

# Dominion Medical Monthly

And Ontario Medical Journal

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VOL. XXXVII.

TORONTO, OCTOBER, 1911.

No. 4

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## Original Articles

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### \*HEADACHES AND HETEROPHORIA.

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No one symptom in the whole range of clinical medicine causes more annoyance to the patient and is a greater source of worry to the practitioner than persistent headache. Almost every organ of the body, in turn, is accused of being the offender, but the liver and the uterus have to take the greater part of the blame, and are maltreated and punished accordingly, very often with little benefit to the patient. After months of treatment of these unfortunate organs, he or she is sent to the ophthalmologist, if in the meantime the patient has not taken the matter into his or her own hands and consulted an optometrist, who successfully sells several pairs of glasses. As is well known, astigmatism and other refractive errors are frequent causes of headaches, but muscular imbalance plays a prominent part in causation. It may be said axiomatically that refractive headache is mostly frontal; uterine headache, bregmatic; and heterophoric headache, occipital.

In heterophoria the headache is accompanied by other symptoms of a reflex or neurotic character, presenting a symptom-complex which may simulate grave organic disease: such as pain between the shoulder blades, nausea, vomiting and dizziness, confusion of vision, confusion of mind, and fear of accident in crowded thoroughfares. Use of the eyes on railroad trains, street cars, or in shopping, render these symptoms acute. Restlessness is commonly marked, especially in children. Stevens and others have held that migraine, chorea and epilepsy result from heterophoria, and there is good

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\*Read at meeting of Ontario Medical Association.