

THE CONTROL OF PTERYGIUM THROUGH THE  
APPLICATION OF THE SYNTONIC PRINCIPLE

By  
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Pterygium, while generally found in adult and middle life, is occasionally seen in young persons. Medical authorities are of the opinion that it is largely due to exposure to the elements and to the effects of irritating substances, apparently because the condition is more frequently observed in those who spend a greater portion of their time out of doors, such as seafaring men, farmers, etc., nevertheless, they refer to it as a disease. In my opinion, the explanation of this is that the majority of these people enjoy little or no visual care. As a result of this neglect we expect manifestations of visual disturbances in these cases. However, we know that this condition is by no means limited to those in this category, since it is common to many who experience little or no exposure to the above mentioned contributing factors.

While Fuchs, according to Ball's "Modern Ophthalmology" is of the opinion that the origin is a degenerative process following Pinguecula, which manifests as a yellowish fatty mound usually on the nasal portion of the conjunctiva which is generally non-progressive and rarely calls for treatment. However, this opinion is not generally accepted by others. Pterygium is progressive and medication has been found useless.

Pterygium is supposed to be an extension of the sub-epithelial vascular, connective tissue of the conjunctiva inward between the corneal epithelium and Bowman's membrane. With this I cannot agree. In my opinion, it is a superficial, semi-granular, spongy like formation, which usually has an atrophic appearance, triangular in shape, springing from the conjunctiva, and extending toward the cornea, with which it sometimes unites. In this form it bears a fancied resemblance to the wing of an insect, hence its name. It is frequently located over the course of serious interference with vision can result. It is not uncommon to find a Pterygium on each eye, and frequently two on the same eye, one on each side of the cornea.

It is my opinion that Pterygium is definitely a symptom of some form of visual dysfunction, bearing upon the nervous equilibrium of the visual processes. Just what this dysfunction is seems to be unknown. My reason for this opinion is that with the application of the syntonic principle, using Syntonic prescription No. 1 Frequencies, (ed. Note: Rx #1  $\mu\upsilon$ ) a minimum of eighteen minutes per visit, I have seen scores of Pterygia of various sizes and duration, many of which encroached upon the cornea, either completely disappear or reduced to a negative quantity, with no recurrence and with improved general well being of the eyes reported in the majority of cases.

Nascentization seemed to make little difference, so during the past five years of my fourteen years experience as a Syntonist, I have not nascentized at all.

### CASE REPORTS

- Case No. 2106 Homemaker – age 62 – Large temporal pterygium on O.S. After several applications of Syntonic Rx No. 1 pterygium disappeared completely and has never returned.
- Case No. 5519 Female – age 30 – Employed in aircraft plant. Complaint – eyes seemed weak and sensitive, photophobia, total of four pterygia. After several applications of Syntonic Rx No. 1, complaints were alleviated and pterygia disappeared. No recurrence.
- Case No. 5515 Homemaker – age 35 – Four pterygia. Eleven applications of Syntonic Rx No. 1, removed all.
- Case No. 5690 Female – Artist – age 30 – Four pterygia – nasal much the largest. It took about twenty applications of Syntonic Rx No. 1, to correct, with no recurrence.
- Case No. 6012 Homemaker – age 32 – Four pterygia. Case not yet complete but very much improved.
- Case No. 5390 Homemaker – age 47 – Two pterygia. Disappeared after eleven applications of Syntonic Rx No. 1.
- Case No. 6304 Female – Clerical Work – age 26. Complaints: Frontal and basal headaches, especially after shows. Eyes become bloodshot, puffiness under eyes. Ten applications alleviated all complaints as well as pterygia. Ametropia negative.
- Case No. 6510 College Professor – age 44. Huge temporal pterygium on O.D. covering about three fourths of the pupil. O.D. dominant, as well as small nasal on O.S. After thirty applications of Syntonic Rx No. 1, large pterygium reduced in caliber, pupil still about one fourth covered. Pterygium of O.S. corrected.
- Case No. 6668 Homemaker – age 34 – large nasal pterygia. Required 15 applications of Syntonic Rx No. 1, to eradicate.
- Case No. 6690 male – Retired – age 74 – Chronic conjunctivitis. Large nasal pterygia. Pupil of O.D. almost completely covered, OS. Fifty percent covered. Was able to determine ametropia of O.S. for which I prescribed. After 33 treatments pupil of O.S. uncovered. O.D. over fifty percent uncovered, which enabled me to determine and correct the ametropia. He now enjoys fifty percent normal visual acuity. Treatment used was Syntonic Rx No. 1.

## SUMMARY AND CONCLUSIONS

As a result of my research, observations, experience and results obtained, I have concluded that pterygium is a symptom of visual dysfunction, not a condition, and as such falls within the scope and realm of Syntonic Optometry for correction. This evidence should be given serious consideration by all Syntonists, and corrective procedure instituted as early as possible.

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