

fact that concave glasses improve vision for distant objects. If we have no concave glasses convenient, we can diagnose it from Amphypopia, (insensibility of the retina) by the following ready method:—A person with normal vision can read distinctly, No. I test type at 12 inches, and even a little farther. We will suppose that a patient's vision is so impaired, that he can only read No. II at 6 inches; if he is *not* also myopic, he can also read No. IV at 12 inches, or No. LX at 180 inches—that is at 15 feet. However impaired then a person's vision may be, unless he be also myopic, he can see as well proportionately, at one distance as at another. On the contrary, a person with myopia, say  $\frac{1}{6}$ , can see the smallest type (much smaller than No. I,) at 6 inches, but he cannot see No. II, or even No. V, at 12 inches.

This disease is often hereditary. Over exertion of the eyes upon near objects at the age of puberty, (about 14 or 15) is a very frequent cause of myopia.

Short-sighted persons often inquire if we would advise the use of spectacles. There can be no objection to wearing glasses that will enable them to see distant objects; for their eyes are thus changed to normal ones, but as most persons use their eyes much more frequently upon near than upon distant objects, the glasses should be no stronger than necessary. Some contend, however, that short-sighted persons should dispense with glasses for reading, writing, &c. Prof. Donders, however, recommends their use for this purpose, for the following reasons:—

1st. "Because strong convergence of the optic axes is necessarily paired with tension of the accommodation. The latter is an associated action, not arising from the mechanism of the convergence, but existing within the eye itself, and may consequently easily lead to an increase of the myopia. Besides this, the pressure of the muscles upon the eye ball appears to be greater when the optic axes are convergent, than when they are parallel, and this increase of pressure cannot but tend to give rise to the development of posterior staphyloma.

2nd. "On account of the habit which short-sighted persons have of bending their head forwards during reading or writing. This must cause an increased flow of blood to the eye, and an increased tension within the eye itself. Owing to this development of sclerotic-choroiditis posterior, effusions of blood and detachment of the retina, which are so apt to occur in short-sighted persons, are undoubtedly greatly promoted. For this reason, we should always tell these patients to read with their head well thrown back, and to write at a sloping desk. But it may, on the other hand, be urged that it is just in looking at near objects that myopic persons have an advantage, for they can see them remark-