

THE SCHOOL MAGAZINE.

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HEALTH DEPARTMENT.

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THE SCHOLAR'S EYE.

VII.

THE SQUINT.

SQUINT is the in-turning or out-turning of one or both eyeballs. For the most part has its beginning in childhood. The squinting eye has diminished vision invariably where it has lasted for any length of time. The amount of its squint is a rough approximation to the amount of diminution of vision. In old cases of considerable degree there may be useful vision left in that eye when it is considered singly; the other too is, as a rule, diminished in vision, but not to the same extent as both squint and that to an equal degree. The child's vision will practically be that of its best eye; with this "fixes"—a technical term, denoting that the axis of the eye is by an effort of volition directed to the object seen while the other eye is wholly unused, and that quite as much as when we use one hand only, the other being left unemployed. His best eye then may have the vision of two-thirds or less. The

method of measuring vision was explained in the first article of this series on the scholar's eye. He will likewise suffer in getting up his lessons, as he works at a disadvantage. His complaint will be very similar to that of the oversighted pupil already explained. Oversightedness is itself the most common single cause of squint. Where an eye has squinted for a considerable length of time, its cure without surgical operation is not practicable. After operation the vision almost invariably improves. It seldom rises quite to the normal. My experience would go to show that it approximates more nearly to normal if the squint has not been of long standing and where it is of minor degree.

MENTAL TENSION.

For what length of time can children keep the mind intent on a specified subject?

Mr. Chadwick, our best authority, (says the *Boston Medical and Surgical Journal*) concludes that a child from the age of five to seven can attend to one subject for fifteen minutes; from seven