

April 1922

Better Eyesight

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

April, 1922

IMPROVE YOUR SIGHT

ALL day long use your eyes right. You have just as much time to use your eyes right as you have to use them wrong. It is easier and more comfortable to have perfect sight than to have imperfect sight.

Practice the long swing. Notice that when your eyes move the great distance rapidly, objects in front of you move in the opposite direction so rapidly that you do not see them clearly. Do not try to see them because that stops the apparent movement.

Rest your eyes continually by blinking, which means to open and close them so rapidly that one appears to see things continuously. Whenever convenient close your eyes for a few minutes and rest them. Cover them with one or both hands to shut out the light and obtain a greater rest.

When the mind is awake it is thinking of many things. One can remember things perfectly or imagine things perfectly, which is a rest to the eyes, mind and the body generally. The memory of imperfect sight should be avoided because it is a strain and lowers the vision.

Read the Snellen Test Card at 20 feet with each eye, separately, twice daily or oftener. Imagine white spaces in letters whiter than the rest of the card. Do this alternately with the eyes closed and opened. Plan to imagine the white spaces in letters just as white, in looking at the Snellen test card, as can be accomplished with the eyes closed.

Remember one letter of the alphabet, or a part of one letter, or a period, continuously and perfectly.

THE LEAGUE IS FORMED

Less than six weeks after its first proposal the Better Eyesight League began to function. It is to regular readers of the magazine that the League extends its first urgent invitation to membership.

THE Better Eyesight League was formally organized March 8th.

Some thirty former and present patients of Dr. Bates gathered in his laboratory office that day and enthusiastically adopted a constitution and by-laws bringing into existence a permanent body for the promotion of better eyesight everywhere.

Not merely was the League definitely formed, but the spirit of devotion and eagerness which called it into being and which is destined to give constant motive power was crystallized into unmistakable expression. The League is not merely a paper organization—it is a living, active and determined thing.

The thirty persons actually present at the formation of the League represented three times their own number. Letters and telegrams were received before the meeting from about one hundred men and women in all parts of the country, asking for enrollment as charter members of the League. Most of these letters and telegrams conveyed the same spirit, in addition to the mere formal request for enrollment, that characterized the organization meeting as almost an evangelical gathering—for it was made clear there, that there can truly be an evangelism of better eyesight.

The constitution adopted provides for a Board of Directors of nine, from which the President, Vice President, Secretary and Treasurer are chosen, and for an Executive Committee of five, comprising these four officers and one additional member of the Board of Directors appointed by the President.

The League's First Officers

The charter members present elected Miss Rose O'Neil, the celebrated illustrator, as the first President of the League, Roberts Everett was elected Secretary, and Mrs. E. C. Lierman, Treasurer.

The Directors chosen included, besides the officers, Mr. James Hopper and Mrs. Mable Potter Daggett, both very well known magazine writers, Miss Portia Creed, Dr. C. P. Bennett and Ross Varney.

It was unanimously voted that BETTER EYESIGHT be made the official organ of the League and this designation was accepted by the magazine. In return for this monthly representation of the League it was voted that \$2.00 of each member's dues received by the League be transmitted to the publishers of the magazine, to cover an annual subscription for that member. The dues of the League were fixed at \$3.00 a year for each member.

The constitution provides for monthly meetings. The next of these will be held in Room 504, 300 Madison Avenue, New York City, at 41st Street, at 4 o'clock in the afternoon, April 12th.

The founders of the Better Eyesight League are almost without exception readers of BETTER EYESIGHT. To those readers of the magazine who have not enrolled themselves as charter members, the League extends its first and most particular invitation to membership. As the new "masthead" of the magazine proclaims, it is now the monthly representative of an organization devoted to the advancement of that knowledge which has so benefited the great majority of the readers of BETTER EYESIGHT—the knowledge of the possibility and the methods of the prevention and cure of defective vision without glasses

The League has already announced in a letter to its membership that "as a true missionary of better eyesight the League will soon begin a campaign of education among the school children, physicians and general public, in which you, as an active member, can greatly help." Every reader of BETTER EYESIGHT should be aligned in this great missionary work which the League is undertaking.

Won't you, if you are not already enrolled, send in your name today as a member of the Better Eyesight League?

HOW WE SEE

By W. H. Bates, M. D.

In this, and its companion article, "The Illusions of Perfect Sight," Dr. Bates recounts the mysterious part that imagination plays in vision. For this, as well as for the physiological facts recited, no one interested in the bases of a perfect sight should fail to read these pages.

THE theories which have been advanced by numerous writers to explain how the eye sees have all been proved to be imperfect or wrong. Mathematically and according to all the laws of Optics, since every object seen is focused on the retina, upside down, we ought to see things upside down. Why not? If the head is tipped to one side or at various angles objects seen are still in their proper place as before. You can stand on your head and see things right side up. According to all the laws, I believe when we see things right side up we are trifling with the, exact science of optics.

It tired me exceedingly to read some of the numerous explanations offered of how we see, and they seemed all wrong. When someone found in the retina a fluid which surrounded some of the cells it was described as Visual Purple. The assumption was made that a chemical change took place in the visual purple which altered its chemical composition and produced an effect on the cells of the retina. In this way the nerve of sight was stimulated or irritated and the message carried to the brain. There has been a considerable amount of argument about this visual purple and it is difficult to find two of the authorities who agree on the action of the visual purple.

The eyeball has been compared to a photographic camera. When one takes a picture of an object at a near point the bellows is lengthened or a stronger lens is used, but, when the camera is focused to take pictures of distant objects the bellows is shortened or a weaker lens is used. Helmholtz, a great student of the eye, a scientist of world-wide fame, during his studies of the eye jokingly said that the human eye is made very imperfectly and that he believed he could make a better one by artificial means.

Physical Structure of the Eye

The eye is about one inch in diameter. It has a coat in front called the cornea, which is a part of the outside coat called the sclera. Behind the front part of the eye is a cavity containing a fluid resembling water in its density. The colored part of the eye, called the iris, is a thin vertical curtain lying at the bottom of this front cavity. In the center of the iris is an opening called the pupil which appears an intense black. The size of the pupil varies, in different conditions. Back of the iris is a firm gelatinous body called the lens. Back of the lens is a larger cavity filled with a dense fluid, and then comes the retina which is connected to the brain by the nerve fibres of the optic nerve.

In order to see it is important or necessary that the eye should be focused properly for objects at different distances. This change in the focus has been ascribed at times either to the action of the cornea or lens. Arlt advanced the theory that the change in the focus of the eye was brought about by a change in its length, as occurs with the ordinary photographic camera. Arlt, later, apologized for his theory, because V. Graefe and public opinion were too strong for him.

I have proved that Arlt was mainly right while V. Graefe was all wrong in this matter. The eye with perfect sight sees many illusions. The eye with imperfect sight sees more and different illusions. I have published a list of the illusions of perfect and imperfect sight. One cannot explain these illusions by mathematics, by chemistry or by the anatomy or structure of the eye. A blind man will tell you, if you let him, a long list of the marvels of color, forms, and objects which he often sees. I cannot escape these details, I must listen. Other doctors do not have to, but I must listen in order to keep up the hope of the patient. Hope is quite essential when you start out to cure a patient with imperfect sight. The very illusions that blind people have are a benefit in the treatment. To discourage their imagination is a crime, I now firmly believe. Why? Because the imagination when properly controlled cures blindness.

The Potency of the Imagination

Too often people look on imagination too lightly, too carelessly. They do not realize the importance of the imagination when it can be used beneficially or harmfully. One reads stories of people who have been killed by the force of their imagination, by practical jokers who made them believe that they were bleeding to death with some warm water flowing down their neck, dripping into a pail. People lying in bed not expecting to recover, have at times accomplished what seemed to be impossible, and with the help of their imagination recovered completely. These facts should be investigated, studied, realized, because we can explain all the phenomena of how we see by the imagination. All the illusions of perfect sight, all the illusions of imperfect sight are imagined and not seen.

The imagination may do good or it may do harm. The imagination of perfect sight is capable of curing all errors of refraction and all diseases of the eyes. A person with a cataract who is able to imagine perfect sight with his eyes closed or with his eyes open will recover and the cataract will disappear. How, where or why I do not know. All that has been written in all the books on physiological optics on how we see is full of error because so much of it is a guess or a theory. By realizing that what we see is only what we imagine is a great help in our treatment of the various diseases of the eyes, and the more thoroughly we realize the importance of the imagination the better become our results.

The Illusions of Perfect Sight

How do we see things perfectly?

"When the eye with normal vision regards a letter on the Snellen Test Card at twenty feet it sees the point regarded best and all other points not so well. It can see the first letter of a line blacker than the second or other letters on the same line, because of central fixation, the ability to see best where the eye is looking.

Yet this is an illusion, because all the letters of the Snellen Test Card are printed equally black, equally clear. The photographic camera will take a picture of the whole card with all the letter equally black.

With normal vision it can be demonstrated that the eye sees the white part of letters or the background in the neighborhood of the letters whiter than the margin of the card or whiter than it really is. This is an illusion.

We do not see illusions; we only imagine them. If we can realize that the imagination is the principal factor of how we see and prove it to the patients the results from treatment of imperfect sight become very satisfactory.

OPERATIONS AT THE CLINIC

By Emily C. Lierman

SO many of our office patients have asked me if Dr. Bates approves of operations on the eye or if he ever does operate for cataract or other conditions. Others wish to know if there is a little Christian Science or something else mixed with our method of treatment. As I do not understand or know anything about these other things, I would like our readers to know at least that Dr. Bates always does operate on the eye when it is absolute necessary. I have been assisting Dr. Bates for almost eight years and during that time I have helped him when he operated either at his office or at the clinic. These operations have been done without pain or discomfort to the patient.

My memory goes back to four years ago when there came to the clinic a dear old Italian woman, eighty-three years of age, accompanied by her daughter who was just about to become a mother. The daughter had already made arrangements with the hospital upstairs and the newcomer was expected most any day. The daughter was very anxious that her mother should not suffer while she herself was away from home, so she appealed to Dr. Bates and to me that her mother might be operated on, and asked Dr. Bates to please do the operation himself.

Of course such things can be taken out of our hands entirely if we send the patient into the hospital. But if it is at all possible to send the patient home immediately after the operation, Dr. Bates in his gentle way always asks me if I would mind staying just a few minutes longer so that he can do the operation himself and so take away the fear and dread that some of these poor patients have of a strange doctor.

Smiles as for a Party

This dear old woman, who had the kindest face and sweetest expression of any old woman I have known, smiled as though we were arranging a party for her. She did not seem to mind in the least as we placed her on the operating table. Most patients sigh and show traces of fear, which is natural for I dread operations myself, and I know how it feels, but she looked at me with kindly eyes and smiled and you can be sure I returned that smile in full measure. She in turn looked at her daughter who stood on the opposite side of her and as she smiled at me again she said something in Italian which of course I did not understand. Her daughter very promptly translated to me what her mother said. As I can remember, these were the words: "She say, 'You nice da lady, you bigga da heart. She lovva you, she no afraid.'" I pressed the mother's hand gently and would also like to state that I kissed her.

Now I would like to say that the operation was necessary for the lower eyelid of her left eye was inflamed and swollen from an abscess of the left tearduct. For a long time she had been coming faithfully to the clinic, but her condition gradually became worse so that there was nothing else to do but to relieve her by an operation.

She had the same smile and the same loving words for Dr. Bates when he began to operate. Not once did I hear her moan. When she wished to be reassured, all she did was to press my hand. Such courage is indeed wonderful. The operation was accomplished without pain under cocaine anesthesia. Two days later she again came to the clinic with her grandchild, a girl about ten years of age.

She stood among the patients waiting for attention and when I came to her to ask her how she felt, she told her grandchild to tell me that she had slept peacefully the night after the operation, better than she had for a long time. The grandchild informed me that upstairs was a new baby brother and that mother was doing fine and that grandma wanted me to know that she had placed a candle in church which was blessed for Dr. Bates and me in appreciation of what we had done for her. Grandma soon got well and that was the last we saw of her.

Another day a young woman who was troubled with chalazion tumors was also operated on at the clinic. I believe if this poor woman owned the whole of Panama we might have had it, but we would have had to go after it. So many different things were never promised to us by one single patient. I cannot say that she behaved as well during the operation as did the dear old Italian woman, but any way we had a lively time of it while the operation was going on. She suffered no pain but she talked a blue streak. She informed us that her husband was employed on a ship that made regular

trips back and forth to Panama and that we were going to receive the most wonderful fruits that we had ever tasted in our lives. Then she asked me if Doctor wore Panama hats during the summer, but Dr. Bates got ahead of me and promptly answered himself, "Sure." said he, "never in my life could I afford a Panama hat." "Well," said she, "kindly tell me your head size and I will see that you will wear one." Then she asked me if I would like to have one also. "Of course." We were finally told that within two weeks or so we would be presented with our Panama hats. The time of this operation was two years ago and we are still waiting for our Panama hats. Put I really feel that this poor woman had all the best of intentions and I hope that her husband is still making his regular trips to Panama. Recently a young man entered the clinic with a small baby in his arms. Anxiety and worry showed in his face and he looked as if he had not slept for a week. As the baby was crying continuously Dr. Pales immediately stopped his work with other patients to attend to the little one. This young father told the Doctor with tears in his eyes that for five days and nights the baby never stopped crying and that its mother had taken the child to another clinic where the doctor told her that the child had a cold in his eye and that drops applied in the eye would soon cure the baby. As Dr. Bates placed the baby on his lap the father asked, "Please Doctor, don't tell me that the baby has a terrible disease of his eye and that he might lose it; please tell me you can help him." I held the baby's head firmly in my hands and as the doctor carefully examined the eye he found a foreign body, perhaps a piece of steel, firmly embedded in the cornea. In less than five minutes it was out and the baby stopped crying. The baby was placed in his father's arms again and the father was told the baby was alright. As he passed out the door he turned and said, "Thank you. Doctor, from the bottom of my heart." Dr. Bates turned to me and said, "Did you hear that? That 'Thank you' came from the man's heart and it is worth a great deal to me because he meant it."

TO A PATIENT
By L. M. Stanton, M. D.

These words of instruction and encouragement have a message not only for a single patient of Dr. Stanton's, but for everyone who seeks the better vision that true knowledge gives.

THE eyes are almost a part of the brain, and vision is more closely connected with the mind than is any one of the other special senses. Anything that effects the mind, therefore, is almost certainly reflected in the eyes and if the mind is disturbed vision is impaired. Importance of mental control cannot be overestimated. Perhaps this state of the mind at rest is better expressed by the word composure or equanimity than by control, as the latter somewhat suggests effort. If we could but catch those fleeting moments of clear vision, so exasperating because so elusive, and trace them to their origin I think in every case it would be found that a state of mental composure would account for them. An unperturbed mind undoubtedly makes for clarity of physical as well as of mental vision. This is no "far-off divine event" but an effect which happens immediately and which one can demonstrate many times a day. When you look at an object you will see it better if you don't try to see it than you will if you try to see it. The maxim, "If at first you don't succeed try, try, try again" is never true in the sense that "try" means effort, and the futility of effort is never more convincingly shown than in our attempt to see by straining to see. If we would "venture," instead of "try," we would succeed not only eventually but often "at first." You need not trouble about your blood pressure, but take your nerve pressure as often as you can. You can gauge your mental tension by your muscular tension, and if your muscles are taut—your arms rigid, your hands clenched—you are mentally straining. And there are no muscles that respond more quickly to our thought than do the ocular muscles. A patient was requested to close her eyes. She literally banged them shut, and if she had been asked to perform the most difficult task her face could not have expressed greater strain. By our multifarious environment we are being continually bombarded, and though we must ever be ready for action, unless this action springs from self-possession it is pretty sure to miss fire. Can you perfectly recall the individual letters of the diamond type card? This is very good practice for the memory and imagination. I could not remember a small letter t but resolved to experiment without looking at the card. Many t's were at first discarded for I knew they were imperfect and not like the t of the card. I knew that a t was a long letter but whether it extended above or below the short letters of the line I could not tell. I was not sure where it was crossed in relation to the other letters in the word in which I imagined it. So poor were my mental pictures that I confounded the t with an f. This, however, was a step forward, as an inverted f closely resembles a letter t. I continued to experiment, knowing that if I imagined the truth I would see the letter as perfectly as when looking at it on the card. Then, suddenly, there it was, shapely and black. I still remember it clearly for "the little one does learn is unforgettable, impressed upon the mind in a different way than mere learning." When you palm do you see a perfect black? I look out into the blackness of the darkest night and then imagine it still blacker. Experience is only suggestive. As you are different from anyone else so are your eyes like no others. Do your own experimenting, and prize your own successes above all things.

Monthly Meeting
BETTER EYESIGHT LEAGUE
4:00 P. M., APRIL 12th
Room 405
300 MADISON AVENUE NEW YORK CITY

Doctors are needed all over the world to cure people without glasses.

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