

especially the VER. Thus the response may be influenced by the patient's mood as well as the state of the sensory channel. As with the ERG the techniques, stimulus parameters, and the use in children are reviewed. Higher visual centres, including binocular vision, may also be investigated. It is sadly evident that many investigators are unaware of the established clinical concepts of simultaneous perception, fusion, and stereopsis. Much of the treatment is mathematical. The genius who is able to explain to the clinician the application of Fourier analysis to a nonlinear multichannel system has yet to publish.

This is not the book for the clinician looking either for easy reading or an authoritative review. The former may never appear and the latter is awaited. It is an invaluable source of information and with the previous 18 volumes an essential part of any ophthalmic library. Anyone interested in this field can do only one thing better than looking through this volume and that is to join the society. The book then comes free.

J. H. KELSEY

**The Complete Medical Consultant.** By A. H. OSMOND. Pp. 114. £7.00. H. K. Lewis: London. 1982.

The author declares that this work is mainly intended for medical students contemplating their future, but it should be added that the book also has much to say to the newly appointed consultant and even to the established professional. In a way this little book simply states the obvious, and yet as one turns its pages one is forced to accept that much of its material, which bears so directly upon many vital aspects of successful professional life, is by no means always capable of obvious definition. Therefore the identification and analysis of so varied a collection of possible stumbling blocks in the path of the consultant's progress through his professional life, and by so understanding an author, will undoubtedly give valuable insight to the uninitiated, whether as student or as young consultant on the threshold.

Despite his prolonged professional training, nowhere in the curriculum is the trainee likely to have received much help in the many practical matters touched upon in this book. Much sound, if avuncular, advice is offered on topics as varied as the choice of house from which to practise (including spouse with whom to share it) on the one hand, to public speaking on the other. All of it is directed towards the maintenance of the highest standards in professional life, so that the consultant may the better serve his patients and thereby fulfil himself. The book is therefore recommended to a wide readership.

J. WINSTANLEY

**The Secondary Glaucomas.** By ROBERT RITCH and M. BRUCE SHIELDS. Pp. 429. £39.25. C. V. Mosby: London. 1982.

Textbooks on glaucoma and glaucoma teaching in general have tended to concentrate on the problems posed by the primary glaucomas. As a result the student may be misled into thinking the secondary glaucomas are an unimportant extra in the specialty, one of a list of complications arising from a disease process or an unwanted side effect following a form of treatment. Although less common than primary glaucoma, these diseases can be the most difficult of all glaucomas to treat. There has clearly been need for the

secondary glaucomas to be collected together under one roof, when their multiplicity and extraordinary variations can be seen and appreciated.

This the editors have set out to do—and succeeded in their task. They have collected together a group of writers, known for their expertise with a particular type of secondary glaucoma, and asked them to describe their experiences. The book is prefaced with a chapter on 'Classification and mechanisms' to give an embrace to all the following chapters. The whole is written in that uncluttered prose that characterises American medical writing. For any ophthalmologist wishing to learn more about secondary glaucomas this book is a must.

ROGER A. HITCHINGS

**The World's Eye.** By ALBERT M. POTTS. Pp. 93. US\$21.50. University Press of Kentucky: Lexington, USA. 1982.

To only a limited band of recent sophisticates has a study of the eye suggested the ophthalmology we all know and practise. To the world at large it is a symbol of God, truth, sex, and a host of other half-articulated hopes and fears.

This handsome book seeks to explain how wonder and the primitive mind have endowed the eye with such special properties. To some extent it is a guided tour through the labyrinth of prehistoric artefacts and records, and through the folklore of yesterday and today, with the interpretations of the Jungian analyst always in the wings.

In that dark jungle of ancient (and modern) mysteries we could soon become lost and dispirited. But the book is primarily about the eye as it is depicted (and the illustrations are both excellent and voluminous). It is about the associated patterns of symbolism rather than about anthropology or psychiatry; and although sex lurks throughout the panorama it provides is exhilarating.

P. D. TREVOR-ROPER

**Progress in Clinical and Biological Research.** Vol. 82. **Clinical, Structural, and Biochemical Advances in Hereditary Eye Disorders.** Ed. DONNA L. DAENTL. Pp. 172. £25.90. Alan R. Liss: New York. 1982.

Recent advances in clinical genetics have resulted in a number of symposia being dedicated to particular specialties. This is the report of such a symposium of the Society of Craniofacial Genetics, and it covers a number of topics of interest to ophthalmologists.

The first 3 papers are concerned with various aspects of ocular development in birds and in man. The importance of neural crest cells in the development of ocular tissues, supplanting mesoderm as the major mesenchymal component, is an important advance in our understanding of this topic, as is the contribution of the extracellular matrix, which influences the migration of these cells. The material in these papers is not easy for ophthalmologists to find elsewhere and for those interested in these aspects of the subject is useful reading.

These are followed by several short reviews on connective tissue diseases, macular corneal dystrophy, conjunctival biopsy in lysosomal disorders, and gyrate atrophy. Each is succinct, up to date, and easy to read, available elsewhere