There will be two subjects for discussion: the first, which will be discussed on the Friday morning session, is "ocular psychoneuroses (excluding miners' nystagmus)," and will be opened by Mr. R. C. Davenport and Squadron-Leader J. H. Doggart. The second, to be discussed at the Saturday morning session, is "Virus affections of the eye," and will be opened by Professor A. Sorsby and Dr. C. H. Andrewes.

Part of the Friday afternoon session will be devoted to a joint clinical meeting with the Ophthalmological Section of the Royal Society of Medicine. Those who wish to show cases are asked to communicate with Mr. V. Purvis, at the Royal Society of Medicine.

Members who intend to take part in the discussion or to read papers at the Congress are asked to inform the undersigned as soon as possible.

FRANK W. LAW,
Hon. Secretary.

36, DEVONSHIRE PLACE,
LONDON, W.1.

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

DEAR SIRS,—Perhaps the following notes might be of some interest to many of your readers:

To avoid using a local anaesthetic to the front of the eye during the operation for re-placement of a detached retina, pentothal is being used by some operators. A retrobulbar injection of 2 per cent. novocaine by means of a curved needle is still useful, in that the onset of pain is delayed and there is no need to give drugs to prevent sickness from rotation of the eye.

Threads should not be placed across the cornea and only warm saline is dropped on the cornea from time to time. In this way a clear view of the fundus can be obtained right to the end of the operation.

Yours faithfully,

R. LINDSAY-REA.

101, HARLEY STREET,
W.1. November 21, 1943.

IONIC MEDICATION

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

DEAR SIRS,—I was interested in an article in your August number on Ionic Medication by Norman Fleming. I have been using zinc ionization, not for ten, but for thirty years, with ever increasing sense of its value. I have been commending it to my colleagues for a like period, but without making much impression. For squamous marginal eczema (of Morax-Axenfeld origin) it is the

only cure, as by no other means can one get a medicament to the bottom of the infected hair follicle. For nearly all types of corneal ulcer zinc ionization is far superior to other modes of local antiseptics, as it penetrates deeply into the cornea. Mr. Fleming's paper would have been of much more practical value if he had stated which pole he used for the various drugs. Zinc, being a kation, is of course used on the positive pole in order to be attracted to the negative, the kathode. I presume that the alkaloids are anions, but would be grateful for specific information.

Yours, etc.,

E. TEMPLE SMITH.

141, MACQUARIE STREET,
SYDNEY, AUSTRALIA.
November 3, 1943.

OBITUARY

WALTER H. KIEP

THE sudden death of Walter H. Kiep, of Bradford, came as a painful shock to his many friends. Though, for several months he had, at times, shown obvious signs of ill health, he had made no complaint to his colleagues on the Hospital Staff, and had attended to his out-patients on the day prior to his death. He was found in bed in a comatose condition on Sunday, November 21, and died the same evening.

Kiep was born in Glasgow 58 years ago, and studied medicine at the University there, graduating M.B., Ch.B., with commendation in 1908. After holding various house appointments, he became assistant surgeon to the Ophthalmic Institution and honorary oculist to the Royal Hospital for Sick Children in that city. His whole clinical outlook on ophthalmology was greatly influenced at this time by the teachings of Maitland Ramsay, with whom he worked in very close association, and for whom he ever entertained the highest regard.

During the last war he was specialist in ophthalmology in Malta from 1915-19, and acquired considerable experience of certain tropical diseases of the eye.

At the termination of the war, he became professor of ophthalmology to the Medical School at Cairo, and relinquished this office on his appointment as honorary ophthalmic surgeon to the Royal Eye and Ear Hospital, Bradford, in 1923.

Kiep was a member of, and a very zealous worker for the North of England Ophthalmological Society, which he joined immediately