Book reviews


This book gives the impression that it has been in press for about 10 years. It appears to deal with the microsurgery of glaucoma prevailing at the time of the Burgenstock microsurgery conference in 1968.

At present sinusotomy is being performed nowhere except perhaps in focal regions in the Soviet Union. Trabeculotomy for open-angle glaucoma has to all intents and purposes been abandoned even in West Germany. Trabeculotomy—here named Sektorensinus-ekтомie—has replaced both procedures everywhere, including, by all accounts, the Soviet Union. The extensive literature on trabeculotomy has been completely ignored. Indeed, the grossly inadequate bibliography contains no references later than 1972, and many important references before this date are missing. For example, no credit has been given to Walker and Kanagasandra m, whose external fistulisation of Schlemm’s canal preceded sinusotomy, and is exactly the same procedure. The concept of canicular blockage receives scant attention, and surgical procedures based on it—namely, goniospas mus and laser coagulation of the peripheral iris—none at all.

The illustrations are in general adequate, but it is sad that many of them have been reproduced without any acknowledgement of their source.

As a propaganda exercise this book may succeed in the Eastern bloc, but as an international contribution to the microsurgery of glaucoma it is inadequate. J. E. CAIRNS

Vitreous Surgery and Advances in Fundus Diagnosis and Treatment. Edited by H. MacKENZIE FREEMAN, TATSUO HIROSE, and CHARLES L. SCHEPENS. 1977. Pp. 681, figs., tables, refs. Appleton-Century-Crofts, New York (£50)

This is one of the best of several recent publications on vitreoretinal disorders. It presents the proceedings of the Vitreoretinal Congress which was held in Boston in June 1975.

The text is divided into two main parts. The first, and by far the largest part, deals with the vitreous. It begins with a detailed description of the normal and abnormal vitreous. The short chapter by Constable on vitreous membranes is particularly interesting. The second section deals with methods of examination of the vitreous, with detailed descriptions of ultrasonography and the evaluation of retinal function in the presence of vitreous opacities. The last chapter in this section, on the pre-operative medical evaluation of patients undergoing vitrectomy, written by a physician, is particularly important. By far the largest section is devoted to closed vitreous surgery. It deals with observation and illumination during surgery and detailed descriptions of all the vitrectomy instruments by their designers. The many chapters on surgical techniques are of particular interest. They include vitrectomy techniques and results in diabetes, trauma, and complicated retinal detachments. The section on vitreous injections describes the use of intravitreal gas injections and vitreous substitutes. It is interesting to note that liquid silicone is mentioned only very briefly. The last section, written mainly by the Boston group, deals with open-sky vitrectomy.

The second part of the book deals with the retinal and choroidal circulation and the use of monochromatic light in the diagnosis and treatment of retinal disorders.

This book is highly recommended to readers interested in vitreoretinal surgery. Most of the chapters are short and very readable, with excellent illustrations. The discussions that follow most of them are particularly informative.

J. J. KANSI


This useful book covers the subject of ocular optics adequately. To be precise, the question of vision does not enter the problem except when subjective refraction comes to the aid of objective methods. The term ‘visual optics’ covers a larger field not encompassed by this book.

The text leans heavily on old friends, well-known diagrams having been lucidly redrawn and computational methods having passed through a clarifying sieve. On the rare occasions when the author strays into perceptual problems, such as perceived size, he slips up not on grounds of psychology but on those of physiology. The book illustrate the unfortunate situation generated by the SI system of units, metres and millimetres being mixed almost ad lib. A generation beginning to come to grips with the advantages of the decimal point could have been spared this unnecessary complication. However, the book covers all clinical needs, and its approach to contact lens optics is of more than a passing interest.

R. A. WEALE


This volume consists of 10 chapters providing current information on drug therapy and ophthalmology. In glaucoma-cycloplegia crises prostaglandins, particularly PGE, were found in high concentration in aqueous humour during the attack. Intraocular pressure and the aqueous PGE content could be correlated. Oil drops of indomethacin in concentrations of 0-5% were found to reduce postoperative inflammation following soft-cataract aspiration. It seems possible that miosis and postoperative inflammation are the result of prostaglandins.

Four cases were reported in which prolonged use of local anaesthetics resulted in the development of a yellowish white ring in the corneal stroma after primary epithelial disease, a corneal abrasion, or a contact lens injury.

The best intraocular irrigating solution—one which spares the endothelium—is glutathione bicarbonate