



FIG. 2 *Detail of probe tip (A)*

transilluminator. The horizontal ridging on two surfaces of the cannula permits orientation of the probe tip in the dark. Fundus lesions may therefore be powerfully illuminated by either instrument.

Advantages

Because of the design of the probe only a small con-

junctival incision is required to provide access to lesions located at the posterior pole, and since this instrument can be sterilized the risk of introducing infection into the orbit is minimized.

Transillumination is of value in locating large choroidal vessels when selecting a site for draining subretinal fluid in cases of retinal detachment requiring this procedure, and the ease with which the probe may be resterilized, together with a supply of prepacked light guides, permits the instrument to be used as frequently as required.

We wish to acknowledge the aid of Mr. A. E. Christmas, late Head of the Instrument Department, Bristol United Hospitals, in making up the prototype instrument, and Hamblin Instruments Ltd. for advice and for agreeing to manufacture the probe and reducing sleeve. We also wish to thank the Medical Illustration Unit of the United Bristol Hospitals for the production of illustrations and Mrs. D. Archer for secretarial help.

References

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Errata

Editorial November issue, vol. 58, p. 890, 1.19:

for 'chlorio-retinal' read 'chorio-retinal'

p. 891 1.3:

for 'Histoplasm' read 'Histoplasma'

1.20:

for 'and evidence of previous *H. capsulatum* infection' read 'and no evidence . . .'