Book reviews


The problem of keeping up to date with the continuously expanding literature on glaucoma is not a new one, but fortunately since the beginning of the century there has been a series of dedicated senior students of the subject who have provided us at suitable intervals of time with valuable critical reviews. Professor Leydhecker produced such a work in 1960 and his present book extends the review, covering completely the literature from 1930–1970, and including as much as possible up to 1972. In this second book, the text has been rewritten and the material rearranged, and the magnitude of this task may be judged from the fact that the writings of a further 12 years have necessitated an increase in the number of pages from 666 to 868. It is somewhat depressing to discover that this increase of about one-third in the size of the book has been accompanied by an approximately three-fold increase in its cost (in German currency).

An essential process in producing this sort of book is a reduction in volume but this should not be achieved by evaporation to dryness. The author of this book has been rightly concerned therefore with producing not just a catalogue of all that has been written but an interesting commentary as well. This is a difficult matter, but the aim has been achieved without losing the possibility of identifying the original publication upon which each statement is based, and without making the text unreadable by the frequent parenthetic naming of authors. It does mean that to find a reference it is often necessary to go from the numerical superscript in the text to a footnote and thence to a sectional list of references, but this is not too arduous, because of the way in which the book has been organized. Each chapter deals with a particular major aspect of glaucoma, as, for example, secondary glaucoma, or the incidence of glaucoma, or gonioscopy, or medical treatment, and so on. Within each chapter there is a further breakdown into numbered sections and sub-sections and into even smaller parts, the point being that there are seldom more than a few pages of text before one comes to the sectional list of references. This means that many references have had to be listed several times, and this must have entailed a vast amount of work, but it has been fully justified in the resulting benefit to the reader. At the end of the book there is an author index and a subject index, the former occupying no less than 108 pages, while the latter takes up a mere twenty pages. One could argue that there is a lack of balance here, but perhaps it worked out this way inevitably, the published papers being the origin of the whole work. Also, one has to state that the subject index stood up well to a trial of its efficiency by the reviewer, although there does seem to be an unfortunate loss of arrangement under the letter S.

Apart from a few gonioscopic views of angles, some drawings of surgical procedures, and one or two pictures of tonometers, there are hardly any illustrations; the author says that this was done to keep the price down but this is one area in which economy may have been too drastic, and there would have been appreciable benefit from the inclusion of a few examples of electron microscopy of the outflow pathways or of charts of field defects or of a histogram showing the distribution of normal intraocular pressure or a fluorescein angiogram of the glaucomatous disc, and so on. By contrast with this lack of pictures there are many tables, the majority of which are extremely useful, summarizing well such diverse matters as the incidence of glaucoma, the responses to be regarded as pathological in the provocative tests, or the results of surgical procedures. A few tables are of questionable value, such as those which occupy three pages giving the values of outflow facility in tonography, and the obsolete calibrations for the Schiotz tonometer.

The general impression is that there can be very few questions that one can ask about glaucoma without finding somewhere in this book some sort of answer or at least some indication of where help might be sought in the literature. Any book which does this is indispensable to the glaucoma research worker, and the author is therefore to be congratulated on the excellent result of his industry and knowledge.

**John Glosster**


This is a translation of a book published in Russia in 1967. The first of the three sections is a clinical electroencephalographic study on visually impaired patients, both awake and asleep, deaf and deaf/blind patients, and patients with hemianopia. It is shown that the alpha rhythm is dependent on an acuity sufficient to discern shapes and that if it is lost the most pronounced activity shifts forward to produce a typical Rolandic rhythm. It is noted that a cyclical activity of 8–13 Hz is not necessarily an alpha rhythm and that the wave form as well as the frequency must be assessed.

The second section reviews EEG studies on young people with poor vision and cerebral damage. As poor visual acuity is associated with a diminished EEG potential, this change makes it difficult to assess coincident cerebral damage.

The third section is an experimental study in the rabbit. This is an excellent book based on one of the better aspects of Soviet society: the care and education of the disabled allowing their co-operation in this study. The translation only occasionally irritates, for example, eye injury is termed 'damage to the peripheral part of the analyser'. There is a full bibliography and this gives an introduction to the extensive Russian literature in this
field. An unnecessary addition is the transliteration of the Russian titles; they are as incomprehensible as the original script and make no contribution to the book. The amount and detail of the work undertaken and the excellent review of the literature makes this book a valuable contribution to electrophysiological studies. Its major defect is that it is 10 years out of date. Visually evoked potentials are not considered. On the last but one page is a reference to Hubel and Wiesel’s microelectrode studies. In the years since this book was written the combination of evoked response and single cell studies has produced an exciting and fruitful field in visual research. It is to be hoped that the author has continued her work using these new techniques and that a second edition of this book will follow.

J. H. KELSEY

Notes

Post-graduate Course in Retinal Detachment and Vitreous Surgery

New York, April 17 and 18, 1975

The Page and William Black Post-graduate School of Medicine announces a post-graduate course in retinal detachment and vitreous surgery to be held at the Mount Sinai Medical Center, New York. The course is under the direction of David B. Karlin and the registration fee is $50.00. For further details write to the Registrar, The Page and William Black Postgraduate School of Medicine, Mount Sinai School of Medicine, Fifth Avenue and 100th Street, New York, NY 10029, U.S.A.

Oxford Ophthalmological Congress

July 7 to 9, 1975

The Congress will meet in the Zoology Department, South Parks Road, Oxford. This year accommodation is available for a limited number of Registrars in Ophthalmology, and others who are studying or practising ophthalmology but are not eligible to become members. Further details may be obtained from the honorary secretary and treasurer, Mr W. Martin, 609 Warwick Road, Solihull, West Midlands B91 1AP.

Obituary


Archie Anderson’s quiet, courteous manner, his integrity, his search for fairness, his delicate professional skill and gentleness, his self-effacing modesty, and his great desire to help others, endeared people to him. He was quietly full of fun, a dedicated letter-writer and a popular speaker for light or serious occasions. When he died peacefully at the age of 83 years on November 4, 1974, his friends honoured him by a thanksgiving service for a long and productive life.

The son of an Australian country G.P., he graduated M.B.B.S. from Melbourne University in April, 1915, and within six days had sailed for England to enlist in the R.A.M.C. (A.A.M.C. being fully manned). After two years service his hearing became troublesome so he resigned and returned to Australia for treatment and to enlist with the A.A.M.C.

When discharged in 1918 he turned to ophthalmology and started his own practice in 1923. In 1926–27 he travelled to London, to obtain the D.O.M.S. In 1930 he was admitted F.R.A.C.S.

In 1927 he was appointed to the Honorary Medical Staff of the Victorian Eye and Ear Hospital, Melbourne, and was subsequently promoted through the various ranks of the Honorary Medical Staff, becoming Senior Ophthalmic Surgeon and Chairman until he retired in 1950. He was a member of the Committee of Management of the Hospital from 1946, and Vice-President until 1967.

In 1957, when the new complex of five operating theatres was declared open by His Excellency the Governor of Victoria, it was named the ‘Archie Anderson Operating Suite’.

When the Ophthalmic Research Institute of Australia was founded in 1953, Archie Anderson was unanimously elected chairman. He was a key figure in the negotiations that were to bind the University of Melbourne, The Royal Victorian Eye and Ear Hospital, and the Ophthalmic Research Institute of Australia to form a ‘Prevention of Blindness Unit’ that facilitated the establishment of the first Australian chair of ophthalmology.

Another large section of Archie Anderson’s life was