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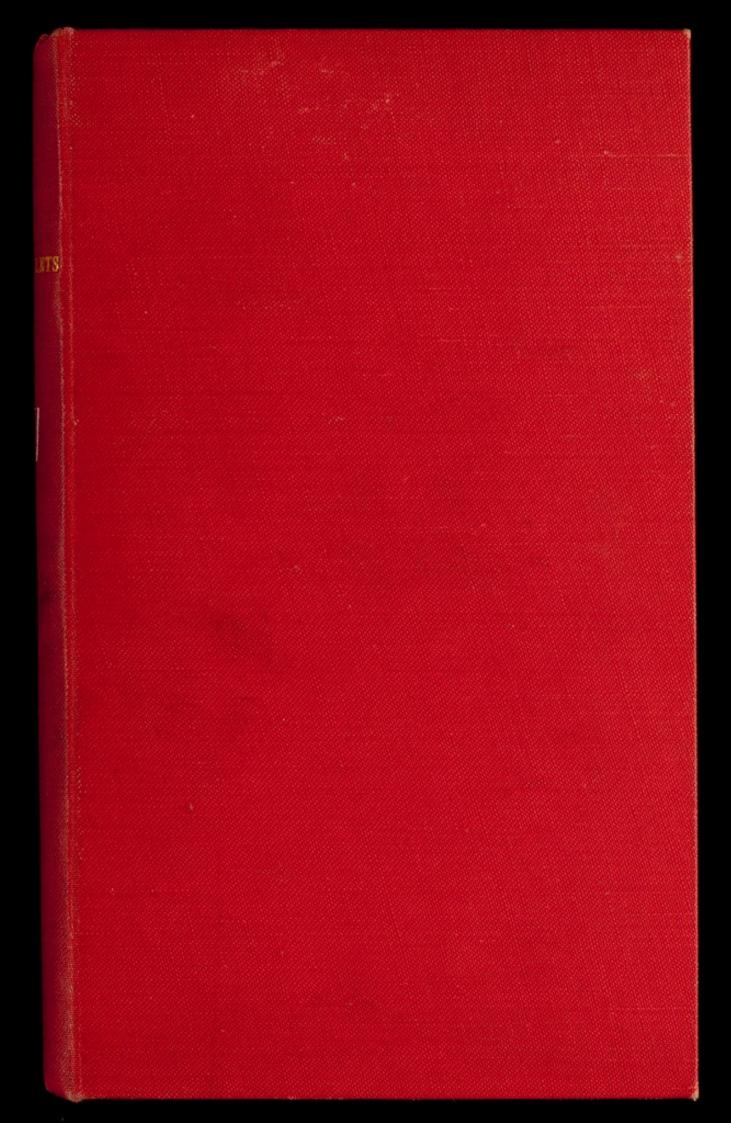
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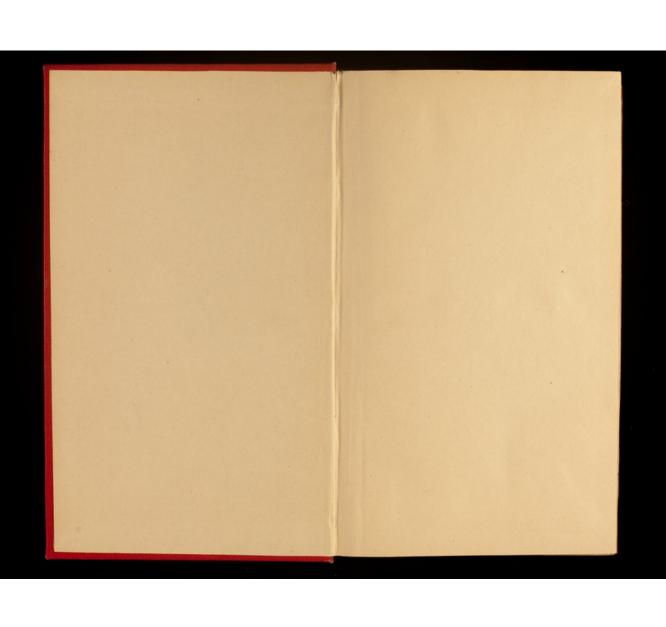
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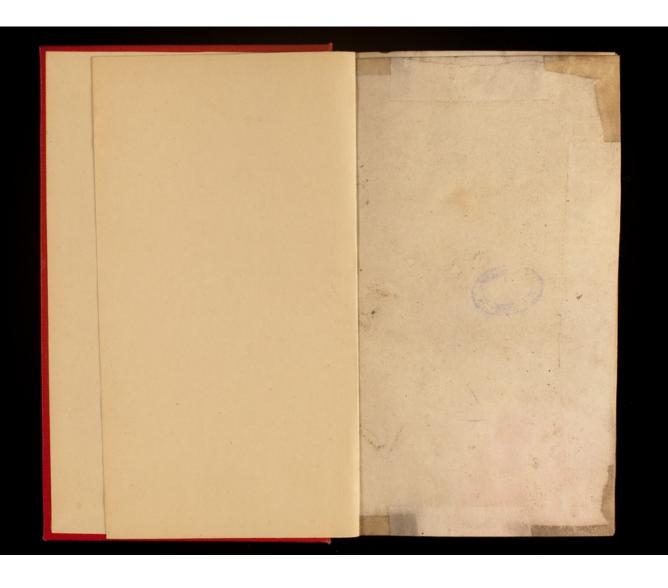
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THE TREATMENT

BY

SIR WILLIAM ADAMS,

OF THE

OPHTHALMIC CASES

OF THE ARMY.

BY

JOHN VETCH, M. D.

PHYSICIAN TO THE FORCES,
MEMBER OF THE MEDICAL AND CHRURGICAL SOCIETY OF LONDON,
AND OF THE ROYAL MEDICAL SOCIETY EDINBURGIL.

London:

PRINTED FOR J. CALLOW, MEDICAL BOOKSELLER, CROWN COURT, PRINCES STREET, SOHO,
BY J. DAYN, QUEEN STREET, SEVEN DIALS,

1818.
(Price One Shilling and Sispence.)

OBSERVATIONS.

AT an early period with respect to the appearance of Ophthalmia in the British army, I was placed in charge of the Hospital established for the reception of that disease; and having conducted with success the treatment of more than three thousand cases, when its ravages at other places was great and alarming; I am in a more particular manner called upon to examine, with some attention, the grounds on which Sir WM. Adams has advanced pretensions to the discovery of "those new and successful methods of treating the disease," which have been announced to the army, in the circular letter of the Right Honourable the Secretary at War, dated August 1817.

In consequence of a statement, made by the Right Honourable the Secretary at War, in the House of Commons, in the latter end of the Session of Parliament of 1816, which gave me the first authentic information of the nature of the claims advanced by Sir Wm. Adams, to a more effectual treatment of the Ophthalmic cases of the Army—I lost no time in submitting a detailed account and return of the success which had marked my treatment of the acute disease, both with a view to its cure and eradication from the army; as well as of that affection of the Cornea which is liable to supervene, when the previous disease has been neglected or mismanaged.

This statement I was led to submit, less in justice to my own claims, than in behalf of those who were practically concerned in the issue of the question; inasmuch as the pretensions of Sir Wm. Adams led to the temporary substitution of a severe, and ineffectual operation, in the room of that treatment which I had successfully employed, in a wider range of cases than, it is to be hoped, will again occur in military practice; and the efficacy of which I professed myself willing to demonstrate, if admitted to a fair and comparative trial, with any means it was in the power of Sir Wm. Adams, even at that time, to suggest.

In a letter addressed by Sir Wm. Adams to the Governors of Greenwich Hospital, the nature and the value of his discoveries are at last detailed. However averse I am to carry the discussion of such a subject beyond the strict limits of professional arbitration, the direct reference made in that letter, to my name and practice, induce me to take this general notice of the pretensions he has advanced, and which appear to come under three distinct heads.

§ With respect to Sir Wm. Adams's treatment, in the commencement of the disease, by violent vomiting, I shall say but little, convinced as I am, that even he himself, should he ever see a case of real Egyptian Ophthalmia, in its violent and purulent stage, will not venture to place his principal trust in such a remedy.

On this head he has manifestly founded his conclusions relative to the treatment of the purulent Ophthalmia, which prevailed in the army, from the catarrhal form of disease, which chiefly shows itself among children, when much crowded together, and which, although an infectious disease, is specifically different from the one with which I have had to combat; or at the most, his experience of the purulent disease in

its early stage, has been confined to its appearance at the Military Asylum, where the age or the sex of the patients, prevented it ever acquiring the excessive violence which it assumed in the army.

Sir William insists particularly on the distinction betwixt violent vomiting, kept up for eight or ten hours, by emetic tartar, which he proposes, and a constant degree of nausea, which was one of the means of cure, commonly tried by others. The difference may readily be admitted; but I am able to assert, that if far more efficacious means than either, are not had recourse to, in the genuine form of the disease, the termination will add to the number of those who have already fallen victims to its ravages, and will soon prove, that innovation may be tried at too great a risque. No person can, with less justice than myself, be accused of a rash and indiscriminate recourse to the lancet; and I wholly disclaim the abuse of this efficient remedy, as described by Sir Wm. Adams. The rules which I was enabled to lay down, to guide the employment of general depletion, and the aids I derived from powerful and local treatment, are open to examination, and on an early occasion will be strictly detailed.

§ I proceed to examine the nature and the effieacy of the discovery, claimed by Sir Wm. Adams, for the cure of Opaque Cornea. With respect to his present practice, I must presume, that he either adheres to his original plan of treatment by excision, which I have declared, and which I can now prove to be from his own evidence, (independent of many objections to its general application) incompetent of itself to the cure of the disease; or, that he is forced to combine with the operation those very means which it was introduced to supersede, and of which, I may venture to say, that Sir Wm. Adams has still something to learn, both as to their value, and their proper mode of application.* I shall, therefore, in the first place, submit some general observations respecting the

[•] In the month of September, ISIL Sir W. Adams admitted to a patient (who, in consequence of that admission, put himself under my care) that there were but two ways of applying caustic for the cure of opaque cornea—one was by dropping a solution of it into the eye, which he actually ordered; the other, he said, would be so violent in its operation, as to occasion excruciating pain, and endanger the safety of the eye. I refer to the case of the Honbia Capt. C. ——, R. N. The success which immediately attended the use of caustic in this case, without causing either pain, risque, or even momentary confinement, only shews the material difference produced by the same remedy, according to the mode in which it is employed.

disease itself; and, in the second place, I shall review the statements, now published, of its practical results.

It has been objected to the claims of Sir Wm. Adams, that he took the knowledge of the operation from the practice of the late Mr. Saunders; I must, in justice to myself observe, that in my account of the Ophthalmia of the Army, printed in 1806, when it would be easy to prove that I could not have had access to the opinions or practice of Mr. Saunders, I distinctly, and prior to any modern writer, made use of the term of Granular Surface, to describe the diseased state of the linings of the Palpebræ, which supervenes on Purulent Ophthalmia; and explicitly mentioned the bad effects resulting from the excision of the surface so diseased, and the means which I then found, and still assert to be better adapted to the purpose of restoring the membrane to its healthy condition. My subsequent experience rendered the cure of opaque cornea, depending on that diseased state of the palpebral linings, so much a matter of uniform result at the Ophthalmia Hospital, that long before I heard that there was such a person as Sir Wm. Adams, I had no reason to doubt

but that my success was both understood and appreciated,*

If it be objected to these early operations that the scissors were used instead of the knife, I beg to say, that both these instruments had been repeatedly employed; and I do not scruple to assert, that where the operation is required, the scissors are the better instrument of the two; that the surface which follows excision by them is less irritable, and less disposed to a reproduction of fungus; that there is also less risque of wounding the semilunar cartilage of the palpebræ, an accident very likely to occur in the mode of operating performed by Sir Wm. Adams, and which I apprehend to have happened in some cases where the operation has led to a termination fatal to the organ.

The cure of this granulated surface of the palpebrae, by means of excision, is mentioned by Hippocrates; and the disease under the names of Sycosis and Scabies Palpebrarum, is distinctly described by the succeeding authors of the Greek and Latin schools; and the cure as

The change in the direction of the Army Medical Department subsequent to the Walcheren expedition, will explain the want of support which my services would otherwise have received.

precisely directed by the three methods of excision, abrasion, and cauterisation. The Arabian authors are still more minute in their details respecting the treatment of opaque cornea, under the term Sebel, nor has it been left to modern times to suggest any improvement even in the mode of operating. The eversion of the eyelid upon a metallic plate, although rather an addition than an improvement, is expressly directed by the commentators on these authors. However much these facts are at variance with originality, I nevertheless consider that he who revives a useful practice, after it has fallen into general disuse and oblivion, is entitled to as much merit as if he had made the discovery in point of time, as well as in point of fact; and every liberal person must regret that the knowledge of antiquity should ever be used to obscure the reputation of a successful innovator. In the present instance, however, the revival of the operation is a retrogression in point of practice, and it is against the utility and the exaggerated expectations held out from its adoption, that I have hitherto endeavoured to contend. As the excellence of modern surgery is not less conspicuous in the abridged necessity for operating in many diseases, than in the refinement of those operations which it retains; the introduction of an

operation where milder means are sufficient, could never have been deemed an improvement, by those appointed to judge, if the case had been brought fairly before them.

I shall now follow the evidence of the cases recently published by Sir Wm. Adams, in order to shew how inexpedient the operation has proved itself to be, and how completely he has failed in the application of it.

Of the cases adduced by Sir Wm. Adams, in the publication referred to—"A Letter addressed to the Governors of Greenwich Hospital"—I shall confine my observations to those which he received from the hospital under my directions, and which he includes in what he calls the second trial of his operation. Their names are Joseph Winter, John Capel, and David Grey, being three men out of five whom Sir Wm. Adams was permitted to select from the whole number of cases, which I left at the Ophthalmia Hospital, when removed from that duty, and which he of course selected as the most favourable for the plan of treatment he had then in view.

I must not omit to mention, amongst the difficulties which I had to surmount, in the management of army cases, the practices used by men, for the purpose of retarding their recovery, and of resisting the means of cure, when they wished to obtain their discharge from the service. On the occasion of the cases selected by Sir W. Adams for the trial of his treatment, an official letter was sent by the Adjutant General, to the Commandant of the Depôt, conveying a promise to the men so selected, that in the event of their recovery, under the treatment which Sir Wm. Adams might employ, they would receive each a bounty of thirty-six guineas, or a free discharge and a pension. The moral obstacles being thus removed, the little success which seems to have followed, can only be imputed to the injudicious use of the operation; the occasional effects of which may be learned in the cases preceding those to which I confine my observations.* I

am fully warranted in the belief, that if these men had been simply removed to a healthy situation, and if the offer made to them of a free discharge had been allowed to operate in place of Sir Wm. Adams, the result would have been more favorable than it has actually proved.

The names of the two men whom Sir Wm. Adams omits to notice in his published report, are William Wells of the 52d, and Sergeant Treble of the 43d regiments: these men Sir Wm. Adams found it expedient to reject, after having kept them for a month under his treatment, on the frivolous pretext that caustic had been applied to them by the officer who succeeded me in charge of the Ophthalmic Hospital. Of the three remaining cases, John Winter is reported to be cured, and, according to the promise given, is discharged with a pension; John Capel is dismissed with one eye " irrecoverably lost;" and David Grey with only one eye improved, after the lapse of two years and three months.

1 shall afford each of these cases a separate examination.

^{*} For instance, in the case of John Bickley, the inflammation, by which "he nearly lost his eye," is ascribed to the Walcheren Fever. In John Smith, the failure is said to be owing to the purgative quality of some cascarilla bark internally administered; and the unfortunate issue of the case of John Miller, whom he states "to have entirely lost one eye by the violent inflammation and furgus which resulted from the operation," is acribed to the same purgative quality in cascarilla bark,—vide page \$1.

First. In relating the case of Joseph Winter, Sir Wm. Adams states, "that it never was my " practice to examine the interior of the upper " eyelids, until my return from the York Hos-" pital in March 1812, where I had been to " see his new operations;" and when (he adds in a note) "he saw Dr. Vetch." On what grounds Sir Wm. Adams has had the hardiness to advance an assertion so wholly without foundation, I am at a loss to conceive. On the examination of, and in the application to the inner surface of the upper eyelids, no man can have insisted more strongly than myself. I shall annex two cases; one extracted from the Hospital Registers, and treated by incision, in 1809; the other, by an escharotic application, in 1811, as stated by the patient himself, Capt. Robinson, of the 88th Regiment.

The remaining part of the assertion, which makes me appear at the York Hospital, for the purpose of seeing Sir Wm. Adams, and his new operations, is equally erroneous, and up to the present hour I have never been in the same room with Sir Wm. Adams, nor seen any case on which he has operated for opaque cornea.

I am still in possession of a letter from the late Director General, expressing his dissatisfaction at my having declined an interview with Sir Wm. Adams; together with my answer, containing my reasons for so doing, until his operations could be judged of by their final effects. The time to which Sir Wm. Adams refers, is June, and not March, 1812; in which month I did accompany Mr. Weir to the York Hospital, but without seeing either Sir Wm. Adams or his practice, farther than the former was pointed out to me at a distance too great for me to know one person from another.

The second case, John Capel. — Sir Wm. Adams says, that this man was considered by me as incurable; a statement not only contrary to truth, but inconsistent with the whole tenor of the regulations which I had established, and which, as long as I had charge of an hospital, were steadily adhered to. By these regulations, all men affected by opaque cornea, no matter to what extent, were returned, not as blind, but as recoverable for at least garrison duty, and treated accordingly. The impaired state of this man's health, and the unfitness of the situation for his recovery, sufficiently explain the length of time,

during which he continued to lose by frequent relapses, the progress gained in the intervals; when admitted he laboured under a third attack of acute purulent Ophthalmia, and was saved from the imminent hazard of losing his right eye, by the treatment immediately resorted to.

But a more important error in the narrative of this case remains to be noticed. At the time this man was selected by Sir Wm. Adams, it appears by the evidence of the official report made to the Medical Board of the state of his eyes, as well as by that of a memorandum in the handwriting of Sir Wm. that he was selected with the susceptibility of recovery in both eyes; and indeed, it is not to be supposed that Sir Wm. Adams would have made choice of a case which was otherwise. This man, however, is in the final return stated by Sir Wm. Adams to have " irrecoverably lost" the left eye, and which he asserts was lost under my care. The registers of the hospital, afford a minute detail of the case, the evidence from which is, that the left eye was the best of the two: Sir Wm. Adams, in his own hand writing, states the case as one of opaque cornea, with diseased palpebral linings, and notices an inversion of the upper eye-lid, but no mention is made of the left eye

being different from the right. The state of this man is farther reported, by my successor at the hospital, as one of simple opaque cornea, with diseased linings of the palpebræ. That Sir Wm. Adams should lose an eye by the operation, does not surprize me; but if the statements I have quoted are correct, his attempt to conceal the misfortune by such a substerfuge, is what I could not expect. It is not enough for Sir Wm. Adams to say, or rather to prove, that he did not perform the operation on the left eye, as he must be well aware that the inflammation excited by the operation in one eye, might very possibly lead to such a return of active disease in the other, as would, in the debilitated state of the organ, eventually occasion its "irrecoverable loss."

In the narrative of the case of David Grey, the last in which I have any interest, he states him to have been "upwards of two years at Bognor" (page 38); whereas he was admitted on the 7th of August, 1812, and selected by Sir Wm. Adams on the 12th of October, in the same year, making a period of nine weeks; and during that short space of time, he experienced a more rapid improvement, than he appears to have

done during two years and three months, which elapsed from the time of his selection by Sir Wm. Adams, to his final examination by the physician, the surgeon, the apothecary, the assistant surgeon, and the assistant apothecary, of Greenwich Hospital, whom Sir Wm. Adams nominates as a board of appeal, from the report given by Sir Henry Halford, Dr. Baillie, Sir Everard Home, Mr. Cline, Mr. Cooper, and Mr. Abernethy, the Board appointed by the Commander in Chief.

By a P.S. at page 38, Sir Wm. Adams appears but half satisfied with the opinion given by this Board of his own selection.

Selected by Sir Wm. Adams on the		
12th of October, 1812, five cases —(of which)		
Two were afterwards rejected	2	
Two cured of one eye-and	2	
One cured of both-all discharged with		
pensions	1	
Total	******	5

From the ample experience now gained of the operation, in consequence of its having been employed in army practice, with rather more zeal than discrimination, the following conclusions will, I believe, be found correct.

First, that of itself the operation, however frequently repeated, is unequal to the cure of opaque cornea; while, on the other hand, the treatment I adopted in the disease, does not require the aid of an operation in one case out of fifty.

Secondly, that the operation, besides being in itself very painful, requires to be indefinitely repeated, and is often followed by inflammation; while the treatment by the properly graduated application of caustic substances, produces neither pain nor inflammation.

Thirdly, in many cases where a new and white surface has been obtained, after the repeated use of excision, the cornea often remains vascular, a circumstance which never happens when the cure of the membrane lining the eyelid, has been effected by the action of escharotics, properly applied, the cure of the cornea

invariably keeping pace with that of the membrane.

EXTRACT from a GENERAL RETURN of the OPHTHAL-MIA DEPOT from the 17th November, 1807, (the date of its establishment) to the 12th March, 1812, shewing the result of the treatment of Opaque Cornea.

ADMITTED.

Labouring under Opaque Cornea, with vision	
either lost or impaired · · · · · · · · · · · · · · · · · · ·	536
DISCHARGED.	
Cured of both eyes-to their Regiments 65	
Ditto, ditto, but transferred to Veteran	
Battalions 247	
Sent to Chelsea, on account of age and	
other infirmities ****** 70	
Deaths, by other diseases 7	
Discharged, with Pensions for Blindness,	
being two-thirds of the total loss	
out of 3000 cases 20	
Under treatment 127	
to the second state of the post of the post	
Total	536

The third claim of Sir Wm. Adams, consists in asserting, that he first called the attention of the Medical Board to the importance of restoring the healthy state of the palpebral linings, previous to the discharge of the patients. On this very point I am willing to rest the whole of my claims to consideration, for however great the saving has been to the nation, by my successful treatment of more than three thousand cases of this formidable disease; and of which success, I again invite the most minute and severe scrutiny; yet this saving of men is not to be compared with the benefit derived by my unwearied exertions in calling attention to this particular point of practice. Charges have been preferred against me in consequence of what I may call a religious adherence to this rule, which I was the first to introduce into practice, and on which, I well knew the immunity of the army from the disease, would in a great measure depend. The issue of one charge, preferred by a general officer, supported by the certificate of surgeons, who were ignorant of this important feature of the disease, after much vexatious enquiry, procured me a letter of full approbation from His Excellency Sir David Dundas, dated 9th of November, 1809.

To prove my undeviating attention to the restoration of the healthy colour and condition of the palpebral linings, previous to the discharge of any man to his regiment, I can call upon every individual, who ever came under my care for this disease. Not one of them was considered cured, until this point was confirmed, by repeated and careful examination of the inner surface of the eyelids. Their testimony will be corroborated by every military or medical officer employed in duty along with me, from the latter end of 1806, when I first took an independent charge of the disease, to the autumn of 1812, when I resigned it. During the whole of the above time I never was prevented, either by sickness or by absence, from personally performing this duty. If Sir Wm. Adams means to say that he would employ the operation of excision in convalescent cases, where this is the only remaining affection left by ophthalmia, either with a view of rendering the recovery more certain, or more expeditions, it is altogether too absurd to be reasoned upon; if he does not, his proposal goes no farther than to follow the criterion which I established, which I zealously adhered to in my own practice, and endeavoured to promulgate as extensively as it was in my power to do. It is most unreasonable that I should be implicated in any ignorance or

inattention, manifested by others, on this or any other question connected with the disease.

An error having obtained at quarters of high authority, that the cases of blindness sent at one time in great numbers, from the Ophthalmic Depôt to the York Hospital, had been lost to the service while at the former place; I think it right not to omit this opportunity of stating, that these cases merely passed through the hospital under my care, on their arrival from foreign stations, in a state of hopeless blindness; the number of such was at times so great, as to render it necessary to erect tents for their accommodation, the hospital being fully occupied by acute cases, to which even separate beds could not be allotted. The returns accompanying such men to the York Hospital, will shew the place where each individual lost his sight, and the loss at the Ophthalmic Hospital will not be found to exceed thirty cases.

I shall conclude these observations with two practical maxims, of the highest importance, for the truth of which I can appeal, both to my hospital practice, and to those who assisted me in the execution of it—viz. that the first attack of Ophthalmic Inflammation may, in every case,

be conducted to a successful termination; and that the Purulent Ophthalmia may at all times be prevented from spreading itself in any regiment, or body of individuals, by making the state of the membrane lining the eyelids, the criterion of the commencement, as well as of the termination of the disease.

Seymour Terrace, 1st Feb. 1818.

APPENDIX.

Case of Robert Bolderson, aged 19, 84th Foot.

Nov. 20, 1809. Disease principally confined to the lining of the palpebrae, which are swollen and villous, secreting a quantity of thick purulent matter. Lachrymal discharge little augmented, but hot.

21. Eyes feel easier, lachrymal discharge cold.

22. The fungus palpebrarum continues the same.

Dec. 17. The fungus less prominent; has been frequently touched with the argentum nitratum and also portions have been removed by the seissors, with evident

Jan. 15, 1810. The lining of the palpebræ assumes less of a granulated appearance, and is of a much paler color.

N.B. This man, after being attacked by fever and a tedious affection of the skin, was dismissed cured to his regiment, the 2d of July, 1810.

Case of Captain Robertson, 88th Regiment.

I regret that I cannot describe your treatment of my eyes in the language of the profession; but, I hope, that in the brief and simple narrative I shall give of it, I shall be able to make myself understood. I reached the Oph-thalmia Depôt about the 20th of February, 1811, and the benefit I derived from your practice and attention at the

Depôt, made so deep an impression on my mind, that I still do, and ever shall retain, a perfect recollection of your treatment of my eyes. Your first instructions to me, after my arrival at Aldwick, related to regimen, exercise, and in a general way to the manner I was to live; you first gave me some purgative medicines, and then began to apply vitriol to the inside or inner surface of my upper cyclids; you continued this application generally every second day, for at least two months. Sometimes the application of the vitriol caused considerable irritation; on those occasions you allowed the eye to recover a little before you applied it again, I was under your immediate care at the Ophthalmia Depôt nearly three months, viz. from the latter end of February to the 20th of May, 1811. My eyes made no progress towards improvement for some months before I got to Aldwick, the disease was then in a chronic state; but I had not been at the Depôt above a fortnight, when I found that I could see much better, and my sight continued to improve without any interruption after. Indeed I was equally delighted and astonished at the rapidity of the recovery I made whilst under your care; and I repeat, that I conceive it is to your abilities, exertions, and experience, I am entirely indebted for the restoration of my sight.

DANIEL ROBERTSON.

Blair Athol, 18th Dec. 1817.

THE END.

Printed by J. DAVY, Queen Street, Seven Dials.

FACTS .

AND

DOCUMENTS

RELATING TO THE

ESTABLISHMENT

OF THE

OPETHALMIC HOSPITAL.

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LONDON:

PRINTED BY L. HARRISON, 373, STRAND.

1821.

SECT. I.

FACTS AND DOCUMENTS .

Relating to the Establishment of the OPHTHALMIC HOSPITAL.

THE extensive prevalence of the Egyptian Ophthalmia in the Army, the inveterate nature of the disease, and the number of soldiers rendered unfit for service by the loss of sight, notwithstanding the best efforts of Army Practitioners to arrest the progress of the malady, had excited the serious attention of the late, as well as the present Commander in Chief. For the purpose of remedying the evil, the Commander in Chief in 1810 appointed a Special Medical Board, of eleven of the highest civil and military professional authorities in the metropolis, composed of Physicians, Surgeons, and Oculists*, to consider and determine, upon "the means of prevention, and the methods of cure," for this disease; and their report thereon being printed, was given out in "General Orders" from the Horse Guards, April 10, 1810, "for the information of the commanding officers of regiments, and for the guidance of all Medical Officers belonging to the service."

By reference, however, to that report, it will be seen that the third or granular stage of the disease, upon the removal of which entirely depends the radical cure of the malady, and the prevention of its cantagion (the two objects for which the Committee was appointed), was neither described, nor any plan of treatment laid down for its cure: consequently the Ophthalmia still continued to prevail in the

In the year 1809, Sir W. Adams was practising at Exeter, and had, by adopting a peculiar mode of treatment, restored several blind pensioners to sight, labouring under the third or granular stage of Ophthalmia, who had been discharged from the army as incurable.

* Namely,

Sir Lucas Pepys, Bart.

Sir Heary Halford, Bart.

Thomas Keate, Esq.

Sir Lucas Pepys, Bart. Sir Henry Halford, Bart. Sir Gilbert Blanc, Bart. Dr. Baillie. Dr. Moseley. Sir Everard Home, Bart.

Henry Cline, Esq. James Ware, Esq. Wathen Phipps, Esq.

The circumstance came to the knowledge of the late General Thewles (then the Commander of the Western District), who, after be had inspected some of them, urged the propriety of an immediate communication on the subject to Sir David Dundas, then Commander in Chief, which, in 1810, led to the introduction of Sir W. Adams to him by the Adjutant General; when, as a preparatory step to Sir W. Adams's proposal to call in the blind pensioners for treatment, with a view to the saving of pensions, and the restoring men to the service, it was suggested that a limited number of the worst Ophthalmic cases should be placed under his care, for the purpose of proving upon them the efficacy of his practice. The Army Medical Department, however, having been consulted, obstacles arose which prevented the execution of the proposed trial:

In the latter part of 1811, after Sir W. Adams settled in London, he was sent for to the Horse Guards by the Adjutant General. At this interview the strongest encouragement was held out to Sir W Adams to communicate his improved methods of treating the Ophthalmia, for the benefit of the army, and he was assured of the warm support of the Commander in Chief, and of the liberal co-operation of the Army Medical Board. The great importance attached by his Royal Highness to the obtaining an effectual cure for the Ophthalmia was repeatedly confirmed in official correspondence, but more particularly in a letter, of which the following is a copy, addressed by the Adjutant General to Sir W. Adams

HORSE GUARDS, Sept. 12, 1812.

I have delayed replying to your note of the 2d instant until I have an opportunity of laying the accompanying papers before the Commander in Chief, a of stating to his Royal Highness the very satisfactory appearance of the three Ophtl. of string to his koyal highness the very sacratically appearance in the price Opinion.

mic Patients whom you sent to the Horse Guards. His Royal Highness commanded in

to assure you, that he is fully impressed with the importance of the consequences which my

result from your mode of treatment; and with a view of affording an apportunity of effect

tably accretioning its merit and success, has directed Mr. Weir to make an arrangement

to that you may have a serjeant and six patients placed solely and distinctly under your car so that you may nave a very contain an at a person of the content sight being restored, that no obstruction or impediment of that nature may be in the ay of your endeavours. It will be proper for you to come I have, &c. &c.
H. CALVERT,
(A. G.) the selection of the patients.

thority, and upon a subject so intimately connected with the public welfare and with humanity, Sir W. Adams did not deem it necessary to make specific stipulations (his views having been distinctly stated in a letter addressed to the Commander in Chief in 1810, at the express desire of the Adjutant General), but he proceeded freely and fully to communicate to the Medical Department of the Army, his opinions and practice for the radical cure of the Egyptian Ophthalmia.

So far, however, from receiving the expected co-operation of the Army Medical Board, Sir W. Adams, from his first interview with them early in 1812 up to the present period, has experienced their most decided hostility, in their continued endeavours to frustrate. his views, and to counteract his efforts. This conduct became so apparent, that by order of his Royal Highness the Commander in Chief so early as 1812, the Adjutant General addressed a letter of admonition to the Director General of the Army Medical Board, of which the following copy was sent to Sir W. Adams by the Adjutant

Horse Guards, Dec. 2, 1812.

Shis, Hossis Guants, Dec. 2, 1812.

I have the honour to acknowledge the receipt of your letters of the 25th and 26th ult, with their several inclosures, and am directed to state distinctly, that "after the various communications which had been made to you, expressive of the Communitor in Chief's intentions on the molject, it was expected that Mr. Adams would have been furnished with a selection of patients, unexceptionable in all respects, for the proposed trial of his mode of practice; and that the fullest explanation of their provious medical treatment would have been redundarily given him, that he might have been enabled to form a correct judgment on their cases. I am commanded to add, that his Royal Highness now looks to you for his instructions in this respect being most fully carried into effect, in order that a point so essentially involving, not only the health of in-dividuals, but the efficiency of the army at large, may be decided in the only satisfactory way, by a fair experiment of the efficacy of Mr. Adams's mode of treatment*

To the Director General, &c. &c.

Mr. Adams .

I have, &c. &c.

II. CALVERT, (A. G.)

* In proof of the manner in which the efficiency of whole regiments have been in peded by the Egyptian Ophthalmia, even for years in succession, the following instances from among many others may be adduced:

In the 2nd battalion of the 52nd regiment, consisting of 691 men, 733 cases (including

relapses) occurred between July 1805 and July 1806, of whom 50 men within that period lost the sight of both eyes, and 40 of one eye: 1341 cases occurred in that regiment within continued to rage for a long time afterwards

In the 43d regiment 619 cases (including relapses) occurred: 19 men lost both eyes

In the 2nd battalion of the 12th regiment, consisting of about 800 men, and at the time under embarking orders for the Peninsula, the disease was introduced by an infectee child: 600 men were attacked with the malady, and it is understood that the services this battalion were in consequence unavailable during the cotinuance of the Peninsula

To WM. ADAMS, Esq.

The hostility of the Army Medical Board still continuing unabated, the Commander in Chief, in 1813, gave directions that the inquiry into the success of Sir Wm. Adams's practice for the cure of the third or granular stage of Ophthalmia, should be taken entirely out of the hands of Army Practitioners (who, at that time, most pertinaciously denied its efficacy), and that it should be placed in those of the following eminent Civil Practitioners: Sir Henry Halford, Bart. Dr. Baillie, Sir Everard Home, Bart. H. Cline, Esq. Astley Cooper, Esq. and J. Abernethy, Esq. The reports of this Committee, which were transmitted to the Commander in Chief, after a trial of Sir Wm. Adams's practice upon a given number of blind pensioners, being judged satisfactory by the Heads of Departments, to whom they were submitted, it was understood by Sir Wm. Adams, from communications which he had the honour subsequently to receive, that it was the intention of his Royal Highness, of the Secretary of State for the Home Department, and of the Secretary at War, to make a simultaneous effort entirely to eradicate the Egyptian Ophthalmia from the Army, and from the Kingdom, by the adoption of Specific Plans, which Sir Wm. Adams had submitted for their approval; this highly contagious malady having become widely disseminated among all classes of society, through the medium of the dismissed soldiery.

These intentions were, however, entirely frustrated by the present Director General of the Army Medical Board, whose promotion to that office took place in the middle of June 1815; and who, on the 4th of the following month, addressed a letter to the Adjutant General, of which the following is a copy :

ARMY MEDICAL BOARD OFFICE, July 4, 1815.

SIR, SIR,

Before reporting to you upon the papers which you did me the honour to put into my hands, I thought it incumbent upon me to inquire into the present state of Ophthalmia, as well as into the preculence of Diseases of the Eye, in the army at this time. Of the contagious disease, the Egyptian Ophthalmia, there woo remain but a few cases in the neighbourhood of Plymouth, and I trust that this disorder will soon be eradicated from the army. In the army which lately served in the Peninsula, and which comprised a great portion of the military force of the British empire, though some corps joined it from this country with Ophthalmia, and several from Sicily, yet we completely succeeded in gradicating the disease. On its first appearance, the Egyptian Ophthal mia being a new disease in England, the proper treatment of it was unknown, but the dis coveries of late years relating to it, and other Diseases of the Eye, being now very generally promulgated, and the attention of some of the Medical Officers of the army now directed to those diseases, I have no doubt but that from the service I can selec cers perfectly equal to the cure of those diseases, where a cure can be effected. Under this impression, I am of opinion that the establishment proposed by Sir W. Adams is by no means required, as its objects can be obtained without incurring any further expense. I have the honour, &c. &c.

A copy of this official report was immediately forwarded to the War Office, with a letter from the Commander in Chief, of which the following is a copy:

House Guards, July 12, 1815 In reference to your lordship's letter of the 12th of April last, with its inclosure from Sir W. Adams, I have now to transmit to you the inclosed copy of a letter from the Director General of the Army Medical Department, which appears to me quite conclusive as to the expediency of creating any establishment for the Ophthalmic I am, my Lord,

FREDERICK, (C. in C.) Yours

To the Right Hon. the Secretary at War, &c. &c.

But the Secretary at War, upon the receipt of these documents, called for the monthly return of all Ophthalmic Diseases treated in Army Hospitals since 1810; when it appeared by them, that so far from the Ophthalmia being (as the Director General had reported) confined to a " few cases in the neighbourhood of Plymouth," and its being (as he hoped it would be), " soon eradicated from the army," on the contrary, the malady was then extensively prevailing in the army-that it had so prevailed since 1810-and that the very month in which the above report was made, 550 patients had been treated in Military Hospitals! while the disease continued progressively to increase, and in the November following, broke out with such violence in the Army of Occupation in France, that by the Director General's letter of April 1817 (Doc. I.) it appears that 2422 soldiers belonging to that army alone were treated for Ophthalmic Diseases, between 21st November, 1815, and 20th November, 1816!!!

Upon the opinion expressed by the Director General respecting " the proper treatment of the disease being now very generally promulgated," and the competency of certain Army Surgeons to be "selected for the cure of the disease," three years after Sir W. Adams had in the most open and candid manner communicated his opinions and practice to Army Practitioners, no remark will be made. But for the accuracy of the facts stated in an official communication to the Commander in Chief, it must be admitted he was deeply responsible, His duty was not discharged by forbearing to make incorrect or colourable representations, but it is conceived no excuse can be offered, for not ascertaining, by all practicable means, the truth and accuracy of every matter of fact stated by him, which was calculated to influence the judgment and decision of the Commander in Chief

upon so important a subject.

6

The inaccuracy of the Director General's Report as to the inex. pediency of creating any establishment with a view to the eradication of the Ophthalmia from the army, is further shewn by Doc. II. in the Appendix, in which it appears, that of the 1859 pensioners discharged with Ophthalmia, recently inspected in Ireland, 240 were pensioned in 1814, and 681 since that period. Of these 681 men (the annual amount of whose pensions is £11,420 8s. 114d.) 68 only were reported by the inspecting surgeon to be incurable (annual pension £1529 19s. 2d.) 390 having recovered their sight since being pensioned as incurable (annual pension £6153 16s.); while the remaining 223 (annual pension £3736 13s. 9Id.) were found susceptible of cure or relief by treatment. Several indeed of the latter class have been already treated and discharged from the Ophthalmic Hospital, either cured or relieved, after inspection at the War Office; and others are now there, whose sight is sufficiently restored to enable them to follow their respective trades or employments. Now as there are good grounds for believing, from information furnished to the War Office, that not one third of the total number of Ophthalmic Pensioners were included in the Irish inspection, it is fair to presume, that the actual number of men discharged from the army since 1815, and the annual amount of pensions granted since that period for Ophthalmic Diseases, is considerably more than double what is specified in the above return, a large part of which expense has obviously been incurred by the incorrect report of the Director General.

Official statements similar to those made to the Commander in chief, were transmitted by the Director General to the Secretary at War. In a letter directed to his lordship, dated November 30, 1815, he says, "there is good ground for believing, that what has been termed the Egyptian Ophthalmia, or Contagious Ophthalmia, has of late years but rarely occurred in the army, the few cases admitted into Plymouth and Aldwich Hospitals comprise the whole, and it is now hoped that this once very formidable disease is nearly extinct in the British army."

In a second letter to the Secretary at War, dated 11th December, 1816, the Director General distinctly asserts, "that the contagious "species of Ophthalmia, which has been denominated Egyptian "Ophthalmia, has ceased to prevail in the British army for several "years."

But in opposition to this unqualified assertion of the Director General, is the following official report, signed by all the members of

the Army Medical Board, and transmitted to the War Office, the very day preceding that in which this assertion was made:

Army Medical Board Office, Dec. 10, 1816.

We have to acknowledge the receipt of your letter of the 6th instant, desiring to be informed what number of men have been treated for Ophthalmia in II. G. the Dake of Wellington's army during the last year, how many of them have returned to their duty, and how many of them have been invalided. In reply to this reference, we begieve to state, for the Secretary at War's information, that during the whole year [i.e. between November 1815 and November 1816,] itappears 2743 men have been treated in the hospitatis for ophthalmia, and 2564 discharged, leaving the number of 179 remaining, as stated in our last monthly report. Without specific reference and inquiry, it is impossible to say how many of these cases have been invalided on account of ophthalmia; but such investigation shall be immediately set on foot, and the result submitted as early as possible to Lord Palmerston.

We have the honour to be, &c. &c.

J. M'GRIGOR,
W. FRANKLIN,
W. SOMERVILLE.

To the Deputy Secretary at War.

Should any attempt be made to reconcile the foregoing assertions of the Director General with the official proofs opposed to them, by endeavouring to make it appear that, it was not the "Contagious or "Egyptian Ophthalmia" which prevailed in the army during 1815 and 1816, Sir W. Adams is prepared to submit incontrovertible evidence, that it was the "Contagious or Egyptian Ophthalmia" which did prevail in the army during the two years in question.

But setting aside all controversial opinions upon the subject, this fact is incontestible; namely, that several soldiers pensioned solely for Ophthalmic disease, in 1815, 1816, and subsequently, have been since so far cured or relieved in the Ophthalmic Hospital, that had the same degree of relief been afforded them prior to their being pensioned, such pensions would have been thereby either in part or wholly saved to the public.

* In confirmation of the above assertion, may be quoted the case of Corporal William Dillow, discharged in 1816, which was one of the most severe ever admitted into the Ophthalmic, or probably any other Hospital. Dillow, a few days after his admission in May 1819, totally blind, and in great suffering, was inspected by the Right Hon. the Member for Tavistock and the Hon. Member for Stockbridge. The following year he was again inspected by these gentlemen, when his sight was sufficiently restored to enable his to read and write with great facility. Dillow had been admitted prior to his being pensioned, and on his discharge from the hospital, applied for a pension on account o ophthalmia, when the following certificate of his case was transmitted to the Board o Commissioners of Chelsea Hospital, by the assistant examining surgeon of that establishment, and upon which certificate was grounded the letter to the Commissioners of Kil

The preceding official returns called for by the Secretary at War, established the fact that the Ophthalmia continued extensively to prevail in the army, while the propriety of an institution for the treatment of the blind soldiery, and the instruction of the young army surgeons in the best mode of treating the disease, could no longer be denied-it had become obvious that the public interest required such an establishment.

But the Director General, in pursuance of his systematic hostility to the institution, which, it was understood, had been originally approved by his Royal Highness the Commander in Chief, and which had been subsequently decided upon by the Secretary at War, exerted all his influence in the formation of an Eye Infirmary, in 1816, to be supported by public charity, and which it was proposed should render that service to the army, which it was the object of Sir W. Adams's proposition, to afford by the institution which the Director General had prevented from being established the preceding year.

An army surgeon, a personal friend of the Director General, was mainham Hospital, the establishment upon which Dillow would have been placed had his claim to pension been considered well founded.

(COPY.)

ROYAL HOSPITAL, CHRISTA, SH June, 1820.

I have examined Corporal William Dillow, 45th foot, lately discharged from the Ophthalmic Hospital, and find there is a thickened state of the eyelids of both eye, the effect of recent inflammation; but it does not appear that vision is impaired, or the disability of sufficient magnitude to warrant a recommendation for a pension.

J. HARTSHORN, Assistant Surgeon, Royal Hospital, Chelsea.

ROYAL HOSPITAL, CHEKSEA,

9th June, 1820.

Having submitted to the Lords Commissioners of this Hospital, at their meeting on Wednesday last, the discharge and papers (herewith transmitted) of William Dillow cf the 45th foot, whose claim was examined on that day, their lordships, upon taking the same into consideration, directed me to acquaint you, that they are of opinion he has no claim to pension. I herewith inclose a Medical Report upon his case, from the Assistant Surgeon of this Hospital.

(Signed,) RICHARD NEAVE.

To WILLIAM PLUNKETT, Esq.

SIR.

From the severity of this man's case, he would necessarily, had he not been treated n the Ophthalmic Hospital, have been placed upon the highest rate of pension. If hen the practice pursued there proved so successful as to save the whole of the pen-ion in so severe a case, it cannot be questioned that it would very generally produce he same beneficial effects in the milder cases of the same disease.

placed at the head of this institution, who, it is understood, had, immediately prior to its establishment, attended for some months at an Eye Infirmary, as a pupil.

The Secretary at War, however, after the fullest consideration, deemed it expedient to carry into effect a measure in which his Lordship was so strongly borne out by the Medical Returns already adverted to. The Ophthalmic Hospital was accordingly founded in the autumn of 1817, and Sir W. Adams was placed at its head. The appointment of Sir W. Adams to this situation seems to have excited the strongest feelings of professional jealousy, and this jealousy led to circumstances which present some peculiar features, and which are best explained by the following statement of facts.

It became necessary, during the absence of the chief assistant of the Ophthalmic Hospital, to name another assistant in his place, and Staff Surgeon Owen Lindsay auxiously requested that Sir W. Adams would promote his being appointed to the situation; the promise of which appointment, through Sir Wiiliam's personal application to the Secretary at War in his favour, was obtained.

About this time, the depôt of the 64th regiment, stationed in the Isle of Wight, and which had been joined by two soldiers successfully treated in the Ophthalmic Hospital, was reduced, and these two men were about to pass Chelsea Board upon that occasion. Of this circumstance Sir W. Adams was ignorant, and also that any doubts were entertained of the recovery of these men, or any observations intended to be made on their cases. In continuation, however, of the system which had been pursued, it was thought that so favourable an opportunity of throwing suspicion upon Sir W. Adams's practice should not be lost; and in order to explain the course taken on this occasion, the following letter is inserted, which was addressed by Staff Surgeon Owen Lindsay, to Staff Surgeon Dease, a former assistant at the Ophthalmic Hospital, within a few days after Mr. Lindsay was made acquainted with the promise of his appointment, and which letter was detected in its passage through the War Office*.

9, DUKE-STREET, ST. JAMES'S, 1sth Feb. 1819.

MY DEAR DEASE,

I was much disappointed at the two men of the 64th regiment not having been sent to the last Chelsea Board, as I had arranged matters in such a manner

* All letters sent to the War Office to be franked are unscaled, and subjected to the examination of the franking clerk, for the purpose of his ascertaining that they relate to public business.

that they were to have gone to the Board, and the attention of the Commissioners was to have been directed towards the state of their eyes; and all this was done quietly, without any person connected with Sir W. A. knowing any thing concerning the business. I would recommend you not to mention their names in any correspondence you may have here; at all events till they are anugly lodged in the York Hospital. I hope you have not meddled with their Ochos (eyes), and that you will not prevent their getting drank, Sc. so that they

I this morning saw two of my old patients from Chatham, who had passed the Cheisea Board about a fortnight ago, and who were taken with several others into the Knight's Hospital—Gordon and M'Gee: the former has already been dismissed from the Hospital without any thing having been done to his eyes, and the poor fellow complains of having without any thing having been done to his eyes, and the poor fellow complains of having been prevented going bome, and detained here; the latter, M'Gee, did himself the bonour, as he termed it, to call upon me te-day, to pay his respects, and to thank me for my attention to him when he was under my care. I examined his eyes minutely, and everted the lids, not, however, with the elevator, as I do not now carry such an instrument (although I am informed that you do). His eyes are looking remarkably well, and the linings are perfectly smooth. I cantioned him particularly against drinking, but he should induce a relapse; and he promised me faithfully to obey my injunction.

I also saw Marston of the 86th regiment, one of the same batch whom he had taken into the Housila. I take it for examted our resultest the man's case merfectle. He was

into the Hospital. I take it for granted you recollect the man's case perfectly. He was likewise an old friend of mine. There was when I saw him (about a week ago) a large vessel running from above downwards over the cornea of the right eye. The left appeared to be very well. I had not an opportunity of examining him particularly; but I shall take an early opportunity of doing so, which I shall the more readily accomplish, as I have just heard that the poor Knight feil from his horse yesterday, and received a severe injury of the knee; but I have not learned the particulars. Forbes leaves town, I believe, on Sunday morning. I am sorry that I have not seen so much of him us I could have wished, as he has been engaged every day to dinner, and I have been employed in the mornings derstand that M'Leod is to commence his Tour of Inspection on Monday next. I me know when you intend coming to town, and believe me,

My dear Dease

Your's, very faithfully, OWEN LINDSAY.

JAMES DEASE, Esq. Surgeon to the Forces, Chatham.

I hope to be able to get you a bed at my house

Staff Surgeon Lindsay was subsequently tried by court-martial for writing this letter, when the following facts appeared: That the above letter had been sent from the Army Medical Board Office, unsealed, and under a Medical Board Office printed cover; That Mr. Lindsay had been written to " by the Secretary of the Army Medical Board, "apprizing him of Sir William Adamf's two patients being expected from Chatham to pass the Chelsea Board?" That he was subsequently desired " by the professional assistant of the Medical Board, not to " take these men into hospital, but to allow them to go before the " board:" And that Mr. Lindsay was also instructed " to draw the " attention of the Commissioners of Chelsea College to the state of "the eyes of the men, and to explain to them the nature of the

Further, it was acknowledged by Staff Surgeon Dease in h evidence, that he understood Mr. Lindsay's meaning in the expression " proper vascular cornea," to be, that the vascular cornea should be made " palpable" to his Royal Highness the Commander in Chie and to the Secretary at War, in order that they might see the state the disease, which vascularity, without the patient's catching cold committing an excess, would not be discovered by " ordinary of servers;" while he admitted that the excitement thus produce " would be removed by two or three days confinement and care."

Staff Surgeon Owen Lindsay was found guilty of having, in th letter in question, "employed highly improper expressions, ind " cating a jealousy extremely detrimental to the service at large, an "conveyed in terms most reprehensible;" for which he was sen tenced " to be publicly and severely reprimanded." What were the sentiments of the Army Medical Board upon the conduct Mr. Lindsay, is not exactly known; but what was done by the Boar is known; namely, that notwithstanding this sentence, Mr. Lindsa was immediately afterwards reinstated by them in the employmen from which he had been previously suspended.

Since the court-martial, Mr. Lindsay has openly confessed, the he wrote this obnoxious letter by desire of the Secretary of the Army Medical Board-that he never would of himself have content plated doing so; adding, that the Secretary of the Board "ha caused his ruin*!"

It may be proper now to advert to the use made, or intended be made, of the cases of the two men referred to in the letter Staff Surgeon Owen Lindsay.

In a Report made by the Army Medical Board to the Commande in Chief, May 3, 1819, and which, with other Reports relating to th Ophthalmic Hospital, was called for in the House of Commo by the Hon. Member for Tavistock, May 10, 1819 (at the instan of an army surgeon) is the following passage: " We observe in p. " of the Appendix to his Report, Sir W. Adams states, that he pro " posed in 1810 to Sir David Dundas, the formation of an Institution

This secretary could not have entertained professional hostility to Sir W. Adam as he was not a medical man. Neither is it probable that he felt personal hostility Sir William, who had a short time previously attended his child, while labouring una acute disease of the eye.

for the exclusive treatment of Pensioners dismissed the army, blind from Egyptian Ophthalmia; asserting, that many men might thereby be restored to the service, and large sums of money, annually expended in pensions, be saved to the country. We cannot consider this assertion as being borne out by the results of his treatment, either in the cases now reported upon, or in those placed under his care in 1812, 1813, and 1814. We are not aware that any of those persons had their vision sufficiently improved to be considered fit for duty as soldiers; those examined by us we can state with confidence had not : some of them may, it is true, have been deemed by him (Sir W. Adams) fit for duty, and may have been reported as such; but on rejoining their regiments, they were either considered to be unfit for duty, or relapsing shortly afterwards, were discharged. Two men of this kind [the two men alluded to in Lindsay's letter] are to be found in his (Sir W. A.'s) Report, who were reported by Sir W. Adams as fit for duty, and were ordered to join their regiments at Gibraltar; but on their arrival at the Isle of Wight, they were deemed unfit for duty, and subsequently passed Chelsea Board."

It was upon the discussion which took place upon the motion or the production of these papers, that Mr. Lindsay's letter became ublicly known.

Now in opposition to the assertions contained in the Report of ne Army Medical Board, and which the plot developed by the etection of Lindsay's letter was so well calculated to support, re the following facts: It was the staff surgeon regularly appointed examine all recruits for the army in the London district who reported nese men " fit for duty," and not Sir W. Adams; neither did the men lapse after their discharge from the Ophthalmic Hospital, for alnough reported by the surgeon in the Isle of Wight to be unfit for uty the day after their arrival there, they notwithstanding subsenently performed their regular share of duty, by day and by night, uring upwards of four months, as was attested by the men themelves to the Secretary at War, and to the Adjutant General, who xamined their eyes and state of vision on their return to pass And, further, they ultimately passed Chelsea helsea Board. oard, not (as the Army Medical Board evidently intended it would be considered) from their incompetency as soldiers, but upon reduction in the regiment to which they belonged.

Hence it is obvious, that if these two men had laboured under "proper vascular cornea" (excited in the manner suggested by

Mr. Lindsay) when examined, as it was intended they should have been, by the Commander in Chief, by the Secretary at War, and by the Commissioners of Chelsea College, the assertions contained in the Report of the Army Medical Board, and the "recorded opinion" of the Director General of 1816, would have appeared to be verified*.

It is thus shewn that Staff Surgeon Owen Lindsay was deputed to point out to the Commissioners of Chelsea College, the "proper vascular "cornea" of these men's eyes; and also that it was intended they should have been seen by the Commander in Chief and by the Secretary at War while in this state. Nothing further is necessary to shew the nature of the attack which was made upon the reputation of the Hospital, and the moral as well as the professional character of Sir W. Adams.

It is conceived that enough has been stated to furnish the means of forming an opinion upon the propriety of originally establishing the Ophthalmic Hospital, and to assist in any inquiry that may be made into the wisdom of its continuance. The nature of the opposition that will be offered to the establishment and to its principal superintendant, and the quarter from which it will proceed, rendered it, I conceive, necessary to develope beforehand the character of that opposition, not for the purpose of gratifying any personal feeling, but to prevent those Gentlemen who will be engaged in the investigation from being taken by surprise, or thrown off their guard, by the weight and authority naturally attached to the opinions of those individuals, whose station would be expected to place them above partial views, and improper bias or practice. How far the circumstance stated with regard to Mr. Lindsay may shew that such communications should be received with caution, the reader must judge.

* In the Director General's letter to the Secretary of War, dated Dec. 11, 1816 (a ready quoted, p. 6.), is the following passage: "I do not hesitate to say, that the statemen, which goes to show a great saving to Government by calling in the Out-Pensioners, "most fallacious, and would end in disappointment; and I take leave to record say opinion that it mill be found overy few Out-Pensioners can derice sufficient benefit from any most of treatment to enable them to perform the duty of soldiers."

SECT. II.

EXPENSE CAUSED BY OPHTHALMIA.

The following Documents and Statements are intended to shew: first, the proportionate Numbers of Curable and Incurable Ophthalmic Pensioners:—secondly, the Annual Amount of Expense caused by Ophthalmia:—and thirdly, the Results of Sir Wm. Adams's Treatment at the Ophthalmic Hospital.

First: Document III. shews, that of 1859 men pensioned with Ophthalmia, and recently inspected in Ireland, 315 only were reported by the inspecting surgeon to be incurable; 487 being considered by him as susceptible of cure or relief from treatment, and 1043 having recovered their sight since their discharge. The annual amount of Pensions granted to the Incurable Class is £7022 5s. 3d. that of the Curable Class £9045 19s. 0\frac{1}{2}d.; while the large sum of £18,111 12s. 6\frac{1}{2}d. is paid annually to those men who have recovered their sight since being pensioned as incurable. Grand total £34,179 10s. 10\frac{1}{2}d. per annum. Of these 1859 pensioners, 1348 (annual amount of pension £24,457 9s. 9d.) it appears had no claim to pension for length of service. Some few may have been entitled to pensions for wounds, but the proportion of such claimants must necessarily be very limited.

Secondly: The following Statements shew the sums paid annually by Government to Ophthalmic Pensioners belonging to the three branches of the public service:

Ascertained.	d.	S.	d.
By Chelsea Hospital	61,812	15	0
(From the above sum deduct 5 per cent. as directed by Act of Parliament.)			015
By Kilmainham Hospital	17,791		07
By the Ordnance Department	10,036	10	0
By the War Office to Officers	10,552	16	6
Solely for Ophthalmic Disease .	100,163	11	61
By Kilmainham Hospital partly for Service and partly for Ophthalmia Not ascertained.	4091	11	0
By Chelsea Hospital for ditto ditto, supposed to exceed for Blindness alone	20,000	0	0
By the Admiralty for Officers and Men af- fected with Blindness, supposed to exceed	5000	0	0
Total per annum .	129,255	2	6}

* Whether this great amount of pension, unnecessarily granted to the two latter Class of Pensioners, has been incurred by an incompetency to cure the malady, or by neglect

Thirdly: Document IV. shews that 447 persons have been admitted into the Ophthalmic Hospital since its establishment, of whom 399 have been discharged from thence, in which number are included 217 cured, 85 relieved, 32 not benefited, and 48 remain in the Hospital. The annual amount of the pensions of 401 of these men (46 not being pensioners) is £7885 6s. 8d.

Two hundred and ten patients were treated in the Ophthalmic Hospital between Nov. 1, 1819, and Nov. 1, 1820, of whom 101 were pensioned solely for Ophthalmia, and 87 of the number since January 1815. The annual amount of pension of these 101 patients is £1838 13s. 9d. and their value, estimated by the Tables of Annuity established by Government at the Bank of England, according to the age of each individual, is £20,052 8s. 3\frac{3}{2}d.!!!

Document V. shews that in almost every instance where men have been admitted into the Ophthalmic Hospital, and treated there, prior to their being pensioned, that their pensions have been either wholly or in part saved to the public, in consequence of the benefit they have received while in the Hospital.

Hence then if so large a proportion of the blind pensioners, as is proved by these Documents, admit of cure or relief, and that the pensions of almost the whole of those men admitted into the Ophthalmic Hospital prior to their being pensioned, have been thereby wholly or in part saved, would it not be expedient, even on the score of economy, in future to treat there all men having claims for pensions, previously to such claims being taken into consideration, by which ready disciplined soldiers would be retained to the service, pensions would be saved, and the further dissemination of the contagion among the general population of the country, by means of the dismissed soldiery, would be prevented.

The considerable sums paid to men for marching money to their homes, and subsequently to and from the Ophthalmic Hospital, as also to their guides, would further be saved, while the proposed measure could be carried into effect without incurring any considerable additional expense.

SECT. III.

SIR WILLIAM ADAMS'S CLAIMS.

Sir W. Adams is not acquainted with any case that has been submitted to the consideration of Parliament, to which he can refer as being parallel to his own, inasmuch, as where public remuneration has hitherto been bestowed upon any Member of the Medical Profession, it has been for communications which have more especially tended to the benefit of society at large: whereas Sir W. Adams presumes to hope, that while he has added his mite to the public benefit, he has more particularly contributed to the "health and efficiency" of the army, and has already been the means of a considerable saving to the Government in pensions.

The case of Dr. Jenner appears to approximate most nearly to the present, although unquestionably they bear no degree of comparison in point of general importance; inasmuch as the improved practice for Ophthalmia possesses the power merely of preserving or restoring sight, while that of Vaccination, as preserving life, is confessedly the most important which has ever been introduced into the science of medicine. Upon no occasion therefore has the gratitude of mankind—the liberality of the legislature—and the respect of the medical profession, been more justly bestowed, than upon the distinguished individual to whom humanity is so deeply indebted, and to whose skill and observation the world owes the invaluable discovery which renders memorable the epoch in which it was made, and which will hand his name down to the latest posterity.

Sir W. Adams, while he thus most respectfully conveys his impression of the merits of Dr. Jenner, feels called upon, in justice to himself and to his family, to point out some differences which appear to exist with regard to the character of their respective cases, conceiving that they tend materially to strengthen his claims to the favourable consideration of Parliament.

Dr. Jenner, it will be recollected, without solicitation, published his discovery; and thus, unsolicited, gave up the possession of his opinions and practice to the public.

Sir W. Adams, it has been shewn, was officially invited to communicate his opinions and practice for the benefit of the army; which application was made to him at a time, when, from the great extent to

which the disease prevailed among the soldiery, and the supposed inadequacy of the practice pursued in the army, the greatest importance was attached to the obtaining an effectual "mode for its prevention and cure";" and he was thus invited, after a Board of the highest professional authorities in the kingdom (both civil and military) had been previously appointed for this specific purpose, but without the desired success.

The discovery of vaccination, although of the utmost possible importance to humanity, and consequently to society at large, inasmuch as it tends to the preservation of life, yet has not materially contributed to the "efficiency" of either branch of the public service, as at no period since the introduction of inoculation has the small-pox prevailed to such an extent as to impede that efficiency.

The Ophthalmia, on the contrary, it will be shewn to the Committee, has not only in many instances rendered whole regimens ineffective for successive years, and in others, during whole campaigns, but further, as appears from the publications of the present Director General, in 1807 (prior to Sir W. Adams's practice and opinions being promulgated) it was "daily extending its ravages through the "army;" and he adds, "if not checked, may cripple our army and "naw."

The small-pox at no period has been known to cause any considerable expence in pensions to soldiers or to sailors: consequently, vaccination has not materially contributed to the saving of the public money.

The Egyptian Ophthalmia, on the contrary, has occasioned an

In proof of the great length of time the malady continues, when the treatment for
its radical cure has been neglected, as also its capability of propagating infection, con
twenty years after the first attack, the following letter is quoted:

SIR,

In the year 1501 I contracted the Ophthalmia in Egypt, and erre since my sight has been so defective as to exclude me entirely from reading, or even writing my name, but by guess. I have had several relapses of that most dreadful mulady; and in the month of August last year, my wife was affected with it from me: she is now in that dreadful state of pain, that she can have no rest night or day: the discharge isgreater than any I witnessed in Egypt, although blisters and bleeding with letches have been copiously applied, but all to no purpose. You may, sir, if you please, prove the truth of this statement, by coming yourself to see the state Mrs. Rees's eyes are in, and bring with you those Gentlemen that argue against the utility of the Ophthalmia. Here is a case in point, which will prove the virulent infections nature of the Egyptian Ophthalmia.

tious nature of the Egyptian Ophthalmia.

I am, Sir, your obedient Servant,

JAMES REES, Lieut. R. N.

enormous expense to the public; while Sir W. Adams is prepared to prove, that, by the adoption of his opinions and practice, the malady is now treated with far greater success in the army than formerly: consequently, that his communications have essentially contributed to the prevention of the expenditure of the public money.

Dr. Jenner, after promulgating his opinions and practice, besides experiencing the blessings of mankind, and the liberality of the legislature, had the good fortune to secure likewise the kind feeling of the profession.

Sir W. Adams, on the contrary, from the beginning of the year 1815, after he had fully laid open his practice for the benefit of the army, has been involved in the most vexatious controversy, which necessarily has occupied much of his time and attention. He was indeed, in 1814, warned by his more experienced medical friends of the professional feeling which he would have to encounter, if he persisted in his efforts in regard to Ophthalmia as it respected the army; and so fully were they impressed with this opinion, that Sir W. Adams was urged in the strongest manner by one of them, who belonged to the Committee of eminent Civil Practitioners appointed in that year by the Commander in Chief, to report upon his practice, altogether to abandon the experiment then in progress, even when it had been nearly brought to a successful close; assigning as a reason, that he (Sir W. Adams) "would bring the surgeons upon him:" and Sir W. Adams was subsequently told by another member of that Committee, that he had "placed himself in too conspicuous a point of " view, and had thereby deservedly brought the profession upon him."

The effect of this professional feeling towards Sir W. Adams he has no hesitation in stating has proved highly injurious to him; and ID regrets to add, that the great body of Medical Practitioners belonging to the three branches of the public service have, from an esprit de corps, most zealously endeavoured to excite public prejudice against him; while the periodical Medical Press, which it is well known is either under their exclusive direction, or open to their critical productions, has (since the beginning of 1815, when it was expected that the Ophthalmic Hospital would be established,) admitted, and given all the effect within its power, to every publication hostile and injurious to Sir W. Adams, while it has equally rejected every thing advanced in his justification. The impression thus produced, must necessarily have had considerable effect upon the profession in civil life.

28, COLSTON-STREET,

From the differences which have been thus shewn to exist between the characters of the respective cases of Dr. Jenner and Sir W. Adams, it is seen that Dr. Jenner's claims for remuneration were founded upon the liberality of Parliament; while those of Sir W. Adams to compensation, rest (as he has endeavoured to shew) upon the justice, as well as the liberality, of the Legislature.

justice, as well as the liberality, of the Legislature.

Upon the facts of his case Sir W. Adams therefore respectfully begs leave to appeal to the justice and liberality of Parliament, his professional skill being his property, and the support of himself and his family; which property he gave up for the benefit of the army, in compliance with the wish of his Royal Highness the Commander in Chief*. The extent of such compensation, he trusts, will be estimated, on the one hand, by the acknowledged importance and utility of his communications, as respects "the health and efficiency of the army at large," and the saving of the public money in pensions; and, on the other hand, by the loss to Sir W. Adams of a very lucrative branch of practice which he had previously enjoyed, as also by the injury he has sustained in his general practice from the professional hostility, and consequent public prejudice, to which he has been subjected.

In an official letter from the Adjutant General to Sir W. Adams, dated June 28, 1817, is the following passage: "His Royal Highness the Commander in Chief entertains a just "sense of the zeal and liberality with which you communicated your modes of practice."

APPENDIX.

(DOC. I.)

ARMY MEDICAL BOARD OFFICE, April 28, 1817.

SIR,

Referring to your letter of the 6th December last, and my reply of the 10th, I beg leave now to submit, for the Secretary War's consideration, a return, which has been very carefully made t, of the total number of soldiers invalided from the army in France, account of diseases of the eyes, between the 21st Nov. 1815, and e 20th Nov. 1816.

From this statement it will appear, that the 56 men who have been ralided out of a total number of patients amounting to 2422, ten 1 ly are totally blind; and it is highly probable, that among the 43 ralided for impaired vision, a great proportion would not have en put down for discharge under a different state of public affairs.

I have, &c.

JAMES M'GRIGOR.

To W. MERRY, Esq. &c. &c. &c.

(DOC. II.)

23

IURN of MEN recently inspected in IRELAND, who have been discharged the Service since 1810, labouring under OPHTHALMA, specifying also the Number pensioned each Year, and the amount of their Pensions. These are divided into three Classes; namely, Incurable, Curable, and those who have recovered their Sight since their Discharge.

1820.	041	п	158 3	
1819.	2 2 2 2	60	940 12 8	-
1818.	- 28	68	2376 16 33960 5 02624 3 114 1360 7 84 940 12 84	-
1817	7.2.3	154	B624 3 114	
1816.	882	226	3960 5 0	
1815.	24 87	141	2376 16 3	
.1814	822	240	4264 8 114	-
1813.	622	11	11 81 4051	100
1812.	118	7.5	on £1553 4 24 1391 0 34 1351 19 04 1507 18	
1811.	524	100	1391 0 34	
1810.	32.28	78	£1553 4 25	
iods of discharge '	urable Cases	al number of Pensioners	and Amount of Pension	

143 374 712 1229 21,488 19 7

Of the above £21,488 19s. 74d, per annum, £11,420 8s. 114d, per annum has been granted since 1815. 681 Number of Men pensioned.

.. * Fifty-one of the above Pensioners were discharged from the Artillery, and seven from the Navy.

Total Amount . . 11,420 8 114

(DOC. III.)

No. 1.

INCURABLE CASES.

BSTRACT of the Annual Amount of Pensions of 315 blind Pensioners recently inspected in Ireland, as also the Value of these Pensions calculated according to the Rates of Annuity established by his Majesty's Government at the Bank of England, supposing the main age of the Pensioners to be 32, which is worth 14½ years purchase.

No.	of A	Tem	Rate of Pension.	Annual	Am	ount.	141	Years	Pu	rehase.
2.0.	9 1		s. d.	E.	8.	d.		£.	8.	d.
100	1	at	2 6	45	12	6		661	11	3
	2	at	2 0	73	0	0		1058	10	0
	2	at	1 114	71	9	7		1036	8	115
	14	at	1 6	383	5	0		5557	2	6
	230	at	1 3	5246	17	6	-	76,079	13	9
	-1	at	1 14	20	10	75		297	14	01
	1	at	1 1	19	15	5		286	13	64
	49	nt	1 0	894	5	0	- 5	12,966	12	6
		at	0 9	27	7	6	-	396	18	9
	2 2	nt	0 6	18	5	0	1 "	264	12	6
	1	nt	0 44	7	4	51	-	104	14	114
	1		14l. p. at	14	0	0		203	0	0
Not:	ascert			200	12	74		2909	3	45
The same	1 014	-		5000		-	-	01 000	10	12

No. 2.

No. 2.

CURABLE CASES.

pe Annual Amount of the Pensions of 497 Men belonging to this Class, and the Value of their Pensions according to the above Calculation.

No. of M		Rate of Pension.	Annual Amount	14; Years Purchase.
250. by 241	C.11.	s. d.	£. s. d.	£. s. d.
2	nt	2 6	91 5 0	1483 3 6
4	at	2 0	146 0 0	2117 0 0
1	at	1 10	33 9 2	. 485 2 11
9	at	1 6	33 9 2 2 246 7 6	3565 8 9
1	at	1 5	25 17 1	374 13 84
- 4	at	1 45	100 7 6	1455 8 9
1	nt	1 4	24 6 8	352 16 8
1	at	1 35	23 11 54	341 16 14
165	at	1 3	3764 1 3	54,578 18, 14 319 15 14 308 14 7
1	at	1 24	22 1 04	319 15 14
1	nt	1 2	21 5 10	308 14 7
1	at	1 14	20 10 74	297 14 04
2	at	1 1	39 10 10	573 7 1
1	at	1 04	19 0 24	275 13 01
139	at	1 0	2536 15 0	36,782 17 6
82	nt	0 9	1192 7 6	16,274 8 9 7674 2 6
58	at	0 6	529 5 0	7674 2 6
1	at	0 8	12 3 4	176 8 4
1 5	at	0 5	38 5 5	551 6 04
3	at	0 41	21 13 54	314 4 91
1	at	14l. p an-	14 0 0	203 0 0
1	at	127. p.an.	12 0 0	174 0 0
No Pen. 3	at	-		
Not as.10		-	-	
Total 497		-	9045-19 01	131,319 2 44

No. 3.

CASES ALREADY RECOVERED.

ABSTRACT of the Number of Pensioners inspected in IRELAND who, in consequence of one or both Eyes having entirely recovered, or who having so little Disease remaining, were deemed unfit Cases to be sent to the OPHTHALMIC HOSPITAL; with the Annual Amount of their Pensions, and their value at 14½ years purchase.

No. e	of M	fen.	Rate of Pension.	Annual Ame	-	14½ Years Purchase
			s. d.	£. s.	d.	£. s. d.
	-1	at	3 6	63 17	6	926 3 9
	3	at	2 6.	136 17	6	1984 13 9
	1	at	2 4	42 11	8	617 9 2
	1	at	2 34	41 16	51	606 8 71
	1	at	2 0	36 10	0	529 5 0
	2	at	1 115	71 9	7	1036 8 114
	-1	at	1 11	34 19	7	507 3 114
	1	at	1 10	33 9	2	485 2 11
	-1	at	I 95	32 13	114	474 2 44
	1	at	1 9	31 18	9	463 1 104
	1	at	1 8	30 8	4	441 0 10
	1	at	1 7	28 17	11	418 19 94
	16	at	1 6	438 0	0	6351 0 0
	3	at	1 55	79 16	101	1157 14 84
	-1	at	1 5	25 17	1	374 17 84
	1	at	1 45	25 L	105	363 17 2
	7	mt	1 4	170 6	8	2469 16 8
	- 1	ut	1 35	23 11	54	341 16 11
	255	at	1 3	5817 3	9	84,349 4 44
	3	at	1 24	66 3	14	959 5 01
	4	at	1 2	85 3	4	1234 18 4
	2	at	1 14	41 1	3	595 8 14
	5	nt	1 1	98 17	1	1433 7 34
	4	at	1 05	76 0	10	1102 12 1
	270	at	1 0	4927 10	0	71,448 15 0
	2	at	0 10	30 8	4	441 0 10
	221	at	0 9	3024 18	9	43,861 11 104
	3	at	0 8	36 10	0 +	529 5 0
	157	at	0 6	1432 12	6	20,773 1 3
	1	at	0.5	7.12	1	110 5 24
	8	at	0 44	57 15 1	0	837 19 7
	2	at	201. p.an.	40 0	0	580 0 0
	1	at	161. p.an	16 0	0	232 0 0
	1	at	141, p an	14 0	0	203 0 0
	1	at	121, p.an	12 .0	0	174 0 0
	1	at !	111.p.an	11 0	0	159 10 0
	1	at	101 p.an	10 0	0	145 0 0
	1	at	87. p an	8 0	0	116 0 0
No Per		at	_		-	
Not as	5,52	at	-	950 11	31	13,783 4 04
No. 3.	1	017	1	18,111 12	61	272,618 11 54
No. 1.		315		7022 5	3	101,822 16 14
No. 2.		497	The same	9045 19	01	131,319 2 4
	4			-	4	
G. Tot	-1.1	200	1000	34,179 16	105	505,760 9 113

(DOC. IV.)

MEDICAL RETURN of all Persons admitted and discharged from the OPHTHALMIC HOSPITAL since its Commencement, Dec. 1st, 1817, to the 17th February, 1821.

				-
Charles of the Control of the Contro		Di	scharge	ed.
3 13 3 3 170 9 3 3 3 3			red.	
	tred.	7	ped.	Total.
DISEASES,	Admitted.	Carred.	Relieved. Not benefited.	Total.
lataract — of one sye of both eyes	16	. 7	1 *7	15 1
lases in which artificial pupil has been formed in one eye	74	48	1410	72 2
Ditto complicated with cataract — of one eye	7	7	3 8	18 1
of both eyes	10	8	4=	8 2
of both eyes	4	10		3 1
istula lachrymalis — of both eyes	4	1		1 -
Granular and diseased lids, with opaque and vascular cornea from Egyptian oph-	25	10	11 -	21 4
of both eyes	159		39 2	125 34
Opacity and cicatrix of the cornea — of one eye of both eye. Acute inflammation, with ulcers on the cornea, of one eye	16 23	15	6 2	23
Acute inflammation, with ulcers on the cornea, of one eye	2	-	-	2
Amaurosis — of both eyes	2 3	1	11-	2 -
Amaurosis — Discharged without treatment, or at their own request—	3	1	1	3
for misconduct-or deserted -	62	-		62 -
Patients' wives — Died —	2 2	=		2 1
Total	447	217	85 32	399 48
		100	1000	

(Extracted from the Hospital Records.)

(Signed,) { GEO. R. MELIN, Assistant Surgeon to the Forces. G. BARRY, M. D.

A RETURN of the Amount of the Pensions of the foregoing 447
Patients who have been treated in the OPHTHALMIC HOSPITAL
since its Commencement, Dec. 1st, 1817.

Number of Pensioners.	Rate of Pension per diem.	Annual Amount.
deposit was a large way	s. d.	£. s. d.
5	0 5	38 O O
25	0 6	228 2 6
75	0 9	1026 11 3
102	1 0	1861 10 0
2	1 01	38 0 5
1	1 1	19 5 5
	1 11	41 1 3
4	1 2	85 3 4
2	1 21	44 2 1
138	1 3	3148 2 6
2	1 31	47 2 11
	1 4	24 6 8
2	1 45	50 3 9
2	1 51	53 4 7
20	1 6	547 10 0
1	1 7	28 17 11
1	1 81	31 3 6
3	1 9	95 16 3
1	1 94	32 13 114
2	1 10	66 18 4
1	1 115	35 14 9₹
2	2 0	73 0 0
I	2 3	41 1 3
	2 6	182 10 0
1	£.12 per annum.	12 0 0
Patients who had no pen- sion, including some women and children,ad- mitted by order of the Secretary at War	199	
Total 447		7885 6 8

Two of the cases of cataract in both eyes, recovered but in our eye, the other eye in ach patient having been lost by inflammation.

(DOC. V.)

RETURN of all the PATIENTS treated in the OPHTHALMIC
HOSPITAL since its Establishment, 1st Dec. 1817, who were not
Pensioners when admitted, distinguishing those who received no
Pension afterwards from those who did.

		No. 1.		
Men who did	not receive a	Pension after their	Discharge from	Hospital

Regiment.	Names.	Observations.
7 D. Gds.	Jos. Coulson	Vision in his remaining eye was restored.
61	Dan, M' Cullum	ditto ditto ditto.
9 V. B.	James Clarke	ditto ditto ditto.
93	W. M'Intosh	He did all the shoemaking work of the Hospital for twelve months after his discharge from it.
101	James Cr. gan	Vision perfect in the left eye, and nearly so in the right.
		Relieved.
Leic. Mil.	W. Pettifer	Cared of cataract.
27	John Worthington	Left eye cured, and the right nearly so.
43	W. Dillow	Both eyes cured.
Renf. Mil.	Peter Arnaft	Deserted. Vision good, being able to read a newspaper
8 B. K. G. L.	Jorgan Graefke	Sight perfect in both eyes.
86	Skif. Gribbins	ditto ditto.
Anan. Mil.	A. Nicholl	Incurable from gutta serena.
9. V. B.	John Kirkwood	Underwent no treatment, his case being incurable.
72	Alex. Grant	Died in Hospital, from inflammation and chronic disease of the bladder.

No. 2.

Men who had applied for an Increase of Pension, in consequence of the Disease having become more severe after passing Chelsea or Kilmain-ham Boards.

Regiment.	Names.	Pension Rate of	
62	Robert Knee	9d.	Received no increase of pension: his vision was perfectly restored by treatment.
-	Thos. James	od.	Received no increase of pension: his vision was nearly perfectly restored by treat- ment.
		1.10	

No. 3.

Men who were pensioned after their Discharge from the Ophthalmic Hospital, and who, in all probability, would have obtained a higher rate of Pension had they appeared before the Commissioners of Chelsea in the state of disease under which they laboured when admitted into the Hospital.

the Hospital.				
Regiment.	Names.	Rate of Pension		
10 Foot	John M'Kenzie	ya.	An artificial pupil formed in each eye, with which he could read the smallest print. He acted as a servant in the Hospital for some time, and was very desirous of being readmitted into the service.	
81	Serg, Hill	ls.	Was sent to the Hospital by the Com- missioners of the Chelsea Board, totally blind, which entitled him to 1s. 6d. per day. By artificial pupils, such useful vision was obtained, as to enable him to contribute towards his maintenance. These two men are stated to have done	
64	Corp. Phillips	6d.	duty as soldiers for more than four months after their discharge from the	
-	James Pike	9d.	Ophthalmic Hospital, prior to their passing the Board.	
-	Pat. Duggan.	1s.	Entitled to this amount of pension for ser- vice, having 21 years and 8 months servitude.	
-	Pat. Macauley	9d.	On admission could only discern light with the left eye, and barely to make his way with the right. On discharge, he could see to walk any where alone, and tell what o'clock it was by a watch. His vision and state of eyes were greatly improved.	
67	Pat. Maher	18.	Incipient gutta serena of one eye when admitted, and cataract of the other, of which he was cured.	
6		No	0. 4.	

Men who are not Pensioners now in Hospital undergoing treatment. 97 John Farrel
29 Thos, Mattimar
26 Dan, M'Intyre
Provis. Wm. Scott

Nearly well.
ditto.
ditto.
Preparing for operation.

(Extracted from the Hospital Records.)

(Signed,) {GEO. R. MELIN, Assistant Surgeon to the Forces. G. BARRY, M. D.

FIRST ANNUAL

MEDICAL REPORT

OF THE

OPHTHALMIC INSTITUTION.

FIRST ANNUAL MEDICAL REPORT;

DETAILING

THE CASES OF ALL THE PENSIONERS

LABOURING UNDER VARIOUS

DISEASES OF THE EYE,

WHO HAVE BEEN TREATED IN

The Ophthalmic Institution,

YORK HOSPITAL, CHELSEA,

AND

DISCHARGED FROM THENCE DURING THE LAST YEAR;

AS

OFFICIALLY TRANSMITTED TO THE WAR-OFFICE.

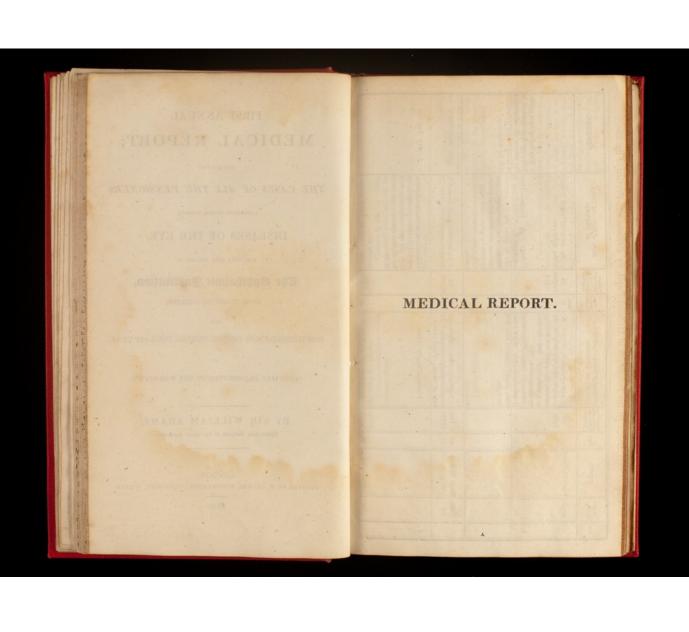
BY SIR WILLIAM ADAMS,

Ophthalmic Surgeon to the above Institution,

LONDON:

PRINTED BY W. CLOWES, NORTHUMBERLAND-COURT, STRAND.

1819.



resurts or Operations for the Formation of Artificial Pupil, by Excision of a Portion of the Iris.

REMARKS.	Was led up by a guide. This case was marked in gither return on admission sists being "very uniavourdidable for treatment."	A very bad case.
	BELEVES E	
State of Eyes and Vision on Discharge.	August in the right eye. 1818 Was led up by a guide. Was led up by a guide. State of Vision.—Doe This case was marked in not know how to read, but is the return on admission able to point out the smallest as being "very unfavour-letters in a energaper, and able for treatment." can see the time by a watch, without a glass, and also to walk any where without a guide.	March the right eye. March the right eye. Vision.—Canread small print, and tell the time by a watch; in fact, he sees sufficiently well for all the common purposes of life.
When discharged line of Deep Deep Channel Googlanderic Marginal. Marginal.	August 1818	24 darch
Dans- tion of Disease,	L REPORT,	210014
State of Disease and Vision on Admission.	Left eye lost. Right eye, cicarix of the cornes; the pupil not so large as a pair's head, and obscured by the cicarix. State of Friena.—Can scarce—the chart placed between him and the light.	78th. Hugh M'Kay 42 1 Dec. Left eye lest. Right eye, 10 1817. correa opaque opposite de la 1817. daxis of vision. Pupil closed. Varion.—Nearly blind.
Date of Administration into	June	. Bec. 1817.
Age.	08	9
NAME. Age. Obtained and Characters and Characters and Characters and Characters and Characters and Characters.	32nd, Peter Dellicott 20	Hugh M*Kay
Regi-	S2bd.	78th.
Casse.	-	C+

			10 5 10 1	1 64.4	
in both in the party of the par	This man acted for several weeks as a servant	sight by the operation.	This man declared to the Right Hon, the Secretary at War that most of the pa- tients who had undergon operations for artificial pu-	pil could see near as well as himself, but were deter- red from acknowledging	they had received, lest any part of their pensions should be withdrawn.
An artificial pupil formed in each eye. Vision—Is able to distinguish small print, and tell the hour by a watch with each eye, but he sees best with the left. His vision is sufficiently good to enable him to return to his thour.	An artificial pupil made in the right eye.	Vision.—Can see very well-quently to his receiving to walk any where, and with asight by the operation. glass to distinguish large print, and the hours on a watch-dial.	Right eye, an artificial pupil ormed. Vision — Is able to walk any where alone, read the smalless	print of a newspaper with pil could see near as well fluency, unassisted by a glaus, as himself, but were deterand tell the hour by a watch. Teed from acknowledging	and the real to real
Mar.	Ditto		7 Oct.		
2			02	-	- Ha
1 Dec. Cicatrices on both cornece 7 24Mar. An artificial pupil formed a strange place. Fision.—Is unable to walk in guish small print, and tell the hour by a warch with each cyc, but he see best with the left. His vision is sufficiently good to enable him to return to his labour.	Right eye lost. Left pupil 11 obliterated, and upper segment of the cornea opaque from a	cicanta. Vision.—Blind.	Left eye lost. Right eye, rupture of the cornea, and the pupil almost closed. Fision.—Can make his way alone only in places with which	he is acquainted. Does not know one person from another, but can make out objects when	placed very close to the eye. Has been unable to do any kind of labour since his dis- charge.
1 Dec. 1817.	Ditto		Ditto		
35	37			IS.	14.
79th. John Fraser	John Kirkwood 37 Ditto		94th. Adam Gardner 36	Same order	- Seeder
79th.	9th Vet. Bat.		94th.		1
0		4	0	10	- 8-
		A 2			

REMARKS.	Anterior of St. High	Was led up by a guide. There was a doubt ex- pressed with regard to the benefit obtained per ration. He was aubse- quently examined by the Secretary at Was, before whom he fally proved the accuracy of the above report.
Sinte of Eyes and Vision on Discharge.	An artificial pupil formed in the right eye and a protun- sion of the membrane of the aqueous humour remover of the State of Vision—18 able to walk any where without a guide, read the smallest print of a newspaper fluently, and tell the time by a watch.	An artificial pupil formed in the left eye. Vision.—Canwalk any where lone, and by the assistance of glass can tell the hour by a ratch.
Dura- Sion of Sam Disease Ophthalmic Respiral.	7 Oct.	7 Oct.
Dera- tion of Discase	Year, 14	21
State of Disease and Vision on Admission.	94th. James Wilson 22 24 July Left eye lott. Right eye, 13 7 Oct. pupir of the cornea, and pupil almost obliterated. State of Vision—Can see to find his way alone in places with which he is acquainted; and can see objects, if placed near him, with tolerable distinctness, but cannot see to read, or contribute towards his maintenance by labour.	48 16 June Right eye lost. Left eye, 17 7 Oct. cicatrax of the cornea obscuring the pupil. Vision.—Can only see light from darkness, or in the evening in a dark room, he can distinguish a person if clothed in white or red.
Age. Date of Administration lasts Opptimization	24 July	6 June
Age.	55	48
NAME.	James Wilson	89th. John Silver
Case. Regi-	94th.	89th.
Case.	9	

This man has worked at his trade as a shoe- maker ever since his dis- charge from the Hospital.	An extreme bad case.
Left eye; an artificial pupil formed. Right eye, aleer of the cornes healed. State of Vision	2 Sept. The granulations, and all disease of the eye-lists completely removed. The opacity and wascularity also removed. An artificial pupil formed in each eye. Fision—1s able to walk any where alone, and with glasses can read moderate-assized print with the 4ft eye. He cannot, he says, clearly distinguish objects with the right eye. His vision will improve considerately also will improve the w
7 Oct.	2 Sept.
10 10	Vian.
94th. Wm. M-Intoth 40 I June Left eye, cicarix of the riving an artificial pupil cornea, poposite the axis of riving the cornea, read of the cornea, read of the cornea, and every condiscern no object whatever. Right eye; vision very weak after using it for some time. Right eye; vision very weak after using it for some time. Right eye; vision very weak after using it for some time. Proct. Left eye; an artificial pupil formed. Right eye, ulcer of the cornea, walk any where without a guide, and by the assistance of a flast of a newspaper. Right eye; much round feature, being able to read the smallest print of a newspaper flaently.	oranular lids, with opacity oranear Fortunes of both ciris, and contracted or obliter ated pupil of the left eye. Finom.—Camor walk any where without a guide, or dis- tinguish any object; is barely able to discern light from dark- tress.
1 June	18 Mar
09	21
Wm. M'Intosh	81st. John Hill
94th.	8134.
00	9 6
	No. of the last of

REMARKS.	mery land, amounts of the	Fig. 9, in the Plate a the beginning of this Tree tise, is the representatio of the artificial pupil i this man's case.
State of Eyes and Vision on Discharge.	1817 of the cornea. Right cys, post from rupture a pupil formed, and pupil formed, and the control of the cornea opposite the axis of the corne opposite the axis of the corne appearance of acute in flammation. State of Fision.—Right cys, can read the smallest print of a merapage with glasses, and moderate sized print without merapage print of a merapage with glasses, and moderate sized print without merapage.	Ditto Left eye, granulations of the list, and vascularity of the correct removed, and an artificial Fig. 3, in the Plate 1 pupil formed. Tiston—Is able to walk of the artificial pupil is without a guide, tell the bourthis man's case. Sixed print by the assistance of glasses.
When Dare- discharged then the Disease Ophtha Insie	lo Jan.	Ditto
Dera-	4 to the total tot	01
State of Disease and Vision on Admission.	Left eye, lost from rupture of the cornea. Right eye, papil oblicated with cientrix of the cornea opposite the axis of vision. Granular lids and some appearance of acute in- hammation. State of Fision.—Right eye, State of Fision.—Right eye, can barely make his way with it.	32 24 July Right eve lost. Left ever highly granular lists with ruptorners. The corners. The pupil contracted and observed by the century. Vinion.—Cannot walk without a guide or distinguish any object whatever.
Age. Date of Administration topo (Opathasianic Houpital.	25 1 Dec.	July
2130	2 1	40
NAME. Ag	26th. Geo. Gavine	Duncan 3 Weallum
Case. ment.	26th.	61st.
Case.	01	1

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	rity rity a m a m string s	upil ch doce
	range and Right Richest Riches	ial p
	vaso wed d. d. d. s.	t eye
	teff eye, granulations of the span vascularity of the conformed, an articial purformed in the corned. Right eye, opsoled, the conformation of the	An artificial pupil formed in the right eye. Faion.—Is able to fuel the ime by a watch with per-feet accuracy; can distinguish mall print, but does not know the letters. He sees sufficiently well for labour.
	Left eye, granulations of the lids, and vascularity of the core are removed; an artificial pull formed. Right eye, opacity of the corresponding to the standard pull formed and the smallest print of a newspaper, and tell the hour lead the smallest print of a newspaper, and tell the hour leads to work at his trade of a goldtown with and jeeller, to read the smallest print, and to discern distant objects. He is now can distant objects.	An artificial pupil formed in the right eye. Finion.—Is able tortull the time by a watch with per- fect accuracy; can distinguish mall print, but does not know the letters. He sees sufficiently well for labour.
	E 200 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	To a	Ditto
	19 24.1 all Left eye, repute, opacity 10 Left eye, granulations of the cornea, had weachairly of the cornea, had weachairly of the cornea. The pupil manch contracted and prevented by a Cacturia. The open man perceive light from daxtenes, and the first trade, and sees every object double, which renders him unable elider to read, or contract three yards from him.	h
į	NAPERE NAMACES	899 8
	If eye, rupture, opacity and vaccularity of the cornea, the popil much countexcet and obscured by a cientra. The opening a much granulated. Right eye, suight opacity of the cornea. Visian—Leff eye, can only perceive light from darkness, Regid eye, is unable to work at his trade, and sees every object double, which renders him unable either to read, or three yards from him.	Cicatrix of the left cornea obsecuing the pupil. Total oblication of the regal pupil with a cicatrix of the cornea. Tition.—Cannot perceive objects.
	city con	o the corresponding to the cor
	graph on the contract of the c	of the cot
	rup ty ght an an an an an an an an an an an an an an a	N of the
	man man phase of the phase of t	ix on the catri
ı	tt eye t eye	catruin ratio
	Int eye, rupture, and we call and we call and of the he pupil much course, executed by a cientific eye-lids much gray content. Triana—Left eye, slight opac (Prisan—Left eye, slight opac (Prisan—Left eye, slight form of Reglet eye, is unable the first trade, and see object double, which mush ecitler to be discussed as person's three yards from him.	Cica obscur oblitera with a Visi objects
	A STOOM O AMBOUSE	
ì	Tr.	Ditto
	6	8
ı	2	97
	kay	ues .
	Ma	es Jam
	, w	mes
-	7	- 5
	72nd. Wm. Mackay	90th. James James
	61	00
		B B

REMARKS.	Was led up by a guide.	
State of Eyes and Vision on Discharge.	44 165 une Right eye, cicatrix of the year, 24Aug. which is wholly obliterated it pupil, 9 1818 texated. Left eye, an artification are rapture of the cornea. Left eye, cicatrix of the cornea. Left eye, cicatrix of the cornea. Left eye, cicatrix of the cornea. Left eye, an artification of the cornea. State of Finion—Right eye, corn whole standing before him. State of Finion—Right eye, can walk about, but not safely, in a strange place. Is able to perceive objects indistinctly, but does not show one person from another is unable to do any kind of labour.	Right eye, underwent no treatment. Left eye, an arti- ficial pupil formed. Vinion.—Left eye, is able to read the smallest print of a newspaper fluently without the assistance of a glass.
Dues- dasharged than of from Disease Ophthalanic	24Aug 1818	Ditto
Dura- tion of Disease	year.	00
State of Disease and Vision on Admission.	Right eye, cicarix of the which is wholly obliterated which is wholly obliterated for a repute of the cornea. Left eye, cicarix of the cornea. Left eye, cicarix of the cornea extending nearly over the whole of the pupil. State of Finion—Right eye, can distinguish the hallow of a person when standing before a person when standing before a person when standing before a person when eye, can walk shout, but not safely, in a hout, but not safely, in a constange place, is able to perceive objects indistinctly, but does not know one person from of labour.	Rupture and cicutrix of both corners, with adherent inti. The cicutrix of the left corner con- Writing the pull. Carried and write. Left eye, is able to discern large objects when the pupil is diluted by shading the eye with the hand.
Age. Date of Admission late Ophthalmic Bespiral.	16 June	Ditto
Age.	44	00 01
NAME.	92nd. Jas. Mengies	Wm. Hastie
Case. ment.	92nd.	4th Gar. Bat.
Case.	4.	15
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Contraction of the

	Was led up by a guide. This man employed upper leaf to be contribed to the last of the las	Was led up by a guide.
	Right eye underwent no Was led up by a guide, treatment. Left eye, an arti- This man employed ficial pupil formed. Secondaried The pupil being wery little larger than the Vision.—Is able to read theyer of a needle, be effected smallest print of a newspaper. By contacting the effect guide they are also also and the same and the s	Right eye, an artificial pupil formed, and the granulations of the lids removed. Left eye, vascularity of the cornea removed, and the opacity nearly so. Vision—Right eye, is able to read the smallest print of a newspaper with the assistance of a glass. Left eye, is able to read the smallest print of a newspaper with the assistance of a glass. Left eye, is able to read the smallest print of a newspaper with the sistance and the smallest print of a newspaper without a glass.
	24Aug.	10 7 Oct.
	1	10
*	M.	Right eye, cicarix of the cornea, and contracted pupil. Left cye, opacity and vascularity of the cornea, ides slightly granulated. Vinion—Right eye, can see large objects at some distance. Left eye, can occasionally read the print of a large bible.
	16June	Ditto
	36	8
	Wm. McNeili	79th, Jas. Graham
	20 184.	79th.
	16	17
		D

REMARKS,	Was led up by a guide.	Was led up by a guide.
State of Eyes and Vision on Discharge.	24-July Right eye lost. Left eye, 2 30 Jan. Left eye, an artificial pupil correa. The pupil correa. The pupil correach and obscured in a great degree by the cicarix. State of Vision.—Cannot make his way in a strange place alone. By plucing a squid, tell the hour by a watch close to his eye be can see the hands, but not tell the hour. Is unable to do any kind of labour.	1875321013201
Duris discharged from of from Disease Ophthalmic Roupital.	30 Jan.	24.Aug.
Dura- tion of Disease	Young	11
State of Disease and Vision on Admission.	Right eye lost, Left eye, corner. The pupil contracted and obsents of the corner, The pupil contracted man obsented in a great degree State of Frison.—Cannot make his way in a strange place alone. By placing a watch close to his eye he can were the hands, but not tell the four. Is unable to do any kind of labour.	41 16 June Right eye lost from organic 11 24 Aug. Left eye, an artificial pupil disease. Left eye, rupture of the corner, and a cicutrix opposite the pupil. Finion.—Left eye, cun distribute and run a volume disease. In an oblique direction when close to them, but says he could not walk in a strange place.
Date of Ad- mission into Ophthalmic Hospital.	24 July	6 c c c c c c c c c c c c c c c c c c c
Age.	55	41
NAME Age, mission into Cyclic into Hopkins. Hospital.	94th. Wm. Smil	21st. James Allan
Regi- ment.	94th.	21st. J
Case.	1 8 1	61

				SELECTER P.	
Right eye, an artificial pupill formed. Left eye, opacity of the corres, much diminished. Vision.—Right eye, can read the small print of a newsymper fluently. Left eye, clearer.	Left eye, an artificial pupil formed. Fixion.—Is able to walk any	where without aguide, and tell the hour by a watch with the assistance of a glass. The re- tina has not yet recovered from the insensibility caused by its long quiescence.	Left eye, an artificial pupil formed. Right eye, as on ad- mission, underwent no treat- ment. Vision.—Left eye, can see	large print. The nerve is daily recovering its sensibility, by using the eye.	
24Aug.	9 7 Oct.		4 24Mar.		
 Right eye, rupture and ci- cutix of the cornea, the pupil nearly oblicerated and obscur- of by the circuits. Left eye, no spacity of the cornea. Vision.—Right eye, can dis- cern some objects with it, but could not walk in a strange place. Left eye but slightly impaired.	18t. Wm. Hamilton 32 24 July Right eye boxt. Left eye, if the cornea with a clearity and contracted pupil. Findon.—Cambor walk in a	strange place without a guide, and does not know one person from another, but can distin- guish a man from a woman.	Dec. Left eye, contracted pupil 74 94Mar. 1817 and protraded ris. Regift eye, slight opacity of the cornea and lids slightly inflamed. Figure.—Left eye useless.	makel has specify to other to an article to the state of	
29 16 June	2 24 July		43 l Dec.		
Royal Geo. Watson 2 Artil.	Wm. Hamilton 3		Jas. Strathern 4	zivide 10	
-	181.		71st.	Britis	
08	B	2	55		

REMARKS.				
State of Eyes and Vision on Discharge.	A cicatrix on both cornees, 10 corned. Left eye, an artificial pupil formed. Left eye, as on admission. He labours under incipient cataract of this eye, but not sufficiently advanced but not sufficiently advanced to render the performance of the performance of the corner than t	an operation advisable. State of Vision.—Right eye, can readily distinguish large objects. Is able to read small print, and tell the hour by a watch.	27 Apr. Left eye, an artificial pupil formed. Right eye, the opacity diminished, and lids sound.	Vision—Left eye, he can now distinguish objects, read large print, tell the hour by a watch, hand his sight is still improving. Right eye, stares that he him- the sight of this eye much in- proved, and the eye much proved, and the eye much stronger than on admission, being able to tell the time by a watch without the assistance of a plans.
Dura- discharged from Duscase Opinhalmic Bospital,	4Mar.		7 Apr.	
Dura- tion of Disease	10		60	
		State of Vision.—Sufficient to walk about.	Left eye, cicatrix covering he pupil with opaque cornea. Right eye, granular lids, with ome inflammation.	Vision.—In clear weather
Age, Date of Administration into Resistantial	o Dec.	- 1	Ditto	
Age.	25		58	
NAME.	42nd. Alex. Mackay 42 10 Dec		Charles Abercrombie	
Regi- ment	42nd.	31	Ist Foot	
Case.	5	g a		72

	A STATE OF THE STA	ANDATION Anneyless following street
Left eye, an artificial pupil formed. Vision.—Left eye, can see to read the smallest print of a newspaper fluently, and seeve objects much more distinctly than before the operation.	Right eye, an artificial pupil formed. Vision.—Is able to tell the inne accurately by a watch anassisted by a glass, and to point to the smallest fetter of a newspaper; but does not know flow to read. He sees at a much greater distance than be- fore the operation, and every fing much more distinctly.	Ccentrix of both cornese co- 15 1 July Right eye, an artificial pupil fring the pupils. Vision.—With the left eye to walk any where without a guide, can only make his way in guide, can see to read, and tell the hour by a watch. Left eye, somewhat improved.
24Aug-	Ditto	1 July
71	Ot Ot	15
47 163 une Right eye lost. Left eye, 17 24 Aug. Left eye, an artificial pupil, and a cicatrix of the corner. Tris of the corner. Trison.—Lan see to walk to read the smallest print of a newspaper fluently, and sees but is unable to labour. This of the corner and a cicatric sees a newspaper fluently, and sees but is unable to labour.	Left eye lost. Right eye, 21 cupture and cicarix of the corras engaging the upper edge of the pupil. Vision.—Can walk very well without a guide, and tell the toolabout, or to see above a few yards from him.	a office
16 June	Ditto	43 1 Dec.
24	44	3 8 9
79th. Alex. Smith	94th. Dan. Morrison 44	79th. Wm. M'Kay
79th.	94th.	79th.
25	56	27

Property of the Control of Technique and Vision REMARKS.	30 Jan. Right cyc, an artificial pupil This man prevaricated formed. This man prevaricated when examined by the Board, appointed to assistance of a glass can reliferament, to whom he derive time to the came read. Can been beenfield; butthe and not must, but cannot read. Can been beenfield; butthe and not must, but cannot read. Can been beenfield; butthe and not avoid chairs, tables of large animach by the three assistances of the same of this vision took place. The cause of this man's prevarication has been an ecertained.	1 July Left eye, an artificial pupil The operation for arti- 1818 formed, and the fear tenoved-dietal pupil was perfectly Right eye, opacity of the con-accomplished, in the left nea greatly diminished. eye, but it was afterwards eye, eye, which propose the propose of considerably improved. Canlymph having been deponow see to read ordinary sized-leided on the commensuration.	and the corner consideration and a special pupil was formed in the right eye, was daily improving. An artificial pupil was formed in the right eye, which in consequence of very great infammation succeeding, was not attended with immediate succeeding, we not attended with immediation of the pupil is to the eye sisten of amendment for the Hospital, before his times weeks previous to his decrease mand to be extremed as guide, and was frequently discern small objects distinctly and valk any where without a guide, and was frequently observed in the art of writing. 27 Left eye, underwort to treat. This man's sight was April ment. Right eye, an artificial notingroved by the operation of the consequence of hy a high degree of inficial pupil was perfectly flammation. Certain Carlotte and the consequence of hy spink having become deposited upon its expanie.
Dura- lists of Disease	III	6	* S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
State of Disease and Vision on Admission.	Left eye destroyed. Right 11 30 Jan. eye, rupure and cicatrix of the cornea, with contracted pupil, nearly obseured by the cicatrix. State of Faion.—Is unable to walk without a guide.	Left eye, pupil closed. Right eye, cicatrix of the con- nea opposite the pupil. VisionLeft eye, enitely blind. Right eye, can see to avoid carriages and people in the street.	Left eye, cornea opaque and vseuchin, and the eye en- larged. Right eye, pupil mearly closed with opacity of the cornea. Chronic inflammation of the palpebrae and eye-balls. Triston.—In an obscure light he can distinguish large objects with the efty eye, but veryindistionely with the right; cannot labour or walk in a strange Left eye, rupture of the cornea, proteusion of the iris, and the pupil dragged to one side. Mgaft eye, rupture of the pupil. Vision.—Left eye, crapture of the horizon. Left eye, rupture of the pupil. Vision.—Left eye, can see to walk without a guide, Right eye, rupture of the pupil. Vision.—Left eye, can see to walk without a guide, Right eye, rupture of the pupil. Vision.—Left eye, can see to walk without a guide, Right eye, can only distinguish light from darkness.
Date of Administration 1820 Opportunity Boupital.	24 July 1818 6	1 Dec.	1,818 1,818 1,1 Dec.
Age, open	88	1 1	386
NAME. A	48th. John Ure	Duncan 5	John Smith
Regi- ment.	18th.	79th.	Ross Militia
386	88	29	31

REMARKS.	the Colongine town of the Colongine to t	ases of obliterated	Was led up by a guide. Sensibility of the retina increasing.	with formed This case was considered so very unfavourable for treatment, that a certificate was forwarded to able to tell the War Office by a proc. th, to make (essional gentleman ofennian to walk tence and respectability by himself (staing, "that he did not may weekly," think it possible for meopie and the presentability which the procession of the pr	E-F PAR	
State of Eyes and Vision on Discharge.	Left eye, the operation for artificial pupil was successfully performed, and he saw objects immediately afterwards tout in was succeeded by violent in- ternal inflammation, which ter- minated in suppuration and the wasting of the organ.	vision of the Iris, in c	Left eye, an artificial pupil formed. The capsule and leus removed. State of Vision.—Is able to tell the hours by a watch, and to walk about with great case	An artificial p in the left eye. Vision.—He is the time by a wata obout wey weters, about wey weters, the sight is impro- my proportion as the recovers, its sensiti will be eventually	Right eye, an artificial pup formed, and the lens absorbed Left eye, ditto, ditto, Vision.—Is now able to rea moderate sized print with eace eye, and tell the time by watch.	Left eye, an artificial pupil formed, and the openue cap- sule permore. Vision
discharged from Ophthalmic Rospital.	2 Oct. 1818	by Di	27 April	10 24 Mar.	27 April	Ditto
Director Director	Year. 15	ilar	y g		00	51
State of Disease and Vision on Admission.	Right eye lost. Left eye the papil nearly obliterated, and a cientific of the cornea. State of Vision—With difficulty the convals in a place that the continue of the contained but requires a guide in a strange one.	Results of Operations for the Formation of Artificial Pupil by $D_{ivision}$ of the Iris, in cases of obliterated Pupil, complicated with capsular or lenticular Cataract.	Right eye lost. Left eye, the pupil contracted, and addresser, with opacity of the capsule. State of the retina Vision.—Quite blind for four years.	Right eye lost. Left eye, rupture of the cornes, with a circuitx extending over more than half of it, and completely obliterating the pupil. Friso.—Can barely distinguish the glare of a strong light,	Right eye, contracted pupil and cataract, Left eye, in- client cataract, Left eye, in- Frion.—Right eye, can only distinguish light from darkness. Left eye, only sufficient to walk without a guide.	Right eye lost. Left eye, contracted pupil, and opaque yayude. Vision.—Only sufficient to walk without a guide.
Date of Ad- minsten helo Ophthalmic Bospital.	1 Dec.	he Fo	1 Dec.	29 10 Jan	1 Dec.	Ditto
Age.	252	for t	88	66	45	9
NAME.	A. M'Cullum	Operations	Kirkwood	Wm. Gamble	Wm. Howat	Alex. Robertson
Regi- ment.	10th.	lts of	Vet. Bat.	21st.	1st Foot.	83rd.
Case	3 65	Resu	88	क व	35	98
					С	
			THE RESERVE OF THE PERSON NAMED IN			

				the same of the sa	and the second s
REMARKS.	Was led up by a guide. This man was dismissed the Hospital in consequence of his relixing to swibmit to a repetition of the operation, for the purpose of calarging the pupil.		Was led up by a guide. This case was marked in the return on admission, as being "very unfavourable for treatment."	Was led up by a guide.	Was led up by a guide. This case was marked on admission as "very unfavourable for treat- ment."
State of Eyes and Vision on Discharge.	Right cyc, an artificial pupil formed and the tens absorbed. Was led up by a guide formed and the tens absorbed. Was led up by a guide the pupil man was demines what enlarged. By frision—Last be to topened on the relating to the hour by a watch, and submit to a repetition of to make his way without a guide, the operation, for the purpose of enlarging the pupil.	Left eye, an artificial pupil formed, and the catanact removed. Right eye, underwent to trainent. Vision.—Left eye, can read moderate sixely print with an appropriate glass, and tell the hour by a watch.	Right eye, an artificial pupil formed with perfect success. Was led up by a g. This case was min the return on admit the return on admit as being "very unfa as being "very unfa optic nerve being found to be totalment."	Left eye, an artificial pupil was formed with perfect success, but violent infammation and suppuration resulted and suppuration resulted formed to remove the opaque lens.	Left eye, an artificial pupil formed, the vitreous humour Was led up by a guide, was found fixed out ease was marked and the eye became violently on admission as "very inflamed, and altogether sunk unfavourable for treatment,"
Days Inscharged the at Disease Opensamic Bestelland	31 Oct.	30 Jan.	7 Oct.	Ditto	30 Jan.
Dara- tion of Disease	Year, 9		1.	00	=
State of Disease and Vision on Admission.	Left eye lost. Right eye, oppacity of the cornea, opposite the pupil. State of Vision.—Can see co-tours, and with great difficulty, and with great difficulty, ing them close to the outer part of his eye. Cannot walk any where without a guide.	Left eye, closed pupil and cutarract. Right eye, morbidly irritable. Vision.—Left eye, can only see light from darkness. Right can encountes see to read for a few minutes, and can walk without minutes, and can walk without a person a yard from him. Has not been able to work at his trade for five years.	Left eye, completely aman- rotic. Right eye, staphyloma of the cornea with an entire closure of the pupil, the iris being in contact with the cor- nea.—At the outer corner of the right eye he can discern the shadow of his hand waving between him and the light.	Right eye disorganized, and vision lost. Left eye, con- rracted or obliterated pupil. An observation opaque. An observation opaque. In an observation opaque. In an observation of the con- tain and the light.	Right eye lost. Left eye, 11 30 Jan. eicarrix of the cornea, the pupil obliterated, and the eye-ball parity wasted. Vision.—Left eye, can scarcely distinguish light from darkness.
o of Ad- tion into challed orpital.	16 June	1818 c s s s s s s s s s s s s s s s s s s	16June	Ditto	16 June
Age, mission ista Rospital, Rospital,	42 16		30 16		91 25
₹	4 6	47	- O	89	
NAME	John Fraser	M-Culum	Hugh Baird	John Honeyman	David Graha m
Regi- ment.	28th.	St Foot	21st Foot.	6th Vet. Bat.	23rd
Clase.	25	38	66	40	7
100		TVI TITLE TO THE T		C 2	

of the Iris from the Ciliary Ligament.	State of Eyes and Vision REMARKS.	Left eye, an artificial pupil formed. Right eye, the cor- nea somewhat clearer.	State of Vision.—Left eye, is able to guide himself with	perfect safety, tell the hour by a warch, and by the assistance of a glass, he can read the smallest print of a newspaper	with fluency. Right cyc, is able to distinguish objects much clearry, and to read a smaller sized print than on admission.	formed, which was succeeded by very high inflammation or This constraint, and the eye This case was marked and suppuration, and the eye This case, we were un-involved for treatment.
Results of Operations for the Formation of Artificial Pupil by detaching a part of the Iris from the Ciliary Ligament.		36 16June Left eye, rupture and ch. 12 7 Oct. Left eye carrix of the cornea, with complete oblitation of the public periods.		To be desired to the second	with flue able to dis	Right eys. rayurus and cl. 10 Ditto Right eys, an artificial pupil pupil obliterated. Left eye, by very high was succeeded by very high was succeeded by very high inflammation site the pupil, and the eye suck. Takina.—Right eye, can per-
rations for the Formation	NAME. Age. Date of Ad. St. Optical miss into the Control of St. Benjital.		nea, nea, sube	darknes to read		45rd. George Smith 44 Ditto Catalin pupil graph site a sit
Results of Oper	Case. Regi-	Rifle Jas. Gibson Brigade		42		43rd. Georg

An operation for arti- ficial pupil by detaching a part of the iris, had been performed previouslyto his admission into the Hospi- ral. This case also was marked on admission into Hospital as being " very unfavourable for treat- ment."
Right eye, an artificial pupil An operation for arti- formed, which was succeeded firstly upilly by detaching by high inflammation, and the apart of the tris, had been eye supparated and sunk. performed previouslytobis admission into the Hospital. This case also was marked on admission into Hospital as begind a very unisvourable for treat- ment."
30 Jan.
-03
24 July Left eye lost. Right eye, total cornes, and a formed, which was succeeded first hugh by dearching to formed, which was succeeded first hugh by dearching to formed, which was succeeded first hugh by dearching to high inflammation, and the spart of the iris, had been only high with every supparated and sunk. Finon—Can make his way with which he is acquainted, and and an an inflammation, and practice of the content of the corner, wery indistinctly.
24 July
94th. Jas.Williamson
94th.
4

Cases of Cataract.

REMARKS.		mare, and	
State of Eyes and Vision on Discharge.	1BDc. Right eye, gutta serenal Yurn. 124 Mar. Left eye, the cupsular catas and the pupil partic eye, secondary cataract. 12 and the pupil partices of the	The lenses and capsules re- moved. Vision.—Can read the small- est print of an ewpaper, and per- ceive the minute and seconds' marks with the greatest accur- macks with the greatest.	The lens and capsule re- prison.—Can read thesmall- est print, and perceive the minute and seconds marks our as watch-dial with great ac-
Disease Ophthalmic Recpital.	24 Mar.	Ditto	Ditto
Dara- nion of Disease	120.		17
State of Disease and Vision on Admission.	Right eye, gutta screna. Left eye, gutta screna. Has been, secondary cataract. Has been operated on without success. State of Vision,—Unable to walk by himself in a strange place.	Cataract in both eyes. The left eye has been operated on without success. Trison—Billind of left eye. Can only discern light from darkness with the right.	Ditto Right eye, gutta serena. 17 Left eye, calaract. Vinton.—Billo fright eye. Left eye, can see to walk alone in places to which he is accustomed.
Age, Date of Ad- mission tens Opathalms Beeplaal.	37 1Dec.	Ditto	Ditto
Age.	26	41	42
NAME.	John Brown	Fife Edw. Syme	Alexander M'Cullum
Case. Regi-	218.	Fife Militia	6th Vet. Bat.
2006.	45	94	17

1744	94	
Left eye, the cataract removed by operation. Right Had been twice operation. Left eye, is able fortied upon for cataract ves the small letter of a new-previously to his adminspare (but does not know soon into York Hospital, them) and the minute and seconds' marks on a watch-dial.	Both cataracts removed, no portions of capsule re- ining. The portions of capsule re- Frison.—Can distinguishwere removed by a sub- ge print, tell the hour by a sequent operation. trange place.	
Call ad ospin	f ca	
HE HE	o d dion	
ork ork	rion	
Poo Poo	nod ob	
ad noons into	he rent	
H He no	T and the second	
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Zigi Zigi Li	ove r by	f cs y
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of no of no no of war	William G	was to be
on a constant	of of	he but on.
the de le the	atar Ca Tel Tel	nulling illing is to be cook in the cook is to be cook is to be cook in the cook is to be cook in the cook is to be cook in the cook in th
na ma	o plant,	ey as sibbasic of the
Left eye, the cataract removed by operation, Right works, and all and an arranged by operation, Right Wisson—Left eye, is able to Vision—Left eye, is able to remain letter of a newspaper (but does not know them), and the minute and seconds' marks on a watch-dial.	27 Apr. Both cataracts removed, some portions of capsule remaining. The portions of capsule remaining. The portions of the property as a strange place. a strange place.	Left eye, the cataract removed, a small portion of cap- saile remains, but it is not in the axis of vision. Right eye, nor neve restored. Faion.—Left eye, not im- proved, the optic never being mensible. Right eye, roat in- sproved, the optic never being mensible. Right eye, nor in- sproved, the optic never being mensible. Right eye, norally as good as it ever was.
Leg over con- con- con-	B. B	L L L L L L L L L L L L L L L L L L L
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के देखें के देखें	Cataract in both eyes. The felt eye has been operated on without success. TrisonNearly blind, being unable to walk by himself in a strange place.	Left eye, cataract. Right eye, incipient gutta serena. Vision.—Left eye, cannot discern any ebject and searcely light from darkness. Right eyer indistinct.
Left eye, capsular or se- ndary calaract. Right eye, cenbrane of the bids sexcular di infamed. Fition.—Left eye, can only seem the shadow of objects here interposed between him d the light.	l, be	Left eye, calaract. R. Lye, inclinent gutta serena. Vision.—Left eye, car discern as abject and sear discern as short and sear very indistinct.
right see	Peris lind ms	ec.
lid had	y b	tta tta
the cap	bo ss. ss. k b	A Sept 2
Left eye, condary catari membrane of and inflamed. Fision.—Le discern the sh when interpo and the light.	Cataract in be left eye has bee without success. Vision.—Nea unable to walk I strange place.	Left eye, co
y can anno ca	t se his	ion.
Para di in man	Cats hound ble	The Canal
SNov. Left eye, capsular or se- 1818 condury cataract. Right eye, membrane of the his sexcular and inflamed. Fition.—Left eye, can only discern the shadow of objects when interposed between him and the light.	1 Dec. Cataract in both eyes. The without success. VisionNearly blind, being tunable to walk by himself in a strange place.	Light No. 10
18 18	Dec. 17	Apr
181	118	500
Wm. Monteith 43 18Nov. Left eye, capsular or so 151 30 Jan. Left eye, the cataract re- 1818 condary cataract. Right eye, 1819 moved by operation. Right eye, 1819 moved by operation. Right swellar and inflamed. Finion.—Left eye, can only discrete the shadow of objects when interposed between him and the light.	94	67th. Patrick Maher 20 20Apr Left eye, cataract. Right 3 eye, incipient gutta screna. Fision.—Left eye, cannot distern my abject and scarcely light from darkness. Right very indistinct.
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pate	Cal	Ma
Me	Bui	*
i i	lem	inter .
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3rd Royal Vet. Bat.	Sch. Fleming Calder 46 1 Dec. Cataract in both eyes. The 1817 left eye has been operated on without success. Vision.—Nearly blind, being unable to walk by himself in a strange place.	67th
8	49	8

Cases of Ectropium, or Eversion of the Eyelids.

Vision pure despense State of Eyes and Vision pressed of State of Eyes and Vision pressed of State of Eyes and Vision and the vision as a signal, as a strong, and the vision as good as in the left eye. All inflammation in both This man had passed a profuse of the vision as good as in the left eye. All inflammation in both This man had passed eyes removed, the ectropium in Chelsea Board about two both eye-life cured. Grant-months before he experienced be relapseed of lation of the lids removed. All inflammation in both This man had passed eyes removed, the ectropium in Chelsea Board about two both eye-life cured. Grant-months before he experienced the relapseed of a sevented, the end of right eye perfect. He is the only man who have been admitted into a state. Fights of the lids in the left eye perfect. Hopital in an infectious state.
24Mar.
24Mar.
Vision Deservation of the control of
Vision a disease. Index lid.
Age, gones de les state of Diseases and Vision Diseases de Admission. Special Company of Admission. 1817 Ectropium of right eye slightly defective. Frans of right eye slightly defective. The upper list ament scollen. The high degree of chemosis Cornes of the fit ruptured, and the inferior once everted, with a high degree of chemosis Cornes of the fit ruptured, and eye lost. Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Frans.—Fran
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Age. Date of Adel Age. On the of Adel Age. On the of Adel Age. Supplementary of Adel Age. Supplementary of Adel Age. Supplementary of Age. Supplementary o
Megi- meen. Geo. 26ch. Sutherland Sutherland
Case, Regi. 26th. 51
Case, 51

Cases of Entropion, or Inversion of the Eyelids.

-	#A- 1619.29.2 .	
REMARKS.	An extreme bad case. The right eye is in a state of irritation, owing to a fissal of lightning last night. Mr. My assistant, Mr. Mc-lin, examined this man some months after his resone months after his resone months after his respects and vision to have frauch improved since his discharge from Hospital.	
State of Eyes and Vision on Discharge.	Both under lish restored to their natural position. Gra- papearly of the cornea almostene for right eye is in an appacity of the cornea almostene for firminon, owing to smooth of the right eye is in an incurable. Right eye, a fish of lightning has found a light eye, can My assistant, Mr. Mc- nicutable. Right eye, can My assistant, Mr. Mc- sistinguish large letters, tell the lin, examined this man floor by a watch, and walk some months after his re- hour by a watch, and walk some months after his re- hour by a watch, and concerported the state of his fortuble. His sight may betyes and vision to have greyedy resorred in the rightmuch improved since his peye, by a continuation of the discharge from Hospital.	Left eye, the opacity and vestilarity of cornea removed. and he sees as well with this states, he was not able to lift up the upper eye-lid for two years previously to the opera- tion.
When Derre-discharged from Discass Ophthalmic Hospital.	27 Apr	24Mar.
Dura- ion of Discussion	10	6
State of Disease and Vision on Admission.	1 Dec. Granular lids, entropion of 10 of 74 ppr Roth under lids, vascularity from their natural position. Granular position of their natural position. Granular lids, vascularity property of their natural position. Granularity of both corners almost removed in the right cyc. Start of Fusion.—Unable to incurable. Right cyc. Start of Fusion.—Left eye incurable. Right cyc. and distinguish large letters, tell the hour by a wareth, and walk about with perfect was. Feel the position of the cyc very strong and confliction.	42nd. James W.Kasy 40 Ditto Right eye and lids healthy. 9 [24Mar. Left eye, the opacity and properties of the seas as well with this eye. In the lids also diseased with slight openion of heapers and he seas as well with the other. He with slight openion of the properties of common vacuum of the control of the common of the
Age, contributed for the formal for the formal for the formal for the formal fo	1817 I	Ditto
Age.	45	40
NAME.	Duncan M-Millan	James M'Kay
Regi-	45nd.	42nd.
Case.	8 8	54
	D	

	. 93	
REMARKS.	This man's eyes are very near their natural state.	
State of Eyes and Vision on Discharge.	year, 30 Jan. Left cye, inversion of the 1819 lids cured. The vascularity of both corner errored, and the copacity very nearly so. State of Vision.—18 able tovery near their natural walk any where without a state. Considerable distance. Can tell the hour by a watch.	Loff eye, a disposition to 16 7 Oct. The disease of the lids constrained of the superior lid, lightly ditto, thickering and fally ditto, thickering and fally ditto, thickering and inflamation of the inferior of the superior of the inferior one. Figure — Says he finds his sight much electrary and stronger ears from the constant irritation and lacthrymation with thick lis eyes have been affected.
Disease Disease Ophicalmic Disease Description of D	30 Jan.	7 Oct.
Dura- tion of Disease	Years	16
State of Disease and Vision on Admission.	36 '24 July Right eye, opaque and vas- 1818 cular cornea, with slight dis- sace of the limings of the cyc- lide. Inversion of both lids of the left eye. State of Pation.—Cannot guide, or perceive any object with either eye.	Left eye, a disposition to cenception of the superior lid, slightly distor, thickening and inflammation of the inferior. Right eye, ditto of the superior lid with thickening and inflam- mation of the inferior one. Prison—Las been unable to do any work for the last five years from the constant irrita- tion and lachymation with foon and lachymation with which his eyes have been af- fected.
Age, Date of Ac-	24 July 1818	Ditto
Age.	36	24
NAME.	Alexander Anderson	42nd. Andrew Blair
Regi- ment.	74th.	42nd.
Case.	55	98
	a a	

	_
der lids. 34 24 Mar. Both under lids completely, Tilss man previously to describe to their natural situa-bis admission found ir ne- tion. Eyes quite sound. In consequence of the irripation excited by their friction against the eye-balls	Cases of Granular Lids, with Opaque and Vascular Cornea, the Effects of the Egyptian Ophthalmia.
34	ప
Entropion of both un Fasion.—Unimpaire	th Opaque and Vascular
Dec.	wi
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42nd. Wm. Marshall 64	Granu
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	And the second second second
REMARKS.	This man has been in- spected since his return home, by my assistant, Mr. Mellin, who reports that his eyes have entirely precovered their natural appearance, and that his rision has in consequence very much improved.
State of Eyes and Vision on Discharge.	David Maims. 36 11 Dec. Opacity and vascularity of State of Perion.—Totally control of the cornea of each eye greatly diminished. State of Vision.—Totally of the cornea of each eye greatly diminished. State of Vision.—Totally of the cornea of each eye greatly diminished. State of Vision.—Totally of the cornea of each eye greatly diminished. State of Vision.—Ho can be a feet in-saistent, with tolerable fluency, although bonn, by my assistant, with tolerable fluency, although accounted their natural consequence of their hand the state of the consequence of the consequence of the confinement of an Hooght accounted the consequence of the confinement of an Hooght accounted the consequence of the confinement of an Hooght accounted the consequence of an Hooght accounted the consequence of an Hooght accounted the consequence of an Hooght accounted to the consequence of an Hooght accounted
When freeharged from Political Bospital,	24Mar.
Dura- thus of Discusse	Φ
State of Disease and Vision Dura distance on Admission.	Dec. Opacity and vascularity of 1817 both corners, with highly dis- cased hist. State of Vivon.—Totally blind.
Age, Date of Ad- mission into Orbitalinac Hospital.	1817 1817
Age.	98
NAME.	David Mairns.
Regi- ment.	V ct. Bat.
Case.	85
	D 2

REMARKS.		This man worked at his rade for several weeks previously to his dischange rom Hospital.	This was an extreme bad case, when the treat- ment was first begun. He left the Hospital before he obtained permission so to do.
State of Eyes and Vision on Discharge.	Right eye lost. Vascularity ¹⁰⁰⁰ ¹²⁷ Apr. All disease of the lids removed, opacity and vascularity villous and thickened state of ormea entirely removed. State of Finion.—Can only the smallest print of a new-stands between him and the paper, and tell the time accurating place.	Charles Smith 24 16 June Opacity and vascularity of 24 50 Jan. Granulations of the lids, and both comee with granular lids. Vision.—At arris length be concorned removed. This man worked at his est print of a newspaper. This man worked at his est print of a newspaper. This man worked at his est print of a newspaper. This man worked at his est print of a newspaper. This man worked at his est print of a newspaper. This man worked at his est print of a newspaper. This man worked at his est print of a swarch, and previously to his discharge work at his trade of a shoell from Hospital. The connection of the print of the print by a warch, and previously to his discharge work at his trade of a shoell from Hospital.	Vascularity of both concean and the granulations of the list more current of the right cornes entirely removed, and of the left marky so. Trison.—Can read the small sillity, and east nearly as well
Owner destarged from Disease Optitalianic Benjami.	27 Ap	30 Jan	9 Oct.
Dans.	Year	ole of	
State of Disease and Vision on Admission.	Feb. and opacity of left connea with a willow and thickened state of the fining of the eye-lids. State of Vision—Can only distinguish large objects when placed between him and the light, and is unable to walk in a strange place.	Opacity and vascularity of both corners with granular lids. Vision—At arm's length he cannot see his fingers. Cornot walk in a strange place without a guide, and is unable to do any work.	Dec. Opacity of both cornees with 9 1817 (vascularity and granular lids. Fision.—Unable to walk without a guide.
Age, Ophthalmor	36 5 Feb. 1818	5 June	817 v
Age.	36	24	31 1 Dec.
NAME.	James Clark	Charles Smith	iffe
Regi- ment,	9th Vet. Bat.	21st.	John Tennici
Case.	59	99	19

	1819 vascularity of the lids, and 1819 vascularity and opacity of the right cornea removed. The opacity of the left cornea nearly or, littor—Right eye, can read the smallest print of a news- paper though. Left eye, can read moderate sixed print, tell the minute and seconds marks on a watch-dish, and says he can, on a clear day, discrin large objects at the distance of a mile.	was nearly removed, and that of the opacity of left comes was nearly removed, and that of the order of the removed, and that mained appeared to be admiring the whole period cicarirs, situated to be admiring the whole period the pupil. The lids nearly-tremely irregular, and the pupil. The lids nearly-tremely irregular, and have over or frion.—Left eye, nearly-sufficiently for him to I restored, and that of the right dismissed from Hospital considerably improved. Could read small print, and tell the hour by a watch.
-	30 Jan.	4 Mar.
,	10	e e e e e e e e e e e e e e e e e e e
	yascularity of both cornea. 1819 vascularity and opacity of the 1819 vascularity of both cornea. 7 right cornea records of the pact of the 1819 vascularity and opacity of the 1819 vascularity and opacity of the 1819 vascularity of the 491 cornea neadly so, in a strange place without a guide, or to distinguish one person's countenance from another the malter as second a news there is no pager themsely. Left seek on a watch-dail, and says he can, on a clear day discern large objects at the distance of a mile.	Acute inflammation, with total opacity and vascularity of bota cornea, and highly granular lids. Vatou.—Totally blind.
1	4 July	24 1 Dec.
	35	40
	63rd. Wm. Hill	Wm. Arms
	63rd.	Foot,
	62	63

bed he

REMARKS.	The state of the s	
State of Eyes and Vision on Discharge,	years 30 Jan. Left eye, villosity of hish 1819 removed. Right eye, grandiations of the hish, and wascularity of the cornea, removed, and the operity nearly so. State of Vision.—Left eye, can so small print, fight eye, can walk any where with perfect ease and security, read small print, and tell the hour by a watch.	Granulations of the lids, and the opacity and vascularity of Vision—1s able to walk any Vision—1s able to walk any where with perfect case and security, to read small print, and to perceive the minute and with perfect distinctions, any water coxes lines.
Dura- discharged Box of from Disease Opht balmic Bospital.	30 Jan 1819	Ditto
Dura- Box of Disease	Year.	6
State of Disease and Vision on Admission.	Gavine Young 41 24 July Left eye, rupture of the con- 1818 nea with contracted pupil, and villors lied, Refat eye, cyaque and vascular corner with gra- hubintons of the lied, State of Frison—Left eye, Can tell the hour by a watch. Right eye, is only able to per- ceive the shadow of objects. Camot make his way alone in strange places, or do any kind of labour.	Opacity and vascularity of 6 both cornees, with granular life. Vision.—Can only see to Vision.—Can only see to lim. Bad done, in places known to lim. but sees objects tolerably definite trear him. Has not been able to de any kind of work for the last three years.
Date of Ad- minsion into Ophthalmic Hospital.	24 July 1818	53 Ditto
Age.	4	55
NAME, Age, mission mass Constraints Barginal.	Gavine Young	Joseph M'Laran
Regi- ment.	Renf.	Sth Son Bat.
Case.		65

		N. 1	The second second second
	By continuing the applications with which he will be supplied, his sight may be made perfect.	The remaining opacity may be removed by con- tinuing the applications.	Bernell
	Gramulations of lids removed to the state of	Cranulations of list in both both of vaccularly removed. The cornea of both eyes nearly free of vaccularity, except on the The remaining opacity margin of the left cornea, from may be removed by contended to the left cornea, from may be removed by contenoved. Trision—Can perceive the removed and minute marks, and the time accurately by a and the time accurately by whatch, and enaryl as well with the left as the right eye.	1819 and "Granulations of the lids, 1819 and vascularity of the corner second, and the opacity nearly as So. Some inferior of the con- junctive palpedra remaining. Fision.—Left eye, can read the smallers print of a newa- paper. Right eye, can also pread the same sixed print by the assistance of a glass, and tell the hour by a warch.
	7 Apr.	Ditto	0 Jan.
۱	61		6
	Dec. Granular lids and opaque 1817 and vascular cornen. Vision.—Only sufficient to walk without a guide.	Opacity and vascularity of both correes, and granular lids. Vision.—Can distinguish but only light from darkness with the left.	Royal Jas-Mathewson 49 24-July Diseased lids with slight articles and opacity and rescularity of both corners. Vision.—Left eye, can read print of a large type. Right eye, vision not useful, cannot work at his trade of a gardener.
ı	Dec.	Ditto	1818 1818
	33 1 Dec.	80	64
	85th. James Stirling	Edw. Joyce	Jas. Mathewson
	85th.	9th Light Drag.	Royal Artil.
ı	99	19	89

REMARKS.		cat pa ellerano no la infraso più per farmone cato	
State of Eyes and Vision on Discharge.	27 Apr. The membranous band removed, by which his vision has been greatly improved. Can now distinguish objects much more distince than admission. Is able to read the smallest print of a newspaper.	18th. James Kenny 45 23 July Slight opacity, with vascu- loss lids. Vision.—Can see to read in a moderate light, but strong light, and says he feels his eyes wans better vision.	24 Mar. Granulation of lids removed, lids sound, opacity and vas- culating of cornea removed. Finion of both eyes consider- ably improved, can now read the smallest print with fluency-
Durn- discharged from of from Duezase Ophthalmic Hospital.	27 Apr.	9 Oct.	24 Mar.
Dara- then of Justane	Years	***	01
State of Disease and Vision on Admission.	Vascularity and opacity of gight cornea with a membra- nous band extending from the upper part of the globe, over the superior half of the cornea. State of Vision.—Unable to vork at his trade of a mason.	Slight opacity, with vascularity of both corners, and vill- lous lids. The corners and vill- tous lids. A moderate light, but strong as a moderate light, but strong light occasion much varieting and irritation, and thereby prevents better vision.	1817 Secondary lides, opaque and rescular correction. Vision
Age. Date of Administration of Administration of Administration of Administration of American and American of Amer	42 1 Dec.	S July	37 1 Dec.
Age.	54	46	12
NAME.	James Smith	James Kenny	Drag.
Regi- ment.	Shaff Corps.	18th.	13th Drag.
Clase.	69	2	2

		Was examined by a	This and the three fol- lowing patients had not been dismissed the ser- hice when admitted into	sthe Ophthalmic Hospital
Left eye, opacity of corner removed. Lids sound. Vision.—Can now see ob- lies with perfect distinctness, and feels the eye as strong and comfortable as it ever was.	The granisations of the nex- removed, (under which he which were omitted to be mer- florade in the first report on his somewhat diminished. Friend, a ble to read Friend, a ble to read Friend, a ble to read	glass, and on the whole finds his vision much clearer and more distinct than on admission. All disease of the conjunctor was examined by a five palpebra removed, as also stall surgeon, and reported in a palpera removed, as also stall surgeon, and reported in the conjunctor of the	the inflammation of the ball, It was the three fol- Opacity of the cornea dimi- lowing patients had not nished. Finite—Carreath the small-hern dismissed the ser- Tringa,—Carreath the small-hern dismissed the ser- Tringa,—Carreath the small-hern dismissed the ser- prise of a massioner with vice when admitted into	fuency, he says his eyes are as the Ophthalmic Hospital. capable of bearing the light as they ever were.
Mar.	Ditto	g July		
9	0	41		
Dec. Right eye lost. Slight opa- 6 24 Mar. Left eye, opacity of cornea is a cornea, with vilose and vacchar ids. Vision.—Impaired, cannot see objects at a distance clearly. See objects at a distance clearly.		his trade. disease and on the whole finds his vision much clearer and more distinct than on admission. 31 7 Dec. Slight opacity of both cor- 15 29 July All disease of the conjunct. Was examined by a live place, with villous and vascu-	lar lids. Vision.—Can readily distin-	gush small print.
Dec.	Ditto	7 Dec		
56	90	31	6	
2nd Alex, Marshall 26 1 Dec. Drug.	Foot. Munroe	Corporal John Phillips		Seattle.
2nd Drag.	Ist Foot.	64th.	and a	蓝
25 5	25	5	7.4	
	2 1			

REMARKS.	Was examined by staff surgeon, and reported for duty.	is man received onl repence a day pension recount of impaire n.
State of Eyes and Vision on Discharge.	All disease of the conjunc- tive pal pebre removed, as also tive pal pebre removed, as also slight cicarity of the cornes; a slight cicarity remains in the spacity in the left. State of Vinon—Can read of for duty, state of Vinon—Can read of fir for duty, space with the right cys, and the ordinary sized print with the left; says his eyes are as capable of bearing the light as they ever were.	All disease of the conjunctive palpeter removed, as abo all inflammation and variety about the corner remains opposite threspence a day pension the corner remains opposite threspence a day pension the sais of vision in each eye, on account of impaire ways where alone, and cell the time by a watch. His vision and state of eyes is greatly improved.
Darra- discharged from Darrase Ophibalmic	15 29 July	Ditto
State of Disease and Vision on Admission.	18.17 Dec. Opacity of both cornee. 15 grandlaribids. 18.18 vascullarity of the left, and the vascullarity of the conjunctive purple before a short of the vascullarity of the conjunctive purple before a short of Vision.—Can read large print with the right eye, and consider of Vision of left very imperfect. The smallest print of a new-paper with the right eye, and the ordinary sized print of a new-paper with the right eye, and the ordinary sized print of a new-paper with the right eye, and the ordinary sized print of a new-paper with the right eye, and the ordinary sized print with the left; says his eyes are as a capable of bearing the light as the current.	Opacity and vascularity of 17 both cornee, with granulations of the lids. Vision.—Can only discern light with the left eye, and to make his way with the right.
Age, Dure of Admission into	7 Dec.	Ditto
Age.	15 2	37
NAME.	64th. James Pike	Patrick Macaully
Regi- ment.	6sth.	64th.
Case.	2 2 2	92

Marie Marie			-			
	Was granted a pension for his services, but none on account of his eyes.			Discharged for drunk-	enness, and other ill conduct.	- destruce
Vascularity of both corners, 14 29 July All discuse of the conjunctific sight vascularity and liesty of lids.	very of the eff cornea. Some cornea, with a vessel running Was granted a pension Vision.—Can distinguish for its services, but none with the leff eye, the minute or his services, but none with the leff eye, the minute or his services, but none and account of his eyes.	ital, and can perceive the let- ters in a newspaper, but does not know how to read. Can see the hands and hour marks with the right eye. Says he sees sufficiently well for the	common purposes of life.	Granulations of the lids, and vascularity of the cornea completely removed, and the opa-	Vision—Is able to read the emers, and other ill con- senalest print, tell the timeduct, accurately by a watch, and to see objects at a considerable	distance.
9 July				16 June		
14		1000		Noatha.	1 = 1	Ha
3.2	Vision.—Very indistinct, cannot read even large print.		The section of the section is not	32 27 Feb. Opacity and vascularity of 11 seconds (Secondarity of the corner connection of the corner corner connection of the corner connection of the corner connection of the corner connection of	Vision.—Can barely see to make his way alone in known places.	Charles Information & Spirite
Dec. 1817				27 Feb 1818		
35.7	81	1 10 15		32	8	
64th, Patrick Dugan 35. 7 Dec.		1		66th. John Hinds		- Annual Control
64th.		1 35		66th.		100
	1 1	8	-	3	78	
		E 2				

REMARKS.	man deserte ospital before hi d recovered suff for him to quit kety.		
	vith This ce-from H acheyes ha cently see with sa t a	ids	is- rid-
State of Eyes and Vision on Discharge.	This man was attacked with acute inflammation while in This man deserted the formation in the cornea of eacheyes and recovered suffered to a compared to the pupil. Gently for him to quit to walk any where without a guide.	yes, Granulations removed, lids Fision.—Can read the small- est print of a newspaper.	Granulation of lids remov- ed. The only part of his dis- ease which was treated, or ad- mitted of relief.
When Givelanged from Disease Ophthalmic Happing	1 Aug	24 Mar.	7 Apr.
Dura. Disease	9	10 Sear	04 HOL
State of Disease and Vision on Admission.	State of Vaion.—Can discharged with highly gradular lids. State of Vaion.—Can discharge in gradular lids and valid about without difficulty, but is unable to read the largest print.	Granular lids. Vision.—Not affected.	Right eye, contracted pupil 24 27 Apr. Granulation of lids -removant protrasted, with cicatrix pupil obliterated, with cicatrix awa sexularity of cornea opposite to the axis of vision. Granular lids.
Age. Date of Admission into	3 Mar	45 1 Dec.	Ditto
Age.	55	45	19
NAME.	66th. Edw. Bathorn	Duncan Campbell	21st. Alex. Ross
Regi- ment	66еь.	Ist Foot	21st.
Case.	62	08	18

T DE

Ulcer of right comes healed. Accordantly of the left cornea, and the granulations of the lish removed, opacity of both cor- neae considerably diminished. Friem.—With the right eye he can now read the small the hour by a watch. The the hour by a watch. The is stronger and clearet than on admission of the left eye, he says, is stronger and clearet than on admission.	Left eye, granulations of the 12 30 Jan. Left eye, opasity of the concides, and very slight opacity of the corner. Regist eye, opacity and very light opacity of the light opacity of the light opacity opacity of the light opacity opacity of the light opacity of the light opacity of the light opacity of the light opacity opacity of the light opacity of the light opacity opacity of the light opacity opacit
7 Oct.	30 Jar 1819
11	15
Hugh Porteous 39 F6 June Ulcer of right cornes, with 11 7 Oct. Vaccularity of the eff cornes, and and extending from it to the superior evel-list, slight vascularity of the cornea. Conjunctive paleptree, vascular and granular in both eyes. Vision.—Left eye useful, being able to read with tolera-being able to read with coleration of the left eye, he superior every left may be and the can now read the small the hour by a warch. The hour by a warch. The strike misc. The strike misc.	8 Nov. Left eye, granulations of the 1818 lids, and very slight opacity of the cornea. Reful evey granulations of the lids and very slight opacity and vascularity of the cornea. Vision.—Left eye, mearly as good as in persons of his age. Reful eye, not so clear as the left.
e June	1818 1818
39	10
Hugh Porteous	92nd. Hector W.Lean 55 18Nov.
Rife Brigade	92nd.
65 65	88

	Discharged for having fused to submit to the quisite treatment.	Suffered much from fever since his admission. Health very bad, on which account he was dismissed much sconer than he otherwise would have been.	
REMARKS.	Discharged for 1 refused to submit requisite treatment.	much nis adn bad, or was dis ner th would	
REM	charge do to site tre	iered since l h very nt he soon vise	
	9.9	Sul fever Health accou much othern been.	
State of Eyes and Vision on Discharge.	10ct. Left eye, ulcer healed. In- leadariy of correa nearly and vas- conductive of correa nearly. The moved. Right eye, opacity and vocal unity diminished. The conjunctiva palpebrae im elicised to submit to the proved. Vision—Left eye, can distinguish objects. Right able to walk any where with- out a guide,	Granulations of lids remov- ed, opacity and vascularity offerer since his admission. Cornea considerably dimi-Health very bad, on which hished. Fision—can be the bourmerth ewas dismissed account the was dismissed and the country of the country	
P. 19.1	8 Ha 8 Ha co da co	com com nishe V accu see l	
Dura- discharged tion of from Discuss Ophthalmic Respiral,	31 0	27 A	
Dem- tion of Disease	Year, 17	9	
State of Disease and Vision on Admission.	18 Mammation subsided, and vascularity of 17 18 Mammation subsided, and vasularity of large pebra much thickened and vascularity of corres nearly repebra much thickened and vascularity of corres nearly repebra much thickened and vascularity of corres nearly reproved. State of Timos. — Totally blind blinds to blind the cyc. or distribution of left eye. Right eye can distribution of left eye. Right eye can distribution of left eye. Right eye can distribution of left eye. Wight eye can distribution of left eye. The conjunction and left eye. The conjunction of left eye, and left eye operation of left eye, or distribution of left eye, or distribution of left eye, or distribution of left eye,	71st. Fhomas Fife 29 1 Dec. Total opacity and vascula- 6 27 Apr. Granulations of lids remov- Suffered much from full ammanion and granular lids. Right eye sound. Figure or sound and signification of light eye. Figure or sound. Figure or sound of light eye. Figure or sound. Fi	
Age. Date of Administration into	6 June	Dec.	
Age.	20 1	29 1	
NAME.	Geo. Lyons	Chomas Fife	
Case. Regi- ment.	Foot	71st.	
Case.	\$ \$		
400 400			

He has been attacked rith actue inflammation timee his admission into Hospital, to which previ- ously to the two last years to had been subject for right years in succession.		Discharged in consequence of his being unable to bear any of that class of applications which were requisite for his cure.		
Graunlations of lids removed to the has been attacked diminished. Perceives morewith acute inflammation light with the right eye, butsince his admission into the cicatrix lying opposite the Hospital, to which previpupil prevents in stitutionals not on the two test years may objects, feels the eye con-be had been subject for siderably stronger and more eight years in succession comfortable.	Granulations of lists remov- ed. Vascularity and opacity of cornea diminished. Cicatra remaining. — Vision	Opacity and vascularity of 6 7 Oct. The granulations of the lids other cornees, with granular what better than on admission-quence of his bring unable "Fision—Tolerably good at many sind of application with- of applications which were out great inflammation being requisite for his cure, thereby excited. His health has been very bad ever since.		
27 Apr.	Ditto	7 Oct.		
=	6	9		
10 Dec. Opacity and vascularity of 11 27 Apr. Granulations of lids removed with granular and vascularity of 12 27 Apr. Granulations of lids removed a vascular lids. Slight opacity of diminished. Perceives more light with the right eye, but the cicatix lying opposite the right eye. Unable to see with the right eye.	Cicarrix opposite the left pupil. Slight opacity of right cornea and granular lids. Vision—Nearly blind of the left ey, sees to walk with the right.	D : : : : : : : : : : : : : : : : : : :		
1 Dec.	Ditto	51 Ditto		
40	25	51		
John Trimmer	92nd. John Nish	68th. Brian Smith		
79th.	92nd.	68th.		
98	28 8	. 88		

REMARKS.	This man has suffered most severely since his admission from inflammation from the lungs which required very large bleed ings, and which gave rise to rirriative inflammation of the eyes of the most severe kind. He is most recovering and improve adulty, but is not cared this anxiety to return home is extreme.		Discharged for highly conduct.
State of Eyes and Vision on Discharge.	Granulations of the lids and man has suffered nearly removed, opacity and most severaly since his vascularity of the cornes some definition of the lungs which State of Fision.—Feels his required very large bleed sight improved, being able tolings, and which gave rise see the minute and seconds to irritative inflammation marks on a watch-dial. Recovered in the respect of the most severe kind. He is now severe kind. He is not cared His amxiety to return home is extreme.	29 Apr. As on admission, having re- fused to submit to the requisite treatment for the removal of his disease.	Left eye, lids villous. Right roved, and the opacity very moved, and the opacity very moved, and the opacity very moved, and the opacity very moved some villously remain removed some villously remain ring, all inflammation entirely conduct. Vision. Left eye, as on admission. Right eye, consider: ably improved. Can now discern minute objects and tell the hour accurately by a watch.
Deep- flee of Cheracycol flee of Cohthalmic Disease Boupital.	27 Apr.	29 Apr.	6 Nov.
Dues- lies of Nestee	13 Year.		, h
State of Disease and Vision on Admission.	Granular lids with opaque 13 27 Apr. and vascular cornea. State of Vision.—Sufficiently good to labour.	Right eye destroyed. Opacity and vasculative of left cornea. Conjunctive palpebrarum high-ly diseased and granular. I fuion.—Blind.	Left eye, lids villous. Right Very, opque and vascular cor- nea, with grandar lids, and a mation. Vision—Left eye, can dis- tinginish objects. Right eye, can see objects but indistinct. Iy, is unable to discern any one's features.
Date of Administration 1810 Ophidadasic Bouptlake	1 Dec.	Ditto	23 24 July 1818 1818 1818 1818 1818 1818 1818 18
Age.	4	88	8
NAME.	92nd. David Renny	John Towers	gand. John Garrity
Regi- ment	92nd.	1st Life Guards	Start Start
Chase.	- 88	8	8 6
			1

Cases of Opaque Cornea.

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REMARKS		Therefore and introduced to the state of the
State of Eyes and Vision on Discharge.	Right eye, opacity of cornea borte of Faion.—Considers State of Faion.—Considers aby improved, being able to by the assistance of a newpaper, by the assistance of a glass, and can see without it, the minute and seconds marks on a watch-dial. He had not been able to read, for eight been able to read, for eight years previously to his admis- sion.	Right eye, opacity of the cornea diminished. Cicatixa Vicionary. Vision—Is now able to read small print fluently with the right eye.
Dura- discharged tien of from Discussion Opinishic Mospitals.	27 Mar.	Ditto
Dura- tion of Discuss	Years	
State of Disease and Vision on Admission,	1817 cornea opaque. 1817 cornea opaque. Siate of Fizion—Only sul- ficient to walk without a guide. Rich of Fizion—Considera ably improved, being able to active the print of a newspaper, by the assistance of a splass, and can see without it, the minute and second's marks on a watch-dial. He had not been able to read, for eight years previously to his admir- sion.	Thos. Connel 34 Ditto Opacity of right cornea. Creatrix of the left, and protration of the iris. Vision.—Unable to read.
Age, Date of Ad- mission into Ophilialmic Respiral.	1 Dec.	Ditto
Age.	20	\$6
NAME,	Jas. Russel	Thes. Connel
Case. Regi- ment.	9th.	Ren- frew Militia
Case.	26	88
	2000	
	Water Water Commission	

REMARKS.			The first manner of a second s
State of Eyes and Vision on Discharge.	52nd. John Reynolds 46 I Dec. Slight opacity of both cor- 13 27Mar. Opacity of corneæ entirely femoved. 1317 oren. State of Vision.—Able to State of Vision.—Can read the print of a newspaper with faceory.	Right eye, opacity of cornea diminished. He states his vision of beinged before than on ad- mission, and that with the as- sistance of a glass, he can read with the left eye.	Opacity of comee dimi- nished. States his vision so be stronger, and that he can see sion. The right comes is marry The right comes is nearly clear, but says he cannot see as well with this eye as with the fift, and that vision was defective in it before he was autacked with ophthalmin.
Dern- tion of from Disease Ophthalmic Bospital,	27 Mar.	9 Ditto	Ditto
Dura- nos of Disease	Year, 13		61
State of Disease and Vision on Admission.	Slight opacity of both cor- nees. State of Vision.—Able to read large print when placed close to the eyes.	Slight opacity of both corners. Vision.—Can read with the right, but not with the left eye.	Slight opacity of both cor- Wision.—Left eye good. Right very defective.
Age. Date of Ad- mersion into Ophrhatmic Hospital.	1 Dec. Sli 1817 near. Sta read close	Ditto	36 Ditto
Age.	94	37	98
NAME.	John Reynolds	27th. William Rutherford	William
Regi- ment.	52nd.	27th.	Foot
Clase.	97	86	66

100	101	102	103
7th.	9th.	91st.	yet. Vet. Bat.
Matt. Wilson	9th. John Taylor	91st. Thos. Ayton	A. M'Donald
37	22	31	9
37 Ditto	Ditto	Ditto	Ditto
	Slight opacity and vascu- larity of both comes with in- cipient plerygii. Vision.—With the left eye he can see to walk, but is un- able to read small print with it.	Slight opacity of both cor- nees. Apprehended to be ci- carrices. Vision.—Indistinct.	46 Ditto Ledy eve, guites section. Refer 10 every citeatrix of the corners opposite the pupil, with proteins of the trian.—Left eye, blind. Right eye, can see to walk with it.
1 241	<u>a</u>	9	
Mar.	Ditto	1 8	Ditto
Opacity of corneee diminished. Piston	The pereggin temoved. The program is the conjunctiva adheres to the side of the pereggin, and confuses vascular. Fason.—Much improved, Fason.—Much improved, can see much fatther and clearer than on admission.	Opacity diminished. Vision.—Much more distinct, and the eyes consideration, stronger than on admission.	Right eye, cicarrix of cor- nea nearly as on admission. Vision.—Thinks that his vision is slightly improved.
			The state of the s

REMARKS.				
State of Eyes and Vision on Discharge.	24Mar. Opacity of left cornsa re- 1818 moved, and he now seves with this eye as well as he ever did. Right eye, has undergone no treatment.	but the opacity of corner, di- minished. Fixion.—1s able to distin- fraint, small print, and the minute and seconds' marks on a watch-dial.	Cicatrix of cornea as on ad- mission. Vision.—The same.	Right eye, opacity of cornect diminished. Yidon.—Can distinguish ob- jects much clearer. Can real the print of a newspaper with ages, and the hour by a
Dura- dissbarged from of Boncase Ophthalmic Rospital.	24Mar. 1818	Ditto	Ditto	
Dura- tion of Disease	Years.	00		6
State of Disease and Vision on Admission.	Foot. Alex. Gardner 37 1 Dec. Right eye, calaract and 1817 anautosis. Left eye, opacity of the cornea opposite the pupil. State of Fision.—Left eye, tueful. Blind of right eye.	Cicatrix of both comees. Finon.—Imperfect, can see to read middle-sized print.	Cicatrix of left cornea op- 16 posite the pupil, protrusion of the right ins. Vision.—Right eye good.	Left eye lost. Right eye, centrix of the cornea opposite the papal. Vision.—Able to walk with- out a guide.
uste of Ad- isoton lop- plethalmic Rospital.	Dec. 1817	Ditto	Ditto	Ditto
Age.	37	20	45	30
NAME. Age. District Age. Orderanisis.	Alex, Gardner	Michael	Hugh Ross	78th. Hugh M-Donald
Regi- ment.	75th Foot.	9th Vet. Bat.	25th Foot	78th.
Case.	104	105	901	201
		A CONTRACTOR OF THE PARTY OF TH		

			711
			This case was marked in the return on admis- sion as being "very unfa- vourable for treatment."
Left eye, the opacity considerably diminished. Vision.—Can now read the remainest print of a newspaper fluently by the assistance of a glass, and tell the hour by a watch.	Ditto Left eye, opacity greatly diminished. Tision.—He can see the minute and seconds' marks on a watch-dish, and read the smallest print of a newspaper.	The opacity considerably diminished, the eyes much steoger, and the morbid sensibility to light subsided. Wiston.—Can read the small-est print of a newspaper fluently.	Ditto The opacity of the left cor- nea diminished. This case was marked in the return on admis- Finium.—Is able to tell theiston as being "very unfia- hour by a watch accurately, vourable for treatment." and can walk any where with- out a guide.
4Mar.	Ditto	24Aug	Ditto
55 mg	00	21	
90th. Robert Smith 45 3 Dec. Right eye, perfect. Gica- 1817 trix of left cornea opposite pupil. Left eye, the oppacity considerably diminished. Vision.—Can now read the prison-closed the left eye. Vision.—Can now read the prison-closed the signest eye, the oppacity considerably diminished. Vision.—Can now read the prison-closed the signest eye, the opacity considerably diminished.	hight eye toot. Cicatrix of left cornea. Vision.—Able to walk without a guide.	8th. James Carthy 51 [24-July Slight opacity of both core 17, [24Aug Illie opacity considerably function of full ministed, the eyes much stronger, and the morbid some shifting to light subsided. Vision.—Can read with the first of a messpatance of glasses.	Dun. Donald M'Call 50 16 lune Right eye lost. Opacity of 20 the ferror. But the altherence of lead. Lids slightly vascular. First. Labs First. Labs and a strange place or do any kind of labour.
Dec.	44 Dino	4 July	6 June
25	3 8	51.	20
Robert Smith	James Strang	James Carthy	Donald McCall
эось.	yeh Vet. Bat.	Sth.	Dun. Fenc.
108	109	110	1111

g	Discharged for having absented himself from Hospital without leave.	
REMARKS.	arged for himse without	
-	Disch absented Hospital	
State of Eyes and Vision on Discharge.	Granulations of the lids en- tirely removed, and the opacity of the cornea opposite the ar- tificial pupil is daily diminish. State of Vision.—Can dis- Hospital without leave, clearly, and feels the eye much more comfortable.	24.Aug. He considers his vision sulgithy, improved from the opacity being somewhat leserded; but it is not considered profest to risk an operation, as he is willing to return to Hospital whenever he finds his sight decay.
	Grautirely roof the tificial ing. Stat. Stat. Stat. inguise clearly more c	He cons slightly im opacity being ed; but it prudent is as he is will Hospital who sight decay.
Durn- disclarged alon of from Discussion Optimization	THE STATE OF THE S	24Aug
Dura- sion of Disease	Year, 14	0
State of Disease and Vision on Admission.	26 24 July Left eye, comes projecting 14 considerably beyond the eye- lid. Right eye, cornes rup- tured and very opene. An artificial pupil has been formed. Softer of France.—Cannot see to walk alone, or at all times to avoid objects in a house.	Left eye lost. Right eye, 3 capshilar catanet, and cicatrix accupying the corne opposite the axis of vision. Fision—Camor make his way in a strange place alone, but can red the time by a wach when placed close to his eye. Has not been able to do any change alone, and the difficult of a strange place alone, but can full the time by a wach. Has not been able to do any change, change alone since his discharge.
e of Ad-	July a grant of the part of th	Ditto
9,000	9	H 6
Ag	61	31
NAME. Age. mission to the longer of the long	William Murehead	Royal Peter M'Nie Arfil.
Case. Regi- ment.	94th Foot	Royal Artil.
Case.	112	113
Mary and	A CONTRACTOR OF THE PARTY OF	

oppa- tinus vrith sup-		
Times of the superior lid of the remaining opa- he right very and lipprince of the remaining opa- pacity of the cornes consistently of the cornes may be removed by conflict versibly diminished. The remainished be removed by conflict version—Can read the small ing the applications with the right eye. plied.		ALER STATE
naini cor l by slicat		
ren f the povec app		
The acity of the remaining the which phied:		
Pari Pari	4 55451	224 84
Times of the superior lid of the registry and lippitude of the einferior removed, and the results of the cornes consistent of the cornes consistent with the result of the results of the result of the results of the r	Opacity of the commo of each e considerably diminished. Fision.—Can now read the allest type of a newspaper thy great fluency with both thy great fluency with both es, and he can look at the rougest light without may in- avenience.	Opacity and vascularity of the corner removed, and the cere of the Lyft headed. In- munition gone. Vision.—Is able to see as ell as ever he did with both res.
d, ar nea d the spape	mea o minis v re new with ook out a	cula, a caled to to to with with
supe move con shed. n rea new	y din y din y din y a y a y a y a y a y a with	d vas move ft h ne. able e did
The Car	ofth Crabbi	n good a ser
lerio of ler	acity onsid ion- est t great and niene	vacity of t onation stom.
Times of the superior lid of the right vey, and lippitude of the interior removed, and the removed party of the cornes consistent of the cornes consistent. Trison.—Can read thermally the right veys.	6 Ditto Opacity of the cornea of each eye considerably diminished. Foising—Can now read the smallest type of a newgapter with great fleuery with both eyes, and he can look at the strongest light without my inconvenience.	1 X 2 2 3 2
	01 8 4 0 8 0	19 119
0 1	Di C	18,1
F .		9 9 9
Left eye unimpaired. Right eye, tinea of the superior lid man lippinized of the interior, with diffused opacity of cornea. Vision—1s unable to read with the right eye. Every doject uppears as through a mak.	Opacity of both cornea. Vision.—Left eye, can tell the boar by a watch. Right the boar by a watch. Right seye, can see to read, and can convertines work at his trade as a garderent but the stooping at this work, or being exposed to his work, or being exposed to strong light occasions indumentary.	minding, and increases use open- ity. Opacity and vascularity oil both cornea, and an ulter in both cornea, and an ulter in sease inflammation. Kisma—Left vey, cannot grade himself by it, nor see any object distinctly. Right any object distinctly. Right syet, sufficient to walk without a guide, or to distinguish one person from another when close to them.
d. Rection inferior to	can raid and and copin c	allariti
paire sup f the pacit mable eye.	eye eye cad, at his he st	vasc on. on. on. wal
f the old	I both	and and the so t
eye opitus iffuse near o	Opacity of both cornea. Vision.—Left eye, can tell hour by a watch. Right ey, can see to read, and can retimes work at his trade as gardener; but the stooping at work, or being exposed to trong light occasions infam-	city crity orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness orness ornes
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APPENDIX.

PREVIOUSLY to my inserting the Medical Report of the cases of the pensioners who have been treated in the Ophthalmic Establishment, York Hospital, Chelsea; it may be proper to give a brief account of the origin of that establishment,—of the directions which have been given for the selection of the patients,—and of the manner in which their cases are taken down on admission into, and previously to their discharge from, hospital.

In 1810, I had the honour to propose to Sir David Dundas, the late Commander-in-Chief, the formation of an institution for the exclusive treatment of pensioners dismissed the army, blind from the Egyptian ophthalmia; asserting, that many men might thereby be restored to the service, and large sums of money annually expended in pensions might be saved to the country.

For a considerable time after I made this proposal, it was denied that the malady admitted of radical cure. The fact, however, having been established by repeated public trials

Contracted Pupit with Cabsular Cararac

War-Office, 13th March, 1819.

New and successful methods of treating disorders of the eyes, more particularly those arising from Egyptian ophthalmia, having been discovered, and it being the wish of His Majesty's Government to extend the advantages of these discoveries to the out-pensioners of Chelsea and Kilmainham Houpitals, who are afflicted with ophthalmis and other disorders. of the eyes, the Secretary at War informs — that if he labours under a malady of the above description, he may submit himself to an examination by one of the military medical officers, appointed assistants to Sir William Adams; in order, that if his case he found susceptible of relief, he may proceed to London, for the purpose of being placed under the care of the latter gentleman.

The out-pensioner will be allowed the usual rate of marching-money, (being one shilling and ten-pence a day,) from the place of his residence, or the station where he shall be inspected, (as the case may be,) reckoning ten miles for a day's march; and the same allowances will be made to him

thought proper that the men should be conveyed by waggons or canals.

If the inspecting medical officer shall deem it absolutely necessary, that a guide should accompany the out-pensioner, the same rate of marching money will be granted for the guide, upon the man's producing a certificate from such inspecting medical officer, of the necessity for the attendance of

If the out-pensioner should be desirons of returning to his house, after being inspected, he will notify his desire to the inspecting medical

officer, who will arrange with him the time when he will be required to set

officer, who will arrange with him the time when he will be required to set off for London, and the manner of his proceeding.

It may be proper to explain to the out-pensioner, that he will be paid and subsisted as a soldier during the time he is under treatment in York Hospital; and that, the obliget of Government being solely to extend to men who have suffered in the service, the benefits of the improvements lately made in the method of treating disorders of the eye, there is no intention of making any alteration in the amount of his out-pension, which will accordingly recommence, at the former rate, from the day on which

e is again discharged from hospital.

The out-pensioner may be assured of receiving every comfort and attention requisite to the cure of his malady; but it will, of course, be proper that he should take with him such articles of clothing and personal neces-saries, as he may want, whilst absent from his home.

By command of His Royal Highness the Prince Regent, in the name and on the behalf of His Majesty PALMERSTON.

With the view to ascertain the general applicability of the new modes of treating the most important diseases of the eye, a part of York Hospital, Chelsea, was appointed for the reception of the blind pensioners, to which an appro-

priate number of military medical assistants was attached. One of these gentlemen was sent to Scotland, to examine and select for treatment, all cases among the pensioners which admitted of relief.

The Right Hon. the Secretary at War having judged it expedient to alter his directions, in regard to the selection of one class of patients, who had been inspected at the first five stations in Scotland, the following Letter of Instructions to my assistant, was transmitted by me, previously to his commencing his tour of examination through the remaining part of North Britain.

" As you are about to proceed to Scotland, for the examination of the remainder of the ophthalmic pensioners, I have the honour to request, by desire of Lord Palmerston, that you will select for treatment, all those belonging to Chelsea and Kilmainham Hospitals, whose cases admit of being cured, or materially benefited, keeping in view, as far as you can, the comfort and benefit intended the pensioner by this order of Government. In making the selection, you will, therefore, exercise your judgment and discretion, conformably to those intentions; at the same time, bearing in mind, that the prevention of the further dissemination of the contagion of the Egyptian ophthalmia, is another object of Government.

The following forms of disease should more particularly be selected for

treatment:—
First, Granular lids and opaque cornea.

Scondly, Cases for artificial pupil, whether arising from ulceration of the cornea, inflammation of the iris, accidents, or the unsuccessful termination.

corries, inflammation of the iris, accidents, or the unsuccessful termination of previous operations.

Thirdly, Opacities of the cornea, with or without vascularity.

Fourthly and lastly, Cataract, conical cornea, accidents, and, in short, every species of disease which admits of material relief, should be selected."

In conformity with these instructions, my assistant noted down for treatment, every case which he conceived held out in any degree a prospect of being benefited.

But in the hurry which necessarily attended many of his examinations, when travelling long distances over the mountainous parts of Scotland, within limited periods, some men were selected and sent to York Hospital, whose cases were found, upon examination, to be absolutely incurable, and who were, therefore, immediately sent back without treatment.

Some of the other cases sent up, were also of so unfavourable a nature, as to be considered scarcely admissible for the trial of any practice: but I was induced to make an effort to relieve the men, in consequence of their having been brought so far from home, and their being exceedingly anxious that I should do so.

I, however, felt it due to the reputation of the institution, officially to report these cases to the War-Office, on their admission into hospital, as being "very unfavourable for " treatment," and it will be seen, by referring to the annexed Medical Report, that more than one-half of the operations which have failed, were thus noted.

These circumstances are stated, and the Letter of Instructions to my assistant is inserted, lest it may be imagined, that in the contemplation of publishing annual Reports, those pensioners only were selected for treatment, whose cases were of a favourable description. The fact, however, is, that I had not thought of publishing these Reports until I found, that in consequence of incorrect statements of my practice baving been promulgated, such a measure became expedient, in order to obviate misrepresentation.

It is now proposed, therefore, to lay before the Profession and the Public the cases of all the men who have been dismissed from the Ophthalmic Institution, since its establishment, as well of those who have not been benefited. as of those who have; and to furnish thereby the means of forming a fair comparative estimate of the value of the peculiar operations and modes of practice employed in their treatment.

It being the wish of Government, that an authentic Record should be kept, of the results of the treatment of the pensioners at the Ophthalmic Hospital, a Board, consisting of the superior medical officers of Chelsea Hospital, and those of the Army Medical Board, was formed, to examine the patients on their admission into, and on their discharge from thence.

At the first meeting of the Board, for the discharge of patients, the men were very minutely examined, and a Report was drawn up of every man's case, which Report was submitted to the inspection of all present, myself included. But this plan has not been since continued either on the admission or discharge of the patients. On the contrary, the three superior members of the Board, aided by their respective assistants, have taken private notes, which notes have not been offered to the inspection of the other members of the Board, or to myself, and, consequently, no General Report has been made. Now, as five or six different individuals can scarcely be expected to take the same view of any subject, much less of complex diseases,-it may be doubted, whether the intention of Government, in the formation of this Board, has been fulfilled *.

Feeling, however, that the reputation of the institution, as well as of my operations and practice, required, that in conformity with the intentions of Government, an authentic Record of the cases should be kept, it became necessary for me to adopt the best means within my power to obtain such a Record.

For this purpose, one of my assistants has been directed to draw up the particulars of every man's case, on his admission into the hospital, and previously to his discharge from thence. His Report is repeatedly compared by myself and my two other assistants with the state of the men's eyes and vision, in order to ascertain its correctness. It is then submitted for the same purpose to all the students and practitioners, civil and military, attending my lectures and operations at York Hospital*.

The Reports, after having been thus scrutinized, are laid upon the table for the inspection of the members of the Board, appointed by Government, to examine the pensioners, who make such use of them as they judge proper, in taking their private notes. They are afterwards transmitted to the War-Office, and the annexed Annual Medical Report is a copy of these Official Returns.

Placed as I was at the head of this institution, I considered it due to the confidence reposed in me by Government,

^{*} In a recent instance, when it was the wish of the Right Hon, the Secretary at War, that the Commissioners of Chelsea Hospital, should themselves inspect some of the blind pensioners who had been successfully treated, and some of whom had thereby been enabled to work at their respective trades, the Commissioners declined so to do, from having no record of their previous state, on which to found, an opinion of the degree of benefit the men had obtained.

 $^{^{\}bullet}$ Upon some occasions, from twenty to fifty medical students and practitioners, have been present at these examinations.

that every thing connected with the treatment of the pen sioners should have the most complete publicity; and that the Profession at large should, therefore, be invited to inspect, and estimate, the practice which was to justify that confidence. This invitation, of which the following is a copy, was issued to the Profession, and it has been answered by the attendance of several hundreds of professional gentlemen, both civil and military.

SIR WILLIAM ADAMS having had the honour to be nominated by His Majesty's government, to superintend that part of York Hospital, Chelsen, which has been appropriated to the reception of the blind pensioners belonging to the army, navy, and artillery, feels it a duty to lay open to the profession at large his new modes of treating them. This duty is suggested, as well by the peccaliar confidence which has been reposed in him, as by the high sanction thus conferred upon this improvements in ophthalmic surgery. He therefore freely invites all medical practitioners and students, who are interested in the advancement of this branch of surgery, to attend his operations at York Hospital; which, for their convenience, will be performed in future, on Tuesdays and Fridays, between the hours of seven and nine in the morning.

To remove all doubt or misconception, with regard to Sir William Adams's practice, he proposes, on each of these days, to give a description of the nature of one of the diseases to be operated upon—the general modes of performing the operation—his peculiar mode—and his reasons for deviating from the usual practice, where such deviation has been found necessary.

necessary.

The records kept of each case, from the patient's admission into the hospital to his final discharge, will be open at the periods already mentioned, for the inspection of such gentlemen as attend; so that the profession will be enabled fairly to appreciate the character of the new, as compared with the old modes of practice.

It is expected, that from fifteen hundred to two thousand patients will successively be placed under the care of Sir William Adams, in this institution.

26, Albemarle-Street, March 10, 1818. There have been one hundred and seventeen patients discharged from the Ophthalmic Institution between the period of its establishment, December 1st, 1817, and January 30th 1819. Their diseases are classed in the annual Medical report under separate heads. It will be seen that of forty-seven operations for artificial pupil—thirty-eight have perfectly succeeded—in five cases, notwithstanding the artificial pupils were perfectly formed, the patients have derived no accession to vision, in consequence either of the insensibility of the retina, or from other causes—in four cases only has the operation altogether failed, and three of these were marked on their admission into Hospital as being "very unfavourable for treatment."

Eight cases of cataract have been operated upon. Not one failure of the operation has occurred; and the success has been complete in all, with one exception, (Case 50), in which the removal of the cataract was as perfectly effected as in the other instances, and the patient had not an unfavourable symptom, either at the operation, or subsequently to it. But the optic nerve was found to be totally insensible.

It is worthy of remark, that one half of those cases, in which vision was perfectly restored, had been operated upon without success previously to their admission into hospital.

In seven other cases of cataract (complicated with a closure of the pupil) the cataract in six instances was successfully removed, as well as the artificial pupil formed. There has not been one failure, in the operations for the cure of inversion or eversion of the eyelids.

The result of the treatment upon the pensioners will, I trust, on referring to the cases, be considered scarcely less successful than the operations have proved, when the number of years, during which many of them have laboured under their diseases, and the great variety of treatment which they had undergone previously to their admission into hospital, is taken into account.

It may be proper also to mention, that the vision of a considerable number of the patients might have been still further improved, had they been longer detained in hospital, more particularly those who underwent the operation for artificial pupil by excision, and those labouring under opacity of the cornea. In the former class of patients, from the rays of light falling upon a part of the retina not destined by nature to receive them, it requires a certain degree of exercise before the organ can be brought into healthy action. In the latter, the entire removal of the opacity would have required their detention also from their families, a considerably longer time than they remained in hospital. Therefore, such patients on their dismissal have been supplied with the requisite applications, and I have learnt from one of my assistants, that on his second journey to Scotland, having examined some of the worst cases of this kind which had been treated in the Ophthalmic Institution, he found that

the continued employment of these applications, conjoined with pure air, had restored their eyes to a state of perfect health.

The subjoined Medical Report will, I trust, satisfy His Majesty's government and the Public, that considerable benefit has been already effected by the measure, which originated in the humanity of the Right Hon. the Secretary at War; and that no exertion upon my part has been wanting, to realize to their fullest extent, those expectations, which I had the honour to propose.

REPORT

SUBMITTED TO HIS ROYAL HIGHNESS

THE COMMANDER IN CHIEF,

UPON THE SUBJECT OF

The Out Pensioners

OF CHELSEA HOSPITAL,

that have been under Treatment

FOR DISEASES OF THE EYES:

ALSO,

THE REPORTS

MADE BY THE

MEDICAL OFFICERS OF CHELSEA HOSPITAL

UPON THE

Cases of those Patients.

LONDON:

PRINTED BY IOHN REED, 6, RED LION COURT,

Fleet Street.

1819.

Army Medical Board Office, 3rd May, 1819.

SIR,

We have the honour to acknowledge the receipt of your letter of the 24th ultimo, inclosing a note from Sir William Adams, with the Report accompanying it, detailing the Cases of all the Pensioners who have been treated in the Ophthalmic Institution, under various diseases of the Eye; and conveying the command of the Commander in Chief, that this statement may be compared with the minutes of the Officers of this department, as well as with those of the Medical Officers of the Chelsea Hospital, who have from time to time attended at the examinations of those patients, and a Report made upon the subject for His Royal Highness's information.

In obedience to His Royal Highness's commands we have the honour to submit the required Report; and, referring to the several reports which were transmitted after those respective examinations, as likewise to the Letter we had the honour of addressing to you on the 24th of March, 1818, when it had been proposed to order all the invalids in Hospital at Chatham, to be inspected by an Assistant of Sir William

Adams, for the purpose of selecting those labouring under Diseases of the Eye, for treatment by Sir William Adams, at the York Hospital, we beg leave to offer a few remarks upon the result of Sir William Adams's practice.

... It appears to us that his treatment of diseases of the Eye may be divided into two classes.

1st.—Operations for Cataract and Artificial Pupil.

2nd.—Treatment of Opacities of the Cornea, and Granulations of the Lids.

He has performed operations for Artificial Pupil and for Cataract, the results of which operations are noted in a table at the foot of the report.

Without intending to undervalue the operative talents of Sir William Adams, we feel it to be our duty to observe, that we cannot consider him to have succeeded in a larger proportion than might be fairly expected from many Surgeons and Oculists in civil life; or from those Surgeons of the British Army who have turned their attention to operations for the relief of Diseases of the Eyes; we firmly believe, that had these patients been treated in the General Hospital at Chatham, or in either of the Public Infirmaries in the metropolis, or at many others in the country, the results would have been, at least, equally favourable.

In regard to Sir William Adams's treatment? of Chronic Diseases of the Eyes; such as Opacities of the Cornea; or the granular state of the membrane lining the Eyelids; after having given much attention to the subject, and after having compared the results of his practice with that of the General Hospital at Chathain, and with the Army of Occupation in France, we are unable to discover that he has adopted a more successful mode of treatment than other persons; on the contrary, we consider his practice to have been in the main unsuccessful, and we have little doubt that, if a certain number of cases of Chronic Ophthalmia, and particularly Opacities of the Cornea and Granulations of the Lids were to be placed under Sir William Adams, and an equal number of similar cases under the charge of Medical Officers of the Army, that the Medical Officers of the Army would cure, or benefit, a larger proportion of them than Sir William Adams. This opinion is not meant to imply any disparagement of this Gentleman,-it arises from the superior experience of the Medical Officers of the Army in these diseases. It may also be attributed to another cause, which is, they can give the whole of their time and their undivided attention to public duties, while an oculist, employed in extensive practice in civil life, ca afford only a small portion of his time; and the operations for the successful treatment of these cases is tedious; and the applications require caution and

Indeed Sir William Adams seems to have been aware of the benefit he might derive from the experience and skill of the Medical Officers of the Army; for, immediately after this duty was assigned him, he solicited from The Secretary at War, and obtained the aid of a Staff Surgeon of much talent and great experience.

In some former Reports we expressed doubts how far the amendment in the vision of several of those persons who had been treated by Sir William Adams would be permanent; and we were induced to entertain these doubts, in consequence of having learnt, by experience, that whenever soldiers have suffered repeated attacks of Ophthalmia, and particularly when the Cornea has become opaque, or the Conjunctiva lining the Eye-lids has become granular; although, by good air, proper diet, restriction from intemperance, and judicious medical treatment, the vision may be much improved; yet, after being discharged, if the patient be guilty of intemperance, or be exposed to cold winds, or damp or cold weather, a relapse will almost certainly take place. We are concerned to add that the results of some re-examinations of the Eyes of men who were lately under treatment by Sir William Adams, made by Medical Officers of professional skill and experience, since these men have returned to Scotland have proved our doubt to be well-founded.

We therefore beg leave to suggest that all the out-pensioners who have been under treatment by him at York Hospital, and hitherto not seen, may be re-examined by a competent board, and a report made on their present state.

If our view of the subject be correct, the utmost that has been accomplished by Sir William Adams is that, by means of certain operations long known and practised, but which never can render one man fit for military service, some out-pensioners have had their vision improved. Should it be the intention of Government to continue to afford this humane aid to blind pensioners; it appears to us it may be effected at much less expence to the public, and with less trouble and inconvenience to the outpensioners, if a ward or wards were appropriated for their admission in the General Hospital at Fort Pitt, or at the Detachment Hospital at the Isle of Wight, and at Edinburgh; at each of which places a medical officer is retained quite as competent as Sir William Adams to perform all operations for the Eyes.

We trust we shall neither be deemed to outstep the bounds of our professional duties, nor of decorum, if we suggest that medical aid ought equally to be extended to other out-pensioners, who, perhaps, have an equal claim to the compassion and bounty of the country.

We allude principally to those who are suffering under other complaints, particularly to men discharged on account of wounds received in action, or for broken down constitutions induced in consequence of disease contracted on service in unhealthy climates. Among the wounded will be found many whose wounds have broken out since they were discharged, either from injuries to the bones or other causes, and who, from the tedious and painful process of exfoliation of bone, which often continues many years, must suffer considerable pain and inconvenience, and often require the aid of an experienced and skilful surgeon with a better diet than their scanty means can procure.

It having been promulgated, that new and successful modes for the treatment of Diseases of the Eyes had been discovered by Sir William Adams, which were to be evinced in the treatment of out-pensioners placed under his care in December, 1817, and to witness which Medical Officers of the Army were invited to attend .- We, although experience had taught us to doubt the promises of Medical Men professing to possess secrets, anxiously waited the display of this treatment; and many Medical Officers attended his operations; but, as far as we have been ableto learn, the operations performed were such as have been taught at public lectures, described in books (both English and Foreign) and practised in public hospitals, more particularly of

late years at the Infirmaries for Diseases of the Eves.

It is true, that in the year 1812, in an interview with the members of the Army Medical Board, Sir William Adams did impart, as a secret, the removal of the granulations of the conjunctiva, lining the eye-lid by the knife; which he then considered as an improvement on the practice of Mr. Saunders, the late Surgeon of the Eye Infirmary, in Charterhouse Square, who had recommended their removal by the seissars. We shall not here enquire which of these modes is most advantageous, but may observe, that so far as we can learn, he has used this mode of treatment in very few cases of the men now reported upon. But we are, however, of opinion, that this mode, although by no means so generally successful as Sir William Adams once represented it to be, is, when judiciously performed, frequently eminently useful; but it is a tedious, and not very easy operation, and requires great care and caution in the performance.

It appears to us, that the desertions have been unusually numerous; which may probably in part be attributable to the inexperience of Sir William Adams, of the habits and feelings of soldiers, and in part to their dislike to submit to hazardous and painful operations at the discretion and on the judgment of one person: it being the invariable rule and positive orders of His Royal Highness The Commander in Chief, that no operation shall be performed without a consultation. Under the impression that this regulation is highly proper, we cannot refrain from submitting it as our opinion, that in future Sir William Adams should be restricted from performing any operation without previous consultation.

We observe in Page 1 of the Appendix to his Report, Sir William Adams states, that he proposed in 1810 to Sir David Dundas, the formation of an Institution for the exclusive Treatment of Pensioners dismissed the Army, blind, from Egyptian Ophthalmia, asserting that many men might thereby be restored to the service, and large sums of money annually expended in pensions be saved to the country.

We cannot consider this assertion as being borne out by the results of his treament, either in the cases now reported upon, or in those placed under his care in 1812, 1813 and 1814.

We are not aware that any of these persons had their vision sufficiently improved to be considered fit for duty, as soldiers; those examined by us we can state with confidence, had not. Some of them may, it is true, have been deemed by him fit for duty, and may have been reported as such, but on rejoining their Regiments they were either considered to be unfit for duty, or, relapsing shortly afterwards, were discharged. Twomen of this description (Philips and Pike)

are to be found in this Report, who were reported by Sir William Adams as fit for duty, and were ordered to join their Regiments at Gibraltar; but, on arrival at the Depot in the Isle of Wight, they were deemed unfit for duty, and have subsequently passed the Chelsea Board.

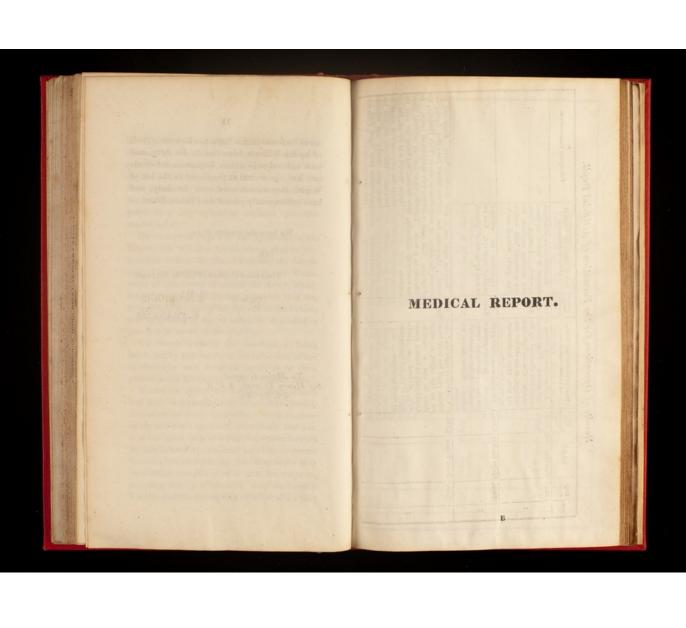
We have the honour to be,

SIR.

Your most obedient humble Servants,

(Signed) J. M'GRIGOR, W. FRANKLIN.

To Major General Sir Henry Torrens, K.C.B. &c. &c. &c.



Results of Operations for the Formation of Artificial Pupil.

Subsequent Examinations.			Creatra of right eye. Ar. 19 Says ha right eye is not of the May, 1819. Examined by the collect, in which better. Operation has in-John Miller; says that, during the collect, in which seems of a cicaria. Could walk in known place a cicaria. Could walk in known place a cicaria. Could walk in known place a cicaria. Sight of the left eye an artificial popul the boar with difficulty, by is formed, but being too near the Sight of the left eye impair. A watch, a watch, eye is the only one with which he even he with the come more tender and sensible to ritation from 18th, cold, &c.
State of Disease and Vision at Second Examination.	An artificial pupil formed. Sphere of vision increased upwards. From a blow, this morning received, the eye is covered with vessels. Can guide himself easily.	ission, could guide 10 Operation for artificial in accessioned March pupil of right eye. Can see Mammation sub-fision as on ad-	Say his right eye is 100 6th May, 1819. Examine better. Operation has in John Miller, says that, during creased the sphere of vision lime he was at York Hospital Affor eye. Can read with leges were operated on twice, difficulty in a book. Tells the right eye an artificial, the bour with difficulty, Dis formed, but being too near, it watch, eyes now the eye on use, the eyes now, the eyes on with white eyes now. This eyes are also come more tender and sen in critation from light, cold, the operation.
Date of Second Examina- tion.	26 Aug.	10 March	March P
State of Discuse, and Vision at First Examination.	1 July Lefey tota, Caentro of 1818 Lefey tota, Caentro of 1818 Lefey cornea, Pupil almost 26 reathers, Caentro light from ing hirkness, or the shadow pass- sing him, when in the street, retereor the light,	On admi bimself places. formed. I siding.	Creatra of right eye. Andicial upoll has been formed of on the other, in which there is also a cientra. Could walk in known places only, without a guide, Sight of the Ist eye impaired ance operation.
Date of First Examina- tion.	1 July	2 Jan.	S Jan.
NAME	32nd. Peterbellicott 1818.	78th, Hugh McKay 2 Jun.	John Fraser 2 Jun.
Regi- ment.	3gnd.	78th.	79th.
Che.	-	09	9
		1	

Algair eye loot. Is under 10 Since operation, the sphere; Reported by Deputy Inspection reflected to operation for March of vision has extended. Canof Hospitus Hemen: Salf Surjective the constant of the con		
Since operation, the sphere of vision has extended. Can guide limself any where, by wording there objects, but does no distinguish smaller objects. Has improved since admission.	13 Jaly Loff eye loat. Right eye 7 Oct. ruptured cornea, covering eye, quite successin, every the whole of the axis of vision. Pupil almost closed. Can walk in known places. Can distinguish objects near his eye, as a pencil, the fingers, &c.	Bight 7 Oct. Artificial pupil performed. Can see to read with glusses. Tight eye. Can guide him- wift in strange places. Can, with dis- content amon's fine distinct- in. Can Iy. Protrasion of the aque- rous humours removed.
ion for March ion for March of guide places. as im- mploy- g wares	ght eye 7 Oct. overing the axis almost known ush ob-	
Hight eye lest. Is under 10 urificial pupil. Gould guide urificial pupil. Gould guide manel in known pinces. Since operation he has im- pupil. Cornerly employ- net himself in sching warrs in Rdinburgh, calling warrs in Rdinburgh.	Left eye lost. Right eye ruptured cornea, covering mearly the whole of the axis of vision. Pupil almost elored. Can ausli ni known places. Can distinguish objects near his eye, as a pericul, the fingers, &c., a a pericul, the fingers, &c.	94th. James Wilson \$1Jul ₃ Left eye lost. Right correct expitured, and pupil almost obliterated. Can see objects near him, pretty districtly. Cannot read. Can guide himself in known places.
2 Jan.	91 July	StJuly.
John Kirkwood	Adam	James Wilson
9th Vet. Batt.	94th.	94th.
40	10 a w	9
	B 2	

Case Regi NAME, Examina-	89th.		8 94th. William Not seen.	9 81st, John Hill	20th, Geo, Gavine 2 Jan. Cloor covering of interpretation of inter	
State of Disease and Vision at Second Second First Examination, features	Right eye lost, Cicatrix 1818, of left pupil, which is ob-7 Oct secred. In a durk room, can distinguish white from red clothes,			Topi ton Thereselve	Cicatrix on right cornes, 1819. Artitucial covering papil with adhesion 29 Jan. eye, made. Left eye, protrusion of iris, suith adhesion and vascuristi adulta funda eye, a quanta funda eye, a quanta ened. I adh feft cornes.	
State of Disease and Vision at Second Examination.	John Silver 1812. Right eye loot. Cicutrix 1818. Artificial pupil formed in screed. In a dark room, see to keep the road with out the help of a guide red clothes.	ficulty. On a large dial- plate, can with difficulty tell the hour, by a watch with the assistance of glasses. On the whole improved,			Artineral pupil of right, in eye, made, Can see by glasses to read moderately, grared print, Gannalation not wholly removed. Left eye lost, but vascular cornea remaining. Lids highly granular diseased, and thick- in the control of the control of the control of the control or manufactures, and thick- for himself than before oper- ration.	
Subsequent Examinations.						

by by	7 ind. Wm. Mackay 5 Aug. Rupture of 16th cornea, 49 Jan. Artificial pupil performed April 15 to 29, 1819. Depution the certain and surgeon Jan. Artificial pupil berformed and observed the certain and surgeon Jan. Thomson, 3 and Surgeon Jan. Programs and Ja
Artifical pupil successful. Can see to tell the hour, by belp of glasses. Disease of linings removed.	Artificial pupil perform in left, successful, Visa larity gone. Can read wout help of glasses. Can although he still sees although he still sees of hich he, by a little man ment of his own, in string his crystross producing, can see to work his trade. It would apply that the opacity in left confined to the upper parter or work with the opacity in left confined to the upper parter or work with probagance and content white probagance is the proper parter or many parter or work with probagance and content white probagance is the property of the content white probagance is the property of the content white probagance is the property of the probagance is the probagance of the property of the probagance
29 Jan	29 Jan
31sh. Right eye gone, Chronic 29 Jan. Artifical pupil successful. July. influmation and operative of class of the boar, by the diseased lating, belp of glasses. Disease of and contraction of pupil. Can see light from darkness, or an object passing close to his eye.	Rupture of left corness, evit, extremely slight oppariety, (perhaps doubtful) and vescularity. The pupil much contracted, and observed by the circuits. The pupil Slight oppariety of regit content. The left grains light from darkness, with the left eye, and with the right eye is unable to every object double, which readers him unable to read, or discern a person's feature, there yards from him. Has been under treatment about ten days.
July.	Aue
McCullum	Wm. Mackey
61st.	7 2nd.
=	02

peuty geon ohnt on the the the the the tenth of the ten

Case, Regi: NAME Pass Passes, and Vision, at Second Examination. Passes Second Examination.				
Part	Subsequent Examinations.		itth of May, 1899. Examined by Mr. H. Hole, Surgeor Forfar Militia. Went to York Hospital 15th June, 1818, and remained (1818 th August following. Doe not admit that he is better from the restment. Says he can discove pursons in a very fight day. Has a very extensive formed papil of 6ft eye, the right eye is durkened by opacity of the cornea.	
Both of State of Disease, and Vision, at Second ment. Part Examination, at Second state. Part Examination, at Second state. Part Examination of 467 popul 1818. Part Examination of 467 popul 1818. Part Examination of 467 popul 1818. Part Examination of 1818. Part Examination of 1818. Part Examination of 1818. Part I P	State of Disease, and Vision, at Second Examination.	Artificial Pupil of right eye. Slight opacity remain- ing in the track of the opera- tion. Vision much improv- ed, can tell the hour by a watch.	Nothing done to right, Attificial pupil formed a formed for a consect to read right glasses, with some little lifficulty. Can guide him- elf any where.	No treatment to right eye Artificial pupil of left. Sphere of vision improved. Can read, tell the foot by a watch, and guide himself any where.
Regi: NAME. Evenier Procession of the Cautage of th	Date of Second Examina- tion.		Aug.	THE RESERVE OF THE PARTY OF THE
Regi: NAME. Evenier Procession of the Cautage of th		Obliteration of 4cf) pupil with adherent riss. Nearly so of right. Says he was anable to guide himself, and is so still. Since admission, considers his right eye element.	Rupture and adhesion of sight corner. Pupil almost bildreared. Opacity of Crity of the whole ye extending over the whole ye extending over the whole is the pupil. Can see to listinguish an eye-glass a few yangs distance.	
guu, James James James James James James James James Mengies Lally Wm. Hastie	Date of Flest Examina- tion.	2 Jan.	1 July	(July
Regi. 13 92ad. 14 15 15	NAME.	James James		Wm, Hastie
13 (246)		90tu.	. 92nd.	t July
	Care	13	27	10
	-			

09	25	99
Ist.	9th.	oth.
Vm. McNeil	JamesGrahan	Wm. Steell
i July	1 July	31 Jul.
grat. Wm. McNeill July Vision of right eye gene, and manuroide. Reputer and manuroide. Reputer and beforeion in left, and obliterated pupil. Not on the right eye lost to when be closer light, or when be closer light, he seepel of the closer light, he seepel of the closer light, with left eye.	19th, JamesGraham I July Cicatrix and contracted right cornea. Opacity of Information of Inform	1819. Wm. Steel 31 July Right eye eas at last exam; 13th of April, 1819. Exam mation. Artificial pupil per-type Deput Inspector of Host mation, Artificial pupil per-type Deput Inspector of Host material with contract of the circuity, which is obscured the contract of the circuity, or dense opacity of cornea. Can see daying the with right eye. Can let the circuity, or are no object plan, but can guide himself rather better, logicy there, he could see to near no object plan, but and since the operation (artification or an energy of the same pupil) can areacy do the same pupil and a since the operation (artification or an energy of the same pupil) can areacy do the same pupil area areacy of the same care of the circuit of the same care of the circuit or the contract of the same care of the circuit or
98	7 Oct.	29 Jan.
Aug. Artificial poult performed in Aug. Artificial poult performed in Mineself a little more results, which he could do with the sistence of glasses before. Can read with glasses. Is on the whole improved.	Artificial pupil formed in right eye. Opacity of Left cornea diminished. Vision improved. Can, with some little difficulty, read a news paper. Can read with the help of glasses.	Right eye as at last exami- nation. Artificial pupil per- formed in Life ryce. Sphere at vision improved threeby Cartel the hoart by a watch with great difficulty. Can guide himself rather better.
		Right eye as at last exami- nation. Artificial pupil per-ty Deputy Inspector of Host manual in Lip res. Spherer Heanen, Staff Surgeon Rey, if vision improved thereby Dr. Jones. Surgeon 40th B Arten let the horse by a workelment. Was as is months in Next of the Arten of the Complement was six months in Start in the rest difficulty. Cam Hospital in 1818. Previous us guide himself rather better, gioup there, he could see to no gride himself rather better, gioup there, he could see to no gride himself rather better, liss way in his own neighbourh and since the operation (artiful pupil) can anciety do the same

7			
Subsequent Examinations.	Artificial pupil formed. Sphere of vision, a good by Surgeon McCallock, Berwickdeal improved thereby shire Militia. Was admitted into the manual members of there tan weeks, and remained there to weeks, and mission he could distinguish with the or red from a dark colour-immediately after the operation, him could, be says, see the hook held in the operator's teeth, and could, he says, see the hook held in the operator's teeth, and could read a short word. This improvement continued till about a month after the return to short word. This improvement continued till about the short word. This improvement continued till short word. At present, the vision of the right is totally lost. The papil of the total words and the right is the interest when he had an attack of inflammation, on the subsidence of inflammation, on the subsidence of inflammation of the right is totally lost. The papil of the total words and the right is the formed wery opengue, the rest clear.		A District Street of the Street of the
State of Disease, and Vision, at Second Examination.	Attificial pupil formed. Sphere of vision, a good deal improved thereby. Tells the hoar by a watch.		Right eyeArtificial pu-
Date of Second Examina- tion.	26. Aug.		56
State of Disease, and Vision, at Second First Examination.	Right ere lost, globe of this yet enlarged, probably with water. Gatha serena Left reys.—Rupture of the corner, with catarix of pupil. Can distinguish objects indistinctly, such as a woman from a man, &c.,		Done Can Written July Rupture and adhesion, 26
Date of First Examina tion.	1 July		Lank
NAME.	James Allan I July		Gao Watson
Regi- ment.	101		Down
Case	61		
		di .	

Right eye.—Artificial pupil formed, with which he can read a newspaper distinctly. Left eye.—Vision fully clearer.	Right eye lost. Artis. April, 1819. Examined by Dr. cial pupil successfully per-Jones, Surgeon 40th Regiment. formed. Can tell the bour Was loneten weeks under Sir W. It was a watch, by a glass. Adams in 1818, and underwent. Thinks he can guide himselfthe operation for artificial pupil in a strange place, but has the left eye, but without receving not tried. Sight is more confused than before.
Aug. p	Oct.
Royal Geo. Watton 1 July Rupture and adhesion, 26 right corner engaging pupil. Aug. 16 Some maddiness of faft, can see with faft, when close to him perfectly well: at a few yads distance, more obscarcily with right can distanguish sy with right can distanguish shoperts indistinguish and best at a little distance.	SiJuly Right eye lost. Opacity 7 Oct. of inner and lower edge of pupi of off vey, with adhesion of iris. Pupil a good deal contracted. Vision eys pretty well. Can walk without a guide in known places.
L) aly	31 July
Geo. Watson	William Hamilton
Royal Artil.	Foot
00	6

	Contracted pupil and pro- 1818. Successful operation for 1814 April, 1819. Examined a slight operity of right very 10 mittient papil. Can readly Departy Depertor of Ropalisa slight operity of right very 10 mitted in order 1817 and remained there for a map roved under treatment. The operation, and its remained their for some time see that transmission of left very and be thought he saw a little their for some time see that transmission of the right very some time present does not see better than be did before the operation, and has derived no benefit from it. The membranes of the right very some bind oparties, and has derived no benefit from it. The membranes of the right very somewhat oparities, industrial in pair in the right of it in pair very.	On admission, vision of 10 Operations successful, gith Feb. 1819, Dep. Inspec. of right eye good. And could March Can read with I/QT eye, by Hospitals Hennen, Staff Surgeon Gunt walk without a guide. The grade of a glass. Probably Dr. Thomson, and Surgeon Gunt inceptent cutaract of right Staff Regist state that, an artificial formed. Active inflammans eye. That there is suffament eye. That there is not every every from the previously saw the dy. Vision at present at the copration has domestic and a present rather impaired, which the perviously saw that this vision is march whose that in the hosperation has domestic and the experiments have the operation has domestic and the surface of the whole the man binned! Says that his vision is march was the surface of the whole the man binned! Says that his vision is march was the surface of the whole the man binned!
	Successful operation for 13th April, 1819. with left eye, Vo interfer-Hennen, Siuff Surgeover of one eye with the Surgeover Danat 53th order, in consequence of Went to York Hospitz, the operation, for 1817, and remain months. In the consequence of Went to York Hospitz, the operation, for 1817, and remain months. In the consequence of the same a little better for heavy and heavy and heavy consequence of the same of the same and heavy consequence of the same the register of the same that the same th	Operations successful Can read witting eye, pye, type,
Date of Second Examina- tion.	1918. 10 March	March C
State of Disease, and Vision, at First Examination.	Contracted pupil and pro- 1818. slight opecity of right very 10 beet Vision of right eye pretty good. Imperfect vision of key, Says he has improved under treatment.	42nd, Alex. Mackay 2 Jun. On admission, vision of 10 r72th, And could March walk without a guide. Two artificial pupils have been formed. Active inflamma- tion of both eyes remains, with protusion of itts, in the left. Vision at present rather impaired,
Date of First Examina- tion.	2 Jan.	9
NAME.	James Strathern	Alex. Mackay
Regi- ment.	71st Foot	62nd,
Case.	83	

Subsequent Examinations.			f, able with right eye to 22th Fah., 1819. Examined by creat with rantaxet special Depuity Inspector of Hospitals cless. Left, blind, Artific Hennen, Dr. Thomson, Surgeon cial papiti unsuccessfully to the Forces, and Sargeon Daant performed. Hospital from November, 1817 to July 1818. Operation for artificial pupil performed on tell performed from the care and performed from the care and performed to his right eye, but no perceptible to his right eye, but no perceptible difference in felt in it. Vision no better than when the was admitted into York Hospital. At present there is a speck on the right corner, with a speck on the right corner, with a speck on the right corner, with	IIth May, 1819, Examined by Mr. H. Holic, Surgeon Forfar Militian. Went to York Hospital 18th Dune, 1818, and remained till 18th October. Much were from the treatment cannot see in the textreent cannot see in the text of the see of the see of the text of the see of the see of the see of the see of the right of the see of the see of the right of the see of th
State of Disease, and Vision, at Second Examination.	He himself states no im provement to have tastes, place. Sir W.Adams states, that the lens had been re- moved since last examina- tion. Is able to guide him- self about.	Artificial pupil performed on right. More light appears to be admitted, with respect to vision.	f, able with right eye to reat with canturet spreades, Left, blind, Artificial performed, unsuccessfully performed,	Deserted.
Date of Second Examina- tion.	1. July	29 Jan.	1 July	建市 美中国国际
State of Disease, and Vision, at First Examination.	Cicatrix of the cornen of July both eyes, that of right only covering the pupil, the other partially. An artificial pupil has been formed. Can guide himself in a strange place. No improvement since admission.	Left eve gone. Cicatrix: Indu dathesion of iris of right yes, not quite in axis of oupli. With closed papil. Can discernlight from darkness.	* Closed pupil of Left eye, 1 July Cicarix, cornea apposite the pupil of right. You lindness of Left eye, Can see objects indistinctly in the street. Much the same as on admission.	Cornes opaque a few vessels on conjunctiva. Right pu- pil nearly closed. Opacity of cornes. Some vessels of conjunctive on eye ball and pulporime. Cam sistinguish hunself. Cam distinguish objects, as an eye-gisse, &c. Cannot rell by a watch what o'clock it is,
Date of First Examina- tion.	2 Jun.	31 July	2 Jan.	1 July
NAME.	Wm.McKay	John Ure 3	Doncen McLaran	John Smith
Regi- ment.	79th.	48th.	79th.	71st.
Case.	67	861	8 8 8	8

Subrequent Examinations,		The control through the charmon	The state of the s	Selection Server Server Server	
State of Disease, and Vision, at Second Examination.	By Dr. Moseley and Mr Keute.	Says, he saw the windows after operation. Artificial pupil unsuccessful. Eye wasted. Blind of both eyes.	By Dr. Moseley, and Mr. Keate.		By Dr. Moseley, and Mr. Kente.
-	27 April I	-			April
State of Disease, and Vision, at Second First Examination.	Rupture of both cornes 27 By I Fight in axis of vision, pro- April Keate, trusion of 1eft iris, and the pupil dragged to one side.	Alexander 2-Jan. Loss of right eye. Opsque Aug. McCullum and very slight vascularity. Says, much as on his admission. Says, he came here without a guide.	e Jan. Right eye lost. Under April the effect of operation for catanact. By tell eye could distinguish day from might before: with some little improvement.	2	Contracted pupils. Cata- 27 By I ract of right, and indistinct April Keate, vision of teft vec. States, that he is as on admission.
Date of First Exemina- tion.	2 Jan.	g Jan.	e Jan.	Not seen.	2 Jan
NAME.	Ross George Militia Campbell	Alexander	Kirkwood		Wm. Howat 2 Jan.
Regi- ment.	Ross	Toth Foot	Vet. Batt,	21st Foot	Foot
Case.	35	60	85	34	35
			-		

The state of the s	7th May, 1619. Examined by Mr. Robson, Hospital Assistant H. P. at Castle Donglass. Was mever totally blind, had always as much light in the right eye, as to place him to walk alone in known places. His left eye was completely destroyed before he received his discharge. Had two operations performed on right eye, operations performed on right eye, by Sir W. Adams, the second, six weeks after the first, neither of which did him the smallest service, it was between two and three months after the second operation before he recovered the little sight.	he had previous to it. Left York Hospital in November, 1818.
Keate, Moseley, and Mr.	Dismissed.	re amin' has do will be said
Right eye lost. Opacity April of Cornea of left eye. Had some days ago an operation for artificial pupil performed. Left pupil contracted and opacity of copsule. Pervious to operation vision only sufficient, to walk without a guide.	John Fraser 11aly Left eye lost. Opacity of right eye opposite pupil. Can see adistinctly but noi sufficiently to guide himself.	the section of the second
Alexander 2 Jan. Robertson	John Fraser 119hy	RVARE LAND
83rd.	837 87	

		Charles with an experience of the same	
Subsequent Examination.	The Action of Section (Action of Section of	Operation for artificial 12th May, 1819.—Examined pepul performed. No im-by Staff Surgeon Key. Had two provement in vision. Lids operations performed onone eye, the sat first examination, latter for artificial pupil, and both Can see light from darkness, unasceresfully. He is totally insat if first examination. with the other can just distinguish light from darkness.	
State of Disease, and Vision, at Second Examination.	Right eye as on admission. In left, artificial pupil made, with it can tell the hour by a watch, and read moderately sized print with glasses. Considers himself no better by gaining the sight of left eye by this operation. Can out work at his trade now, he could be before. Says, he could read before. Says,	Operation for artificial pepul performed. No improvement in vision. Lida as at first examination. Can see light from darkness, as at first examination.	Right eye, as on admission. Two operations have been performed, the first for artificial pupil, which was accessful as to enable him to see the chimnies on the rops of the houses, or a man from a woman: the house, or a man from a woman: the second, for cakaract by breaking up, which has territing the second, for expected in sos of type eye, after very severe inflammation, the man satied, and that before his being called upon by Mr. Dease, that he could with some difficult upon by Mr. Dease, that he could with some difficult upon by Mr. Dease, that he could with some difficult upon by Mr. Bease, that he distinguish a man from a minimation, the man satied, upon by Mr. Bease, that he do not not guide himself in known places: but he had on this occasion, to walk yourney caught could, which powers of the bad state in which he appeared at first examination.
Date of Second Examina- tion.	of 29 Jan. he he lof lof ing	1818, oye 7 Oct. upil, and Lids Can f his	7 Oct.
State of Disease, and Vision, at First Examination.	1918 Irregularity of pupil of \$1Julypfgif eye, with which he watch. Couracted pupil of \$1July fire and \$1July	Staphyloma, right eye? with entire closure of pupil. Left eye amaurotic and with disorganization. Lids sightly wascular. Can barely see the shadow of his hand. Marked "an ex- treme bad case."	Right eye disorganized 7 Oct. and vision lost. Fupil of left contracted, and opacity of expellar lens, a band seeningly contracting the seeningly contracting the hand, when passed before fils eyes.
Date of First Exemina- tion.	1818.		Appl 1
NAME,	Daniel McCullum	Hagh Baird 1 July	Honeyman
Regi- ment.	1st Foot	g1st Foot	6th Batt
Case.	38	39	9.

Subsequent Examinations.	24th April, 1819, Deputy In- spector Hennen, Staff Surgeon Roy, and Dr. Jones Surgeon of the 40th Regiment, state that it ap- pears three operations were per- found on the (for eye, that after the first (for artificial pupil) he could see a littler; that after the scould see a littler; that after the could see a littler; that after the third operation, the nature of the third operation, the nature of the off operation, the re- day from uight with this cyce pre- vious to going London. After the failure of these operation, he re- quested to have the right eye operated to have perator operated to have the right eye operated to have gention. The could have the right eye operated to have the right eye operated. The operator operated to have the right eye operated to have the right eye operated to have the right eye operated to have perators. The third operators are considered to have operated to have the right eye operated to have perators. The third operation of the operator operators are considered to have operated. The third operators are considered to have obtained to have the right eye operated to have the right eye operators.	Right eye as' on admis- sion, but vision clearer. Surgeon McCullock. Beweick Attificial pupil formed so shire Militia, at Coldstream. Addiff. (47). You improved somitted inno York Hospital on 16th much as to guide himself in June, 1318, and remained until much as to guide himself in June, 1318, and remained until cad newspaper with a glass various outments were applied to of considerable power. Two his right eye, but without benefit, inch glass, the vision remaining the same as before admission. An operation ses performed on the left at three different times. When he looks at an object with both eyes, it appears repeated sevend times. Upon the whole, he thinks he has respect the benefit from going to Lon- don, as he is obliged to keep the look eyes hant, to persont the confusion of seeing single objects so often multiplied.
State of Disease, and Vision, at Second Examination.	Unsuccessful, quite dark. Could avoid caudle and fire spector Hennem, before operation. Roy, and Dr. Jones Honger, and the Register of the left from the l	Right eye as on admis- solution that vision clearers Attificial papil formed on fig. Vision impored solution as to guide himself in forsown places with it. Can read newspaper with a glass of considerable power. Two inch glass.
Date of Second Examina- tion.	. 1819.	
State of Disease, and Vision, at First Examination.	Right eye lost from rup-29 Jan. ture, and destruction of correra. Left pupil tolil. tented and wasting of ball. eye. Marked a very doubi- ful case.	Openity of right cornes 7 Oct. Oct.
Date of First Examina- tion.		
NAME.	Dav. Graham	Rife James Gibson t July gade.
Regi- ment.	23rd,	Rifle Bri.
Саве.	41	9
Popular .		C 2

Subsequent Examinations.		
ision, at	Operation for artificial pupil performed, Eye lost.	States, known
State of Disease, and Vision, at Second Examination.	for a	s lost. ission, lelf, in
of Disea Second E	perfor	th eyes on adm : himse.
	o public	Both that on guide places,
Date of Second Examina- tion.	7 Oct.	1819. 29 Jan.
State of Disease, and Vision, at Second First Examination.	43rd. George Smith 1 July, Rupture and cicatrix of 7 Oct. Fight 2 oct. Rupture and cicatric ferated. Rupture and cicatrix of left comes, opposite the axis of vision. Can observe so light from deskness, or the light from deskness, or the shadow of a person.	S1Jaly Left eye lost. Obstructed 39 Jan. Both eyes lost. States, pupil, with opacity of cornes, that on admission, be could in the centre of pupil with centre of pupil with condition for artificial pupil has too for artificial pupil has been performed by. Mr. Wishart is Ediburgh.— Can see light from darkness.
Date of First Examina- tion.	1, July,	SiJuly
NAME.	George Smith	James Williamson
Regi- ment.	43rd.	94th
Case.	8 4	3
		THE PERSON

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1	Thom- of the April, he 21st	York and aring lens	dip,	Ch El te ag	he he	e e
Subsequent Examinations,	Capoula catatrace re- Deptty Inspector of Hospitals moved from left eye. Right Hennen, Sait Surgeon Dr. Thom- eye as before. Sees to readson, and Surgeon Daunt of the with glasses in left eye, and 58th Regiment state, 4th April, low walk without glasses. [815, that John Brown of the 21st	Kegiment, aged 39, went to York Hospital in December, 1817, and remained four months, during which time the capsule of the len- was removed by Sir W. Adams, the	lens itself having been previously extracted by Mr. Wishart of Edin- burg. The man binnself, says, that he has derived considerable	benefit from the operation, being enabled to walk with much greater security. Sees to a certain extent with the fees, but distant objects	constant tremulous motion of the iris and but little contractile power of the pupil. His right eye amau-	vas depressed in it at Glasgow In- frmary, but without any relief.
State of Disease Second Ex-	Capsular cataract ranoval from lift eye. Righ eye as before. Sees to rea with glasses in left eye, and to walk without glasses,	A Course party Charles or page	SE STATE OF THE SECOND		Son any somethy Spates	Chitegrae totolegal
Date of Second Exemina- tion,			,		1	
State of Disease, and Vision at First Examination.	Cappellar cutanct of tight 1818. Cappellar of ves. Slight opacity of right 10 moved from the vest, and apparent annuro. March eye as before, sis. Can seem distinctly with the tight. None with the cowalk without the tight.	right.		Marie of the state		The late manually
Date of First Exemina- tion.	2 Jan.				1	
-	John Brown	Mothation				- Notice
The second second	38.	1.33			1	1
- Green			45	-		1

second Examination. Second Examination. Second Examination. Second Examination. Gin May, 1819. Examined by Operation successful. Can read moderate-sized [Dr. John Miller. Had an operation of the second secon	Operation for cutarent per—Staff Surgeon Rey stated, 36th Corned, Can see to read by November, 1813, that he, in considered, and the came into Hoopital. The came of fine eye, Thus drew the first he came of this eye, and the about a month, but after the second he considerable degree the now remains, the pupil contracts in this state he inov remains, the pupil contracts in one response to light, but there one came in the came of the eye of the contracts on exponent to light, but there is the came of the eye of the contracts on exponent to light, but there is the came of the eye of of eye of the eye of the eye of the eye of the eye of e
State of Disease, and Voice, at Record Examination. Operation streepsful, Can read moderate-sized print with entanct glasses,	Operation for extanct per- formed, Can see to read by glasses. But much as before he came into Hospital.
State of Disease, and Vision, at Dise of Series Examination. Right cyc. ammurotic.—[318. Right eye.—is under the cf. 10 letts of Sir Wm. Adams. Murch operation for catavact. Considerable influentation and silght chemosis. Is blind of the left eye, and discerns light with the right.	McCullum McC
NAME. Exemise trong. Commercial Symmetrics. Exemise trong. Els. 2 Jan. 3 Jan. 3 Jan. 3 Jan. 3 Jan. 3 Jan. 3 Jan. 4 Jan. 5	McCullum McCullum
Case. Regi-	6th Vet. Batt,

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Capsular cataract reac Operation successful. distribution objects real when placed near him. Lids as on admission.
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89 Jan.
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Membran ular and cular and off eye. hadow of nterposed d the ligh animpaire
, capaulur cata vascular and vascular and vascular and resination of en interposed en interposed a and the light eye unimpaire
eye, capaulur cata f. eye. Membrau iida vuscular and cid. — Loft eye. rion. — Loft eye. r. when interpose of r. when interpose of r. when interpose of thim and the ligh ight eye unimpaire
Loft eye, capaular caturi Right eye. Membrane the life vascular and haned. Frison—Loft eye. (Frison—Loft eye. of liscern the shadow of liscern the shadow of leets, when interpose Right eye unimpaired
Right eye. Membrane all the lids vascular and in- the lids vascular and in- flamed. Vision.—Left eye. Can discern the shadow of ob- discern the shadow of ob- discern than another light. Right eye unimpaired.
Right eye, capaular cata Right eye. Membran the lids vascular and flamed. Fision.—Left eye. Giscern the shadow of discern the shadow of jects, when interposed been him and the tight treen him and the tight
18 Dec
Onteith (190c. Left eye, capaular catal fight eye. Membran and flame lids vascular and flame. Fision.—Left eye. Fision.—Left eye. Fision.—Left eye. Giscern the shadow of discern the shadow of dis
William 12Dec. Left eye, capaular catal Monteith High eye. Membran the lids vascular and flame. Fision.—Left eye. discern the shadow of discern the shadow of jects, when interposed tween him and the light tight eye unimpair.
Vet. William 18Dec. Left eye, capaular cata Right eye. Membran the lids vascular and flame. Vision.—Left eye. discern the shadow of jetch, when interposed tween him and the light Right eye unimpairs.
3d Vet. William Bat. Monteith
3d Vet. William 12 Dec. Loft eye, capsular catal flight eye. Membran the lids vascular and flame. 48 Fixion.—Loft eye. Giocern the shadow of jetsh, when interproted freem the shadow of jetsh, when interpret flight eye unimpair.

Subsequent Examinations.	Marche 21, 1819. Deputy In- guarder Hennen, Staff Surgeon Dr. Thomson, and Surgeon Daun of the 58th regiment, state, that is appears operations were performed on both eyes by Sir W. Adams: or mation immediately seized both his eyes, and that he remained his eyes, and that he remained his fore, and the the inflammation subsided, and he could see partially with the right eye, and if any thing somewhat eye, and if any thing somewhat	octer tan network to the degree, with which he could see a little before the operation, was totally deprived of the power of vision. He egain submitted to an operation on both his eye, at the desire of Sir W. Adams, but without any advantage, and, upon the whole, he considers that he has derived no benefit; but on the contrary, that he has andergone must severe pain, he has andergone must severe pain.	*
State of Disease, and Vision, at Second Examination.	Keate.	The control of the profits of the pr	Contain Containing
Second Second Cxamina- tion.		140 40	on-sec
State of Disease, and Vision, at First Examination.	Calamets of both eyes. 1818. Sease, right eye has been 27. Sease as on admission. Same as on admission.	To the mile of the following t	en.
Date of First Examina- tion.	2 Jan.		Not seen.
NAME.	Fleming Calder	and the second	67th. Patk, Maher
Regi- ment.	36th,	132 1 1 1 1	67th.
Case.	49	8	20
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-	Subsequent Examination.				Opequen successful, 28th February, 1819, Deputy Same improvement in vision largestor Hemnen, 8taff Surgeon of right eye, Left as at last Dr.Thomson, and Surgeon Daum examination. 1817, and tearners of the that be sent to London in Norember, 1817, and tearners of napidity the did not know was performed upon him, but he received no per- ament benefit from it. At pre- cent the palpebrar are diseased (the affection of arturn on nature) There is general opening of the There is general opening of the	in the substance of the cornes, and a contraction of the pupil.
	State of Directe, and Vision, at Second Examination.	Successful operation for ectropion.		Inversion of the Lids.		the party law over 1th Party live live law of the law o
	Date of State of Disease, and Vision, at Second Free Free First Examination. Examination. Examination. Items.	2 Jan, pion being performed, he p. 10 now considerably relieved. March	Not seen.	Cases of Entropion or Inversion of the Lids.	2 Jan. Opacity, and vascularity 27 of corner, Graunisted lids April Entropion. Submitted to an operation. Tanks to caide himself in the street. (Eyelids relieved, Sight the same.)	TOTAL EXCHANGE OF THE PARTY OF
	NAME, FARE	George 18 Sutherland 2 J	Thomas Barry		Duncan 2 McMillon	krnv .
	Case, Regi-	26th.	52 18th.		42nd.	12
	3			N. T.		

Sabsequent Examinations.	Entropion of left eyelid. Discussed lids, Slight eyelid. Discused lids, Slight open cured. Slight grand vascularity of left seemen should be seen and work in left seemen state first man ration; and more in left seemen state this man ration; and more in left seemen state this man the second of right, and returned vascularity of right, which left seemen is left seemen seem	
State of Discase and Vision at Second Examination.	Entropion cured. Slight opacity of both eyes. Vision much improved by operation; and more in left than right.	Operation for entropion. Successfully performed. Lidd thickered. Can walk may where, says he cannot work at his trade.
Date of Second Examina- tion.	1818. 10 March	
State of Disease and Vision at First Examination.	Entropion of left eyelid. Discased lids, Slight opacity and vascularity of left was reserved and light opacity and vascuarity of left, with left vision. With left lide and a statinguish light from darkness, or large objects at a small distance.	Alexander Anderson, Anderson, pright eye, with diseased Jan, tunnings, the same of left with tunnings of lower eyeld, can discover objects, but he says indistructly.
Date of First Examina- tion.	2 Jan.	St July
NAME.	42nd, James McKay 2 Jan.	Alexander S Anderson,
Regi- ment.	42nd.	74th.
Case.	7.0	50

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Thickening as on admis 13th May, 1819. Examined by sion. Vascularity a good Dr. W. Barry, Assistust Surgeon sion. Vascularity Agult Foot.—Was thirteen week admission. Admis. No operation parformer admission. Admis. No operation performer on either spece. Caustic applied to the inner membranes of the cycle discovered the tears flowing over the pulpebore. There appears to be slight operaty of the lens of the pulpebore. There appears to be slight operaty of the lens of the pulpebore. There appears to be slight operaty of the lens of the pulpebore. There appears to be slight operaty of the lens of the pulpebore, the right week and infinite be but otherwise of its natural appearance. Finds little if any alteration in his sight from his treatment.	Total State Spread Total State	Waterdaming growther two
Thickening as on admission. Vaccularity a good deal diminished. Lachrymanion goue. Eyes as old mission.	Operation successful,	the collections are not for the collection of th
.0cr.	10 March	shill?
42nd. Andrew Blair 31 July Thickened and diseased 7 Oct. Lachyrmation. Upper systiate turn in a little. Eye- quite well.	42nd. Wm.Marshull 2 Jan. Entropion of both under March. Operation successful. eyelids. Has been operated upon. Vision unimpaired.	and the same of th
July Comment	2 Jan.	技程
indrew Blair 3	Wm.Marshall	Main
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		The state of the s		
	State of Disease, and Vision, at Second Examinations.	Vascularity and opacity [10] Remains of granularity, 1819, Deputy of both corner, with granularity and vilosity impector Hennen, Staff Surgeon finds, Says he was tealing the staff of both eyes. Inproved since admission. When the staff of	to analysis to the second of t	Although the vascularity 7th March, 1819, Deputy fins much removed, there is spector of Hospitals Hennen, Dr. cell a number of vessels on Theomoso Staff Surgeon, and Surfection to relay, that C. Smith finds no permacent densitient to the compaction to relay, that C. Smith finds no permacent mount distinctly see ob-just relief from what has been jects at a distance, but closedone to his eyes; at present his awell as ever, and there is some influences of the compaction of the tars.
		19884		a Figer Fire
	Date of Second Exercina- tion.	10 10 March		Aug.
	State of Disease, and Vision, at Second Second First Examination.	Vascularity and opacity of both corner, with granu- lictions; and sightly villous ids. Says he was totally blind of both eyes. In- proved since admission.	Not seen.	Cont Charles Smith LJuly Vascularity of cornea of 26 Sect Context vilosity and Aug. Cannot see his fingers at run 5 length. Cannot walk in a strange place without a gnide.
	Date of First Examina- tion.		Not	July
	NAME, E	David Mairus 2 Jan.	JamesClark	Charles Smith 1
	Regi- ment.	gth Vet. Bat.	yet. Vet. Bat.	Poot Foot
1	Care.	99	59	8
L				

S2nd. John Tennicliff Educative, when dispersed causers, when dispersed features, when dispersed features, when compared in the sacular lids. Cannot distinguishing objects when compared in the different sizes with chronic inflammation and dissussed in than the former in bothings of citto. Can distinguish the hand of a watch but in one of the different sizes with right, but not the bond of a watch with high can tell the minutes, and the light will be succeeded. 12th William Arms 2 Jan. Opecity of both corner. Foot William Arms 2 Jan. Opecity of both corner. Prot William Arms 2 Jan. Opecity of both corner. Prot William Arms 2 Jan. Opecity of both corner. Deserted. Deserted.			
	Descried.	Opneity and vascularity diminished, the latter more than the former in both. Con read the newspapers of the different sizes with right. With left, the largest print the lover by a watch. With left, can tell the minutes, nor distinguish the hour parasten, with left, or distinguish the hour readily, or accurately. Limings still diseased, in both, the right best.	Deserted.
		29 Jan	
	Opacity of both corners with vascular lids, Cannot disseen features, when dis- charged was better than now, was incorpuble of distin- guishing objects when com- ing ander Sir W. Adams.	Opacity and vascularity of right cyc, with chronic in- flammation and diseased in- ings of citto. Can dishin- guish the hand of a watch, but not the but, nearly same as right,	Opecity of both corners Tells the hour by a watch Says, before under Sir W Adams, quite blind.
	2 Jan.	StJuly	2 Jan
		William Hill	William Arms
	52nd.	63rd.	
63 63	The state of the s	8	63

Subsequent Examinations.			
State of Disease, and Vision, at Second Examination.	Right eye, Vascularity removed, opacity remaining, Vision inproved, in as far as necessare to read. Left eye as at last examination,	Villeaty of lids duminish- ed. Opacity not wholly re- moved, but diminished, Dis- position to calargement of ressels remaining. Vision improved, Can read mode- rately sized print with some fittle difficulty.	By Dr. Moseley and Mr. Keate.
Date of Second Examina- tion.	29 Jan.	39 Jan.	27 April
State of Disease, and Vision, at First Examination,	Right eye, wacularity and 69 Jan. opacity of cornea, and discossed cycle list. Left eye, trapture of cornea, with contraction of a slightly discussed open, and slightly eye can tell the hour by a watch. Can read indistinctly cound print. With right eye can see a person passing thim.	Opacity and vascularity of Nilesity of hids diminish- both corner, with villous hids, 89 Jan. ed. Opacity, not wholly re- Gan see to walk alone in groved, but diminished, Dis- known places, and sees ob- position to calargement of position to calargement of position to calargement of position to calargement of position. Right position to calargement of position to calarg	93th, James Stirling 2 Jun. Opacity and slight vascu. 27 harriy of both cornes, with April Kente. [163. Could see to guide himself in day-light,
Date of Firs. Exemination.	1818. 31 July	July.	2 Jan.
NAME.	Gavine Voung \$1,4 uly	Joseph McLaran	James Stirling
Regi-		Sth Gar. Batt.	85th.
Case.	2	65	99

	Says he can look to the April 4, 1819. Deputy Inspec- light better. Can bear theor Hennen, Staff Suggoon Dr. light of a candle, or the sun Thomson, and Surgoon Dannt of the better. Can reed longer, the 58th regiment, state, whilst at but with much the same York Hospital granulations had facility. Lide and opacity hen removed from the lide of his much the same as on ad-right eye, from which he had dening the same as on ad-right eye, from which he had dening the same as the same had the same help to some of right eye in present remains, and right eye at present remains, and the balls of both somewhat sunk	
As at last Report. Ves- els on both cornes, particu- liely on inner canthus of right. He reads, and tells the lours by a watch.	Says he can look to the light better. Can bear the light of a candle, or the sun better. Can reed longer, but with much the same as on admission.	Thirty of the countries of this way
April .	29 Jan.	
giř Edward Joyce Jan. Opacity of both cornea, 27 Ra at list Report. Vessight, Two or three vess April sels on both cornes, particusels on the left connea. Can distinguish oligens at ten rigion of Left eye was considerably worse, distinguishing only light from dinkuese. And that the right eye has improved since admission.	3.1July Very alight diseased eye-29.Jan, lids. Sight equelty of left. Can see to read with left. With light cannot see quit. o well. Has been societing for a glascutter, turning a wheel for him.	to be not the county or the little
Jan.	1. July	
Edward Joyce's	James Mathewson	,
9th Light Drug.	Royal Artil.	
67	8	1

			Bullet Breit	
Subsequent Examinations.	Vascularity removed, Opacity removed, Opacity removed, Vision in-Dependent and Surgeous Danat perfect, Opacity remiss. Perry-Inspector Hennen, Staff Surgeon of the 56th regiment, state, this case has received no advantage whatever from treatment at Nosk Hoopital, and -if sny thing, his sight is weaker. An excensement surgeous the regiment of the sight present the organization of 10ft sey is destroyed, and the right, opacity of comes of the right,		Increased lachrymation April 7th to 10th, 1819, Deputy operaty of right cornea, Inspector Hemen, Staff Surgeon onto in axis of vision, without Thomson and Surgeon Johnson vascularity, except one ves-SSih Regiment, state that the insel on cornea. Vessels on flammation had been removed from conjunction. Of Left eye, his eyes at York Hospital, and had from the construction of Left eye, his eyes at York Hospital, and that tion, this man is able to read before ulmission, or immediately after than a newspaper, slight vascularity of the conjunctive of the conjuncti	Vision good, Deputy Inspector of Hospital Hennew, Saff Surgeon Roy and Dr. Jones, Surgeon Roy and Dr. Jones, Surgeon Acth Register was four months at the York Hospital; no operation performed on him, but various external applications were used to his left was a present no better than when he went. The vision of the Triff to eye is gone, the power of the Toff to eye is gone, the power of the Toff to eye is gone, the power of the Toff to eye is gone, the power of the Toff to eye is gone, the power of the Toff to external affection.
State of Diseare, and Vision, at Second Examination.	Vascularity remored. Opacity remains, Pterygium removed, Vision imperfect,	Symptoms removed.		
Date of Second Examina non.	27 April	70ct.	10 March	March March
State of Disease, and Vision, at First Examination.	Left eye destroyed. Vas- cularity and opacity of right cornes, with remains of gra- mular life. Syss, wison be- came improved sider opera- tion for pterygium. Vision very imperfect on admission.	Has been under treatment 7 Oct. for eleven days, Labeltyman- tion and irritation, and was calmirty a coapuration, and eleven and eleven and eleven and eleven and and tell the hour by a watch.	Vaccularity of right corres, March with slight openity. Remains of granulations of the lide. Can read with the left First or read with the left First or read with the left with says he could not see one coming up, but could distinguish large objects with left yet, and none with the right.	Right eye lott. Left eye. lid slightly villous and vas-March Villosity gone. cular. States that on his distinct, arrival, his vision was in-
Date of Free Examina- tion.	2 Jan.	31 July		2 Jan.
NAME.	James Smith	James Kenny 31 July	John Wilson & Jan.	Alexander Marshall
Regi- ment.	Staff Corps.	18th Foot	13th Drag.	2nd Drag.
Care	3	7.0		D %
-		AND THE PROPERTY OF THE PARTY O		

Subsequent Examinations,	Cicatrix of right eye, in Examined 23th February, 1815 taxis of virion, or nearly so, by Deputh Inspector of Hospital Operity and adhesion of iris Mr. Hennen, Dr. Thomson, Sun of for eye. Says he sees groun to the Fores, SurgeonDana the little clearer since ad-35th Regiment, This man went I mission. Says that solve York Howint in 1818, (April was applied four times, and he derived no benefit from the cannot see without glasses, irretinent there, vision neing presented to be presented to be presented to be presented by the same as when he went No operation was performed, but depty the same as when the went of the right corner, and also speck of the fift corner, and also speck of the fift corner, and also speck of the fift corner,
State of Piscase, and Vision, at Second Examination.	×0,2 + E E E
Date of Second Examina- tion.	1818. March March
State of Disease, and Vision, at First Examination.	Opacity, ulcention and semans of cicatrix of right yes. This subtering to the corner in the fift eye. State that little alteration has becurred since admission.
Date of First Exertains- tion,	2 Jan.
NAME.	Donald Munce
Regi- ment.	Foot
Case.	2

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-	64th.	74 64th. John Phillips		These men were never seen by the board. It uppears by the records from Chathan, that these men were in progressive state of Improvement. by treament at that establishment, when they were removed to York Rospital, for the purpose of being Rospital, for the purpose of being
40	64th.	75 64th. James Pike		placed under Sir Wm. Adams, by order of the Secretary at war; they were benedited by treatment there. Two were discharged the service, and the other two (Phillips and
9	64th.	76 64th. Pat. Macaully		Vekelon arrival at the sile of Wight, were rejected as unfit for foreign service. On being transferred from Chatham, they were found labour- ing under chronic disease of the
11	64th.	77 Geth. Patk, Dugan	And the second s	eyes; for which they were again received into the ophtualmic dry: sion of York Hospital, under Si W. Adams, and eventually dis- charged the service, as unfit.
00	66th.	78 66th. John Hinds		
7.9	66th,	79 66th, Edw. Bethorn	Not seen at all.	

e 76 64th. Pat. Macaully

Subsequent Examinations,	a lin securità materia vellua gi regi recen mata finde ma con- tra similarità di dina di con- di distributa di dina di con- di di di di di di di di di di di di di di di di di di di di di di d	By Dr. Moseley and Mr. February 28th, 1819, Deput Inspector of Hospitals, Hennes Saff Surgeon Dennet Saff Surgeon Dennet 38th regiment state, that it appears this man he experienced great injury from the respective of great injury from the properties of the state o
State of Disease and Vision at Second Examination.	No present disease of the 10 Eyes as at last examina- eye. Says he was admissed by the cone was with diseased eye-lids, (ap- parently from vasculavity and granulations.)	By Dr. Moselcy and Mr. Kente.
Date of Second Examina- tion.	1818. 10 March	April
State of Disease and Vision at First Examination.	No present disease of the eye. Says he was admitted with diseased eye, lids, sipparently from vascularity and granulations.)	Ccatax of right carnes, 27 with adhesion of the right April Keute, its to the cornes, Con- tracted pupil with good iff, remains of granulations, Left pupil oblitectated, with cicetrax and vescularity.
Date of First Examina- tion,	1818. 2 Jan.	S Jan.
NAME.	Puncan Campbell	Alexander
Regi menf.	1st Foot	Foot
Case.	8 8	State
	Name of the last	

3 4 5 5 5

		Examined by Staff Surgeon Roy Went to York Hospital, in Octo- ber, 188, and remained upward- off three mouths under Sir Wa Adams. Different application were used to his eyes, but no ope- ration was performed. He is nearly blind of right eyes; the pupil of which is dialted, and the ris seem, to adhere to the cornea. The sight the consulters somewhat better that
	Ulcer of right comes healed. Vacaliarly removed. Adhesion diamished. Vacaliarly selection of the content of granulations of late content of granulations of late could nue. Openity of both corness comewhat diminished. With right can read a newspaper when close to his cycl. With fight, as on admission. Health impaired since admission.	Same as at last examina- tion.
	7 Oct	1819.
	Uter of right cornes on 7 Oct. upper margin, with vascularity and adhesion of con- jinctiva of eye-fid, with that on hall. Slight vascularity of left cornea. Conjunctiva of left wascular, and very slightly granular. Vision of left eye such as to emble han to guide himself. Can read, but with difficulty. a bible. With right he cannot exactly. Conjunctiva of left eye very loose.	1819. Left vesvery slight opacity 29 Jan. of corner. Right eye, very slight opacity. Vision of left mearly as groud as in persons of his age [55]. Right not so clear as left.
ı	July	12 Dec.
	Hugh Porteus	Hector McLean
	Brig.	98nd.
	9) 0)	83

Subsequent Examinations,	Management of the control of the con		
State of Disease, and Vision, at Second Examination,	Dismissed.	By Dr. Moseley and Mr. Keate,	By Dr. Moseley and Mr. Keate.
Date of Second Examina- tion.		27 April	April A
State of Disease, and Vision, at First Examination,	Opacity and vascularity of cornea, with ulceration of dry. Lining so flick thick- ened and vascular. Inflam- antion of left more acute than right. Can, with left distinctly. Same with right. Can guide himself in known places.	Thomas Fife 2 Jan. Total opacity, and vascu. 27 By larity of left cyc, acute in-flammation, and slightly granulated itds. Right cyc, sound-Can distinguish light Says, inflammation of left cyc everys, inflammation of left	93 Jan Opacity and vascularity of 27 By right cornes, with granulated April Keute, and vascular lifes. Slight opacity of left cornes.
Date of First Examina tion.	1 July	So Jan.	28 Jan.
NAME.	Sth George Lyons I July Foot	Thomas Fife	John
Regi- ment.	8th Foot	71st.	97th.
Case.	48	85	98
130			

de ce	I TO I S THE HOUSE WE WOULD
As at last Report, Rigida 28th February, 1819, Deputy improved. Adventitions in Isspector Hennen, Suif Surgeon Dant flammation, apparently like Thomon, and Surgeon Danta a sty. A little, and very of the 38th regiment, state, that this improved. Suiffly and the state of the first in the suiffly suiffly and the suiffly suiffly suiffly and that he has vision is considerably worse than before he went, and that he has derived no advantage whatever. He now inhours under diseased pulpebra, with specks on each cornen.	No improvement, As a Feb. 22dd, 1849, Deputy In- respect. Eleven month states that this main has derived ound er triat month states that this main has derived considerable beheaff from the treat- ment adopted in his case at the New Town Dispensive, Ediburgh, but that his sight is by no meetin storing as before he went under the care of Sir William Adams, then he could go through every kind of lakor in the fields, but af- ter being eleven months at York Hoppint, and agifring great pains from the remedies employed, he from the remedies employed, he freturned to Scotland with his vision on much worse that he user since home the remedies employed, he had not be the count his vision on much worse that he user since
27 As at last Report. hpril improved. Adventition flammation, apparent a sty. A little, and little improved.	y Oct, No improvenent, last examination in last examination in crepet, Eleven in und er treat
g Jan. Cicatrix of left content, with 27 opacity. Slight opacity of April right corner. Business depth of lide. Says, be could use to guide himself with right eye, and that since admission, could distinguish day from right with left, Says, vision of right eye as so a dmission of right eye as so a dmission.	Used Brian Smath 2 Jan. Kennaurs of granulated 7 Oct. No improvement, index. Slight opening and respect, examination in vascularity of both corner vision pretty good. Vision pretty good.
John Nash 2 Jan.	Bran Smith 9 Jan.
92nd.	88

_					
Subsequent Examinations.	Considerable acute in-December, 1818, Surgeon flavanation and opacity of Jones 40th Regiment, starts, have both cornea. In everying sear his eyes, that his vision is respect worse than on admis-all but extinct, that on his being ordered to London in Norember, 1817, he could read, write and pursue his occupation as alaborer, that after undergoing as a laborer, that after undergoing as a laborer, that after undergoing as a laborer, that after undergoing as a poention of Sir W. Adams, he was and continues scarcely alle to discent any object however large, and is objiged to be led from place to place.	supplication of proposition of the property of	A control of the cont	Company of the compan	Left eye gone. Opacity 10 Diffuse opacity of right 13th April, 1819. Examined by oright corner, Alle to March eye remaining. Says his Departy Inspector of Hospitals walk without a guide, in the resign is much improved Hennen, Mr. Roy Surgoon to the somewhat improved since and that from being unable forces, and Dr. Joues Surgoon to read the largest print for Joth Regiment.—Went to York eight years, he can now do Hospital in 1817, and was there so with the help of glasses, four months; no operation personal policitories. He got a little better so with the help of glasses, there here and considers himself melaber the row worse than before the went there. At present there is a contaction of the pupil of the right of the membranes, and thickening of the membranes.
State of Disease, and Vision, at Second Examination.		Refused to submit to treatment, and was dis- charged by War Office order, 29th April, 1819.	Dismissed.	Cases of Opaque Cornea, &c.	Diffuse opacity of right, oper-remaining. Says his eyesight is much improved and that from being unable to read the largest print for eight years, he can now do so with the help of glasses,
Date of Second Examina- tion.	1818. 27 April	15128		padne (March,
State of Disease, and Vision, at First Examination.	Slight opacity and Vascularity of cornes, with slight remains of granulations. Sxys he could follow his trude, on admission, and ter. Can see the hour by a watch.	Right eye lost, with opa- city and wascularity of the loft corner, Granu- tinguish any object, al- though he sees light from with loft eye. Thisk him- self better since arriving here,	Opacity and chronic in- flammation of right eye, with vascularity of lids; which are a little thickensed. Left eye sound. Vision—Can see light with a heavy mist, and fea- tures indistinctly.	Cases of Op	Left eye gone. Opacity of right corner. Able to walk without a guide. Is somewhat improved since admission.
Date of First Examina- tion.	2 Jan.	Jan.		and the	Jan.
NAME.	David Renny	st.ife John Towers &Jan. Gds.	gand, John Garrity \$1July	Total Rose	James Russel
Regi- meur.	92nd.	stLife Gds.	.pud.	The real	Poot, or 79th.
- Gre	68	8	16		85

Date of State Resemble of State of Stat	State of Direase, and Vision, at Second State of Direase, and Vision, at First Examination. Second Examination.	1918. Objective of right cornel. 1818. Slight remains of operity truston of left with pro- 10 in right eyes. Says his eye, truston of iris. Is unable March are improved. The left his way without a guide.	Aug.	opposite pupil. Blind of eluronic inflammation of con- right vec. Unable to read junctiva. Cannot read with efft, except with a without a glass. It appears class of great power. Can that the active state of the	March 1	very considerably dilated. by himself improved. Is much as on admission.	The second secon	
Date of Examina to the control of th		Cical trussi to re-	ratio plete Slieb	oppo right with	Vis	ls mu		
n n n n n n n n n n n n n n n n n n n	Date of Nest Examina- tion.	2 Jan.	t July	- L	g Jan.			-
NAME. Thos. Cont. Lyons Lyons Brash	NAME.	Ken- Thos. Connel 1818.	Malcolm	120	John Brash	Trick Teach		No. of Street,
		Keu- frew Militia	8th Foot.	1 1 1 1	94th	N.		7
Case. 94 93		-		96			0	

		* 1 2 9 2 2 1 1
	Very slight opacity of 10 Much as on admission, 13th April 1912, Examinated both cornea. Says that his March last we thinks his vision by Insp. of Hospi, Homer, Stargo, rision is somewhat improved. An examinate the control of the	Right eye clearer, but II Appil 70 to 10, 1919, Dept. Insp. s. probable, the eyes are Hennen, Staff Surgeon Dr. Thom- slightly amaurotic. Vision son and Surgeon Dannt 56th Regt, slightly manurotic. Vision son and Surgeon Donnt 56th Regt, slightly improved. In the the Apple of remains maproved, but that the differ remains nearly, or entirely in same state as be- fore treatment at York Hospital.
osas usa report, athough posibly the operity may be considered less. Left eye considerably inflamed,	Much as on admission, says he chinks his viscon stronger. Very slight opacity remaining.	.57.5
John Hunt -2 Jun. Slight opencity of right 10 A an instreport, although e.e. Left eye decorated to possibly the operation. Say: moved by operation. Say: he sees clearer with right e.e. Canadembly inflamed, when it is close to lim.	92nd, John Reynolds Jun. Very slight opacity of 10 both cornes. Says that his March vision is somewhat improved.	2 Jan. Very slight operates of both 10 corner, but assys he is unable March to rend with tight operates he east little cleare with right eye, as he eye, since coming into the room. Supposed to arrive from disease of the retina.
John Hunt re Jan.	John Reynolds 3 Jan.	William
71st.	97	98 98
96	5	

Subsequent Examinations,	Using the both 10. Slight opacity remaining. April 1919, Examined by Drysion of both eyes, March is able to read, but state-lones, Surgeon 40th Requirent fits inshifty to earn a liveli- of Glasgow. Was four months in profession, although mod. He is as at laste-y fork Hoppital. No operation was amination. Right eye more performed on him, nor was there acknowled and effective. Says he cannot may improvement in his vision, it see more distinctly than on went there,		The second second	Slight opencity of both 10 The opacities or exerting John Eaton 91st Regiment, cornes, apprehended to be March to be seen. Says his vision is against the properties of Departy Inspector of Department I	App. Examined 39th Vebruary, 1819, (Qf) by Departy Impector of Hospital Hennen, Dr. Thomson, Surgeon to the Forces, and Songeon Dural 58th Regiment. This nam went for York Hospital in 1817, and returned in 1816, (April), the derived no benefit from the treatment there. Vision being precisely the same when he went. No operation was performed, but drops were put into both eyes. At present there is a speck on the inside of the right corner, and also specks on the right corner, and also specks on the Cf.
State of Discare, and Vision, at Second Examination.	Slight opacity remaining labels or and, but states his amblify to carn a livelismood. He is as at last examination. Right eye more factories. Says he camora admission.	both 10 Very slight opacity re- small March manning. Can now read early. ssion.	Vascular conjunctive of the Acceptance of protestance or protestance of the Acceptance of the Acceptan	The opacities or creating to the opacities or creating improved. Can tell ther hour by a watch,	
Second Examina 12-11.	1818. 10 March	March 10	March	March	March
State of Disease, and Vision, at First Examination,	Slight epacty of both cornea. Vision of both eyes a little impaired, (right eye more defective) although oble to read modernte sized pinit. He cannot work at in tradeof weaver. Suys he is as on admission.	Slight opacity of both cornes. Can read small light now, with difficulty. Improved since admission. on admission.	Operated on the purygan Vascular conjunctiva of in- mer cauthi of both eyes,— Opsetty of cornea (slight), On admission could not dis- tinguish large objects at twenty yards.	Slight opseity of both cornes, apprehended to be cicatrices. Vision indistinct, Cau distinguish colours at a short distance, and tell the hour by a watch. Can guide himself any where. No im- provement since admission.	An appearent disorganization of As at last report, the form of the eventh opacity, March parent amaurosis of and irregular pupil. Cientral of right corners, with protrasion of risk opposite axis of vision. Says that his vision is useful, and can its vision is useful, and can see to walk about. Says he is as on admission.
Pirat Exemina- tion.	20 8 9 8 9 8 9 8 9 8 9 8 9 8 9 8 9 9 9 9	2 Jan.	g Jan.	2 Jan.	2 Jan
NAMB,	William Montgomery	Matthew Wilson	James Taylor	Thomas Ayton 2 Jun.	Angus McDonald
Regi- ment.	Foot	7th Foot, or 79th.	Foot	91st.	Yet. Batt,
Care.	66	001	101	102	103
			1		

ion, at	Cataract of right eye, 1988. As nearly as possible as at with opacity of corteen, and Much last report. He states that very slight opacity of left) cornes. Says that he can be can experiment to be can experiment to be can open and that he is better ince admission.	Cicatrices remain, Vision imperfect.	Creatrix of left cornes opposite the pupil. Procression March site, 1819, Deputy In possite the pupil. Procression March with cicatrix of left. Adhe spector Hennen, Staff Surgeon Danti on said appropriate of Fight eye good of Fight seems of Surgeon Danti in right eye, Left eye most Sigh regiment, find that the har and distance, probably from the contrary, his sight; weaker than before. At present that he is as or and an admission, where the proches on the contrary, his sight; where the process of the sight sight in the contrary, his sight; where the process of the species on the corner of both eyes.
ind Vision, at Second fraction.	rch or		
nd Vision, at	1818 10 March	10 March	10 March
State of Disease, and Visi First Examination.	Cataract of right eye, with opacity of cornen, and very slight opacity of left cornes. Says that he can ead combon print with left yee, and that he is better ince admission.	2 Jan. Gratrix of both cornea. 10 Vision imperfect. Marc	Hagh Ross 2 Jan. Cicatrix of teft cornes oppose the pupil, Protrusion March of right in with a dission. Vision of right eye good, With the dression of right eye good, With the green only distinct, as a surface, probably from affection of return. Say, that he is as on admission, with respect to both eyes.
Date of First Exemina- tion.	25 Jan.	2 Jan.	2 Jan.
NAME.	Alexander	Nicholas Auderson	Hugh Ross
Regi- ment.	75th	9th Vet. Batt	25th Foot
Case	104	105	106

		and the same
2 Jan. Opseity of right cornes 10 Opacity not gone. But March 7, 1819, Deputy Inspecial axis of vision. Loss of March he says that vision is im-for of Hospitals Henara. Stall Large Could see without proved. That he sees with Surgeou Dr. Thomospad Surgeou are greater ease to himself, that he says improvement greater ease to himself, that he says that he is now no better since admission.	The state of the s	Assignment Representati
Opacity not gone. But he says that vison is im- proved. That he sees with greater case to himself.	Right eye good. Cleatrix 10 Slight opacity in left eye, on left corner apposite the March but he states his vision to be pupil. Was anable with left much improved. Can tell distinctly, Left eye a little clearer since admission.	STEEL OF THE PARTY AND ADDRESS OF THE PARTY AN
10 March	10 March	
Opacity of right cornes in axis of vision, Loss of Lipt yes. Or taken the standard some improvement since admission.	90th Robert Smith 2Jan. Right eve good. Cicatrix 10 on left corner apposite the March pupil. Was anable with left eye to distinguish objects distinctly. Left eye a little clearer since admission.	The State of the S
2 Jan.	2 Jan.	ij.
Hugh McDonald	Robert Smith	The state
78th	90th	I
100	108	

		The latest the same of the sam
Subsequent Examinations.	Cicatrix of left eye conti- tus, possibly from burnt Deputy Inspector of Hospitals well. Says his vision is im-Henner, Dr. Thomson Surgeon to oved. Says his vision is im-Forces, and Surgeon Dana oved. John Polymer, Went to York Hos- pital in December, 1817, and re-	miniord there four months. Vari- ous applications were employed to bits foff eye, from which he received some benefit at the time, as as the eye was much inflamed. At present the inflammation is removed, but he is nearly as he was with respect to the power of vision. There is staphyloma in his right eye; and in his felt, specks on the cornes, and wascularity of the conjunctiva.
State of Disease and Vision at Second Examination.	Cicatrix of left eye conti- nues, possibly from burnt alum. Says his vision is im- proved.	A Company of the Comp
State of Disease, and Vision Base of Second at First Examination. Examination Bean	James Strang. 2 Jan. Cicatrix of loft cornea.— 10 Cicatrix of loft ever conting that have been as a first of a superance of the same as on advanced by the	Comment of the commen
NAME, Exemina-	James Strang, 2 Jan.	Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Hamedall Ham
Regi- ment.	9th Vet. Batt.	122 12 13
Case.		109

Single copienties Sing			
James Cartiy, 31 Slightopacity of right eye, 26 Much as at last inspection of Carter, July come vessels in conjunctiva; Aug., ion. Says he sees electron, with it he can see the hour glasses in conjunctiva; Aug. ion. Says he sees electron glasses. With left eye he can see the poor glasses, with left of early as with right. Slight opacity with right. Slight opacity with right. Slight opacity with order of left experiences of the tarsus. Dum- Don. McCall July Right eye lost. Opacity 26 Opacity a little, and very of left comes, from lead.— Aug. Ittle diminished.	Organy Inspector thermes and Assistant Surgeon French H. D. Assistant Surgeon French H. D. Assistant Surgeon French H. D. and July, 1815, and returned in Au and I of I o	to control which a part that	
James Cartier, July come vesses in conjunctivative per Proof Superior Proof	Much as at last inspection. Says he sees cleared.	Opacity a little, and very little diminished.	Deserted.
James Cartier, July come vesses in conjunctivative per Proof Superior Proof	Aug.	age Aug.	
011		Right eye lost. Opacity of left cornes, from lead.—Can tell what o'clock it is.	
011	July	1 July	July
011		Don. McCall	William
		Dum- barton Fenc,	
	0	Ξ	1116

Subsequent Examination.		Tina and Lippitudo re- Itth May, 1819, Examined by mored, Vessels on the Depuy Inspector Hennen, and conjunctia remain. Siys Assistant Surgeon French H. P. his vision is improved, full Cotche Velocing, He state hill October Following; He state hill October Following; He state hill Cotcher Following; He state hill Pottober Following; He state hill while at York Hospital his right eye was scarified, the eye lobels were tulmed, and blue stone and various drops and onlineari were employed. By these medi- cines the inflammation of the eye was much relieved, but his power of Kisson was left the same as before. At present there merely appears a duskings of the corner of the right eye; the pupil is natural high eyes is much more sunk in the corisi than the sound one.
State of Disease, and Vision, at Second Examination,	Ngish e-26 Augas when he cane in. No citatrix) occurs in catarrix) occurs in catarrix occurs. Operation performed, poposite pupil in catarria. E his way in a process of the catarria occurs in the catarria occurs. Can tell the caterria occurs in the real the caterria occurs occur	Trus and Lippitude moved. Vessels on conjunctiva remain. is vision is improved,
Date of Second Examina- tion.	26 Aug.	Oct
State of Disease, and Vision, at First Examination.	31July Jonations. Right eye.—26 Aug Opacity for actions. Right eye.—26 Aug Opacity for cicatra; occurative expension exprise corporate pupil with capsular cataract.—Cannot make his way in a strange place. Can tell the hour by awatch. Cannot earn his livelihood by his trade.	John Ogilvic, 31July Left eye good. Trinis of right tars. Lippitude of lower eyelds a few vessels in conjunctiva. Says he is unable to see the hour by a watch.
Date of First Examina- tion.	31July	STORY .
NAME.	Royal Peter McNue, 1818. Artil. or McNuel, 31July	John Ogilvie.
	Royal Artil.	91st.
Case.	113	114
		and the same of th

			-		
-	April 4th, 1815, Depays In- pretor Hennen, Staff Surgeon Dur, Thomson, and Surgeon Dannt 89th, find that his com- plant was dimense and inflamma- tion of both eyes, that the treat- ment at York Hospita has fifted— ament at York Hospita has fifted— forment there is opacity of the right present there is opacity of the right some in the left.	00 37	- No.	Subsequent Examinations.	they five to the state of the s
A	April 4th, 18 t-pector Hennson, Dr. Thomson, Daunt 35th, iii plaint was dimne tion of both eyer ment at York He ed him no perma present there is of cornen, and a d same in the left.			Subs	ideal Popil or.
The state of the s	Operity of right remains, April 4th, 1819. Deputy Inconserve fully, better with spector Hennen, Staff Surgeon this eye, than the other, Dr. Thomson, and Surgeon alithough operity greater, Durnt S8th, find that his conserve, con see to read smallerion of both eyes, that the treatprint than on admission, ede him no permanent relief. At present there is opacity of the right cornea, and a disposition to the same in the left.	LE STATE OF THE ST	psular Cataract.	State of Disease, and Vision, at Second Examination.	sion. Vision of left in- proved. The mercental me- diminished the spect. Can the hour by a glass.
	7 Oct.	marghan y out the sil	with Ca		7 Oct.s
The state of the s	Artil. Geo. Willson 51 July Probably capablar cata- Artil. Artil. (A. Oparity of right. Can set to real large print when close to him. Can tell the boar by left. Can work at his trade occasionally.	Not seen.	Contracted Pupil with Capsular Cataract.	State of Disease, and Vision, at First Examination.	Arthur 1818. Contracted pupil of right 1818. Right eye as on admission of the property of cornea; 70 cus, sion. Vision of the firm of the firm of the firm of the mercural meaning and the contracted pupil of left, dictions taken seem to have with opacity of capsule of lens of this eye. Can see to guide him. the revening.
	3rJuly	Z	Sin day	Date of First Examina- tion.	1 Jul.
	ico. Willson	Wm. Danks	ent vez Emelle Wansely	NAME.	Arthur H enderso n
	Artil.	8th. Vet. Bat.	Manual Ma	Regi-	fries Fenci- bles.
	115	911	of break	Case.	nound Doll to
			E 2		
			1		

Abstract and Result of the Accompanying Report.

	Vision much im- proved.	Vision partially improved.	Vision not im- proved.	Vision worse.	Eyes lost.	Not seen.	TOTAL
General Result Operations.	12	55	19	3	3	25	117
Artificial Pupil Ditto with Cataract. Cataract	7	21	6	1	3	12	50
Inversion of Lids } Eversion of ditto }	1	3	2		_	1	7
Opaque Cornea and } Vascularity }	4	31	11	2	_	12	60

The state of Vision applies to the days on which the men were inspected, which was as soon as practicable after the Orders were received from the Secretary at War.

Of the 117 persons, whose names are inserted in this Report, ten wern not inspected a second time, twelve were not seen at all, and nine are stated by Sir William Adams to have deserted, or been dismissed for improper conduct; on which account no Report of the treatment of these men is now offered, with the exception of two men of the 64th regiment, No. 73, and 74, discharged the service; and Nos. 24, 49, and 81, were seen by Mr. Hennen, Deputy Inspector of Hospitals.

(Signed)

J. McGRIGOR.

W. FRANKLIN.

J. McGRIGOR, W. FRANKLIN.

The following Men, treated by Sir William Adams, for Ophthalmia have been reported upon, as "improved," by Mr. Hennen, Deputy Inspector of Hospitals.

No.	Regiment.	NAME.	REMARK.			
2 5 10 13 15 16 17 34 48 51	78th Foot. 94th Foot. 20th Foot. 90th Foot. 4th Gar, Bat. 21st Foot. 79th Foot. 21st Foot. 25th Foot.	Hugh McKay Adam Gardner John Gavine James James William Hastie Serjeant William McNeil James Graham William Monteith George Sutherland	Improved, Ditto,			
64 66 67	Renfrew. Mil. 85th Foot. 9th Dragoons,	Gavine Young James Stirling Edward Joyce	Ditto. Ditto. Ditto.			

APPENDIX

FOREGOING REPORT.

CHELSEA HOSPITAL,

5th January, 1818.

SIR,

WE have, in the presence of Dr. Franklin, and Sir William Adams, examined the Ophthalmia Out Pensioners who had been selected for the purpose of being placed under the care and superintendance of Sir William Adams at York Hospital; and, agreeably to directions of the Lords Commissioners of Chelsea Hospital, have the honor to report, that we found these Out Pensioners had been under the management of Sir William Adams nearly a month, and consequently it is not in our power to say what might have been their precise state at the commencement of that period, we cannot therefore form a just estimate of the success of Sir William Adams's treatment; but, as it was understood that the Secretary at War had requested that the declaration of the patients themselves should be taken, we conceive this must be done with caution, since it was observed that sometimes the patient contradicted the account he had previously given. We cannot therefore form a judgment of the result of this treatment, until the men are discharged by Sir William Adams, more especially as several of the patients had been recently operated on. Conformably to their Lordships' orders, we herewith enclose a return of the names of these men and their respective cases now under the care of Sir William Adams;

And have the honor to be,

SIR.

Your very obedient

And most humble Servants,

(Signed) BENJAMIN MOSELEY, M.D. Physician.
T. KEATE,
WILLIAM NORTH, Apothecary.

RICHARD NEAVE, ESQ. Secretary, &c. &c. &c. CHELSEA HOSPITAL.

ROYAL HOSPITAL, CHELSEA, 17th March, 1818.

SIR.

WE beg to acknowledge the receipt of your letter of the 5th Inst. and we have accordingly re-examined thirty-four of the Out Pensioners whose names we reported on the 5th January last, and to each man's name we now add their present appearance, as the case was separately offered to our inspection.

From a considerable number of men in Scotland, sixty-four were selected as most likely to receive benefit from the present treatment; of these sixty-four, thirty are still unfit to be shewn after three months treatment; and the other thirty-four, supposed to be cured, have not (in our judgement) their organs restored to such an healthy state as to be applicable, for the most part, to any useful purposes of life, consequently are liable to relapses.

We submit therefore, whether it might not be expedient to wait a little, till time has confirmed the good effects supposed to be received by the sixty-four men selected; and not to send more (as we understand, to the amount of two or three thousand) until experience shall have sufficiently justified the practice. I ossibly it might be advisable that the thirty-four men whom we have already re-exam ned, should remain three or four months longer at the York Hospital.

Dr. Franklin and Sir William Adams having intimated to us their intention to send their separate reports to His Royal Highness the Commander in Chief, and to the Secretary at War; we beg leave to suggest the expediency of withholding our report from the inspection of those officers, until their several reports shall be received at the offices of the Commander in Chief and Secretary at War.

We have the honor to be,

SIR,

Your most obedient humble Servants,

(Signed) BENJAMIN MOSELEY, M.D. Physician, Chelsea Hospital,

T. KEATE,

W. NORTH.

A List of Thirty-four Out-Pensioners, re-examined at York Hospital, 12th and 13th March, 1818, under care of Sir William Adams.

-										
OBSERVATIONS.	Lid slightly villous.	Very considerable vascularity, and remains of granulations of lids. Lachrymation continues.	Lids are still vascular, with an overflow of tears,	Opacity and cicatrix remain. Iris adheres to cornea of left eye.	Vascularity of conjunctiva continues.	Operated for cataract.	Slight opacity of each cornea remains. The right still more de- fective than the $left$.	Cicatrix remains, Vision the same as on admission,	Operation for ectropium, We have no observation.	
5) 111	Right eye lost. Let eye-lid vascular. Slightly villous.	Increased lachymation, vascularity of right cornea, slight Very considerable vascularity, opacity remains of granulations of lids, can read with $\ell \rho f$ and remains of granulations of lids, ear, e.g., which could not Lachymation continues, see on admission, but could distinguish large objects with the $\ell g f$, but none with the $\ell g f$, e.g.	No present disease of the eye. Says he was admitted Lids are still with diseased eye-lids (apparently from vascularity andoverflow of tears, granulations.)	Opacity, ulceration, and remains of cicatrix of right eye. Opacity and cicatrix remain- tris adhering to cornea of left eye. States that little altera- Iris adheres to cornea of left eye.	Vascular conjunctiva of the inner canthi of both eyes.— Slight opacity of cornea. Could not distinguish large objects at twenty yards, on admission.	Cataract of left eye. Apparent amaurosis of right eye.— Can see indistinctly with the left eye, none of the right. Slight opacity of right eye. In the same state as in twelve years.	Slight opacity of each cornea, vision of each eye a little Slight opacity of impaired, the right more deflective. Cannot, with either, remains. The right work at his trade. Although able to read moderate-sized fective than the teft, print, states himself to be as on admission.	Cicatrix of the left cornes opposite the papil. Protrusion Cicatrix remains, of right iris, with addrsion. Vision of the right eye good—same as on admission. With the left he can soly distinguish objects, one yard distance, indistinctly—probably from an affection of the retina. Says he is in the same state as on admission with respect to both eyes.	Operation for extropium having been performed, he is now considerably relieved.	
NAMES.	Alexander Marshall	John Wilson	Duncan Campbell	Donald Monro	John Taylor	John Browne	William Montgomery.	Hegh Ross	George Sutherland	
Regiments.	2nd Dragoons	13th Light Dragoons	1st Foot	Ditto.	9th Foot	21st ditto	Ditto	25th Foot	26th Ditto	

OBSERVATIONS.	Slight opacity of each cornea fremains.	Opacity and vascularity in same state, with indistinct vision.	Opacity remains in the same	Vascularity above the pupil re-
the covery sample soften	Very slight opacity of each cornea, says he is only able Slight opacity of each cornea to read with the right eye; supposed to be from disease of remains, the retina, says he sees a little clearer since coming into the roun, with the right eye.	Entropium of the lqf evelid, diseased evelids, slight opa-Opacity and vascularity in same events cornes, with slight vascularity of the lqf state, with indistinct vision, indistinct vision of right eye, in the lqf says he can distinguish light from darkness, or large objects at a small distance.	Very slight opacity of each cornea, says that his vision Opacity remains in the same has somewhat improved,	Contracted pupil and prortuded iris of left eye, very slight. Vass opnetty of right cornes. Vision of right eye pretty good, mains, Imperfect vision of the left, says he has improved sincebeing under treatment.
NAMES.	William Rutherford	James McKoy	John Reynolds	James Strathern
Regiments.	27th Foot	42nd Ditto	52nd Ditto	71st Ditto

The second secon	Slight opacity and considerable rascularity continues.	Refer to the former Report.	Opacity renains, and he can scarcely see his way without a guide.	Indistinctly restored. Sees less with heft eye than when admitted.
	Left eye destroyed, slight opacity of the right eye with Slight opacity and pretty good vision. Two enlarged tunnons removed by cascularity continues operation since admission, says he sees clearer with the right eye, reads common print when close to him.	Cataract of the right eye, with opacity of comea of the left eye, says he can read common print with the left eye, and that he is better since admission.	Loss of left eye. Opacity of right cornea, in axis of Opacity remains, and he can vision, says he can see without a guide, and that there has scarcely see his way without a been some improvement since admission.	On admission could welk without a guide. Fizion.—Right eye good. Two artificial pupils have been formed. Active inflammation of both eyes remains, with portusion of iris in the left. Vision at present rather impaired.
	John Hunt	Alexander Gardner	Hugh McDonald	Alexander McKoy
	71st Foot	75th Ditto	75th Ditto	78th Ditto
	1976			

-	port.	tiva vas-			urity re-	Jort,	oort.	ich eye.	Report.	remain.
OBSERVATIONS.	Referred to former Report.	Lower lid and conjunctiva was- cular, and does not see better.	Opacity remains.	Opacity remains.	Cicatrix and vascularity	Referred to former Report,	Referred to former Report.	Opacity continues in each eye.	Referred to the former Report.	Vascularity and opacity remain.
related trajectory for another. We will not the measurement of the colors of the color	On admission could guide himself in known places. An artificial pupil formed. Inflammation subsiding. Vision is on admission.	Cicatrix of the right eye. Artificial pupil has been Lower lid and conjunctiva formed in the other, in which there is also a cicatrix. Says-cular, and does not see better, be could walk in known places without a guide, that the right eye is improved since the operation.	Slight opacity of each cornes, says he could not read small print on admission, but that he has since improved, and can now with difficulty.	Left eye gone. Opacity of the right cornea. Able to walk without a guide, somewhat improved since admission, according to himself.	Right eye good. Cleatrix on the left cornen, opposite Cic the pupil, says he was unable with this eye to disceronain, objects distinctly, but that it is a little elearer since administrator.	Obliteration of the 4¢t eye with adherent iris, nearly so of the right. Says he was anable to guide himself, and that he is so still. Since admission considers his right eye clearer,	Opacity of each cornea, apprehended to be cicatrices. Vision indistinct, says he can distinguish when at a short distunce, and tell the time by a watch, that he can guide immedf any where, and that there is no improvement since admission.	Vision of each eye slightly impaired. Pupils very con- siderably diluted. Says he is nuch as on admission.	Right eye gone. Operation for entaract was performed 33rd December on the $l_F \rho_L$, states that previously he could see to read and write, but that now he can see nothing.	Vascularity and opacity of each eye with granular and slightly fungous lids. Says he was totally blind of each eye;
NAMES.	Hagh McKoy	John Frazer	Matthew Wilson	James Russell w	Robert Smith	James James	John Ayton de de la	John Brash	Alexander McCullum	David Mairns
Regiments.	78th Foot	79th Ditto	Ditto	Ditto	90th Ditto	90th Foot	91st Foot	94th Ditto.	6th Vet. Bat.	9th Ditto

OBSERVATIONS.	Opacity and irregularity of pupil remain. Cicatrix and protrusion of iris continue.	Cicatrix remains, with vascu- larity.	Cicatrices remain,	Referred to the former report.	Protrusion of Cicatrix and protrusion the same.	Referred to former Report.	Referred to former Report,	OSELEY, M.D.	87.5) R JAY	
on the person part part to are topped and and a feet of the properties of the first person and the feet of the fee	An apparent disorganization of the $k\rho$ eve, with opacity Opacity and irregularity of pupil of cornea and irregular pupil. Cicatrix of the right concen remain. Cicatrix and protrusion with protrusion of iris opposite axis of vision. States that of iris continue, his vision is useful, enabling him to walk about, and that he is as on admission.	Cicatrix of left cornea, says he was able to walk without a guide, and that he is much the same as on admission.	Cicatrices of each cornea. Vision imperfect.	Left eye amaurotic, is under the effect of Sir W. Adam's operation for catanet in right eye, in which is considerable and slight extymosis, say he is blind with the Left, and discerns light with the right eye.	Opacity of right cornea. Ciratrix of left. Protrasion of iris, unable to read, sees his way without a guide.	Right eye lost, is under the effect of operation for artificial pupil, states that he could guide hunself in known places; that since the operation he has improved.	Ectropion of both under lids; has been operated on	(Signed) BENJAMIN MOSELEY, M.D. T. KEATE,	W. NORTH.	一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一
NAMES.	Angus McDonald	James Strange	Michael Anderson	Edward Syme	Thomas Connell	John Kirkwood	William Marshall	and the same		
Regiments.	and The Bat.	9th Vet. Bat.	District	Fife Militia	Step 1, or	9th Vet. Bat.		F	T was	

ROYAL HOSPITAL, CHELSEA, 29th April, 1818.

SIR,

IN conformity to your letter of the 25th Inst. we have the honor to send for the information of the Lords Commissioners the names of fifteen men and their cases, with the changes we have observed to have taken place since their admission in December, 1817. And we have nothing farther to offer upon this occasion than was submitted to their Lordships after the former examination of thirty-four men, "that, although in a few instances, there appeared to be some amendment, we are led to apprehend, from analogous cases, that the improvement, even of those few, will be but temporary; and that relapses will frequently occur; whilst, in by far the greater number, there does not appear to be any change for the better."

We have the honor to be,

SIR,

Your most obedient,

Very humble Servants,

(Signed) B. MOSELEY, T. KEATE, W. NORTH.

The Names of Fifteen Ophthalmia Out-Pensioners, examined at York Hospital 27th of April, 1818, under the care of Sir William Adams.

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OBSERVATIONS.	Cicatrix and opacity renain.— Vascularity and granulations con- tinue nearly the same, saysVision is rather more distinct.	Sees better with glasses.	Says he does not see so well as when he came in.	Now sees the hour by help of glasses, but never tried glasses pefore he came in.	Vacularity of both eyes remains, says, the right is improved,	In the same state; sees to walk bout. Granulations continue:	Vascularly remains. Sees large objects with 1¢/t eye.	Opicity and vascularity of cornea emain.	Opneity and vascularity of each orner remain, says he could only ee on coming in, to guide himself, ow see to read.
at we only on a said or a	Cicatrix on left cornes, on the right a small opacity; Cicatrix and opacity remain.— Nascularity and remains of granulations on each lid. Says Vascularity and granulations conhe is nearly in the same state as on arrival. Vision indis-finue nearly the same, says Vision indistinct on each eye.	Contracted pupils, Caturact of right, and indistinct vision of left eye. States that he is as on admission.	Right we lost. Opacity of corner of left eye; some days, Says he does no since had an artificial pupil formed; left pupil contracted, when he came in, with opacity of capsule. Says that previous to operation his vision was only sufficient to walk without a guide.	Right eye lost. Is under the effects of operation for Now sees the hour by help of rataract in the ℓ_{ff} , previously could distinguish night from plasses, but never tried glasses day—with some little improvement.	Cataracts of each eye. Says the right eye has been operated our nearly blind. Says he is as on admission,	In the right eye, a cicutrix of cornea, with the iris adhering in an exame state; sees to walling to it, and contraction of pupil, the vision being good-about. Granulations continued in the left eye, remains of granulations, pupil obliterated, with cicutrix and vascularity.	Vascularity and opacity of left cornea, acute inflamma- ition, and slightly granufar lids. Says the inflammation is relieved, can dissinguish darkness from light with left eye. Right eye sound.	Opsque and vascular cornea of right eye, with grazular Opacity and vascularity of cornea and vascular lids. Slight opacity of left cornea.	Opacity and slight vascularity of each cornea, with re- mains of granulated lids; says he could see to guide bine cornea renain, says he could only self in day-light, and that he is much the same as on admiss sees no coning in to guide himself, sion.
NAMES.	Charles Abercrombie	William Howatt	Alexander Robertson	Richard Rencie	Heary Calder	Alexander Ross	Thomas Fife.	John Trimmer	James Stirling
Regiments.	1st Foot	Ditto.	83d Foot	fith Vet. Bat.	36th Foot	2:st ditto	71st Foot	79th Ditto	85th Ditto

-						2727272	
OBSERVATIONS.	Is ander the influence of consti- tutional disorder, therefore impro- per for examination.	Left eye remains the same, but sees rather better, tells the hour by a watch. Opacity of right cornea the same, vacularity continues. Right lid remains diseased tinues.	Sees the hour on a watch. Vas- cutarity and opacity remain the same,	Vascularity and opacity remain. Says that vision remains the same.	Opacity and vascularity remain, le Says he now can guide himself and etel the bour.	Says he does not see so well as on admission. Vascularity of right evanine.—This man was examined on the 28th of April, 1818, at the Infirmary, Chelses Hospital, being sent the day after the inspection at York Hospital, by Sir William Adams, for examination.	ж. North.
ma page president con sett to adapted in the	Slight opacity and considerable vascularity of cornes, is under the influence of consti- with slight remains of granulation; says he could follow his tritional disorder, therefore impro- work on admission, and now considers himself better.	Cicatrix of left comes, with opacity; slight opacity of Left eye remains the same, but right corner. Discussed eye-lids: says he was nearly blind sees rather better, tells the hour and mission that since, he could distinguish day from by a watch. Opacity of right only that with right eye he could distinguish day from by a watch. Opacity of right only that with right eye he could see to guide himself, and connea the same; vascularity conthat he is as on admission.	Slight opacity of each cornea, two or three vessels on the Seea the hour on a watch. Vas- field. Can distinguish objects at trey natch, with both eyes, cularity and opacity remain the States that the vision of the left eye was considerably worse, same, distinguishing only light from darkness, and the right eye	Left eve destroyed. Vascularity and opacity of right cornes, with remains of granular life. Says that vision was Says that vision remains the same improved superfect on anomy and respect to the same important important was superinced to a manipulation.	Opaque and vascular cornea, granulated lids, ectropion— for this he submitted to the operation. Says he was unable Says he now can guide himself and to guide himself in the street; sight the same now—eye-fell the boar. lids relieved.	Rupture of each cornes, direct in axis of vision. Protrusion of $left$ iris, and the pupil dragged to one side,	(Signed) B. MOSELEY. T. KEATE. WILLIAM NORTH.
NAMES.	David Rennie	John Nish	Edward Joyce	James Smith	McMullin	Campbell	ries, ithe right of set beliefs to was imporesiable on a socially blind, in
Regiments.	92nd Foot	Ditto	9th Foot	Sorth Lone	42nd Foot	Ross Militia	or casse bloods a look
					100000		

ROYAL HOSPITAL, CHELSEA, 28th Aug. 1818.

SIR,

IN answer to a note from Mr. Lynn, by your direction, we beg to acquaint you, for the information of the Lords Commissioners, that we have reexamined thirteen men at the York Hospital; and that the result of this examination furnishes little more information for the Commissioners than is contained in our former reports.

In a few cases it should seem, from the contradictory and inconsistent statements of the patients themselves, that there has been some amendment, but, in these cases the men are still liable to the effects resulting from long marches, sea voyages, and the vicissitudes of season, on returning to their own homes.

In one case, the right eye of the patient had been entirely lost before he was undertaken; the left eye was therefore inappreciable to this man, but unfortunately he is now totally blind, in consequence of an operation having been hazarded on the left eye.

Hence it should seem to us, that it were well, as we have already observed, to let these men remain quietly

at their homes, rather than subject them to the inconveniences of long marches, and sea voyages, in addition to the uncertainty of unusual treatment, and hazardous experiments,

We have the honor to be,

SIR,

Your most obedient humble Servants,

(Signed) B. MOSELEY.

T. KEATE,

W. NORTH.

RICHARD NEAVE, ESQ. Secretary, &c. &c. &c.

qualitation and it to correspond the conference of the conference

ne has received benefit in one of his eyes, while we go became disordered from the operation

A lew have been somewhat improved in our, and some

treet, and some from operations not altograber new.

nance of an order, on Wednesday, the first that the

ROYAL HOSPITAL, CHELSEA, 15th Feb. 1819.

SIR,

IN obedience to the commands of the Lords Commissioners we have the honor to report upon the fifteen following Out Pensioners who have lately been re-examined, and discharged to their homes. We regret that our present report will be found still more unfavourable than those that have preceded, finding as we do, an increased proportion of those unfortunate cases, wherein the patients have been rendered totally blind by operations. Of the men included in this report, one has been discharged to his home under the influence of an active inflammation and incipient opacity on the globe of his eye, caused by the operation, whilst he was a patient in York Hospital.

One has received benefit in one of his eyes, while the other eye became disordered from the operation performed on the opposite eye.

A few have been somewhat improved in one, and some in part, in both eyes. Some have received benefit from rest, and some from operations not altogether new. When we had the honor of attending the board, in pursuance of an order, on Wednesday, the 3rd inst, the

Secretary at War mentioned an Out Pensioner, who had been reported as blind, and who, in His Lordships opinion, was able to see; we beg leave with all respect to say that we have endeavoured ineffectually to obtain the name of that man, but we hope, we may be favored with it, in order to rectify any mistake which may have occurred; and if in any case, it should be supposed we have given any erroneous judgment we humbly request we may have the opinion of the court of examiners of the Surgeons' College, the highest Surgical tribunal in the world.

At the same time we think it our duty to inform the board, that (although the Secretary at War in reading his statements, very properly employed such terms as are familiar to persons not professional) there is not a single case on His Lordship's list, which is not replete with the most abstruse questions in the art of Surgery, and such as would necessarily occupy a considerable time, if the Board should think proper to have them fully discussed in their presence.

Regiment.	NAMES,	Admission.	OBSERVATIONS.
74th Regt.	Alex. Anderson	1818. 24 July	Vision improved by an operation,
26th Regt.	George Gavin	1817. Dec.	Vision improved by operation; but in imminent dange of losing the eye that was operated on, owing to an incipien opacity with active influence of which he has been discharged.
Ist Foot.	D. McCullum	1818. 24 July,	Left eye improved by the operation for cataract; but be a sympathetic influence the right has become affected by the operation of the other.
21st Foot	Charles Smith	1 July	Vision improved, but ligh causes lachrymation to a great degree.
21st Foot	David Graham	Ditto	Right eye lost on admission an operation has been per formed on left, by which he has some sight, but he is now quit blind.
48th Regt.	John Ure	24 July	In the same state as on ad mission.
61st Regt.	Duncan McCullum	Ditto	Right eye lost since admission. Left improved.
68th Regt.	William Hill	Ditto	Vision imperfectly improved since operation.
72nd Regt.	William McKay	Ditto	Vision partially improved, a
94th Regt.	William Steel	Ditto	In the same state,

Reg'ment.	NAMES.	Admission.	OBSERVATIONS.
94th Regt.	James Williamson	1818. 24 July	Was blind in the left eye on admission, and after two opera- tions on right is now quite blind.
Artillery	James Mathewson	Ditto	Vascularity diminished; otherwise in the same state,
90th Regt.	Hector McLean	Nov.	In the same state,
5th Gar. Batt-	James McLaren	24 July	Opacity and vascularity remain; says he sees better.
Renfrew Militia	Gavin Young	Ditto	Vascularity diminished.— Opacity remains; vision nearly in the same state; says be seen better.

ABSTRACT.

Improved 1
Ditto, in part 6
In same state 3
Say they are better, but appear to us the same, 2
Right eye rendered blind, left improved 1
Rendered blind by operations 2
Total 15
CHARLES AND AND ARREST

We have the honor to be,

SIR,

Your most obedient humble Servants,

(Signed) B. MOSELEY, Physician,

T. KEATE.

W. NORTH.

Richard Neave, Esq. &c. &c. &c. Chelsea Hospital.

ROYAL HOSPITAL, CHELSEA,

March 19th, 1819.

SIR,

IN conformity with your letter of the 5th Instant, we have the honor to state, for the information of the Lords Commissioners, that we have examined the eight following Out Pensioners, who have been reported by Sir William Adams, as fit to be discharged to their homes. And we regret that we are under the necessity of repeating in this seventh report, our conviction of the trifling comparative advantages and the great real disadvantages, derived to the men, submitted to our inspection, from the long journies of some and the experiments others have undergone.

١	Regiment,	Age	NAME.	REMARKS.
	2nd Foot.	49	Thompson	After two operations, and nin- months treatment, the only differ- ence appears to be, that on admission be could discern light, and at present he cannot well find his way about.
-	9th Foot.	40	Denyer	After eight months treatment, opacity, vascularity, and thickened lidremain the same as on admission and the eyes are under the influence of considerable disease.

Regiment.	Age.	NAMES.	REMARKS.
1st Foot	53	Ferguson	A slight affection on the upper lid of left eye on admission; the lid still remains diseased and thickened, al- though he has undergone an opera- tion.
85th Foot	50	Crighton	After nine months treatment, opa- city and vascularity and contracted pupil of each eye, remain the same; he says he sees to walk better.
94th Regt.	27	Velch	Vascularity on both lids and eyes remains as on admission in July, 1818,
5th Gar, Bat.	64	Dalziel	On admission, sight of right eye lost; operation performed on the lost eye in January, since which, conti- nued inflammation of that eye affects his head, in which state he is dis- missed.
92nd Regt.	40	Dowie 1	After eight months treatment he now says he sees more clearly.
94th Regt,	39	lver	Slight opacity and cicatrix remain as on admission. Vision, not then, nor at present, impeded.

We have the honor to be,

SIR,

Your most obedient humble Servants,

(Signed) B. MOSELEY, Physician.

T. KEATE,

W. NORTH.

Richard Neave, Esq. Secretary, &c. &c. &c.

ARMY MEDICAL DEPARTMENT,
October 16th, 1818.

SIR,

I HAVE the honor to transmit a report on the state of vision of sixteen Out Pensioners, who, by order of the Right Honorable, the Secretary at War, have been under the care of Sir William Adams at York Hospital, and were examined on the 7th inst. by order of Lord Palmerston, by the Medical Officers of Chelsea Hospital, and by Dr. Gordon and myself, with a view of ascertaining what degree of improvement had taken place in their vision; the improvement or deterioration of vision in each case is placed against each man's name, by which it appears that nine operations have been performed, three of which have been successful, one has been unsuccessful, three have derived some trifling benefit, and two have entirely lost their sight; of the remaining seven men who have been under Sir William Adams's treatment, the vision of one man has been much improved, four have had their vision somewhat improved, and two have derived no benefit whatever; one of the last mentioned is Andrew Blair, whose eyelids have been improved, and thereby he has been rendered more comfortable.

It is proper here to remark that in no instance does it appear, that the amendment in vision has been sufficient to render the men fit for any military duty. The case of John Honeyman seems to be particularly unfortunate, as he states that previously to being selected and sent up to Sir William Adams, he enjoyed a sufficient portion of vision to guide himself in known places, but from the unfavorable result of a hazardous operation he is now totally blind.

It may not be irrelevant here to mention, that the vision of the last man on the list, Brian Smith, 68th Regiment, (who has been ten mouths under Sir William Adams, and is now brought forward as fit to be sent to his home) is in my opinion susceptible of some amendment, I beg leave therefore to recommend, that he may be placed under the care of the medical officers at York Hospital.

(Signed) W. FRANKLIN.

Major General Sir Henry Torrens, K. C.B. &c. &c. &c.

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一日 一日 一日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日	Successful. Unsuccessful. Partially. Vision	3.	TREATED WITHOUT OPERATIONS.	Much improved.	J. Kenay, 18th Foot	Somewhat improved.	A. Henderson, Dumfres Mitta G. Wilson, Royal Artillery J. Ogilvre, 91st Regment H. Porteus, Rifle Brigade	No improvement,	A. Blair, 18th Foot B. Smith, 68th Regiment
	Operations for Artificial Pupil,		OPERATIONS.	Successful. J. Gibson, Rifle Brigade	W. Hamilton, 1st Foot A. Gardner, 94th Regiment	Unsuccessful,	Partially impresed. J. Graham, 79th Regiment J. Silver, 80th Regiment	J. Wilson, 94th Regiment	George Smith, 43rd Regiment John Honeyman, 6th Veteran Battalion

15th Ooctober, 1818.

SIR,

I HAVE the honor to enclose a report on the state of vision of thirteen men who have been under the care of Sir William Adams, and whom I (in the absence of yourself and the medical officers of Chelsea Hospital) re-examined on the 26th August, 1818.

In this report, the state of each case at the first examination is detailed, as well as the result of the subsequent treatment, by which it appears that nine operations have been performed, two of which have been successful, one unsuccessful, and six have derived some benefit. Of the remaining four, upon whom no operation has been performed, three have had their vision somewhat improved, and the remaining one is in every respect much as on admission.

(Signed) T. GORDON,

Physician to the Forces

To Dr. Franklin.

TREATED WITHOUT OPERATIONS. Malcolm Lyons, 8th Foot Donald McCall, Dambarton Fencibles James Carter, 8th Foot Peter McNiel, Royal Artillery Somewhat improved. Partly so. Abstract of the foregoing Report. John McNiel, 21st Poot Alexander Smith, 72th Regiment Janes Menzies, 92nd Regiment Donald Morrison, 94th Regiment William Hasty, 4th Gerrison Battalion Peter Delilofe, 32nd Regiment Operations for Artificial Pupil. James Allan, 21st Foot George Watson, Royal Artillery Alexander McAllum, 10th Foot Partly successful. OPERATIONS. Successful.

Vision lost.

LETTER

PROFESSOR SCARPA,

PAVIA.

BY

M.L. ESTE, Esq.

Member of the Royal College of Surgeons, London; and of several learned societies at home and abroad;—late Lecturer on the Philosophy of the Animal Economy at the Royal Institution of Great Britain;—Senior Surgeon to the Royal Household Brigade in the peninsular wars—and Surgeon to the First Regiment of Life Guards.

LONDON:

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RY ALL BOOKSELLERS.

1819.

DON ANTONIO SCARPA,

Regius Professor of Anatomy and Surgery in the University of Pavia.

SIR,

The 58th Number of the Edinburgh Medical and Surgical Journal for 1819, (January,) containing your letters to my friend Professor Maunoir, on the subject of Cataract and Artificial Pupil, (in reply to Sir William Adams,) dated Pavia, 27th December, 1817, was lately put into my hand by a distinguished patron of science, who pointed out to me the following passage in your second letter to Mons' Maunoir, viz.

Hayden, Printer, Little College Street, Westminster.

"Sir W. Adams writes, 'that he was informed by Surgeon Este, that he had seen the Cataract reascend in three cases operated on by me; but when depressed anew, it did not again rise; and that my mode of operating was generally successful.'

"Whether this young man, who soon after commencing his first anatomical and surgical studies in this university left it, has seen secondary Capsular Cataract, or a remarkance ascended opaque hard lens, I will not venue ture to assert."

In reading this passage, my friend informed me that it had been much discussed, and had given rise to many remarks—that it was evident from your expressions, either that I had been incorrect in my reports of the cases; or in my statements of my intercourse with you; or that there had been forgetfulness of that intercourse, or some misconception on your part; or that you wished to invalidate the evidence I had given of your practice, by an insinuation

that I was too young in age or experience—or that my career at Pavia had been too short to enable me to form a just judgment of the merits of your practice by its results.

On considering this part of your letter, I soon perceived your feelings had been hurt,and I concluded that it had been written, hastily perhaps, in consequence of the partial publication, by Sir William Adams, of a letter I had sent to him on the 2d of January, 1817; but, Sir, as I cannot suffer insinuations to go abroad, that may prove prejudicial either to your good name or to my own, without using some endeavour to repel them, I feel it a duty I owe both to you and to myself, to address you on the present occasion; -and I do so, in the hope that, by a short explanation, and such evidence as I shall advance, I may succeed in convincing you that my conduct has been correct; and that in my statements of you, and of my connexion with you, I have not gone a step further than I was fully justified in going, either on this or any other occasion.

Without presuming to interfere at present in the questions between yourself and Sir William Adams, I shall briefly state what my intercourse has been with that gentleman; and I shall insert the entire letter I wrote to him on the 2d of January, 1817, of which you have hitherto seen only a part:—I shall afterwards endeavour to remind you of the exact nature and period of our intercourse in Italy, by such evidence as I presume will be found incontrovertible.

With respect to Sir William Adams, in 1815, shortly after my return to London, from the peninsular and continental wars, certain professional business led me into his society,—he kindly invited me to see his operations, more especially those which he called new and improved: and I assisted him in many during the subsequent years, 1816 and 1817. Several of them were new to me, viz. the slicing of the cataract, and propelling the fragments into the anterior chamber,—the removal of the entire hard cataract into that chamber, by the needle, and its subsequent extraction, by incision, through

the cornea—as were also some steps in his operations for artificial pupil. These operations I admired for their neatness and success—they seemed to deserve the epithet, improved, as they were attended with less danger to vision than the original operations. The application of the sulphate of copper to the inner eye-lid, and conjunctiva, was not new to me, for I had used it largely myself in the army, and I had had it applied to my own eyes, to remove the consequences of Egyptian ophthalmia.

Sir William Adams repeatedly questioned me as to what I had seen in Italy, during my sojournment there between the years 1792 and 1797; and as to what I had observed in the two subsequent years at the German Universities at Berlin and at Vienna, as well as in Edinburgh and in London; and likewise concerning such practical experience as I had had in my visits to Egypt, in 1800 and 1804; in my subsequent services in the Mediterranean, and during the peninsular and continental wars; and he never was more particular than in his

enquiries respecting yourself, as to what you taught and what you practised. He successively informed me of his controversy with you, and the more particular nature of your litigation. Sincerely sorry to hear of such disputes, I felt. cautious of mixing in them, and anxious to see them conluded. However, Sir, in my explanations I repeatedly stated that I had been with you between the years 1792 and 1797; and that I had not seen you since; nor had I been able to keep pace with you in all that you had since done, in consequence of the situations I had filled, and of the variety of active service in which I had been successively engaged, and likewise in consequence of some private concerns, with which my attention had been, at times, entirely engrossed. The annexed letter may, however, help to shew what the nature of my communications has been; that part of it only, which is here printed in italics, was inserted by Sir William Adams in his book, Practical Enquiry, &c. page 97 .- Hine illæ lachrymæ.

(COPY TO SIR WILLIAM ADAMS.)

Barracks, Hyde Park, January 2d, 1817.

MY DEAR SIR,

I have to inform you, in reply to your inquiries respecting professor Scarpa, that, during my sojournment in Italy, between the year 1792 and 1797, he had no sooner presented to the world his splendid work on the Nerves of the Heart, than he turned his attention to the Pathology and Surgery of the Eye. He stated, in his public lectures, that he felt it particularly incumbent upon him, as a duty he owed to society, to bestow much time and thought upon those subjects, under an impression that he could not be more usefully employed than in endeavouring to discover, and to make known the best modes of affording relief to his fellow creatures, in several of their most severe afflictions. In these pursuits he displayed the same comprehensive powers, judgment, and accuracy, that distinguished all his undertakings.

His lectures were delivered in the most elegant language, Ciceronian Latin, without any note or memorandum; his operations were performed with a neatness and precision quite peculiar to himself; which I never since have seen rivalled in any other country, excepting, perhaps, occasionally in our own. "He was a warm advocate for the depression of the cataract, in opposition to Richter, whose doctrines had then spread through Germany, and who was at that period the great patron of extraction.

Scarpa merely depressed or couched; I never saw him divide the cataract, as you do, to hasten its absorption; although he was generally successful, I recollect that after three of his operations, the cataract returned to its place; from whence it was afterwards dislodged by a second introduction of the needle. To prevent such occurrence, he strongly inculcated to his pupils the necessity after depressing and forming a bed for the cataract in the botton of the eye, of propelling, as it were, the vitreous humour with the

flat surface of his instrument into the space the cataract had occupied prior to depression; he frequently detached and introduced into the anterior chamber of the eye opake pieces of the capsule; stating that such pieces so introduced would speedily disappear (dissolve was his expression) in the aqueous humour; but I never saw him divide or break the cataract itself, nor did he, during the period before-mentioned, (between the year 1792 and 1797,) ever suggest the expedience of passing the lens so divided into the anterior chamber, according to your modes of operating."

I remain, dear Sir,

With great truth and regard,

Your obedient humble Servant,

M. L. ESTE.

With respect, Sir, to the latter part of your statement, affecting my own veracity and credit, as reputation ought to be the portion of every one who lives and would live with the elegant part of society, I cannot allow it to pass unnoticed.

In reply, therefore, to your paragraph, "this "young man, who soon after commencing his "first anatomical and surgical studies in this "university, left it," &c. I shall respectfully beg leave to recal the following circumstances to your recollection:

That I had been a pupil of Dr. Baillie's and Mr. Cruikshank's in 1792, before my sojournment at Pavia; that I was indebted to the first of these gentlemen, and to Sir James Edward Smith, for letters of introduction to you; that I resided in Italy, and principally with you, between the years 1792 and 1797; that I did so may be proved by my matriculation, which is now upon my table, and no doubt also upon the records of your university, as it was made out in due form, and signed in the first instance by Joseph Andreas Raggi, the rector of your university for 1793; by Mascheroni, the rector for 1794; and, subsequently, by the Marquis Belcredi, the rector for 1795.

The next evidence I shall take the liberty of

bringing forward is your own certificate, given to me af Pavia, on the 28th of April, 1796; when I quitted you, because General Berthier's division of the French army was then advancing upon your city, and because you then were preparing to shut up your university.

Ticini Die, 28va Aprilis, 1796.

Testor ego infrascriptus dominum Michaelem L. d'Este, Anglum, per tres successivos annos prælectionibus meis anatomicis et chirurgicis, assiduè, diligenterque interfuisse; multaque toto hoc tempore ingenii ex dexteritatis specimina dedisse, cum in anatomicis administrationibus, tum in chirurgicis operationibus, instituendis.

ANTONIUS SCARPA, Reg. Anatomes et Clinic. Chirurg. Professor.

I shall further state that I have in my possession, and likewise at this moment upon my table, similar certificates from Johannes

Petrus Frank, from Spallanzani, Volta, and from Presciani; also several letters from you to my friends in England. I could further bring forward, if it were necessary, many living witnesses, some personally known to yourself, to confirm all this written evidence. But, Sir, I do not wish to extend this letter to too great a length, either by such additions, or by enumerating the various academical distinctions and situations to which, with the assistance of these and other testimonials, I have since succeeded; they can be of little consequence to any one, nor indeed at present even to myself; for though warmly attached to my profession, and ambitious of supporting it on every laudable occasion, I have long outlived its vanities; on which I never at any period set much value, but have always been actuated by, and often censured for, principles of independence, such as I probably imbibed from yourself: for at an early age, though imperceptibly, we are very strongly influenced by example; and in my intercourse with scientific men, I never have known any one endowed with more real merit,

at the same time possessing less of the ostentation and pedantry of science, than yourself.

In addition to what I have advanced, I shall therefore merely trouble you with one other circumstance, the more fully to remind you of the justness of my assertions: viz. the intimation I received from the Senatus Academicus of your university in April 1796, (which was conveyed to me by yourself) respecting my degree, when you told me they were so satisfied with my conduct, they invited me to take it—and your advice to me was to do so.

Thus, Sir, have my humble but zealous endeavours been employed in advocating your cause, and in substantiating my own statements. Nothing now remains but that I should request you will accept the assurances of my most sincere regard.

I have the honor to subscribe myself,

Sir,

Your grateful pupil, M. L. ESTE.

P.S. I should have visited you in the year 1801, as I passed through Italy, in my way from Egypt; but I was detained longer than I expected in Greece, at Naples, and at Rome. I was bound to remain some time at Paris, and to be in England by a stated period. And in the year 1804, when in Laly, neither the particular service I was engaged in, nor the circumstances of the war, would have permitted such a deviation from my course as a visit to Pavia; however, if either public or private business should again lead me into that country, I shall have much happiness in paying my respect to you.

London, May 10, 1819.

Printed by G. Hayden, Little College Street, Westminster.

HINTS, &c.

HINTS

RESPECTING

THE IMPROVEMENT

OF THE

Uiterary & Scientific Education

OF CANDIDATES FOR THE DEGREE OF DOCTOR OF MEDICINE

IN THE

UNIVERSITY OF EDINBURGH,

HUMBLY SUBMITTED TO THE CONSIDERATION OF THE

PATRONS AND PROFESSORS OF THAT INSTITUTION;

ву л

GRADUATE OF KING'S COLLEGE, ABERDEEN,

Edinburgh :

PRINTED FOR DAVID BROWN, ST. ANDREW STREET, BY JOHN JOHNSTONE AND SON.

1824

HINTS, &c.

GENTLEMEN,

Understanding that it is in contemplation to revise and to improve the Curriculum, or course of medical instruction which has been followed for many years in the University of this place, I trust that it will not be deemed presumptuous in one, who feels grateful for the share of education he has received in it, to avail himself of the opportunity which now presents itself, of submitting to your consideration a few observations with regard to Medical Education in general, and with regard to the Literary and Scientific Qualifications which ought to be required of those on whom the honors of the Degree of Doctor in Medicine are conferred.

A century has nearly elapsed since a regular School of Medicine was first opened in the University of Edinburgh, and the numerous benefits which have resulted from this establishment have been long felt and recognized in every part of the civilized world. The Teachers who, during this period, have filled the medical chairs, have, by their talents and labours, and by the judicious improvements in the system of medical instruction which they have successively adopted, raised the fame of this School to the height which it at present

holds, and which it must be the wish of every one connected with the University of Edinburgh to endeavour to support and to perpetuate. The alterations in the system of Medical Education, reported to be at present under the consideration of the Senatus Academicus, and the changes proposed to be made in the regulations concerning Graduation, must be regarded by the Medical Profession, and by the Public, as indications of the desire which the present members of the Medical Faculty have to enulate their predecessors, and to maintain the reputation of their school, by adding to the value of the Degrees to be in future conferred by the University.

It will be readily allowed by every one who is in any degree acquainted with Medicine, that to study it as a Science, and to practise it with advantage as an Art, much learning, knowledge and experience are required; and, therefore, that it must be a matter of the highest importance to Society, that young men, who are to apply themselves to the Medical profession, should be well instructed in all those preliminary branches of education which are necessary to the study of Medicine, or calculated to facilitate their progress in it. Indeed, the slightest view of Medical Science is sufficient to shew, that no one can enter, with any prospect of advantage, upon its study, who has not previously acquired some knowledge of the Latin and Greek languages, and of the Mathematical and Philosophical Sciences.

To say nothing of the advantages which young men derive from the discipline of a Classical education, at a period of life in which the powers of the mind require to be developed, guided and exercised, and in which habits of attention and application are most easily formed, how, it may be asked, is it possible for a student, ignorant of Latin and Greek, to profit by the perusal of a medical book, or to understand a medical lecture? The terms of the medical art have been almost all borrowed from these languages; and it seems impossible to understand properly their meaning, without possessing some knowledge of the sources from which they have been derived.

We cannot enter far into the consideration of the phenomena of the different Functions of the Animal Economy, the branch of medical knowledge which has been termed Physiology, without perceiving, that to understand, or to explain these Functions properly, besides a knowledge of Anatomy and Chemistry, there is required also an acquaintance with Mathematics and Natural Philosophy; for the different motions of the solid parts of the human body can no more be understood properly, without a knowledge of Mechanics, than the composition of these solids can be understood without the knowledge of Chemistry.

"When we inquire into this subject," as has been justly remarked by Dr John Gregory, "we find the human body a machine, constructed upon the most exact mechanical principles. In order, then, to understand its movements, we must be well acquainted with the principles of Mechanics. Considering the human body in another view, we find fluids of different kinds circulating through tubes of different diameters; and, therefore, find that the laws of their motions cannot be understood

without a previous knowledge of the principles of Hydraulies. In the same way, the eye appears to be a most admirable optic machine; and the phenomena of vision are found to be inexplicable, without a knowledgeof the principles of Optics. As the human body is surrounded with a heavy, elastic fluid, the Atmosphere, subject to various changes in respect of gravity, heat, moisture and other qualities, which greatly influence the human constitution, it is proper to be acquainted with the nature and properties of this Fluid, which requires a knowledge of the sciences of Pneumatics and Meteorology. It were easy to adduce," adds this elegant writer, "were it required, many more examples to show how absolutely necessary a knowledge of the various branches of Natural Philosophy is to the right understanding of the animal economy, both in its sound and morbid states." If these opinions of Dr Gregory are admitted to be just, it seems difficult to conceive why the study of Natural Philosophy should not be considered as equally indispensable to a Medical Education with that of Chemistry.

But besides the possession of a certain degree of knowledge of the Anatomical structure and Chemical composition of the human body,—of the uses of its different parts, and of the various organic functions which these parts perform—there is required also, on the part of the student and practitioner of medicine, an acquaintance with the Sensorial, Intellectual and Moral faculties with which man is endowed,—with the reciprocal influences of his corporeal and mental faculties upon one

* On the Duties and Qualifications of a Physician. p. 84. Edinb. 1788.

another,—and with the changes to which, in the progress of health and disease, these faculties are subject. But how, it may be asked, is this knowledge to be obtained, unless by the study of Logic and of Moral Philosophy?

Setting aside altogether the consideration of the beneficial effects which the study of these Sciences is calculated to produce upon the intellectual powers and moral character of those who engage in it, a knowledge of the Science of Mind, and of every thing which can influence the perceptive, intellectual and moral powers of man, becomes absolutely necessary to him whose duty it often is to judge of the existence of the derangements which so frequently take place in this part of the human constitution, from external injury, from disease, and from the states of fever and madness,—to describe their varieties,—and to conduct their treatment.

There is, if we may be permitted so to speak, an Anatomy, a Physiology, and a Pathology, of the mental as well as of the corporeal part of our frame, forming the branch of science usually denominated Metaphysics, the study of which seems to be indispensably necessary to a due knowledge of the Animal Economy. This important branch of science, requires to be studied by medical men in connection with the observation and investigation of the various physical and vital causes which influence the intellectual part of the human constitution.

It may be hoped, that "the time is come for placing Medicine on a level with the other sciences, and for determining with precision their mutual relations. Six tuated between physics and moral philosophy, it is of peculiar importance to discover, and to point out, with clearness and exactness, the true relations which it bears to each of these sciences. It must borrow the strict and precise language of the former, and the liberai, and, as it were, familiar tone of the latter. must take advantage of all that the intellectual philosophy has most rigorously established in its theories, and of all the delicate illustrations which its daily application to the sensitive frame suggests. In short, after having, by the sure methods of observation, experiment and reasoning, reduced its principles to a regular system, it will be necessary, that the improvements in its plan of instruction should form, for practice, minds at once profound, comprehensive, firm and pliant, who join to the light of a superior understanding, that knowledge of life and manners, and that facility of action, without which all the gifts of nature and of art are almost wholly useless. Happy combination, perhaps even indispensable, for preventing the practice of a science, of which the objects are so various and so delicate, from becoming a mere scourge of humanity*."

If the slight sketch which has been given of the nature of the preliminary branches of education, requisite for entering with advantage upon the study of Medicine, be just, it must be obvious that those who are destined

for the exercise of the medical profession, by whatever name they are afterwards to be denominated, whether that of Physician, Surgeon or Apothecary, should all receive the same kind of elementary and preparatory education; for it is this only that can enable them to acquire a proper knowledge of the different branches of medical science, that can ensure their mutual coloperation in the practice of their art, or qualify them to discharge, with full utility to the Public, the duties of any particular branch of medical practice to which they may afterwards be induced to devote their attention. The enforcement, therefore, by our Universities, and by the Colleges of Physicians and Surgeons, on those to whom they grant medical and surgical degrees and diplomas, of a due acquaintance with those branches of science which are universally acknowledged to be necessary to the study of Medicine, is the indispensable duty of these bodies, and appears to me to be the greatest reform which the present state of medical education admits of; to be the only proper barrier that can ever be raised by the Medical Profession, or which ought to be recognised by the Public, as forming a boundary between the regular and the irregular practitioners of Physic;-between Medicine practised as a learned and liberal profession, or followed as an ignoble, degraded and degrading art. The members of the Medical Profession, in order to be respectable, must evince, by their literary and scientific acquirements, that they are indeed worthy of the patronage of the Public, and of the privileges to which medical degrees and surgical diplomas are intended to give them

^{*} Cabanis' Revolutions of Medical Science, translated by Dr Henderson, p. 5, 6.

With regard to the Professional Education of Medical Practitioners, it is unnecessary, I conceive, to employ any arguments to convince you how much Society is interested in their possessing a thorough knowledge of all the different branches of Medicine, and consequently in the proper regulation of the Medical Schools in which this knowledge must be acquired. "The Practice of Medicine," it has been observed," " has long been nominally divided into two departments, Physic and Surgery. Physic is said to have for its object the treatment of internal, Surgery that of external diseases; and each of these departments of the healing art has been supposed to be the peculiar province of a distinct and differently educated practitioner. But though this is a distinction which has been often recognised in the practice of the medical profession, it must be confessed that the limits between Physic and Surgery are not very precisely marked, and that the respective functions of the Physician and Surgeon, long as those names have existed, are still but very inaccurately defined. The most superficial acquaintance with the symptoms, progress and termination of the various morbid affections to which the human body is liable, must be sufficient to convince every unprejudiced inquirer, that there is but a slight foundation, if indeed there be any, for this distinction, in the nature of the diseases which these practitioners are required to treat, or in the modes of treatment by which the diseases themselves may be cured or relieved. Experience has long shewn, not only that the use of internal remedies is required in a large pro-

portion of the diseases which are regarded as strictly chirurgical, but also that there are few diseases which come under the care of the Physician, in which morbid affections, requiring the manual aid or practical skill of the Surgeon, do not frequently occur."

"The importance therefore to Society, of every student of medicine being obliged to obtain, not only a general, but a minute, knowledge of Physic and Surgery, must appear obvious when we reflect how very small a proportion of those who are educated for the medical profession find it possible, in after-life, to devote their attention exclusively to one of these branches, and to forego the advantages which they reap from the practice of the other. It is in great cities only, that the distinction in the exercise of the medical profession, between Physician and Surgeon, has been, or can be, observed: and even in those cities where this distinction has prevailed in the highest degree, how small a portion of the community, it may be asked, has enjoyed the advantages supposed to be derived from this division of the healing art? The rich, it is true, may in all cases of danger, whether real or imaginary, add the attendance of the physician or surgeon to that of their ordinary medical guide, the apothecary: but the middling classes and the poor, who form the greatest body in every community, must either be contented to live and to die without the advice or assistance of those who practice physic and surgery as distinct professions, or betake themselves to some of the asylums or hospitals that are maintained at the public expence. A physician in a large city ought to be regarded as a practitioner, to

[·] Lectures on Inflammation, by Dr Thomson.

whom recourse is to be had in cases of difficulty and danger; but the proper education of this class of practitioners, and the necessity which exists for their having enjoyed opportunities of extensive practice, as well as having gone through a course of academical study, in order to qualify them properly for the duties of consultation, are points which do not seem to have been hitherto fully investigated by the medical profession, or rightly understood by the public."

" In small towns, on the contrary, and particularly in country villages, subdivision of labour in the medical profession is totally inadmissible. In these situations, the customs, convenience, and necessities of their patients do not admit of any distinctions among medical practitioners, which are not immediately derived from a real or fancied superiority of professional skill. But how extensive the practical information is which is required to qualify the village or country practitioner for the duties that he has to perform, will be obvious, when we reflect that he must undertake the cure of all the accidents and diseases to which men, women and children are liable, in the district in which he is to practise. It is this circumstance which renders it so desirable for the Public that every young medical practitioner should be well instructed in all the branches of practical Medicine and Surgery before he leaves College, and, in the commencement of his practice, placed for a time under the superintendance and direction of men older and more experienced than himself. Without the advantages to be derived from this mode of medical instruction, the young practitioner, when he first enters upon the practice of his profession, can supply the want of personal experience, only by the lessons which he obtains from the errors and mistakes he commits, at the hazard or even to the detriment of his patients."

"An arrangement of medical practitioners according to seniority, or implied experience, has long been advantageously followed in the practice of the Army and Navy; and accordingly, a general acquaintance with all the branches of practical medicine is very properly required of those who are educated for these two departments of the public service. In these departments, the distinction between Physician and Surgeon, though occasionally recognised in name, and in particular duty, has never been rigidly carried into effect; for in the Army and Navy of this, as well as of every other country with which I am acquainted, the Surgeons, together with their Assistants or Mates, have been the Physicians in ordinary, as well as the Apothecaries, of the men whose health and lives are intrusted to their care."

"Since, therefore, in the ordinary and general practice of Medicine, Physic never has been, and never can be, separated from Surgery, it seems but reasonable that those who, from the nature of their profession, and from the circumstances of the situations in which they may be placed, must practise Physic and Surgery together, should learn equally the rudiments of both arts. These arts have had the same origin, and they have the same end: The human body is the sphere of their exertions; and whatever can affect it, in matter, vitality or mind, is the object of their researches."

It is to be presumed, that besides providing for the better preliminary education of Students of Medicine attending the University of Edinburgh, the new Curricuhum will contain such alterations in the course of the medical studies to be followed, and recommend the institution of such additional Professorships as the present extended state of Medical Science may require. It is of great importance to the Public that you should inquire, whether a division of duties among the members of the Medical Faculty, made a century ago, is at all adapted to the wants and to the condition of the times in which we live; or calculated to comprehend, and to exhibit to Students, a view, sufficiently complete, of all the discoveries and improvements which have been made in the Theory or in the Practice of Physic, and in those collateral branches of Science, upon the progress of which the advancement of Medicine mainly depends?

The chief of these collateral branches are, undoubtedly, Natural Philosophy, Chemistry, Natural History, and Botany; and it is deserving of your consideration, whether in future these branches should form a separate Faculty of Natural knowledge, or be conjoined with that of Medicine? That the student of Medicine must derive as much benefit from the study of Natural Philosophy and of Natural History, as he possibly can do from that of Chemistry and of Botany, is a point which will I believe be contested by no one who is in any degree acquainted with the relations which these different sciences bear to Medicine.*

It may be deserving of your consideration, whether this may not be the proper time to introduce some changes into the constitution of the Faculty, strictly Medical? Whether, for example, the duties at present performed by the Professor of the Theory of Medicine, should not be assigned to two distinct Professors at least—Physiology to one, and Pathology to another? The discoveries which have been made, and which are daily making, in each of these branches of medicine, are of such extent and importance, as to render it quite impossible, it is conceived, for any Professor, whatever his talents and assiduity may be, to give a sufficient account of either of them, in a period shorter than that which is allotted to the courses of medical lectures in the University of Edinburgh.

It may be worthy of your consideration, also, whether Surgery, a branch of so great extent and importance, should not be taught by a distinct Professor, and that Professor a practical Surgeon?—whether lectures on Clinical Surgery be of less importance to the great majority of those who receive medical degrees in the University of Edinburgh, than lectures upon Clinical Medicine;—and whether the course of Medical Jurisprudence should not be added—as that of Midwifery has lately very properly been, to those Classes, an attendance upon which is necessary for graduation?

In judging of the preparatory and professional branches of knowledge which students should possess on whom medical degrees are conferred by your University, it may be proper for you to inquire into the regulations

^{*} See Boerhaave's " Methodus Studii Medici," Vol. I.

relative to Graduation, which have been adopted in other Schools of Medicine, particularly in those in which it has been lately attempted to adapt the Course of medical study to the present state of the Medical Sciences. I shall content myself simply with pointing out the Medical Schools of Austria and France to your notice.

In order to be admitted a Student of Medicine in an Austrian University, it is necessary that the candidate should produce certificates of his having studied for three years, in a Lyceum, the Latin and Greek languages, History, Mathematics, and Natural and Moral Philosophy*. The Course of Medical Study extends to five years, and comprehends lectures on the following Subjects:—

1st year.—Introduction to Medico-Chirurgical Study, and Natural History; Anatomy; and Botany.

2d year.—Physiology; and General Chemistry.

3d year.—General Pathology and Therapeutics; Midwifery; Materia Medica et Chirurgica; General and Special Pathology of external Diseases; Ophthalmology; and Demonstration of Surgical Instruments and Bandages.

4th year.—Special Therapeutics of Internal Diseases; Clinical Lectures on Internal Diseases; and Veterinary Medicine.

5th year.—Special Therapeutics of Internal Diseases; Clinical Lectures on Internal Diseases; Medical Jurisprudence; and Medical Police. In France, in conformity with the regulations lately established for the Schools of Medicine in that country*, no one can enter as a student in these schools without producing certificates of his being Bachelor of Letters and of the Sciences, to obtain which it is necessary for him to have studied, in the established colleges, Arithmetic and Geometry, Natural Philosophy, Chemistry and Natural History, Rhetoric and Philosophy, sophy.

The course of Medical Study is of four years duration, and comprehends the following branches, each of which is taught by a separate Professor.—

1st year.—Anatomy; Physiology; Chemistry; Medical Natural Philosophy; Botany; and Hygiene.

2d year.—Anatomy; Physiology; External Pathology; Hygiene; Operative Medicine; and Pharmacy.

3d year.—Operative Medicine; External Pathology; Internal Pathology; Clinical Medicine; Clinical Surgery; Therapeutics; and Materia Medica.

4th year.—Clinical Medicine; Clinical Surgery; Internal Pathology; Legal Medicine; Therapeutics; and Midwifery.

Whether any of the reforms which have been made in the preparatory or in the professional education of the Graduates in Austria and France shall appear to

[•] Quarterly Journal of Foreign Medicine and Surgery, vol. i. p. 36.

^{*} See the " Code des Médecins, Chirurgiens et Pharmaciens, &c. par J. P. Beullac. Paris, 1823.

you as proper to be introduced into the new Medical Curriculum for the University of Edinburgh, is a matter which must be left entirely to your consideration. But of one thing you may be assured, that, in the present increasing taste for improvement in literary, scientific and professional education which every where prevails, and which at this moment pervades even the working classes of society in Scotland-if it shall appear to the Public that you have declined to introduce the necessary reforms into the Medical Education of your University, these reforms will be attempted by private individuals, countenanced, it is to be hoped, by the Colleges of Physic and Surgery in this place, whose bounden duty it is to provide for the proper education of those who are bred to the medical profession; and to encourage, by all the means in their power, every attempt which is made to extend and to improve this education.

In this country, you have long had before you an example, in another learned profession, of the advantages to be derived, from a preparatory education, in the qualifications which are required of those who are permitted to enter upon the study of Divinity in the different Universities of Scotland. It cannot but be considered as in the highest degree creditable to the Clergy of this country, that, though those who devote themselves to this vocation, neither are from a more wealthy class of society, nor have the prospect of greater emoluments than the members of the other two learned professions, their preparatory education con-

sists of four years regular attendance on a University, and comprehends almost all those branches of know-ledge, the necessity of which, in a regular medical education, it is the object of this letter to point out and inculcate. That a similar course of preparatory education should not hitherto have been required of those who enter upon the study of Law or Physic, is a great misfortune to these professions, and the want of it the chief source, perhaps, of whatever has been illiberal, sordid, ignorant or mischievous in the practice of them.

The Schools of Medicine, and the Colleges of Physic and Surgery, which at present exist in Great Britain and Ireland, exhibit many curious anomalies and contradictions in their Statutes and Practices. Indeed, the examination of the different constitutions of these Corporate. Bodies is sufficient to shew that they have not been formed upon any general' principles or enlarged views of public utility, but that monopoly, or privilege of some sort or other, has always been a main object of their establishment. Their Bye-laws and Statutes have often, it is true, a relation to the practice of the art or trade of Physic, but very little, comparatively, to the promotion of the Science of Medicine, or to the literary, scientific and philosophical Education of those who are to practise it as an art. Some of our Universities claim the right of conferring the highest honours or degrees in medicine, without affording, by any of their institutions, the means of instruction, either in the Theory or in the Practice of Medicine; and our Medical Schools, without, I believe, a single exception,

admit to their lectures all who present themselves, without requiring of them any proofs of their having received a previous literary or scientific education. The Medical Faculty in the University of Edinburgh has hitherto presented a most singular anomaly; for though appearing to be a branch of a literary, scientific and philosophical University, yet it has never required from those on whom it has conferred the degree of Doctor of Medicine, any certificates of qualification, besides attendance upon medical classes in some University; and though itself strictly a Medical School, it has not hitherto admitted the efficacy of any medical instruction which has not been received within the walls of a University. Who could believe, that the lectures which are given in the different Medical Schools of London, for example, have hitherto been of no avail in qualifying a student to receive the honour of a medical degree from the University of Edinburgh? while Courses of lectures on any branch of Medicine, delivered in the Universities of Aberdeen, or St. Andrews, or in any other University at home or abroad, have been held, by the statutes of the Medical Faculty of Edinburgh, to be, in the ceremony of graduation, equivalent in value to their own. Indeed, the members of the Medical Faculty seem hitherto to have forgotten that it is the possession of a sufficient stock of preparatory and of professional knowledge on the part of those who receive Degrees and Diplomas in which the Public is interested, and of very little consequence to it in what Schools this knowledge has been obtained.

In concluding this letter, the writer has only to add, that the opinions which it contains, though hurriedly

put together, are not the hasty suggestions of the moment, but the deliberate result of much observation and reflection on the education of medical men,-on the duties which they have to perform to the Public,-and on the nature and grounds of the distinctions which ought to exist among them. They come from one, who, sensible of the defects of his own education, is very desirous to promote that of the rising members of the medical profession-from one who is no novice in the art which he practises, but who has passed through the several gradations of Surgeon's apprentice; Apothecary's assistant, Surgeon's and Physician's clerk in a public Hospital; Surgeon-apothecary, or Family practitioner; Doctor of Medicine; -and who, by the favour of his medical Brethren, and by the patronage of the Public, is at length a Consulting Physician. They come from one, who, were he a member of the Senatus Academicus, should, on an occasion such as the present, feel it to be his duty to express these opinions orally in his place, as he conceives it to be a duty which he owes to the Public to express them in this manner to You.

With every good wish for the increasing reputation and prosperity of the University of Edinburgh, and for the continuance of the usefulness of its Medical School, he has the honor to subscribe himself,

GENTLEMEN,

Your most obedient humble Servant.

A GRADUATE OF KING'S COLLEGE, ABERDEEN.

REMARKS

ON THE

UTILITY AND IMPORTANCE

CLINICAL LECTURES

ON

SURGERY.

ADDRESSED TO THE

PRESIDENTS AND FELLOWS

OF THE

Royal College of Surgeons of Edinburgh.

BY JAMES RUSSELL,

FELLOW OF THE ROYAL COLLEGE OF SURGEONS, EDINEURGH;
PROFESSOR OF CLINICAL SURGERY IN THE UNIVERSITY, EDINBURGH; VICE-PRESIDENT OF THE ROYAL SOCIETY, EDINBURGH; AND PRESIDENT OF THE MEDICO CHIRURGICAL SOCIETY, EDINBURGH.

> EDINBURGH. PRINTED BY J. & C. MUIRHEAD. 1824.

REMARKS, &c.

EVERY one conversant with the actual state of Medical Practice knows the impossibility of separating the practice of a Physician from that of a Surgeon, with any great degree of exactness; so that no one can reasonably entertain hopes of becoming a successful practitioner, who confines his studies exclusively to one department of the profession. A Physician, therefore, requires to possess a competent knowledge of Surgery to enable him to treat a numerous class of cases in a judicious manner. If he is deficient in this branch of knowledge, he will be often embarrassed with cases which should not have occasioned him any particular difficulty to understand; and may, when too late, have reason to regret his improvidence, in not having laid a more extensive foundation of knowledge during the progress of his education. I have witnessed several instances of this kind of embarrassment in the course of my own experience, and I have heard of and have read of many more. I have, therefore, no hesitation in pronouncing a competent knowledge of Surgery to be an indispensible requisite in forming the character of an accomplished Physician. In this opinion I am supported by the concurring testimony of every Physician of experience, and judgment

with whom I have conversed upon the subject.* There is one fact, indeed, which alone is, in myopinion, so conclusive, as completely to decide the question. I refer to an existing regulation of the Army Medical Board, which interdicts any person from being promoted to the situation of Physician to the Forces unless he had for some years served in the capacity of a Regimental Surgeon. This regulation was enacted, in consequence of the extreme inconvenience which had been experienced from appointing Gentlemen ignorant of Surgery to be Physicians to the

Supported by such authority. I am well war-ranted to recommend the study of Surgery to the attention of all those who aspire to become distinguished members of the Medical Profession. Upon this point, as I have considered it often and thoroughly, I deliver my opinion with confidence. I farther know the advantage which results to a Student from commencing the study of Surgery at an early period of his education, from the circumstance of the symptoms of Surgical cases being obvious to the senses, simple, and easily understood. Upon these accounts, they can be followed through their whole progress with certainty and case. The idea which the Student forms of their character is distinct and forcible, and consequently long and clearly remembered. He, therefore, has a certain prospect of making rapid and sure progress in his studies, when he begins his Medical education with the study of Surgery.

A Student, by thus studying the appearance of disease in local external affections, is acquiring an accurate knowledge of the fundamental principles of

diseased action, which may be easily transferred to explain the nature of similar morbid affections of the internal parts. Many internal and external diseases are perfectly alike in character. Inflammation, abscesses, swelled glands, and various other cases of daily occurrence in practice, afford instances of this identity. The benefit, therefore, which a young man derives from following this progress in the study

of diseases, is incalculably great.

The superiority of Clinical Lectures, as an advantageous method of conveying practical instruction, is most conspicuous in Surgery, on account of the obvious nature of the symptoms. A Student, who is diligent in his attendance upon a ward of Surgical patients, vigilant in watching the progress of the cases, attentive to the Lectures of the Professor, and careful to compare what he hears with what he observes, is certain to derive much real practical improvement from employing his time in this manner. This profitable employment of time is, besides, attended with the farther advantage of affording the nearest approximation to actual practice which a Student can enjoy: For having the nature of the case and principles of the practice explained to him, the different reports and prescriptions communicated to him, and their effect upon the patient open to his observation, he has strong inducements to exert his own faculties in judging of the result. And as all his improvement is connected with his own personal exertions, with his activity, industry, and accuracy of observation, he is daily acquiring habits of infinite value in preparing him to enter upon practice with great advantage: for nothing is more important in the education of a young man, who is destined for a practical profession, than, early in life,

^{*} See Appendix.

when his mind is flexible, to initiate him in those habits of observation, activity, and exertion, which are indispensible to his success, and which are so difficult to acquire at a more advanced age. Practical habits, too, together with immediate personal intercourse with the sick, prove the best corrective to that unfortunate tendency to speculation, in which young men are too apt to indulge who obtain all their knowledge of Medicine within the walls of a University. An early introduction to Clinical Surgery is, therefore, a most desirable arrangement in regulating the course of a young man's studies; for every one at all acquainted with the subject, will admit, that a ward containing Surgical patients may, with less previous knowledge, be attended advantageously, than when the patients are labouring under diseases of a more obscure and complicated nature.

Strongly impressed with the importance of promoting this mode of studying Surgery, I began to deliver a course of Clinical Lectures, upon the practice of Surgery, at the Royal Infirmary, in the month of November 1786, and I have ever since, now nearly forty years, continued to deliver one or two courses annually. The success of the experiment, and the growing estimation of the course, mark sufficiently the public opinion of the undertaking. The Royal College of Surgeons took the class under their protection, after I had lectured for fifteen years. About the same time the Senatus Academicus recommended the class to the favour of his Majesty. After the lapse of nearly fifteen years more, the Managers of the Royal Infirmary, with the additional experience of fifteen years to assist their judgment, made Clinieal Lectures on Surgery an essential part of the surgical department And the Students mark their

approbation of those measures by honouring me with a very respectable attendance. During a twelve-month from this date, including both winter and summer sessions, between 170 and 180 Students have attended Clinical Surgery. The class, therefore, is now in a very flourishing condition. And as its prosperity depends upon the intrinsic merit of the establishment, there is every encouragement to expect that it will continue to prosper so long as the University shall flourish, and Edinburgh be a distinguished School of Medicine.

" In a printed paper, entitled, Argument, &c. " the original form under which the above remarks " were distributed among the Members of the Se-" natus Academicus, a passage was introduced at " this place, which gave a general account of the " discussions in the Senatus respecting the class of " Clinical Surgery; including an account of the ob-" jections urged against admitting the class into " the new Medical Curriculum, together with my " answers to the said objections. All this passage " is now suppressed, out of delicacy to my colleagues, " many of whom dislike to have the private discus-" sions of the Senatus made known beyond the walls " of the University. This omission, however, will " not, I trust, prove of any disservice to the cause " of Clinical Surgery, since the objections, in my opinion, do not rest upon a firm foundation; while " the full exposition which I have given of the advan-" tages attached to Clinical instruction in Surgery, " confirmed by the testimony of several most re-" spectable and eminent practitioners, whose letters " appear in the Appendix, will convince every per" son of an enlightened understanding, who thinks deliberately on the subject, of the justice and expediency of giving substantial support and encouragement to the class of Clinical Surgery.

" I cannot here, in justice to the Royal College " of Surgeons, pass over in silence the very noble " and dignified conduct of that respectable public " body, at the time the proposal to establish a Pro-" fessorship of Clinical Surgery was first suggested. " The College was then agitated by two contending " parties, nearly equal in numbers, who opposed " each other with much keenness. Yet, notwith-" standing the keenness of the opposition, and the " deep interest which the individual Members took " in the party questions, they at once suspended all " their differences the moment a proposal was made " to establish a Chair in the University for Clini-" cal Surgery, unanimously concurring to promote " the establishment by every means in their power, " and acting together with perfect cordiality and " kindness during the continuance of the transac-" tion; thus affording a memorable and rare ex-" ample of a set of men deeply involved in faction, " yet, greatly to their honour, and superior to every party prejudice, sacrificing all their private feel-" ings to the public good."

I have now brought the whole business relating to the class of Clinical Surgery under the review of the Senatus Academicus, with a fullness of detail, which will enable every one to form a decided opinion upon the merits of the question. I have stated the utility of the knowledge of Surgery to the practical Physician, and pointed out the advantages

which Clinical Lectures possess in conveying useful instruction in the practice of Surgery. I have likewise brought forward all the arguments urged against the proposed arrangement, accompanied, I trust, with a satisfactory answer to every one of them. If I have the good fortune to succeed in the attempt, I shall feel much gratified in having been the instrument of conferring a benefit upon the profession of medicine. If, on the contrary, I shall be disappointed of my object, I shall still have the consolation to reflect, with much satisfaction, on having done my duty to the Chair which I have the honour to hold in the University, to the profession of medicine, and to the public at large. The result of this business is a matter of indifference to me as an individual; since, at my advanced time of life, a few years will soon put an end to my labours as a public teacher. I already divide the duties of my office with another practitioner, who shares in the emoluments. The effect of an arrangement, the operation of which does not commence for several years, cannot affect one who is gradually retiring from the scenes of active life. Neither my reputation, nor my fortune, nor my rank in society, can be influenced by the vote which the Senatus Academicus gives on this occasion. There are no motives of self-interest prompting me to exert my endeavours to promote the proposed arrangement; and I most sincerely hope, that every one who is to vote on this occasion, will divest himself from all feelings of prejudice and prepossession as completely as I am at this moment. My sole wish is, that the measure most advantageous to the public may ultimately be adopted.

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APPENDIX.

ALTHOUGH I do not entertain any doubt concerning the soundness of the argument relative to the arrangements for the class of Clinical Surgery, I did not choose to trust solely to my own judgment in a matter of so great importance. I therefore requested some of the most eminent Physicians of Edinburgh and Leith to favour me with their opinion on the subject. They readily complied with the request; and I now flatter myself, that whoever reads their letters to me with attention, will be satisfied that I am completely borne out in every thing that I have advanced in the Argument.

LETTER-Dr. James Hamilton, Senior, to Professor Russell.

My Dear Sir,

In reply to your's of this morning, I have no hesitation in saying, that I consider a competent knowledge of Anatomy, and of the general principles of Surgery, to be an indispensible acquirement of the Medical Practitioner.

Permit me to add, that from my connexion with you in the Reyal Infirmary of this place, I had an opportunity of witnessing your early essays as a Lecturer, and have since observed the assiduity and attention with which, to the advantage of your hearers, and to the improvement of your profession, you have conducted many successive courses of Clinical Surgery. This testimony on my part is due to your various merits; to have withheld it would have been unjust.

I am,

My DEAR SIR,
Your's very sincerely.

Your's very sincerely.
J. HAMILTON.

EDINBURGH, 22, St. Andrew's Square, 5th November, 1824. To Professor Russell. LETTER-Dr. John Barclay to Professor Russell.

Friday Morning

The following letter, from unavoidable necessity, was written in a hurry.—J. B.

My DEAR SIR.

In answer to your questions, Whether I consider a competent knowledge of Surgery requisite to form the character of an accomplished Physician? and, secondly, How far I regard Clinical Lectures to be an advantageous method of conveying practical instruction? With respect to the first question, there are some phrases which to me seem rather indefinite. There are different deserge of surgical knowledge, but I began not which of some phrases which to me seem rather indefinite. There are dif-ferent degrees of surgical knowledge, but I know not which of these is meant by a competent degree, unless a diploma from a College of Surgeons constitutes them competent; nor do I know what is meant by an accomplished Physician, unless the title of an M. D., legally conferred by a University, render him accom-plished, and entitle him to take as large a fee as any other M. D. whatever be his education, learning, or merit.

whatever be his education, learning, or merit.

With respect to the general question, Whether or not a know With respect to the general question, Whether or not a knowledge of Surgery be necessary for a medical practitioner? I
most decidedly answer, Yes; and may add, that I never yet
found a satisfactory reason why the practice of Surgery and the
practice of Medicine were separated, and not even the shadow of
a reason, excepting this, that Surgeons or Chirurgeons, implying
in the Greek language those persons who live by the labour of
their hand, were considered as of an inferior cast to those who
were not reduced to the necessity of manual labour. From these
foolish and absurd ideas, the corporate bodies of Surgeons in
many countries, and particularly in this, are still, at least in the
eye of law, ranked as tradesume, and the Physicians as gentlemen. Another absurd distinction is, it is not education, learning, or liberality of sentiment, that are now thought to constitute ing, or liberality of sentiment, that are now thought to constit gentlemen, but money or wealth, however acquired. In t gentlemen, but money or wealth, however acquired. In this sense, many Surgeons are not only as good, but even better gentlemen than the generality of Physicians. In point of education and opportunities of acquiring knowledge, both in this country are upon a par; while the studies of the Surgeon are equally important, much better defined, and better understood than those of the Physician. Hence learned Physicians, being left to conjecture about the nature of internal diseases, and about the remedies to be prescribed, have given rise to the common observation that Doctors will differ, and to the fact, that the

skill and prescriptions of ignorant persons and old women are not unfrequently preferred to theirs, but seldom consulted about the mode of performing a difficult surgical operation. I would the mode of performing a difficult surgical operation. I would therefore conclude, that not only is Surgery more important than what is commonly called Physic, but Clinical Lectures upon Surgery much more important than those upon Physic, where so very much is left to conjecture, not only with respect to the causes of disease, but with respect to the relation between them and their symptoms; and hence the frequency of morbid dissections, to ascertain facts, to remove doubts, and establish the truth. tablish the truth.

I am,
With much respect and esteem, My Dear Sir, Your's always, JOHN BARCLAY.

LETTER-Dr John Thomson, late Professor of Military Surgery in the University, to Professor Russell.

My DEAR SIR,

5 George Street, Edinburgh, 10th November 1824.

My Dran Sin, 10th November 1824.

In answer to your letter of last evening, requesting my opinion respecting "the best plan of education for young men breeding for the profession of Medicine," I beg leave to state, that I have been accustomed to consider this education in two points of view,—that which is preparatory, and that which is strictly professional. With regard to the preparatory education, all, I believe, who are acquainted with the science of Medicine agree in thinking, that it ought to consist in the acquisition of a competent knowledge of the Latin and Greek languages,—of the elementary parts of Mathematics and Netu. quisition of a competent knowledge of the Latin and Greek languages,—of the elementary parts of Mathematics and Natu-ral Philosophy,—and of that branch of Philosophy which treats of the Faculties of the Human Mind, and of their proper em-ployment in the investigation and communication of truth, But on these points I need not dilate; for, in the circle of my acquaintances, I know no one better qualified than yourself to appreciate the advantages which young men, in beginning the study of Medicine, would derive from the possession of a

competent knowledge of these branches.

With regard to the professional education of Medical Men, I believe that all who have considered this subject attentively, and without prejudice, will allow that it should commence in the study of Anatomy and Chemistry, branches the practical

and useful knowledge of which can be acquired only in the Disand useful knowledge of which can be acquired only in the Dissecting room and in the Laboratory. A knowledge of these sciences will, in some measure, prepare the mind of the Student for entering with advantage on the study of the functions of the human body in the state of health,—of the derangements to which these functions are liable in diseases,—and of the general means to be employed in preventing, alleviating, and curing these derangements,—branches of medical knowledge which form the Institutions or Theory of Medicine. With the study of the Theory of Medicine that of Natural History and of Botany is very closely allied, and would, in my opinion, be very advantageously associated.

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Without this previous course of professional instruction, a Student can be but very imperfectly prepared for entering upon the study of particular diseases, and of the various remedies to

be employed in their treatment.

In order to derive advantage from attendance upon courses of lectures on the Practice of Physic and Surgery, and on Materia Medica, the student would require either to enjoy, or to have previously enjoyed, opportunities of observing diseases in private practice,—in Dispensaries for the sick,—or in Public Hospitals,—for, without the actual observation of diseases, it appears to me to be absolutely impossible for him to form any accurate notions of the morbid phenomena which he hears described, or of the uses and effects of remedies.

Of the general means hitherto employed to communicate useful information to those engaged in the study of the medical profession, I know of none which, in point of importance, can be at all compared to Clinical Courses of Lectures on Physic and Surgery, where Students are directed in their ob-servation of diseases, and of the effects of remedies, by able and skilful practitioners.

To those who are to be engaged in the general practice of Medicine, no branch of knowledge is more necessary, and re-quires to be more assiduously cultivated, than that which relates to the proper management of women in the states of pregnancy and parturition, and to the diseases to which they and children are liable.

The variety of occasions on which medical men are called to give evidence in Courts of Justice, renders a certain degree of knowledge of those matters which are likely to become subjects of judicial investigation, necessary to every medical practitioner, since ignorance of, and errors in, these matters, may injure the cause of humanity, or frustrate the ends of justice, and must tend

to degrade the profession in the eyes of the public. Accordingly, I regard the study of Medical Police, or Legal Medicine, as it has been termed, as forming an essential part of medical edu-cation. In short, I cannot consider any Course of Medical Education as complete, or as deserving the approbation of the Public, which does not comprehend all the branches of preparatory and professional education which I have enumerated in this letter.

You do me but justice in believing, that I take a warm in-terest in whatever relates to the proper education of medical men; and it gives me a most sincere pleasure to find, that, at your advanced period of life, and after having so long enjoyed all the honours and emoluments of the profession, you are engaged in endeavouring to extend and improve the education of those who are to succeed us. Whatever degree of success may gaged in endeavouring to extend and improve the education of those who are to succeed us. Whatever degree of success may attend your present efforts, it must always be to you a source of much satisfaction to reflect, that, by your steady and con-tinued labours, Clinical Surgery has been added to the studies required in the education of those who obtain diplomas from the Colleges of Surgery in these kingdoms; and that you have been the means of founding, in the University of Edinburgh, a Professorship for teaching a branch of medical education, which must sooner or later be recognised by the Patrons and Profesmust sooner or later be recognised by the Patrons and Professors of that Institution, as it is universally regarded by the Medical Public, as indispensible to those who are to practice Physic.

I remain,

My DEAR SIR,

With much regard and esteem, Your's very truly, JOHN THOMSON, M. D.

James Russell, Esq. Professor of Clinical Surgery in the University of Edinburgh.

LETTER-Dr. DAVIDSON to Professor RUSSELL.

MY DEAR SIR,

As I have no doubt upon the subject, I return an almost immediate answer to your question, "Whether or not a com-"petent knowledge of Medical Surgery should be possessed by "every practising Physician?"

Judging from my own experience, and more particularly from my own deficiencies, I cannot help concluding, that a

Physician, for the sake of his patients, and for his own satisfaction, should have such a knowledge of Clinical Surgery as to enable him to regulate the treatment of affections, either original or intercurrent (glandular swellings, inflammation of absorbents, extensive abscesses, &c.), not strictly medical:—That he may know, at the proper time, when medicine requires the assistance of Surgery (in general-his constraints). quires the assistance of Surgery (in cynanche, laryngitis, effusions into the chest, abdomen, &c.); cases in which the hesitation of ignorance is often fatal to the patient. Many additation of ignorance is often man to the patient, stany sena-tional arguments might be advanced in support of the opinion which I now venture to give you, but so convinced am I of its self-apparent correctness, that I do not wish to trouble you by entering farther into particulars. In giving my advice to a medical Student yesterday, I impressed him strongly with the necessity of devoting part of his time to the study of Surgery; and recommended an attendance of, at least six months, in the Surgical Wards of the Royal Infirmary, and on the Clinical Lecturers, who explain the nature and restricted the control of the control of the control of the Royal Infirmary, and on the Clinical Lecturers, who explain the nature and restricted the control of the Royal Infirmary. Lecturers, who explain the nature and treatment of the cases which occur in that department of the hospital.

I remain

My DEAR SIR, Your's very truly,
J. H. DAVIDSON.

28, YORK PLACE. }

LETTER-Dr. Kennedy to Professor Russell.

My DEAR SIR,

EDINBURGH, 10th Nov. 1894

My Dear Sir,

I now sit down to reply to the query, which you did me the honour, verbally, to refer to my judgment two nights ago, viz. Whether instruction in the department of Surgery was, in my opinion, necessary to the education of a Physician?

To put this query generally, would only be to ask, whether every man ought not, as far as possible, to be instructed, and even versant in every branch of the profession to which he belongs? To state it in such terms, removes all doubt as to the nature of the answer. In fact, emergencies must often arise, wherein a Physician, incorrent of this branch of the healings. wherein a Physician, ignorant of this branch of the healing art, could be of no use whatever.

I am even disposed, and I think upon very solid grounds, to go one step farther, and to say, that those medical men who have most distinguished themselves as general practitioners, and

particularly in the province of Surgery, are of all others most likely to make expert Physicians. Discernment, promptitude, and facility of prescription, are the rewards of a practice, not

limited exclusively to any one branch of the profession.

It may perhaps add some weight to the opinion which I have above given, to say, that it is founded upon the experience of an active and diversified medical life, of not less than forty years' standing.

I have the honour to remain,

Your's very sincerely, ALEXR. KENNEDY, M. D.

To James Russell, Esq.

LETTER-Dr. ABERCROMBY to Professor Russell.

My DEAR SIR,

York Place, 12th Nov. 1824.

I regret that I have been so long prevented from replying to the queries which you have done me the honour of proposing to me,—and that I now must do it very briefly. Allow me to add, that I never should have presumed to obtrude my opinion on the important subject at present under consideration in the University, had it not been expressly requested by yourself, and by several other members of the Senatus Academicus.

by several other members of the Senatus Academicus.

In making a complete revisal of the Curriculum of medical study, it appears to me that the improvement which is chiefly wanted, and by which the Senatus may contribute in a most essential manner to raise the character of the medical profession, is, some provision for securing a liberal and extensive previous education in literature and science:—such an education as shall enable the Student to commence his medical Studies with a mind well stored with scientific knowledge,—and, in particular, with well stored with scientific knowledge,—and, in particular, with a mind well trained to habits of correct reasoning, and philosophical inquiry. The branches most likely to contribute to this purpose, appear to be the Greek and Latin languages, Mathematics, Moral Philosophy, and Logic, Natural Philosophy, and Natural History. I am well aware of the difficulties that would attend such an alteration in the statuta as this would require; but I think there are various ways by which the difficulties might be overcome, and there can be little doubt that the result would be, both to elevate the character of the medical profession. would be, both to elevate the character of the medical profession. and to raise the value of the Edinburgh degree, which is already so highly, and so deservedly esteemed.

In regard to the various branches of medical science, it is difficult to say which of them can with propriety be dispensed with. In particular, I have no hesitation in saying, that, in the present state of medical practice, it is necessary for a physician to be correctly acquainted with Surgery in all its departments, except the mere practice of operation; and farther, it does appear worthy of serious consideration, whether all the branches of medical and surgical science, which are bona fide taught in the University, ought not to be included in the Curriculum, or, at least, to be strongly and decidedly recommended to the attention of the Student. The utmost extent of knowledge that he can acquire from all of them, he will find to be scanty enough, when he comes to the extensive exercise of a profession, in which the responsibility is so tremendous, while, at the same time, new difficulties will meet him at every step; and the result of his most zealous researches will only lead him more and more to lament the imperfection of the art itself, and the deficiencies of his personal knowledge.

I am,

My Dear Sir,

Most sincerely your's,

JOHN ABERCROMBIE.

To Professor Russell.

LETTER-DR. KELLIE to PROFESSOR RUSSELL.

My Dear Sir, Leith, 11th Nov. 1824.

The points on which you have done me the honour to solicit my opinion have not overtaken me unprepared. For manyyears past my attention has necessarily been much directed to the subject of medical education, having, in common with most of the practitioners in this part of the kingdom, had constantly to superintend the studies of Pupils destined for the different departments of our profession.

My professional principles, if I may so speak, are perhaps somewhat more aristocratic than those of many of my friends. I am convinced that where the numbers and the wealth of any given population admit of the necessary division of labour, Medicine and Surgery should be kept as distinct and separate as possible; I shall found no argument, therefore, on the more frequent necessity of the union of both professions in the same individual, nor on the debateable and common or neutral grounds

which form the confines of Medicine and Surgery-however conclusive such arguments may be. I shall consider your questions as bearing solely[on him who is to be educated exclusively to Meas bearing solely on him who is to be caucated exclusively to Medicine, without the prospect of ever interfering with the practice of Surgery, though in this country such a case be a rare one. Even in this extreme case, however, I regard "a competent "knowledge of Surgery to be not only a requisite qualification to form an accomplished practical Physician,"—but, next to Anatomy, I have long been led, from much observation and reflection to consider a clinical or practical knowledge of the printion, to consider a clinical or practical knowledge of the principles of Surgery as one of the most important elements of a regular medical education, and, indeed, as the very ground-work of pathological science. I could say much on this most important subject, but to you a very few hints will suffice to enable you to comprehend my meaning. It is in the observation and study of those external diseases which belong to the province of Surgery, that the various morbid and curative processes, on which are founded the sciences of pathology and therapeutics, can best be explained and demonstrated to the young Physician. The Be expanied and the student, for example, who has opportunities of becoming practically acquainted with the phenomena and management of wounds—whose attention is directed to the slight inflammation, the adhesion, and speedy reunion in one case,-to the increased pain, throbbing, heat, redness, and tension, and to the consepain, throbbing, heat, redness, and tension, and to the consequent suppurations, abscesses, and sinuses in another,—to the ulcerations, gleetings, fungosities, and calosities in a third,—to the gangrenes and sloughings in a fourth,—and to the varieties of symptomatic fever in all, must acquire a knowledge of the doctrines and pathology of inflammation, more precise and intimate than can be obtained from any other source with which I am acquainted. The surgical study of anieurism is in like manner necessary to the right apprehension of the diseases of the heart and vascular system within the three internal cavities of the body, and of many therefore of the most obscure and important diseases and of many therefore of the most obscure and important diseases which fall to the care of the Physician; while the Clinical observation of the structure, characters, and progress of external tumors is admirably calculated to illustrate the history of many tumors is admirably calculated to illustrate the history of many analogous and more obscure diseases of internal organs. It were easy to multiply examples of this kind. The greater number of surgical diseases being obvious to the sight and other senses, the Clinical Teacher has in them the means of directing the Student's attention to the whole series and progression of those morbid actions and changes, which are secretly and in the dark going on in internal diseases, the termination of which the Physician has sometimes the means of demonstrating to his Pupil only after the patient's death. I regard Clinical Lectures, therefore, not only "to be a useful mode of "conveying practical instruction in Surgery;" but I consider such Lectures as you have for many years past delivered in this great Medical School, to be of infinite importance even to the Medical Student, and calculated to convey to him many illustrations and much practical knowledge of the pathology of internal diseases, which he will in vain look for elsewhere. From my heart, I wish you every success in your present laudable enterprise; as I can conceive few greater improvements in the mere medical education of our future graduates than the introduction of the Clinical Lectures on Surgery into the Curriculum of the University. of the University.

I am,
My DEAR SIR,
Your's most truly,
GEORGE KELLIE.

