disease has been of a peculiarly insidious nature and has not, as far as appears, been rapidly progressive in any of the subjects. Cases Nos. 6 and 10 would certainly have been missed by the observer if he had not known the family history, and it might be added that case No. 9, when seen for the first time, entirely omitted to mention the fact that his sister had recently had each eye operated on for glaucoma and that his mother had suffered from the same disease.

I owe a debt of gratitude to Mr. Fisher, Sir John Parsons and Mr. Foster Moore who have collaborated with me in the preparation of this paper and to Mr. Wardale for kindly sending the notes of his cases of which previously I had no knowledge.

A FAMILY HISTORY OF CHOROIDAL SARCOMA

BY

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At the Annual Meeting of the Ophthalmological Society of the United Kingdom held in 1926 I drew attention to the existence of this family history during the discussion on melanomata. The record is now so striking and so complete that I have thought it worth setting out in full. Two generations have been reported previously in Moorfields' records and more fully by Sir John Parsons in the *Trans. Ophthal. Soc. U.K.*, Vol. XXV, but I am able to add two females of the third generation whose records are at Moorfields.

The first case was treated in 1871, a woman, aged 38 years, whose left eye was excised for sarcoma. The case is reported by Collins, Lawford, and Marshall in the *Roy. Lond. Ophthal. Hosp. Reps.*, Vol. VII, p. 389; Vol. IX, p. 42; Vol. XIII, p. 117 (Case 2). She is known to have died seven months after operation from secondary deposits. All this is definite, and there is some less definite evidence showing that her father had an eye removed for some condition, not an injury, and that her twin sister had an eye removed at St. Bartholomew's Hospital, again for something other than injury. Another sister had a tumour removed from the breast at the age of 40 years. I can get no further details of these members of the family. Two daughters of this first case suffered from choroidal sarcoma, the younger having her left eye excised (in 1899) at the age of 19 years, which eye on section contained a typical sarcoma (Collins and Lawford, *Roy. Lond. Ophthal. Hosp. Reps.*, Vol. XIII, p. 117; Case 99). Five years later she died from secondary

deposits of the growth. An interesting feature in her case is the fact that when she was born her mother undoubtedly had the sarcoma present in her left eye. The elder daughter at the age of 38 years, in 1904 had her left eye removed, again the section showing a sarcoma present of an unusual type, fully reported by Sir John Parsons. She actually had secondary deposits present while in the hospital and died in 1905.

More recently two of her daughters each have had an eye removed at Moorfields for choroidal sarcoma. In each case it was the right eye. The elder had her eye removed at 29 years of age

- = Known cases of choroidal sarcoma
- = Suggestive history

in 1918, and, though she kept well for some long time, there was later a rapid dissemination of the growth in many organs and she died in 1922. Her younger sister had her eye removed in 1914 at the age of 19 years. On section it was found that there was an extra-ocular extension of the growth close to the optic nerve head measuring some 4-5 mm. in diameter. In spite of this there has been no recurrence of the growth locally. She has kept in good health and attended her sister in 1922. In 1923, a "lump" appeared beneath the skin of the right arm and this was excised at a London hospital as a ?lipoma. On section it was found to be a typical metastasis of melanotic sarcoma. No further trouble was noticed till 1925 when she was re-admitted there for ?adenitis in the axilla, but no tumour was found, for excision. Later, after discharge, this trouble recurred near the left breast, and another "lump" appeared on her back, and she is now under treatment at the Homoeopathic Hospital for the "lumps" though apparently well in herself. The lumps are subcutaneous, sharply defined,

rather harder than lipomata but elastic, freely movable, painless, and have appeared stationary for over twelve months. She is not losing weight or showing any other signs of dissemination of melanomata.

The diagram of the family tree shows the sequence through the generations, but apart from that striking feature there are other points of interest, *viz.*, the ages; the average age for the five recorded cases being 28.6 years, and the fact that all have died from secondary deposits except one, who after ten years has now shown evidence of dissemination.

It is fortunate that the cases have all come to Moorfields and that, therefore, the clinical and pathological records can be assembled. As Moorfields Research Scholar I have been able to collect the records and in addition to see the earlier reports on the family and Sir John Parsons's note on the history. I am indebted to Sir Arnold Lawson and Mr. Hudson for permission to add the two later cases.

A FAMILY WITH BLUE SCLEROTICS

BY

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AND

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STRAY cases of blue sclerotics are often met with and occasionally found running in a family, but a case of blue sclerotic, described below, with a light blue discolouration of half of the face on the same side as the affected eye is of less frequent occurrence. We therefore include a description of this case along with the hereditary group.

The following are the notes on the various cases examined:

A Mahomedan boy, aged 11 years, was brought to the Sir C. J. Eye Hospital, Bombay, to have his vision tested, as he had poor sight. On noticing the blue colour of the sclerotics his father, who had accompanied him and whose eyes were normal, was questioned about their presence in the family. On his answering in the affirmative the affected persons were examined.

In the family these could be traced only on the side of the boy's mother. He had two sisters who were also affected. The mother of the three children had also blue sclerotics. Her brother who was slightly affected and both her sisters had the same colour about their eyes. The brother had three sons with normal eyes, but both the sisters had the abnormality in their families which