

OLIVER (C.A.)

DESCRIPTIVE SKETCH AND DRAWINGS

OF

Two Cases of Symmetrically Placed
Opacities of the Corneae,

OCCURRING IN MOTHER AND SON.

By CHARLES A. OLIVER, M.D.,

PHILADELPHIA, PA.

[Reprinted from *American Ophthalmological Society Transactions*, 1892.]



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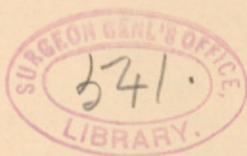
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DESCRIPTIVE SKETCH AND DRAWINGS OF TWO
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TIES OF THE CORNEÆ, OCCURRING IN MOTHER
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On the 23d of February, 1891, a sturdy-appearing eight-year-old schoolboy, the son of German-born parents, applied at Wills' Eye Hospital for the removal from both eyes of what the physician who sent him supposed to be cataract.

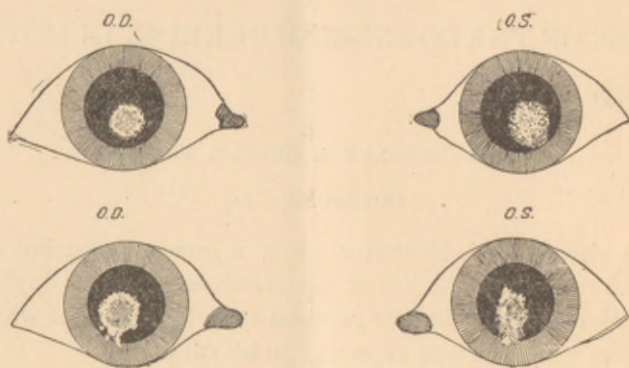
The opacities, which had been noticed for a long time, had gradually increased in size and density until one year previously, when, after an attack of malarial fever (the only illness that the child had ever had), they seemingly enlarged and became, just as they are now, quite conspicuous. At no time were the eyes ever red, irritable, or inflamed.

The upper incisors were normal in appearance, and the boy failed to present any of the facial or general characteristics of inherited syphilis. Laveran's corpuscle was searched for, but was not found. With two diopters of hypermetropia and a slight degree of astigmatism in each eye, uncorrected vision was reduced to one-fourth, and the accommodative power was limited to eleven diopters; and, with the exception of an esophoria of two (P. D.) degrees, no extraocular muscle disturbance was obtainable. The pupils were three millimetres in their horizontal meridians, and the irides were freely and equally mobile to light, stimulus, accommodation, and convergence. The cornea presented the dense superficial and deep opacities so noticeable in the accompanying sketches, which were kindly made for me by Dr. B. Alexander Randall.

* See paper by Sulzen. La correction optique du kerato cone, etc. *Ann. d'Ocul., Mai., '92.*

4 OLIVER: *Symmetrically Placed Opacities of the Corneæ.*

Careful examination of these drawings* will at once make it evident that in each instance there is a deeper and more compact central area, which is surrounded by an annulus or ring of superficial pin-dotted opacities, that of the left eye being the larger and the slightly more peripherally situated.



Not a trace of inflammatory vascularity could be seen. The eye-grounds, which were plainly visible and which were most carefully explored, failed to reveal any gross changes.

Although physical examination gave no evidence of any organic disturbance, alteratives and local treatment were experimentally and persistently tried; yet up to the present writing, nearly sixteen months after the first visit, no perceptible change in appearance of the corneal spots is evident.

During the first weeks of the study of this case advantage was taken to examine the mother, who was a widow, and her other child, a daughter of fifteen years of age.

The sister of the patient failed to exhibit any ocular abnormality, except a minor degree of correctible simple hypermetropic astigmatism.

The mother, however, a seemingly healthy woman of forty-five years of age, without any apparent organic lesion or history of pronounced illness, stated that she had had a difficulty

*It will be noticed in these sketches that the pupils are represented as though they were dilated. This has been done intentionally, so as to better give the configurations of the corneal opacities against a dark background.

with her eyes, which was similar to that of her son's, as long as she could remember.

Utterly free from any evidences of other gross ocular lesion, her corneæ presented the peculiarly circumscribed deep and superficial opacities shown in the lower part of the sketch, they being more irregular in outline, and their central portions much fainter, than those of her son.

The apparent heredity in the two cases is almost certain, when we for a moment consider that here we have a seemingly healthy woman with long-standing, peculiarly-localized, and symmetrically-placed opacities of the cornea, who, although giving birth to an as yet unaffected daughter, has a duplicature of her ocular infirmity directly repeated in an otherwise healthy son; a similarity in two of the most impressionable of blood relations — a mother and son — in whom, in spite of all attempts at solving the problem by the most scrutinizing search into family and personal history, the most careful and extended general and local examination, and the most persistent and prolonged antidyscratic treatment, have so far failed to give any other clue as to the true causative factor.

