These problems would be no different in a prospective study and do not detract from the conclusions reached in our paper.

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Book reviews

Orbital Tumors. 2nd edn. By JOHN W. HENDERSON. Pp. 607. DM.194.00. Georg Thieme Verlag: Stuttgart. 1980.

The ophthalmologist is usually the first person to see patients with orbital disease, and his clinical horizon is thus opened to a wide variety of systemic, neurological, and developmental abnormalities which do not occur within the globe. The second edition of this work on orbital tumours appearing 8 years after the first edition is therefore to be welcomed. The distinguished author has collaborated with a pathologist, G. M. Farrow, also from the Mayo Clinic.

The strength of this book lies in the fact that the author has personally studied a series of 764 cases of orbital tumour and observed their natural history over many decades. This is an essentially personal book, which is embellished with good clinical photographs, supported by x-rays and numerous examples of pathological specimens. Presentation is excellent, and the bibliography is historically extensive, but many recent references of relevance seem to be omitted.

The material is considered in depth, with each condition receiving historical analysis, followed by aspects of clinical diagnosis and details of the pathological features. In any book covering so extensive a field there are omissions, but the failure to emphasise opticociliary shunt vessels as a characteristic feature of the nerve sheath meningioma is disappointing. Instead the authors describe papilloedema (presumably they mean disc oedema) and striae of the posterior wall of the eye (differential features of retinal and choroidal striae are now well established). There are many

examples like this where clinical and descriptive terminological improvement is possible.

However, as the author indicates in the preface, the evolution of CT scanning has provided 'a wonderment beyond imagination' in orbital diagnosis. This wonderment is appropriate because only 8 of the 600 pages in this book are concerned with scanning. CT scanning is probably the most important diagnostic mode in orbital disease, and the absence of good examples of CT scans in the more common lesions is a major drawback to a book appearing in 1980.

This book is enjoyable to read and contains a great deal of information, but sadly a third edition encompassing the full impact of CT scanning will be necessary for the ophthalmologist of the 1980s.

M. D. SANDERS

Az Endogen Uveitisek És Általános Orvosi Vonatkozasaik. By LUGOSSY GYULA. Pp. 407. 116 Ft. Akadémiai Kiadó: Budapest, Hungary. 1980.

Dr Lugossy is well known to English ophthalmologists from his contributions to the meetings of the Ophthalmological Society of the United Kingdom. This monograph is the result of a lifelong study. The material consists of patients with uveitis observed and followed over 30 years in the Ophthalmic Department of the Rheumatology Institute in Budapest. His results are complemented by replies from questionnaires from hospitals in Hungary and other centres interested in the problem.

Chapters are devoted to epidemiology, classification, experimental uveitis, role of auto-antibodies, clinical and paraclinical investigations, and immunology. Two final chapters discuss the pathology of uveitis and the whole spectrum of aetiology. References at the end of each section are up to date and taken from English, French, German, and Russian literature.

Lugossy's writing is lucid and the presentation good. It is a pity that the print is on such glossy paper. For those who read Hungarian the book is inexpensive. At today's exchange rate it costs less than the price of a throw-away paperback and is strongly recommended to clinicians.

M. KLEIN