Seventy cases of keratomalacia were recorded during the year. The substitution of sardine oil for cod-liver oil was tried in the treatment of the disease, but this proved unsatisfactory, since it tended to produce diarrhoea.

Some cases of interest are recorded by members of the staff; and much information regarding the incidence of eye disease in South India may be obtained from the report.

CORRESPONDENCE

PRESCRIBING SPECTACLES

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—Mr. Percival, in his article on prescribing spectacles appearing in the May number of the Journal, states that “the periscopic effect is more desired in the horizontal direction.” Consequently, he would prescribe a $-6D$ cylinder if its axis were vertical, but not if the axis were horizontal. Is this objection to a horizontal cylinder well founded? In the case of a bank clerk who has to add up columns of figures, it is manifestly not. The same applies to book-keepers in general, clerks, dress fitters and others in occupations where vertical movements of the eyes are as common or commoner than lateral movements. But even with the mass of people, who wear glasses for reading, I am not sure that Mr. Percival is right. In reading a column of the newspaper, we make considerable vertical excursions of the eyeballs but only very small lateral ones, and even in ordinary books, the extent of the printed matter is more than one and a half times in depth what it is in width. Reading at a distance of 13 inches or 14 inches the head makes very little movement, and there seems no reason for believing that the eyeballs roll more from side to side than they do up and down. In glasses for outdoor use there is more to be said for Mr. Percival’s view, but even here the bulk of the movements to get new direction are effected by the head rather than the eyes, and one is frequently looking up and down as well as sideways.

Yours truly,

J. H. TOMLINSON.

EGHAM.

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—Owing to the courtesy of Mr. Tomlinson I have been allowed to see his criticism of my paper. I fully admit that the criticism is just in some special cases such as bank clerks, but I adhere to the opinion I expressed for those one usually meets with.

I find that I take two seconds to read a line of this journal, so I have to make every two seconds a to and fro lateral movement, *i.e.*, a slow movement to the right followed by a rapid resilient, jerk to the left in order to start a new line. The length of these lines is about 11 cm., a distance occupied by 28 lines in height, so that the downward movement is in the first place unidirectional, and finally only 1/28 of the extent of the lateral movement in the same time. This is the reason why I maintain that when reading it is important that the rapid lateral movement should be made by the eyes, and the vertical depression should, when necessary, be attained by depression of the head.

I am, however, very grateful to Mr. Tomlinson for drawing attention to the special cases in which a rapid vertical movement is required.

Yours faithfully,

A. S. PERCIVAL.

CLASSIFICATION OF DISEASES OF THE CHOROID

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—In the September number of the *Brit. Jl. of Ophthal.*, you publish a paper by Mr. Hepburn on the "Classification of Diseases of the Choroid," in which he specially attacks my attempts at classification of diseases of the macula, for which he says: "There is no justification," and accuses me of "confusion of thought."

Mr. Hepburn's paper was read before the Ophthalmological Section of the Royal Society of Medicine, and in the discussion which followed I made a reply, which, whatever its merits, showed that I neither accepted his criticism nor agreed with his conclusions. The publication of his paper without my reply might lead your wider field of readers to suppose that there was no other side to the question. I should be glad, therefore, if you would publish this letter.