OBSERVATIONS

ON NITRATE OF SILVER STAINS OF THE CONJUNCTIVA.

CASE OF ABSOLUTE BLACKNESS.

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THE application of a solution of nitrate of silver, if long and injudiciously applied to the conjunctiva of the eye, produces a discolouration which is indelible. The sclerotic conjunctiva becomes of a dusky brown, or of an olive colour; the palpebral linings, more particularly of the lower lid, assume a brownish or livid hue, or, as will be presently shown, may become black; the sulcus between the inferior lid and globe is more deeply dyed than the other parts. In the majority of cases which have come under my notice, the conjunctiva of the superior lid retains its natural colour. In a few rare instances the salt becomes incorporated with ulcers of the cornea, forms a subchloride of silver, and perpetuates one or more black lines in their cicatrices.

A still more uncommon, and I believe hitherto unrecorded change of colour, consists in absolute blackness of the conjunctiva, an instance of which, the only one that has ever come under my notice, is probably of sufficient interest for publication in the *Journal*.

Case.—A young woman, aged 29, came from a small town in Radnorshire to consult me for a dimness of vision. Both cornea were extensively covered by opacities, which were irregularly streaked with black lines. The caruncula lachrymalis and tarsal borders were of a jet black colour, giving the appearance, at a cursory glance, of soot or dirt settled on those parts. The palpebral conjunctiva was smooth, and in colour not quite so black as the margins; the sclerotic conjunctiva was of a deep olive colour. I found on inquiry, that she had at one time suffered from strumous ophthalmia, for the cure of which a strong ointment and some drops had been prescribed and freely used; these applications were continued for three or four months.

The black streaks which traversed the opacities of the cornea and the olive sclerotic conjunctiva, decisively indicated the nature of the other discolorations. There is a much greater susceptibility to these stains in some individuals than in others. They are more common to adults than children; possibly because ophthalmic disease among the latter is for the most part either of the strumous or purulent kind, in both of which the surface of the eye and its appendages are continually bathed in secretion.

If we excise a portion of discoloured sclerotic conjunctiva, a white cicatrix is formed, indicating that the fibrous membrane retains its natural colour.

As we are at present unacquainted with any means for removing the stains under consideration, our obvious duty is to prevent their occurrence by vigilant attention and care, which may be accomplished by prescribing the preparations of nitrate of silver, in short and intermittent courses, and by frequently noting the condition of the

lining membrane of the inferior palpebra. In public ophthalmic practice, it would be well if the solution were not dispensed in larger quantities than two drachms at one time.

Since writing the above, a man, 60 years of age, who has been all his life a martyr to rheumatism, has become my patient at the Eye Infirmary. The right globe is collapsed; the left eye retains some vision, it has been repeatedly inflamed; the iris is of a dull leaden colour, and convex towards the cornea; the pupil is puckered, adherent to the lens, and filled within a third of its area by opaque lymph (artesia iridis imperfecta); near the centre of the cornea is a leucoma.

Fifteen or eighteen months ago, he for the first time consulted a surgeon, who prescribed caustic drops, which he has ever since applied. The conjunctiva of the inferior palpebral sinus is of a greenish black colour. The inner surface of the superior lid has lost somewhat of its natural polish; a few black dots assume an aborescent shape near the superior punctum; a light brown and well-defined narrow stripe extends along the concave aspect of its tarsal cartilage.

I have cited this case to show the impropriety of allowing patients to use the preparations of lunar caustic *ad libitum*; and as an interesting example of how well the superior lid escapes serious change of colour, even in the very worst and most neglected cases. It also illustrates the destructive character of uncontrolled rheumatic ophthalmia.

ON

MEDICAL DELUSIONS & CHARLATANIC PRACTICES.

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I. HOMŒOPATHY.

OF the thousand popular medical delusions, that have at various times been brought forward, there are few that have taken so firm a hold upon the public mind, as the one known under the name of homœopathy. This arises mainly from the fact, that the science of legitimate medicine, during the last century, has advanced so much, and the information of medical men has become so great, that the public generally are lost in attempting to follow the scientific physician; but being at the same time anxious not to feel ignorant, in a matter that so greatly concerns themselves, they are ready to turn their attention to any system which they think they can comprehend, however backward or however dangerous that system may be.

Now, the homœopathic system answers this purpose: it falls back upon the medical knowledge and the medical ideas of the people; it also makes use of plausible arguments, and works upon that powerful element of the human mind—the love of the marvellous.