Dr. Riconte singles this chapter out as especially good. Dr. Blatt has been a prolific author of papers both on the continent and in America. His book will be a handy form of reference to many aspects of ophthalmology and we wish it success.

CORRESPONDENCE

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

SIRS,—While admiring the clear account by Mr. MacCallan on “the relationship between conjunctivitis and trachoma,” I would like to comment on his view that trachoma is *exclusively* a chronic disease.

Before the War, as a young assistant in Russian Poland, with my senior, Dr. L. Pines, I examined between ten and fifteen thousand emigrants to the United States per year. Each aspirant was examined as to his eyes after crossing the Russian frontier into Germany, on his embarkation and on arrival at Ellis Island. If rejected at any of these points he was sent home by the Shipping Company free of charge. So the Company’s medical officers only passed candidates with perfectly healthy conjunctivae; even cases of mild conjunctivitis were rejected.

The journey of a successful emigrant took 2 to 4 weeks. I distinctly remember seeing more than once each year emigrants who, having been passed by us, had reached Ellis Island only to be sent back with acute trachomatous conjunctivitis, usually with a heavy pannus of the cornea. Each told the same story. On the 2nd or 3rd day out of port, in the cramped quarters, the eye suddenly flared up, and persisted in this state all the time, curiously, it was usually one eye for a long time, and the other became involved much later. Admittedly they were rarities, but they strongly suggest that trachoma may attack the eye suddenly and violently.

Yours truly,

N. PINES, M.B.

41, PHILPOTT STREET.

E.I., June 11, 1936.