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*For the Medical  
from the Author*

A

C O P Y

OF THE

APPENDIX AND NOTES,

ANNEXED TO

THE THIRD EDITION

OF

R E M A R K S

ON THE

O P H T H A L M Y,

P S O R O P H T H A L M Y,

AND

P U R U L E N T E Y E,

By JAMES WARE, SURGEON,

---

L O N D O N :

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# I N D E X.

## APPENDIX

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## NOTES

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# I N D E X.

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## AN APPENDIX,

*Containing brief remarks on a species of Ophthalmia, which is usually accompanied with much debility; together with the description of a case of this kind, which was cured by a fumigation of Eyebright and Plantain leaves.*

**I**N a note, page 52, I have said, that “ in  
 “ those instances of the Ophthalmia, in  
 “ which there has appeared to be a considerable torpor in the vessels of the Tunica  
 “ Conjunctiva, I have known a fumigation  
 “ of Eyebright, mixed sometimes with one  
 “ fourth part of Tobacco, to afford very  
 “ manifest relief.” On the subject of such cases I beg leave to explain my meaning somewhat further in this place. And I would first observe that notwithstanding the Ophthalmia is in general an inflammatory disorder, and is often accompanied with an increased action in the vascular system, yet, much oftener than is commonly supposed, it is connected with debility in the habit, and



in particular, with a relaxation of those vessels that appertain to the diseased eye. For these reasons, it will be found, in the preceding remarks, that when the loss of blood has been thought necessary, I have usually preferred bleeding in small quantities in the neighbourhood of the eye, to that by venesection in the arm ; and that I have endeavoured to combine the use of tonics with antiphlogistics in the medicines that have been internally administered, and of sedatives with stimulants in the applications that were made to the part affected.

I beg leave to add also, agreeably to a remark which has before been made, that in many instances of the Ophthalmia in which there has been an exacerbation of the pain, and other symptoms, during the night, and in those where there have been eruptions on the skin, and other marks of a prevalent humour in the habit, (not to mention those that are connected with, or consequent upon, the usual symptoms of the venereal disease,) the administration of Mercury in small doses, and, in particular, of the Hydrargyrus Mur-  
riatus,



riatus, has been found to be highly efficacious. In a few instances, also, where there have been considerable opacities in the Cornea, and in some, where the opacity has been evidently situated in the capsule of the crystalline humour, I have seen, after the acute inflammatory symptoms have been subdued, that mercurial remedies have been administered with advantage.

But, true as this is, it should be remembered, that there is a disease of the eye, whose symptoms in many respects bear a resemblance to those I have last mentioned, but in which the administration of Mercury, after repeated trials, has been found to be evidently injurious. This is a disease which happily does not frequently occur. I have seen it, however, sufficiently often to be much alarmed when it comes under my notice. I shall therefore endeavour to give the reader the best description I am able both of its first symptoms and progress; and I have pleasure in being able to add the history of one case which received a compleat cure.



A greater or less degree of the Ophthalmy sometimes precedes the other symptoms; but more commonly a confusion in the appearance of objects is perceived by the patient, before there is any visible inflammation in the Tunica Conjunctiva; and when this confusion has arisen to so great a degree as to induce the patient to apply for medical assistance, the pupil is found to have lost the power of dilating and contracting, and constantly to retain the size which, when in health, it usually has in a moderate degree of light. Shortly after this time a slight opacity becomes perceptible in this aperture; but the opacity, considered alone, is insufficient to account for the cloudiness and confusion that embarrasses the patient's sight; and sometimes it is of so obscure a kind that it is difficult to determine whether it be in the Crystalline, or Cornea, or in that portion of the aqueous humour that occupies the space between these parts. In this period of the disorder, and, as has been observed above, occasionally sooner, a number of vessels in the Tunica Conjunctiva become enlarged. The  
 access



access of light rarely gives pain to the eye ; although in general the patient appears to avoid it, his sight being least affected when the eye is in the shade, and when the object he looks at is well illuminated. In process of time, if the progress of the disorder be not checked, the colour of the Iris becomes greenish, and an adhesion is formed between this tunic and the anterior portion of the capsule of the crystalline humour. In consequence of this, the round figure of the pupil is lost ; its edges become jagged and irregular ; and, at length, the capsule of the crystalline appears white, and the sight is totally and irrecoverably destroyed.

Such is the description of a disorder, which, though not common, occurs too frequently to be a matter of indifference. Those who are far advanced in life seem more subject to it than others who are younger ; and notwithstanding I have seen it in persons, who, in other respects, have enjoyed perfect health, it happens more frequently in those who have experienced much anxiety and vexation.



For the relief of it, I have not only tried, in its different stages, a great variety of remedies; but I have received information of many that have been prescribed by other surgeons. Mercurial medicines, and all that have a tendency to debilitate the system, have appeared to me to make the disorder worse. My principal dependence has hitherto been on the application of mild stimuli to the eye; to which when the constitution has been weakened either by anxiety, or by any other cause, I have usually joined the administration of internal tonics. Electricity, in a few instances, has been thought to afford benefit; but I have had less experience of its efficacy in this, than in some other disorders to which the eye is subject. The application of *Æther*, when mixed with a weak solution of *Hydrargyrus Muriatus*, has sometimes appeared to me to be decidedly useful.

In the instance of an elderly lady, who had wholly lost the sight of one eye some years prior to the time of my being consulted, and in a way similar to that which is above mentioned, (the pupil being contracted and irregular, and the capsule of the crystalline humour



humour being evidently opaque, and adherent to the Iris,) and whose other eye began then to be affected in a similar manner, (her sight with it being very confused, and misty, and the pupil retaining only a small degree of its contractile power,) the application of a lotion, composed after the following prescription, very speedily dissipated the mist, and in a short time enabled her, with help of the glasses she usually wore, to read a common newspaper. Three years have now elapsed since the time that this remedy was first used; and, between that period and the present, the lady has repeatedly been under the necessity of resorting to a similar lotion, and always with equal success.

℞ Hydrargyri Muriati gr. j.

Solve in Acidi Muriatici gutt. x.

Tunc adde Aquæ Distillatæ ℥ss.

℞ Hujus solutionis gut. xv.

Æther ℥j.

Aquæ Rosæ ℥vij.

m. f. Lotio; et applicetur paululum ad oculos, ope penicilli, cito post liquoris agitationem, bis vel ter in die.



But the case to which I beg leave particularly to direct the attention of the reader, is that which I now proceed to describe. The blindness was here so far advanced, and the success which attended the treatment that was adopted, so far exceeded the expectations that were formed, either by the gentlemen who attended the lady with me, or by myself, that I am induced to relate the circumstances which accompanied it with some minuteness.

A lady about fifty five years of age, in the year 1787, was attacked with a severe pain in the head, for which, after having used a variety of remedies without success, she was recommended to try the effects of sea air and sea bathing. But she had not been many days on the sea coast, before an inflammation began in both her eyes; and this rapidly increasing, she soon returned to London for the aid of medical advice. She was here confined to a dark room several weeks; and when the inflammation abated, she was distressed by the imaginary appearance of a considerable number of black moats or marks, (usually called *muscæ volitantes*,) which constantly moved



moved before her eyes. In about six weeks  
 the inflammation was subdued, and the lady  
 recovered her usual sight; but the *muscae*  
*volitantes* remained, and were particularly  
 troublesome when the light was strong.  
 She suffered no other inconvenience, however,  
 from her eyes until the year 1793; when  
 the left eye became again inflamed, but with-  
 out giving her pain; and, in addition to  
 the appearances above described, the sight  
 of this eye became obscured with a thick  
 mist. With a view to remove the inflam-  
 mation she was bled with leeches on the  
 temple, had a blister applied to her back,  
 and took some strongly purgative medicines;  
 after which, by the advice of a gentleman  
 of eminence in the profession, she began to  
 take a solution of the *Hydrargyrus Muriatus*,  
 (which was given her once or twice every  
 day,) and to make use of a yellow snuff,  
 which appears to me to have contained a  
 considerable proportion of the *Hydrargyrus*  
*Vitriolatus*. At the same time a variety of  
 lotions were applied in succession to the eyes  
 themselves. These remedies were steadily



continued several weeks ; but under the use of them, the dimness in the sight of the left eye greatly increased, and at length the patient was unable to distinguish with it any object whatever. The sight of the right eye, which had hitherto continued good, with the exception of the *muscæ volitantes*, began now to be affected, precisely in the same manner in which the other eye had been first attacked. In this period of the disorder, I was first desired to visit the lady ; and I met, in consultation, Dr. Grieve of Norfolk Street, and Mr. Thomson, Surgeon at Woodford. Many of the blood vessels of both eyes, and particularly of the left, were at this time much enlarged ; but the appearance they made was very different from that of a common Ophthalmia, the eyelids as well as the eyes having a peculiarly dry but relaxed look, and both being wholly free from pain. The left Cornea had a deeply opaque spot in its inferior part, and a dullness over its whole extent ; but the greater part of the pupil was perfectly visible, and the dullness in its appearance was insufficient to account for the  
total



total loss of sight in this eye. The right Cornea had a similar dull look, but there was no defined opacity on one part more than on another. Both pupils were of the size which they usually have in a moderate light, and did not retain the smallest degree of power to dilate or contract. The near prospect of total blindness had not only much hurt the lady's spirits, but, joined with the weakening power of the medicines she had taken, had produced a considerable degree of general debility. Strengthening remedies \* were administered internally; and a lotion composed of Æther and a weak solution of Hydrargyrus Muriatus, agreeably to the prescription mentioned in the foregoing case was recommended to be applied to both the eyes, three or four times every day. These, medicines however, producing no sensible amendment were in a short time wholly omitted; and, in

\* Among other medicines of this class she took the *Extractum Pulsatillæ, vel Anemonis Pratensis* of Linnæus, by the particular recommendation of Dr. Grieve. This gentleman had a high opinion of its efficacy in cases of general weakness, and especially in those wherein the sight was affected. In the present instance, although it did no good to the eyes, it seemed to increase the patient's strength and spirits.



in their stead, the use of a fume, produced by burning a mixture of three parts of the herb Eyebright, and one part of Plantain leaves was adopted. It was applied about five minutes daily to each eye, by means of a machine \* somewhat similar to that with which the fume of Tobacco is injected in disorders of the *primæ viæ*. Internal medicines of all kinds were omitted, during its use, except a cup full of the infusion of Eyebright, which the patient drank every morning fasting. For a short time, a small proportion of Tobacco was mixed with the Eyebright and Plantain; but the Tobacco was soon left out, being found to stimulate the eyes too powerfully. The immediate effect produced by the fumigation on the eye was that of a mild stimulus, by which means was excited, for a short time, a considerable flow of tears; but these soon ceased, and the eye always felt afterwards both lighter and easier. It was steadily continued two months before any considerable amendment

\* A fumigating machine, similar to that which was used in the present instance, may be procured from Mr. Pepys, Surgeon's Instrument maker, in the Poultry.



amendment took place in the patient's sight. The eye, last attacked, was the first to experience a favourable change; and in about four months she distinguished with it large letters. Eight months elapsed before the left eye began to see at all; but in twelve, without any alteration in the mode of treatment, this, like the other, recovered its perfect sight. The redness of the Tunica Conjunctiva had now wholly subsided; both the pupils were become clear; and their power to dilate and contract in different degrees of light returned to the state in which they usually are when the eyes are quite well.







## N O T E S.

Note 1st Page 24.

*On the Ophthalmia occasioned either by warts, or by tumours of other kinds, situated upon, or within, the eyelids.*

THE Ophthalmia may be occasioned not only by extraneous particles insinuated under the eyelids, but by warts, or by tumours of any other kind, situated upon, or near, their edges. These, when the lids are shut, pressing unequally against the edges of the opposite lid, keep up a constant irritation of the eye; and this irritation can only be cured by compleatly removing the tumours that occasion it. Children are more subject to an Ophthalmia from this cause than persons further advanced in life; and from them I have sometimes had occasion to remove five or six of different sizes, chiefly encysted. They are usually situated, as has just been observed, near the edges of the eyelids. I have, however, seen hard tumours of different kinds within the lids at a considerable distance from their edges; in which latter case, as well as in the former, their compleat removal is the only mode by which a cure of the Ophthalmia can be obtained. Chalk stones also have occasionally been formed within the lids, and have produced violent and painful inflammations of the whole eye. A remarkable instance of this kind came under my care a short time ago. A clergyman, who had had repeated fits of the Gout, was attacked with an inflammation of the right eye. Under the idea of  
its



its being a gouty complaint, it was left several days, without any thing being done for it. The pain, however, became at length so considerable, that it was thought necessary to have recourse to local bleeding by leeches, and to apply various anodyne remedies. As these afforded no sort of benefit, I was desired to visit the patient. Although the inflammation at this time was considerable over the whole eye, it was greater on the side next the temple than on that next the nose. The patient informed me that he was quite easy whilst the eye was still; but that every motion either of the eye or of the eyelids occasioned extreme pain. From this remark I was induced to suspect that there was some projecting substance on one or other of these parts; and on turning the inside of the lid outward, in the way recommended Page 23, the cause of the malady was instantly perceived. At the distance of nearly half an inch from the edge of the lid, a little more inclined to the temple than to the nose, a white hard substance was fixed in the Conjunctiva that lined the lid, about twice the size of the head of a pin, and exactly resembling a common chalk stone. It was removed with great facility with the point of a lancet; instantly after which the patient became easy, and in three days the Ophthalmia was entirely cured.



Note 2, Page 30.

*On the similitude between the purulent Ophthalmy in adults, and the purulent eyes of new born children.*

The discharge which issues from the eyes of infants in the disorder distinguished by the denomination of *The purulent eyes of new born children*, which will be considered in the sequel of this work, is not unlike to that which comes from the eyes of adults, in the cases to which a reference is made in the preceding paragraph. See the 5th, 14th, and three following cases.

Note 3, Page 36,

*On opening the angular vein, as an occasional means of cure, in a violent Ophthalmy,*

Eight or ten ounces of blood may sometimes be taken away by opening the vein that passes on the side of the nose, near the inner angle of the eyelids; and when the inflammation of the eye has been considerable, this operation has not unfrequently afforded very considerable relief.

Note 4, Page 40.

*On the Oedema of the upper eyelids, which sometimes accompanies the Ophthalmy.*

The Ophthalmy is sometimes accompanied with an oedema of the upper eyelid; in which case the thickness of this part is so considerable, that the patient is unable to raise it; and consequently, so long as this continues, it is  
C. impossible



impossible to obtain an accurate knowledge of the state of the eye. In such instances a few punctures, made with a lancet on the outside, and near to the edge, of the lids, will cause the discharge of a bloody water, which will greatly, and often instantly, diminish its size, and will render the application of suitable remedies to the eye itself much more effectual than they could have been before this was done.

Note 5, Page 40.

*On the removal of a portion of the Tunica Conjunctiva from the inside of the eyelids, when they are everted and thickened.*

The operation of removing a portion of the Tunica Conjunctiva from the inside of the everted eyelids, is not only useful when the eversion is accompanied with an acute Ophthalmia, but is also sometimes the only effectual remedy in those cases, which are vulgarly denominated bleared eyes, where the eversion of the lid is unconnected with any considerable inflammation, and, from its long continuance, may be considered as a chronic disease. The only caution necessary to be attended to, by those who perform the operation, is to avoid wounding the cartilaginous edge of the lid, lest it leave, after the cure, a notch or depression on this part.

Note 6, Page 44.

*On the application of an oiled silk cap over the head in particular cases of this disorder.*

When the Ophthalmia is accompanied, or when it has been preceded, by an eruption of pustules on the hairy  
 4 part



part of the head, (which circumstances are by no means uncommon in children,) it will be proper to shave the head twice every week ; and after cleaning it, morning and evening, either with milk and butter, or with soap and water, to keep it covered with an oiled silk cap ; which should be applied each time dry and warm. The cap promotes a copious perspiration from the pores of the head ; and sometimes occasions an increase in the eruption of pustules. In this way it forms a powerful derivation from the eye, and has frequently afforded very great assistance in the cure of the Ophthalmy. If the eruption on the head under this treatment become so considerable as to give trouble, which very rarely happens, the number of pustules may be lessened by washing them with the expressed juice of houseleek, mixed with an equal proportion of cream, and afterwards covering the head with a piece of singed linen under the cap.

Note 7, Page 45.

*On the Ophthalmy occasioned by affections of the stomach and bowels ;—by dentition in children ;—and by decayed teeth in adults.*

In consequence of the close sympathy between the eyes and the bowels, when the latter are loaded with slimy fæces, they not only prove a nidus for worms of various sorts, but occasion, not unfrequently, among other symptoms, an inflammation of the eyes. From this circumstance the Ophthalmy in children is sometimes incurable until active purges are administered, thoroughly to cleanse the primæ viæ ; and for this purpose I do not know any medicines more effectual than a few grains of Calomel, given at bed



time, and ten or fifteen grains of Jalap on the following morning. The dose of these medicines should be sufficiently powerful to procure four or five copious stools, and it is generally requisite to repeat the purge three or four times, and sometimes oftener, in quick succession. But it should be remembered that the object in administering such remedies, is to evacuate the morbid contents of the stomach and bowels, and not to debilitate the general system. Good broth, or beef tea, should therefore be given during the time of their operation ; and afterwards preparations of the peruvian bark, or of steel mixed with myrrh, will be found of use to strengthen the general habit.

It should not be forgotten that an inflammation of the eyes is likewise one of the effects which are sometimes occasioned in children by difficult dentition ; and in cases of this kind neither internal nor external remedies can prove effectual for the cure of the Ophthalmy, until the tension of the gums be taken off by thoroughly dividing them down to the teeth. In performing this operation, which is best done with a common gum fleam, I usually make two incisions, one perpendicular to the other, in order to be more sure that the wound may not close afterwards over the teeth.

In persons more advanced in years, I have also sometimes seen an Ophthalmy accompanied, and perhaps caused, by a decayed and painful tooth ; the removal of which has been necessary, before the inflammation of the eye could be abated,



Note 8, Page 49.

*On the best mode of applying the Thebaic Tincture.*

If two or three drops of the Thebaic Tincture are dropped at once on the globe of the eye, the pain they occasion will be considerably greater than if they are placed in the inner angle of the eyelids, and made to glide gradually on the eye, by gently drawing down the lower lid. At the same time that this latter mode of applying the tincture is much less painful than the former, I have found, in a great variety of cases, that it is equally beneficial.

Note 9, Page 51.

*On the efficacy of the Fetus Capiti Papaverum, either alone, or mixed with brandy, in painful and relaxed cases of the Ophthalmy.*

It ought to be remarked, however, that when the Ophthalmy is accompanied with a violent pain either in the head, or eye, a strong decoction of poppy heads, applied as a fomentation, has sometimes been joined with great advantage to the use of the Thebaic Tincture, and of the other remedies that are above recommended. If the habit be much relaxed, a fourth part, a third, or even a half, of brandy, or of spirit of wine, may be added to the fomentation; and after the pain has been somewhat abated, compresses, wet with a mixture of equal parts of brandy, verjuice, and water, and sometimes of brandy alone, bound on the eyes during the night, have produced very essential service. In a few instances also, where there has appeared to be a



considerable torpor in the vessels of the Conjunctiva, I have known a fumigation of Eyebright mixed with one fourth part of Tobacco to afford very manifest relief.

Note 10, Page 53.

*On the use of small doses of Opium internally, when the eyes are irritable, without much inflammation.*

In peculiarly irritable eyes, and especially when the Ophthalmia is accompanied with a frequent sneezing or coughing, I have observed, after the acute inflammatory symptoms have abated, that small doses of opiates, such as two grains of the Pulvis Ipecacuanhæ compositus, or four or five drops of the Tinctura Opii, taken internally, once or twice in the day, have greatly contributed to remove the weakness of this organ. During their use, costiveness should be avoided by occasionally giving mildly laxative medicines.

Note 11, Page 55.

*On the efficacy of the Corrosive Sublimate in the Intermittent Ophthalmia.*

In proof of the efficacy of Corrosive Sublimate, administered internally, in cases of the Ophthalmia accompanied with violent pain, the reader is referred to the seventh case in this work, and to the remarks I made on the Intermittent Ophthalmia, annexed to Observations on the Epiphora, &c. published in 1792, and printed for Dilly in the Poultry.

I only beg leave to observe, that by the term Intermittent Ophthalmia, as above used, I do not mean, an Ophthalmia accompa-



accompanying a regular intermittent fever, but an Ophthalmy, the usual symptoms of which disorder intermit and return at regular periods. Instances of the Ophthalmy, accompanying a regular intermittent fever, I believe have rarely occurred. The following, however, is the description of a case of this kind.

A gentleman put himself under my care in July, 1793, on account of a violent inflammation of the left eye, which was accompanied with a small ulceration in the Cornea, and an opacity in this tunic which extended nearly over the whole of the pupil. Previous to the attack of the Ophthalmy, he had had a regular tertian ague, which, after continuing a long time, had been cured by his taking a large quantity of the Cortex Peruvianus. He was scarcely recovered from the ague, when the Ophthalmy commenced, and it had continued a fortnight before I saw him. At this time the inflammation was so considerable, that it appeared necessary to apply three leeches to the left temple, and afterwards a blister, of the size of half a crown, to the same part. I also scarified the inside of the eyelids, several successive days with the point of a lancet; after which, by the application of the Citrine Ointment and Thebaic Tincture, together with common antiphlogistic remedies, the Ophthalmy was greatly diminished: but, before he was quite well, the ague returned with its usual violence. A draught composed of an ounce and a half of the decoction of Peruvian Bark, with a dram and a half of the tincture, and a dram of the Sal Catharticus Amarus was now given him every six hours; and after the second fit, which was more violent than the first, a scruple of the Red Bark was added to every dose of the decoction, still joining with it a dram of the Sal Cathart. Amar. and giving such a draught every three

C 4

hours



hours instead of every six. The Citrine Ointment and Thebaic Tincture were daily applied to the eye as before. The third fit of the ague was much less violent than the former; and the inflammation continued to diminish. The fourth fit was still milder than the third; and afterwards he had no return of it. The Ophthalmia also, by a continuance in the same mode of treatment, was prevented from returning; the ulceration of the Cornea healed; and the opacity of this tunic decreased so rapidly, that in a short time the patient recovered a very useful sight.

Note 12, Page 60.

*On opacities in the Cornea without preceding inflammation; with remarks on the Gerontoxon, vel Arcus Senilis; and on those cases, in which the Cornea either assumes a conical figure, or loses part of its natural convexity.*

Notwithstanding the usual cause of an opacity of the Cornea is, as has been observed above, an inflammation of the eye, yet a similar opacity has taken place, in a few instances, without any appearance of inflammation whatsoever. I have lately seen two cases of this kind; one in a child who had a marked Scrophulous constitution; and the other in a young woman, who laboured under a menstrual obstruction. In both these patients the disorder in the eye was accompanied with much general debility; on which account, preparations of bark and steel were administered internally; and with the use of these was joined that of Calomel, half a grain of which was given every night at bed time. The chief local applications  
which



which were used were the citrine ointment and powdered sugar. Blisters were occasionally put behind the ears; and, in the instance of the young woman, three leaches were applied to the temple, once every week for a month. By these means, in the latter case the opaque matter was wholly absorbed; and, in the former, its progress was stopped, and the sight preserved.

It should here be remarked, also, that in elderly persons an opacity not unfrequently appears round the whole circumference of the Cornea, without any previous inflammation; and that the opacity sometimes extends so far forward as to leave very little more than the aperture of the pupil quite clear. This change in the structure of the Cornea has been described by authors under the name of *Gerontoxon*, vel *Arcus Senilis*. It has been the cause of alarm to many; but, if it be unconnected with inflammation of the eye, I have never known it seriously to affect the sight. It is therefore needless to recommend any remedies for it.—In a few instances I have known a similar opacity to take place in the Cornea of young persons; and in one, after the *Arcus Senilis* had been some time formed, a slight Ophthalmia ensued; in consequence of which, the opacity spread so far forward on one side of the Cornea, as essentially to injure vision. In this case, on examining the eye, I perceived a cluster of blood vessels passing over the Conjunctiva, and terminating in the Cornea on that side where the opacity extended furthest over the pupil. I immediately removed a portion of these vessels with a curved pair of scissors, having first raised them with a small forceps. When this was done, a vessel was perceived which lay deeper than the rest, and penetrated evidently into the substance of the Sclerotica. This vessel I divided transversely  
with



with the point of a lancet ; and a copious hæmorrhage ensued. The good effects of the operation were immediately perceived by the patient, who at once distinguished objects much more distinctly than she had been able to do for a considerable time before ; and afterwards, by the use of common antiphlogistic remedies, the inflammation was soon subdued, and the sight perfectly restored.

Whilst speaking on the subject of opacities in the Cornea, which come on without any preceding Ophthalmia, it may be proper to observe, that a small speck sometimes forms in the center of this tunic, without any previous inflammation in those rare cases in which the Cornea undergoes a change from its round figure, and assumes a conical or sugar-loaf shape. In consequence of this alteration in the figure of the eye, it not only becomes myopical, but the rays of light are refracted in so irregular a manner, that the sight even of near objects is confused and imperfect. This is made much worse when a speck forms in its center. The remedies above recommended for opacities of the Cornea are undoubtedly proper to be used here ; but I fear they will seldom be found to avail much, so long as the morbid projection continues unsubdued. For the cure of this I have tried at different times a great variety of remedies. In some instances I have punctured the Cornea, and evacuated the aqueous humour ; after which by the application of thick compresses on the outside of the eyelids, I have endeavoured to counteract the morbid propensity ; but when this humour has been regenerated, which usually takes place in a short space of time, the Cornea has always resumed its projecting figure. The greatest relief I have hitherto given, has been by the application of a few drops of a strong infusion of tobacco ; by a perseverance.



severance in the use of which remedy, three or four times every day, the conical appearance of the eye has, in a few instances, been certainly diminished, and the patient's sight greatly mended.

As a contrast to a conical state of the Cornea, just described, I beg leave to add, that this tunic sometimes, also, loses its natural degree of convexity, and becomes morbidly flat. In cases of this description, a moisture is constantly visible on the surface of the Cornea, which gives it a dull lifeless look, and inclines me to believe, that there is an increased transudation of the aqueous humour through its pores. In such instances the sight is necessarily very imperfect: and, unlike what happens in the former cases, they are usually accompanied with a small degree of inflammation, (but not of an acute or painful kind,) in that part of the Tunica Conjunctiva, which covers the globe of the eye. It has been found very difficult to subdue this species of the Ophthalmia; and sometimes the disease has terminated in an opacity of the whole Cornea. Moderately astringent applications, together with strengthening internal remedies, appear to me to be best suited to effect the cure; and for the former of these purposes, I would particularly recommend the following lotion, which should be applied to the eye with a camel's hair pencil frequently in the course of the day.

℞ *Aquæ Lythargyri acetati gutt. x.*  
*Spiritus camphorati gutt. xx.*  
*Pulv. Aluminis, gr. viij.*  
*Aquæ Distillatæ, ℥ iv.*  
*m. f. Lotio Ophthalmica.*

Note



Note 13, Page 64.

*On the application of the Succus Lactucæ sessilis  
in the Chemosis.*

In a few instances of Chemosis, where the swelling as well as the inflammation of the Conjunctiva have been considerable, I have found that, after the free use of evacuations, the following application has been singularly serviceable.

*R Foliorum interiorum recentium Lactucæ sessilis uncias tres,  
Aq. pur. semunciam,*

*Maccra in Balneo Mariæ per semihoram; tunc exprimatur  
succus, cujus applicetur paululum ad oculos, et ad  
palpebras, sæpe in die.*

Note 14, Page 65.

*On the use of Sugar in the Hypopion*

The means above recommended to abate the Ophthalmia, in cases of the Hypopion, ought never to be omitted; and in addition to these I have remarked, that when the matter contained in the anterior chamber of the aqueous humour has been small in quantity, its absorption has been promoted by dropping into the eye, once or twice in the course of the day, a few grains of powdered sugar.

*On*



Note 15, Page 68.

*On the Unguis vel Pterygion.*

It may be expected that I should say something here on the subject of the Unguis or Pterygion; but this, I think cannot properly be considered as an effect of the Ophthalmy, because, though it occasionally accompanies this disorder, it is also often unconnected with any symptoms of inflammation. It is defined by authors to be a vascular excrescence, which usually commences from an opaque point on the inner side of the circumference of the Cornea; whence it is continued in a triangular shape towards the internal angle of the eyelids. Sometimes it appears also on the outer side of the Cornea; and occasionally, both on the inner and outer. Although its commencement is usually from a point in the circumference of this tunic, the opaque part creeps gradually forward; and I have seen the termination of two excrescences, one on the inner and the other on the outer side of the Cornea, meet exactly in its center, and so as nearly to destroy the sight. The Unguis appears to be occasioned by a fold or puckering of the Tunica Conjunctiva, and not by any adventitious membrane formed on this part. In recent cases I have not unfrequently obtained a perfect cure of the disorder by applying a powder to the eye, twice or thrice in the day, composed of one part of alum, and of three or four parts of sugar. If it be accompanied with an Ophthalmy, the remedies recommended for this disorder must be joined with the use of the aluminous powder. When it has been of long standing and the opacity has spread far over the Cornea, it may be necessary to remove a portion of the folded Conjunctiva with  
a curved



a curved pair of scissars, (first raising it with a forceps) in order, by this means, to cut off the communication of the distended vessels with the opaque part that injures vision.

Note 16, Page 118.

*On the application of Sea water, in chronic cases of the Pforophthalmia and Ophthalmia.*

A distinction should here be made between acute inflammations of the eye, which are usually accompanied with more or less of pain and general plethora, and those slight chronic Ophthalmies which are connected with a scorbutic habit of body, and produce only a weakness of this organ. In instances of the latter kind I have known sea bathing beneficial. But even in these also it has sometimes disagreed. It is a remedy therefore that should be prescribed with caution.

Note 17, Page 123.

*On the Use of the Lunar Caustic, or of the Lapis Infernalis, in deep ulcerations on the edges of the eyelids.*

It should be observed, that a small cartilaginous ulcer has sometimes been formed on the edge of the eyelids, after the Small Pox, which could only be cured by touching it repeatedly, for several days, either with the Lunar Caustic, or Lapis Infernalis, in the way recommended by St. Yves, in the paragraph quoted, in Page 120, from his treatise. Such instances, however, compared with common cases of the Pforophthalmia, which may be relieved by the Unguentum Citrinum, are extremely rare, and they are to be considered rather



rather as exceptions to the usual state of this disorder, than as examples of it.

Note 18, Page 124.

*On the small change sometimes made by the Psorophtholmy in the appearance of the parts affected by it.*

Although the Psorophtholmy, agreeably to the remark above made, is not unfrequently accompanied with a greater or less degree of inflammation on the globe of the eye, and in such cases appears to be the primary cause of the Ophtholmy, yet instances continually occur in which this disorder exists without producing the slightest appearance of inflammation whatsoever. I have attended a very considerable number of these; and in many, the only intimation of the nature of the complaint has been derived from the description given by the patients themselves. Whenever I am informed that the edges of the eyelids have a disposition, be it ever so slight, to adhere to each other after they have been long in contact, as during the time of sleep, and when this is accompanied with an uncomfortable sense of weight in the lids on the approach of night, in consequence whereof the patient involuntarily shuts them, without being drowsy, and without any particular stimulus being applied to the eye to give it pain, I always suspect that the secretion from the ciliary glands is in a diseased state; and in many such cases I have found the success attending the use of the means, above recommended for the cure of the Psorophtholmy, to be quite as effectual, as in those other instances where the excoriation and redness of the eyelids have been visible on the slightest inspection.

It



It may not be unuseful, however, to add here, that an irritation of the eye, somewhat similar to that produced by the Pterophthalmia, has occasionally been kept up, for a considerable length of time, by the inversion of a small number of downy hairs, situated near the inner angle of the eyelids, and sometimes on the Caruncula Lachrymalis itself. In such instances, an accurate extraction of the offending hairs is the sole mode by which the irritation and weakness of sight, to which these, by their improper position, give rise, can effectually be removed.

Note 19, Page 147.

*On the advantage of scarifying the inside of the eyelids, in preference to the application of leeches to the temple, in the purulent eyes of new born children.*

Instead of applying a leech to each temple, as is above recommended, I have lately, and I think with more advantage, taken blood from the inside of the eyelids, by scarifying them with the point of a lancet.

F I N I S.