the photo-chemical reaction in the retina and to the application of the method for pathological investigations.

REFERENCES

ANNOTATIONS

Sulphanilamide in the Treatment of Trachoma

In the Lancet of October 29, 1938, appeared an article by three members of the Sudan Medical Service on this subject. Kirk, McKelvie and Hussein have tried prontosil album, given in tablet form by the mouth, in weekly courses with a week's interval between each course. The dose of each tablet, $7\frac{1}{2}$ gr. thrice daily (proportionately reduced for children), was selected arbitrarily.

The paper is based on the results in 25 cases of adults. A convenient table allows the main facts to be seen at a glance. The results appear to be encouraging, especially as regards the corneal complications of pannus and keratitis. The treatment is simple and less painful than the local treatment of the disease, but it is, of course, too early to say whether the results will be permanent. It may be noted that cases of trachoma complicated by spring catarrh did not do so well as uncomplicated cases.

Ophthalmologists throughout the world will be anxious for further first-hand reports on the use of this drug in cases of trachoma.

Volume XXIII

With the completion of our 22nd volume this Journal may fairly be said to have passed out of the stage of adolescence. Recently the amount of original material in hand has been greater than usual and the Editorial Committee has considered the question of increasing the size of the monthly numbers. When the project of a British Journal of Ophthalmology was first being discussed in 1916 the hope was expressed that it would be possible to issue a 64 page number every month and even a larger number of pages if thought
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desirable. Up till now it has not been thought advisable to increase the size and in the past it has not always been possible to issue a 64 page number every month. Last year this was done and it is now proposed to issue an 80 page number occasionally. As we have already said the number of original papers in hand seems to warrant this extravagance; and with the first issue of the new year we offer an 80 page number for the first time.

Abstracts

I.—Therapeutics and Operations


(1) Moretti has adopted Poulard's form of artificial vitreous; Mules used spherical masses which were ill-adapted to the sclera after the cornea had been removed and were not infrequently extruded; Poulard has had ellipsoids made with long axis 15 or 17 mm., and the short axis 9 or 11 mm. These fit into the cavity left after removal of the cornea and adjacent sclera, as advised by Mules, and are more easily retained. Poulard at one time kept the cornea intact and found the resulting cavity so large that the stump was unsuitable for Snellen's eyes, and gave it up.

The author has operated in this way for some two years and has had about 75 per cent. successes. He thinks the risk of sympathetic has been greatly exaggerated; he is inclined to think that most, if not all, of the cases recorded were not really sympathetic ophthalmitis. The operation is, in his opinion, to be preferred to either enucleation or evisceration; even in panophthalmitis he has used it successfully, and advises its performance at the earliest possible moment.

Harold Grimsdale.

(2) Bencini (Siena).—Iridenclisis in chronic glaucoma. (Iridencilisis di Holth e glaucoma cronico). Boll. d'Ocul., June, 1938.

(2) The selection of operation in cases of chronic glaucoma is always difficult, and no constant rule can be laid down. The operations most generally selected are those giving a leaking scar, the sclerecto-iridectomy of Lagrange, and trephining of Elliot. The former Bencini dislikes, on account of the large opening in the sclero-cornea. (He does not seem to have tried the more recent forms of Lagrange in which the external wound is much smaller.)