

de Schweinitz (G. E.)

Ophthalmic memoranda







de Schweinitz (B. G.)

REPRINTED FROM THE  
UNIVERSITY MEDICAL MAGAZINE.  
March, 1889.

## OPHTHALMIC MEMORANDA.

### PHTHIRIASIS PALPEBRARUM.

THE pediculus pubis, besides its seat of predilection, occasionally infests the eye-brows, and very rarely the eye-lashes.

A. Q., a boy aged three-and-one-half years, was brought in October to the Eye Dispensary of the University Hospital for relief from this affection. On superficial examination, the borders of the lids appeared covered with many small, dark scabs, which, upon closer inspection, resolved themselves into lice, clinging closely to the margin of the lids. The eggs, darker in color, were fastened with great regularity along the roots of the cilia, and in many instances the parasites themselves were partially buried head foremost in the hair follicles. The presence of these intruders caused much itching and irritation, and the little patient constantly rubbed his eyes with the backs of his hands.

The presence of the pediculus pubis in the eye-lashes is a very rare affection. Hirschberg (*Berlin. Klin. Wochenschrift*, xix. f. 1882), among 40,000 cases of eye-disease, met with only three instances. Despagne (*Recueil d'Ophthalmologie*, Novembre, 1887, p. 674) remarks as noteworthy that during twelve years in the large amount of material in Galezowski's service, only two examples of this kind are recorded. This and another instance are the only ones noted among more than 10,000 cases in the service of Professor William F. Norris at the University Hospital.

Although the affection is comparatively a rare one, its existence has long been known, and it is interesting to observe, as Hirschberg (*loc. cit.*) points out, that cases were recorded by Scarpa and Chelius, and that nearly two thousand years ago its correct nature was described by Celsus.<sup>1</sup> The diagnosis presents no difficulties. A magnifying glass will settle the question in any doubtful case, as, when secondary lesions, the effects of scratching are present, and resemble somewhat the crusts seen in ordinary blepharitis ciliaris. Contagion is the only possible source from which the disorder may be contracted. In the present instance the origin of contamination was probably from the nurse girl with whom the child was accustomed to sleep. Paul Bleicher (*Wien. Med. Wochenschrift*, 1882, xxxii. p. 976), found three examples of this disease occurring at one time in the same family.

The treatment consists in cleanliness and the daily use of mercurial ointment. Balsam of Peru and the cautious pencilling of the edges of the lids with a solution of corrosive sublimate, have also been suggested as useful remedial agents.

<sup>1</sup> De Medicina, Lib. vi. cap. 6. 15.



## OPHTHALMIC MEMORANDA.

## SUDDEN TURNING GRAY OF THE EYE-LASHES.

Hirschberg (*Centralbl. f. prakt. Augenheilk.*, January, 1888) has recorded an instance in which the eye-lashes of a girl, aged 14, turned white, without apparent cause, in fourteen days. The child has formerly been under his care for styes and phlyctenular disorders, but was otherwise in good health. In the middle third of the upper lid the lashes turned white, while in the under lid the white bundles were commingled with dark ones. The general color of the hair and eye-brows was dark. I have observed one exactly similar instance in a young woman aged 18.

The patient was a finely formed, healthy brunette, with unusually dark hair and long eye-lashes. Within one week the middle portion of the cilia of the right upper eye-lid turned perfectly white, while single white lashes alternated with dark ones in the lower lid. Both eyes were myopic, but there was no asthenopia, and no cause, mental or otherwise, could be assigned for the phenomenon, neither did inquiry nor examination indicate that this sudden change in color had been produced by artificial means.

I have no explanation to offer for this occurrence, and simply record it as an instance of "sudden graying of the eye-lashes." Whether the cilia will return to their natural color, is purely a matter of speculation; when last seen, some months since, no change had taken place.

G. E. DE SCHWEINITZ, M.D.,

*Ophthalmic Surgeon to the Philadelphia Hospital and Infirmary for Nervous Diseases.*







