

on the right eye. With the needle I used in case 10, I separated the adhesions, which broke readily; and having lacerated the capsule, I divided the lens into several pieces, some of which escaped into the anterior chamber.

Aug. 18 (20 days after operation).—No acute inflammation followed the operation of July 29, but ten days or a fortnight after, a deposit like pus began to appear in the outer and lower part of the anterior chamber, which in another week was filled to nearly one-third with this deposit. The cataract by this time was partially absorbed, and I now (August 18) made a section of the lower third of the cornea, through which the deposit (semi-fluid) immediately escaped, and most of the remains of the cataract I removed with the scoop and toothed forceps. Cold-water dressing was afterwards constantly applied.

Sep. 18 (a month after operation).—No pain, and very little inflammation followed this second operation, and at this time vision of the right eye was somewhat improved, so that he could distinguish the bars of the windows and other large objects in a good light. Vision, I believe, did not improve beyond this. The prognosis was clearly unfavourable in this case, in consequence of the inflammation which followed, and lasted so long after the previous operation.

CASE 12.—Cataract (lenticular) of both eyes. Perception of light good. Not complicated with any other apparent structural change. Extraction performed on both eyes. Prognosis favourable.

Rob. Simpson, æt. 21, was admitted into the Toronto Hospital, April 17th, 1850. Both cataracts were of a bluish white colour, and presented a regularly marked radiated appearance of the lens.

April 22.—The pupil of the left eye being moderately dilated by Belladonna, I made a section of the lower half of the cornea, dividing the capsule of the lens at the same time. The patient seized my arm at the time the knife was passing across the anterior chamber, which caused its point to wound slightly the nasal and lower side of the pupillary margin of the iris. The cataract broken up, escaped at once, with some protrusion of the iris; the latter was readily returned wholly within the cornea, by gently rubbing on the lid placed over the protruded iris.

April 28 (six days after operation).—There had been little or no pain since the operation. The cornea was quite transparent, the wound healed, and the pupil a bright black, of good size, but slightly irregular at the lower part. The sclerotic conjunctiva was but little injected. He could see large objects, but without knowing what they were, and was dazzled by a very moderate light. Cold-water dressing had been constantly applied.

May 20 (4 weeks after operation).—He could read ordinary print by aid of a convex glass.