## CTION.

. There are nask in the ich has been e Fig. 4.) se of the roller starching the i, the eye will hout injury. tle-shaped alen centimeters the eye and adhesive plasector. One of ed with is the ), which when and surroundmfortable and

ents object to aiming that it nd makes them d that one may large, stiff and over the dresspiece of rubber

ving the bandage four hours after wound is new , especially if a de, or if not the s has generally no iridic hernia enty-four hours, from any cause, coughing, direct f uncomplicated e end of twentyor edematous. e can generally e eye beneath. dage should be tle mucus) and the main object, is to determine prolapse has oc-

o deal with it. tly bathed with mucus, vaselin lids and cilia. d. Solutions ineutral or slightly ways warmed. is healed and the hed, the ordinary with I am in it a concave mon-

## THE AFTER-TREATMENT OF NORMAL CATARACT EXTRACTION.

ocular eye-shade which, while touching the brow, cheek, and nose, is clear of the eyelashes. This is worn loosely over the eye during the day, and at night is kept in place by a small strip of adhesive plaster, as in Fig. 8. In a week or ten days one may usually dispense with any dressing or protection whatever, particularly where the patient remains indoors.

On what day should the patient be allowed out of bed? In all ordinary cases twentyfour hours is long enough for him to maintain absolute rest. Still avoiding sudden movements he may then be allowed to sit up in an arm-chair and even to move about in the room, and so gradually regain his wonted liberty. After forty-eight hours the bowels should be moved by an enema, and more solid food is to be added to the diet list.

Common sense will dictate when and under what circumstances the subject of cataractextraction should be allowed to venture out of doors. If exercise be taken in a close carriage, he may, with the eye wearing an ordinary shade, be allowed out, even in severe weather, as early as the end of the second week; when the day is comfortably warm and there is no wind blowing, walks may be taken with impunity.

There should be absolutely no use of the eyes for a month, when glasses should be allowed for distance; when the patient is accustomed to these, lenses for near work may be prescribed.