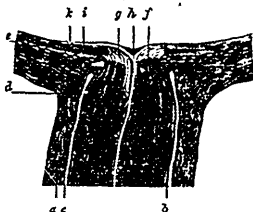


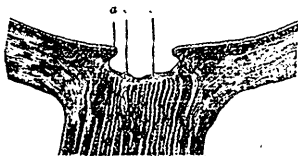
Fig. 1.



Longitudinal section of Optic Nerve and Tunics of the Eye.—[From STRELLWAG.]

- a Outer, thick, fibrous optic-nerve sheath, passing into the posterior and middle layers of the sclera, d.
- b Inner, thin, fibrous sheath encircling the nerve-trunk up to the posterior border of the choroidal foramen, behind which it forms the so-called connective-tissue ring.
- c Lymph-cavity between the outer and inner sheath, ending anteriorly in the sclera, and communicating posteriorly with the arachnoid cavity.
- e Choroid.
- f Lamina cribrosa, formed by fibrous elements given off from the inner surface of the connective tissue ring and from the fibrous outer sheath of the arteria centralis retinae, k. The optic nerve fibres, g, are shown in their continuity, passing through the cribriform tissue, losing their opaque sheaths, and spreading out in the anterior part of the retina.
- k Bacillar layer of retina, membrana Jacobi (rods and cones.)

Fig. 2.



Longitudinal section of Optic Nerve, &c., showing the anatomico-pathological changes in total glaucomatous or pressure excoavation.—[From STRELLWAG.]

- The optic disc, instead of being slightly convex, as in Fig. 1, is deeply cupped with steep or even overhanging borders, a. The optic nerve-fibres are atrophied, and the lamina cribrosa distended and pressed backward, and forming the walls of the excavation. The cavity is flask or kettle-shaped, from the narrowing of the nerve-trunk as it approaches the choroidal foramen. See Fig. 1.
- b Nervous fibres, occasionally preserved, which pass over into the retina, the atrophied condition of which is made manifest by contrast. See Fig. 1.
- The central vessels, c, are adherent to the sides of the cup. They are, therefore, much displaced, and undergo a double bending ere they course over the fundus.