MEDICAL MATTERS.

THE TREATMENT OF GLAUCOMA.

Dr. J. Herbert Parsons, F.R.C.S., Ophthalmic Surgeon, University College Hospital, and Surgeon to the Royal London Moorfields Ophthalmic Hospital, contributes to the *Lancet* an interesting article on "Theory and Practice in the Treatment of Glaucoma," in which he writes :—

" In 1856 Albrecht von Graefe, then a young teacher in the Berlin University, only 28 years old, introduced the operation of iridectomy for the relief of glaucoma. 'For thousands of years hosts of sufferers from glaucoma sank without relief into the night of blindness; by the introduction of iridectomy A. von Graefe pointed out the way whereby their vision might be retained. Had he accomplished nothing more, he would by this one act have merited the crown of immortality and a place in the little band of heroes who are the benefactors, not of a nation alone, but of all mankind.' These eloquent words, written more than 30 years ago by Professor Schmidt-Rimpler, would be endorsed by every ophthalmologist to-day. None the less, the battle is not yet won, for to-day, too, thousands of sufferers from glaucoma drift into the night of darkness, not, it is true, wholly unrelieved, but often, unhappily, with a relief which is but a postponement of the inevitable end.

"Glaucoma, in the broad use of the term, is the condition of pathologically increased intraocular tension. Two great groups of cases may be distinguished: those in which increased tension is the result of inflammatory changes occurring in the ciliary body, and those in which there is no evidence of primary inflammatory change in any part of the eye. It is well to reserve the term glaucoma, in its narrower sense, for the latter group. The pathology of these cases is quite different, and it is amongst them that iridectomy and cognate operations are most clearly indicated.

"This group again is broadly subdivided into two sub-groups — primary acute and chronic glaucoma. The former is characterised by sudden onset, great increase of tension, intense vascular congestion, and severe pain; the latter by insidious onset, slow progress, intermittent and often scarcely appreciable increase of tension, absence of marked vascular congestion, and freedom from pain. In the former the vision fails very rapidly; in the latter very slowly. The difference between the two classes is so marked that they might almost be considered different

diseases. They have this point of contact, however, in that the chronic cases are subject to exacerbations in which the tension is suddenly raised and the case assumes all the characteristics of a primary acute glaucoma. acute glaucoma is remarkably Primary amenable to operative treatment by iridectomy. The effect is little short of magical; tension and pain are relieved immediately, and if the operation is performed sufficiently early vision is rapidly restored. In chronic glaucoma, on the other hand, iridectomy often fails to stay the progress of the disease. It is by the brilliant results of iridectomy in primary acute glaucoma that von Graefe is still held to merit that crown of immortality which he wears as the benefactor of mankind.

"Without the wish to dim the lustre of a single jewel in von Graefe's crown, it should be salutary to human intellectual arrogance to note that in the discovery of the cure of primary acute glaucoma by iridectomy theory and practice did not march hand in hand. Von Graefe, with that extraordinary clinical insight which distinguished him more than any other ophthalmologist of the day, with the exception of Mackenzie, had noticed the diminution of intraocular tension following iridectomy in cases of partial anterior staphyloma, corneal ulcer, and so on. He was of opinion that experimental researches on animals supported the view that excision of a broad piece of iris permanently diminished the tension of even the normal eye. Subsequent experiments by more delicate methods do not support this view, and it must be conceded that iridectomy for glaucoma was founded upon deductions from false premises. So notable an example may well instil caution in the acceptance of even the most plausible theories, particularly in biological questions, the complexities of which preclude the accuracy characteristic of physical and mathematical problems."

After discussing the current theories of intraocular tension, normal and pathological, in their bearing upon the treatment of chronic glaucoma, Dr. Parsons expresses the opinion that the formation of a filtering cicatrix holds out the best hope of alleviating chronic glaucoma.

THE DRUG HABIT.

The Opium Conference at the Hague will do good service if it is able to secure concerted action between the Powers to control the traffic in opium, morphine, cocaine, and other dangerous drugs. The opium habit, which is on the increase in this country, is a most pernicious one.



