Elliot (Madras)—condemned Smith’s operation before they saw Smith do it (I think I am correct in this). They tried the operation with only a description to guide them.”

I feel sure that if Lt.-Colonel Fisher will kindly re-read what I have written on the subject in The Indian Medical Gazette, May, 1906, and in subsequent numbers of the same journal, he will find that he is mistaken in this statement, at least, so far as I am concerned. I have never condemned Colonel Smith’s operation either before I saw him do it or since. It is true that I criticised some of the statements put forward in support of the procedure, and that I persistently asked for a presentation of accurate statistics on which a right judgment of the value of the operation could be formed, but as to the procedure itself, I kept an open mind and urged others to do the same. I travelled over 3,000 miles in order to see Colonel Smith perform the operation. I then went back and tried it on between two and three hundred cases of my own, and eventually decided that I could get better results by the method to which I was accustomed, but even then I did not abandon the attitude which I had first taken up, and which I have outlined in the preceding paragraph.

In cataract extraction, as in every other operative procedure, individuals will prefer different methods, and they can do so without in any sense condemning those which do not appeal to them. The case for the intra-capsular operation will rest not on the statements of any one man, but on the experience of surgeons generally. Such experience will be influenced largely by the production of careful statistics on the one side or on the other. That was my position eleven years ago, and is so still.

Yours truly,

R. H. ELLIOT,
Lt.-Col. I.M.S. (Retired.)

WELBECK STREET,
CAVENISH SQUARE, W.,
December 17th, 1916.

TRANSILLUMINATION.

The Editor of The British Journal of Ophthalmology.

DEAR SIR,—I have read the “Memorandum on Transillumination,” by George Young, in the November number of The Ophthalmoscope, and can testify to the efficiency of the electrically-lighted ophthalmoscope for this purpose.

Such an examination can, however, be made still more readily with the May Electric Ophthalmoscope. This instrument is, like all other electric ophthalmoscopes, a modification of Dennett’s model. It differs from the others in the absence of the usual reflecting mirror;
this is replaced by a solid rod of glass which acts both as a condenser of the rays of light proceeding from the lamp, and as a reflector of these rays by means of the upper prism end of the glass rod; as a result of this innovation there is unquestioned superiority of illumination, as compared to that of any other electrically-lighted ophthalmoscope.

This illumination is so satisfactory that if a small piece of rubber tubing (⅛ inch long) be slipped over the lamp, the pupil can be transilluminated by applying the end of the tubing to the cutaneous surface of the lids and pressing against the eyeball; thus no local anaesthesia is necessary; there is no contact with the sclera; and the procedure is, therefore, free from any discomfort to the patient.

I agree with Dr. Young that a special instrument for transillumination is unnecessary.

Yours very truly,

CHARLES H. MAY.

NOTES.

Deaths.
We regret to announce the death of Lieut.-Colonel Sir Frederick S. Eve, which occurred at his London residence, after a very brief illness, on December 15th. Sir Frederick was a general surgeon of high repute, and he was once ophthalmic house-surgeon to St. Bartholomew’s Hospital, and from 1888 to 1889 was lecturer on ophthalmic surgery at the London Hospital. He received the honour of knighthood in 1911. At the time of his death Eve was Vice-President of the Royal College of Surgeons of England.

The world and ophthalmic science are the poorer by the loss of Wendell Reber, whose death from pneumonia took place at the end of December last. We hope to publish some details of the life of this eminent American ophthalmic surgeon, of Philadelphia (who had many friends on this side of the Atlantic), in a subsequent number.

The deaths of the following American ophthalmologists are also announced:—E. H. Grannis, of Menominee, Mich., aged 62 years; H. Weynant, of Philadelphia, aged 47 years.

Munition Workers. The Lancet (9th December, 1916) calls attention to the most recent Memorandum of the Health of Munition Workers Committee (noted elsewhere,