# May 1923

Better Eyesight

A MONTHLY MAGAZINE DEVOTED TO THE PREVENTION AND CURE OF IMPERFECT SIGHT WITHOUT GLASSES

May, 1923

Teach Others

MANY teachers have told me that when they taught Arithmetic the one who learned the most was always the teacher. Some ministers have made the remark that the one who profited mostly by the sermon was the man who delivered it.

For many years my patients who have been benefited by treatment without glasses have to a greater or less extent enjoyed the pleasure of helping others. When you think that you understand how to practice the swing with benefit try to teach somebody else how to do it. If you find palming is beneficial find how many of your friends who are also benefited by palming. But when you meet someone who is not benefited by what you tell them to do, you have at this time an opportunity of helping not only your friend but your own eyes as well. It seems a simple matter for you to close your eyes, rest them for a half hour or so and find that your sight is improved by the rest. However, there are some people who are not benefited appreciably by closing their eyes and resting them. One cause of failure is the memory of imperfect sight. Many patients failed to improve because with their eyes closed they think too much of their failure to see. Patients who have improved materially usually can demonstrate that the memory of perfect sight is restful, while the memory of imperfect sight is a strain. If you have a near-sighted friend who can read ordinary print without difficulty at the near point and without glasses, you can spend an hour or two of activity in showing your friend how to demonstrate while regarding fine print that it is impossible to try to concentrate on a point without sooner, or later making the sight worse, that it is impossible to remember, imagine or see stationary letters, that it is impossible to maintain normal vision with the eyes kept continuously open without blinking.

The Story of Barbour
By W. H. Rates, M.D.

BARBOUR had the best imagination of anybody I ever knew in my life. I believe this is some praise because every day for many years I am teaching patients how to imagine perfectly and while doing so resting their imagination. There may be schools where the imagination is taught but I do not know where to find them and would be pleased to have someone tell me of others who teach memory and imagination. Of course I have read many books which claim to teach people how to remember better, and since memory is very important in obtaining perfect sight I have been very much interested in these books and have read them very carefully to learn what they might contain. Unfortunately I have never been able to learn anything from these books, which was better than my methods.

It might interest my readers to know that some of my patients are teachers of mental science in various schools and colleges. I never found one who had a correct conception of memory and imagination. Many of them had no mental pictures at all. In fact one very prominent professor of mental science, a dean in his department in one of our well-known Universities could not imagine a mental picture of his own signature or imagine a mental picture of a person's face, a mental picture of a flower or any other object. Before I could help his sight I had to teach him how to remember and how to imagine and so when I say that Barbour had a wonderful imagination I feel that it means something.

She was eleven years old and was suffering from alternating convergent squint. She had normal vision and was wearing glasses for compound hypermetropic astigmatism which made her sight worse. When she regarded a small letter on the ten line at twenty feet she said that she could see it when she knew what it was and this was true because when she said that she saw a letter that she knew perfectly she was able to see other letters that she did not know. When there were two letters close together, both unknown and neither distinct she could see both of them when she imagined she saw one after knowing what it was.

She was treated in various ways with temporary benefit for some weeks. She readily demonstrated that resting her eyes, palming and swinging was a benefit. When she regarded a small letter at a near point, about six inches, she could see the white center of the letter O very white and imagine it whiter than it really was, whiter than the rest of the card. She could imagine it moving from side to side not any more than its own width, but when she tried to imagine it was stationary her vision became worse and the letter O was not distinct. When she closed her eyes she would remember the letter O and imagine the white center as white as when she looked at the O with her eyes open. By practice she became able to demonstrate that with her eyes closed she could remember a letter O with its short swing and its very white center perfectly when she imagined one side of an unknown letter correctly. If the unknown letter was a B and she imagined the left hand side to be straight, her memory of the O was perfect. If she imagined the left side was curved or open her memory of the letter O was modified and sufficiently so for her to tell the difference. In the same way she was able to imagine the top was straight, the bottom was straight and the light side was a curve. This description was also that of a letter D. When she imagined incorrectly that the letter was a D her memory of the letter O at the same time was modified. When she imagined the truth that the letter was a B her memory of the letter O still remained perfect. In other words when she imagined the truth of either side of an unknown letter that she had previously regarded without seeing consciously, the letter O remained perfect in her memory. But when she imagined an error, one or more sides of the letter incorrectly she did not remember the letter O so well.

One day I held a page of diamond type, which she had never seen before, ten feet away from her eyes and directed her to look at the top, the middle, the bottom for about a half a minute. She was unable to see consciously a single letter on the page. With the retinoscope she was myopic when she tried to see the fine print but not myopic all the time. By simultaneous retinoscopy her eyes were normal for fractions of a second or longer. I told her mother that the distance was too great for her to read the fine print with her conscious mind but that she saw every letter on the card perfectly with her subconscious mind, and because she saw each letter perfectly she was able, when she closed her eyes, to remember correctly where each letter was located. I asked her to tell me with the help of her imagination the first letter of the fourth word on the tenth line. This she did correctly in the same way as was just described. Then she imagined correctly the second letter of the fifth word on the fourteenth line, a small letter C which was similar to a capital letter C. She was able to imagine many other letters correctly after she was told where they were located. Some letters, as X for example, have all four sides open, and yet in some way she became able to imagine these letters correctly better than incorrectly. The next step, made largely by her own volition, was to imagine correctly the small letters as she already had imagined capital letters. Every day her mother or I co-operated with her in imagining with her conscious mind letters which she only saw unconsciously with her subconscious mind. Her improvement proceeded rapidly until she imagined she saw one letter of a word so perfectly with so perfect a mental relaxation that the imagined she saw the whole word and many words following, one or more lines of letters as quickly as she could at times read them when looking at them at a near point.

The alternating squint disappeared, at first temporarily for a few hours, a few days or longer. She returned home and continued the daily practice of her imagination of letters seen by her subconscious mind. In one of her letters she wrote that after daily practice for forty-four days there was no return of the squint.

Her vision and squint were very much benefited by reading books printed in very fine type. The smaller the print the greater the relaxation of her eyes, and the more was her squint benefited. She became very much interested in reading fine print, and was very anxious to obtain print as small as possible. So I sent her a copy of the photographic reduction of the Bible, in which the print is very small indeed.

The following letter was received:

"Dear Doctor Rates:

Thank you very much for the little Bible. It is the cutest thing I have ever seen. My eyes have been straight forty-four days in succession, and I'm as proud as a peacock.

We only have three Christmas presents wrapped up. I hope you have a merry, merry, merry, Christmas, and a Happy, Happy, Happy New Year.

Love,

Barbour.

Stories from the Clinic
By Emily C. Lierman
A CASE OF DIVERGENT SQUINT

ONE day a young colored woman came to us with her little boy age nine years. Every time she looked at him it was plainly a look of disgust. The boy had the most wistful face I ever saw. He kept looking up into his mother's face and his expression was that of a deaf and dumb person. One of his eyes seemed to be looking a way off to the opposite side of the room while the other eye was looking straight at her. When his other eye turned to look at her the former would turn out in the opposite direction away from her. He had alternate divergent squint. My heart went out to James as his mother related to me the fact that her other three children had normal sight while James looked so horrible with his crooked eyes. A chill went through me when I heard her say, "I wish he had never been born." Then with more disgust in the sound of her voice she said, "I can't help it, but I hate him."

Can anyone imagine a mother disliking her own child so much? All because his eyes were crooked. Complaints came to her from the school he attended. His teacher complained that he was stupid. All this time the little fellow looked up at his mother without moving an eyelid apparently. Her question was, "What can be done with him or for him? Can you give him glasses or operate to cure his eyes?" I told the mother that glasses would never cure his squint and neither would an operation. I asked her to watch carefully and see what James was about to do for me. First, I held him very close to me and patted his woolly head. He pressed a little closer for more. He liked the beginning of his treatment. I asked him to say the alphabet for me, but he said he could not remember all of the letters. He stood ten feet from the test card. I asked him to read, starting with the largest letter at the top. He read a few letters correctly

but I soon found out that he did not know many letters of the alphabet. His mother remarked then that the teacher in school thought his mind was affected because of his eyes and that there was little hope of curing him. I had my doubts about the teacher saying such a thing but I did not say so to the mother. What a pity it was to have the dear little fellow hear all this. He looked so worried and restless. Perhaps he wanted to run away somewhere because his eyes caused others so much trouble. I taught him to palm, telling him to remember a small Bible class pin I was wearing on my dress. In a few minutes I tested his sight with the E card, which is used always in cases where children do not know their letters. At ten feet he saw the fifty line. Again I told him to palm, and asked his mother not to speak to him while he was resting his eyes. In the meantime I attended to other patients. After a few moments I glanced at him and saw two big tears rolling down each cheek. He was weeping silently. His mother was just about ready to find fault with him, but I intervened and walked her gently out of the room to a bench outside the door. I whispered to James that I loved him a whole lot and if he would learn to read his letters at home and could read half of the test card correctly the next time he came, I would give him a nickel. I saw him smile, and when I was able to trust him again I found that his sight had improved to the forty line of the E card. I have been wondering ever since whether it was the Bible class pin on my dress which he was asked to remember or was it a clear vision he had of that nickel I had promised him that improved his sight for the forty line of letters. Two days later James appeared again with his mother and both were smiling. He could hardly wait to tell me that he knew his letters perfectly, this big brother taught him at home, he said, and he hoped I would be pleased as his teacher was, when he read all his letters on the blackboard for her that day.

It was amusing to see James looking toward my purse which was hanging on the wall in the Clinic room. He was thinking of that nickel I promised him. I produced a strange test card which he had not seen. When he began to read the card I placed him fifteen feet away, which was five feet further than the first day. He was so excited that his squint became worse and he could not read. Dr. Rates said his trouble was mostly nervousness. I told him to palm again and reminded him of the letter E with its straight line at the top and to the left, with an opening to the right. Then he became able to see the letters after a few moments' rest. I called Dr. Rates' attention to the sudden improvement in his eyes as he read one line after another until he reached the thirty line, when suddenly his eyes turned out again, but after he had rested his eyes again they became straight. I gave him the promised nickel that day, which made him very happy.

James was able to keep his eyes straight most of the time after he had been coming to the Clinic for a month. The attitude of his mother toward him was decidedly better and she promised to help him with the treatment of his eyes at home. I do not know whether James was entirely cured or not because our work at the Harlem Hospital Clinic has since been discontinued.

Teachers Question Dr. Rates
By Kathleen E. Harty

AS an interesting sequel to the January lecture given by Dr. Rates at Erasmus Hall High School in Brooklyn, there followed a most profitable evening at 300 Madison Avenue, New York City, The January talk was to many such a revelation that some of the teachers were eager for a chance to know more of this remarkable discovery. On April 6th an opportunity was afforded to ply Dr. Rates with questions. About twenty-five teachers from the high schools and a few other friends were present. Practically everyone there had read "The Cure of Imperfect Sight Without Glasses" [link] and so one needed to be convinced of the soundness of the principles involved. Therefore the discussions were largely details of technique, centering mostly about methods with children and particularly in the class-room.

Specifically, Dr. Rates recommended the following procedure:

1. That each teacher hang a Snellen Test Card on the class-room wall. Daily both teacher and pupils should read the smallest letters that can be seen without straining, using each eye separately. He stated that if this course be pursued faithfully over a period of time all eyes would be helped—sight improved and strain prevented.

2. That teachers do as much as possible to re-educate their pupils in the proper use of their eyes. Incorrect habits must be replaced by new correct ones, namely, pupils should be taught that any effort to see produces strain and injures the eyes. They must be taught never to look fixedly at the black-board, teacher's face, or any object. Nor should they ever keep their eyes open for any length of time. The normal eye is always shifting and blinking. Therefore to counteract strain in a child who stares fixedly, simple exercises, such as blinking continuously for a few minutes and swinging should be taught.

3. That children should be informed that if their eyes ache or their sight is blurred, palming is an easy means to get rest and relief.

The final impression left in the minds of those present was that teachers can do a really big work by improving sight and preventing eyestrain so that their children need never have glasses prescribed.

After the conference many stayed to ask further questions of Dr. Rates and to receive help with their own personal problems and difficulties. Some of the teachers were able to testify that they had derived immense benefit from the method. Several stated that they had already abandoned their glasses, with resulting improvement in their eyes.

As an outcome of the meeting ten new members joined the Better Eyesight League.

SPECIAL SPEAKER FOR MAY MEETING

Readers of the BETTER EYESIGHT MAGAZINE will be interested to learn that Mr. Hunted, Superintendent of the Public Schools of North Bergen, New Jersey, will address the League at the May Meeting.

As most of our readers know, Mr. Hunted installed Doctor Rates' method in his schools, and we feel sure that his report will be most interesting, and of especial importance to teachers and parents.

How My Eyestrain was Relieved
By Charlotte Robertson

I HAVE had such wonderful relief by following Dr. Rates' method of treating imperfect sight and eye-strain that I should like to tell of my experience. It may be the means of giving courage to those who suffered as I did, but who hesitate to leave off their glasses. I had worn glasses but my eyes were not benefited. In fact they became worse. I went to Dr. Rates and am pleased to give some of the "exercises" advised by him which I have found very beneficial.

1. The Snellen test card I read upon arising in the morning, at noon and again in the evening, first with two eyes together and later with each eye separately.

2. Palming six times a day or more for a few minutes to half an hour, decreasing the length of time as my eyes improved.

3. I have practiced reading a little fine print daily, also some pages from Dr. Bates' book, "Perfect Sight Without Glasses," [link] which I have always found encouraging. At night on retiring I have used the swing together with central fixation on the small O, and by so doing have lost the wretched strain which I have been conscious of for months, always on awakening in the morning. This exercise consists of swinging the O to the left and seeing the right side best, to the right and seeing the left side best. Also swinging the black period with the O to the left, seeing the period on the right side of the O best, and to the right, seeing the period on the left side of the O best First by the practice of this exercise, also with a soothing swinging motion as that of drifting in a boat in a comparatively quiet sea, I obtained relaxation when falling to sleep. My morning eye strain had completely disappeared and in its place I awake feeling rested, refreshed and ready for the day's work.

Parents' and Teachers' Page
By Emily C. A. Meder

IT is becoming more and more gratifying to us to note the increased activity among school officials, school teachers, and last but in no wise least, among parents, in the promotion of better eyesight in children. The slogan adopted seems to be "an ounce of prevention is worth a pound of glasses."

We are all grasping every opportunity to first, prevent defective vision, and second, to remove glasses from children who already have them.

An incident worth citing occurred in the Central Fixation office recently. A mother came to purchase a Snellen Chart, and with her was a little girl about three. The youngster had a very bad case of squint and wore glasses that almost obscured the little face. We naturally surmised that the card was for the child, but learned that the mother wished it for herself. She told us she had myopia. She never dreamed that the child's eyes could be cured without operation, and was certainly elated when Mrs. Lierman showed her how to treat the little one. Naturally the child was too young to read the chart, so Mrs. Lierman showed her the game of seeing things swing, with the result that at times the child's eyes were perfectly straight.

We are anxiously awaiting the next report from the mother, who was eager to go home and try treating the little girl herself.

A teacher from East Orange has spent all school tradition by having her pupils shift and blink while she is talking to them. She, like others, was under the impression that if her pupils stared at her and did not move, this was indicative of alertness and interestness. However, upon learning of Dr. Bates' method, she has changed the old regime, and she has since informed us that she is more at ease with her class when they are relaxed.

Coinciding with this report is that received from a lady who taught her daughter, who is now ten, to look directly into the eyes of the one speaking to her. The child followed these instructions implicitly, with the result that the little girl strained her eyes so out of focus that her glasses had to be changed every few months. In desperation the mother brought her to Dr. Rates, who immediately changed the stare into a blink. They resumed home within a few weeks, minus her glasses and plus perfect vision. This was mostly due to correcting the stare.

If mothers are at a loss to know where to start, let them watch the children for a short period. They will be surprised to note the prevalence among children of staring. If this is corrected, it is a good step forward.

THE LEAGUE'S NEW HOME!

Those who attended the April meeting of the Better Eyesight League were treated to a novel sensation so far as the League is concerned. The meeting was almost entirely business, as the report by Mrs. Rusk indicates. New Officers were elected and a new program mapped out.

Nothing definite as to the arrangement of the program for the following meetings has been decided, but we know that the officers are going to make these meetings as interesting and instructive as is in their power. One of the new features installed by the committee is to have an interesting speaker at each meeting. We feel sure now, with the League in such capable hands, the work of Dr. Rates will be spread and the fact that eye troubles are curable will be made known to thousands.

Dr. Rates is going to give a lecture or talk before some Osteopath students on Monday, May 7th, at 312 West 72nd Street. As this is to be an open discussion, all are invited, and we hope our readers will take advantage of this good opportunity to hear Dr. Rates speak.

The Better Eyesight League will hold its next meeting on Tuesday, May 15th, and according to all indications it will be held in our new office, at 383 Madison Avenue, corner of 46th Street.

Minutes of The Better Eyesight League
By Fr. R. Rusk, Recording Secretary

THE annual business meeting of the Better Eyesight League was held on April 10th, with Miss Harty in the chair. The chief business of the meeting was hearing the report of the executive committee, the adoption of amendments to the Constitution, and the election of officers for the ensuing year. Mrs. Mabel Potter Daggett, as Chairman of the Executive Committee, suggested the following ways of increasing the funds of the League, enlarging its membership, and widening its influence:

1. Sending printed postal card notices of meetings to all members.
2. Providing membership application blanks for those who express their intention of becoming members of the League.
3. Providing a guest book for non-members who attend meetings of the League.
4. Providing a "Thank Offering Box" for contributions for those who have been cured without private treatment by reading the literature and attending the meetings.

The following amendments to the Constitution were passed :

1. The dues for the League shall include subscription to the Magazine, "Better Eyesight," and shall be three dollars for the fiscal year, except that if there are two or more members of the League in one family, the succeeding members shall pay one dollar and not receive the Magazine.
2. The Annual Business Meeting of the League shall be held the second Tuesday in January.
3. There shall be two secretaries instead of one: Recording secretary, whose duty it shall be to write an interesting account of the meeting and prepare a copy for the Magazine once a month, also to announce in the Magazine a speaker for the next meeting; a corresponding secretary, whose duty it shall be to send out notices of the meetings and to attend to all the correspondence of the League.
4. The President shall appoint a promotion committee whose duty it shall be to solicit new members at every meeting and promote the sale of literature,
5. The President shall appoint a program committee whose duty it shall be to arrange a definite program, including a speaker for each meeting of the League, and to arrange for meetings in schools, churches, offices and private homes.

The following officers were duly nominated and elected:

President—Mr. H. J. Draub.
Vice-President—Miss Kathleen E. Harty.
Recording Secretary—Mrs, F. R. Rusk.
Treasurer—Mrs. William H. Marsdun.
Corresponding Secretary—Dr. L. M. Stanton.

The meeting was then opened for discussion. One of Dr. Rates' patients reported a gradual but steady lessening of eyestrain by palming several times a day and swinging the O. Another member told of the cure of a sty by palming, and Dr. Rates added other interesting cases where serious infections had been reduced by palming.

Among the most important points brought out by Dr. Rates in response to questions were the following:

Squint has never been permanently cured by operation. The only permanent cure is through relaxation of the eyes. An ingenious way of treating a young child afflicted with squint is to let him practice the fox-trot, calling his attention to the fact that the objects in the room seem to move in a direction opposite to that in which he is dancing.

GERMANY PAVES THE WAY FOR PERFECT SIGHT IN NEXT GENERATION
By M. E. Marvin

IN every mail we have evidences of the way Dr. Rates' work is being spread all over the world. We have not only "book patients" and magazine subscribers in Europe, Asia, Africa, etc., but doctors treating imperfect sight according to Dr. Rates' method. These doctors are not among those who have studied under Dr. Rates but who have analyzed the book and with the aid of the many reprints which have appeared in the various medical journals are enabled to carry on the good work. Apropos of the above we have a very interesting piece of news for our readers.

About a week ago a reporter from the Universal Service Staff called at our office to learn about Dr. Rates' work. She said that Norman Haggood, Editor of Heure International, who is in Europe now for the purpose of getting inside information on the political and economic situations, had cabled the Universal Service of an interesting discovery which he made incidently. This was, that while visiting the schools and soup kitchens in Germany he saw altogether only one child wearing glasses. Upon asking the reason of this he was told that the authorities are taking glasses off children all through Germany and that they were acting in this under pressure of the oculists. Mr. Haggood was also told that this method originated in America. The reporter for the Universal News traced the origin to Dr. Rates, hence her request for further details.

Do you realize what this means? Germany, the very source from which the old theories governing our ophthalmologists originated, has at last accepted the only method of curing imperfect sight. Norman Haggood says, "While fully accepted in Germany it is spreading slowly in America where in time it is bound to be recognized and to be universally practiced." Why isn't the discoverer so honored by his own country?

The Question Mark

Salt Lake City, Utah.
Question—Am forty-nine years of age and have had to wear glasses for five years, due to gradual weakening of the eyes. Is this curable? S. J.

Answer—Old age sight is curable, and you can discard your glasses by following the methods as outlined in the book, "Perfect Sight Without Glasses." [link]

Chicago, Ill.
Question—My father, eighty-three years old, has cataracts on both eyes. Can you help him? E. C. V.

Answer—Without personal supervision, cataracts are very hard to cure. Would advise his coming to New York. I can cure him. In the meantime, read the chapters on Cataract in my book and he will get a great deal of relief.

New York City.
Question—Why are books for small children printed in large type? P. E. S.

Answer—Because Boards of Education have not yet learned that it is a strain for anyone to look at big print and a relaxation to read fine print.

San Francisco, Cal.
Question—I cannot gaze into the sun without discomfort. Do I do it incorrectly? K. Johnson.

Answer—Read Chapter XVII in the book. Do not gaze into the sun but at each side of it alternately. In this way you not only swing it, but allow the rays to shine on the eyes. This is a great benefit.

Answer—New York City.
Question—Am practicing the methods in your book to cure myopia and astigmatism. Sometimes, for short periods, I see perfectly, then things fade away. Can you explain this? M. E. S.

Answer—This is what we call getting flashes of perfect sight. With continued practice these flashes will come more frequently and eventually will become permanent. Then you are cured.

Previous Issue
THEWORTHWHILEPrev Issue
THEWORTHWHILENext To Contents Page