May 1925

Better Eyesight

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

May, 1925

Fundamentals

1. Glasses discarded permanently.
2. Favorable conditions: Light may be bright or dim. The distance of the print from the eyes, where seen best, also varies with people.
3. Central Fixation is seeing best where you are looking.
4. Shifting: With normal sight the eyes are moving all the time. This should be practiced continuously and consciously.
5. Swinging: When the eyes move slowly or rapidly from side to side, stationary objects appear to move in the opposite direction.
6. Long Swing: Stand with the feet about one foot apart, turn the body to the right—at the same time lifting the heel of the left foot. Do not move the head or eyes or pay any attention to the apparent movement of stationary objects. Now place the left heel on the floor, turn the body to the left, raising the heel of the right foot. Alternate. This exercise can be practiced just before retiring at night fifty times or more. When done properly, it is a great rest and relieves pain, fatigue, and other symptoms of imperfect sight.
7. Stationary Objects Moving: By moving the head and eyes a short distance from side to side, one can imagine stationary objects to be moving. Since the normal eye is moving all the time, one should imagine all stationary objects to be moving. Never imagine that you see a stationary object stationary.
8. Palming: The closed eyes may be covered with the palm of one or both hands. The patient should rest the eyes and think of something else that is pleasant.
9. Blinking: The normal eye blinks, or closes and opens very frequently. If one does not blink, the vision always becomes worse.

Mental Pictures
By W. H. Bates, M.D.

THE human mind is busy as long as we are awake. We remember many things and are consciously or unconsciously shifting from one thing to another. Those things that we remember, we imagine we see. If we imagine we see a letter perfectly, continuously, it is all done easily without effort or strain. If a letter or other object is remembered or imagined imperfectly, it is not remembered continuously; it soon disappears and something else takes its place. When the memory is perfect, it can be demonstrated that no effort is made, and things remembered are imagined as mental pictures easily and continuously.

Mental pictures are very important. For example, if a patient can remember and imagine he sees a letter or other object perfectly, or as well with the eyes open as with the eyes closed, or can remember when looking at the distance a small letter as well as it can be seen at the near point, the patient has a normal eye with normal sight. All cases of near-sightedness, far-sightedness, astigmatism, presbyopia disappear momentarily more continuously, or permanently, when mental pictures are imagined more or less perfectly. It can be demonstrated that when the normal eye with normal vision imagines a mental picture of a letter perfectly, the eye remains normal with normal vision, but if the same patient remembers a small letter or other object imperfectly or imagines he sees it imperfectly, the vision becomes imperfect, a change takes place in the normal shape of the eyeball and the eye becomes imperfect—too long, too short, or of an irregular shape.

The memory of imperfect sight increases the hardness of the eyeball, which can be felt with most cases with the tips of the fingers touching the outside of the upper eyelids. In cases of glaucoma, in which the eyeball is already too hard, the memory of imperfect sight will increase the tension and lower the vision. In these cases, also, the memory of imperfect sight increases pain and produces other disagreeable symptoms.

Negative after images: If a patient regards a white Snellen test card with black letters, closes his eyes and has a mental picture of a black card with white letters, it is called a negative after image. In such cases the symptoms may be modified or corrected by alternately looking at the Snellen test card for part of a minute, then closing the eyes and flashing one of the large letters for a moment, a second, or part of a second. By alternating in this way it is possible to prevent the appearance of negative after images.

To obtain perfect mental pictures requires perfect relaxation. If the patient can see at the near point a small letter 9 with a white centre whiter than it really is, or whiter than the rest of the white card, it is usually possible to close the eyes and remember or imagine a perfect mental picture of the letter. A small percentage of my patients can remember or imagine one letter or one object as well with their eyes closed as they can see it. The perfect memory of the small letter 0 can be imagined at five feet, ten feet, twenty feet, or further, by practice as well as it can be seen at the near point. In one case a child nine years old was brought to me for treatment. The patient had worn very strong glasses for near-sightedness since she was three years old. When first seen she was wearing concave 14 D. S., which improved her vision from 5/200 to 20/100. At school even with her glasses she could not read the blackboard. She was a child with an unusual memory. She could look at one letter of the ten-line of the Snellen test card, see it perfectly when held very close to her eyelashes, close her eyes and remember it as well as she could see it. With her eyes open she could remember perfectly, at first at two feet, then by practice at five feet, and finally at twenty feet. Then she said that she could imagine or see, or imagined she saw, not only the letter that she had memorized, but also other letters with which she was not familiar.

In a second case mental pictures produced a cure in a reasonable time, about a week. The patient was a man, aged thirty-five, who was wearing concave 16 D. S. combined with a cylinder of 2 dioptres in each eye, which improved his vision to one-sixth of the normal. After three months of continuous treatment with the aid of palming, swinging, and other methods, he obtained a permanent benefit. His mental pictures were poor for letters and other objects. By practice he became able to remember a small black period just as black with his eyes open as he could with his eyes closed, or as well as he could see it a few inches from his eyes. He was recommended to remember the period perfectly all day long, or at night when he was awake. In the beginning he was very much discouraged, because when he noticed any improvement in his vision he soon lost his mental picture of the period and his vision failed. To prevent the loss of the memory of the period, he was directed to dodge or look away quickly at some other object whenever he was conscious that the memory of the black period was a benefit. This was difficult at first, but by practice he became able to dodge or look at some other object, when his vision was improved, and in this way retained his mental picture of the period. He was very faithful and devoted practically all of his time to his mental picture of the period. In about a week when he walked into the office he said: "Doctor, I am cured."

I tested him at twenty feet, and he told me that he could look at the 200-line letter at the top of the card for a moment without losing the perfect memory of the black period. He also informed me that he could look at the ten-line letters and dodge them just as well without losing his period. Then I said to him: "Can you see anything of the bottom line?"

He answered: "I cannot prevent myself from seeing all the letters of the bottom line."

I tested him with different cards that he had never seen before and found that he had normal vision.

Some years ago a physician was tested for imperfect sight. He suffered very much from illusions. His mental pictures were very imperfect. When walking along the street he would imagine little devils dancing on the tops of some of the houses. Many of the people and other objects were multiplied. Instead of seeing one person walking toward him, he saw that same person multiplied twice, three times, six times, or more. At irregular intervals he would have an attack of total blindness. He had been to see many eye doctors and many nerve doctors. Some of them told him that he was threatened with insanity, which filled him with fear. It was difficult for me to encourage him. After examining his eyes very thoroughly and testing his field, color perception, the reaction of his eye muscles, I told him that it was possible for him to be cured. He answered me and said that he was too old, fifty years.

I answered: "Children twelve years old have been cured."

He replied: "That is too bad. I have lost my chance of recovery."

I returned to the conversation by reminding him that people eighty years old had been cured quickly.

"Too bad," he said; "I will have to wait thirty years before I am eighty and that is a long time to wait."

For nine months he visited me almost daily and devoted an hour or more to all sorts of questions. He tried, as he said, to prove that I was wrong because I claimed that all the other doctors who had treated him must have been wrong, as they failed to help him. At the end of nine months his sight had become normal and he had lost most of his imperfect mental pictures. To obtain a mental picture of a period, I had him imagine a black football with about one-quarter of it painted white. This he threw into the ocean when the tide was going out, and while the football was floating out to sea he watched it very closely until it became a mere speck, of black with one part white. Then by closing his eyes for a few seconds he obtained a mental picture of the period. When he remembered a period perfectly, his mental pictures of other things also became perfect, because he found it was impossible to remember one thing perfectly and something else imperfectly at the same time.

However, he still had his attacks of temporary blindness, with complete loss of vision. Finally I got up my courage sufficiently to tell him what I believed he should do next. I argued the matter with him, and told him that the memory of perfect sight could only be accomplished easily, and although he was thoroughly convinced of this fact, it did not prevent him from straining and making an effort which was strong enough to make him blind. So one day I said to him: "Doctor, there must be something wrong with your memory of perfect sight, because you still have your attacks of total blindness from strain. Practicing on perfect mental pictures is easy. You need a better understanding of relaxation. I suggest that you now practice consciously making your sight worse by effort. This will be more difficult for you than the memory of perfect sight, but it has this advantage, it makes more clear to you what relaxation means. If you can strain hard enough to consciously cause these attacks of blindness, you will find out much better than I can tell you how to avoid them unconsciously."

I shall always remember his look of astonishment when he said: "Good God, Doctor, you have spent many months trying to improve my sight, and now you want to make it worse; it seems too absurd, silly."

I answered him: "Why should you care how silly it is as long as you get results? After all, it is not theories which help you, but results." It took me about a week to coax him to practice making his sight worse consciously. It was a disagreeable piece of business. He did not like it, but much to my surprise when through, the practice appealed to him, until finally he became able to consciously produce an attack of blindness which was complete, or without any perception of light. I tried doing it myself, and although I succeeded, I felt as though all my nerves were torn to pieces.

When the war broke out he was one of the first physicians to enlist. After the war was over I was honored by his visiting me within an hour after he landed in New York. He told me that all through the war, with the terrible strain of things, he expected that under such adverse conditions he would have a relapse. He told me that he was very grateful for what I had done for his eyes, but had no words to express his gratitude for what I had done for his peace of mind. I was pleased to have him tell me that he had no more attacks of blindness or of other symptoms caused by the memory of imperfect mental pictures. It was interesting to hear him describe how he was able to remember mental pictures perfectly throughout all the excitement and horrors of the war. He was at the front in the midst of things and was not at all worried or unhappy.

Stories from the Clinic
No. 63: MENTAL PICTURES
By Emily C. Lierman

SO many patients tell me when they first start treat-ment, that they have no mental pictures. They cannot seem to remember or visualize anything while palming. If the mind is under a strain, no amount of palming will improve the vision temporarily or permanently.

A little girl, not quite three years old, came to the clinic with her mother. The mother told us that after the child had had an attack of measles, her left eye turned in. When I held the card up close, the little girl was able to tell me which way all the E's of the Pot hooks card were pointing. The squint was not so decided either. But when I held the card five feet away from her eyes, the left eye turned in almost completely, that is to say, one could hardly see the iris. I placed her little hands over her closed eyes and told her to think of her best dollie and tell me how it was dressed. I didn't expect her to tell me very much because of her age, but the little tot surprised me. She liped in her baby talk that her best doll had a pretty pink dress, and that her shoes were black and had straps on just like her own shoes. Her mother held her as she stood on top of a table, for she was very tiny, and when she looked at the test card five feet away, her left eye remained straight temporarily, while she read 5/30 without a mistake. Her mental picture of the doll was perfect. Describing the shoes and dress helped.

At one time I had four boys under treatment at the same time. They were between the ages of nine and twelve, and all were near-sighted. They stood in a row and while palming I talked about baseball. I described the ball, and they described to me just how the ball field was arranged. After I had tested each one in turn and improved their vision, they were encouraged to palm more. Their mental pictures were—first and second base, a home-run, seventh inning, etc. The four boys obtained normal sight in less than two hours that day. Two of them had 10/50 before treatment and improved to 10/10. The other two had 10/40 and 10/30 before treatment and improved to 15/10.

A young mother came to be treated for headaches. Ever since she could remember, she had suffered severe pain in the back of her head and eyes. Glasses were put on her when she was a small child, but they did not relieve her pain. One of her neighbors whom she loved, told her how Dr. Bates had relieved her of eyestrain, so she came with a ray of hope. Palming did not give her any relief at first, and always when she came she had an attack of hysteria. When I was able to quiet her, I asked her about her children. She had two girls and a little baby boy. While we were talking she was palming. I noticed the corners of her mouth were drooped, and as she talked she had no control of her tears. Poor little mother. I had a strong desire to place my arms about her. When I discovered that her baby boy was much loved in her family, I questioned her about him.

I said: "Tell me the color of baby's eyes. I love little boys. Describe him to me."

A smile was noticeable as she answered: "His eyes are brown and his hair is blond; and you ought to see the two dimples he has when he smiles. I must not forget to tell you that he has two teeth, and when he smiles you just have to smile with him." I watched her as she explained all of this. There were no drooping corners to her mouth, but a smile was there all the time. Before I had time to tell her to remove her hands from her eyes, she did so herself. With a great sigh of relief she looked at me and said: "I have no pain just now. I feel so good I want to laugh and sing." A mental picture of her baby boy, remembering and explaining all about him was a relaxation, a benefit to her. She came more than six months to the clinic for treatment before she obtained normal vision permanently. She had a high degree of myopia when she first came, and her vision was 10/200 with both eyes.

During the first few weeks of treatment her pain would return, but each time it was less severe. When she became able by herself to obtain mental pictures, her pain would disappear and her vision would improve. At times when her mental pictures were imperfect her vision was lowered, and this always caused an attack of hysteria. Later her vision steadily improved, her pain disappeared and toward the end of six months she obtained normal sight, 10/10.

During the six months of her treatment she had to be encouraged very often by her husband or sister, to palm every day. The swing of her body from side to side, while blinking and remembering something pleasant, always helped her pain. To take care of her children and do her household duties was quite enough for any woman, but she made time to practice and she was well repaid.

After the World War was over, many of our boys on their return from France came to us for treatment of their eyes. I treated one of them who was gassed. His mind was very clear and he told me some interesting things that happened over there. I noticed, however, when he related something unpleasant or horrifying, that he stared and the sclera or white parts of both his eyes became bloodshot. His vision was normal both for the distance and the near point when he did not stare or become excited. He said the only thing that kept him from going insane while he was at the front, was that his little son, who was born after he arrived in France, was waiting for his return. He saw his pal shot to pieces almost by his side. His mental pictures were not pleasant ones, but when a photograph of his wife and baby arrived, he carried that picture with him all the time.

I showed him how to palm and told him how necessary it was to think only of pleasant things while palming. He told me many things about his little boy, and how proud he was of him. I kept him busy talking while he palmed for a half hour, and then I asked him to remove his hands from his eyes. His eyes were no longer bloodshot. The sclera was as white and clear as my own eyes. I told him to return for more treatment, deciding to use the sun-glass if necessary, the next time he came. He said if his mental pictures did not help in his home treatment, he would surely return. I never saw him again.

Announcements

Readers of "Better Eyesight" will be pleased to hear that Dr. Bates has returned to the office and has resumed his practice. His arm continues to improve and we trust that in a short time he will be permitted to remove the plaster cast. His physician is satisfied with his progress and believes the operation was very successful.

Dr. Bates has requested us to thank our subscribers for their kindness and good wishes during his illness.

PAPER TEST CARDS DISCONTINUED

Due to the fact that the cardboard Snellen test cards have proved three-fold more practical and durable than the paper cards, the sale of these latter has been discontinued. While the paper cards were a little less expensive, they were too fragile to stand the great handling that our test cards usually receive. We believe that the fifty cent cardboard cards will prove more satisfactory and economical in the end.

USE THE QUESTION AND ANSWER COLUMN

It is not necessary to be a League Member or a patient of Dr. Bates to write to us for information or assistance. If any part of Dr. Bates' Method is not clear, we will be pleased to answer your inquiries through the Question and Answer column. If a personal answer is desired, kindly enclose a two cent stamp.

May Fairies
By George M. Guild

THE merry month of May is expected to be just as full of joy and happiness to the children and grown-ups this year as it has been in other years. The children start the month with a big May Day celebration.

With so much fun going on we know that the fairies are there to keep everybody smiling. The good children in their hearts know they see the -fairies and enjoy them, while the bad children do not see or even hear them. Some one has said that the fairies can turn into all kinds of flowers and in this way escape observation. But you can detect them because if you watch them closely, you can see them blink their eyes. Fairies always have perfect sight and to keep it they have to blink or close their eyes frequently in order to avoid the stare. You see, there are some people who have perfect eyes and, strange to say, their eyes are not conspicuous, and they do not know that they have eyes. Although their eyes are all the time moving, the movement is so short that it is not noticeable. It is a habit which they have, of which they are not conscious, but people who have poor sight are all the time staring and straining in order to see. It is not true that it requires an effort to see. On the contrary, it does require a great deal of hard work, much effort, much strain, in order to fail to see. One nice thing about the fairies is that you never see them staring at you or straining their eyes. No one ever saw a fairy wearing glasses.

Many people ask the question, "Do fairies really exist?" A great many people believe that there are fairies, even although they themselves may not have seen any. An eminent scientific man told me that at one time he took some photographs of a flower bed covered with many flowers. He showed these photographs to some children, and right away some of them exclaimed: "Oh! See the fairies!" Neither he nor any of his friends could see any fairies among the flowers.

A man once told me that when he was a child he could remember seeing fairies, many fairies, all dancing together on the grass in the woods; but as he grew older his ability to see the fairies became less. He said that when his wife was cured of imperfect sight, she became able to see the fairies when before her cure she had never been able to see a fairy. From what is known of fairies, it seems that they can, if they wish it, become visible to anyone whom they desire to see them.

Children who have seen fairies have told me that when they saw a fairy and smiled, their sight became unusually good; but if they were disappointed in any way, the fairies at once disappeared. So when you want to see a fairy, be sure to smile. Think of all sorts of pleasant things and thoroughly believe that fairies exist. Children who doubt the existence of fairies never see them.

For some reason or other, the month of May is the best month in the year to see fairies. Most of them have retired all winter long and when the sun comes out and the flowers begin to bloom, the fairies wake up and start to have a good time. I believe that most children like to have a good time, too, just at the fairies do. When a child learns the games that the fairies play, learns to dance like the fairies dance, learns to laugh and sing like the fairies do, that child is very, fortunate, indeed. Those children who have seen fairies have told me how they dance around in a ring until they are tired, and then they go and sit on a toadstool and rest. To dance like the fairies dance is a cure for headaches. It is wonderful how long fairies can dance without getting tired. They must do it very easily and without an effort. Fairies have wonderful voices for singing, and you can hear them a very long distance away. They have wonderful eyes for seeing, and can recognize their friends from afar. They have wonderful hearts for loving which explains why they are so popular with children.

Glasses Retard Progress
By E. T. Fisher, M.S.M.D.

THIS patient, a man aged 53, had worn glasses thirteen years for astigmatism. Four years ago his vision became decidedly worse and had been steadily decreasing. Though his glasses had been changed repeatedly by competent ophthalmologists, his vision for distance was not improved to any appreciable degree.

His vision with glasses was 10/70 and the letters were gray and blurred. The diamond type appeared very indistinct, but he was able to read a few words in a very bright light.

Without glasses his vision was 10/200 with both eyes and with each eye separately. The diamond type seemed to be a solid gray blur. The smallest letters that he could read were those of the 30 line and he could distinguish them only when the card was held one foot from his eyes.

First I explained about blinking. I had not seen him blink once since he entered the office. As a child he was taught never to blink while conversing with anyone because it was very impolite, so he had always prevented, as much as possible, any movement of the eyelids. In this way he had acquired the habit of staring. Blinking seemed to require a great effort, but by closing his eyes for a few minutes at a time and then by gradually shortening this period he was soon able to blink easily.

His imagination and memory were very poor, but he could remember the ocean perfectly. When a child he had spent many summers at the seashore and had often sat for hours watching the waves. So I suggested that while palming he imagine himself sitting on a shore watching the waves as he had done in his childhood.

After palming 30 minutes in this way I asked him to glance at the test card and then close his eyes immediately. He saw the B in 10/100 but it disappeared before he could close his eyes.

I then held the card where he was able to see the O in the 50 line, but he could not remember it. I suggested that he imagine the O floating out into the ocean, becoming gradually smaller and smaller. After looking at the O again, he closed his eyes and imagined that it was floating away. Then he looked at the test card which was ten feet away and read both letters in the 100 line and they appeared much blacker.

The diamond type now appeared as white and black lines instead of the solid gray.

Four days later I saw him again. His vision had not improved. Before I had an opportunity to question him he said: "I know why I have not improved more. It is because I have worn my glasses about an hour a day. Each time after wearing them my sight is just as bad as it was the first time I took them off four days ago."

I had very carefully explained about not wearing his glasses, but he thought I had attributed undue importance to this phase, therefore he had not mentioned that it was absolutely necessary for him to wear them about an hour a day. As the glasses affected his vision so unfavorably and caused the loss of all that he had previously gained, it seemed doubtful that he would ever improve to any great extent as long as he continued to wear them. On days when he did not use glasses, as Sundays and holidays, his improvement was more marked and then, after wearing them, he did not lose quite all he had previously gained; but in this way his progress was exceedingly slow.

He practiced about three hours a day, with the diamond type, palming and sitting in the sun with his eyelids closed. In practicing with the diamond type he derived the most benefit from sitting in the sun and slowly moving the card from side to side, glancing at it casually from time to time and closing his eyes frequently.

In this way he first became able to see the white spaces between the lines very white, then the spaces between the words and finally, in flashes, he could distinguish words.

His progress was, without doubt, greatly retarded by his use of glasses, but now, after two months, he is able to read the diamond type in the sun, and 10/30 on the test card. He is seeing objects at a distance that he had not seen for four years even with his glasses.

Report of the League Meeting

By Mabel A. Young, Secretary

THE April meeting of the Better Eyesight League was held at 383 Madison Avenue, Tuesday evening, April 7th. The President, Miss May Secor, presided. Miss Secor welcomed new members and visitors to the League. She stated that as the body must be regarded as a whole of which the eye is a part, it is planned to have speakers from the outside tell of conditions in other parts of the body which may link up with trouble in the eyes.

Dr. Percival Spritzo was the speaker of the evening. Dr. Spritzo is attending oral surgeon in the Hospital for Joint Diseases, and head of the oral clinic. He is a believer in the Bates Method and a recent member of the League. Dr. Spritzo's talk was very interesting and threw light on many phases of oral infection.

LEAGUE ANNOUNCEMENT

The meetings of the Better Eyesight League are held at 383 Madison Avenue, on the first Tuesday of each month, at eight o'clock in the evening.

The next meeting will be held on Tuesday, May 5th. At that time a practical demonstration of the Bates Method will by given by the officers of the League. One object of the League is to disseminate the knowledge of the scientific cure and prevention of imperfect sight, without the use of glasses. The president therefore requests that each member invite to this meeting at least one person who suffers from eyestrain.

Questions and Answers

Question—Dr. Bates says that in reading fine print one should look between the lines. Is this not contrary to the principles of Central Fixation? To see the print best, should one not look directly at it?

Answer—One can look between the lines and shift to the black letters with Central Fixation.

Question—If type can be seen more distinctly with the eyes partly closed, is it advisable to read that way?

Answer—Yes, it is not advisable to read that way because it is a strain, and alters the shape of the eyeball.

Question—Should children read microscopic print?

Answer—Yes, the more the better. Reading microscopic print is a benefit to the eyes of both children and adults.

Question—Can the eyes be harmed by using the burning glass or sun treatment?

Answer—No, the eyes cannot be harmed by using the burning glass or by sun treatment.

Question—I have attained normal vision, but after reading for a while, my eyes feel strained. Would you still consider I had normal sight?

Answer—If your eyes feel strained you are not reading with normal vision.

Previous Issue
THEWORTHWHILE Pot Issue
THEWORTHWHILE To Contents Page