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Better Eyesight

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

August, 1921

CHILDREN MAY IMPROVE THEIR SIGHT BY CONSCIOUSLY DOING THE WRONG THING

Children often make a great effort to see the blackboard and other distant objects in school. It helps them to overcome this habit to have them demonstrate just what the strain to see does.

Tell them to fix their attention on the smallest letter they can see from their seats, to stare at it, to concentrate on it, to partly close their eyelids—in short, to make as great an effort as possible to see it.

The letter will blur or disappear altogether and the whole card may become blurred, while discomfort or pain in the eyes or head will be produced.

Now direct them to rest their eyes by palming. The pain or discomfort will cease, the letter will come out again, and other letters that they could not see before may come out also.

After a demonstration like this children are less likely to make an effort to see the blackboard, or anything else; but some children have to repeat the experiment many times before the subconscious inclination to strain is corrected.

SIGHT-SAVING IN THE SCHOOL-ROOM

By Edith F. Gavin

It seemed so wonderful to me to be able to lay aside my glasses and have eye comfort after wearing them for twenty-two years with discomfort the greater part of the time! I could scarcely wait to get back home to talk to the other teachers about it and try to help a few of the children.

I began with Gertrude, who was so nearsighted that from a front seat she was unable to see very black figures one and one-half inches high printed on a white chart and hanging on the front board. Her vision on January 11, 1921, was 20/70 in both eyes, but by March 10th she had improved to 20/70 with the right eye and 20/30 with the left and could read the chart from the last seat in the row. Matilda had complained of headaches since last September. Glasses were obtained last December, and after a two months' struggle to get used to them, she refused to wear them, saying that they made her head and eyes feel worse. I then told her how to palm and practice with the chart. She had no more headaches in school, and her mother said she didn't complain at home. Her vision also improved from 20/30 to 20/15.

I next took Walter in hand. His mother would not get glasses for him, although advised to do so by the school nurse and doctor. His vision February 18th was 20/200. Three weeks later his mother decided to get glasses for him, but his vision had improved to 20/20 in the right eye and 20/30 in the left.

Helen's teacher brought her to me, saying she was so nervous and read in such a halting manner that she felt sure that her glasses did not fit her. Her mother said that she might lay aside her glasses and Helen could hardly wait to begin. Shortly after, she was taken ill with scarlet fever and did not return, but her vision improved from 20/40 to 20/15, and her teacher said that her reading had improved noticeably.

Mollie, age six, was sent in to me February 18th. She tested 20/70 in the right eye and 20/50 in the left. Her vision in May was 20/30, right, and 20/20, left.

When Rae came to my room on May 15th, her vision was 20/70. Her father was very much opposed to her wearing glasses and readily gave permission for me to help her. She remained in the district only two weeks, but she had improved to 20/20 in the right eye and 20/30 in the left.

Bennie, mentally defective, required a great deal of patience, but he improved from 20/50 February 9th to 20/15 March 4th.

Leo, a fifth grade pupil, was sent to me February 20th by his teacher. She said he wouldn't wear his glasses and was a poor student. He tested 20/50 in the right eye and 20/30 in the left. By March 15th his vision was 20/30, right eye, and 20/15, left, and his teacher said that he showed a marked improvement in his scholarship.

The children needing help came to me fifteen minutes before the afternoon session began. If I was busy with one, the others would work quietly by themselves, seeming to take great pride in their improvement. The chart hangs on the front wall at all times. I taught the class how to palm and often different ones would come up early to practice. Several children with apparently normal vision told me that they were able to read two or three lines more at the end of the term. To my mind there is no limit to the good that might be accomplished if this method were in general use in the schools.

MY EXPERIENCE IN TREATING MYOPIA

By Irene Kundtz

Having worn glasses constantly for seven years and then, after a week's treatment, returning to school without them, not only caused great excitement amongst my school friends, but began my experience in trying to benefit others. It was then that I really realized what a wonderful thing it was to have perfect sight and never again wear glasses.

My first patient was my chum Margaret, who roomed across the hall from me. She was now fifteen years old and had worn glasses ever since she was a small child. With her glasses off she could faintly see the large letter C. So I immediately taught her the correct way of palming. This not only interested her but my two roommates also, for the blacker they imagined a cat or a period, the better they could read in the dim light. After palming for at least ten minutes she looked up and was greatly surprised to see the large C much blacker and more distinct. Then I gave her a card with diamond type and taught her to swing the little black figure I. This was something new for all three girls, and soon I found myself treating three patients instead of one. Swinging seemed rather difficult to them until they tried moving their heads from side to side, in this way getting a short, easy swing of a quarter of an inch or less. As our time was very limited at the dormitory I was able to work with Margaret for only a half hour, but in that short time she read three letters at a distance of fourteen feet.

This was a great new game for me, and when her first treatment was over she promised to come again the next evening, and a little earlier if possible.

The news of Margaret being able to read three letters on the Snellen test card spread through the dormitory very rapidly, and the next morning before school I had two other girls ask if they might join the class. I was indeed glad to have them and could hardly wait until evening to resume my fascinating work.

My two new patients were both fourteen years old and had worn glasses since the second grade. As my roommates were out visiting we were able to work for forty-five minutes in peace, and each became more anxious to beat the other, for with their glasses off they could read through the seventy line. While I taught them how to palm, Margaret was practicing at swinging the figure 1 and working at the first letter in the following line, but nothing seemed to give her as much rest and benefit as palming. So after helping her she would palm again while I took care of the other two girls. At the end of forty-five minutes we had made quite a little progress, Margaret having read through the seventy line by palming alone, and the other two girls through two letters in the fifty line.

Having succeeded in helping three of my girl friends, I next began to talk to some of my teachers who had worn glasses from ten to fifteen years. But teachers as a rule are very busy correcting papers, etc; so not being able to treat them as well, I lent them Dr. Bates' book called Perfect Sight Without Glasses [link], and found to my great delight that it worked just as well, for it not only gave them a start but interested their friends also.

Thus I continued giving treatments, sometimes for only fifteen or twenty minutes an evening, but every little bit helped and each treatment brought me more patients, and gave me more joy and courage to continue.

After treating Margaret for a week, for she was my best patient and really made the most progress, she was able to read through the 50-line, and would have continued to improve more rapidly had she been able to go to school without her glasses.

My experience in treating myopia lasted only two weeks, for at the end of that time examinations began and my evenings were occupied with studies. Helping and treating others was not only very interesting work, but was also benefiting me in continuing my daily practice.

STORIES FROM THE CLINIC

18: The Schoolchildren Again

By Emily C. Lierman

We have so many interesting cases among the children sent to us from the schools to be fitted with glasses that one hardly knows where to begin when trying to tell about them, Little Agnes, eight years old, comes to my mind, not because she was more remarkable than a good many others, but because she came recently. Her mother came with her and told me that Agnes suffered from

frequent headaches and that for the past year her teachers had been saying that she needed glasses, as she had great difficulty in seeing the blackboard. His mother had hesitated to take her to an oculist, however, as two of her children were already wearing glasses and she did not want to see them on a third.

I could easily see that Agnes was suffering, and when I tested her eyes with the Snellen test card I found that her vision was very poor. At fifteen feet she could not read more than the seventy line. This was so surprising in so young a child that I thought at first she did not know her letters; but when I tested her with pothooks she did no better. I now showed her how to palm, and in a few moments she read the bottom line. The mother was thrilled and said:

"My goodness? When I first entered this room my hope was gone. I could think of nothing but glasses for my child. When she first read the card and I saw how bad her eyes were, I was convinced that there was no escape for her. But now that I see her vision improved so quickly I have hope indeed."

I told the mother that I was thrilled myself, and added that she could help me to cure the child if she would.

"What I do for her here you can do for her at home." I said. "Encourage her to rest her eyes. Nature requires rest for the eyes, but your little girl, instead of closing her eyes when they are tired, strains to keep them open."

The mother promised to do all she could, and as she was leaving she said:

"God sent me here. I will send my two boys to be rid of their glasses also."

The next clinic day Agnes brought with her brother Peter, who was wearing glasses for astigmatism and headaches. He was very attentive while I treated Agnes, who told me that she had not been having her usual headaches. Peter's vision I found to be 15/40, right eye, and 15/15, left eye. After palming only a few minutes his right eye improved to 15/15 and his left to 15/10. He was very happy when told that he did not need glasses any more, and that I could cure him during vacation. As children are cured very quickly when one helps the other at home, I expect that Agnes and Peter will soon be reading 20/10, which is twice what the normal eye is expected to do.

Another recent patient was Mary, a colored girl, twelve years old. She complained of such violent headaches that she could no longer attend school and stayed in bed most of the time. The school nurse had advised glasses, and she had come to get them. Mary kept her head lowered much of the time, but when I was about to treat her she tried to open one eye and look at me. The effort was so great that her face became a mass of wrinkles. As the light seemed to distress her, I decided to give her the light treatment, that is, to focus the rays of the sun on the upper part of her eyeballs with a glass. I asked her to sit on a stool where the sun could shine on her eyes. To reassure her I asked a patient who had already had the treatment to let me repeat it on her, and when Mary saw her enjoy the light bath she readily submitted to it herself. Afterward her eyes opened wide and I was able to test her sight. Her vision was 20/50, both eyes, I showed her how to palm, and when, after ten minutes, she opened her eyes, her pain was gone and her vision perfect. I was quite proud to have accomplished so much in one treatment.

Two days later Mary came again, and with her came the school nurse and a friend, both eager to hear more of the miracle that had been worked on Mary. Could it be possible, the nurse asked, that the child had been cured as quickly as she said? I was surprised myself at the change in the patient's appearance. Her eyes were still wide open, and the constant grin on her face made her almost unrecognizable as the sad creature I had seen two days before. I told the nurse what had been done for the child and how she could help the other children in her school who had eye trouble. She came a few times more to watch our methods and told me that she was teaching all the children sent to her for examination of their eyes to palm. This always relieved them, to some extent, at once. The hard cases, however, she sent to us without delay.

A very remarkable case still under treatment is that of a girl with nystagmus, a condition in which the eyes vibrate from side to side. The child is now so much improved that ordinarily her eyes are normal, but when anything disturbs her the vibration returns. This always happens, she tells me, when the teacher asks her a question, and at the same time she loses her memory. But the teacher allows her to cover her eyes to rest them, and in a few minutes the vibration ceases and her memory improves. Before she came to the clinic she often became hysterical and was obliged to leave the classroom. Now she is never troubled in this way.

One of the most puzzling cases I ever had was sent by the school nurse for glasses. A patient who came from the same school told me that she was stupid, and she certainly appeared to be so. I asked her if she knew her letters, and in trying to reply she stuttered painfully. I tried to reassure her by speaking as gently as I could, but without avail. I could not get her to answer intelligently. I tried having her palm, but it did not help. I held the test card close to her eyes and asked her to point out certain letters as I named them, but only in a few cases did she do this correctly. Completely baffled I appealed to Dr. Bates. He asked the child to come to him and touch a button on his coat, and she did so. He asked her to touch another button, but she answered:

"I don't see them."

"Look down at your shoes," he said. "Do you see them?"

"No," she answered.

"Go over and put your finger on the doorknob," he said, and she immediately did so.

"It is a case of hysterical blindness," the Doctor said

The child came for some time very regularly, and now reads 15/10 with both eyes. She has stopped stuttering and has lost her reputation for stupidity. She has become a sort of good Samaritan in her neighborhood, for every once in a while she brings with her some little companion to be cured of imperfect sight. She never has any doubts as to our capacity to do this, and so far we have never disappointed her. I hope she never brings anyone who is beyond our power to help, for I would be sorry to see that sublime faith which we have inspired in her shattered.

Two of our patients graduated in June, and after the final examinations they told me that they had been greatly helped in these tests by the memory of a swinging black period. One of them was told by the principal that if she failed to pass, it would not be because of her stupidity but because she refused to wear glasses. She gave him Dr. Bates' book, and after that, though he watched her closely, he did not say anything more about her eyes.

"I made up my mind to pass without the aid of glasses," she said, "and put one over on the principal, and you bet I never lost sight of my precious swinging period. The book has become a family treasure," she continued. "When one of us has a pain in head or eyes, out it comes. It is a natural thing to see mother palming after her work is done. She enjoys her evenings with us now because palming rests her and she does not get so sleepy."

The other graduate said: "I did not have to think of a black period when the subject was easy, but when I had to answer questions in the more difficult branches I certainly did find the period a lifesaver. I know I would have failed without it."

BETTER EYESIGHT IN NORTH BERGEN

18: The Schoolchildren Again

By M. F. Husted

Superintendent Public Schools of North Bergen, N. J.

"Better Eyesight" takes great pleasure in presenting to its readers this remarkable report of the results attained in the schools of North Bergen by the use of the Snellen test card. It is an extract from the fourteenth annual report of Superintendent Husted

Early in October, 1919, under the direction of our school nurse Miss Marion McNamara, a Snellen Test of the eyes of all of our pupils was made. A novel health experiment was begun, a campaign for "Better Eyesight." In June a second test was made in order to verify the value of progress in this phase of health work. The June test of 1920 shows marvelous, practical, successful results. Only the skepticism of principals, teachers and pupils and lack of faithfulness in carrying out its conditions, prevented the wonderful results achieved from paralleling those of an Arabian Knight's story.

A Snellen test card was placed permanently in the room. The children were directed to read the smallest letters they could see from their seats at least once every day, with both eyes together and with each eye separately, the other being covered with the palm of the hand in such a way as to avoid pressure on the eyeball. Those whose vision was defective were encouraged to read it more frequently, and in fact needed no encouragement to do so after they found that the practice helped them to see the blackboard, and stopped the headaches, or other discomfort, previously resulting from the use of their eyes.

In 1911 and 1912 the same system was introduced into some of the schools of New York City¹ with an attendance of about ten thousand children. Many of the teachers neglected to use the cards, being unable to believe that such a simple method and one so entirely at variance with previous teaching on the subject, could accomplish the desired results. Others kept the cards in a closet except when they were needed for the daily eye drill, lest the children should memorize them. Thus they not only put an unnecessary burden upon themselves, but did what they could to defeat the purpose of the system, which is to give the children daily exercise in distant vision with a familiar object as the point of fixation. A considerable number, however, use the system intelligently and persistently, and in less than a year were able to present results showing that of three thousand children with imperfect sight over one thousand had obtained normal vision by its means.

The following summary shows the remarkable results of the North Bergen experiment in the use of the Bates System. The first grades are omitted because of the difficulty in making accurate tests.

Grades II to VIII

Schools

No. Tested

No. Below 20/20 Normal Standard

No. Absent 2nd Test

No. Below Im-proved

Per Cent Im-proved

Grant

72

36

30

83.3

Robert Fulton ..

359

112

11

76

75.2

Franklin

341

103

17

53

61.6

Lincoln

388

169

21

103

69.4

Hamilton

211

78

12

48

72.7

Jefferson

526

216

33

109

59.5

Washington

353

184

11

107

63.4

Horace Mann

335

96

5

66

72.5

McKinley

144

75

17

55

94.8

Totals

2729

1049

127

647

70.1

This is a remarkable demonstration of the priceless values of this method of treatment. That 647 or 70.1% of the 922 pupils below normal (20/20) should have been improved in eyesight is a truly marvelous showing. The record of improvement is suggestive of what a very faithful and systematic application of these health principles may accomplish.

Not only does this work place no additional burden upon the teachers, but, by improving the eyesight, health, disposition and mentality of their pupils, it surely lightens their labors.

QUESTIONS AND ANSWERS

All readers of this magazine are invited to send questions to the editor regarding any difficulties they may experience in using the various methods of treatment which it recommends. These will be answered as promptly as possible, in the magazine, if space permits, otherwise by mail. Kindly enclose a stamped, addressed envelope.

Q.—(1) Does working by artificial light affect the eyes? I work all day by electric light—am a bookkeeper, and suffer a great deal from my eyes. I have been fitted with glasses, but cannot wear them. I feel that my eyes, instead of getting better from wearing them, get weaker. (2) When I go out in the street after working I cannot stand the glare of the sun, and must keep my eyes half-closed; otherwise I suffer a great deal of pain. Is it so because of my eyes being accustomed to the artificial light? It is not so on Sundays. (3) Is it advisable to wear an eye-shade while working?—S. S.

A.—(1) Working by artificial light should not injure the eyes. If it does, it is because you are straining them. The idea that the light is injurious may cause you to do this. If you think of it as quieting and beneficial, it may have the opposite effect. You are right in thinking that the glasses injure your eyes. (2) The sun hurts your eyes when you go out on the street after working because you have been straining to see, not because you have been working by artificial light. Because you strain less on Sundays the sun does not hurt you. (3) It is not advisable to wear an eye-shade while working.

Q.—Can the blindness of squint be cured?—F. C. E.

A.—Yes. It can be cured by the same methods that are employed to relieve strain in other cases of imperfect sight.

Q.—Do you get as much benefit from gazing at the sun through a window as you would outdoors? I have read that it did no good to take a sunbath through glass.—E. C. H.

A.—Yes. The strength of the sunlight is not appreciably modified by the glass.

1. Bates; Myopia Prevention by Teachers, N. Y. Med. Jour., Aug. 30, 1913 [link]

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