Cataracts.	Usually not an occupational disease, but traditionally associated with glass making, furnace work, and other incandescent operations. Common from penetrating foreign bodies around lens. Frequently congenital, and frequent among diabetics.	Disappearing as an occupational disease. R. M. I.	Use of suitable eye protection in hot and excessively luminous industries is preventing the occurrence of cataracts.
Conjunctiva (yellow-brown pigmentation of conjunctiva and cornea).	Many chemical causes, chiefly aniline and its derivatives, particularly hydroquinone.	May be accompanied by reddish discoloration of hair and skin of hands and feet.	Rare condition.
Conjunctivitis.	Almost unlimited; nonindustrial and industrial agents, such as vapors, acids, dust, ultraviolet rays (Klieg eye).	Seek out particular cause. Frequently associated with respiratory tract inflammation. R. M. I.	One of commonest manifestations of industrial irritants. One red eye more likely to be industrial than two red eyes.
Conjunctival xerosis (dry eye).	Vitamin A deficiency.	Thickening of conjunctivae over eyeball; vascular injection with growth over corneal margin in severe cases.	More general distribution than pterygium.
Exophthalmos (protruding eyes).	Usually bilateral from hyperthyroidism; monolateral from brain or eye tumors.	Commonly unrelated to work exposure; causes staring expression. R. M. I.	Associated with tremors, sweating, flushed skin, agitation, other aspects of thyroid syndrome.
Xanthelasma (buttery eyelids).	Caused by fatty degeneration. Occurs chiefly in elderly patients, women more often than men.	When prominent, gives startling appearance to eyes.	Harmless except for cosmetic unsightliness. Frequently removed surgically by those who can afford it.
Abnormal pupil size.	Caused by many drugs such as pin-point pupils by morphine.	Pupil size abnormalities frequent from occupational diseases, as among pharmaceutical workers handling such chemicals as atropine.	R. M. I.
Strabismus (cross eyes).	Commonly congenital. May arise after one-eye blindness.	May be divergent or convergent. Congenital strabismus not always manifest in infancy.	May arise as acute state after brain hemorrhage.
Discoloration of eyes (blue sclera).	Familial disease unrelated to work.	Part of well-established syndrome of brittle bones and blue sclera.	For confirmation, observe other members of the family.
Discoloration of eyes (yellow sclera).	Usually jaundice.	Reflects liver damage possibly from industrial causes, such as carbon tetrachloride, or instead, infection or cancer. R. M. I.	Look for jaundice of skin or bile in urine.

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