

## Book reviews

**Parsons' Diseases of the Eye.** 16th edn. By STEPHEN J. H. MILLER. 1978. Pp. 598, figs. Churchill Livingstone, Edinburgh (£10)

The sixteenth edition of 'Parsons' appears with a new editor, only the third in this classic textbook's 70 years' history. This book has the distinction and indeed the responsibility of being the basic annual of instruction of many thousands of ophthalmologists, and the whole gamut of ophthalmology is covered in some 600 pages of very concisely written text.

It is not difficult to discover the editor's special interests, for the chapters on neuro-ophthalmology, glaucoma, and ocular motility have not been bettered in far larger textbooks. This edition is particularly well balanced, so that a beginner in ophthalmology would find nearly every aspect covered. The descriptions of some techniques, as for example on the theory and practice of photocoagulation and fluorescein angiography, might well be expanded in the next edition, and some of the black-and-white photographs of pathological conditions in the anterior segment could be better shown by drawings.

In general, however, this is an excellent textbook and a worthy successor to the previous editions. It is remarkable that it has been possible to compress so much information in a single volume, and it should attract a particularly wide readership.

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**Glaucoma, Conceptions of a Disease: Pathogenesis, Diagnosis, Therapy.** Ed. KLAUSE HEILMANN AND KENNETH T. RICHARDSON. Pp. 434. £35.00. Holt-Saunders: Fastbourne. 1978.

The editors of this very readable and worthwhile book have started from the premise that 'the "disease" glaucoma—although defined as an interrelationship between elevated intraocular pressure, visual field loss and optic nerve disease—is not the same thing to all men—at least to all glaucoma experts.' The editors have selected a number of acknowledged authorities on glaucoma and asked from each an outline of their ideas on the disease, 'with information on the present state and continuing development of glaucoma research'. The authorities chosen have rewarded us with discussions on their chosen field within glaucoma. The editors have combined these discussions into sections, each discussion comprising a chapter or part of a chapter within a section. The result is a book for the clinician which has special emphasis on basic sciences and also a book for the basic scientist needing readable chapters on clinical glaucoma. Most chapters are extensively referenced, allowing easy progression to original papers for any point in the text that the reader may wish to explore in greater detail.

The book may be divided into 2 unequal parts. The first, containing sections on 'conceptions', basic sciences, pathogenesis of glaucoma damage, methods of examination and pharmacology, accounts for the first 300 pages, while the last quarter of the book deals with 'manage-

ment', 'surgical techniques' and 'classification and synthesis' in that order. The book is introduced with a foreword by Hans Goldmann and has an epilogue by Stephen Drance.

Despite the authors' original introduction of individualistic ideas about glaucoma there is remarkably little dissent between authors within the book. In an excellent chapter on the chamber angle Rohen states that intraocular pressure does not increase with age—a point at variance with the conclusion reached by Worthen 2 chapters later. Rohen observes age related changes in the trabecular meshwork, and, noting that the outflow facility falls with age while intraocular pressure apparently does not, considers that aqueous production must also fall. This may well be true, but not necessarily for the reason stated.

Henkind explains glaucomatous visual field defects on the basis of loss of the radial peripapillary capillaries in one chapter, only to have this explanation attacked and near demolished by Hayreh in the succeeding chapter. Hayreh, in 2 comprehensive chapters, describes the structure of the optic nerve and the pathogenesis of visual field defects. He summarises his own work and critically reviews others' work in this field before concluding that visual field defects in glaucoma *must* be vasogenic in origin. While his conclusions are not universally accepted, none can disagree with the volume and quality of work Hayreh has carried out while investigating this problem.

Apart from slight disagreements between authors the reader has been given many excellent chapters, frequently containing useful tips to assist us in the management of patients with glaucoma. Although it is not possible to mention each, a few will be commented on here.

The section entitled 'Glaucoma damage' includes a discussion by several authors on visual field loss. An important contribution by Aulhorn describes the earliest visual field defects detected in glaucoma patients at Tübingen, while Heilmann discusses progression and regression of visual field defects. Under the section 'Methods of examination' an excellent chapter by Greve discusses different methods of perimetry, concentrating on static perimetry. One point which these authors might have discussed more fully when describing very, very early defects is their reproductibility, for identification of such defects by static perimetry is of little use if the defects reflect only transient aberrations in the receptor system.

'Methods of examination' concludes with a practical treatise on photography by Reidel, put in perspective by the editors in a discussion entitled 'Clinical value of photography', in which they separate photography for record purposes from photography to document progression of the disease. The editors stress the limitations and value of colour photography of the optic discs in this latter regard.

Richardson, in discussing 'Management', emphasises the role of 'office phasing' and describes a therapeutic trial that should be undertaken before embarking on long-term topical glaucoma therapy. He divides the patients with chronic open-angle glaucoma into degrees of 'functional status' and manages them accordingly