and chiasmal lesions, meningiomas, with is of discussion tumours in the problem perusal of 15 pages! This is and admire his conditions.

John Elston

Walsh and Hoyt’s Clinical Neuro-Ophthal-


The third edition of this famous textbook comprised three volumes and contained for most readers all currently available knowledge.

The third volume of the 4th edition has now appeared, and we are promised two further volumes on oculomotor and diencephalic syndrome, trauma, and infectious diseases. Thus our first consideration must be to congratulate the author and admire his ability to gather and display so much knowledge.

The third volume considers tumours of the eye, the orbit, and the brain and related conditions. The first chapter describes the symptomatology of tumours in different sites, and though 90 pages in length there is a bibliography of 15 pages! This is followed by tumours of neuroectodermal origin with a full discussion of the recent state of the art regarding chiasmal and optic nerve gliomas. This is followed by another excellent chapter on meningiomas, with particular emphasis on lesions affecting the anterior visual system. It is sad in some ways that the author has decided to omit to a great extent the use of CT scanning and magnetic resonance imaging in the illustrations, as these tests now play such a vital role in diagnosis and management. Pituitary tumours and cranioopharyngiomas are covered in greater depth than in the second edition, but more work is needed on the role of the endocrine system in tumour growth. The most useful part of the book is the excellent review of the surgical techniques for the removal of tumours. Some of the best illustrated chapters follow, with clinical and numerous pathological illustrations of tumours and vascular anomalies involving the orbit. An interesting chapter well worth perusal which in the hands of a retinal surgeon could be of great help in the treatment of retinoblastoma is that on the role of adjuvant chemotherapy in the treatment of chemoresistant tumours. Finally a favourite with all interested in the medical and paediatric aspects of ophthalmology is a chapter on the phakoma-

toses. Many will see for the first time a photograph of the leaf of the mountain ash which provides such a characteristic diagnostic sign for tuberous sclerosis.

One could make minor comments about this being an encyclopaedia, with numerous facts and an extensive review of the literature, rather than a critical and advisory clinical textbook. However, this would be to belittle our great gratitude to the author for providing such an outstanding volume for the reader to savour. A worthy successor has therefore been found to maintain and enhance the reputation established by Walsh, and then Walsh and Hoyt. This volume deserves a place on every library bookshelf and I am sure many individual libraries.

Michael Sanders


This small book contains 200 multiple choice questions in ophthalmology arranged in five sections to cover introductory anatomy and physiology, medical and surgical ophthalmology, and blindness. Each question has a stem and five options, so that altogether there are 1000 individual questions and answers. The book is arranged so that questions appear on one page and answers on the following page. In many instances only an indication of whether the statement was true or false is given, but for about half of the questions a brief explanatory note is included to indicate why the answer should be true or false.

The book is intended for undergraduate use, but the standard is probably a little high for the average undergraduate, and the book might be of use to the postgraduate starting ophthalmology. For the undergraduate to read through the questions and answers would certainly be educative, and I am sure would prove helpful in preparation for an MCQ examination in ophthalmology.

The authors have successfully avoided ambiguity in the questions, though here and there one question or part of a question, the common mistake of having options which are not entirely independent of each other occurs. This is, however, a minor criticism of a useful booklet which is good value at the price.

Wallace S Foulds


This book gives a summary of the Third General Assembly of the International Agency for Prevention of Blindness held in New Delhi 1986. It looks back to what has been achieved over the previous decade in the prevention of blindness while stressing the challenge of the future, with an estimated 30 million people in the world suffering from blindness, of which 80% is preventable.

The main blinding diseases, cataract, trachoma, onchocerciasis, and xerophthalmia, are discussed and further attention is paid to the particular issue of cataract blindness and the possible misuse of manpower and resources is called for. There is a useful section on the activities of the IAPB in different parts of the world, as well as a chapter summarising the work of the World Health Organisation and non-governmental organisations.

This book draws attention to the problem of world blindness in brief and easily readable form. It will be useful reading for all ophthalmologists concerned with blindness throughout the world, as well as being valuable to health policy makers, public health specialists, and managers involved in community health.

A Foster


In the second edition of his excellent book on the surgery of retinal detachment Mr Chignell expands on the original theme of the first edition in presenting a personal account of an approach to retinal detachment surgery. His target is the general ophthalmologist who is engaged in anterior segment and other ophthalmic practice and who is called upon to do retinal detachment surgery from time to time. Since this represents the vast majority of those who carry out this kind of surgery on a worldwide basis the book fulfils its purpose admirably.

The chapters are logically arranged. Chapter 1 covers pathogenesis, causes, and methods of examination. succeeding chapters cover preoperative examination, management, and planning, and finally postoperative management, complications, and future. By far the largest are the chapters on postoperative examination and preparation. There is reference to more complex problems, but quite rightly there is no description of vitrectomy technique, implying that this area is for the vitreoretinal specialist. For the same reason Mr Chignell has not been forgiven for giving two lines only to a mention of silicone oil. The interesting flow chart for the treatment of proliferative vitreoretinopathy emphasises the role of vitrectomy in the treatment of all stages of this complication under certain conditions but does not recognise the use of silicone in the treatment of late stage disease in the hands of very many vitreoretinal surgeons throughout the world.

The text reveals that Mr Chignell has spent many years working with retinal detachment, and that is written based on his working practices. The general ophthalmologist will find much that is of practical value on every page of this book, and this should greatly in avoiding the problems which, as the preface to the second edition states, may be lead to simple cases being turned into difficult ones as a result of faulty primary techniques.

This book is not intended to be a comprehensive treatise on the many ways in which retinal detachment might be treated. The enthusiastic retinal specialist might wish to see mention of such things as Lincoff balloons world blindness in brief, which are given too little place in the context of retinal detachment treated by general ophthalmic surgeons, and the text concentrates on the role of surgery in the management and complication and failure and improves results.

The book is extensively illustrated by line drawings, photographs and by the legendary fundus paintings of Terry Tarrant. The references are confined to those which go back some years, a fact that indicates how little has been written of any practical value on the subject of retinal detachment in more recent times. Mr Chignell’s new edition of this book fills a very