

Kolker identifies problems in management of glaucoma patients with interrelated diseases, stressing the potential role of systemic hypotensives in reducing optic nerve perfusion. He notes that, while beta blocking agents lower both systemic and ocular pressure, other systemic hypotensives may significantly reduce perfusion pressure at the optic nerve by leaving intraocular pressure unchanged. Clonidine is particularly singled out because the ocular hypotension is considered by some to follow ocular vasoconstriction—not an ideal state for the glaucomatous optic nerve. Kolker also emphasises the role of the ophthalmologist in informing the patient's physician of the existence of asymptomatic shallow anterior chambers, for such a patient might be considered at risk should systemic drugs that produce mydriasis be prescribed.

In the section on management Krupen and Podos adopt an almost didactic approach when classifying the primary glaucomas together with identification of symptoms and signs. Of particular importance are their paragraphs entitled 'problems for consideration', in which they outline imperfectly resolved questions that affect both closed- and open-angle glaucomas. These 2 authors have written a masterly account of the primary glaucomas; it should be on the reading list of all Fellowship candidates.

The book contains a wide range of subjects, written by acknowledged experts in Europe and the USA. Despite expected divergences of opinion it possesses as a whole a remarkable cohesiveness, for which the editors are to be congratulated. The book is a worthy addition to any ophthalmologist's library and should act as a useful reference source for many of the problems met with in dealing with glaucoma patients. ROGER HITCHINGS

**Plasties et reconstructions orbito-palpébrales.** By DENYS MONTANDON and GASTON F. MAILLARD. Pp. 128. SwFr 75.00. Médecine et Hygiène: Geneva. 1979.

This book on plastic surgical techniques in the orbital region is written in French, but the excellent line diagrams next to operative photographs illustrate the procedures so well that only a minimal understanding of the language is necessary. It is well researched with a short historical introduction and an excellent bibliography at the end of each chapter. Basic techniques are covered at the beginning of the book and the text is subsequently kept to a minimum. The section on eyelid reconstruction is especially well presented and reflects the author's excellent training in plastic surgery. It provides a very good appreciation of what soft tissue reconstructive procedures are available in this region. By contrast ptosis surgery and the correction of eyelid malpositions are not adequately covered for an ophthalmologist, although references for further reading are given in the bibliography. Fractures and orbital skeletal surgery for congenital malformations are discussed, but the correction of soft tissue anophthalmic socket deformities and lacrimal disorders are considered too briefly for an ophthalmologist. It is therefore primarily a book for

plastic surgeons operating in the orbital region, but it should also be of use to ophthalmologists, particularly those prepared to embark on more extensive and ambitious eyelid reconstructions. J. R. O. COLLIN

## Notes

### Keeler award for clinical study

In addition to the existing awards the trustees have decided to create an additional travelling fellowship of up to £2000 in any one year which would involve the applicant attending one centre for a continuous period of not less than 6 months. Applications are now invited from consultant ophthalmologists or senior registrars in the United Kingdom about to take up consultant appointments, and any other suitable applicants, the latest date for receipt of such applications to be 31 March 1980, which will be considered by the trustees in July 1980. Further information from the Secretary, Keeler Award, Angus, Campbell & Co., Metropolis House, 39/45 Tottenham Court Road, London W1P 0JL.

### Change in style of references

In accordance with the Vancouver agreement many medical journals are to standardise the instructions they issue to authors on the preparation of articles. References will be cited by the numerical system already familiar in many journals, including the *British Medical Journal*.

A paper (or book) cited in the text is referred to there by a superscript number. In the list of references the papers (or books) appear in the numerical order in which they are first cited in the text, not in alphabetical order by authors' names. For convenience in preparing the typescript the reference number may be typed between parentheses on the line, not superscript. The titles of journals will be abbreviated in accordance with the style of *Index Medicus*. In the typescript they should either be abbreviated in that style or given in full. This journal will change to the numerical system from the first issue of 1980. *Authors submitting papers are asked to adopt it now in order to facilitate editing.* Three examples follow:

- 1 Green A B, Brown C D, Grey E F. A new method of measuring the blood glucose. *Br J Ophthalmol* 1980; **64**:27-32.
- 2 Green A B, Brown C D. *Textbook of Medicine*. London: Silver Books, 1980.
- 3 Grey E F. Diseases of the pancreas. In: Green A B, Brown C D, eds. *Textbook of Medicine*. London: Silver Books, 1980; 349-362.

Copies of the Vancouver agreement (50p, post free) are obtainable from the Publishing Manager, British Medical Journal, BMA House, Tavistock Square, London WC1H 9JR.