

(b) Turning your vehicle to the off-side across incoming traffic.

(c) Traffic approaching you from a cross road on the off-side.

Have you experienced any difficulty in driving at night since the loss of the eye ?

Have you been inconvenienced whilst driving by getting a foreign body in the remaining sound eye ?

Do you find a mirror helps you in seeing on-coming traffic ?

Motor Drivers who habitually wear distance glasses

Initials : Age :

What is your degree of refractive error in each eye, and your vision with and without glasses ?

For how long have you been driving a motor car ?

What, if any, disabilities have you experienced from the use of glasses whilst driving, *e.g.*, from atmospheric conditions, or limitation of your field of vision ?

Have you at any time collided with objects either moving or stationary ?

Have you experienced any difficulty in driving at night, and do you prefer to do so with or without your glasses ?

ANNOTATIONS

Army Spectacle Depot

Knowledge of what is known as the Army Spectacle Depot does not appear to be so widely diffused as is desirable among the medical profession. In point of fact, the Depot forms the centralized optical department of our forces at home and abroad. It was established in January, 1916, and since then has furnished 290,000 pairs of glasses to the troops, and as a result it has been computed that some 150,000 men have been placed in higher categories, and 80,000 men brought into the Army who would otherwise have been rejected. Printed instructions are issued to medical officers specifying the kinds of lenses provided by the Depot and giving particulars required, and asking for details of the visual acuity with and without glasses, and of many other points that need not be specified. From one notice we gather that the frames of the spectacles issued by the Depot are made of a shell

composition for use in climates where it is undesirable that metal should come in contact with the skin. They are more easily broken than if made of metal, but, on the other hand, they can be more readily adjusted to the soldier's face by softening the composition in warm water and by then moulding them with the finger to the desired shape. The straight sides of the frame are pierced by a small hole, so that if they become loose they can be readily fastened round the soldier's head. The necessary prescriptions and measurements for glasses are furnished by the different medical officers and transmitted to the Army Spectacle Depôt, which in due course supplies the spectacles. A word concerning the Depôt itself, which is at Clifford's Inn Hall, Fleet Street, E.C.4, where a staff of about 100 girls, superintended by Mr. J. H. Sutcliffe and assisted by three or four R.A.M.C. optical mechanics, have been trained in the various processes of turning out spectacles for the 200 ophthalmic centres established by the Army Medical Department at home and on the different fronts. We hope to publish before long a full account of the work from the pen of the Superintendent of the Army Spectacle Depôt.

Optometry in Ontario

Readers may recall the fact that we animadverted in these columns (August, 1918) on the proposals made by Mr. Justice Hodgins with regard to optometry in Ontario, Canada. We are now glad to observe that the Ontario Medical Association has expressed its views upon the subject (*Canada Lancet*, December, 1918). The Association protests against Mr. Justice Hodgins's proposal to create any sort of quasi-profession with just enough medical knowledge to prove dangerous to the public. There can be no objection to some provision in the legislation of the Province whereby all those outside the medical profession who do refraction work and prescribe glasses must first obtain a certificate of competency for such work from an accredited board. But beyond this the law should not go in the recognition of a separate body. Neither can the Association concur in Mr. Justice Hodgins's recommendation that the universities should provide additional courses of instruction. It thinks that a better plan would be to lay upon the universities the responsibility of furnishing to medical students a more extensive course on refraction than that at present given. This would tend to supersede the need for the optometrist. As to the Commissioner's three recommendations that the optometrist should be given (1) adequate knowledge of medicine to detect disease in the body disclosed or indicated by the eye, (2) acquaintance with the physiology and the pathology of the eye