

number of disease conditions in the older age group. There is also a slight increase in visual acuity defects owing to hypermetropia and hypermetropic astigmatism, as might well be expected. Among the children, refractive errors are by far the greatest cause of defective vision.

In comparing these data with those found by me among rural school children of white stock in two previous studies, ^{1, 2} it is noted that the overall incidence of visual acuity defects owing to hypermetropic astigmatism is about the same in Indian as in white children. However, among Indian children, this condition is more common among the girls, unlike the situation among white children. The total and sex incidence of myopic astigmatism is about the same in the two previous studies and in the present one. The incidence of myopia in the previous studies was 7.3% among the semi-urban children of the first study,¹ and 4.5% among the strictly rural children of the second study.² In both these studies it was about three times as common among the girls as the boys. In the present survey the incidence was 2%. Again it was more frequent among the girls, being nearly twice as common as among the boys. It is of interest to note that the children in this study are under a less determined educational drive than those of the previous two studies.

In the first of the two previous studies among white children, the total incidence of visual acuity defects was 30%, while under the strictly rural conditions of the second study the incidence was 15%, which compares closely with the 13% of the present study. Among the adults of the present study the incidence was 31%. Thus, it is seen that the Indian possibly has some visual advantage as a child, but that this is lost in adulthood. From a study of Table IV it will be seen that this loss is due mainly to the results of ocular disease. Experience indicates that the incidence of ocular disease among these Indians is high as compared with conditions in the average white colony. It is possible that with a higher standard of living, health education, and less exposure to the hazards of the trap line, this incidence might be greatly reduced.

In discussing disease conditions of the eye, it should be mentioned that three cases of retinopathy were found. In one there was an old inactive central chorioretinitis; the other two patients had fine pigmentary changes in the macula. In no case were arteriosclerotic changes found. This is remarkable when it is pointed out that 80 of the 300 patients were 40 years or older.

Fourteen patients were blind in one or both eyes, that is, they had less than 6% vision. In 3 cases the condition was bilateral. In 6, dense corneal scars were the cause (4 of these were due to lime burns), in 2 there were cataracts and there was one case each of phthisis bulbi, strabismus, pigmented macular degeneration, primary optic atrophy, pterygium and anterior staphyloma. In all, 6 patients suffered from cataract; 3 male and 3 female. In one there was a nuclear cataract and in one a mature senile cataract. Both had been taking vitamin supplements. The remainder had posterior cortical cataracts, and had not been taking vitamin supplements. The average age was 59 years, with the youngest a female, being 38 years old and the oldest a male being 70 years old.

Among the adults corneal scars were the second greatest cause for loss of visual acuity. There were thirteen cases in all. Two of them had been given 50,000 I.U. of vitamin A and 5 had been given 9 mgm. of riboflavin by mouth per day, over a period of about 18 months. One patient had been given this dosage of both vitamins for a similar period. An analysis of corneal scars is found in Table V. In regard to phlyctenular keratitis, it should be noted that there is a relatively high incidence of tuberculosis among these people. This and the low standard of living are well known etiological factors in this condition. There were four well authenticated examples of the scarring result of lime burns, and there were possibly two others. It should be noted that it is