

effectiveness for most clinical requirements. Antilymphocytic serum has not so far been shown to be of value in corneal grafting or ocular inflammation.

The many detailed experimental and clinical studies presented in this symposium will be useful for those specializing in the field of ocular inflammation, but the clinical ophthalmologist will not find any easy solution to the treatment of inflammatory disease.

**Ocular Pharmacology.** By W. H. HAVENER. 2nd ed., 1970. Pp. 556, 304 figs, refs. Mosby, St Louis (Kimpton, London). (£13.25)

The first edition of this book brought together a very wide range of information concerning the drugs used in ophthalmology. The mode of action, route of administration, dosage, and toxicity were very clearly presented, with emphasis on the practical application in routine treatment.

The second edition has been brought up to date and supplemented by a section on the treatment of common ophthalmological conditions. Again the accent is on practical management, and the balanced and well-documented views of the author should be read by all ophthalmologists. The introductory chapter on the evaluation of therapeutic response is a salutary condemnation of "clinical impressions" unsupported by properly controlled trials.

This is an excellent and well-written book, enlivened by many examples from the author's own experience, and it provides a reference manual to modern work on ocular pharmacology and a practical guide to ocular therapeutics. It is well produced and well indexed, and has an extensive list of references at the end of each chapter.

**Ophthalmic Plastic Surgery.** By S. A. FOX. 4th ed., 1970. Pp. 590, 308 figs, refs. Grune and Stratton, New York and London. (\$29.75)

This new edition is a considerable improvement on its popular predecessors. After introductory chapters on anatomy, technical details, grafting, and basic techniques, there follow chapters dealing with all minor and major lid, lacrimal, socket, and orbital problems classified on a sensible anatomical basis. The book is very readable and practical in its outlook. The line diagrams are uniformly successful but the standard of photographs is rather variable for a book of this expense (a point that the author admits). It is a pity that modern radiotherapy in the treatment of lid tumours is not given more prominence (only six pages) as—in Great Britain at least—this would seem to be the ideal form of primary treatment. However, these are small criticisms of an excellent book.

**Management of the Patient with Subnormal Vision.** By G. FONDA. 2nd ed., 1970. Pp. 167, 114 figs, bibl. Mosby, St. Louis (Kimpton, London). (£5.85)

"The nation's blind population is increasing at nearly twice the rate of the general population"—an emotive statement and one that sets the theme for this excellent book on the management of the patient with subnormal vision.

This is a difficult subject for the clinical ophthalmologist largely because of the supposed requirement for the knowledge of advanced optics, and also for the length of time that needs to be devoted to each patient. Gerald Fonda's book sets down in a precise, uncomplicated form the background to the prescribing of visual aids. In the course of bringing our knowledge up to date many myths are exploded. We learn of the advantages of high plus lenses to aid reading even though the print must be brought very close to the eye, and the patient must "read with his nose". We learn of the difficulties of telescopic aids which may effectively make an individual legally blind, and there are provocative thoughts on the use of large print and the question of learning Braille.

The volume is well-produced, excellently illustrated, and written in a logical and lucid style. Each chapter is succinct and the final questions-and-answers section is particularly recommended.

All in all a very good book.