but conveniently placed in this volume. The last contribution is a genetic survey of a large population with retinitis pigmentosa. It is difficult for the average reader but useful for those concerned with the management of patients with one of this group of disorders.

Reports of proceedings are notoriously patchy; this is no exception. It is useful to have this material in one place, yet no one will find every paper of interest. To the reviewer the most important papers were the first 2, and these could easily be overlooked by the majority of ophthalmologists. This is a book for the library, one to dip into if one is an established ophthalmologist, but one to read carefully if one is in training.

BARRIE JAY

A Colour Atlas of Contact Lenses. By MONTAGUE RUBEN. Pp. 151. £25·00. Wolfe Medical Publications: London. 1982.

This is an excellent and much needed book to supplement the available contact lens textbooks which for economic reasons often have only a few colour photographs. There is a good blend of tables, diagrams, photographs, and descriptive text. The colour reproduction and detail are very good indeed. Fitting procedures for hard, soft, and scleral lenses are covered, and there is a section on cosmetic contact lenses. There is a large section on clinical cases, which includes therapeutic cases, and on adverse reactions to contact lens wear. There are just over 460 photographs, and 140 tables, diagrams, and drawings. This is a book which should be in every ophthalmic library.

MICHAEL S. WILSON

Lens Implantation: 30 Years of Progress. By P. LEONARD and J. ROMMEL. Pp. 600. Dfl. 240·000. Junk: The Hague. 1982.

In the late 1970s the Belgian Ophthalmological Society gave the 2 co-authors the assignment of constructing a report on the evolution and the current concepts of lens implantation and the rehabilitation of the cataract patient. Their book very truly records 30 years of progress in lens implantation.

The first chapter gives an interesting history of the lens implant, starting with Tading in 1766, and the first recorded actual lens implant being carried out by Casaamata in 1797. Respect is given to Harold Ridley for the introduction of modern lens implantation some 30 years ago with the standard posterior chamber implant of +24 DS made of fully polymerised methylmethacrylate (Transpex, ICI). It measured 8·32 mm in diameter and 2·40 mm in thickness. The weight in air was 112 mg. The immediate drawbacks were the high incidence of dislocation, iris atrophy, and glaucoma. The implant had to be extracted in some 15% of the cases. Undoubtedly; as was observed by J. Pearce, who was the first to reapply the concept of posterior chamber implantation, a less bulky lens, routine use of the operating microscope, precise handling of the posterior capsule, and watertight wound closing with modern suturing techniques would have given far better results than those achieved with the Ridley lens. A very comprehensive review of the history of the anterior chamber lens is given followed by a review of iris-diaphragm-supported lenses introduced by E. Epstein and C. D. Binkhorst.

There are 3 excellent chapters on the classic modern lens design, the materials, manufacturing optics, and sterilisation of intraocular lenses. In the section on lens materials a very full account is given of the chemical formulae and production methods of polymethylmethacrylate. A whole chapter is devoted to pre-, per-, and postoperative management of the patient requiring a cataract extraction and lens implant.

Some 200 pages are devoted to a review of the various styles of currently available lenses, divided into sections on the iris supported lenses, iridocapsular and capsular supported lenses, and angle supported lenses. Each individual lens in one of these 3 divisions is analysed, with an introduction, description of implantation technique, survey of early results, recent studies, and conclusions. At present in the USA some 38% of implants are angle supported, 32% are iris supported or iridocapsular supported, and 30% are totally posterior chamber implants. While the percentage of angle supported lenses is expected to remain constant, the percentage of iris supported and iridocapsular lenses is continually dropping, while that of the posterior chamber implants is increasing. It has been forecast that within 10 years in the USA only 4% of implants will be iris supported. In view of these statistics it is perhaps unfortunate that, while 125 pages are devoted to iris supported and iridocapsular lenses, only 24 pages deal exclusively with the posterior chamber implant. To make amends there are 55 excellent pages on angle supported lenses.

Comparative studies are given by surgeons including, Worst, Hirschman, Jaffe, Shepard, Snider, McRaynolds, Kratz *et al.* A chapter is included on secondary implantation which concludes on a cautionary note that it should be considered only when visual rehabilitation is very important. Extracapsular aphakia undoubtedly involves the least amount of risk for the eye with secondary implantation, and it may be considered for various types of lenses. With intracapsular aphakia iris supported lenses are not indicated because of their lack of long-term stability. For these cases lenses such as Choyce's, that rely on angle support, have proved to be superior.

Lens implantation in children is very fully reviewed, with an analysis of results and complications. A section is included on the more recent advances in specular microscopy of the corneal endothelium. The book concludes with a chapter on guidelines for the surgeon, and then a full section on the postoperative complications of uveitis, glaucoma, cystoid macula oedema, and retinal detachment.

Much work and great care must have been taken in compiling this book, which is excellent for reference and study. These are aided by a very complete index and bibliography.

ERIC J. ARNOTT