vision, EOG light rise, and fluorescein angiography, but a definite small lesion can be seen bilaterally at the level of the pigment epithelium with the appearance of an incomplete, hypopigmented ring around the fovea.

The disorder in this family is similar to Best's vitelliform dystrophy in that it is autosomal dominant, there is a resemblance between the 2 conditions ophthalmoscopically, and the EOG can be reduced in the presence of good visual function, but the 2 conditions differ in their severity, as shown by age of onset, extent of visual loss, size of lesion, and consistency of EOG abnormality. There is no doubt that the term 'adult vitelliform dystrophy' may lead to confusion, but it has now been widely used in ophthalmic literature as a condition quite distinct from Best's disease. We would make a plea for this term to be restricted to the specific genetically determined dystrophy described by Gass in his original article.²

Moorfields Eye Hospital,
City Road,
London EC1V 2PD.

L. H. BLOOM
D. E. SWANSON
A. C. BIRD

References

- 1 Epstein GA, Rabb MF. Adult vitelliform macular degeneration: diagnosis and natural history. *Br J Ophthalmol* 1980; **64**: 733-40.
- 2 Gass JDM. A clinicopathologic study of a peculiar foveomacular dystrophy. *Trans Am Ophthalmol Soc* 1974; **72**: 139-56.
- 3 Gass JDM. *Stereoscopic Atlas of Macular Diseases*. 2nd ed. St Louis: Mosby, 1977.
- 4 Fishman GA, Trimble S, Rabb MF, Fishman M. Pseudovitelliform macular degeneration. *Arch Ophthalmol* 1977; **95**: 73-6.
- 5 Vine AK, Schatz H. Adult-onset foveomacular pigment epithelial dystrophy. *Am J Ophthalmol* 1980; **89**: 680-91.
- 6 Epstein GE, Rabb MF. Adult vitelliform macular degeneration: diagnosis and natural history. *Br J Ophthalmol* 1980; **64**: 733-40.

Notes

Eye epidemiology

The National Eye Institute will hold a symposium on the 'Epidemiology of Eye Diseases and Visual Disorders' on 10-11 June 1982. Details from Barbara DiSimone, Office of the Director, National Eye Institute, Room 6A-03, Building 31, National Institutes of Health, Bethesda, Maryland, 20205, USA. Investigators wishing to present papers should send abstracts of not more than 200 words by 5 February 1982 to Fred Ederer, Chief, Office of Biometry and Epidemiology, National Eye Institute, Room 6A-10 (address as above).

International Corneal Society

A meeting will be held on 27-28 October 1982 at Las Vegas, Nevada, USA. Topics to be discussed include corneal transplantation, corneal immunology, and inflammation. Details from Dr Stuart I. Brown, Eye and Ear Hospital, 230 Lothrop Street, Pittsburgh, PA 15213, USA.

Book reviews

Documenta Ophthalmologica Proceedings Series 27. Visual Pathways Electrophysiology and Pathology. Eds. H. SPEKREIJSE and P. A. APKARIAN. Pp. 453. Dfl. 195.00. W. Junk: The Hague, Netherlands. 1981.

This book is a collection of papers given at the 1980 meeting of the International Society for Clinical Electrophysiology of Vision. The book is arranged in 6 parts, all dealing with different aspects of the VEP. There are a number of papers on the VEP and binocularity as well as another section on VEP changes in relation to field loss in glaucoma. The main value of this volume is that it provides a useful reference source to the specialist. However, the nonspecialist may be surprised to read about some of the recent advances in this field, many of which have possible clinical applications.

N. R. GALLOWAY

Lecture Notes on Ophthalmology. 6th edn. By PATRICK D. TREVOR-ROPER. Pp. 128. £4.25. Blackwell Scientific: Oxford. 1980.

The author is to be congratulated on another excellent edition of his lecture notes written in his own inimitable style. The chapters are divided in a practical clinical manner to cover the various aspects of ophthalmology with which every doctor will be involved at some time in his career. External eye diseases, injuries, red eye, sudden and gradual loss of sight, squint, field loss, and tropical conditions are all covered. There is a useful chapter of questions to give feed back on assimilation of knowledge, as well as an introduction to multiple choice technique. As with any publication there are some printing errors, but most of these are obvious and not beyond the wit of the average student. One could take issue with the emphasis of a diagram of trephination for glaucoma surgery rather than trabeculectomy and the detailed illustrations of keratoplasty in a book of this size.

This book is ideal to introduce the subject in parallel with slide lectures as well as for revision prior to examination. It will continue as a favourite with medical students and can be recommended by clinical teachers.

G. V. CATFORD

Vitreous Surgery. By RONALD G. MICHELS. Pp. 462. £51.50. C. V. Mosby: London. 1981.

In the past 10 years microsurgical vitrectomy has become a firmly established technique for management of many previously inoperable intraocular disorders, making exciting technical and intellectual demands on those committed to its practice. Dr Ronald Michels, of the Wilmer Eye Institute, is well known for his uniquely eloquent presentations and numerous publications arising from his work in this field. In this the latest in a line of recent books on vitrectomy he presents arguably the most comprehensive and comprehensible work to have appeared to date. Chapters on surgical pathology, clinical assessment, instrumentation, techniques, complications, results, and indications are written in a lucid, if sometimes verbose and repetitive, style, and the book is very generously illustrated, including a host of fine drawings by Timothy C. Hengst and Garry P. Lees.

There are relatively few matters with which one might take issue. In the first chapter, however, no mention is made of dynamic events in the vitreous, and the anatomical basis of the 'vitreous base' is treated unduly cursorily. Dr Michel's preference for light projection over the swinging flash-light test as an index of likely vision in an eye with dense vitreous opacities does not accord with our experience. Similarly, the choice of the inferonasal quadrant for purposeful retinotomy to allow internal drainage of sub-retinal fluid is open to debate. The illustrations are generally excellent, though the drawings of traction retinal detachments tend to depict the elevated retina as a partially deflated balloon rather than a structure striving to retain apposition with the pigment epithelium against all the odds.

Vitreous Surgery is destined to attain and maintain pride of place in the surgical section of ophthalmic libraries. It is highly recommended to all, though its price may deter students and those not primarily concerned with ocular surgery from a personal purchase.

DAVID MCLEOD

Implantation einer künstlichen Augenlinse. By S. N. FJODOROW. Pp. 146. DM.98.00. Georg Thieme Verlag: Stuttgart. 1981.

Fjodorow's original book on intraocular lenses was first published in 1977 and has now been translated into German by Rene Georg Frey. The author reviews the early history and development of implants and discusses the mathematical principles and optics of artificial lenses. The surgical techniques of implantation in use at the time of writing are described in detail and illustrated by line drawings and photographs, and there are chapters on postoperative management, results, and complications.

At the time of its publication in 1977 this pleasantly written volume was almost out of date, so rapid were the developments in intraocular lens implantation, and indeed the most recent references in the text are as long ago as 1973. Sadly, therefore, all the major recent advances in this expanding field receive no mention, and the book has limited value as a teaching manual. Its importance lies, however, in the fact that it represents a Russian view on lens implantation, and as such it merits a place in any comprehensive collection of works on the history and development of this form of anterior segment surgery.

T. J. FFYTCH

Advances in Ophthalmology. Vol. 42. Eds. M. J. ROPER-HALL, H. SAUTTER, and E. B. STREIFF. Pp. 161. S.fr.98.00. Karger: Basle. 1981.

The 42nd volume of this well-known series follows the same form as many of its predecessors with an in-depth presentation of 3 contemporary but unrelated topics.

Demeler has written a short and beautifully illustrated article on fluorescein angiography in iris and ciliary body tumours. He stresses the value of this test as much in follow-up studies as in the diagnosis of these lesions, and from examination of 182 patients he feels that angiography can detect those tumours which should be regarded as definitely malignant.

Schepens, Englert, and Leuenberger have contributed a chapter on the effects of liminal doses of argon laser on ocular tissues and present the histological and pathological findings in rabbits and 'minipigs.' The results are similar to

those of other workers and suggest that the main therapeutic advantage of argon laser over other forms of photocoagulation is its ability to produce small, easily controlled, and localised burns in the pigment epithelium.

These 2 articles, the latter in French, comprise one-third of the book. The remaining two-thirds consists of an extensive discussion on anterior chamber implants by Bürki. The history of these implants is traced and the optics and mathematical principles are demonstrated by means of case reports as illustrations. There is a heavy emphasis on these mathematical aspects, with particular reference to the Binkhorst lens. The article, which is in German, is supplemented by an extensive bibliography.

Yet again the reviewer is forced to criticise this volume with the same criticisms that have been applied to previous similar volumes in this series. Three articles are presented, unconnected in content, and in 3 separate languages, on this occasion without even English translations—a situation to tax the linguistic powers of most British ophthalmologists. The book is too specialised in its choice of articles to attract the general ophthalmologist and postgraduate, and too diverse in its content to appeal to the ophthalmologist with a special interest. For whom then is this volume intended? The question remains; presumably the editors and publishers know the answer.

T. J. FFYTCH

Superficial Keratitis. Eds. P. C. MAUDGAL and L. MISSOTTEN. Pp. 192. Dfl.100.00. Junk: The Hague. 1981.

This book is written by 2 ophthalmologists working in the Catholic University of Leuven, Belgium, mainly recounting their personal experiences. Its chapters include sections on corneal erosion, filamentary keratitis, fine and coarse punctate, keratitis, herpes virus, and the dry eye syndrome as well as introductory sections on diagnostic techniques, corneal anatomy, and healing of the corneal epithelium. The monograph is usefully referenced and well illustrated. It reflects the authors' interest in surface disorders of the cornea, but as a result, where a condition is clearly more protean in its manifestations, one sometimes feels that the presentation is top heavy, rather as if one were presented with John the Baptist's head when one had hoped to see him intact. The decision to present warts and molluscum contagiosum under 'fine punctate keratitis' and adenovirus, chlamydia, and Thygeson's keratitis under 'coarse punctate keratitis' is somewhat arbitrary and diminishes the general usefulness of this classification in the differential diagnosis of punctate keratitis.

The authors wish to promote the use of their replica technique in the diagnosis and treatment of superficial keratitis. In this the dried anaesthetised surface of the cornea is coated with collodion solution and the membrane produced is stripped off. The surface defect heals in 2 to 4 days. Replicas of corneal erosion, the healing epithelium, corneal filaments, and corneal epithelial cells affected by herpes simplex virus, adenovirus, and Thygeson's keratitis are presented among others. They are not all contributory. Many ophthalmologists may balk at using the replica technique as a way to debride the cornea in corneal erosion, filamentary keratitis, and dendritic ulcer, though it clearly is of value as a clinical or experimental research tool.