months afterwards when it was found to be normal, though there was a scotoma in each field of vision due probably to partial destruction of the cells in the calcarine cortex.

F. A. Williamson-Noble.


(6) It has been established that recurrent haemorrhages into the vitreous and retina, seen in adolescents, are almost exclusively due to a tuberculous periphlebitis in the retina. Suganuma shows that clinical, pathological and experimental investigations go to prove that this periphlebitis is in general a primary affection in the eye. His findings disprove the view, held by some writers, that this condition arises secondarily from a tuberculous lesion in the anterior portion of the globe by way of the lymph stream, but he admits that this may be a possible mode of origin in exceptional cases. The tubercle bacilli, according to the author, are carried to the eye by the circulation from tuberculous foci in other parts of the body, and in all probability pass into the perivascular lymph space from the post-capillary portion of the blood vessels, when they settle down in the most favourable sites, and form specific nodules round the vein.

Thos. Snowball.

BOOK NOTICES


This, the fifth French edition of May's Handbook, corresponds to the latest, i.e., the twelfth, American edition, of 1927. In view of the numerous manuals and treatises on ophthalmology by French writers, the call for a fifth edition of this book is indicative of its wide acceptance by French students and others. This is no doubt partly due to the author's successful effort to combine brevity and clarity in his writing.

In arrangement this book does not differ noticeably from most small handbooks. It is essentially practical and little space is given to discussion of theories or knotty questions. Moreover, only a very
limited number of the great variety of operative procedures are
described, but these are well and clearly done, and should suffice
for the beginner. The section on Ocular Therapeutics, which deals
with drugs and appliances and "general rules for operations on the
eye," should prove very helpful to students and general practitioners.
It is curious to find in an up-to-date book by an American author,
the old notation of 20/20 etc., and still more curious to find this
reproduced in an edition for French readers to whom measurements
in feet must be purely historical.

The illustrations are numerous and generally good: a few of the
uncoloured figures might be replaced by more modern drawings.
The book is well printed on rather glossy paper; the coloured plates
are well reproduced.

Grundriss der Augenheilkunde. By Prof. A. BRÜCKNER and
Prof. W. MEISNER. 2nd Edition, Pp. XXV + 601 with 221

This book, intended for the use of the student, makes a useful
addition to the textbooks in existence. Its most valuable feature is
the fact that it is essentially dual in nature, being a combination of
a readable elementary textbook and a laconic guide to more
advanced study. On matters of daily experience the book is no
c fuller than the smaller textbooks in English, such as the one by
de Schweinitz, but the discussions on the rarer diseases and on
subjects of theoretical interest, though slight, are sufficient to
remind the student of the vast extent and ramifications of ophthal-
omology, a point not always appreciated by the non-expert.

The book is, of course, not devoid of faults. The subject of
retinal arterio-sclerosis is dealt with in hardly more than a passing
reference; diabetic retinitis is dismissed in a short paragraph, and,
in common with other books, nystagmus is tabulated rather than
discussed. Motor anomalies of the eye, a difficult and important
subject, deserve more than nineteen pages, and the slit-lamp is
certainly entitled to more than two paragraphs in small print.

But these defects do not detract from the distinct individuality
of a book in which room is found for useful and interesting sections
dealing with such subjects as the eye as a double organ, the
biological significance of vision, the social problems of ophthal-
omology, and with the questions of racial hygiene and those of
heredity in their relation to the speciality.

A pleasant feature of the book is its handsome appearance—a
marked contrast to the first edition, which was published shortly
after the war.

The long and interesting Report of the Director, Col. G. W. Heron, C.B.E., D.S.O., on the activities of the Department of Health of the Government of Palestine, contains a section on the ophthalmic service, as usual.

The six Government ophthalmic clinics at Gaza, Ramleh, Nablus, Tulkarem, Acre and Beersheba, continued to function under the expert supervision of the Warden and surgeons of the Ophthalmic Hospital of the Order of St. John of Jerusalem. The following table gives a detailed summary of the work performed by the clinics. As compared with 1926, there was an increase of more than 2,000 new patients whose numbers reached 15,928. The increase is largely accounted for by the serious epidemic of acute conjunctivitis which occurred in the late summer. The total attendances—108,437—were not much greater than in 1926.

The following extracts from the Report for 1927 of the Warden of the Ophthalmic Hospital of St. John indicate the amount of work carried out by the hospital, the relation of the hospital to the Government ophthalmic clinics, and the seriousness with which acute conjunctivitis in Palestine must be regarded.

"The number of new patients seen during the year 1927 was 20,051, and the total consultations 85,564. The number of patients admitted to hospital was 1,391; and the number of operations performed 3,651. Classified according to religion of the new cases 12,998 were Moslems; 3,574 were Christians; and 3,479 were Jews. Of the total consultations 54,859 were Moslems; 14,307 were Christians; and 16,398 were Jews. The number of new patients is the largest yet recorded but the other figures show a slight decrease. The probability of this decrease has been mentioned in previous reports. On account of the activity of the ophthalmic clinics in different parts of the country, a large and increasing number of trichiasis cases are dealt with in their own districts. Further, these clinics sort out and send on to us the intra-ocular cases. In this way the in-patient department of the hospital deals with an increasing number of intra-ocular cases, and as these operations, all things considered, take longer to perform and the patients have to be retained longer in hospital, there is a corresponding fall in the number of operations performed and the number admitted to hospital. And this is as it should be if the country is to benefit to the maximum extent from the skilled staff and the well-equipped hospital of the Order. The year before the inauguration of the clinic scheme 66 per cent. of our operations were for the relief of trichiasis. In 1927 this had fallen to 53 per cent. and the intra-ocular operations had risen proportionately." Acute conjunctivitis,
although endemic or always present in the country, assumes epidemic form shortly after the onset of the hot weather and rages with ever-increasing virulence until the onset of the rains in November. The epidemic of 1927 was even more severe than that of 1926 (which was also a bad year). The acute cases numbered 4,291 and formed 21.4 per cent. of the new cases. During the early months of the year the cases averaged about 60 per month; in May they increased to 101; June, 273; July, 487; August, 1,115; September, 906; October, 639; November, 408; December, 194. The acute conjunctivitis was complicated with corneal ulceration in 752 cases. Of these 280 were perforating ulcers: a dreadful reinforcement to the kingdom of the blind, for the majority of these ulcers do not get to us until the damage is irreparable."

The measures taken for the prevention and early treatment of trachoma and acute conjunctivitis among school children are mentioned in the section of this Report, which deals with the School Medical Service.

Each year more than 80,000 new ophthalmic cases are treated at the various hospitals and clinics and more than 60,000 school children are kept under medical observation or treatment for their eyes.

Giza Memorial Ophthalmic Laboratory. Second Annual Report.

Department of Public Health, Egypt.

The Giza Memorial Ophthalmic Laboratory has been luxuriously designed and equipped for research work, routine pathological examinations, and post-graduate education.

In a country where 90 per cent of the population either are suffering from trachoma, or show traces of the disease, it is natural that great interest is taken in the aetiology of this disease. It is interesting to note that almost immediately after the news of Noguchi's discovery of an organism, isolated from cases of American Indian trachoma, and shown to produce trachoma-like lesions in a certain type of monkey, Dr. Rowland Wilson and Dr. Haig, at the Laboratory, isolated an identical or similar organism from their abundant material in Egypt.

Various new methods of treating trachoma and its complications have very properly been tried in a scientific manner but without any important results.

A number of cases of primary glaucoma have been treated by intravenous injections of hypertonic saline solution, and of calcium chloride solution, also subconjunctival injections of glaucoesan have been tried. In subacute cases from 30 to 55 c.c. of 30 per cent. saline solution were used. An hour after injection the corneae which had been steamy became clear, and the tension fell from about 60 to 30 by the Schiötz tonometer. In chronic cases, while
the tension fell after the injection, it began to rise again after 36 to 48 hours. In all cases operation was performed later. This method of treatment depends on osmosis while calcium chloride intravenously has an inhibitory effect on exudation and transudation. A 10 per cent. solution of calcium chloride to the amount of 10 c.c. was injected slowly into the median basilic vein. The blood pressure was not much altered by this dosage but almost immediately there occurred a great slowing of the pulse rate together with a sensation of heat all over the body and a feeling of apprehension. In the four cases selected for the treatment it required one injection on three to five successive days before the tension was reduced to normal, and another injection was usually required every three to seven days to keep the tension about normal. All these cases were finally submitted to operation.

Hamburger's glaucosan was used, also experimentally, in five cases of chronic glaucoma, it being considered unwise to use a solution containing adrenaline in acute cases, in the light of previous abundant experience of its effect in such cases in raising the tension still higher. The solution employed consisted of dextrorotatory adrenaline (1:500) and methyl-amino-aceto-pyrocatechin (1:100) in equal parts, 0.3 c.c. being injected in each case. The injection produces a powerful vaso-constriction and in doing so forces the blood out of the uvea. This is later followed by a hyperaemia similar to that which occurs in cyclitis and, with it, a reduction in the tension. The treatment was carried out in seven chronic cases. In no case, even with the addition of eserine instillations, did the tension remain at a normal level for more than 48 hours.

Among the routine work of the laboratory about 3,000 bacteriological and about 500 pathological examinations were made. Among the latter was a specimen of schistosomiasis (Bilharzia) of the conjunctiva, which has been described by Sobhy. This case is unique in ophthalmic literature. It occurred in a boy aged 8 years, and appeared as a small tumour firmly adherent to the upper tarsus. At the upper part of the limbus, and encroaching on the cornea there was an oval, flattened, vascular swelling of the bulbar conjunctiva showing several yellowish spots resembling miliary tubercles. Pathological examination showed ova of schistosoma haematobium present in the tissues in large numbers. Terminal spines were well seen in some of them. The eggs were surrounded by a zone of endothelial cells, fibroblasts, and many giant cells. Outside this was a zone of plasma cells. No eosinophiles were present. Ova with terminal spines were present in the urine. The boy was put on a course of tartar emetic lasting for three weeks. After six weeks the condition had practically disappeared.

Two courses of lectures on ophthalmology and ophthalmic pathology are held every year.