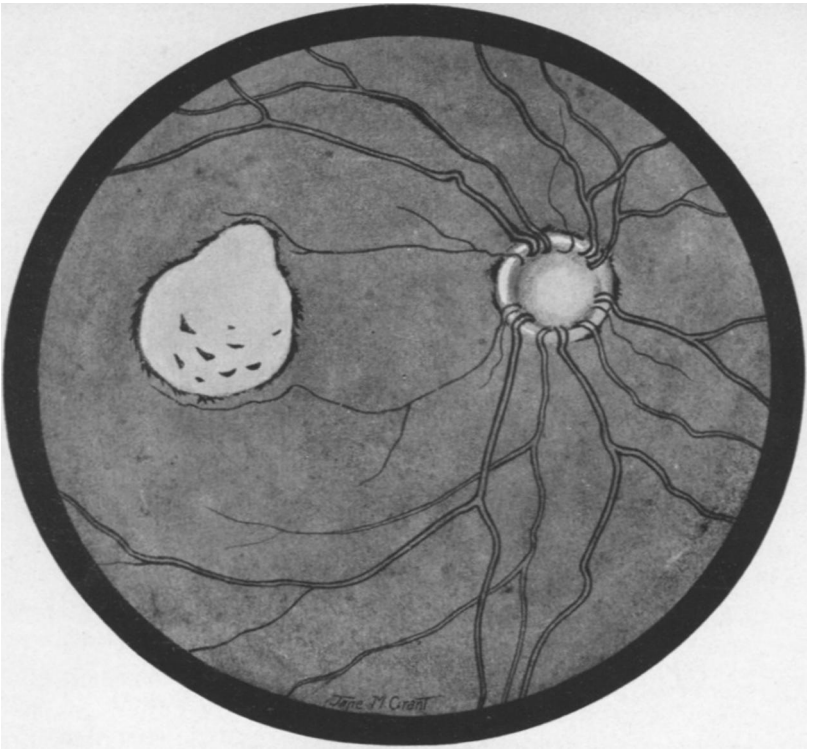
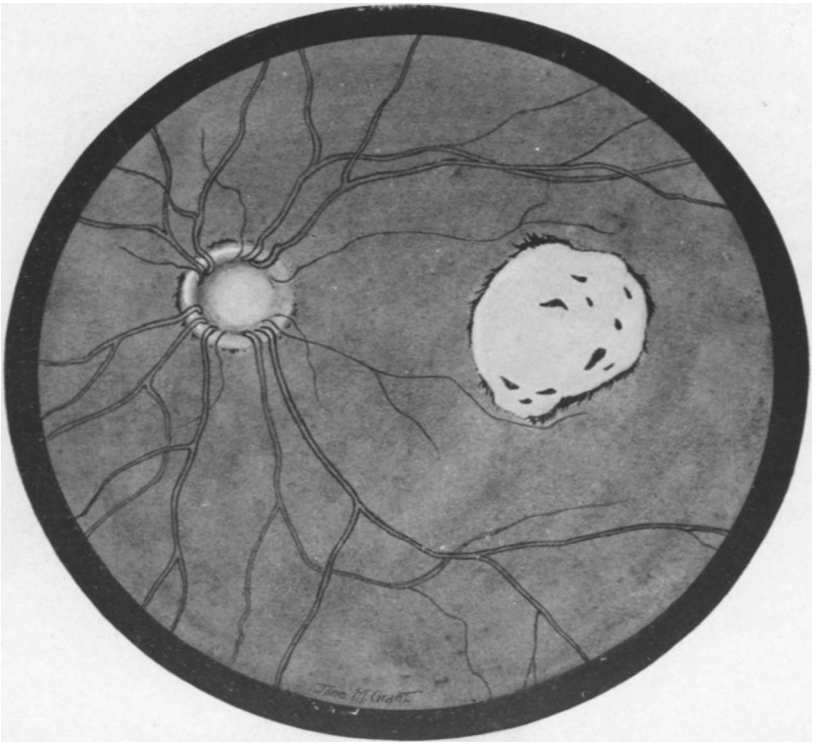
Right eye.



Left eye.



A case of double coloboma of the macula.

A CASE OF BILATERAL MACULAR COLOBOMA.

HOWARD F. HANSELL, M.D.,

Philadelphia.

A boy of eight years of age was admitted to the Jefferson Hospital in December, 1908, on account of defective vision, internal strabismus, and nystagmus. In the macular region and involving the fovea in each eye was a nearly circular patch, about three times the area of the disc and practically symmetrical in the two eyes, surrounded by sharply cut pigmented borders, traversed by one or two retinal vessels, and yellowish white in color, and containing a few blotches of pigment. The optic discs were pale and cupped, the blood-vessels and those of the retina rather smaller than usual. Central vision was abolished, and peripheral vision could not be accurately determined. The remaining parts of the eyes were normal, with the exception of the refraction, which was mixed astigmatism, the prevailing defect hyperopic. There was a moderate degree of internal squint and marked horizontal nystagmus. The head of the boy was larger than the average for his age, and the forehead projecting. He had no other physical deformity. His mind was clear and acute and his body well developed. He was not the child of blood-related parents, and the family has no history of ocular defects or diseases.

The article on colobomata in Parsons' "Pathology," vol. iii, is complete and recent, so that a review of the literature is unnecessary. He says that about forty cases of macular coloboma have been reported, of which seven are bilateral. If future reporters would note the still dubious points in the appearance of the coloboma, such as shape, size, vessels, field defects and refraction, and the family histories and the presence of other defects, clinical data would be collected which would be of value in the further investigation of the subject.