

*Present Condition.*—Patient is in good general health, but appears to be a little thinner than when first seen. Proptosis has not increased to any very noticeable extent, but the lower lid is much everted, a large area of reddened and thickened conjunctiva being exposed to view. The cornea is intact and well covered by the closed lids, the upper of which is greatly stretched. Ocular movements are limited. Pupil reacts normally to accommodation and sluggishly to slight stimulation—Tension is normal—V.O.D. equals 20-15. V.O.S. equals counting of fingers uncertainly at three feet. Ophthalmoscopic examination reveals a pale atrophic nerve with small blood vessels. No orbital swelling can be made out by palpation and no pulsation is present. Patient refuses to allow his eye to be dislocated.

*History.*—Is a Doukhobor, born in Russia, 22 years ago, coming to Canada with the Doukhobor Exodus of 1899. He states that as a child he was occupied looking after cattle in his native village. Since 14 years of age has worked as a carpenter.

*Family History.*—Negative.

*Personal History.*—Has never had an illness and gives no history of injury. Since 4 years of age has been troubled with severe headaches over vertex and forehead, most intense over and about left eye. These headaches, he describes as, being of a burning, sickening and paroxysmal character, unrelieved by medication and almost unbearable, lasting from 1 to 3 days, after which he would be free from pain for ten days or two weeks. Nausea and vomiting often accompanied the pain, which appeared to be aggravated by the heat of the sun. About 8 years ago, shortly after coming to Canada, his relatives observed that his left eye was commencing to protrude, the protrusion increasing a little every year. He states that vision in the affected eye has been for six years or more, somewhat impaired, but that up to the present time he has been able to distinguish people. The accuracy of this statement is open to question, in view of the condition of the nerve and the very defective vision existing at the present time.

With regard to the frequency with which the eye has been dislocated, patient says, that for 5 or 6 years spontaneous dislocations occurred as often as every three days. But for the last three years, he has had better control of the eye and dislocations have been much less frequent.

*Diagnosis.*—Non-malignant tumour of the optic nerve.

Enucleation of the eye and removal of the growth advised and advice accepted.