

Glaucoma in Infants and Children. By MARVIN L. KWITKO. 1973. Pp. 651, bibl. Appleton-Century-Crofts, New York. (\$31.35)

In a foreword Harold Scheie writes, "The detection of visual dysfunction [in children] cannot be left with the medical profession alone. The solution lies in a co-ordinated effort and the promotion of understanding among all persons in the child-oriented professions."

Such an outlook is in line with the recent thinking and planning of paediatric services in the United Kingdom and, although the title of this textbook would suggest a purely technical approach to the problem of glaucoma in infants and children, it does in fact touch on a wide range of visual disabilities, many of which involve glaucoma as an incidental complication.

The other major point which has stimulated the author to commit his ideas to print is his belief in the necessity for special training, special techniques, and an everlasting attention to detail. There is therefore a large section in which the technique of surgery is spelt out in the minutest detail and which will interest only the ophthalmologist who is concerned with the practical problem of congenital glaucoma and whose job it is to cope with it.

A chapter on congenital abnormalities is followed by chapters on embryology, normal and abnormal development of the irido-corneal angle, and a description of the infant eye. There follows a classification of glaucoma in childhood, a detailed account of the pathogenesis, and a long description of investigations leading to diagnosis.

Chapters on local malformations, associated abnormalities, and differential diagnosis concern themselves with a large number of paediatric syndromes, some of which are barely relevant. There is an excellent chapter on secondary glaucoma in infancy, a first-class account of the treatment of congenital glaucoma, and a final chapter on the treatment of other types of glaucoma seen in young patients. There is a wide bibliography and a good index.

On the whole the book is too discursive, in that many conditions are described somewhat casually, and it is not always obvious why they have been mentioned at all. This is a pity, for buried within the covers there is much solid material.

S. J. H. MILLER

Congenital Esotropia: Management and Prognosis. By D. M. TAYLOR. 1973. Pp. 147, 52 figs. International Medical Book Corporation, New York

The author presents an important challenge to all ophthalmologists by obtaining stereopsis of 40 to 60 seconds of arc in 6 congenital esotropes who were operated upon before 2 years of age.

Starting with an historical review of the feasibility of obtaining a functional cure by early surgical correction of strabismus, he continues with the appropriate recent neurophysiological advances before he comes to the clinical problem.

Congenital esotropia is defined as constant esotropia present before the age of 6 months as proved by direct personal observation or by photographs. 102 patients were operated upon after 2 years of age, but 50 had surgery before their second birthday. Detailed testing and follow-up studies were made and the results are discussed at length and critically compared with similar studies.

54 patients had adequate but late surgery (*i.e.* after 2 years of age) and none had fusion. Fifty had their operations before 2 years of age and thirty (60 per cent) had fusion with stereopsis of 40–400 seconds of arc. In six of these cases of functional cures there was stereopsis of better than 60 seconds of arc.

In his discussion the author pays particular attention to the size of suppression scotomata and he challenges Parks's concept of foveal function in the monofixation syndrome.

This well-presented book with full case histories on all thirty patients who obtained fusion deserves to be widely read.

P. FELS