

KEEP SYNTONICS AS SYNTONICS

By Riley Spitler

Darned if I know just how best to say what seems necessary to say. Syntonists, if they will go over their notes with fine tooth combs will not find recommendations nor specific prescriptions for other than optometric conditions or conditions in which they may be etiological factors. If the patient has ocular difficulties, and if those departures are within the physiological limits of the normal, both the upper and the lower limits as they pertain to associated and supportive functions of vision, he is an optometric and syntonics patient AND NOT OTHERWISE. To say it another way, if there are demonstrable ocular departures from the normal that are referable to refractive or any other ocular functional derangement, then that patient is an optometric and syntonics patient, regardless of co-existing associated or supportive function derangement. The latter, more often than not, have some ocular impairment as an etiological factor. Such cases are your job, otherwise not.

In the Basic you were taught certain "mass actions" which take place with plus or minus lenses, or prisms, and were shown the parallel between frequency action. These "mass actions" are always present, cannot be prevented and, of course, must be known in advance and reckoned with. Where ocular departures from the normal disturb the normal syntony between these "mass actions, there you have your syntonics case. Hope that's clear.

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