Each has to be accompanied by a sighted relative who must feed, wash, and accompany them to the toilet. The maximum time that they will tolerate being absent from home is about 10 to 12 days. Follow-up after discharge is virtually impossible for the surgeon will no longer be available and the patients cannot be expected to attend for so little assumed benefit.

All this must be taken into consideration before contemplating a change from ICCE to ECCE.

It is also true (even though it may depress us) that what many elderly illiterate patients, and the families on whom they depend, want from their surgery is restoration of functional sight so that even though an aphakic patient without spectacle correction is technically blind (visual acuity below 3/60) the patient is at least able to navigate unaided around the homestead. The change from PLP to counting fingers at 1 metre may be adequate for this.

What really would benefit hundreds of thousands of cataract-blind people in Africa would be more surgeons willing to dedicate themselves to serving in rural areas. This would be many times more useful than investing in technology.

ANDREW R POTTER
Centre Hospitalier Departemental,
Abomey,
Benin

BOOK REVIEWS

Perspectives in Glaucoma: Transactions of First Scientific Meeting of The American Glaucoma Society. Eds M Bruce Shields, Irvin P Pollack, Allan E Kolker. Pp 290. £51.60. John Wiley: Chichester, West Sussex. 1988.

This volume records the transactions of the inaugural meeting of the American Glaucoma Society. In the preface the editors explain its triple aims: to allow the views of the society on glaucoma management to reach a wide audience; to document the founding of the society; and to honour the memory of the late Dr Charles Phelps, one of the society's founder members. The book succeeds in all these aims.

The distinguished authors and representatives of the society in the first 12 chapters provide a highly readable, scholarly, and entertaining account of some of the latest and most exciting developments that have taken place in the understanding and hence the rational management of glaucoma in recent years. Drance gives an excellent review article on the role of intraocular pressure in the development of glaucomatous damage of the optic disc. Hayreh reviews the relationship between glaucoma and ocular vascular disease, and Quigley gives an informative and helpful chapter on the clinical examination of the nerve fibre layer. Many of the authors in this book pay tribute to the contributions of Dr Phelps to glaucoma research, and chapter 3 is devoted entirely to

his research interests and achievements. This chapter is written by Mansour Armaly and leaves the reader in no doubt as to the tremendous contribution to the understanding of glaucoma made by Phelps; it also shows in what high regard he was held by all who knew him.

Chapters 5 to 12 concentrate more on recent research efforts and the development of new modes of treatment. Like the first four chapters they are well written, brief enough to keep the reader's attention, and contain a wealth of references that will be of use to anyone undertaking research in these fields.

Section V is concerned with current concepts in filtering surgery, and this was the least satisfactory section of this book. The critical appraisal and scientific approach which so exemplify the first half of the book give way to more of a 'personal experience' approach. This may reflect the authors' desire to pass on their surgical views to a readership less surgically orientated than most ophthalmologists practising in the UK. Some rather sweeping statements and generalisations appear unsupported by references. It was surprising to read that up to 14% of trabeculectomies performed in the USA require a choroidal tap for shallow/flat anterior chambers, as drainage of choroidal effusions after trabeculectomy must be one of the rarest of surgical procedures in the UK. It was disappointing, though perhaps inevitable owing to the three years that have passed since the meeting was held, that the success of 5FU could not yet be confirmed. Its role in repeat filtering surgery is now well established. Moreover, a chapter on the successful use of single plate Molteno tubes appears, yet present knowledge now favours the use of the two-plate Molteno tube because of greater efficacy. There was also no mention of the use of expandable intraocular gases, which have proved very useful for reforming flat anterior chambers after drainage surgery.

Section VI entitled 'Advances in management of glaucoma,' covers some recent aspects of glaucoma research, and topics such as YAG laser trabeculoplasty and the use of P-aminoclonidine to prevent post-laser pressure spikes are included. There is an excellent chapter by Elliot Werner on the difficulties involved in determining whether visual field loss has progressed between successive examinations. This is an important chapter which should become a required reference for papers claiming success or otherwise of a particular glaucoma treatment. However, the chapter on a new treatment for thrombotic glaucoma is not in keeping with the standards set in the rest of the book. It relates the authors' experience of a new method of laser iridotomy in the treatment of thrombotic glaucoma carried out on four eyes, one of which was normotensive and one had a vision of only light perception. It describes the pretreatment IOP as 39 mm Hg, and then makes the incomprehensible statement that 'this was adequate in two of the four eyes.'

In conclusion, this book is successful and instructive and provides a suitable commemoration of the inaugural meeting of the American Glaucoma Society as well as a glowing tribute to the memory of Charles Phelps. It will be of particular interest to ophthalmologists concerned with the management of glaucoma patients and to those with a research interest in glaucoma.

PETER K WISHART

Eye Diseases in Hot Climates. 2nd Edn. By John Sandford-Smith. Pp 242. £12.00. Butterworth: London, 1990.

The second edition of Mr Sandford-Smith's excellent book on eye diseases in hot climates is written primarily for the general medical officer, ophthalmic assistant, or ophthalmic nurse working in areas of the world with limited eye care services. After dealing briefly with the basic sciences and examination of the eye the author systematically describes the important eye conditions seen in developing countries in the context of their diagnosis and management.

Trachoma, onchocerciasis, xerophthalmia, and leprosy are all dealt with in detail, including the most recent information on the simplified classification for trachoma, the relationship between vitamin A deficiency and child mortality, the introduction of ivermectin for the control of onchocerciasis and the use of multiple drug treatment in the management of leprosy. All these sections will be of interest not only to the non-ophthalmologist working in developing countries but also to the expatriate ophthalmologist whose previous clinical experience with these blinding diseases is likely to be minimal.

The text is written in a simple and easily readable style and is excellently illustrated with line diagrams and colour plates. This book is essential reading for all doctors and paramedical workers involved in delivering eye care in developing countries of the world.

ALLEN FOSTER

All titles reviewed here are available from the BMJ Bookshop, PO Box 295, London WC1H 9TE. Prices include postage in the UK and for members of the British Forces Overseas, but overseas customers should add 15% to the value of the order for postage and packing. Payment can be made by cheque in sterling drawn on a UK bank, or by credit card (Mastercard, Visa, or American Express), stating card number, expiry date, and full name.

NOTE

Ophthalmology in Developing Countries

A symposium on Ophthalmology in Developing Countries will be held on 12-13 March 1991 under the auspices of the Francis I Proctor Foundation for Research in Ophthalmology of the University of California School of Medicine at San Francisco, California, USA. Details from Extended Programs in Medical Education, Room LS-105, University of California, San Francisco, California 94143-0742, USA.

Correction

We regret that in the November 1991 issue of the British Journal of Ophthalmology two figures were transposed. Figs 1A and 1B on page 685 (paper by Spaide *et al*) should be Figs 1A and 1B on page 698 (paper by Erny *et al*) and Figs 1A and 1B on page 698 should be Figs 1A and 1B on page 685. The legends are correct as they stand. Loose leaf copies of both corrected papers are provided in this issue.