

## Book reviews

**The Hereditary Dystrophies of the Posterior Pole of the Eye.** By A. F. DEUTMAN. 1971. Pp. 484, 263 photographs, refs. Royal Vangorcum, Assen, Netherlands (Hfl. 146)

Medical authors, writing about pathological entities may often be divided into "lumpers" and "splitters". The former tend to take all conditions which look alike and classify them together, while the "splitters" finely compartmentalize disorders often with the result that similar-looking entities are given multiple names. In no field is there more confusion than that of the disorders affecting the posterior pole of the eye. Deutman, in this beautifully produced and illustrated volume which is apparently an M.D. thesis, has attempted to categorize rationally hereditary disorders of the posterior pole. By virtue of prodigious labour, both by directly observing hundreds of patients and examining the world literature on the subject, he has given us a volume which will be the cornerstone for future endeavour in this field. The author turns out (for the most part) to be a "splitter", and he gives firm evidence for separately classifying sex-linked juvenile retinoschisis, vitelliform dystrophy, and, perhaps, Stargaardt's disease, as well as less common entities such as dominant progressive foveal dystrophy, reticular dystrophy of the retinal pigment epithelium (Sjögren), and butterfly-shaped pigment dystrophy. Less successful, for this reviewer, were the chapters dealing with drusen and fundus flavimaculatus.

All modern modalities of diagnostic testing are utilized in assisting with correct diagnosis. Included for each disorder are the results of electrophysiological testing, psycho-physical testing, spectral retinal photography, and fluorescein angiography. By means of these examinations it has been possible to determine which level of tissue at the posterior pole is involved initially in the pathological process.

One point that is rather disquieting is the author's use of the term "fovea" where most ophthalmologists would use the word "macula". Though there is, in the introductory chapter, the explanation for this usage, it is rather confusing, and anyone not starting from this initial chapter may be extremely puzzled. The numbering of the illustrations is also unfortunate; they are neither sequential nor labelled to show the chapter of origin. Several figures are unlabelled (such as the picture on page 15) or mislabelled (such as figures 1-7 on page 107 and figures 2-4 on page 327).

All in all this volume is highly recommended for anyone interested in macular disorders, and that should, presumably, include all ophthalmologists.

**Viruses and Uveitis** (*Virus et uvéites*). By C. MARTENET. 1971. Pp. 136, Figs, Tables, Refs. Doin, Paris. (Frcs 65)

The great majority of patients with uveitis show no evidence of a generalized systemic infection, and uveitis is a rare complication of infectious fevers of viral origin. The suspicion remains, however, that viral infections could be responsible for uveitis in the absence of obvious systemic manifestations. The careful clinical studies described in this monograph, in which the serum and, in many cases, the aqueous were examined for the presence of antibodies to a variety of viruses, lend little support for this suspicion. Out of 170 cases of uveitis, a viral aetiology was considered proved in five cases of herpes simplex, three of herpes zoster, and one of varicella. A rickettsial aetiology was suspected in an Egyptian patient, adenovirus infection in four other cases, infectious mononucleosis in two with papillitis, and influenza in one.

Although the results can only be considered disappointing, this has been a valuable study. The experimental work on herpes infection in the rabbit confirmed that local antibody production can take place in the eye and that infection of one eye can lead to a uveitis in the opposite eye.

The first part of this monograph contains an excellent review of the characteristics of the viruses known or thought to cause ocular disease and the literature concerning the clinical characteristics of viral uveitis, and the work ends with a brief discussion of treatment.