

INSTITUTE OF CURRENT WORLD AFFAIRS

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Reading the Windows of the Soul - II

New York, New York

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Mr. Richard H. Nolte  
Institute of Current World Affairs  
535 Fifth Avenue  
New York, New York 10017

Dear Mr. Nolte:

The iridologist I met in California, Dr. C., is a 26-year-old optometrist with a doctorate from the University of California. Dr. C. came across the science of iris diagnosis when he was studying acupuncture at the North American College of Acupuncture in Vancouver, British Columbia. In his formal training in optometry he had never heard of it. Subsequently, he read a text called The Science and Practice of Iridology by Bernard Jensen, a chiropractor and naturopath who is known as "America's leading exponent of iridology." This text impressed him sufficiently that he went to visit Dr. Jensen, now 65, at his Hidden Valley Health Ranch in Escondido, California, near San Diego. After watching Dr. Jensen work with patients, Dr. C. decided to learn the method himself and now practices it routinely on patients who come to his Fairfax office. He is still learning traditional Chinese medicine and says he gets good consistency between iris diagnosis and the pulse diagnosis of the Chinese system.

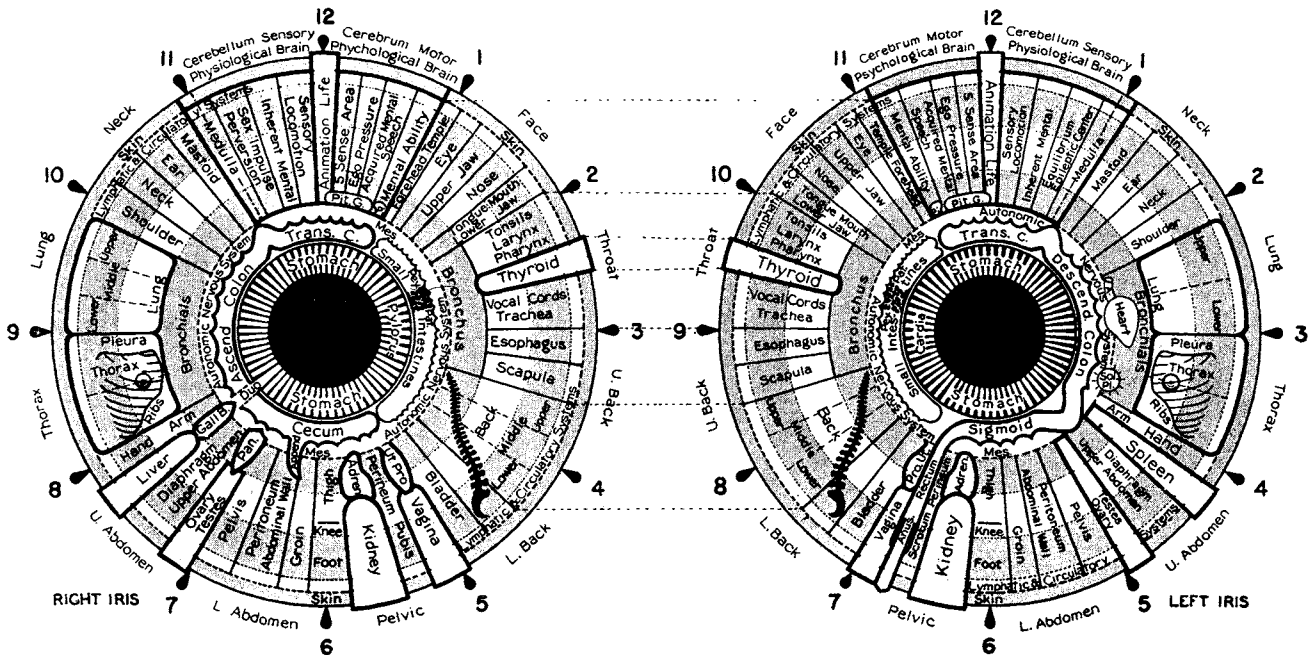
Dr. C. read my irises by examining them under an instrument known as a slit lamp, which, in conventional eye medicine, is used to study the cornea. It projects a narrow beam of light onto the surface of the eye and has magnifying lenses of different powers for close observation. After going over my irises, Dr. C. guided me in the examination of a third person's eyes. I soon learned that it is much easier to look at blue eyes because their

structure is much more visible; to examine brown eyes good illumination and some patience are necessary. But whether eyes are blue or green or brown has no significance in iridology.

What is significant is the density of muscle fibers in the iris. They can be tightly packed together like the fibers of silk cloth or the grain of a hard wood (oak), or they can be loosely meshed like the grain of a soft wood (pine) or the fibers of muslin or even burlap. Iridologists consider density to be an index of general vitality. The higher the density, the more inherent vital force a person has to withstand disease. But people whose irises show them to have high potential vital energy may, through poor life habits, be in worse shape than people with less energy who take good care of themselves.

After assessing the general density of the whole iris, an iridologist turns his attention to specific areas of lowered density. Any gap or hole in the iris is thought to say something about the state of a particular organ. The entire body is believed to be represented on the iris. In general, things on the left side of the body, like the left arm and spleen, are represented on the left iris, while things on the right, like the right leg and liver, are represented on the right. Also, the top of the body corresponds to the top of the iris, so that brain areas are represented on the arc between 11 o'clock and 1 o'clock on both irises, while the legs and feet are found at 6 o'clock. The gastrointestinal tract, being most interior, lies as a wreath around the pupil; the skin, being most superficial, is represented around the extreme periphery of the iris.

Since the time of Dr. von Peczely's owl, iris maps have been getting more and more specific. Reproduced on the next page is the iridology chart developed by Dr. Bernard Jensen, in which left and right are reversed so as to correspond to the view of a patient facing the examiner. In his textbook, Dr. Jensen says he has tested this chart over years of practice and proved its value. He says, also, that when one finds a lesion in a particu-



lar organ area, one can tell whether the problem in that organ is acute, subacute, or chronic by the appearance of the disrupted iris fibers; moreover, that healing is indicated by the filling in of a gap with fine white fibers.

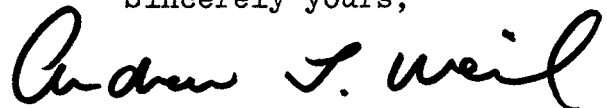
The possibility of representing the entire body on the iris is suggested, no doubt, by the circular form of the muscle, for a circle denotes completeness. But I do not have enough evidence to say whether Dr. Jensen's highly detailed mapping of the iris is more than wishful thinking. Dr. C. did correctly spot a man's upper back trouble merely by looking at his eyes while I was present, and he showed me in a woman's eyes the indications of a past tonsillectomy (two diamond-shaped holes in the tonsil area). But he found a "prominent lesion" in the upper lung region of my left iris (I can see it quite clearly in a mirror), which a subsequent chest X-ray shows no evidence of. Might the wide gap in my left iris really be in the adjacent shoulder and neck region? I have no known trouble there either. So I remain skeptical about the mapping of the iris and the interpretation of "lesions" found there.

As practiced in this country, iridology is a philosophy of

health as well as a diagnostic tool. Iridologists do not necessarily attempt to treat localized problems indicated by iris signs but rather to improve the overall well-being of the patient, particularly by the use of special diets and fasts and by the elimination of bad habits like smoking, overuse of drugs, and consumption of unnatural foods. If the patient follows a course of right living, his symptoms should regress, and the iridologist ought to be able to follow the changes by observing the progress of healing signs in the eye. Dr. Jensen stresses the value of iris examination in preventive medicine and as a monitor on the effectiveness of treatment. "Iridology can be used," he writes, "in conjunction with any other form of analysis and diagnosis in helping a patient to a better state of health." In fact, he urges that it not be used as an isolated technique.

My brief acquaintance with iridology leaves me interested, skeptical, open-minded, and eager for more information. Jensen writes: "I would advise the person who wants to see if there is anything to iridology not to come to any definite conclusions until he has spent at least three months with this form of analysis." As I have written, I can see that there could be something to iridology, and I will pay attention to irises from now on whenever I examine sick people. It is remarkable that orthodox medical men know nothing about iridology and that they ignore the iris so thoroughly in physical examinations. Even ophthalmologists have little to say about it, paying more attention to the cornea in front of it and the lens in back of it. The iris is a beautiful organ, whose complex and delicate structure is easily observable; doubtless it contains much information about the general state of the body, possibly even information about specific problems. At the least, medical doctors should know that iridology exists, and some of them, I hope, will give it a try.

Sincerely yours,

A handwritten signature in cursive script that reads "Andrew T. Weil". The signature is written in dark ink and is positioned below the typed name.

Andrew T. Weil