and Ericson and the recovery rate according to Okun), I and Dottallev reported on the decrease of aqueous humour formation in diabetic patients.1 No difference was found between diabetics with and without retinopathy. In contrast, we found that insulin treatment was able to restore aqueous humour formation to normal values in diabetic patients, provided retinopathy had not yet been observed. Our findings suggested that the rate of aqueous flow is influenced by insulin treatment in diabetic patients, at least in the initial stages of the disease.

R. YABLONSKI


These two books cover similar subject matter and are reviewed by Chang et al. (Brazi 1989). Both books are excellent and well written, but there are some differences in their presentation. The first book is a more detailed and comprehensive guide to the subject, while the second book is more concise and practical.

**BOOK REVIEWS**


This slim volume distils the experiences of two eminent ophthalmologists in the diagnosis and management of angle closure glaucoma. The first eight chapters were written by Ron Lowe and reflect publications written by him on this subject dating from 1961. The remaining four chapters were written by Arther Lim and describe his operative and laser techniques in the treatment of this condition.

Dr Lowe's contribution covers pathophysiology, clinical examination, and management. Each chapter carries many words of wisdom, as it is to be expected from an ophthalmologist who has spent much of his professional career studying angle closure glaucoma. Each chapter concludes with references for further reading.

Dr Lim's contribution describes methods for the surgical and laser treatment of angle closure. He covers iridectomy (though the illustrations for this appear to be the same as, but smaller than those which appeared in his book *Peripheral iridectomy*, also published by PG Publications), trabeculectomy, including complications, and concludes with a small section on combined cataract and glaucoma.

The authors do not identify a readership. This reviewer also found it difficult to see whom the book was directed towards. The book is a simple and didactic description of angle closure glaucoma. It would be covered in content by more general ophthalmological texts. The illustrations have been published elsewhere. The text is too simple and without adequate references for the specialist student of glaucoma. If a coffee table existed for ophthalmology texts, this one could be on it, but it need not grace the bookshelf.

R HITCHINGS

This manual has been collected by a number of well-known American vitreoretinal surgeons. Nine chapters make up this book. It contains much valuable information into a short book. It forms an admirable way for a junior ophthalmologist to get a quick overview of the principles of an approach to a patient with retinal detachment. As always in a book of this size there is a challenge to the contributors to limit their comments to what they consider to be the most important topics. It was nice to see that these authors have been carefully set up the eye and the use of preoperative ultrasound. The chapter on prophylaxis poses the questions but is not strong enough on providing clear-cut guidance on the author’s views as to when treatment should be recommended. The controversial topic of pneumatic retinopexy is included, and there is a welcome, but relatively long contribution on the anaesthesia for surgery. The section on scleral buckling surgery is full of practical ideas and approaches, including the principles governing non-drainage retinal detachment surgery are poorly explained and some of the indications for encirclement (the treatment of aphakic retinal detachment) are controversial. One has to be sure it is the right patient for the procedure to be done. The principles of peroperative injection of air and the operative sequence necessary for its correct use had been clearly elucidated. The chapter on pars plana vitrectomy by Abraham is particularly effective. The length of this section reflects the increasing use of vitrectomy in modern vitreoretinal surgery. The author cleverly manages to incorporate a substantial degree of clinical data and a discussion on all the techniques that he describes. These techniques are of course well beyond the capabilities of those for whom this manual is intended, but it
Bacillus-induced endophthalmitis.

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