

which will then be framed and hung in the Governors' Hall.

We congratulate the nurses of St. Thomas's Hospital upon the successful result of their endeavour, which is a practical illustration of what can be done when good will and good organisation go hand in hand. We confess that it pleases us better to hear of nurses collecting from the public for the benefit of their patients than for schemes benefiting themselves.

In conclusion, the present nurses of St. Thomas's Hospital have given a splendid lead. If we may make a suggestion to its past nurses, popularly known as "old Nightingales," it is to go and do likewise.

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### MEDICAL MATTERS.

#### CASE OF SPONTANEOUS FRACTURE OF A MULES' GLOBE AFTER 20 YEARS: SUCCESSFUL REPLACEMENT BY A NEW GLASS GLOBE AFTER TWO ATTEMPTS.

By WILLIAM WYLLYS, M.R.C.S., L.R.C.P.

Miss C—, æt. 39, suffered from Graves' disease, and in 1913 Mr. D. Day successfully removed the goitre at the Norfolk and Norwich Hospital. She came to see me in a very agitated frame of mind at 9 a.m. on May 5th, 1920, stating that the glass globe which had been placed in her right eye by Dr. Lawford of Moorfields Hospital more than twenty years ago had suddenly burst. I made an examination and found such to be the case, and realising the necessity of immediate action, procured the services of my friend and colleague, Dr. Valentine Blake, who, giving a perfect anæsthetic, enabled me to clear out the pulverised glass from within the tunics and to insert a new glass globe. I sewed up the edges of Tenon's capsule carefully and then brought conjunctiva well over and sutured. All went well for eight days, when to my disappointment a small speck of glistening material appeared at the centre of the wound, and I found the edge of Tenon's capsule and conjunctiva had given way at that point, where a stitch could be seen lying loosely, evidently sloughed out from pressure. A little mucus was to be seen, and with this inflammatory complication it looked doubtful if another attempt to perform a plastic operation was justifiable. I got Dr. Blake to see the case in consultation with me and the question of an ideal antiseptic which would not injure the tissues and at the same time rapidly subdue the inflammation, so that a further operation could be almost immediately performed, had

to be settled upon. At his suggestion, and on which I consider the successful result almost entirely depended, we decided to instil a solution of trimethenal allylic carbide. This was done for two days, when Dr. Blake again administered the anæsthetic. I opened up the old wound, took out the glass globe, and filled the cavity in tunics with solution of trimethenal allylic carbide, then floated in another Mules' globe, and even more carefully joined up the edges of Tenon's capsule with interrupted sutures of fine silk and then closed over with conjunctiva, using again interrupted fine silk sutures. On the eighth day one of these was loose and had worked almost out so I removed it, and two days later two more; but to my great satisfaction those in Tenon's capsule had held and there was good firm healing there. The conjunctiva with its full blood supply looked well after itself, and at the end of a fortnight an excellent stump was forming. A few days later I noted "all well," perfect movement of stump, and six weeks from the operation she was wearing with comfort a new Snellen Reform glass eye, a perfect match in colour with her sound eye.

I report this case to demonstrate the possibility of undertaking successfully a plastic operation in an inflamed area if a suitable antiseptic can be found: in this instance the carbide solution proved efficacious. Also to point out that if an attempt to replace a broken glass globe fails first time, the operation can and should be repeated. From an industrial point of view the necessity of restoring a *movable* glass artificial eye in this young woman's case meant a loss of or return to her post, to which, curiously enough, she had been appointed many years ago because of her keen sight and comely appearance, her employers having no idea when they engaged her that one of her eyes was artificial.

Another point of interest is the fact that in cases of this sort an artificial eye can be worn over a Mules' globe for five years without being even polished. This information the patient vouchsafed and I attribute it to the better fit obtained and the movement to and fro under the conjunctiva, which does not occur after enucleation, and also to use of fresh water only in cleansing the artificial eye; and another point of interest is that Mules' operation in young people can be taken when sight has been lost from chronic disease of cornea, for as a child from her history she evidently had strumous ulceration and probably perforation of cornea.—*St. Bartholomew's Hospital Journal.*

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