least sub-iridal exudate. How are we to explain their appearance? " He proceeds to recapitulate the facts regarding the blood supply by reflex action, and points out that if the centripetal peripheral excitation becomes abnormal the centrifugal action caused by it becomes also abnormal and is followed by an abnormal circulation. " So when an infective process strikes the iris tissue it necessarily irritates in an abnormal way the circular sympathetic nervous plexus contained in it. This irritation of the sympathetic, transmitted to the ophthalmic ganglion or to the Gasserian ganglion, or possibly to other ganglia farther off, brings about reflex vaso-dilatation of the ciliary arteries, increased blood supply, increase of intraocular tension, and the glaucomatous state." Then again, after dealing with the effect of treatment, preventive and otherwise, Abadie asks, " Why does iridectomy cause the disappearance, in such a remarkable way, of these secondary complications (in this case it must be remembered that the glaucoma is the secondary complication referred to), the prognosis of which, without iridectomy, is absolutely hopeless." He answers his question in the following words, which the reviewer has thought should be carefully considered by ophthalmologists in order that their correctness may be confirmed or denied: " In removing a part of the iris tissue by iridectomy we are taking away a part of the sympathetic nervous tissue which it contains. We are, in fact, performing an iridal sympathectomy. We are cutting the nerve circuit. . . . Once this circuit is cut, things become normal, the peripheral centripetal irritation being no longer transmitted and the centrifugal vascular disturbance caused by it in turn disappearing."

ERNEST THOMSON.

CORRESPONDENCE

A PROTEST

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—I feel sure that many of the shareholders in the company owning THE BRITISH JOURNAL OF OPHTHALMOLOGY will agree with me in entering a strong protest against the attack upon Dr. Edridge Green which appeared in the editorial columns of their journal last month. It is, moreover, inconceivable, at least to me, that this infraction of the dignity of a publication whose sole aim is the advancement of our science, could have appeared with your sanction, Sir, as Editor. Your accomplishments, as an experienced Editor, would, I am confident, have assigned the objection-

able annotation to its proper place, namely, the correspondence column, where the writer would have been required to acknowledge his identity, and yet the responsibility has been laid upon you of making a personal attack upon a colleague whose work has been received with the highest appreciation both in Europe and the United States. The result can only be that an entirely false impression will be created among our foreign colleagues as to the position which Dr. Edridge Green holds as an authority upon colour vision among his colleagues in this country. It will be a poor day for science if so reprehensible a means, as here portrayed, for expressing a difference of personal opinion, were to become common.

I am, Sir, Yours truly,

PERCY DUNN.

WIMPOLE STREET, LONDON, W.

March 8, 1922.

[We refer our readers to the annotation in question and leave it to them to judge if the above censure is justified. In our opinion the comments are a fair scientific criticism.—EDITOR.]

COLLOSOL ARGENTUM (FOR THE MEDICAL PROFESSION ONLY)

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—In your last issue a letter from Mr. R. R. James calls attention to and criticises a circular booming the above drug in the cure of ophthalmia neonatorum by dropping a solution of it into the conjunctival sac. He asks if it has been tried at St. Margaret's Hospital for ophthalmia neonatorum. In reply, I may say that it has been extensively tried and found to be of little or no value in weak solutions, and in strong solutions causes pain and irritation without any advantage over other silver preparations. It is also our experience that unless silver preparations are rubbed into the conjunctiva they do not produce the desired result.

Yours faithfully,

M. S. MAYOU.

HARLEY STREET, LONDON, W.

To the Editor of THE BRITISH JOURNAL OF OPHTHALMOLOGY

SIR,—I am greatly obliged to Mr. R. R. James for calling my attention to some extracts from a paper of mine in the *British Medical Journal*, 1915, Vol. I, p. 104, published in a brochure