Emergency Ocular Surgery. (Chirurgie oculaire d'urgence.)
“La Pratique de la Chirurgie de Guerre aux Armées.”

The chapter on ophthalmic surgery in this text-book of military surgery is written by M. Landolt. It is intended to guide medical men at the front who are not specialists as to what cases they should deal with and what cases can more safely await the intervention of the ophthalmic surgeon. A concise account is given of the various treatments, operative or otherwise, that are necessary in the former class of case.

We do not find much to criticise. The author believes that lesions affecting the ciliary body are especially dangerous as regards sympathetic ophthalmia, a view not so generally held as was formerly the case. In treating lid injuries, he very rightly lays considerable stress on the necessity for careful and accurate suture, a point the general surgeon is rather apt to overlook.

In dealing with infected corneal injuries, he recommends cauterisation with the red-hot squint hook, and adds that this must be carried into the clear corneal tissue. Perforation of the cornea, with escape of aqueous, he does not consider a serious accident. With this opinion we cannot agree, and consider that, in unskilled hands at any rate, the use of pure carbolic acid would be much safer and quite as efficacious.

He describes and illustrates a neat scleral stitch, which while drawing the scleral wound together, at the same time with the one thread slides the conjunctiva over the wound.

Landolt advises excision in early panophthalmitis after a wound in the ciliary region. Evisceration, or some such modification of it as was recently described by Colonel Lister, is probably a better operation in these cases.

The line illustrations are very clear and adequately illustrate the text; the illustrations from photographs are not quite so satisfactory, owing to the paper on which they are printed.

If the rest of the work is as clear and concise as this chapter it should be of considerable service to surgeons at the clearing stations.

E. E. H.


Dr. Glazebrook, the Director of the National Physical Laboratory, gave an address to the Birmingham and Midland Institute on the
4th of December, 1916, which has been printed in the pamphlet under notice.

Although it contains no reference to optical work, it is deserving of notice in all scientific journals for the clear and overwhelming arguments it contains for the fuller endowment of scientific research.

Such endowment, as Dr. Glazebrook rightly points out, must come in the main from public funds, and must not, as has too often been the case in the past, be devoted to working out some point that is of direct commercial value. Dr. Glazebrook's words are so carefully chosen that we cannot do better than quote what he says on this subject:

"Let us note then, in the first place, we must have scientific knowledge. That point I need not labour, but note also that to be successful, that knowledge must be pursued for its own sake. Each of the modern practical applications of science had its foundations in purely scientific work, and to quote Professor Gregory, in his recent book, discovery or the spirit and service of science, was not the result of deliberate intention to make something of service to humanity. It is hardly necessary to illustrate this; let me, however, give one classical example. The discovery of the laws of electromagnetic induction is due to Faraday, and is described in his first three series of 'Experimental Researches,' published in 1831-33. Oersted, Ampère, and Arago had investigated some of the phenomena connected with the magnetic force produced by an electric current, and to Faraday it appeared clear that conversely it should be possible to produce electricity from magnetism, as he put it. It is difficult to picture the world to-day without electric power, and yet the whole development of electric machinery, as we know it, rests on the laws described in these brief scientific papers. Each advance of knowledge brings its benefits to mankind, and in a general way, Faraday may have hoped to be a benefactor to his race by widening the sphere of knowledge, but it was the desire to know the truth which led him on, and to which we owe such tremendous consequences.

"We must have the student of pure research, the genius who goes on his way discovering new truths, irrespective of consequences, laying bare more and more of Nature's secrets and unravelling her mysteries.

"In England we have never lacked such men; our roll of great discoverers has been a glorious one. Too frequently their lives have been hard and difficult, prophets without honour they have lived . . . . The endowment of pure science is essential; without it the attempt to apply science to industry fails." 

E. E. H.

This book, as its sub-title shows, is written for the general practitioner, in the hope that it will save him from the mistake of overlooking cases of glaucoma which he may meet in the course of his work, and in order to put before him a concise account of present-day views regarding the pathology and treatment of glaucoma.

The author follows out the sub-divisions of his subject in their logical order, beginning with the anatomy and physiology of the parts concerned in glaucoma, its pathological anatomy and aetiology, its signs, symptoms, and diagnosis, and, lastly, its treatment.

A work of this kind, in which a discussion of debatable points, or even the citation of authorities, is out of the question, naturally bristles with controversial possibilities; but, aiming, as he does, at a short and concise statement of what he believes to be the views held by the majority of ophthalmologists at the present day, the author is bound to be dogmatic.

In the short chapter dealing with the diagnosis of glaucoma, the author draws a picture of the clinical course of an attack of simple primary glaucoma, of primary congestive glaucoma, and of absolute glaucoma; and then follows a chapter on the signs and symptoms, in which each part of the eye is taken in turn, and the changes which it may undergo in glaucoma are described. Keeping in view the fact that the book is written for the general practitioner, this latter section seems to blur somewhat the two pictures of simple and congestive glaucoma which it is desirable to keep clearly before the practitioner's mind. Perhaps the author presents his facts as he does in order to show that the different varieties of glaucoma are but different stages in one process; but, after all, if eyes are to be saved, the essential thing is that the general practitioner should learn to recognize a case of glaucoma when he meets it; and since the vast majority of cases present themselves in the simple, or in the painful, congestive form, there is a good deal to be said for the traditional method of dealing with these almost as if they were two separate diseases.

The paragraphs which deal with the differential diagnosis of glaucoma from other affections of the eye, might have been elaborated with advantage. The ophthalmic surgeon knows how insidious in onset and how subtle in its manifestations simple glaucoma may be, and since, as Elliot himself insists, early diagnosis is all-important if treatment is to have a chance, would it not have been wise to discuss with the practitioner all the signs and symptoms which may characterise the early stages, and to tell him frankly that if there is
enough in a case to raise a *suspicion* of this disease, it is his duty to refer it to the specialist? There is a paragraph on p. 33 which seems to suggest that if the general practitioner is in doubt as to the diagnosis of such a case, he should keep it under observation until the evolution of cupping of the disc and changes in the field of vision settle the question. Would such advice, if generally followed, be fair to the patient?

In the chapter on treatment, the author has given an excellent summary of the subject in small compass, and, while showing a natural preference for the trephining operation, he does not allow this to crowd out the other accepted forms of operative and non-operative treatment.

The remaining sections deal in an adequate way with secondary glaucoma, and with the congenital and juvenile forms.

A. J. BALLANTYNE.

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NOTES.

**Deaths.**

The death is announced, at the age of 91 years, of von Zehender, once professor of ophthalmology in the Universities of Bern and Rostock.

The deaths are announced from America of the following ophthalmic surgeons:—

H. M. Farquharson, Chicago, 54 years.
A. A. Vibbard, Albany, 48 years.
Roy G. Fisher, Chicago, 33 years.
W. F. Coleman, Chicago.
M. Pitcher, Sardinia, 31 years.
D. B. Farnsworth, Springfield, 67 years.
H. B. Erb, Allentown, 58 years.

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**Applied optics.**

The Minister of Public Instruction in France has recommended the creation of an institute of applied optics, and, in co-operation with the Minister of Commerce, has nominated a commission to draft a suitable scheme.