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The Brain and the Eye. (Gehirn und Auge). By R. BING and R. BRÜCKNER. 1954. Pp. 248, 147 figs. Schwabe, Basel. (Swiss Frs 28; 50s.).

This is a short and concise handbook on ophthalmic neurology. The book opens with a short description of the nervous organization of the visual system—the peripheral sensory apparatus of the eye, the reflexes associated with its various activities (pupillary, labyrinthine, cortical, etc.), its motor activities, the visual pathways and centres, and the associated autonomic system. The main part of the book, which discusses clinical pathological conditions, is divided into sections: motor anomalies, sensory and trophic disturbances, diseases affecting the visual pathways from the chiasma to the cortex, and diseases of the brain and nervous system which affect the visual system secondarily or incidentally; a final section describes diagnostic methods of ophthalmological interest for elucidating central nervous diseases—a comprehensive section including the clinical examination of the retina, the pupillary reflexes and accommodation, ocular movements and nystagmus, perimetry, exophthalmos, lacrimal secretion, and so on. The book is written simply and clearly as for the senior student or practitioner, the illustrations are unusually clear and adequately explain the text, and the comfortable impression is conveved that ophthalmic neurology is after all not so formidable a subject as may sometimes have been thought.

## NOTES

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM

74th Annual Congress, 1954

The Society's 74th Annual Congress was held at Newcastle-upon-Tyne, under the presidency of Mr. Alexander MacRae, on April 22, 23, and 24. One hundred members were present. After a short introductory speech by the President, the Nettleship Medal was presented to Dr. Norman Ashton, Director of Pathology at the Institute of Ophthalmology, London, in recognition of his valuable contributions to ophthalmology, his study of the anatomy of Schlemm's canal, of the aqueous veins, and of the choroidal circulation by the use of Neoprene casts being particularly mentioned.

The main discussion was on "Inflammatory Vascular Diseases affecting the Eye", the three opening speakers being Mr. R. C. Davenport (London), Dr. S. P. Meadows (London), and Professor J. B. Duguid (Newcastle-upon-Tyne). Davenport took for his subject retinal vasculitis, with particular reference to its association with various forms of uveitis. Four features of this association had impressed him: the long interval which may separate the retinal and uveal inflammations, their occasional alternation or simultaneous appearance, the fact that the retinal changes may affect either arteries or veins, alone or together, and the occasional siting of a venous lesion entirely within the nervehead. Four cases illustrating these features were described. The first had developed bilateral iridocyclitis 20 years after an attack of bilateral retinal phlebitis. In the second, unilateral sclero-keratitis associated with cervical adenopathy had been followed, 15 years later, by retinal phlebitis in the same eye. In the third, intermittent attacks of retinal phlebitis, uveitis, and episcleritis had continued during 13 years. The fourth patient had suffered from mild anterior uveitis, some degree of retinal vasculitis and bilateral papillitis for 2 years. In every case all investigations were negative, showing that the cause of the disease remained a matter for further research. In conclusion, reference was made to the association of retinal vasculitis with lesions of the central nervous system, particularly disseminated sclerosis.

Meadows' theme, based on twelve personal cases, was "temporal arteritis and loss of vision". After describing the distribution, incidence, and pathology of the disease, he outlined the clinical picture. There was often an initial period of malaise, anorexia, and slight fever, followed by headache and tenderness of the scalp; 40 per cent. of cases showed ocular signs of which the most common (25 per cent.) was blindness of rapid onset in one or both eyes, the second eye being affected at the same time as the first or a few days later. Ophthalmoscopy showed retinal arterial occlusion in a few instances, but, more commonly, only moderate papilloedema. Sometimes the fundi were normal. Other neurological changes such as hemiplegia and dementia occurred. The

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diagnosis was confirmed by the nodular, tender, usually pulseless, temporal artery or arteries, and by temporal artery biopsy. The sedimentation rate was raised. The disease was self-limiting, lasting for 3 or 4 months, and though sight rarely recovered the general prognosis was surprisingly good. Treatment by anti-coagulants and cortisone had been disappointing, though the latter was, theoretically, the most hopeful.

Duguid discussed the aetiology of peri-arteritis nodosa: Consideration of the haphazard distribution of this disease and of the fact that in the kidney it caused infarction, had led him to the tentative conclusion that its lesions were caused by embolism or thrombosis. The objection to such a hypothesis was that histological sections of affected vessels frequently showed no evidence of such events. In answer to this, first, a small lesion was easy to miss in the histological examination of the course of a vessel. Secondly, as a series of personal experiments demonstrated, when an embolus or thrombus was lodged in a vessel it rapidly became covered by endothelium and incorporated in the vessel wall, so that its original nature was difficult to identify. Although the application of this theory to lesions affecting large vessels was not easy, in the case of small vessels there was no insuperable objection to it on histological grounds, and it did, in his opinion, offer the most satisfactory explanation of observed facts.

Papers were read by Mr. A. J. B. Goldsmith, evaluating the operation of cyclodiathermy; by Mr. George Black discussing the diagnosis of orbital tumours, and emphasizing the value of radiography after air injection into the orbit and his preference for transfrontal exploration rather than anterior biopsy when the tumour did not present anteriorly; by Dr. G. V. T. Matthews who demonstrated that migrant birds find their direction largely by the position and movements of the sun.

Films were shown by Professor H. M. Dekking on "Retinal Detachment", by Dr. G. I. Scott on "Advancement and Resection of the Levator for Correction of Congenital Ptosis", by Mr. A. G. Leigh on "Keratoplasty", and by Mr. H. Vernon Ingram on "The Miner at Work".

A symposium was held on "Changes in the Incidence of the Eye Affections of Coal-Miners in the last 25 Years". Dr. Dorothy Campbell discussed miners' nystagmus, emphasizing the importance of accurate certification, of treatment, and of social welfare keeping the incidence down to a minimum. Mr. W. J. Wellwood Ferguson presented statistics on the incidence and nature of ocular injuries in mining with general reference to methods of mining and methods of treatment and prevention. Dr. G. I. Scott drew attention to the declining incidence of hypopyon ulcers in miners during the past 25 years, which could be attributed to the improved prophylactic treatment given in first-aid at the pit-head as well as by the general practitioner.

At a short symposium on "Gonioscopy after Glaucoma Operations", Mr. H. E. Hobbs illustrated the gonioscopic appearance after drainage operations, and assessed the clinical effects of the anatomical variants shown, and Mr. Redmond Smith discussed the general interpretation of broad and narrow angles and the presence of peripheral anterior synechiae.

Further papers were contributed by Mr. Barrie Jones on "Acute Retinal Phlebitis with Infectious Mononucleosis"; by Mr. J. Stewart Gourlay on "Shagreen in Cataract Surgery", suggesting that the presence of a good capsular shagreen indicated that the capsule was not likely to rupture on manipulation; by Mr. D. P. Greaves, on the "Technical Advances in Experimental Perforating Keratoplasty", which now permitted a high proportion of clear grafts; by Mr. E. C. Glover on the "Statistical Analysis of the Results of Cataract Surgery at Moorfields in 1949"; and by Mr. Alexander MacRae, who gave a follow-up of his earlier series of "Congenital Vascular Veils in the Vitreous" and discussed their significance. A film was shown by Professor R. C. Browne on the "Experimental Production of Nystagmus in Animals".

Short demonstrations were given by Mr. A. Seymour Philps on "Keratography and its Value in Recording Irregularities of Corneal Curvature" (illustrated with a film by Dr. Hansell); by Mr. A. T. G. Evans, on "Essential Atrophy of the Choroid with Ataxia and a strong Family History of similar conditions"; by Mr. J. Frankenthal on "Large Cyst of the Iris following Lens Extraction"; by Mr. P. J. L. Hunter, on "Bilateral Lymphosarcoma of the Orbit"; by Mr. E. F. King, on "Secondary Carcinoma of the Choroid, which had shown a striking regression after Adrenalectomy", and by Mr. P. D. Trevor-Roper, on a Case in which symmetrical metastases from a breast carcinoma had presented in the angles of both anterior chambers, strictly confined to the horizontal axes, suggesting that this could most easily be attributed to anatomical vagary of the retrobulbar arteries by which the metastases were diverted into the long posterior ciliary arteries rather than the short posterior ciliary arteries.

Apart from the excellence of the papers, this was considered to be a most successful congress and the hospitality of the local members was overwhelming. The Annual Dinner was held at the Station Hotel on April 22, and the next evening a civic reception was held by the Lord Mayor of Newcastle-upon-Tyne at the Laing Art Gallery. Nearly seventy members took part in an expedition to the Roman Wall under the guidance of Professor Ian Richmond.