scleral wound may be necessary, even at the expense sometimes of enlarging the aperture somewhat; but when every possible precaution has been taken with this class of wounds, most of them will go wrong in one of two ways—either an acute suppurative panophthalmitis will speedily extinguish the flickering ray of hope, or an equally unfortunate termination will occur through the slower but more insidious and dangerous ravages of a chronic iridocyclitis, leaving a shrunken and sensitive eyeball, with a choice between sympathetic ophthalmia or some preventive operation which at best may leave a maimed and sightless eyeball.