and congenital retinal folds; and finally, radiational injuries from intense light and from lightning. Contrary to generally accepted teaching, it is suggested that some part of the short wave emission may reach and be responsible for damage to the retina.

Since it describes or mentions the fundus changes which have been observed in a whole host of general medical conditions, this book will be welcome to the ophthalmologist. A valuable, but by no means comprehensive bibliography is appended to the section on each disease discussed; through this it is possible to follow up aspects which one may consider too briefly described, such as genetics in the sections on hereditary defects and the pathology of many conditions.

To the general physician too, this book should be useful, and altogether it may be warmly welcomed as a painstaking and carefully thought out contribution to that ever widening field wherein ophthalmology and general medicine are recognised to overlap.

CORRESPONDENCE

POST-OPERATIVE SECURITY IN CATARACT CASES

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

DEAR SIRs,—The paper by Mr. T. G. Wynne Parry on "Post-operative Security in Cataract Cases" (*Brit. Jl. Ophthal.*, September, 1947) is of unusual interest. Dealing with ignorant unco-operative native patients one is never surprised to see the morning's cataract case sitting outside in the afternoon sun, so any method which offers added security in the closure of the corneal wound will attract attention. But surely the shutting off from view of the periphery of the anterior chamber for four or five days or perhaps longer is a disadvantage? A small hyphaema may be absorbed in that time, a point of significance if this complication is to be treated statistically; also an early hypopyon may be missed and time lost before resorting to subconjunctival penicillin.

Relying on rapid sealing of the conjunctiva to the sclera I have for some time been using a subconjunctival approach (*East Afr. Med. Jl.*, May, 1946). Briefly, an horizontal incision less than the width of the cornea is made in the conjunctiva some 5 mm. above the limbus, and through this the conjunctiva is undermined all round the upper half of the cornea, the separation being no more than will allow the blade of a scissors to pass easily. Worth's

muscle forceps is then placed on the limbus at right angles to the 12 o'clock meridian with one blade superficial and the other deep to the conjunctiva. When locked this forceps gives excellent fixation and a keratome can be passed beneath the blades without the globe rotating, or the anterior chamber can be opened with a B.P. No. 15 knife "ab externo." The rest of the operation is on established lines for the "keratome-scissors" section except that the outer blade of the scissors is passed beneath the conjunctiva. I usually place a mattress suture in the conjunctiva before making the corneal section; when tied it puts a certain amount of tension on the conjunctiva and so helps to keep the edges of the corneal wound in apposition.

I believe that the protective cushioning effect of the intact conjunctiva over the corneal wound prevents painful stimuli which must otherwise occur as the eye turns and the wound edges are rubbed by the lid. Certainly patients seem more comfortable than with the Stallard-Liégard corneal suture. As the section is more "limbic" than "corneal," the ultimate result is an invisible scar.

I am, Yours faithfully,

A. J. BOASE.

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October 20, 1947.

NOTES

A SLIP insertion in the August and September *Ophthalmic Literature* issues of the Journal drew attention to the subscription for "Ophthalmic Literature" which starts on January 1, 1948. It is £3 3s. per annum, and, if included in the annual subscription to the *British Journal of Ophthalmology*, the total is £5 5s.

We understand from the manager that though orders have come in regularly since the proposal was announced the response on the whole has not been quite up to expectation. The Journal cannot make a present of "Ophthalmic Literature" to its subscribers as Monograph Supplements have been supplied in the past. The former is a regular quarterly production, the latter appear at sporadic intervals and rarely more often than once a year.