Book reviews

Metipranolol. Pharmacology of Beta-blocking Agents and Use of Metipranolol in Ophthalmology. Edited by H-J MERTÉ. Pp. 170. DM.68.00. Springer-Verlag: Wien. 1984.

This booklet reproduces the papers presented at the first Metipranolol Symposium held in Berlin in January 1983 to mark the launch of a new topical beta blocker for glaucoma treatment. The original German edition was published late the same year, and this review is of the English edition published in 1984.

The symposium has 16 listed speakers; all are German. The papers presented included three introductory papers on the principles of pharmacology and drug trials, two papers on short-term clinical trials using metipranolol, three papers comparing metipranolol and timolol, and two 'long-term' studies of metipranolol drops. It would appear that metipranolol is a non-cardioselective beta blocker without intrinsic sympathomimetic activity. It is marketed in concentrations of 0.3% and 0.6% and is administered twice daily. The 0.3% is equally potent with timolol 0.25%. The studies in this book show that a 30% reduction in intraocular pressure can be expected in the short term, but there is a falling off of this hypotensive effect to 20–25% after four weeks of treatment. It would appear that the drops produce a greater incidence of ocular irritation than timolol, although the reason for this was not clear to the authors reporting it.

Metipranolol, on the basis of the information included in this booklet, would appear to be an alternative beta blocker to timolol without clear advantages over the latter drug. The booklet itself would be of interest to ophthalmologists with a subspecialty interest in glaucoma and/or ocular pharmacology and therapeutics.

ROGER A HITCHINGS

Molecular and Cellular Basis of Visual Acuity. Cell and Developmental Biology of the Eye. Edited by S ROBERT HILFER AND JOEL B SHEFFIELD. Pp. 184. DM 98.00. Springer-Verlag: Berlin. 1984.

I usually think that symposium issues serve no other function than to provide a publishing medium for otherwise unpubishable papers. Nothing is more infuriating than picking up a volume with an extremely exciting title only to find a number of dissociated and discordant papers of varying scientific content and integrity. It is therefore a pleasant surprise to discover this series on the cell and developmental biology of the eye. The present volume is the third, and it certainly keeps up with its predecessors in terms of scientific merit of its component papers. The editors have done an extremely good job in choosing experts in their field and then in guiding them in such a way that the papers form a cohesive unit.

The molecular and cellular basis of visual acuity does precisely what its title suggests. It considers the cellular and molecular mechanisms underlying visual acuity and its development. It is particularly helpful to have a number of

modern reviews of both chemistry and anatomy and the interrelationships between these two fields. This collection of review articles also provides a wealth of references for the reader who is new to the field. If the book has a failing, it is that it does not cover the changes in visual acuity with the increase in age. However, I am sure that this area will be addressed in a future symposium issue.

In summary, I commend the editors and the authors for producing an extremely useful and timely book.

JOHN MARSHALL

ACTA 24th International Congress of Ophthalmology, San Francisco, 1982. Vols. 1 and 2. Edited by PAUL HENKIND. Pp. 1379. £142.50. Harper and Row: London. 1984.

This work in two volumes comprises 1274 pages of original papers, plus sections on the regulation of instruments and devices, the International Agency for the Prevention of Blindness, and the International Committee for Teaching and Postgraduate Education. In the preliminary addenda of volume 1 are some notes on various matters including the minutes of the meeting of the International Federation of Ophthalmological Societies, where the reports of various committees were considered. There is also a list of the names of the approximately 10000 ophthalmologists attending the congress.

The scientific papers are arranged in sections by subjects, starting with genetic eye diseases and congenital abnormalities followed by ultrasound perimetry, trachoma, cornea, cataract and anterior segment surgery, retina and vitreous, uveitis, glaucoma, diabetes, other systemic diseases, strabismus, tumours and plastic surgery, injuries, contact lenses, optics and refraction, and electrophysiology and visual psychophysics. The book is evidently the result of much hard work by its editorial chief. To assemble this enormous mass of literary material from such a diversity of sources and from such a large number of individual ophthalmologists in so short a time and to weld it into two very presentable volumes is a marvellous achievement. Paul Henkind and his editorial committee are much to be congratulated.

It is appropriate that the first paper in the volume should be a major contribution from the late Jules François: a fitting last offering to the international ophthalmological community. Although we are all sad to have lost Jules it was good that he lived to enjoy the largest ophthalmological congress ever held.

REDMOND SMITH

Documenta Ophthalmologica Proceedings Series 39. Colour Vision Deficiencies VII. Proceedings of the International Symposium, Geneva 1983. Edited by G VERRIEST. Pp. 424. £51.00. Junk: The Hague. 1984.

As was only to be expected, the vigorous momentum of the subject of acquired chromatic defects could not be kept up. It now occupies a quarter of the latest volume of this remarkable series. Far from being a complaint, this change of emphasis is mentioned in order to stress that the width of interest is much expanded. A section on new aspects of fundamentals is followed by practical matters, with special

attention being given to clinical applications. New data are presented on both congenital and acquired defects. A remarkable paper on the microspectrophotometry and sensory data on the *same* deuteranopic eye is a pointer for the future: we are well on the way towards distinguishing between retinal and central processing mechanisms without having recourse to speculation.

In *Fair Blows the Wind for France* H E Bates describes how, on having parachuted down, a dazed pilot experienced two bouts of loss of colour vision. When I asked the author about his sources for the existence of this symptom, he told me that he had invented it. Were he alive he would find the authority for his invention at the end of this book.

ROBERT WEALE

Retinal Detachment Surgery: Strategy and Tactics.

By JAMES S SCHUTZ. Pp. 140. £15.00. Chapman and Hall: London. 1984.

This book has been written with the intention of providing a surgical guide to retinal detachment repair. It has been carefully and thoughtfully written as a step-by-step guide to retinal detachment surgery. The reader is taken through a logical sequence of events on the preparation of the patient through preoperative and operative considerations and postoperative problems.

The book is illustrated by several line diagrams to help to illustrate the various points made in the text. The author's views are clearly presented, and in the main the text is very readable. The problem in a small book on retinal detachment surgery is always that of knowing what to include and what to leave out. Thus I found the chapter on surgical preparation and surgical exposure somewhat irritating (for example, the reasonable assumption that the lights should be properly adjusted prior to surgery). One would expect to find points of disagreement in several aspects of the clinical management of the cases; thus I did not find myself in agreement with the points made about barrage cryotherapy or bed rest after cryotherapy. Surely the main point of injecting intraocular air at the time of retinal detachment surgery for retinal detachments not complicated by periretinal fibrosis is simply to push the retinal hole back up against the pigment epithelium, which will then allow easy sequential cryotherapy and buckling. New breaks occurring on the posterior slopes of scleral buckles are very rare. In the planning of the operation, it might also be nice to have a slightly more comprehensive explanation of the modern concepts of vitreoretinal traction. It is an easy expression to use, and the correct application of these concepts is fundamental to the planning of retinal detachment surgery.

I thoroughly enjoyed reading the book and I strongly recommend it to registrars in training. I also feel that the consultants, for whom they work will acquire valuable knowledge from its text.

A CHIGNELL

Clinical Ocular Pharmacology. By JIMMY D BARTLETT AND SIRET D JAANUS. Pp. 978. £80.00. Butterworths: Sevenoaks, Kent. 1984.

The first surprise on reading this, a large multiauthor book, is to find that it has been written by American opticians with

only one small chapter from a non-ophthalmic medical contributor. In recent years there has been a considerable expansion by opticians in the USA into not only diagnostic but also therapeutic ophthalmology, and both the foreword and the preface make it clear that the aim of the book is principally to advance this aim. The second surprise is to find that the title is largely a misnomer, as the book contains relatively little pharmacology but instead has large sections on diagnosis and management of various conditions; one is surprised to find conditions such as keratoconus and pterygia in a pharmacological text. The book is therefore more of a clinical textbook for opticians, though the editors naturally feel it should have a wider acceptance.

I found the text to be written at a low to middle postgraduate standard. The book lacks sufficient detail to be authoritative, and there is a heavy concentration on American trade pharmaceutical preparations. The absence of medical authorship often becomes apparent, and I was frequently left with an uneasy feeling that some material, while not being inaccurate, was not completely correct either. Only minimal attention is given to the pharmacokinetics of individual drugs, ocular levels, penetration, and routes of delivery, and this is the book's major failure.

I cannot comment on whether opticians will find this a useful book or not, but ophthalmologists will find it disappointing and that their needs are served better elsewhere.

D J SPALTON

The Apocrine Glands and the Breast. By MARSHALL B L CRAIGMYLE. Pp. 82. £24.00. John Wiley: Chichester, Sussex. 1984.

This is a short, very readable book on the apocrine glands and the breast. It is divided into two sections, one dealing with the apocrine glands, that is, the glands of Moll, and one with the breast. Both sections are well written with an extensive bibliography at the end of each chapter.

A detailed description of the development, growth, and anatomy, both histological and gross, of each topic is presented. The section on apocrine glands contrasts them with eccrine glands and clearly differentiates the two types. The applied clinical content of the book is weak, and its expansion would perhaps have added more to the book. All in all this is a concise easily read book that can be read in a short time and would be of interest to those who deal with skin tumours and diseases of the skin.

L H ALLEN

Note

New Orleans Academy

The New Orleans Academy of Ophthalmology will hold its 35th annual symposium on the cornea, refractive surgery, and contact lens on 8–11 March 1986. Details from Emily Busby, Executive Secretary, Eye, Ear, Nose and Throat Hospital, 145 Elk Place, Room 203, New Orleans, LA 70112, USA.