

CERTAIN EYE SYMPTOMS OF INTRACRANIAL ORIGIN.

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The subject of my paper, "Certain Eye Symptoms of Intracranial Origin," has to do with that well-known and perhaps rather threadbare subject, "The Abnormal Limitations of the Field of Vision,"—i.e., scotomata, hemianopsia, etc.,—and also the limitations of the field of color perception. These limitations, in the light of some recent investigations by Willbrand and others, are, indeed, of clinical importance to the general practitioner as well as specialist in enabling him to localize certain cerebral lesions.

I will endeavor, within the limits of a short paper, to give a *resumé* of these investigations, illustrating them by a few cases which have come under my notice. I trust it may not be out of place if I at first run over the course and ultimate destination of the optic nerve fibres. Proceeding backwards from the eye, the optic nerves decussate partially at the chiasma, after which, taking the name of optic tracts, they continue backwards, bending round the pedunculus cerebri. Fibres from the right tract supply the right side of both retinæ, and those from the left tract the left side. The macula lutea of each eye is connected, it is at present assumed, with both cerebral hemispheres. But, to return to the optic tracts themselves, they arise :

(1) By fibres from the grey substance of the optic thalamus and the anterior corpora quadrigemina, the corpora geniculata forming ganglia intercalated in the course of certain of the fibres.

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