DISABILITY CONSEQUENT ON BLOCKAGE OF A BRANCH OF THE CENTRAL RETINAL ARTERY

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

DEAR SIRS,—A recent experience in County Court on a compensation case in which a blockage of the superior branch of the R. retinal artery was allowed as accidental in a man aged 37 years prompts me to ask if any one can give experience of working disability, discomfort or confusion persisting in such cases. The R. lower field was abolished and the macular area perhaps partly involved. It was only on slightly flexing the head that 6/6 (6/5 part) was secured. On throwing the head back to the slightest degree the central spot on the screen was lost. This is three years after the lesion. I saw him the day after the lesion, which came on immediately after lifting a heavy weight. I argued that the frequent and sudden changes from binocular to monocular vision would be more disconcerting than a constant black out such as one gets in total loss of one eye or in a lateral hemianopia. The man's story of great discomfort in carrying heavy weights on his shoulder or engaging in work that made it necessary to look upwards bore this out. A personal experience of a close observer in such a lesion would be invaluable if such could be got.

I am, yours truly,

A. CHRISTIE REID.

NOTTINGHAM.
July 19, 1946.

NOTES

Appointments

MR. D. D. STENHOUSE STEWART has been appointed Ophthalmic Surgeon to the Hull Royal Infirmary, and Mr. S. J. H. Miller, Assistant Ophthalmic Surgeon to the same.

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University of Glasgow
Department of
Ophthalmology
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DURING September and October a series of meetings will be held in the Department on Wednesdays at 8 p.m. The general arrangements will be similar to the series held last year. Tea will be served after the paper and a discussion will follow. The meetings will be open to all medical practitioners and senior students interested in Ophthalmology.

September 11, Prof. W. J. B. Riddell—"Irregular Dominance in Hereditary Nystagmus"; September 18, Dr. W. O. G. Taylor—"Etiology and Treatment of Paralytic Squint"; September 25, Dr. J. B. Gaylor—"Electroencephalography in Retinal Disease";