours at a time will tend to diminish the heat and swelling of the part and relieve the pain. If it be desired to expedite the suppurative process, which often can not be prevented, hot water would be in order. It can be seen from what has been said that no strict rules or rigid laws can be laid down as to the use of these agents. Potent for good in one case, they may produce the opposite effect in another suffering from a similar condition. It would seem that the following would be indications for their use in general:—In acute inflammations, followed by much elevation of temperature or swelling of the part, or in any condition where a lessening of the vascular action is required, cold in some form, dry or moist, intermittent or continuous, is indicated, and generally gives the required relief. Where an increase in the blood-supply of a part is desired, or when the vitality is threatened by a slow necrotic rather than an inflammatory process, heat in some one of its modes of application is clearly indicated.—New York.—*Louisville Med. Times.*

A MENTION OF TWO FORMS OF EYE DISEASE FREQUENTLY MET WITH IN CHILDREN.

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In a dispensary service in a large city a considerable portion of the patients are children from two to six years of age. Philadelphia, from the comparatively good sanitary surroundings of the poor, with the advantage of separate homes, furnishes fewer examples of filth-bred diseases than some of her sister cities, but we "have the poor always with us," and meet with a class of diseases which appertain almost exclusively to them. The causes of the diseases and their *raison d'être* are apparent and require only the briefest mention. The food of the poorer classes is of the simplest kind, consisting chiefly of bread and potatoes, very little meat and as little good milk. The kitchen is the living-room; fresh air is regarded as an un-mixed evil and a bath a sure means of catching cold. Clean linen is reserved for Sundays and holidays. Several children are compelled to sleep in the same bed. They eat of the food provided for their elders. Their pennies are spent for candies. The ordinary diseases of childhood are treated by administering five cents' worth of castor-oil and confining the patient to the kitchen, there to breathe the fumes from the father's tobacco pipe and the flavors of boiling cabbage. Simple fevers, colds, etc., sometimes recover with this treatment and occasionally a mild inflammation of the eye gets

well, but the tendency is to grow worse, and a simple conjunctivitis passes into a chronic form and other tissues become affected.

The two forms of eye diseases to which I wish to call attention, both on account of their frequency and their destruction of function, are Phlyctenular Keratitis and Superficial Vascular Keratitis. The diagnosis between them is sufficiently easy. The former is characterized by the development on the cornea of one or more blebs *with vessels running directly to them*. These blebs have their seat in the anterior layers of the cornea, and consist of a circumscribed minute collection of serum underneath the epithelium and elevating it. The conjunctival vessels involved are the superficial and episcleral and on the surface of the cornea are new vascular formations running directly to the phlyctenulæ. In a few days the vesicle ruptures leaving an ulcer which gradually entirely heals without a persisting scar.

Superficial vascular keratitis, however, is a much more important and disastrous affection, and from the very outset demands skillful attention and patient nursing. It is characterized by an irregular superficial inflammation of the cornea, which either in the very beginning or later is accompanied by the formation of new blood vessels. The symptoms common to all the forms of inflammation of the cornea are prominent. The photophobia is especially conspicuous. The patient buries his head in his mother's lap or in a pillow. Lachrymation is less than in conjunctivitis. The cornea, overhung by the swollen upper lid, is in great part opaque. There may be several patches of opacity or one large irregular patch, the result of the merging of smaller ones; the epithelium is lost, hence the surface is rough, and it is inlaid with vessels. These vessels spring from the pericorneal ring, are new formations, and lie directly on the surface; they have no particular direction or stopping place, but traverse the entire cornea. Children affected with this form of keratitis are said to be scrofulous, and many show the external marks of that diathesis—flat-nose, large pouting lips, decayed teeth—but many others show no such signs. They are simply ill-nourished and ill-cared for. Their digestive organs being abused refuse to properly carry on their functions, and the lower part of the alimentary tract becomes the abiding place for worms, the existence of which should be inquired into, because of its therapeutic importance. Cases of keratitis which have persisted for months and years, going the rounds of the dispensaries, begin to recover only after the effective administration of an anthelmintic. The possibility of the reflex nature of this disease is too often overlooked. We are inclined to fall into routine practice and order iron, quinine and cod-liver oil, without a thought of digestion and assimilation. "Scrofulous" and "malarial" are convenient terms, and are often used to cover our ignorance and want of thoroughness. The patient is thin, pale, fretful, restless, and a disease once