impression of looking into a deep well. The diameter of the hole was slightly greater than that of the normal disc. The retina was torn on the nasal side of the opening and separated from the choroid for a short distance. There were haemorrhages in the fundus. The greater number of the retinal vessels were white and bloodless; veins and arteries could be differentiated with difficulty. In the course of a few weeks the excavation was filled in with newly formed connective tissue, the haemorrhages were absorbed, and the circulation was restored in several of the vessels in the lower part of the retina. Sight, however, was not recovered. The man was later transferred to the State Asylum for the Blind. The nature of the injuries found upon entrance to hospital affords an explanation of the mechanism of production of the evulsion of the optic nerve. The patient fell upon his head in such a way that the force of the blow was directed upwards and to the left, and this accounts for the fracture and separation of the superior maxillae and nasal bones and the extrusion of the left eye from the orbit as evidenced by the position of the wounds. Enough pressure was disseminated to the right to produce sufficient protrusion of the right eye to separate the optic nerve from the globe without rupturing the sclera and causing collapse of the globe, as occurred on the left side. “It is as though one pulled an apple from its stem.” S. S.

BOOK NOTICES


The authors of this book have set before themselves a task which must involve enormous research, and is beset with numberless difficulties and pitfalls. They have had to say to themselves: "Shall we (1) describe all the operations which have been devised, or (2) select the standard few of which we approve, or (3) while exercising the right and duty of selection, introduce also some of the methods which we personally may or may not accept, but which are well approved by sound practitioners elsewhere?" Had they taken the first course and made no selection, their book would have been of enormous dimensions, and of a value which a mathematician might express as the reciprocal of the mass. Had they adopted the second, the title of the book would (as in the case of another work translated from a foreign tongue and published..."
a few years ago) have been quite misleading, because the area covered would have been very local. They have chosen the wisest course, the third, and have carried out their scheme to admiration. Of course, it would be easy to suggest adverse criticism. As a matter of fact, however, all the good standard methods, so far as we have observed, have their due relation given to them, and most, if not all, of the merely personal eccentricities have been quietly dropped out, and that is well.

Description alone would be very ineffective, and the text has accordingly been enriched by very numerous and most illuminating diagrams, though why these have been made so coarse and unlovely we do not understand. Clearness is the first consideration, no doubt, but without any sacrifice of clearness they might have been more elegant. In only one or two instances have we discovered any actual error in the illustrations; but take diagrams 102, 103, and 104: The question of the length of the incision is one of immense importance in cataract extraction, and we should condemn that depicted in 102 and 103 as too short; 104 agrees with the text, and is correct. Again, in Fig. 113 the incision is not placed sufficiently far from the corneal margin.

The authors commit themselves to the statement that general anaesthesia is required for enucleation, but a number of surgeons now-a-days employ local anaesthesia for this purpose, and are pleased with the method in suitable cases. They will find on inquiry that in many clinics the keratome is greatly preferred to the Graefe knife in iridectomy for acute glaucoma. Occasionally they have been led into speaking of an operation or an instrument by the name of a certain surgeon when his is a mere trifling variation upon one previously before the public. For operations such as those for relief of ptosis, shaving the eyebrow is apparently considered by them de rigueur, but that is not so at all; a thorough painting with iodine meets every requirement, and does not leave the patent with an atrocious deformity of months' duration.

Three omissions we note which we hope may be made good in all later editions: (1) the plan of a lattice stitching passing over a skin graft from and to fixed skin on each side, not piercing the graft at all but lying over it and holding it in position—a very useful and sound method; (2) Saemisch's incision in bad cases of hypopyon ulcer, a method which saves a little sight in many an eye otherwise doomed; and (3) extraction of a congenitally luxated lens which has slipped through into the anterior chamber. This accident is by no means very rare, and the manipulation and procedure merit a special paragraph.

There are a few points in which we do not quite agree with the authors, e.g., as to the intracorneal site of the keratome incision (pp. 264, 265), and in regard to a statement on p. 280, where "one
and all "of the advocates of simple extraction are made to say that under certain circumstances they prefer the separated combined operation, that is, extraction at an interval after a preceding iridectomy. As upholders of the simple method where conditions are suitable, we do not subscribe to any such doctrine. Nor are we satisfied that the remarks upon the theory of action of the iridectomy in glaucoma are quite just to the careful work of Henderson and others.

There is one common point in regard to which it seems to us that clarity is rather sacrificed and redundancy encouraged by the injudicious selection of typing. Take as an example pp. 195 and 196: all this (very handy) classification is repeated in fragments on the succeeding pages, whereas if a wiser selection of types and a more carefully considered spacing had been made, there would have been less repetition and a clearer scheme. In regard to all the grouped operations, it gives us pleasure to say that we admire and approve of the excellent little esquisses discussing various modes of approaching a problem, and the motives aimed at in different operative procedures, and, to some extent, appraising these.

We consider that the value of the book would be enhanced by a brief introductory chapter dealing with antiseptic methods as applied to the eye, the relative value of antiseptic and aseptic applications, and the merits of various local anaesthetics.

It will be manifest from what has been said that we consider this book to be very well deserving of the attention of all who are devoting, or who intend to devote, their lives to the practice of ophthalmic surgery. The scheme is excellent, and it is admirably carried out, the directions are clear, and the illustrations do really illustrate, and, even if they may be a little crude, are, as the authors justly indicate in their preface, vastly more useful than photographs of the actual performance, for these are never sufficiently precise to be of the slightest value to anyone.


This thin volume (illustrated) includes an account of the fortieth meeting of the Society, held at Brussels on November 30, 1919. It contains several communications of interest, notably by Lagrange, on decompressive operations in chronic glaucoma, by Rutten on miners' nystagmus, and by Rasquin, on syphilitic irregularity of the pupil. These and some other communications will be noticed in our abstract columns in due course.

S. S.

Cairo: printed by H. Waisel.

This book of 146 pages contains an account, mostly in English, of the proceedings of the sixteenth annual meeting of the Ophthalmological Society of Egypt, held on March 7, 1919, at the Kasr El Ainy Medical School, when fifty-nine members were present. Three of the now published communications appear in the Transactions of the Ophthalmological Society of the United Kingdom, and others have already been noticed in our columns. Text errors are few as compared with some of the recent volumes, but there is still room for improvement in this respect. The book would be easier to consult were it provided with an index.

S. S.

NOTES

ADOLF STEIGER, whose work upon questions concerning the refraction of the human eye is widely known, died at Zurich on March 13th last, at the age of 58 years.

TH. MUSY has been appointed chief of the ophthalmological service of the cantonal hospital of Fribourg. M. G. Dobbyn and H. L. Ormerod have been appointed surgeons to the Bristol Eye Dispensary.

DURING the recent Congress of the Ophthalmological Society a general meeting, to which all British ophthalmic surgeons were invited, was held at the house of the Royal Society of Medicine, Wimpole Street, when the Report of the Council of British Ophthalmologists, which appeared in the last number of this journal, was adopted, after which certain changes in the rules were agreed upon. Sir Anderson Critchett occupied the chair.