Section of Ophthalmology.

President—Mr. Ernest Clarke, C.V.O., F.R.C.S.

CLINICAL MEETING.

Held at the Central London Ophthalmic Hospital, Judd Street, December 10, 1926.

Peculiar Opacity of Cornea.

By Leslie Paton, F.R.C.S.

I saw this patient a week ago. He had then been under treatment for over two years as a case of subacute glaucoma. I think the diagnosis was based on the occurrence of haloes. I could not myself find evidence of glaucoma except for these haloes. The tension was somewhat subnormal, the anterior chambers were fairly deep, there was no trace of venous pulsation, nor of cupping of the disc, and no real evidence of any condition pointing to glaucoma. The vision was good, considering the amount of opacity in the cornea, namely, $\frac{6}{9}$ with correction in the right eye, $\frac{6}{60}$ in the left eye, but he has not used the left eye for a long time. He has a persistent pupillary membrane in the left eye. The explanation of the haloes lies in the deep haze in the cornea, which is the result of old keratitis profunda.

The main reason for bringing the case is to obtain the opinions of the slit-lamp experts on it. Most of us are at present only amateurs in the use of the slit-lamp. I would like opinions on the curious appearance of haze in the left eye, not exactly on Descemet's membrane, but in the very deep layers of the substantia propria. There are curious little rosettes of spindles, the spindles having a double contour. They are not, I think, crystalline, and the position is against them being folds in Descemet's membrane. It is these rosettes of spindles forming a mosaic in the very deep layers of the cornea which perplex me, and I would like to know if any Members have seen anything like it before. I have not.

Recurrent Intra-Ocular Hæmorrhage in a Young Male.

By H. M. Gilmour, L.R.C.P.Lond., M.R.C.S.Eng. (Ipswich).

Patient, a farm labourer, aged 23, who saw me on September 23, complaining that vision had failed three weeks previously. Right vision = $\frac{6}{12}$, left vision = $\frac{6}{60}$.

Right eye shows recent blood-clot in the vitreous and a retinal detachment below. Left eye has a mass of fibrous tissue in the vitreous, presumably the consequence of hæmorrhage at some former time, no retinal detachment can be demonstrated. In both eyes transillumination is good.

We excluded syphilis, diabetes, nephritis; all the organs were examined and found healthy. No von Pirquet test has been made. Seeking a cause I considered that the most profitable line of inquiry would be along the assumption that a mild infection of the blood was present; some support for this supposition was provided by the fact that the patient during the first three weeks had an intermittent elevation of temperature. The teeth were X-rayed but nothing was shown to be wrong with