ABERDEEN OPHTHALMIC INSTITUTION.

CASE OF DISLOCATION OF THE CRYSTALLINE LENS, &c.

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R. SUTHERLAND, æt. 9, of a very sickly appearance, and strongly marked by scrofula, says that about four weeks ago a boy thrust his finger into his left eye, and from that time he has completely lost the use of it; that no inflammatory symptoms followed the injury that same night; he felt after, and continues to feel, a severe pain in the eye itself, and over the brow, extending often towards the back of the head of the same side, and going off before morning. The pain is of such severity as to deprive him of sleep. On examining the eye, a slight blush of conjunctival inflammation was to be seen; the pupil was found fixed, contracted, and somewhat of an oval shape, resembling very much the contracted pupil of a cat. The iris had lost its brilliancy, and from a light blue, its natural colour, it had become of a dirty muddy appearance, more particularly at its pupillary margin. It was convex, and seemed as if pressed forward into the anterior chamber of the aqueous humour, but not exactly in contact with the cornea. The pupil did not present the clear jet black colour of a healthy eye, but of a bright shining yellow colour, in fact, so evident, as to be seen at the distance of several feet, and resembling the colour of a piece of gold in the bottom of a wine-glass when full of water, and had the metallic appearance in different shades, as the gold has when passed before the eyes in the glass. From the convex state of the iris, the yellow colour appeared as if it arose from some tumour at the posterior part of the eye, and a vessel was thought to be seen arising from the lower part, and proceeding upwards. The eye itself was not increased in size, nor was there any circle or zone of vessels surrounding the cornea, as commonly attending iritis, nor was the sensibility of the eye increased, as the boy could look at objects in a pretty strong light with the right eye, without causing any uneasiness in the left. The only thing he complained of, was the pain at night, depriving him of rest, and, by that means, undermining his general health, and of course preventing him from attending his daily work, which was assisting in rolling leaf tobacco. On first observing the eye, I was clearly of opinion that it was a case of fungus hæmatodes in its earliest stage; that it had existed for some time, and that the

little fellow's attention had only been directed to it after receiving the slight injury; and being fully aware of the difference of opinion regarding the propriety of extirpation of the eye, I showed the case to several medical gentlemen here, who concurred with me in thinking, that the case showed all the symptoms of that fatal disease. Considering that from its recent state it must be a favourable case for putting in force any course of practice, I forwarded an outline of the case, along with a rough sketch of the eye, for the opinion of Mr. Guthrie, of the Royal Westminster Hospital; a gentleman whose talents, extensive experience, and intimate knowledge of diseases of the eye, must at all times entitle his opinion to be held in the greatest estimation. At the same time I ordered a purgative to clear out the bowels, and a dose of calomel and opium to be taken at bed-time, for the purpose of procuring sleep, and putting the system directly under the influence of mercury, being fully aware that if any or all of the symptoms arose from inflammation of the internal coats, it would be most likely to yield to the mercurial action. By return of post, I received a polite letter from Mr. Guthrie, stating, that he thought it would turn out to be a case of dislocation of the lens accompanied with iritis, in place of being a case of fungus hæmatodes; and recommending local bleeding, if the inflammation returned, calomel, &c. By this time, however, the boy's mouth was sore, by the repeated doses of the calomel and opium; the pain was nearly gone in his head at night, and from his obtaining sleep, his general health was improved. I kept up the mercurial action until all the symptoms were gone, except the yellow shining colour of the pupil, and this also gradually went away in the course of a few weeks.

The patient has now been quite well for some months, the iris has nearly regained its natural colour, but remains convex, contracted, and projecting into the anterior chamber of the aqueous humour. The eye is of its natural size, and the crystalline lens can now be distinctly seen, of an opaque colour, pressing forwards into the pupil; and the eye on the whole has now the appearance as affected with cataract, proceeding from any other cause.

On looking over the above case, it may appear of little interest, but, on considering some of the symptoms and appearance of the eye, when the boy applied first to the institution, I am rather at a loss to account for them. That most of the symptoms of this case arose from iritis, will not admit of a doubt, and that the inflammation of the iris was caused by the dislocation and pressing forward of the lens on the iris, as stated by Mr. Guthrie, is also evident; but how was

the yellow colour of the pupil produced? it was not of that faint yellow appearance which I have often seen attending the commencement of amaurosis, but a colour of a shiny nature, as if arising from reflection, and easily seen at a considerable distance from the boy. Now, on looking at the symptoms as a whole, the patient had certainly most, if not all, the symptoms of that fatal disease fungus hæmatodes, in its earliest stage; the boy's age, sickly appearance, nocturnal pain of the head, and above all, the yellow colour of the pupil, are all symptoms attending the above disease as described by Wardrop, Lawrence, &c. It is also true, the symptoms are the same in an attack of simple iritis, but still the yellow appearance of the pupil remains to be accounted for. I am not acquainted with any disease, nor do I know any author who mentions that state of the pupil, unless in that of fungus hæmatodes. In the case mentioned by Mr. Travers, as resembling fungus hæmatodes, the eye was enlarged, but, in the present case, no such alteration took place; cases are recorded, where, after repeated emetics have been given, the crystalline lens of each eye became of a red colour for some time, and gradually wore off without producing any derangement of the organ. The eye has become of a yellow colour in cases of icterus, from the absorption of the bile, but in this case, no symptoms of jaundice were present, and the colour of the other pupil remained perfectly natural. I am inclined to think, that the yellow appearance may have been produced either by inflammation and effusion of lymph in the posterior capsule of the lens, or that an effusion of the thinner parts of the blood may have taken place from the rupture of the central artery of the vitreous humour.

I have only to say, that to myself the case was perfectly new, and am partly inclined to think, that from the distinct nature of the symptoms, had it fallen into the hands of some of those who are strong advocates for extirpation of the eye in the early stages of fungus hæmatodes, it might have been extirpated, and afterwards held out as a successful case of operation in that fatal disease; and by such statement entailing, in doubtful cases, an operation on patients, which, according to the extensive experience of Mr. Lawrence, is useless, because if it be a case of fungus hæmatodes, it will return and carry off the patient, and, if it be not that disease, is performing a painful operation when not required.

Aberdeen, July 21st, 1830.

THE LANCET.

London, Saturday, August 7, 1830.

IN the "prospectus" published by the "Society of General Practitioners," it was stated that it was the object of the promoters of the Society to form an union of "General Practitioners," for the protection of their particular interests, and "to effect such an alteration of existing laws and customs as should promote the prosperity and respectability of the general body of practitioners."

The Society has now issued its "rules and regulations," from which it may at once be perceived that, with the exception of the "Benevolent Fund," it has already sunk from its pretended high character as a REFORMATION society, and now bears only the same features as other medical societies. In a word, it appears from the Rules and Regulations, that it is to become a common Debating Society,—with the appendage of a reading room,—and also a library, museum, and benevolent fund, if the means can be procured for forming them. The President, Vice-Presidents, and Committee, are to be chosen in the usual manner, and, so far as we can discover, all the affairs of the society are to be conducted on the same plan as that of the medical societies already established;—with the exception that, agreeably to the second regulation, the MEMBERS are to be exclusively "general practitioners in medicine and surgery." In the very face, however, of this regulation, several of the existing committee *are not surgeons*. The committee is not yet complete, consisting of only twenty-one members; the rules prescribe that the number must be twenty-five. On the subject of the "benevolent fund" it is stated, that "A fund is to be formed, by contributions and donations from members of the society and other persons, and to be under the management and control of the committee for the time