NOTES

VOLUNTARY EVERSION OF THE UPPER LID

BY

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GLASGOW.

Voluntary nystagmus I have seen, but the following trick appears to me so unique that I think it is worth recording.

A.B., male, 30 years of age, mechanic, came to the Glasgow Eye Infirmary on June 22 last to have a "fire" removed, and my attention was drawn, by the acting house surgeon, to the following manoeuvres.—The patient was seated in front of me with his hands on his knees, and by forcible action of his facial muscles alone, was able to evert the upper lid of either eye separately, or together, as desired, the cartilaginous portion of the lid being completely everted and left so. Closing his eyes and his mouth so as to get his facial muscles, as it were, stiffened, and then shutting his mouth and contracting forcibly the facial muscles below his eye or eyes, as the case might be, and including the orbicularis palpebrarum, he seemed to force the lower lid under the upper lid and so levered the latter upwards into the position of eversion. He informed me that he had acquired the trick in his childhood and had kept it up.

INTRA-OCULAR HAEMORRHAGE AFTER OPERATION FOR GLAUCOMATOUS CATARACT: RECOVERY WITH USEFUL SIGHT

BY

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Useful sight after intra-ocular haemorrhage following operation for cataract and glaucoma may be said to be almost unknown. In my experience it certainly has been so. Most authors recommend enucleation for it. In the case now recorded this was under consideration. The result of an iridotomy, performed 5½ months later, was satisfactory and the case appears worth recording. I have to thank Dr. S. K. Ganguli, senior house surgeon, for his care of the case and for keeping the notes.

A Mahommedan coachman, aged 50 years, apparently a healthy man, was admitted on July 6, 1916, for glaucomatous cataract in the R.E. There was a history of gradual loss of sight for three months with sudden acute pain three days previously. There was
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