tuberculosis of the conjunctiva turned out to be an infective conjunctivitis and was cured by purely local treatment. The last two pages of this article are taken up with the description of a histological examination of a tuberculous eye.

Ernest Thomson.


(3) Put in a nutshell the difficulty encountered by Madame Gourfein-Welt in this case was to decide upon the nature and the consequent treatment of a pathological and suspicious fundus appearance in a relatively good eye (qua vision) when the fellow eye was rapidly deteriorating from a totally different affection. Add to this that the patient was 72 years of age, an "intellectual," and that he had recently had influenza, which might account for the appearances in the fundus, it is easy to appreciate the difficulties. A sudden outbreak of glaucoma in the eye suspected of the tumour, which followed an eighteen months period of "no change" in the appearances, settled the matter; but enucleation was followed by sarcoma of the liver and in a few months the patient was dead. The authoress describes the pathological examination of the enucleated eye and enters into a short disquisition of the difficulties of such cases.

Ernest Thomson.

BOOK NOTICES


In the days of John Hunter a training in anatomy was regarded as the primary essential for the practice of surgery: in the last 50 years the pendulum has swung probably too far in the opposite direction. The reviewer recalls an occasion on which, during the performance of an abdominal operation, the surgeon was saved from disaster, when he proposed to divide, between ligatures, a structure in the small omentum which was obstructing him, by the observation of a colleague, well-trained in anatomy, "that perhaps it would be wiser not to divide the common bile duct."
At the recent Congress of the Ophthalmological Society, the Bowman Lecture on Ocular Movements, and three other valuable papers demanded a better knowledge of the anatomy of the parts which come within the sphere of the ophthalmic surgeon, than it is feared was possessed by many of the audience; we refer to the paper on drainage of the lacrimal sac, to that on secondary complete removal of the optic nerve after excision of the eye for glioma retinae, and to that on the diagnosis and surgical treatment of supra-sellar meningioma. A second edition of Whitnall's authoritative work is specially valuable, and to be commended enthusiastically to ophthalmic surgeons. The book has been brought thoroughly up to date, at the expense of much labour by the author, and the references to new literary matter are numerous. Colour has been added to many of the old illustrations, and many new ones, also coloured, have been included. The volume now extends to 417 pp. The text has been revised throughout; extensions of knowledge have necessitated a considerable addition to Part III and to the Appendix, Part IV, which treats of the nerves and of their cerebral connexions and destiny. How useful and comprehensive this volume is will be appreciated when it is stated that the latest results of the work of Brouwer and of Le Gros Clark up to 1930 are alluded to, and how arduous has been the work of the author by the fact that a bibliography of 33 pages completes the edition.


The important work carried out at this hospital during 1931 is reported by Lieut.-Colonel Strathearn as in former years. The most notable event of the year was the visit of the Archbishop of Canterbury. Seven-and-a-half centuries ago His Grace's predecessor, Baldwin, visited Jerusalem, since when no Primate of England has visited the Holy City until the visit of Dr. Lang. Baldwin, having entered holy orders, was made Archdeacon of Exeter, but the secular duties were distasteful to him, and he became a monk in the Cistercian Abbey of Ford, Devonshire, of which he was elected abbot within a year. In 1180 he was promoted to the Bishopric of Worcester, and four years later translated by Henry II. to the See of Canterbury. In 1189 he crowned Richard king at Westminster. Baldwin successfully asserted the pre-eminence of the See of Canterbury, forbidding the consecration of the Bishops of England by any other than the Archbishop of Canterbury. He followed King Richard in his crusade to the Holy Land in 1190, and died at the siege of Acre in the same year.
As in biblical times the road from Jerusalem to Jericho has certain dangers. In November last as Lieut.-Colonel and Mrs. Strathearn were motoring from Jericho back to Jerusalem they were held up by a gang of brigands, roughly handled, and stripped of all they possessed.

During the year nearly 19,000 new cases were dealt with of whom more than 12 per cent. were blind in one or both eyes. 190 cataract extractions were performed, and 1,600 operations for trichiasis-entropion.

There has been a considerable rise in the price of foodstuffs, bread having risen 6 per cent., meat 12 per cent., and British imported goods 16 per cent. This, added to the scarcity of water, must make life rather trying in Jerusalem.


Methods of treatment are always open to discussion and the author has endeavoured in writing this book to hold the balance between therapeutic nihilism and over-enthusiastic advocacy of certain procedures. In the main, he considers only such remedies as have proved effective in his own hands or in those of ophthalmologists whose opinion is of value.

The first few chapters of the book deal with methods of treatment, considered as a whole, while the remainder deal systematically with the treatment of diseases affecting the different portions of the eye and its adnexa. In the first portion, a particularly good account is given of physical therapy, including phototherapy, diathermy, massage, and X-rays, and there is an interesting discussion about the optimum pH for lotions and drops. Pilocarpine, for example, is best absorbed at pH 4 to 5, while for atropine, eserine and scopolamine, the optimum reaction is pH 7.5. In the section on vaccines, a full account is given of the skin tests and the therapeutic use of tuberculin accompanied by a somewhat unnecessary picture of five bottles, some vaccine and a syringe.

In a book of this character, it is of course easy to point to omissions, particularly as the practice in different countries is bound to vary. It seemed a little odd, however, to find no mention of leeches in the treatment of acute glaucoma and iritis, and no description of that very useful method of applying heat by "hot bathing" though allusion is made to the frequent use of moist hot packs. In describing the treatment of dendritic keratitis, the author advises against the employment of phenol, a drug, which in this country, is widely used with very satisfactory results. In spite
of these and other points, Gifford’s Handbook of Ocular Therapeutics should prove a useful volume to students of ophthalmology and also to those practitioners who, though experienced, may feel they are in danger of slipping into a therapeutic rut. Copper sulphate, for example, has an almost hallowed association with trachoma, dating from the times of ancient Egypt and this, for some reason, seems to prevent its use in other varieties of conjunctivitis. Gifford, however, tells us that he has seen several cases of severe gonorrhoeal ophthalmia under the care of his father which were aborted by one or two applications of blue stone and therefore advocates this method of treatment. It is statements, of which the above is an example, which make this book valuable. It contains much original thought, and is written with zeal tempered by discretion. Its perusal should help those who may have become discouraged by the results of treatment in a disease such as, say, blepharitis or chronic cyclitis, to regain some of their therapeutic optimism and to stimulate to a wider activity those who are content to write month after month, on their out-patients’ papers the doleful words, “Rep. Lotio et Ung.”

CORRESPONDENCE

To the Editors of The British Journal of Ophthalmology.

Sirs,—With reference to your remarks concerning the Annual Report for the Ophthalmic Section, 1930, Department of Public Health, Egypt, published in the Brit. Jl. of Ophthal., Vol. XVI, No. 4, p. 244, I will be thankful if the following remarks are taken into consideration, and the necessary corrections made:

(1) Friday is the only official holiday. Work is not stopped or modified in the hospitals on Sundays.

(2) Regarding the percentage of blindness among hospital cases, it is intended in the future to put down this percentage both including and excluding blindness from cataract cases which have not been operated upon.

Yours faithfully,

E. H. El Mazin Bey,
Director, Ophthalmic Hospitals.