

ishing rapidly and is now less than half its former size.

Measurements—On first of March were: waist, 26 $\frac{3}{4}$ inches, instead of 30; largest part of tumor, 35 $\frac{1}{2}$, instead of 41 inches. She kindly accompanied me to the Medical Society to show the members that she was now able to overlap a cloak six inches, which she had been unable to make meet on her at Christmas. As she is symptomatically cured I have discharged her to-day, after two months and nineteen days of treatment, during which I only gave her twenty-four applications. She called in on the 24th April and 2nd May to reiterate the expression of her gratitude, and to say that she had neither pain or ache anywhere, and that she was able to withstand prolonged exertion without fatigue. I did not examine her again, but have no doubt that the tumor will entirely disappear, as in the case of Madame D., whom I discharged cured when the tumor was reduced to the size of an orange, and in whom, six months later, no trace of it could be found.

HOT WATER IN THE MANAGEMENT OF EYE DISEASES.*

BY LEARTUS CONNOR, A.M., M.D.

Ophthalmic and Aural Surgeon to "Harper Hospital" and "Detroit Free Children's Hospital."

In the management of a morbid state in any portion of the body, three things must be considered by the intelligent practitioner, viz.: First, the feeding of the parts during a continuance of the morbid state, else death or disablement may occur from simple starvation; second, the removal in so far as possible, of the cause of the morbid state; and third, the placing of the living matter of the part, under such conditions as will most rapidly accomplish the repair of the disabled structure. The management of any disease which accomplishes these three things must be scientific, and, in the main, satisfactory.

Eye diseases are subject to the same general laws of physiology and pathology that govern the diseases of similar tissues in the rest of the body. Hence their management falls under the same general principles. Anatomical and physiological

peculiarities simply modify the details of management.

All successful treatment of eye diseases is in its last analysis based upon its ability to accomplish one or more of these things. For instance, take the case of senile cataract. The morbid condition is a diseased lens (probably from starvation of the lens elements at first). However, when opaque, its management consists in its removal from the axis of vision. In doing this by extraction, care is taken that the feeding of the cornea be not shut off by too large a corneal incision, by too rough manipulation, or by an incarceration of a piece of the iris in the corneal wound. The reparative activities of the wounded parts are stimulated or assisted by the protection of the wound from all agents of inflammation, as germs, mechanical or chemical irritants, and by physiological rest to the wounded parts.

No thoughtful man will question the fact that the same principles apply to every case of eye disease. But the moment we begin to discuss the agencies by which these principles shall be applied in the treatment of any particular case or disease, divergence of opinion at once appears.

As a fact of experience, after more than ten years of careful observation and experiment, I am convinced that in the management of a large number of eye diseases, the use of hot water is a powerful agent in attaining the three things mentioned, viz.: The good feeding of the diseased tissues; the removal of morbid agents; and the promotion of healthful repair. In the brief space allotted to a paper before this body, it is impossible to present in detail the clinical evidence I have collected in support of this claim. I shall only hope to so present the matter as to induce others to give hot water a fair trial. Such trial will convince thoughtful observers that hot water deserves a more prominent place in ocular therapeutics than is usually accorded to it.

In many instances it will accomplish all that is called for in the management of slighter forms of eye troubles, as mild blepharitis, mild corneitis, especially phlyctenular, mild conjunctivitis. I have known numerous cases in which, by suggestion of one of my patients who had been taught the use of hot water, a goodly number of others had been cured of apparently similar troubles, by it alone. But of these cases I do not now speak,

* Read before the Ophthalmological Section of the Ninth International Medical Congress.