CORRESPONDENCE

Embolism are rare, there is no doubt. In close on forty years of extensive ophthalmology, I have seen only two undoubted cases.

Yours, etc.,

R. Beatson Hird.

Birmingham,
January 22, 1944.

TONOMETRY

To the Editors of The British Journal of Ophthalmology.

Dear Sirs,—While it must be conceded that tonometers do not give an absolute millimetric measure of the intra-ocular pressure, and are subject to both collective and individual inaccuracies, yet as the three in common use in this country (those of Bailliart, Schiötz, and McLéan) have common maxima at 140 mm., the figure of 212 mm. mentioned in the annotation “Tonometry” last month, must not only be regarded as “truly majestic,” but also slightly unique.

On the other hand, I venture to doubt if the “tactus eruditus,” on which our predecessors placed, and many contemporaries still place so great reliance, exists in the sense in which the words are understood.

I would not deny the existence of a “tactus non omnino rudis,” but I would imply by this term that it lacks the delicacy required to elucidate a case, the nature of progress of which is doubtful from other considerations.

Such doubt is in keeping with the trend in medicine to regard refinements of diagnosis depending on digital expertise, with increasing scepticism. Palpation of the pulse, and percussion of the chest both provide examples of this.

My doubt in this particular case, however, did not spring from general considerations, but from checking by tonometer the digital estimations, first of others, and then myself.

Assuming on earlier teaching, and on higher authority (Priestley-Smith) that the tonometer was at least a more delicate indicator of deviations from the normal intra-ocular pressure in the same eye from time to time, and in two eyes in the same person simultaneously, than the fingers, I decided that not only did I not possess the tactus eruditus, but that there are others almost equally, though less consciously unfortunate.

On enquiry, Professor Loewenstein tells me that he came to the same conclusion with regard to himself, in the same way.

If one rejects the tonometer as being an uncertain check, there is still another way in which the matter can at least be partly tested—that adopted by Harrison Butler (Ref. Brit. Jl. of Ophthal., p. 116,
1943) who took a case from time to time to several colleagues, and simply asked their opinion on the digital tension, obtaining divergent answers.

I venture to suggest that if a strictly controlled experiment on these lines were carried out at a Clinical Society meeting, that not only would it be difficult to find a statistically significant correlation between the observations of different members, but also that the results, if displayed on a screen at the end of such a meeting, would provide much quiet fun for all. Naturally there would have to be a limit to the number of observers, for fear that the repeated palpation of the eye should reduce the tension.

I am aware that the method has still much support in this country, but, as says Abelard in his Sic et Non, "dubitando ad inquisitionem venimus: inquirendo veritatem percipimus."

Yours truly,

JOHN FOSTER.

LEEDS, January 15, 1944.

OBITUARY

Lieut.-Col. A. E. J. LISTER

LIEUT.-COL. A. E. J. LISTER, M.B., B.S.Lond., F.R.C.S., I.M.S.(Rtd.), died suddenly on December 21, 1943, at Stroud, Gloucestershire, to the great loss of the service and his many friends. He studied medicine at St. Bartholomew's Hospital and in Vienna, and passed the M.B., B.S.Lond., and conjoint examinations in 1900, held the Brackenbury Scholarship in Surgery, 1901, and obtained the first place in the competitive examination for the Indian Medical Service, at the end of the Netley Army Medical School course he gained prizes in hygiene, clinical medicine and surgery. Early in his service in India Lister was on active service in East Africa and Somaliland and was also on service during the War, 1914-18.

Before the last war he was Ophthalmic Surgeon to the King George's College at Lucknow, and also Hon. Surgeon to H.E. the Viceroy.

He was the author of the Ophthalmic Section of the Medical Annual, 1922-1929; appendix in Smith's extraction of cataract; "after effects of escape of vitreous in intra-capsular extraction of cataract"; "extraction of cataract in the capsule and after effects of escape of vitreous in intra-capsular extraction of cataract," Arch. of Ophthal., 1908; "some practical points in sclero-corneal trephining," Indian Med. Gaz., 1920; etc.

He was, however, handicapped with poor health and retired from
Lurking behind a dignified and, at times, an austere presence was a delightful sense of fun and humour which his intimate friends often saw. He could laugh with the best. The more subtle the allusion, the more his appreciation.

Gentleness and tactfulness were ever his own. To the injured or the wounded, he was as gentle as a mother to her child. He was never soft or sloppy. His understanding of animals was a delight to behold. He understood them and they him—at once. He has been seen to crawl on his hands and knees to play with his friend dog for the sheer delight it gave him to give pleasure to the dog.

The world is indeed much poorer for his passing.

NOTES

Ophthalmological Society of the United Kingdom Officers 1944-45

President, Charles Goulden; Vice-presidents, M. H. Whiting, Alex. MacRae, P. G. Doyne, John Marshall; Treasurer, Sir Arnold Lawson; Council, T., Keith Lyle, T. L. de Courcy, Air-Commodore P. C. Livingston, F. A. Anderson, George Black, Victor Purvis; Acting Hon. Secretary, Frank W. Law.

University of Glasgow Post-graduate Lectures in Ophthalmology Whitsun Term 1944

DURING April and May a series of meetings will be held in the Department on Wednesdays at 8 p.m. The general arrangements will be similar to the series held last year. Tea will be served after the paper and a discussion will follow. The meetings will be open to all medical practitioners and senior students interested in Ophthalmology.

April 5, Mr. W. B. Inglis Pollock—"The Antiquity of Ophthalmology"; April 12, Professor A. J. Ballantyne—"Ophthalmology and the Diabetic Patient"; April 19, Dr. Laurance D. W. Scott—"The Diabetic Patient and Ophthalmology"; April 26, Dr. I. S. McGregor—"Prognosis in Squint"; May 3, Dr. J. A. Conway—"Ocular Therapeutics"; May 10, Dr. Dorothy Campbell—"Industrial Disorders of the Eye."

Corrigendum

Mr. John Foster points out that in his letter (p. 152), the word elucidate has been mis-spelt, and the rest of the sentence should read "nature or progress" instead of "nature of progress."

Special Notice

We are asked by the Ministry of Information to state that the fact that goods made of raw materials in short supply owing to war conditions are advertised in this journal should not be taken as an indication that they are necessarily available for export.