ANNOTATIONS

Mr. R. R. JAMES

Mr. R. R. James has now occupied a post on the Editorial Staff of the Brit. Jl. Ophthal. for twenty years. The Directors and Editorial Committee wish to express their very great appreciation of the work which he has done, and they feel sure that the readers of the Journal will cordially agree. We all feel that we have been exceptionally fortunate in having obtained the services of so erudite and widely-read an ophthalmologist to fill the post. He has not only performed the ordinary and laborious duties of an editor with assiduity and meticulous accuracy; he has also contributed original articles on the history of ophthalmology, of which he is a past master; and his genial touch, rich in humour, must often have been recognized in many of the annotations. Special stress must be laid upon the success of the Journal during the past four years of war, when almost the entire labour of running the Journal has fallen upon his shoulders, and has been willingly borne by him. We all wish him much happiness in the future and hope that he will long continue to fill the editorial chair.

Tonometry

To an older generation, the use of a mechanical instrument for measuring the intra-ocular pressure was possibly anathema, their fingers being sufficiently sensitive to give them the required information. Ophthalmologists may now be tougher than they were and their digital pads correspondingly less sensitive, or perhaps they distrust the evidence of their senses, but be this as it may, there is an increasing tendency to use the tonometer, especially in cases where there is a doubtful rise of ocular tension or a desire to test the efficacy of some particular miotic. It is therefore timely that an article should appear in the American Arch. of Ophthal., describing a "checking station" for the standardisation of these instruments, and one could wish for the institution of a similar station in this country. The principal sources of error are friction between the plunger and the sleeve, a flattened or even convex lower end of the plunger, incorrect lever ratio and a wrong curvature of the testing block, which is supplied with the instrument.

Points in applying the instrument such as seeing that it is vertical, and that the patient's eye is looking straight up, are too obvious to need comment, but the need for a careful clinical examination of the eye is not always appreciated, and resort to the tonometer may at times be too rapid. This was brought home to
the writer when he was asked to see a patient with a hazy cornea in whom the tonometer had registered the truly majestic figure of 212 mm. Hg. and immediate operation had been recommended. On examination the case turned out to be one of old mustard gas keratitis, and the tonometer must have been applied to the surface of a protective contact lens which the patient was wearing at the time of examination, the corneal haze being due to the presence of Sattler's veil.

ABSTRACTS

MISCELLANEOUS


(1) Estrada describes the appearance of microfilarias in the vitreous as examined by the ophthalmoscope with a +9 to +40 dioptre lens and by biomicroscopy and the slit-lamp. He discusses the apparent differences in refringency by these methods of examination.

Of 11 cases entoptic phenomena were noted in 7. Microfilarias were found in the anterior chamber in 7 and in the vitreous in 11 cases. Conjunctival hyperaemia and photophobia were symptoms common to all cases. Punctate keratitis was present in 5 cases, perikeratitic growth in 2, iris atrophy in 1 and cataract in 1 case. The author comments that microfilarias are found in the vitreous early in the disease.

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(2) Gallardo and Hardy describe a case of severe chronic cicatrizing kerato-conjunctivitis with pannus similar in clinical appearance and course to ocular pemphigus.

They isolated from conjunctival scrapings during three different periods of exacerbation of the disease, a virus, close to if not identical with vaccinia virus. This was shown by neutralization tests in which vaccinia-immune serum neutralized the virus and the antivirus serum neutralized vaccinia virus.

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