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College of Syntonic

Optometry

Discussion On

CONSENSUAL SUPPORT OF VISUAL ACUITY

In discussing "Consensual Support of Visual Acuity" I would mostly agree with the author, in that the four senses, principally that of hearing and of smell have little relationship if any to the sense of sight, the centers of each being specific in nature.

Regardless of this, I do believe that certain odors, such as are employed in anesthesia, for example, ether do have an effect upon the general system, as manifested in the state of unconsciousness. The change is affected in the blood, there being a diminution of red corpuscles and consequently an increase of venous blood. This condition of the blood not only dilates the pupils through irritation of the cervical sympathetic but also, I believe, inhibits the visual centers located in the cuneus of the Occipital lobe, producing at least temporary loss of vision.

Again, any odor producing venosity of the blood would most surely lower vision. In this regard, may I name wood alcohol poisoning produced through the sense of smell. Wood alcohol amblyopia is not unknown to the members of our profession.

This type of amblyopia may present a problem for Syntony to solve. Apart from any physical remedy, I would be inclined to use $\mu\nu\delta$ after nascentizing N/L to be followed by $\alpha\delta$ after nascentizing L, each given on alternate visits. To review, we are reminded that $\mu\nu$ and δ when combined are a chronic alternative, thus they lessen blood toxicity. δ combined with δ or θ stimulates motor and sensory activity, thus would aid the visual functions.

My conclusions are that while I agree with the writer of the subject under discussion, in that the increase in vision is so slight under the influence of some odors as to not be of any great value, yet I disagree to the extent that some odours do affect the vision through the general system, but not through any correlation between sense nerve-centers of smell and of sight. Again, the remedy as suggested previous is speculative, not having had an opportunity as yet to prove their efficacy.

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