

(+ T 3); subconjunctival vessels in the course of the recti muscles much enlarged, cornea hazy and not very sensitive, anterior chamber shallow, iris dull, discolored, partially atrophied, and adherent to the lens, pupil dilated, oblong, and fixed, and yielding a yellowish-green reflex, (with ophthalmoscope), lens and vitreous hazy, retinal vessels (vains) dilated and tortuous and curving abruptly over the edge of the optic disc, which presents the typical appearance of the glaucomatous or pressure excavation. Left eye—vision nil; globe not painful or tender, but extremely hard (+ T 3); episcleral vessels numerous and swollen, and venous network encircling the cornea, which is but moderately sensitive, anterior chamber very shallow; pupil dilated, circular, and fixed, and occupied by a mature, hard cataract, which with the narrow edging of atrophied iris, lies almost in contact with the cornea.

DIAGNOSIS.—Acute inflammatory glaucoma, ending in the "glaucoma absolutum" of Von Graefe. The cataract must have been secondary, or very possibly it was partially developed in July, when the glaucoma supervened.

PROGNOSIS.—There is not the faintest hope of restoring even a slight degree of sight. Treatment can now be merely palliative. It would be very difficult to say what will be the ultimate result. The eyes may remain comparatively quiescent, or inflammatory attacks may recur, ending finally in complete degeneration of the eyeballs. An iridectomy was suggested as the only means of securing permanent immunity from the attacks of pain, ciliary neuralgia, &c. The patient demurred to the operation, and returned home, preferring to try morphine, leeches, &c., which she was advised to use during any exacerbations that might ensue.

CASE II.—September 6th.—Mrs. H——, æt. 56, gives the following history. She is naturally healthy, and of active habits and nervous temperament, but has been ailing the last few months.

March 1st.—She was seized with acute pain in and around the right eye, that remained for several days, and then passed off, leaving the sight dim. The patient consulted a surgeon, who diagnosed cataract.

On the 1st of June, a second severe attack occurred, and