

nerve can be said to exist, and I often think there is a good deal of truth in this remark when I see a dull, turbid-looking nerve in the eye of some unfortunate who has been burning the candle at both ends. The conditions giving rise to optic neuritis are so various in regard to the nature and extent of the primary lesions that we cannot look for any constant set of symptoms indicative of this change. Violent and persistent headache, giddiness, vomiting, and epileptiform attacks occur probably only when the intra-cranial disease has progressed so rapidly that the brain has not had time to become tolerant of the irritant. On the other hand, there are many cases in which a dull, heavy feeling in the head, slight headache, with some obtuseness of the intellectual faculties, and loss of memory, may be the only symptoms noticed. This is true of a case recently in the Hospital, who came to me on account of catarrhal deafness, and merely incidentally one day mentioned that he thought his sight was failing. This led me to make an examination of the eyes, and I discovered a well-pronounced double optic neuritis, with considerable diminution of acuity of vision in one eye, and to a less degree in the other—R. 20/50, L. 20/30. A chart of the visual fields made with Carmalt's Perimeter shows that both are contracted, the left moderately, with pretty good central vision, the right reduced to an exceedingly small area, and the sense of color obliterated. In the left eye the color sense, though impaired, is still fairly good. This man was some four weeks under treatment in Hospital, and during this time his vision did not undergo further deterioration. His history was not conclusive of syphilis, though there was pretty strong presumptive evidence that way. He had no symptoms of brain trouble beyond slight dullness, and some pretty constant headache, though never at all severe.

Another case still in Hospital came to me last November, complaining of pain in the eyes, when used as they had been a good deal in reading and sewing late at night. Her story was just that of a person suffering from asthenopia after over-use of the eyes, except that she occasionally lost her sight altogether for a few moments or minutes. Vision, when first examined, was normal in both eyes. A few days later she came again,