Among his most important early writings were papers on the use of mercury inunction in iritis; bulb-shaped probes in lacrimal obstruction; extraction of soft cataract by suction, an operation which he practised most successfully using a suction curette of his own devising. All through his life he was a steadfast upholder of simple extraction of cataract without iridectomy making the corneal incision midway between the upper corneal margin and the upper level of the pupil. In 1893, he delivered the Bowman Lecture with this as his thesis. At the meeting of the British Medical Association in Leeds in 1889 he delivered the address in Surgery on "Detail in Surgery."

Teale was a great sanitarian and a pioneer in house sanitation and was for many years President of the Yorkshire Association of Sanitary Inspectors upon whom his high ideals had a very marked influence. Months of experiments and research into the economic aspects of coal combustion resulted in the now well-known Teale "Fire Grate" (since somewhat modified by his eldest son) which created a revolution in the design of the old wasteful fire grate, and a paper on this subject in 1888 procured for him the Fellowship of the Royal Society.

Enthusiasm, simplicity, and gentleness of character were the outstanding features of a charming personality. Teale's one idea in his professional work was the good of his patient and to that he gave all his thought and energy. Money he never troubled about. Reputation for himself he never studied—the only reputation he cared for was that of his profession or of an operation which he knew to be valuable.

To the very last his enthusiasm was remarkable; he was keenly interested in everything about him. Fishing was his one great hobby and recreation. He will be greatly missed in Leeds and Yorkshire where his kindly interest and sympathy in every form of social service was never failing.

H. SECKER WALKER.

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CASE OF IMPLANTATION CYST OF IRIS AND CILIARY BODY

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—The interesting case of "Implantation Cyst of Iris and Ciliary Body" in your issue of November, communicated by Dr. Barrie Brownlee, gives one to think. It no doubt resulted from epithelial cells being carried into the
globe by means of a too deeply inserted suture during the operation of advancement, and the writer comments on the frequency with which the sclera has been completely perforated by the needle during such operations.

I am sure I have done it in the past, and have had many an anxious moment wondering if I had done any serious injury to the globe, always having in my memory the account of a young lady, who, very sensitive about her appearance owing to a disfiguring squint, went to London, unknown to her parents, for operative treatment at the hands of an ophthalmic surgeon, who, unfortunately inserted a suture too deeply, with the result that the eye became infected and had to be removed.

The odd thing, to my mind is, that so seldom any harm results; rarely does an eye become septic after an operation for squint nowadays, and an implantation cyst is rare indeed.

But, thanks largely to Bishop, of Chicago, any risk of inserting needles too deeply into the sclera and of also causing implantation cysts has been entirely abolished by, what I have found, a far better and more accurate method.

In the old advancement operation, besides the above risks, there was a good deal of guessing, one cut off a variable length of the tendon and one stitched the remainder forward, so as to produce a result as near perfection as one could, but that result was often very uncertain, and one wished that one had cut off a little more or a little less of the tendon, or had inserted the sutures into it a little further back or not quite so far.

When it came to removing those sutures a few days later, it was not always easy for the surgeon or pleasant for the patient in spite of the assistance of cocain with adrenalin. But tendon tucking, in lieu of advancement, is, with Bishop's instrument, another thing.

It is a most fascinating piece of mechanism, one sees quite accurately what one is doing and the amount thereof, and, the more I use it, the more satisfied and charmed I am with it. The rectus tendon should be thoroughly exposed and defined, and care should be taken that the "prongs" of the tucker only take up the tendon and do not catch in any of the neighbouring tissue, or there may be a little difficulty in detaching it at the end of the operation.

I am greatly indebted to Col. Elliot—always ready to help the novice—for my knowledge of the method; he not only gave me valuable hints about it, but actually lent me the "tucker" he had brought from America to try; he also made the valuable suggestion that, instead of tying the tuck above and below with catgut, one should use buried silk sutures for the purpose, and, having tried both, I now always use silk, and find I can tie up the tuck much more closely and firmly therewith than I could with catgut.
Col. Elliot made another valuable suggestion that the silk sutures in the tuck should be touched with tincture of iodine to render the assurance against septicity doubly sure.

I have followed his advice in this particular also, except in one case, in which I entirely forgot it, with the result that it did no whit worse than the others.

I have so far this year done eleven tuckings, all in private. In the last thirty-four years, though I have done many advancements, I cannot say I ever really liked the operation, and I have many times disliked it. Tendon tucking with Bishop's instrument is very fascinating.

Yours faithfully,
S. JOHNSON TAYLOR.

NORWICH,
Nov. 9th, 1923.

NOTES

Death

We regret to announce the death, on November 15, at Ellerslie, Chichester, the residence of his sister, of GEORGE THOMAS BROOKSBANK JAMES, of London and Otterburn, Eastbourne, son of the late William James, of Otterburn Tower, Northumberland, aged 56 years. The deceased gained the entrance scholarship to Westminster Hospital and took the F.R.C.S. in 1896. He was Surgeon to the Royal Eye Hospital, Southwark, and Ophthalmic Surgeon to Westminster Hospital. He held the posts of Honorary Ophthalmic Surgeon, Princess Alice Memorial Hospital, Eastbourne and Senior Clinical Assistant at the Royal Westminster Ophthalmic Hospital. He was author of "Addenda to Descriptive Catalogue of Westminster Hospital Museum," 1898-99 and joint author for 1900; "Three Cases of Juvenile Tabes"; "On the Measurement of the Stereoscopic Visual Acuity"; "The Treatment of Gonorrhoeal Conjunctivitis in the Adult" (with J. Stroud Hosford); "The Operative Treatment of Strabismus"; and "The Operative Treatment of Glaucoma: a new Method."

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Appointments

DR. WALTER B. LANCASTER has been elected President of the American Academy of Ophthalmology and Oto-Laryngology,
CASE OF IMPLANTATION CYST OF IRIS AND CILIARY BODY

S. Johnson Taylor

*Br J Ophthalmol* 1924 8: 45-47
doi: 10.1136/bjo.8.1.45