In the past there have been many notable instances of most excellent work having been done in medical matters by men and women in outlying places as well as in the busy haunts of commerce. Jenner's work in the heart of Gloucestershire is an outstanding example; so is that of William Beaumont on the gastric secretion of the Canadian Alexis St. Martin. Francis Adams, of Banchory, spent some of his leisure hours in a Scottish country practice by translating the works of Hippocrates, Paulus Aegineta and Areteus; while coming to comparatively recent times we have the pioneer work of Sir James Mackenzie at Blackburn. We think that there must be much in our own speciality which is observed by both town and country practitioners which is not recorded; partly we suppose because the doctor is too busy to write up his observations at the end of a long day's work, and perhaps also from a feeling of dif- ference and not knowing very well whether his observations are worth sending in to the editors of such a journal as ours. If the latter be the case we may say that we shall be only too glad to publish papers in reason if they are sent to us. We sometimes hear suggestions that the journal contains too much of the results of research work and too little of clinical case records. We assure all whom it may concern that short papers of clinical interest are always welcome.

Many years ago we read in a now defunct periodical an interesting paper of observations which were recorded by an old doctor in country practice. It was his custom to jot down on the counterfoils of his death certificate book the chief facts of each particular case; and he certainly managed to record a good number of out of the way conditions. We do not mean to hint that the ophthalmic surgeon deals largely with death certificates; he doesn't: but it is usually pretty easy to jot down in a note book the chief clinical facts, and to write them up afterwards.

When the writer was a student one of his teachers was never tired of insisting on the fact that the surgery of general practice does not consist in tying the subclavian artery and removing ovarian cysts.

In the same way, the writing of an article for this journal need not mean an elaborate series of statistics, references, biochemical observations and the like. Should the author feel disposed to write just a straightforward account of his clinical experiences and the methods he has used, his contribution will be very welcome.
The Supply of Spectacles

We regret that the notice by the Association of Dispensing Opticians Ltd., which was printed in our advertisement columns last month reached us too late to enable us to comment thereon in the November issue. It is obvious that at the present time some delay in supplying spectacles must arise and the reasons for this are set out in the pages in question and need not be recapitulated here. Ophthalmic surgeons may rest assured that the optical trade will do all in their power to minimize this delay and surgeons will, it is hoped, explain to their patients that the goods cannot be delivered with that speed which was so noticeable before the war. After all the delay is part of a world upheaval and must be endured patiently.

It is worth while pointing out that surgeons can help in this matter by refraining from ordering glasses which have to be made specially, in cases where such glasses are not essential. For instance, a presbyope without signs of eye strain can do with an ordinary presbyopic correction even if an eighth of a dioptrre of astigmatism be present. The total resources of the country in the provision of spectacle lenses are much less than the number required, and the manufacture of out of the way lenses only adds to the difficulties and delays.

ABSTRACTS

MISCELLANEOUS


(1) Maxwell describes the technique he favours for the Hotz operation for entropion due to trachoma. He suggests that the trachoma virus is in the tarsus and that the conjunctiva suffers recurrent inflammation from this source. He believes that post-operative fibrosis in the tarsal plate checks the egress of the virus.

The author stresses the importance of adequate preliminary treatment to clear up active conjunctival inflammation. He uses applications of silver nitrate 1 and 2 per cent. for this purpose. It is important to pay attention to thorough surgical work at the extremities of the elliptical incision which should pass 2 mm. beyond the line of cilia at the inner and outer canthus. An ellipse of skin and a band of orbicularis muscle 4-5 mm. wide are excised and the tarsal plate pared down from near its upper margin to an