

than the normal distance is certainly present. It is most satisfactory and common. As in other forms of accommodation, the conditions are the same. It often happens that the patient can be treated as if he had a strong convex lens at a distance or a concave lens at a distance a few drops of atropine will disclose the hysteric character

OF VISION.

Defects in the field of vision are the commonest signs of hysteric amblyopia and that they are of great importance in determining the nature of the disease. In the case of comparison, I have seen many cases of the normal field of vision under my care. In hysteric amblyopia every other disease of the eye has its limitations occur, as in the case of strabismus, or in a greater degree. In non-hysteric amblyopia the vision is entirely lost, and the patient is unable to see any visual sensation. In hysteric amblyopia the vision is either more or less affected for white objects, just as in other nervous diseases the vision for white is still the best when there is any defect. The field for red is larger than for these colors in the most successful cases. One of the defects of the color field

occurred in the case of a young lady, aged 17, in delicate health, who began to complain of her eyes. She then noticed that she could not see well in the distance or read ordinary print with the right eye. There were no fundus changes; patient was distinctly hysteric; had attacks of weeping without apparent cause, pharyngeal anesthesia, lump in her throat, etc. She had spasm of accommodation, was able to read only coarse print and that at from 6 to 10 cm. in front of the eye. She could not read fine print at any distance. I wish you would especially notice that her field for red is larger than that for white.

It must be remembered, that even where the patient does not complain of visual disturbances quite marked defects of indirect vision may be present. If these do not proclaim themselves at once they may be developed by fatigue of the retina. The patient is asked to look steadily for a couple of minutes at a near object and then the field for red and green should be mapped out, followed by that for white, and vice versa. The amblyopia may be so marked that the field for white and colors is reduced to the vanishing point, a condition of affairs which it is not improper to regard as an anesthesia of the perceptive elements of the retina and in correspondence with the loss or perversion of sensation exhibited by the skin and mucous membranes in other phases of the disease. In such instances it rarely happens, even where the central vision is reduced to 1/10 or 1/20 of the normal, that the patient prevents the patient from walking about as if he had good vision. I have now under my care a child who can not read the coarsest print at any distance, whose distant vision is reduced to finger counting at four feet and whose color-field and the area for white measure about 5 degrees, and yet to all outward appearances she has good eyesight, that is, she does not stumble over small articles of furniture placed in her path and her parents have difficulty in believing that her vision is defective.

My principal reason for referring to these defects in the visual field, so well known to all of you, is to