

LIGHTNING SHOCK WITH RECOVERY. 7

REMARKS ON THE OPHTHALMOLOGICAL ASPECTS OF THE CASE. (BY DR. FRANK BULLER.)

There was a steady improvement in the visual acuteness for some two months after the accident, but no perceptible improvement has taken place since then. The patient suffered severe pain about the eye and left side of the head for about a week after the injury. There is nothing abnormal in the external appearance of the eyes nor any evidence of injury to the adjacent parts.

The conjunctiva, cornea, anterior chamber and iris appear just as in the other sound eye. The pupil is of medium size, but does not respond to light quite so promptly as that of the other eye. The existing visual defect prevents an accurate estimate of accommodation, but the ciliary muscle is certainly not inactive. Vision of right eye = $\frac{6}{VI}$, slightly better

with + 0.5 c. ax. 90°. Left eye, vision = $\frac{20}{L}$, not improved by any glass. All the extrinsic muscles appear to do their work efficiently.

Two hours after free instillation of solution of homatropine, gr. viij ad 3j, there is R. H. = 1 D., vision = $\frac{6}{VI}$ L. H. = 1.5 D.; vision = $\frac{6}{XV}$. Under ordinary circumstances there is binocular vision, but a vertical prism gives a lateral convergence = 18°, abduction = 3°, adduction = 42°, and ? right hyperphoria = 2°.

It will thus be seen that there is an insufficiency of the external recti which may be her normal condition, or, in view of the fact that there was no visual disability of either eye prior to the accident, it is