Book reviews

Most of the chapters in the second part of the book are very good. Surgical anatomy is included in many but not all of them, but it would be useful in all. There is some overlap in relation to photocoagulation between chapters 12 and 17. The surgery of ocular trauma has little space. It is mentioned in several chapters but probably deserves one of its own. This would overcome the anomaly of discussing the removal of an intraocular foreign body in the chapter on corneal surgery. Keratoplasty is covered clearly and concisely. Plastic surgery has a nicely instructive introduction; there is a good description of techniques; the conjunctival approach for levator resection is omitted without comment. There is a well written chapter on the extraocular muscles, covering primary and secondary surgery, with a concise discussion of complications and their management. The editor's own chapter on glaucoma surgery is a masterpiece and will be worthy of reference long after others need rewriting. There is a logical discussion, sympathetic to the patient, and clear guidance to the reader on factors influencing the advice on management.

In sum, most of the criticisms are minor and should not deter purchase of this admirable new text on ophthalmic surgery. It is a practical guide to the ophthalmic surgeon and should be readily available to him for reference. It should be read by all eye surgeons in training as an indication of current practice.

M. J. ROPER-HALL

Genetic Eye Disease: Retinitis Pigmentosa and Other Inherited Eye Diseases. Eds. EDWARD COTLIER, IRENE H. MAUMENEE, ELAINE R. BERMAN. Pp. 746. £58.00. Alan R. Liss: New York. 1982.

Since the beginning of this century ophthalmologists have made major contributions to clinical genetics. The papers presented at the symposium held in Jerusalem in September 1981 give some indication of the areas of particular interest at the present time, interest that is not surprising when, as stated by François in the first paper, 50% of blindness before the age of 6 years is inherited, and of the entire blind population (in a developed country) about one-third has a genetic basis.

The symposium was divided into several sections, covering the following topics, in each of which a number of papers were presented: retinal pigment epithelium and experimental retinal degeneration, retinitis pigmentosa, therapy of gyrate atrophy, retinal degenerations, albinism, lysosomal storage disease, corneal storage diseases and dystrophies, connective tissue diseases, syndromes involving the eye, epidemiology of blindness, and retinoblastoma. Certain of these topics deserve further comment.

Mette Warburg, of Copenhagen, gave the first Franceschetti Memorial Lecture on 'Diagnostic precision in microphthalmos and coloboma of heterogeneous origin,' and produced a precise diagnosis in almost half of 86 cases of microphthalmos and coloboma in mentally retarded patients. This and other papers published elsewhere by the same author throw considerable light on this difficult and heterogeneous group of ocular abnormalities.

Five papers are concerned with the retinal pigment epithelium in tissue culture, a relatively recent and fruitful method of studying this important cell layer, and one which

could elucidate the role of this layer in retinitis pigmentosa and related disorders. The frequencies of the different genetic (and possibly nongenetic) forms of retinitis pigmentosa are analysed in 4 papers, and a comparison of the results indicates the difficulties inherent in this type of analysis, the results of which are of considerable practical value in genetic counselling. It would appear that about half the patients with this common group of disorders have no family history; however, this finding is open to differing interpretations.

The optic and otic neurological abnormalities in albinism are reviewed by Witkop and his coworkers, and their paper is followed by one on the diagnoses in a series of 201 albinos. This series includes 3 families where a man with X-linked ocular albinism has married a woman with autosomal recessive ocular albinism, tyrosinase-negative oculocutaneous albinism, and yellow-mutant oculocutaneous albinism respectively.

Two papers on the Stickler syndrome emphasise the frequent occurrence of retinal detachment and other ocular changes in this common autosomal dominant progressive arthro-ophthalmopathy, with its variable expressivity and incomplete penetrance. Ophthalmologists should be aware of this syndrome with its high incidence of retinal detachment that is technically difficult to treat successfully. In the last section there were 3 papers on the genetics and treatment of retinoblastoma. The gene for the 13 deletion form of retinoblastoma (on region 13q14) is closely linked to that for esterase D, and estimation of esterase D activity in blood and in fetal cells is a useful indicator of the deletion form of the tumour. A preliminary report suggests that the gene for nondeletion dominantly inherited retinoblastoma segregates with one of the 2 esterase D alleles.

These proceedings can be highly recommended to anyone interested in reading about recent advances in ophthalmic genetics. Every fellowship candidate is advised to have glanced through the contents and to have read selected papers.

BARRIE JAY

Craniofacial Surgery for Craniosynostosis. By DANIEL MARCHAC AND DOMINIQUE RENIER. Pp. 201. £41.00. Little, Brown: Boston. 1982.

Premature fusion of the skull sutures can occur with involvement of only one suture (the so-called simple craniosynostoses) or with involvement of multiple sutures, in which case it usually represents one element of a more complex congenital condition such as Crouzon's, Apert's, or Pfeiffer's syndromes. These cases are almost invariably associated with bicoronal synostosis, but with the addition of other skull abnormalities and with hydrocephalus to provide a driving force that exceeds that of normal brain growth, grotesque abnormalities of head shape, culminating in the clover-leaf skull, can be produced.

Craniosynostosis is of interest to the ophthalmologist for several reasons. The maxillary recession and the failure of advancement of the supraorbital ridge that is seen in bicoronal synostosis may leave the patient with shallow orbits, the eyes like frog's eyes, scarcely contained within them. Defects of conjugate gaze are frequent in such cases, and where the exposure is severe there may be failure of the lids to cover the globes. Raised intracranial pressure due

either to hydrocephalus or the compressive effects of multiple suture fusions can also threaten vision, and chronic papilloedema is not uncommon. More rarely, there may be compression of the optic nerves within narrowed optic canals.

The authors of this book can draw on a vast experience in the surgical correction of these anomalies, and they emphasise the importance of a team approach, the team including plastic, neuro-, ophthalmic, and maxillary-facial surgeons, as well as geneticists and psychologists.

They start with short chapters devoted to the classification and evaluation of patients with craniosynostosis as well as a review of surgical procedures that have been used in the past. Of particular interest in the preoperative evaluation is their description of the intracranial pressure measurements that have been abnormal in a surprisingly high number of cases. Apart from these paragraphs the early chapters provide little that cannot easily be found elsewhere.

However, when the operations themselves are described, the tone of the book changes abruptly. From now on each chapter is devoted to a clear, simple description of every operation amply illustrated by line diagrams, radiographs, and photographs of the patients before, during, and after their operations. For every abnormality of head shape they set out to correct the authors discuss the other procedures that are available and then explain why their own particular operations have been selected. However, their main originality lies in their advocacy for the construction of a 'floating forehead.' In this procedure the supraorbital ridge with a remodelled frontal bone attached to it is advanced into the desired position and then secured only to facial structures, that is, the base of the nose and the frontal processes of the malar bones. This, they claim, allows the maximum opportunity for further brain growth to push the face and anterior cranial fossa into a more normal position.

In a subsequent chapter they tackle the tricky question of whether such complex early surgery will interfere with later procedures involving reconstructions of the type advocated by Paul Tessier, who incidentally provides an introduction to the book. Their argument—and I would agree with them—is that not only are subsequent procedures not prejudiced by these operations, but a satisfactory supraorbital and frontal advance carried out at the age of 3 months or so may well improve the appearance of the child so considerably that further major surgery can be rendered unnecessary.

In summary, although the ophthalmological details given may be few, the experience of the authors, the clarity of their text, and their illustrations makes this book an

indispensible companion for anyone involved in the performance of these intricate but fascinating operations.

RICHARD D. HAYWARD

Das Lymphgefäßsystem des Auges. By JOHANNES GRÜTZIG. Pp. 78. DM.39. Ferdinand Enke Verlag: Stuttgart. 1982.

The lymphatic system of the eye and related structures often receives little attention in textbooks and is usually dismissed in a few sentences. It is, however, an important network, particularly relevant in disorders of the lids and conjunctiva. This short monograph attempts to redress the balance and describes in detail the anatomy, physiology, and pathology of the system, with discussions on primary and secondary disturbances. The book is well illustrated, and the extensive references show the many ramifications of this rather neglected subject.

T. J. FFYTCH

Notes

International Society of Geographical Ophthalmology

The VIIIth Congress of this Society will be held in Oulu, Finland, on 25-28 May 1984 in conjunction with the VIIth Congress of the European Society of Ophthalmology. The meeting will consist of free papers and a symposium on 'Climatic effects on the eye.' Further information from Dr J. P. Ganley, Department of Ophthalmology, School of Medicine in Shreveport, Louisiana State University, Medical Center, 1501 Kings Highway, Post Office Box 33932, Shreveport, LA 71130-3932, USA.

von Sallman prize

The second Ludwig von Sallman prize will be awarded at the VI International Congress of Eye Research to be held on 1-7 October 1984 at the Universidad de Alicante, Alicante, Spain. This award is for an outstanding achievement in ophthalmology and vision. The winner will be determined by a committee composed of Henry Wagner, MD, Christina Enroth-Cugell, MD, and Peter Gouras, MD. Further information and nomination blanks for this award can be obtained from Peter Gouras, MD, Chairman of the von Sallman Prize Committee, Columbia University, Box 18, 630 West 168 Street, New York, New York 10032, USA.