

OPERATIONS FOR SOFT CATARACT.

BY DAVID WEBSTER, M.D., NEW YORK.

Case 1. Congenital Cataract.

The youngest person I ever operated upon for cataract was Robert Jones, of Schaghticoke, N.Y. He was brought to me at the Manhattan Eye and Ear Hospital on Oct. 30th, 1889, and I needled his right lens for congenital cataract on the day that he was nine weeks old. There was a history of ophthalmia neonatorum, and it was not noticed that the pupils were white until the child was two weeks old. It was proposed that we should get rid of the cataract in the right eye before we did anything to the left. On Oct. 31st I punctured the centre of his right anterior capsule under cocaine. A weak solution of atropine was dropped into the eye, and it was then closed by a compress of absorbent cotton, held in place by strips of adhesive plaster. There was no redness of the eye during recovery from this operation, and the child was discharged on the fourth day. On the 18th of December following, I needled the lens a second time. The same treatment was pursued and the child was again discharged on the fourth day without inflammatory reaction. On February 7th, 1890, I did a third needling, and three days later (Feb. 10th) I did a hook operation, removing some of the capsule and some of the remains of the lens, leaving a partially clear pupil. A few days later the child was taken home with the understanding that he was to be brought again to the hospital in April to have the other eye attended to. I got a letter from his mother instead, saying that the child had died of congestion of the brain. He died on March 18th, and the eye was "white like the other," and the pupil was clear black up to the time of his death. The cause of the congestion of his brain was unknown, but his mother thought that the excitement produced by the operations on his eye had something to do with it.

Case 2. Soft Cataract.

Mrs. L. B., aet. 21, was admitted to the wards of the Manhattan Eye and Ear Hospital Sept. 21, 1887, with soft cataract of the left eye, and good projection. The history was as follows: In August, 1887, she was very ill from a miscarriage. It was followed by a high fever, and she had six convulsions. To relieve the convulsions, ether, chloroform, etc., were administered. She is sure she could see as well with that eye as with the other before this illness. She noticed that she did not see well with the left eye immediately after her sickness. The cataractous lens was needled under cocaine anaesthesia. There was no reaction and she was discharged at the end of ten days. On March 19th, 1888, I did a second operation, making a free cut across the lens, horizontally, with a knife-needle. No reaction following, she was discharged on the third day. On May 4th, I again freely needled the lens for the third time. The eye remained perfectly quiet after the operation, so that, on May 9th, a fourth needling was done. I operated on the eye for the fifth and last time on Sept. 24th. No reaction followed, and on Sept. 26th, the patient was discharged with Vision = 20/50 with + 12. D.s. combined with + 0.75 D.c. axis 60°.

There was no cataract in the other eye, nor was there any history of traumatism. There seems to be no reasonable grounds to doubt that the