CORRESPONDENCE

PERIPHERAL AND CENTRAL DISTURBANCES OF
THE VISUAL FIELDS. AN ASPECT OF
DI-OPHTHALMOLOGY

To the Editors of The British Journal of Ophthalmology.

Dear Sirs,—Although Dr. N. A. Stutterheim is to be congratulated upon the success of his treatment in the three cases he describes, tiring and laborious though it must have been both for doctor and patient alike (83 sessions for the first case, 43 for the second and 21 for the third), one cannot help feeling that equally satisfactory results might have been obtained by a variety of other methods of surgery.

In spite of the negative "neurological" reports in Cases 1 and 2 (no such report is given in Case 3) any impartial reader with a mere nodding acquaintance with the elements of neuro-psychiatry must, after studying the clinical data relating to these cases, come to the conclusion that a psychogenic basis for the symptoms described is more than probable. It must, of course, be admitted that convergence insufficiency is a common finding in ocular psycho-neurosis, and further that such a defect is amenable to treatment by means of exercises. Moreover, if such a defect is associated with other "functional" visual anomalies, its cure by a sufficiently persuasive practitioner may lead to the cure of the associated visual anomalies also. But from the results of such therapy it cannot be concluded, as Dr. Stutterheim has, that the convergence insufficiency was the essential cause of the ocular symptoms.

With regard to Case 3 it would appear that the ophthalmologist who first examined the case was of the "alarmist" type, and as often happens in such circumstances, symptoms which are at first slight soon assume gigantic proportions. This case would appear from the available data to be one of mild spasm of accommodation such as might be rapidly cured by a short course of atropine drops.

As far as the symptom of photophobia (as described in Case 2) is concerned, necessitating the use of dark glasses, one has come to regard a patient who, in the absence of any ocular disease, wears dark glasses, especially if he insists upon keeping them on when he enters the usually dim light of the ophthalmic consulting room, as either a person who is grossly absent-minded or else one who is suffering from photophobia of "functional" origin.

Improvement of visual acuity as a result of convergence exercises
in a case of convergence insufficiency and/or heterophoria is, in my experience, not uncommon, especially in those cases which demonstrate definite ocular neglect or suppression of one eye. But even in cases in which the visual acuity is slightly defective in both eyes (in the absence of organic cause) a course of exercises, by stimulating the patient’s visual perception, may improve his visual acuity. In such cases one would expect to find a generalised depression of visual acuity over the entire field which may well be sufficient to cause a slight “contraction” of the peripheral field. This, however, will not explain the gross bilateral field contraction described in Case 1 in the report of the second ophthalmologist given on p. 724 before convergence exercises were commenced. His description of the fact that “the patient walked about the place without difficulty, totally unlike a person who had a visual field contraction as is shown on the visual field charts”—can only have one of two explanations—either the visual fields were incorrectly examined or else the patient was an hysterical or a malingerer.

It is a pity that such enthusiasm for a particular form of therapy—a form of therapy indeed of the greatest value in suitable cases, should allow an authority as great as that of Dr. Stutterheim to attach such fantastic labels to cases which are clearly psycho-neurotic in origin, and to add such a nebulous term as “di-ophthalmology” to a branch of medicine which is already overladen with verbose terminology!

I am, Yours faithfully,

T. Keith Lyle.

42, Charles Street, W.1
January 5, 1948.

NOTES

Chengtu Eye, Ear, Nose and Throat Society, China

THE Chengtu Eye, Ear, Nose and Throat Society celebrated its tenth anniversary on Dec., 20, 1947. Dr. T. H. Lan, professor of biochemistry, West China Union University, was invited as the guest speaker. He spoke on the biochemistry of blood in patients suffering from malignant tumours. Drs. K. C. Lang and E. Chan reviewed the history and progress of the society during the past decade. A photograph was taken to commemorate the eventful occasion and a dinner party concluded the session.
PERIPHERAL AND CENTRAL DISTURBANCES OF THE VISUAL FIELDS. AN ASPECT OF DI-OPHTHALMOLOGY

T. Keith Lyle

*Br J Ophthalmol* 1948 32: 191-192
doi: 10.1136/bjo.32.3.191

Updated information and services can be found at:
http://bjo.bmj.com/content/32/3/191.citation

These include:

**Email alerting service**
Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

**Errata**
An erratum has been published regarding this article. Please see next page or:
/content/32/4/256.full.pdf
/content/32/4/256-a.full.pdf

**Notes**

To request permissions go to:
http://group.bmj.com/group/rights-licensing/permissions

To order reprints go to:
http://journals.bmj.com/cgi/reprintform

To subscribe to BMJ go to:
http://group.bmj.com/subscribe/
DEATH OF MR. GEORGE F. PULMAN

As we go to press we learn with great regret of the death of Mr. George Pulman. He had been in poor health for some years but never was too ill to attend to the many matters which arose out of printing and publishing the British Journal of Ophthalmology.

His father was the printer of the Ophthalmoscope when that Journal was started, and the British Journal of Ophthalmology wisely decided to make no change in the printer.

Mr. Pulman was mainly concerned with the Journal work. We owe a very great deal to his interest and the accuracy of the work of the firm generally. We shall miss his kind co-operation and would offer our deep sympathy to his relatives in their bereavement.

The editors naturally often came into contact with Mr. George Pulman and his brothers and it is good to know that his three sons are now actively engaged in the business.
Outside his profession he was interested in all good causes, but his chief interest lay, perhaps, in art, and he was President of the Otago Public Art Gallery Association.

In 1918, his work for the community was recognised by the award of the C.M.G., and, six years later, by the bestowal of a Knighthood.

The words of the present Dean of the Otago Medical School sum up the character of one who will long be remembered by his colleagues.

"His contribution to Medical education in New Zealand was monumental, and, for a generation, he gave himself unsparingly, without thought of financial reward, to the leadership of the Medical School. His foresight, wisdom and breadth of vision were instrumental in raising the school from obscurity to its present position. His hospitality and kindness to staff, to students, and to patients were proverbial, and benevolence was the keynote of his nature."

NOTES

Appointment

Air Vice-Marshall P. C. Livingston has been appointed Director-General of the R.A.F. Medical Service.

* * * * *

Edinburgh Post-Graduate Board for Medicine

A series of post-graduate lectures and clinical demonstrations on Ophthalmology will be held during the period May 17 to May 29, 1948. The class is intended for graduates specialising in this subject, and the number will be limited to a maximum of 20. The meetings will be held in the Ophthalmic Department of the Royal Infirmary, Edinburgh. Fee, 8 guineas.

Enquiries and applications for enrolment should be addressed to:—The Director of Post-Graduate Studies, University New Buildings, Edinburgh, 8.

* * * * *

Corrigendum

In Mr. Keith Lyle's letter, March, 1948, p. 191, the last word of the first paragraph should read "therapy," not "surgery," as printed.

* * * * *

Sociedad de Oftalmología de Guadalajara

This Mexican Society of Ophthalmology was duly constituted on November 27, 1947: among its activities will be an active campaign in the prevention of blindness.