The Illinois State Board of Health deemed it essential that some action should be taken to protect the sight of the school children of the State, and a committee was appointed to con-On inquiring into the condition of the sider the matter. children in Chicago schools it was found that 32 per cent. of the boys, and 37 per cent. of the girls had defective vision. The committee strongly urged, in its report, that the eyes of the children in every school in the State should be examined in a similar manner to the Chicago plan. By this plan a brief and simple examination is made of each child's eyes and ears once a year by the teachers. The proper test cards are furnished to the teachers, and they are instructed how to use them. If the child's eyes or ears are found to be seriously defective a printed card of warning is sent to the parents, who will generally see that the defect is remedied. Children will frequently return from school complaining of headache, and upon inquiry we learn that they can with difficulty see the work upon the blackboards. Some, who can see the work in the early part of the day, can not see it later in the day, because the ciliary muscle is overtaxed, causing symptoms of eye strain, and, in some cases, squint. Most of the cases spoken of could be detected by the simple tests above mentioned.

Ocular Manifestations in Chronic Bright's Disease.

- G. E. DeSchweinitz (Medicine) discusses the Ocular Manifestations in Chronic Bright's Disease. He recognizes seven of these conditions. They are:
- 1. Complete blindness without ophthalmoscopic lesions, or at least without the presence of lesions more or less suggestive of disease of the kidneys, generally called uremic amaurosis, and most often seen in acute nephritis, but also in acute exacerbations of chronic renal disease.
- 2. Various types of retinitis and neuroretinitis, to which the descriptive term "albuminuric" is commonly applied, and which are most often seen in association with chronic forms of kidney disease.
- 3. Alterations in the calibre and relation of the retinal vessels owing to sclerotic changes in their walls, with or without hemorrhages and exudates in the retina, seen in association with those forms of renal disease in which vascular changes are evident elsewhere in the body; also isolated hemorrhages and exudates, without marked vessel-wall changes.
- 4. Alterations in the uveal tract, particularly in the choroid and iris.
 - 5. Some varieties of cataract.