It follows from these observations that if we can in any way manage to keep the eye free from septic influences for the space of twenty-four hours, we carry it safely through the most dangerous period. This at least is true, if, as most of us now believe, suppuration can be shown to depend on septic influences, and especially so if the septic influence is from without, as it undoubtedly is in nearly every instance.

The only possible way of proving the actual value of antiseptic eye surgery is that of comparing results obtained under this system with those obtained when no special precautions are used. The comparison would be most complete if made on a large scale by the same operator with all other circumstances unaltered. For obvious reasons these conditions can never be entirely fulfilled. We can, however, institute a comparison between the antiseptic and the older methods, with other conditions approximately the same, and in this way conclusions may be drawn which will give us a fairly accurate idea of the relative value of the two methods.

Operations for the removal of cataract afford the greatest scope for making such comparisons, and for this reason I will give a résumé of the cataract operations which I have performed during the past two years, that is from May, 1887, to May, 1889. The number, though not very large, is, nevertheless, perhaps sufficient to justify this attempt to illustrate the subject of my paper. During the period just mentioned I have removed ninety cataracts by the various methods of extraction now in vogue.

The great majority of these were senile cataracts and the operation usually employed was the one known as sclero-corneal extraction with iridectomy. There are, however, in the series, cataracts of almost every variety, such as congenital, lamellar, traumatic, and soft cataract in early adult life of unknown origin. I do not think the value of the antiseptic method is materially modified by introducing these into the series because I am fully persuaded disastrous results are relatively quite as frequent in operations for the removal of these as in the more common senile cataract.

I will not give details as to the exact amount of vision attained in each case for the reason that many of them were hospital patients and most of these were discharged from the