public taste," is fairly frequently rendered "I have always respected public taste," by Sisters of Mercy and just those nice kindly people who are incapable of suspecting anybody or anything.

The sterner type comes into its own with the recently published Jaeger 1, beginning "Hope they say deserts us at no period of our existence." The first word of this is changed into hops and the reader very often appears as though he believed the statement or at any rate hoped that it was true. Aviators, particularly if they have been flying over sandy wastes, turn the word deserts into a noun and for them of course "hops" have a different significance.

Whether these mistakes can be turned to any practical account in the technique of psycho-analysis is more than doubtful, but their occasional occurrence serves to relieve the tedium of hearing the same familiar sentences read over and over again.

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ABSTRACTS

MISCELLANEOUS


(1) The first of the third series of articles on British Medical Societies, which are a most interesting feature of the *Medical Press and Circular* is indicated in the title of our abstract. Mr. Cargill is to be congratulated on the excellent epitome of the history of the society during its life of 57 years, which he has written. He has obviously taken great trouble in consulting early minute books and the volumes of Transactions and, of course, as he joined the Society when it was only ten years old he can speak with first-hand knowledge of the greater part of its career.

The paper is illustrated by reproductions of portraits of Sir William Bowman and Edward Nettleship together with the Presidential Badge. We hope that all ophthalmic surgeons will read it.

As far back as 1884 a committee was appointed to inquire into the prevention of blindness from ophthalmia neonatorum and a deputation headed by Sir William Bowman and Jonathan Hutchinson waited on the authorities of the Local Government Board. In the Transactions for the following year will be found
the report of this discussion with the Local Government Board. "The Registrar-General could not see his way to advising that the suggestions of the Society be carried into effect, and the L.G.B. representative reminded the deputation that the Board had no power to order Boards of Guardians to do anything, although, he added, the Guardians had always shown readiness in carrying out suggestions." How times have changed in the past 50 years! We should perhaps remind the author that among the original members still alive are Sir Thomas Barlow and Sir George Berry. They are now honorary members and Sir Lindo Ferguson is, as he says, the sole surviving subscribing original member.

R. R. J.


(2) Bhaduri comments on the rarity of corneal involvement in meningococcal meningitis. From 1929 to 1935 about 225 cases of meningococcal meningitis were admitted into the Carmichael Medical College Hospital. Only two cases had corneal complications. The first occurred in a boy of 13 years of age. He was admitted in the first week of the disease in a semicomatose state. A small hypopyon was present in the right eye and faint infiltrates in the substantia propria of the left. Both eyes were congested. Neither eye stained with fluorescein, the pupils were well dilated by atropine, and tension was normal. Two days later the cornea was extensively involved, only a rim in the periphery remaining clear. The boy recovered in about two months. With clearing of the cornea the lens was found to be subluxated and exudates were present in the fundus. Three months later the cornea was clear, tension normal, no deep vessels or precipitates were present; vision was reduced to bare P.L.

The second case occurred in a medical man, aged 37 years. He was fully conscious during the first week. Each cornea showed an almost complete annular opacity which appeared to be in the superficial layers. The opacity gradually increased, and on the ninth day the centre of the cornea became hazy. There was no staining with fluorescein, and no hypopyon was seen.

Paracentesis was performed on the 16th day in both eyes. Turbid fluid emerged. The condition got worse in the left eye and on the 24th day the bulging central portion of the cornea burst. Later both eyes atrophied, but the systemic infection was controlled.

R. R. J.
(3) Charlin (Santiago, Chili).—Neuritis affecting the nasal and other branches of the trigeminal. (Neurite del nasal e neuralgia essenziale del trigemino). Boll. d'Ocul., November, 1937.

(3) Charlin draws attention to a series of cases which have come under his observation in which an acute unilateral rhinitis was accompanied by violent neuralgia affecting all the frontal-orbital region, and a corneal ulcer. The first case was entirely relieved by the application of cocaine and adrenalin. Later cases were not so easily relieved, and the author sought some general cause for them. In one case the hilar glands were shown by the radiogram to be affected and the diagnosis was thought to be confirmed by an intradermal injection of tuberculin (Mantoux's reaction). To the surprise of everyone the injection was speedily followed by complete cure. In a second case the single injection was equally successful. A third case required repeated injection of antigen (antigeno metilico) before the relief was complete.

HAROLD GRIMSDALE.


(4) Pierre Halbron discusses the syndrome of the naso-ciliary nerve (Charlin) and the syndrome of the spheno-palatine ganglion (Sluder). As the abstract on Dubois-Poulsen's paper on the eye and the spheno-palatine ganglion gives a more detailed description of the French views on this subject, it seems sufficient to record some difference of opinion shown in the papers of both authors. Dubois-Poulsen claims the identity of both syndromes; the author points out that the involvement of the anterior segment of the eye in Charlin's syndrome differs from the sympathetic irritation of the eye in Sluder's syndrome. There are painful points in the skin supplied by the naso-ciliary nerve while the ganglion does not possess a cutaneous projection. The nasal congestion in Charlin's syndrome is more marked in the anterior parts of the nose, in Sluder's syndrome the posterior parts are congested. Cocainisation of the anterior part brings on relief only in Charlin's syndrome and cocainisation of the posterior parts only in Sluder's syndrome.

HUMPHREY NEAME.


(5) Tita's case is that of a child whose parents were normal; the father extremely dolichocephalic. The child showed a tower
skull with a bulging occipital region. The left eye had been noted to be prominent for about a year. Vision in each 6/6. Radiograms of the skull showed dolichocephaly with lateral compression of the frontal region and an enlargement affecting all the squamous portion of the occipital. The left sphenoidal sinus was opaque. The child was healthy except for enlargement of the tonsils.

The author discusses the possible causes of the premature synostosis which is the immediate cause of the cranial condition and thinks that it may to some extent depend on the state of the tonsils which may have set up an inflammatory condition of the bone and in its covering in the neighbourhood, and so led to a closing of the sutures. The one-sided exophthalmos depended on the asymmetry of the orbital roofs.

HAROLD GRIMSDALE.

BOOK NOTICES


The object of the author in writing this book has been "to supply an answer to the queries regarding those subjects which form a connecting link between ophthalmology and neurology." In doing this, he has had to write both for the neurologist and for the ophthalmologist, and for the benefit of the one include a good deal of matter which could have easily been omitted, had he been writing only for the other. Chapter I, for example, on "equipment necessary for examination of the eye," would not have been required if the needs of the ophthalmic surgeon alone were being studied. It is rather surprising to read in it that "the small electric ophthalmoscope with a prism reflector is infinitely better than the mirror with a slit."

The material of the book is divided into 17 chapters and one's general impression is two-fold; first, that these include much information not generally available in the ordinary text-books of ophthalmology and, secondly, that where subjects are described which are common knowledge to ophthalmic surgeons, they are described in a fuller manner than is possible in a book limited to ophthalmology. A notable example of this occurs in the chapter on poisons which affect vision. Another point which will strike the reader is the descriptions of conditions which, although of fairly common occurrence, seem to have escaped notice; for example, "neuralgia of the eye," of which the author himself has