

the one and only method, to be kept up until medical help comes, fails in its object. Secondly, the instruction as to improvised tourniquets shows a lack of acquaintance with the actual circumstances intended to be met. The result is the production of an unnecessary, often dangerous, amount of hæmorrhage owing to venous obstruction whilst the main artery continues to carry blood to the limb. In the cases which have fallen under my notice where an improvised tourniquet has been used much more blood has been lost than would have taken place had no such "first aid" been given.

THE FORTHCOMING EXPERIMENTS AT BLYTHWOOD FARM.

It will be within the recollection of our readers that Dr. Koch threw what was described as a "bombshell" into the Tuberculosis Congress last year with his announcement that human and bovine tuberculosis were totally distinct things, and that, consequently, all fears of human beings catching consumption from animals were grounded in error. As a result of the discussion which followed this declaration by the German savant the Government consented to appoint a Commission to inquire into the Kochian theory. The members were Sir Michael Foster, Professors McFadyean, Sims Woodhead, Sidney Martin, Boyce, and Dr. E. J. Steegmann (secretary).

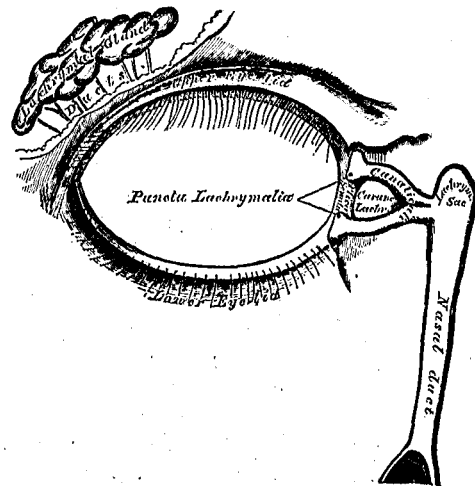
To this Commission Sir James Blyth offered the loan of two of his farms for experimental purposes—one at Blythwood and another elsewhere, but not yet decided upon. The offer has been accepted, and the investigations will commence very shortly. The Commission is erecting laboratories at the farm, and the experiments, which are expected to take from two to three years, will cover a very wide range, including, in addition to bovine animals, many other species.

It may not be generally known that about 30 per cent. of the cows in Great Britain are tuberculous. In order, therefore, that the Kochian theory should not be too hastily accepted, and the milk and flesh from these and other cows be used indiscriminately, the Local Government Board have issued directions that none of the regulations and precautions at present in use respecting tuberculous food should be in any way relaxed pending the issue of the Commission's report.

Nursing of Diseases of the Eye.

By HAROLD GRIMSDALE, F.R.C.S.,
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The lacrymal gland is a small body about the size of a bean, lodged above the eye under the orbital roof. Though one usually speaks of one lacrymal gland, the expression is a loose one. There are innumerable small glands over all the conjunctiva, which aid in secreting the tears. The main mass just named has six or seven little ducts, which pass downward almost vertically, and open into the superior fornix of the conjunctiva. Not uncommonly the anterior edge of the gland extends so far that it is visible if the upper lid be everted, as a rounded, slightly lobulated mass. The tears secreted by this and the other glands run over the eye, and gradually collect towards the inner canthus, where, owing to the irregularity of the caruncle, there is a greater space between the lids and the globe, called the sinus lacrymalis. Here, about a quarter of an inch from the inner canthus, is on each lid a small eminence or papilla at whose summit opens a minute canal, the openings being called the puncta lacrymalia. Through these small openings all the tears should drain, and for this it is necessary that the puncta open close against the globe. The two little passages or canaliculi run at first vertically from the puncta and then horizontally inward and backwards, and, joining behind the caruncle, form a large sac, the lacrymal sac. This is lodged in a hollow in the lacrymal bone on the inner wall of the orbit. The outer and anterior walls of the lacrymal sac are covered by fascia and the orbicularis muscle, the tendo oculi of the orbicularis lying across the sac as a hard cord, and forming a valuable anatomical landmark.



Lacrimal Apparatus.

[* We are indebted to "Gray's Anatomy" for permission to use this diagram. Ed.]

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