Annual Report of the Government Ophthalmic Hospital, Madras, 1935. Price, 10 annas.

The annual report of the Government Ophthalmic Hospital, Madras, follows the customary lines and contains a mass of statistics, together with some financial details. Section 4 shows the classes of diseases treated both in- and out-patients. Conjunctivitis accounts for a large amount and we note that during the year 157 cases of trachoma were treated as in-patients and 1,337 as out-patients. The incidence of cataract is very heavy: 2,223 cases of senile cataract were treated as in-patients and 3,124 as out-patients. The report also gives details of the training of medical students and post-graduate work. The surgical operations are set out in tabular form.

CORRESPONDENCE

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

SIRS,—Mr. H. B. Stallard, in his article on "Katholysis in the Treatment of Retinal Detachment" published in your issue of January, 1937, states that certain serious complications, *viz.*, cyclitis, iritis, cataract and optic neuritis may follow the treatment of retinal detachment by surgical diathermy. This statement is not in accordance with my own experience, indeed, I have never encountered one of these complications in connection with any case which I have treated by this method. Also, with regard to the localization of the retinal hole in relation to the external surface of the sclera, I have found that this can be accurately done in most cases by means of diathermy.

Yours faithfully,

R. AFFLECK GREEVES.

LONDON,
January 25, 1937.

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

SIRS,—I am interested in Mr. Greeves' letter and his comments to the effect that he has never encountered cyclitis, iritis, cataract and optic neuritis after surgical diathermy in the treatment of retinal detachment. In the *Brit. Jl. of Ophthal.*, Vol. XVII, p. 294, 1933, I reported the histological appearances of an eye successfully treated for retinal detachment by surgical diathermy at St. Thomas's Hospital. The patient died from pulmonary thrombosis 19 days after operation. The operated eye was treated with surface