PREVENTION OF BLINDNESS

ANNOTATION

Corneal Grafts

It is said of Robert the Bruce that, noticing the spider so well known in folk-lore succeeding, after six attempts, in fixing a thread, he remarked "Now shall this spider teach me what I am to do, for I also have failed six times." For perseverance in an apparently almost hopeless task the spider is worthily rivalled by Mr. Tudor Thomas, whose efforts to obtain clear corneal grafts have lasted nine years. For this long period Thomas has fought against the technical difficulties of grafting one piece of avascular tissue into a similar piece of tissue in such a way as to retain transparency. In seven rabbits, operated upon by the latest and most successful technique, all the grafts healed: one was opaque, one showed a small central clear area and the remaining five were transparent or nearly so. It is true that the history of corneal transplantation is mainly a history of failure and it is true that Thomas's grafts were homoplastic, a method more likely to succeed than when heteroplastic grafts must be used, yet, in spite of all the lions in the path Thomas's work is one of constant progress in the surgical technique of an operation in which everything is against the surgeon. Viewing past efforts of science of all kinds in perspective, even during our own generation, we see that success generally follows effort and we may reasonably hope that what Thomas has succeeded in doing in the case of a rodent may ultimately become one of the many surgical successes when applied to man. Those who have seen Thomas's rabbits will undoubtedly share this hope: the photographs reproduced in the Lancet do no sort of justice to the original rabbits.

REFERENCE

THE INTERNATIONAL ASSOCIATION FOR THE PREVENTION OF BLINDNESS

The Second Annual Meeting of the Board of Governors of the International Association for the Prevention of Blindness was held on October 10, 1930, at the Palais des Académies in Brussels.

The President, Prof. de Lapersonne, was supported by the members of the Executive Committee and of the Bureau of the Secretariat, and there were also present representatives of many...
sympathetic societies, which have become affiliated to the Association, together with a number of well wishers.

The morning of the 10th was occupied by administrative matters, and in his presidential address, Prof. de Lapersonne stated that the work of the Association in this, the initial stage of its career, had been conducted on three main lines, as follows:—first, in the endeavour to find people who were in sympathy with the work and who might help; secondly, in the preparation and issue of a world-wide appeal signed by all the members of the Executive Committee, together with plans for the organization of national committees; and thirdly, in the study of several medico-social problems which come within the compass of the programme of the Association.

With reference to the first, many people had come forward spontaneously with offers of help, whilst support and approval had been received from different countries.

Special mention was made of the valuable assistance given by the National Society for the Prevention of Blindness of the United States through its representative, Mr. Lewis Carris.

The League of Red Cross Societies had given much hospitality, notably on the present occasion, which was that of the XIVth International Conference of the Red Cross.

Amongst the various associations and scientific bodies which had declared their support were the Valentin Hauy Association, the French Society of Ophthalmology, and the Academy of Medicine of Paris.

Her Royal Highness, the Duchesse de Vendôme and the French Minister of Health had granted their patronage, whilst quite recently a sum of 10,000 francs had been granted by the Ministry.

The world-wide appeal, signed by all the members of the Executive Committee, had been drawn up and would be made at a suitable time, but, meanwhile, it was suggested that national committees should be created in the countries which have joined the Association, with general instructions for work on its behalf.

Under the third heading, an enquiry was being made into industrial eye accidents by various oculists practising in industrial areas.

In France, this work is being carried on in conjunction with the General Insurance Committee which includes all the insurance companies of that country and has already yielded much valuable information.

A report on the question of sight saving classes for children has been drawn up and presented to various public bodies, and further work in this direction is being carried out.

Finally, the Association is represented with voting rights on the
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Executive Committee of the Anti-Trachoma League, so that these two bodies will work together without trespassing in any way on their various spheres of action.

In conclusion the President deplored the loss of Prof. Axenfeld, a member of the Executive Committee.

The General Secretary, Dr. Humbert, then presented his report, in which he referred to the difficult time financially in which the Association had come into being, and it was on this account that the issue of the world appeal had not been generally made but issued only to a restricted number of well wishers. The response to this, almost wholly from members of the medical profession, had been generous and very gratifying, considering the small number of people concerned.

Especial mention was made of the invaluable help rendered by the National Society for the Prevention of Blindness of the United States, which has voted a contribution of 1,000 dollars and, in addition, a regular annual subscription.

Besides the support from the various societies to which the President had referred, he emphasized the great help which the Red Cross rendered.

Twenty-three national Red Cross societies had now adhered to the Association, and amongst the Presidents of these, who had become Founder Members of the Association, were H.R.H. Prince Charles of Sweden, the Hon. John Barton Payne (U.S.A.), General Pau (France), Mr. Cremonesi (Italy), and others.

Finally, collaboration with the Junior Red Cross, whose members number over twelve millions, was being planned.

In conclusion, Dr. Humbert laid the greatest stress on propaganda as the key-note not only in the work of the Association but in creating the means by which its work can be carried on.

On the unanimous adoption of the two reports, Mr. Lewis Carris spoke on the work of the American Society for the Prevention of Blindness, and was followed by Mr. Milsom, of the Junior Red Cross Society, who outlined some of the activities in which his Society had been engaged, and showed how its collaboration with the Association had already been established in regard to school work.

An extremely interesting address was then delivered by Mr. C. J. Henderson, the President of the All India Blind Relief Association (the Green Star Society), in which he showed clearly the enormous field of work that lay waiting in India. Blindness in this country is, according to more detailed enquiry, something like three times the amount that the official census returns give and must total quite a million and a half, much of which can be prevented.
The conditions in China were then described by Dr. Lossonaru of the School of Medicine, Tientsin, and a Vice-President of the International League for the Prevention of Blindness in China.

It was impossible not to be impressed with the need for help in this country. Dr. Lossonaru, who has been in practice in Tientsin for 17 years, has worked with the above-mentioned League since its formation in 1924. His investigations show that half a million have lost their sight in China from small-pox alone, constituting 35 per cent. of the total number of blind. Xerosis from faulty hygiene ranks next, although it must be presumed that this is a temporary cause only. Trachoma is the third numerical cause, followed by syphilis (50 per cent. of the population in the town are infected) and gonorrhoea, whilst a common cause is injury to an eye by the pricking of any part of the organ by a relative or quack. The existence of the latter is not surprising when it is considered that there is only one Chinese physician with an Occidental training for every 200,000 inhabitants.

To combat this state of affairs there are, in Tientsin, four dispensaries where vaccination, anti-syphilitic treatment and ophthalmic treatment are being carried out.

There are 191 dispensaries in the interior, which do their best on similar lines in charge of missionaries, who receive eye drugs and vaccine, etc., free.

A communication by Mr. Reinhard describing the causes of blindness in Latvia followed.

The President, Secretary-General and the members of the Executive Committee were then re-elected, together with Prof. von Szily, representing the German Red Cross in the place of Prof. Axenfeld, deceased, and Dr. van Duyse as representative of the Belgian Red Cross.

This concluded the morning session.

The afternoon was mainly occupied by scientific papers, the first of which was the report by the President, Prof. de Lapersonne, giving the results of an inquiry into industrial accidents made by the Association.

The information obtained so far has emphasized the considerable part played by these accidents as a cause of unilateral or total blindness, and the proportionate increase with the progress of industry, as might be expected.

The work is being carried on in conjunction with the Committee of French Insurance, and is directed on three main lines, namely:—(1) to examine by category and order of importance the main causes of eye accidents in industry, (2) the method of prevention against each cause, and (3) to consider the psychological problem of ensuring that the preventive method be carried out. French oculists in suitable areas have examined several
thousand cases and conclude that 25 per cent. to 35 per cent. occur in the metallurgical industries.

The seriousness of penetrating injuries, both with and without the presence of a foreign body in the globe, is shown by the fact that, in from 50 to 60 per cent. of the cases collected, there was functional loss of the wounded eye. Owing to pre-existing infection of the lids, so prevalent amongst natives in Northern Africa, a minor injury has frequently led to working loss of the eye, and this stood as a strong plea for an ophthalmic examination of the worker to be made before employment.

As no ideal method of protection for the eyes had so far been produced, it was suggested that a commission of surgeons and engineers should study this question. The problem of lighting in industry generally was also mentioned.

The paper was well received and was discussed by Mr. Lewis Carris of the American National Society for the Prevention of Blindness.

A contribution by Mr. B. Cridland (Great Britain) was read introducing a simple method of protection against minor injuries of the eye, which had been found of considerable value in Great Britain. The results of an investigation into this class of injury from an economic point of view were also given.

Discussion followed in which Prof. von Szily (Germany) Dr. Humbert (Secretary General), the President, Dr. Pundel (Luxemburg) and Dr. Jitta (Health Committee of the League of Nations) took part.

Prof. de Lapersonne then spoke on sight-saving classes for children with defective sight. After paying a well-deserved tribute to the pioneer work of Mr. Bishop Harman, who was the first to establish a class of this kind in 1908 in London, he referred to what had followed in Germany and the United States. The necessity for the establishment of this special education in all countries was emphasized. The principles which would serve as a guide in the organization and management of such classes were summarized in a résumé, largely based on information given by Dr. Redslob, of Strasbourg, who as School Medical Inspector, working in conjunction with Mr. O. Baumann, Director of the sight-saving class, instituted this innovation 18 years ago.

The visual standard for a candidate, for a sight-saving class in Strasbourg, is 2/10, or below, in the better eye, whilst one who sees only "fingers at 1 metre" in the better eye is sent to a blind training institute.

After discussing methods of teaching, etc., Prof. de Lapersonne concluded with a reference to a communication he had received from Dr. August Helia, of Helsingfors, in which that writer made the following wise comment, "In spite of the great usefulness of such
schools for their pupils, the education they have received will only be effective if they can get work which will enable them to earn their living."

Mr. Lewis Carris, speaking from his long experience as a school administrator, gave an account of similar work which was being done in the United States. There they had recognized the need for extending the benefit of this special education to the country children as opposed to those living in towns, the proportion being greater in the former than in the latter, for reasons not yet satisfactorily explained. They had especially endeavoured to enlist the sympathy of the laity in the work, as well as that of members of the medical profession.

Dr. Humbert referred to the International Organisation for the Campaign against Trachoma, which was formed at Geneva on July 26, 1930, an account of which appeared in the British Journal of Ophthalmology for October, 1930.

Dr. Wibaut (Holland), the Secretary General of the Organisation, Prof. de Lapersonne and Dr. J. Jitta also spoke; all three emphasized the importance and value of co-operating with the International Association for the Prevention of Blindness and with the Health Organisation of the League of Nations.

The session concluded with an interesting address on trachoma by Prof. Angelucci (Naples) in which he discussed the relationship of trachoma, follicular conjunctivitis and adenoidism.

From the interest generally displayed throughout the meeting, it may be concluded that the Association has made an excellent débüt.

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**ABSTRACTS**

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**MISCELLANEOUS**

(1) Collier, James (London).—*The diagnosis of frontal tumours.*


(1) In a very full survey of the subject of frontal tumours Collier discusses the value of the ocular signs in diagnosis.

He does not think that conjugate deviation of the eyes is in any way special to the pre-frontal lobes but considers the sign of value in lateralizing the lesion. Similarly he does not consider papill-oedema of any value either in localization or lateralization.

R. C. Davenport.