showed congenital excavation of each optic nerve, and slight but positive glaucomatous excavation, the vessels being bent and their contour altered at the margin of the upper half of the optic disk. There was pulsation of the retinal veins, and moderate pressure upon the eye induced arterial pulsation.

The retinal arteries were reduced in calibre, and a narrow whitish ring encircled each optic disc. The examination was made without previously dilating the patient's pupil.

[In cases of suspected glaucoma, even where the pupil is comparatively small, as it was in this instance, it is advisable to dispense with mydriatics, for not a few cases are recorded in which an attack of acute inflammatory glaucoma followed the application of atropine to eyes that were in the premonitory stage or the seat of simple glaucoma. The state of the optic disc and of a portion of the fundus can be satisfactorily determined without a previous dilatation of the pupil; though the latter certainly facilitates a thorough examination with the ophthalmoscope. Unless the iris be turgid or inflamed, a very weak solution of atropine (gr. j. to eight ounces of water,) suffices to relax the sphincter, without paralysing the accomodation, or producing that blurring and photophobia which remain for several days after the instillation of strong solutions. The writer is in the habit of using atropised gelatine discs, (by Savory and Moore of London,) of the strength of $\frac{1}{2000}$ of a grain each. One of these placed at the bottom of the conjunctival sac will ordinarily enlarge the pupil sufficiently in about an hour; and in a few hours the effect will have passed off. The sulphate of atropia is much to be preferred to the alkaloid itself, in preparing solutions. On account of the ready solubility of the salt, we can dispense with such adjuvants as acid. tart, alcohol, &c., that are used to render the alkaloid soluble, and that frequently tend to excite unpleasant and injurious irritation of the eye.]

This case offers a good example of the insidious nature and slow progress of simple or chronic non-inflammatory glaucoma, and of the utility of the ophthalmoscope in detecting the initial organic changes. The eyes were seemingly healthy, and the degree of vision excellent, and but for the fact that the asthenopia prevented the man from following his ordinary avocation, he would not have suspected any disease.