and indeed without any knowledge whatever of any disease of the eye.

It is entirely optional how far one may qualify himself to treat these diseases. The general practitioner may not know even the names of the various diseases of the eye, or he may, on the other hand, be as well trained as the average specialist and treat his cases as successfully. Every man, therefore, must answer the question for himself according to his light.

In the second place there is the patient's point of view. If no specialist be near at hand, the doctor is forced to do what he can even though he may feel his knowledge and experience are inadequate.

So far as I can in the time available, I will give my views of what work should be done by the specialist.

- 1. Cases for operation. All the more serious operations of the eyeball, those for deformities of the eyelids, and complicated operations for strabismus should be done by the specialist. The simple tenotomy for strabismus, operations for pterygium, and chalazion and for obstructions in the lachrymal passages may be done by the general practitioner.
- 2. Injuries. Those which are superficial or involve the eyelids only, need not come to the oculist. All those which penetrate the eyeball or result in intraocular lesions should be seen by the consultant.
- 3. Intraocular diseases, requiring the use of the ophthalmoscope in diagnosis, properly belong to the specialist. There are few in general practice who become proficient in the use of the ophthalmoscope.
- 4. Errors of refraction. No general practitioner will care to give time to the fitting of glasses but in this connection it would be of interest to discuss how far the numerous opticians and doctors of refraction are to be trusted. My experience goes to prove that they sell glasses to every one who can be persuaded to buy, error or no error, and that only in cases of presbyopia are they likely to be correct.
- 5. In the external diseases of the eye the general practitioner with the average amount of eye lore, may not require help. It is only in the more severe and in the complicated cases, e.g., hypopyon keratitis, that the specialist need be called upon.