although these are not as commonly used in the United States as in the United Kingdom. The United States experience in soft lenses has to some extent been restricted because only the Bausch and Lomb lens has been approved by the Federal Food and Drug Administration.

In the next edition it would be useful if the radii of the curvatures of lenses and eyes were given in millimetres as well as in dioptres.

These criticisms are only suggestions to improve an easily read, well illustrated book. It provides much useful information to those starting contact-lens practice and to those more experienced, at a reasonable price.

M. Ruben

Symposium on Ocular Therapy. Vol. 6. Edited by I. H. LEOPOLD. 1974. Pp. 112, figs, bibl. Mosby, St Louis; Kimpton, London (£7.90)

The sixth volume of this admirable series contains twelve chapters by different contributors, each an expert in his subject. Particularly valuable are the chapters on complications with carbonic anhydrase inhibitors by Morton Grant, and on drug toxicities and drug interactions by Leopold and Gordon, both of which include much information of practical value to the clinician. Other notable chapters are those on the latest drugs for herpes simplex by Kaufman, antifungal drugs by Lieberman, and, more in the research field, diphenylhydantoin in optic nerve disease by Becker and Podos. Sections on the prophylaxis of ophthalmia neonatorum and the therapy of chronic adenoviral infection contribute nothing new, and acupuncture is dismissed as placebo therapy. There are useful chapters on ocular changes in drug abusers, cardioactive glycosides, radioactive isotopes, and pilocarpine ocuserts.

The practising ophthalmologist is provided with much up-to-date information on a wide variety of therapeutic topics, retaining the emphasis, as in previous volumes, on their practical nature, and this book is an important addition to every ophthalmologist's library.

C. A. Brown

Single and Multiple Stimulus Static Perimetry in Glaucoma. The Two Phases of Visual Field Examination. By E. L. GREVE. 1973. Pp. 355, figs, bibl. Junk, The Hague (100 Dutch guilders)

Two comments should be made about the title of this book. The first is that the two phases of field examination are the detection phase and the assessment phase. In the detection phase, one has to decide whether there is a defect in the visual field and, if so, where this defect is located, and what is its shape and size. In the assessment phase, the topography and intensity of the defect have to be determined in much greater detail.

The second comment to be made about the title is that it does not convey fully the intention and scope of the book, which is perhaps best stated in the author's own words on page 312: "It is hoped that this study will be a guide to those who wish to specialize in the difficult subject of the visual field examination".

The author believes that, from the practical angle, the most important events in the history of visual field examination during the past 30 years have been the introduction of the Goldmann perimeter for quantitative kinetic perimetry, and the Tübingen perimeter for static perimetry.

He maintains that a satisfactory examination of the visual field is best carried out when the relevant fundamental principles of physiology are thoroughly appreciated. Chapter 2 deals, therefore, with some basic matters from visual physiology including the difference threshold, the physical characteristics of the stimuli used for visual field examination, and the neural mechanisms of adaptation and of spatial and temporal interaction. The relevance of all these matters to the practical examination of the visual field is considered.

Next, he deals with the fundamental principles of static and kinetic perimetry, drawing particular attention to the relative limitation of the accuracy of the latter. Detailed consideration is then given to the optimum conditions for carrying out a routine examination of the visual field. The matters