In January, 1921, an infant fourteen days old was sent to me, with a history of birth after a difficult labour necessitating instrumental delivery.

On the eyes being opened a left convergent strabismus was noticed by the doctor in attendance.

On examining the baby I found a marked left convergent strabismus, apparently resulting from paralysis of the left external rectus, as although the baby followed a light readily, it did not bring the left eye past the middle line. There was also some paresis of the right external rectus. On examining the fundus, which proved to be normal in each eye, I found there was a considerable degree of myopia, and ascertained by retinoscopy that there were ten dioptres of myopia in each eye.

I saw the child about six weeks later, when the movement of the right external rectus was normal, and there was some movement of the left external rectus also, the parents stating that at times the squint was scarcely noticeable.

I again worked out the refraction with the same result. The eyes appeared to be normal in size, and the corneas and anterior chambers presented no unusual feature, so that it is improbable that it is a case of commencing buphthalmos.

ANNOTATIONS

Some Phases of Quackery in relation to Diseases of the Eye

Mr. Cyril H. Walker, in his Presidential Address at the opening of the Forty-eighth Meeting of the Bristol Medico-Chirurgical Society, drew attention to the fact that no branch of medicine has been and probably is more invaded by advertising charlatans than ophthalmology. The term “quack” or “quack-salver” came into common use in the reign of Charles I., and referred to the noisy chatter of medicine vendors at fairs. Recently a quack has been defined as a man who is more interested in himself than in his healing art, caring more for his patent than his patient. One might almost substitute the word “pocket” for “patent.” During the middle ages the treatment of disease of the eye was largely in the hands of these itinerant quacks who went from fair to fair couching cataracts and selling their preparations. It is also of interest to know that the still popular Singleton’s golden eye ointment was in vogue over three hundred years ago and sold at fairs by these quacks. In James I’s reign these quacks first
received the name of "oculists," and when Queen Anne came to the throne a great fillip was given to these oculists, as she herself suffered from defective sight, and she also revived the custom of "touching" for King's evil, and took fees in the form of "touch-pieces" from patients. Queen Anne appointed two charlatans as oculists to the Court. One was William Read, a tailor, who subsequently received a knighthood for curing a number of seamen and soldiers gratis, and the other, Roger Grant, either a shoemaker or a tinker. The latter was notorious for "putting out eyes with great success." In this irregular way the now much coveted title of "Surgeon-oculist to the King" arose. About this time the king of all quack oculists, Chevalier Taylor, flourished; he was a qualified surgeon, an account of whose life is given by Coats in the Royal London Ophthalmic Hospital Reports for 1915. He was appointed oculist to the Pope and to the Kings of England, Denmark, Poland, Norway and Sweden, and he used to go about in a carriage painted all over with eyes with the motto on it of "Qui visum dat, vitam dat." He operated on Handel for cataract, "but on drawing the curtain we found the bottom defective."

Coming to later day quacks in this country, they seem to be divided into two classes, foreigners who come from a German-speaking country and set up for a time in one of our big hotels, their coming having been duly advertised beforehand, curing every disease of the eye by lotion, drops or glasses. The other, perhaps less reprehensible, is represented by the optician who lays himself out for a course of treatment by strong glasses or other means and charges exorbitant fees for the same. There is still a further class whose activities are usually shortlived, such as the case of the Indian oculist who used to remove pieces of tissue from the conjunctiva, and more recently the beauty specialist who excises redundant skin about the eyelids in old people. Mr. Cyril Walker ends his most interesting lecture by urging the general practitioner actively to assist in the suppression of quackery in ophthalmology by keeping in touch with the nearest eye clinic and sending all cases for consultation, thus not only maintaining his interest in ophthalmology but learning better its possibilities and limitations, enabling him to decide when to persuade his patients to seek special advice rather than allowing them to drift into the hands of the optician or quack. By doing this he will more than ever deserve to be regarded as their guide, philosopher and friend.

Amaurosis after Loss of Blood

Little attention has been paid to this curious phenomenon in the standard text books. The Ophthalmological Society of Paris had an interesting discussion on the subject at a recent meeting.