

In such cases a very slight alteration of the strength of the sphere may make all the difference between comfort and distress.

I have known a patient who thought it would be necessary to give up a situation on account of the pain occasioned by the eyes. She was presbyopic, and had lost accommodation rather more than is usual at her age. Careful measurement showed that she required a glass half a diopetre stronger than she was wearing. I ordered it feeling doubtful whether it would have any great effect but found that all the symptoms were immediately relieved.

Not only defects of the refraction, but muscular defects may cause headache. Binocular vision requires very accurate adjustment. The muscular co-ordination must be perfect. If from any anatomical peculiarity the visual axes are not parallel when the eyes are in the position of rest, an exceptional muscular and nervous effort is required to maintain distinct vision. This additional effort, if it be long, will soon lead to nervous exhaustion and consequent pain.

If the refraction media be normal, it is comparatively rare for any muscular error alone to cause much distress. If, however, the two errors be combined we have the most unfavourable combination.

It suffices to correct the refractive error in most cases to secure relief; but sometimes we must aid the overworked muscle either by operation or by the addition of a prism to the spectacle lens by which the rays of light are bent so as to correct the deviation of the visual axis.

In practice the relief from the use of glasses is often immediate; sometimes, however, the patient comes back complaining that no relief has been obtained. We must then carefully examine the glasses to see that there is no error in their form or adjustment. Glasses for near vision should be placed so that the visual axes at the reading distance pass through the optical centres. They must, therefore, be rather closer together than spectacles for use out of doors.

They should also be tilted slightly forward. The eyes are directed downwards for near vision, and the plane of the lens should be at right angles to the plane of vision. Any deviation from this gives rise to an irregularity of refraction which may be considerable unless the glasses are quite weak.

If there be no error of adjustment, we should advise the patient to continue the use of the glasses for some weeks. It is most probable that during this time the pain will gradually subside.

Attention to the general health, rest and tonics may assist in breaking the habit of headache. We must encourage the sufferer to take life easily for a time. If once the nervous system recover, it will probably not give way again, so long as the glasses are worn.

Appointments.

LADY SUPERINTENDENT.

Miss Loveday Gaved-Wills has been appointed Lady Superintendent of the Hospital, Newark-on-Trent. She received her training at the South Devon Hospital, Plymouth, in connection with which she afterwards held the position of Staff and Private Nurse and Sister. She has also held the position of Charge Nurse at St. Peter's Hospital, Covent Garden. For the past six years Miss Gaved-Wills has held the positions of Night Superintendent and Ward Sister at the West London Hospital, Hammer-smith, where she was a very popular Sister and was made the recipient of many valuable presents from the Matron and Nursing Staff.

MATRON.

Miss Annie Beaumont has been appointed Nurse-Matron at the Cottage Hospital, Morecambe. She was trained at the Royal Infirmary, Sheffield, where she has also held the positions of Staff Nurse and Sister.

SISTER-IN-CHARGE.

Miss Susan A. Musson has been appointed Sister-in-Charge at the Sanatorium, Kingston-upon-Hull. She was trained at the Royal Infirmary, Liverpool, and has held the positions of Charge Nurse and Sister at the Royal Infirmary, Hull.

NIGHT SISTER.

Miss E. R. Roberts has been appointed Night Sister at the Beckett Hospital, Barnsley. She began her nursing career as probationer at St. Paul's Eye and Ear Hospital, Liverpool, and afterwards as probationer and staff nurse worked for five years at the Royal Southern Hospital, Liverpool. For the last year and a half she has held the position of Sister of the women and children's ward at the Beckett Hospital.

Miss Annie Nutter has been appointed Night Sister at the Hospital, Colchester. She was trained at the General Infirmary, Leeds, and has held the position of Charge Nurse at Prescott Infirmary and Staff Nurse at the Hospital, West Ham.

SISTER.

Miss L. T. Evans has been appointed Sister at the County Hospital, Newport, Monmouthshire. She was trained for four years at the London Hospital and has held the position of Sister at the General Infirmary, Worcester.

Miss Fanny Fairbrother has been appointed Sister at the Isolation Hospital, Watford. She has recently been attached to a nursing home at Southport, and has also held the position of Nurse at the Beacon Hill Hospital, Faversham.

CHARGE NURSE.

Miss Alice M. Bleakley has been appointed Charge Nurse of the Protestant Wards at the South Charitable Infirmary, Cork. She was trained at the General Hospital, Tunbridge Wells.

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