Book reviews

Visual Evoked Potentials in Man: New Developments. Edited by J. E. DESMEDT. 1977. Pp. 558; figs., tables, refs. Clarendon Press, Oxford (£21)

Changes in the human electroencephalogram specifically related to a sensory stimulus have been recognised for 40 years, but it is only with the advent of electronic computers that these changes have been easily identified. In the last 15 years a vast literature has accumulated relating to various sensory functions, mainly visual. Unfortunately there are numerous problems in the application of this method which were not appreciated by many workers. The result of this has been the publication of many bad or contradictory papers which have led clinicians to doubt the value of the technique. The problems were noted forcefully in an exhaustive review by Regan (1972). The present volume is based on a symposium held in Brussels in 1974.

That there continue to be problems in these studies is immediately evident, as there is no generally accepted name for the technique. There are upwards of 25 names with their attendant acronyms in English alone, and to the clinician it will not be readily apparent that an ACoP is the same as a VER. The term approved by this meeting is the visually evoked potential (VEP).

There are 35 contributions to this volume covering new techniques, responses to various stimuli, and clinical applications. As in any symposium, the contributions vary in standard, but the first 2 are valuable. Halliday chaired a meeting to consider pattern visual stimuli, which is a useful critical review. Spekreisje and his colleagues from Amsterdam analyse the visual processes involved, but their treatment is more mathematical than the average clinician would appreciate. There are 15 clinical papers, but apart from the application to multiple sclerosis it is evident that the applications of the technique are more potential than actual. However, there is no doubt that this potential will be realised, and this painless, non-invasive technique will have wide application.

This is a book that is unlikely to be read and far less likely to be bought by the clinician. It is essential to anyone working in this field and it provides an invaluable access to the literature.

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Regan, D. (1972). *Evoked Potentials*. Chapman and Hall: London.

Psychiatric Problems in Ophthalmology. Edited by JEROME T. PEARLMAN, GEORGE L. ADAMS and SHERWIN H. SLOAN. 1977. Pp. 167, figs., tables, refs. Charles C Thomas, Springfield (\$12.50)

This book makes a rare collective contribution to an area of ophthalmic medicine which forms a prominent part of clinical practice. There is no attempt to review previous literature, the emphasis being on the results of practical experience. Although the authors cannot refer to or draw upon any quantitative or adequately controlled

studies, several themes are well expounded. Only occasionally are they so opinionated or 'way out' as to arouse a contentious response.

The first chapter is a colourful, amusing account of the symbolic significance that the eye has provoked in individuals of varying fame. Such an effective 'opener', however, places undue emphasis on the frequency of ocular symbolism in the psychodynamics of ophthalmic somatisation during psychological or emotional disturbance.

The second chapter, contributed by a psychiatrist, is called 'The Ophthalmic Patient.' This would have served excellently for the book as a whole, as the latter is concerned essentially with the human response to life situations, as met with in the practice of ophthalmology. Much is superfluous and impractical, especially within confines of the National Health Service, but there is also much of value. The occasional penetrating insight is documented with erudition—'The depressed patient tends to focus his attention more on himself and less on the world around him. Thus, what went unnoticed for years and may be normal for that person, now becomes a matter of great concern, being considered abnormal by the patient.' How often is a depressive condition sought in the presentation of eye-ache, muscae volitantes, or physiological diplopia?

There is an unreservedly excellent chapter on 'Reaction to Loss of Sight.' The practical experience of the psychologist author with blind people and their families is forcefully demonstrated. Sensible counselling and management is put forward.

There are useful chapters on the emotional responses of children to hospitalisation and on postoperative psychiatric syndromes in adults. Mention of the regressive behaviour of retarded or brain-damaged children might have been mentioned, and the delirium that may be caused by atropine, anoxia, and infective post-operative toxæmia was omitted in the differential diagnosis of sensory deprivation.

The chapter on 'Stress and Strabismus' contributes the least, providing a fine collection of nebulous concepts. Such chaff should not divert the ophthalmologist from seeking to become conversant with psychosomatic ophthalmology.

One of the most interesting contributions touches on a problem common to the whole of medicine as well as ophthalmology—the diagnosis and management of patients with symptoms but without signs. The study is limited because the paucity of patients and controls does not allow statistical analysis. Hard data are also lacking. Despite the deficiencies some notable points are made. They include excessive diagnosis of hysteria in psychogenic presentations, the great frequency of psychogenic ophthalmic pain, and its association with depression.

In America, where psychiatry has a different emphasis, more liberal referral from ophthalmologists is urged in such diverse situations as reaction to blindness, children