**Presence of “Descemet’s Membrane” on the Anterior Surface of the Iris**

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CASE I concerned an atrophic eye in a man, aged 54 years. He was known to have had severe burns of the homolateral side of his face in his early youth. Anatomical examination (P.A. 123) showed a ruptured Descemet’s membrane and broad anterior synechia iridis. The angle of the anterior chamber was completely covered with a newly formed “Descemet’s membrane” which continued over the anterior surface of the iris (Fig. 3). The membrane itself was covered with endothelium (Fig. 4).

CASE II concerned a man, aged 62 years. Forty years before he had been hit in the right eye with a football. He had been in hospital for eight months, and the eye had become blind. Absolute glaucoma necessitated enucleation.

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Fig. 1.

Fig. 2.
Fig. 1. Embryo of 4 mm. length. Thickening of the surface ectoderm: the lens plate (170X).

Fig. 2. Embryo of 12 mm. length. The eye on the right side has been cut through its center. The eye on the left side has been cut through at a lower level. The foetal fissure with the hyaloid artery is clearly visible (45×).

Fig. 3. Descemet’s membrane covering the inner side of the cornea, the angle of the anterior chamber and the anterior surface of the iris (75X).

Fig. i. “Descemet’s membrane” on iris surface, covered with endothelium (1500X).

Anatomical examination (P.A. 158) revealed a severely inflamed atrophic eye with a vitreous abscess and marked intraocular bone formation. The cornea showed a ruptured Descemet’s membrane and a broad anterior synechia iridis. The iris was markedly shrivelled up and showed uveal ectropion. On its anterior surface a typical “Descemet’s membrane” was observed, which originated directly from the corneal Descemet’s membrane (Fig. 5). The membrane on the iris was partly covered with endothelium.
Fig. 5. “Descemet’s membrane” on iris, originating directly from the corneal Descemet’s membrane.

The formation of a “Descemet’s membrane” on the anterior surface of the iris is thought to be primarily due to rupture of the corneal Descemet’s membrane, accompanied by rupture of the corneal endothelium. The endothelium may proliferate over the anterior surface of the iris when there is an anterior synechia of the iris. This endothelium later produces a new “Descemet’s membrane” in the angle of the anterior chamber, covering the anterior surface of the iris.

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Difficulties in the Clinical Diagnosis of Retinoblastoma.
By W. A. MANSCHOT (Rotterdam).

Anatomical examination of eyes which have been enucleated on account of suspected retinoblastoma often produces surprising findings. Fifteen eyes belonging to this category have been examined during the last five years. Eight of these eyes contained a retinoblastoma. Two of the remaining seven eyes showed the cicatricial stage of retrolental fibroplasia

two showed a retinal detachment
one an angiomatosis of the retina
one a microphthalmos with choroidal coloboma
and one an anterior synechia of the lens