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Contributors

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183 Euston Road
London NW1 2BE UK
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E library@wellcomecollection.org
<https://wellcomecollection.org>

CASES OF
SYMMETRICALLY-PLACED OPACITIES
OF THE CORNEÆ,
OCCURRING IN MOTHER AND SON.

BY

CHARLES A. OLIVER, M. D.,

ATTENDING SURGEON TO WILLS' EYE HOSPITAL, OPHTHALMIC SURGEON TO THE
PRESBYTERIAN HOSPITAL, PHILADELPHIA, ETC.

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SYMMETRICALLY - PLACED OPACITIES OF THE
CORNEÆ, OCCURRING IN MOTHER AND
SON.*

BY CHARLES A. OLIVER, M. D.,

*Attending Surgeon to Wills' Eye Hospital, Ophthalmic Surgeon to the
Presbyterian Hospital, Philadelphia, etc.*

On the 23rd February, 1891, a sturdy-looking boy, eight years old, the son of German parents, applied at Wills' Eye Hospital for the removal from both eyes of what the physician who sent him supposed to be cataract.

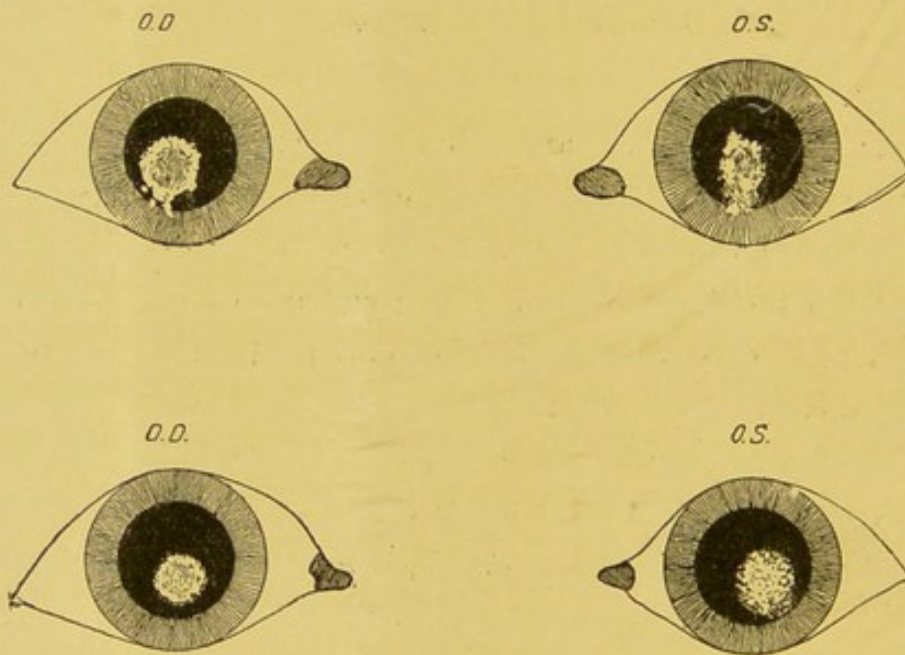
The opacities, which had been noticed for a long time, had gradually increased in size and density, until one year previously, when, after an attack of malarial fever (the only illness that the child had ever had), they seemingly enlarged and became just as they are now, very conspicuous. At no time were the eyes ever red, irritable, or inflamed.

The upper incisors were normal in appearance, and the boy failed to present any of the facial or general characteristics of inherited syphilis. With two dioptries of hypermetropia and a slight degree of astigmatism in each eye, uncorrected vision was reduced to $\frac{1}{4}$, and the accommodative power was limited to eleven dioptries, while, with the exception of an esophoria of two degrees, no extra-ocular muscle disturbance was observable. The pupils were three millimetres in their horizontal meridians, and the irides were freely and equally mobile to light stimulus, accommodation, and convergence. The corneæ presented

* Read before the American Ophthalmological Society, July, 1892.

the dense superficial and deep opacities so noticeable in the accompanying sketches, which were kindly made for me by Dr. B. Alexander Randall.

Careful examination of these drawings will at once make it evident that in each instance there is a deeper and more compact central area which is surrounded by an annulus or ring of superficial pin-dotted opacities, that of the left eye being the larger and the slightly more peripherally



The upper figures represent the appearances presented by the eyes of the mother, the lower those of the son. The pupils are represented as dilated, in order to give the configuration of the opacities against a dark background as clearly as possible.

situated. Not a trace of inflammatory vascularity could be seen. The eyegrounds, which were plainly visible, and were most carefully explored, failed to reveal any gross changes.

Although physical examination gave no evidence of any organic disturbance, alteratives and local treatment were experimentally and persistently tried; yet up to the present time, nearly sixteen months after the first visit,

no perceptible change in appearance of the corneal spots is evident.

During the first weeks of the study of this case it was thought advisable to examine the mother, who was a widow, and her other child, a daughter of fifteen years of age.

The sister of the patient failed to exhibit any ocular abnormality, except a minor degree of simple hypermetropic astigmatism.

The mother, however, a seemingly healthy woman of forty-five years of age, without any apparent organic lesion or history of pronounced illness, stated that she had had, as long as she could remember, a difficulty with her eyes, which was apparently similar to that of her son. Completely free from any evidences of other gross ocular lesion, her corneæ presented the peculiarly circumscribed deep and superficial opacities shown in the upper part of the sketch, they being more irregular in outline, and their central portions much fainter, than those of her son.

The apparent heredity in the two cases is almost certain, when we consider that here we have a seemingly healthy woman with long-standing peculiarly-localised and symmetrically-placed opacities of the corneæ, who, although having a daughter as yet unaffected, has her ocular infirmity directly repeated in an otherwise healthy son; a similarity in two of the most impressionable of blood relations—mother and son—in whom, in spite of all attempts at solving the problem by the most scrutinising search into family and personal history, the most careful general and local examination, and the most persistent and prolonged antidyscratic treatment, I have so far entirely failed to find any clue as to the true meaning.

