

Medical Matters.

OPHTHALMOLOGY AND THE GENERAL PHYSICIAN.



SPEAKING before the Ontario Medical Association, Dr. G. H. Burnham, M.D. (Tor.), F.R.C.S. (Edin.), M.R.C.S. (Eng.), said:—The object of this address is to bring before the general profession some of the diseases of the eye, and also some disturbances associated with the eye, which could be more satisfactorily dealt with if earlier recognised and more clearly understood. Take acute glaucoma. This is the form in which blindness, almost or quite complete, comes on very suddenly, viz., in one hour or so, associated with agonizing pain. It may attack one or both eyes. The intense redness of the eyeball, the swollen conjunctiva, and the severe pain may cause it to be diagnosed as acute iritis, especially when the attack is limited to one eye. The treatment of iritis is most emphatically contra-indicated in acute glaucoma, or any form of glaucoma. Hence, such a diagnosis is most disastrous. In this form of glaucoma, correct treatment must be at once begun, otherwise the sight is never regained. If the oculist can at once be seen, then an iridectomy is done. If, however, some delay must take place, then use a solution of eserine till the oculist arrives. Chronic glaucoma is a very insidious disease, its chief symptoms being a slowly growing dimness of sight; sometimes a dull headache and rainbow colours about the flame are fitfully present. If this be diagnosed as a cataract and consequently nothing be done till the vision becomes very poor, it is then too late for any operative measure, and blindness, more or less complete, results. There are other affections of the optic nerve due to the action of certain medicines, as quinine, alcohol, arsenic, and many others less commonly used. Iritis is another affection which requires to be at once noticed, or otherwise adhesions between the iris and capsule of the lens follow, and consequent impairment of vision. In these cases, the usual course is to do an iridectomy, but, as a rule, this operation is far from satisfactory. I use in its place my combined form of treatment, viz., mercury and the iodide of potash internally, and pilocarpin hypodermically. Disease of the lachrymal apparatus, known as "watery eye," is a much neglected affection. If taken in the early stage,

before the bone becomes diseased, or but slightly affected, it can be much more easily managed than if there is extensive mischief, for this latter condition needs much time and a long course of treatment. The probes used in the treatment of this affection have eight sizes. I use the four smallest sizes only. The four largest sizes are never employed by me. The use of these latter is always attended with much greater pain and suffering than the four smaller. Moreover, I consider no benefit is derived; in fact, a contrary effect. Frequent probing is not needed in the plan of treatment I adopt. I now wish especially to call your attention to eye-strain. This is now acknowledged by the profession to be a decided factor in many peculiar phenomena of the nervous system; but its full significance is by no means realised. Let it be thoroughly understood that great eye-strain may be present though the acuteness of vision may be up to the full normal standard, or even above it. Hence it is merely a question of amount, time, and the surroundings before the nervous phenomena of eye-strain are shown. Some of them are: Headache, migraine or sick headache, neuralgia, spinal irritation and neurasthenia, chorea, epilepsy, mental disorders, disorders of the stomach and bowels, &c. Therefore, do not forget that most marked eye-strain may be present with good vision; for it is the continuance and amount of excessive effort made by the muscles of the eye which constitute eye-strain, not the mere fact that the vision is poor. I hope I have succeeded in impressing upon you the importance and difficulty of prescribing the proper glasses for the eye, and the necessity of your doing your share in showing to the public the farcical nature of the claims of the so-called "doctors of refraction" to their forbearance or to their confidence.

THE HEARING IN THE INSANE.

LARIONOFF tested the hearing in twenty cases of mental disease, in twelve of which there were, or had been at some time, auditory hallucinations. Two patients had fairly good hearing, but the others were either entirely deaf in one ear or could hear the watch only on contact or at a short distance. In nearly every case, bone-conduction was absent, both for the watch and the tuning fork; yet nearly all could distinguish tones fairly well. Larionoff concludes from this that there is a special musical centre in the brain, and this conclusion, he believes, is confirmed by the results of his physiological and anatomical investigations.

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